



HEALTH QUARTERLY STATEMENT
AS OF JUNE 30, 2024
OF THE CONDITION AND AFFAIRS OF THE
Aetna Better Health Inc. (an Ohio corporation)

| | | | | | | |
|--|---|-----------------|-------------------|---|----------------------|------------|
| NAIC Group Code | 0001 (Current) | 0001 (Prior) | NAIC Company Code | 14229 | Employer's ID Number | 45-2764938 |
| Organized under the Laws of | Ohio | | | State of Domicile or Port of Entry | OH | |
| Country of Domicile | United States of America | | | | | |
| Licensed as business type: | Health Maintenance Organization | | | | | |
| Is HMO Federally Qualified? Yes [] No [X] | | | | | | |
| Incorporated/Organized | 07/15/2011 | | | Commenced Business | 03/16/2012 | |
| Statutory Home Office | 7400 W. Campus Road (Street and Number) | | | New Albany, OH, US 43054 (City or Town, State, Country and Zip Code) | | |
| Main Administrative Office | 7400 W. Campus Road (Street and Number) | | | New Albany, OH, US 46054 (City or Town, State, Country and Zip Code) | | |
| | | | | 800-872-3862 (Area Code) (Telephone Number) | | |
| Mail Address | Attn: Stat Compliance; P.O. Box 818048 (Street and Number or P.O. Box) | | | Cleveland, OH, US 44181-8048 (City or Town, State, Country and Zip Code) | | |
| Primary Location of Books and Records | 7400 W. Campus Road (Street and Number) | | | New Albany, OH, US 43054 (City or Town, State, Country and Zip Code) | | |
| | | | | 800-872-3862 (Area Code) (Telephone Number) | | |
| Internet Website Address | www.aetnabetterhealth.com | | | | | |
| Statutory Statement Contact | Kim E. Roth (Name) | | | 215-775-6508 (Area Code) (Telephone Number) | | |
| | StatutoryReporting@aetna.com (E-mail Address) | | | 860-262-7767 (FAX Number) | | |

OFFICERS

| | | | |
|---------------------------------------|-----------------------|--|----------------------|
| Chief Executive Officer and President | Terry Jason Smith | Principal Financial Officer and Controller | Steven Matthew Conte |
| Vice President and Secretary | Thorne Washburn Clark | | |

OTHER

| | | |
|--|--|---|
| Derek Scott Blunt, Senior Investment Officer | Aaron Jacob Igdalsky, Vice President and Assistant Secretary | Peter Keller, Assistant Controller |
| Bryan Sheppard Nazworth, Chief Financial Officer | Tracy Louise Smith, Vice President and Treasurer | Bradley Andrew Thompson, Assistant Controller |
| | Whitney Dorothy Todisco, Assistant Controller | |

DIRECTORS OR TRUSTEES

| | | |
|-------------------------|------------------|-------------------|
| Bryan Sheppard Nazworth | Sonya Kay Nelson | Terry Jason Smith |
|-------------------------|------------------|-------------------|

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


Terry Jason Smith
Chief Executive Officer and President

Thorne Washburn Clark
Vice President and Secretary

Steven Matthew Conte
Principal Financial Officer and Controller

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

State of..... Pennsylvania
County of..... Montgomery

State of..... Pennsylvania
County of..... Montgomery

Subscribed and sworn to before me this
20th day of June, 2024

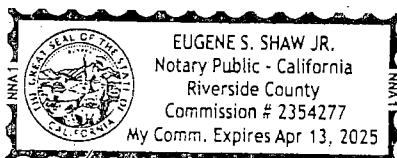
Subscribed and sworn to before me this
____ day of _____, 2024

Subscribed and sworn to before me this
____ day of August, 2024

NOTARY PUBLIC (Seal)

NOTARY PUBLIC (Seal)

NOTARY PUBLIC (Seal)



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



HEALTH QUARTERLY STATEMENT
AS OF JUNE 30, 2024
OF THE CONDITION AND AFFAIRS OF THE
Aetna Better Health Inc. (an Ohio corporation)

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

Organized under the Laws of Ohio State of Domicile or Port of Entry OH

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

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

Incorporated/Organized 07/15/2011 Commenced Business 03/16/2012

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

Main Administrative Office 7400 W. Campus Road
(Street and Number)
New Albany, OH, US 46054 800-872-3862
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address Attn: Stat Compliance; P.O. Box 818048 Cleveland, OH, US 44181-8048
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Internet Website Address www.aetnabetterhealth.com

Statutory Statement Contact Kim E. Roth 215-775-6508
(Name) (Area Code) (Telephone Number)
StatutoryReporting@aetna.com 860-262-7767
(E-mail Address) (FAX Number)

OFFICERS

Chief Executive Officer and President Terry Jason Smith Principal Financial Officer and Controller Steven Matthew Conte
Vice President and Secretary Thorne Washburn Clark

OTHER

Derek Scott Blunt, Senior Investment Officer Aaron Jacob Igdalsky, Vice President and Assistant Secretary Peter Keller, Assistant Controller
Bryan Sheppard Nazworth, Chief Financial Officer Tracy Louise Smith, Vice President and Treasurer Bradley Andrew Thompson, Assistant Controller
Whitney Dorothy Todisco, Assistant Controller

DIRECTORS OR TRUSTEES

Bryan Sheppard Nazworth Sonya Kay Nelson Terry Jason Smith

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

Terry Jason Smith
Chief Executive Officer and President

Thorne Washburn Clark
Vice President and Secretary

Steven Matthew Conte
Principal Financial Officer and Controller

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

State of..... Pennsylvania
County of..... Montgomery

State of..... Pennsylvania
County of..... Montgomery

Subscribed and sworn to before me this
____ day of _____, 2024

Subscribed and sworn to before me this
19th day of July, 2024

Subscribed and sworn to before me this
15th day of August, 2024

NOTARY PUBLIC (Seal)

NOTARY PUBLIC (Seal)

NOTARY PUBLIC (Seal)

Commonwealth of Pennsylvania - Notary Seal
KIM E. ROTH, Notary Public
Montgomery County
My Commission Expires April 25, 2025
Commission Number 1141410

Commonwealth of Pennsylvania - Notary Seal
KIM E. ROTH, Notary Public
Montgomery County
My Commission Expires April 25, 2025
Commission Number 1141410

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

ASSETS

| | Current Statement Date | | | 4 December 31 Prior Year Net Admitted Assets |
|---|------------------------|-------------------------|---|---|
| | 1 Assets | 2 Nonadmitted Assets | 3 Net Admitted Assets (Cols. 1 - 2) | |
| 1. Bonds | 185,241,820 | 0 | 185,241,820 | 203,542,612 |
| 2. Stocks: | | | | |
| 2.1 Preferred stocks | 0 | 0 | 0 | 0 |
| 2.2 Common stocks | 0 | 0 | 0 | 0 |
| 3. Mortgage loans on real estate: | | | | |
| 3.1 First liens | 2,473,800 | 0 | 2,473,800 | 2,810,388 |
| 3.2 Other than first liens..... | 0 | 0 | 0 | 0 |
| 4. Real estate: | | | | |
| 4.1 Properties occupied by the company (less \$ | | | | |
| encumbrances) | 0 | 0 | 0 | 0 |
| 4.2 Properties held for the production of income (less | | | | |
| \$ encumbrances) | 0 | 0 | 0 | 0 |
| 4.3 Properties held for sale (less \$ | | | | |
| encumbrances) | 0 | 0 | 0 | 0 |
| 5. Cash (\$6,202,415), cash equivalents | | | | |
| (\$ 141,961,964) and short-term | | | | |
| investments (\$) | 148,164,379 | 0 | 148,164,379 | 65,486,829 |
| 6. Contract loans (including \$ premium notes) | 0 | 0 | 0 | 0 |
| 7. Derivatives | 0 | 0 | 0 | 0 |
| 8. Other invested assets | 27,553,243 | 0 | 27,553,243 | 26,115,981 |
| 9. Receivables for securities | 3,750 | 0 | 3,750 | 9,375 |
| 10. Securities lending reinvested collateral assets | 0 | 0 | 0 | 0 |
| 11. Aggregate write-ins for invested assets | 0 | 0 | 0 | 0 |
| 12. Subtotals, cash and invested assets (Lines 1 to 11) | 363,436,992 | 0 | 363,436,992 | 297,965,185 |
| 13. Title plants less \$ charged off (for Title insurers | | | | |
| only) | 0 | 0 | 0 | 0 |
| 14. Investment income due and accrued | 1,980,909 | 0 | 1,980,909 | 1,889,581 |
| 15. Premiums and considerations: | | | | |
| 15.1 Uncollected premiums and agents' balances in the course of collection | 66,673,481 | 0 | 66,673,481 | 60,185,141 |
| 15.2 Deferred premiums, agents' balances and installments booked but | | | | |
| deferred and not yet due (including \$ | | | | |
| earned but unbilled premiums) | 0 | 0 | 0 | 0 |
| 15.3 Accrued retrospective premiums (\$5,453,993) and | | | | |
| contracts subject to redetermination (\$ 118,010,840) | 123,464,833 | 0 | 123,464,833 | 114,992,331 |
| 16. Reinsurance: | | | | |
| 16.1 Amounts recoverable from reinsurers | 0 | 0 | 0 | 0 |
| 16.2 Funds held by or deposited with reinsured companies | 0 | 0 | 0 | 0 |
| 16.3 Other amounts receivable under reinsurance contracts | 0 | 0 | 0 | 0 |
| 17. Amounts receivable relating to uninsured plans | 11,637,697 | 0 | 11,637,697 | 19,611,069 |
| 18.1 Current federal and foreign income tax recoverable and interest thereon | 1,483,396 | 0 | 1,483,396 | 9,395,558 |
| 18.2 Net deferred tax asset | 4,713,031 | 0 | 4,713,031 | 4,713,031 |
| 19. Guaranty funds receivable or on deposit | 0 | 0 | 0 | 0 |
| 20. Electronic data processing equipment and software | 0 | 0 | 0 | 0 |
| 21. Furniture and equipment, including health care delivery assets | | | | |
| (\$) | 0 | 0 | 0 | 0 |
| 22. Net adjustment in assets and liabilities due to foreign exchange rates | 0 | 0 | 0 | 0 |
| 23. Receivables from parent, subsidiaries and affiliates | 0 | 0 | 0 | 0 |
| 24. Health care (\$2,999,295) and other amounts receivable | 8,514,980 | 5,515,685 | 2,999,295 | 3,569,721 |
| 25. Aggregate write-ins for other than invested assets | 2,371,599 | 2,106,395 | 265,204 | 1,213,015 |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and | | | | |
| Protected Cell Accounts (Lines 12 to 25) | 584,276,918 | 7,622,080 | 576,654,838 | 513,534,632 |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell | | | | |
| Accounts | 0 | 0 | 0 | 0 |
| 28. Total (Lines 26 and 27) | 584,276,918 | 7,622,080 | 576,654,838 | 513,534,632 |
| DETAILS OF WRITE-INS | | | | |
| 1101. | | | | |
| 1102. | | | | |
| 1103. | | | | |
| 1198. Summary of remaining write-ins for Line 11 from overflow page | 0 | 0 | 0 | 0 |
| 1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above) | 0 | 0 | 0 | 0 |
| 2501. Prepaid expenses | 2,106,395 | 2,106,395 | 0 | 0 |
| 2502. State taxes receivable | 265,204 | 0 | 265,204 | 1,213,015 |
| 2503. | | | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | 0 | 0 | 0 | 0 |
| 2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above) | 2,371,599 | 2,106,395 | 265,204 | 1,213,015 |

LIABILITIES, CAPITAL AND SURPLUS

| | Current Period | | | Prior Year |
|--|----------------|----------------|-------------|-------------|
| | 1 Covered | 2 Uncovered | 3 Total | 4 Total |
| 1. Claims unpaid (less \$ reinsurance ceded) | 234,089,233 | 24,897,456 | 258,986,689 | 248,136,610 |
| 2. Accrued medical incentive pool and bonus amounts | 2,167,718 | 0 | 2,167,718 | 2,100,281 |
| 3. Unpaid claims adjustment expenses | 6,150,903 | 0 | 6,150,903 | 7,184,367 |
| 4. Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act | 13,180,713 | 0 | 13,180,713 | 13,001,868 |
| 5. Aggregate life policy reserves | 0 | 0 | 0 | 0 |
| 6. Property/casualty unearned premium reserve | 0 | 0 | 0 | 0 |
| 7. Aggregate health claim reserves | 0 | 0 | 0 | 0 |
| 8. Premiums received in advance | 0 | 0 | 0 | 70,769 |
| 9. General expenses due or accrued | 6,686,709 | 0 | 6,686,709 | 10,353,350 |
| 10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses)) | 0 | 0 | 0 | 0 |
| 10.2 Net deferred tax liability | 0 | 0 | 0 | 0 |
| 11. Ceded reinsurance premiums payable | 0 | 0 | 0 | 0 |
| 12. Amounts withheld or retained for the account of others..... | 0 | 0 | 0 | 0 |
| 13. Remittances and items not allocated | 906,458 | 0 | 906,458 | 1,350,937 |
| 14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current) | 0 | 0 | 0 | 0 |
| 15. Amounts due to parent, subsidiaries and affiliates | 110,580,858 | 0 | 110,580,858 | 83,494,121 |
| 16. Derivatives | 0 | 0 | 0 | 0 |
| 17. Payable for securities | 2,000,000 | 0 | 2,000,000 | 0 |
| 18. Payable for securities lending | 0 | 0 | 0 | 0 |
| 19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers)..... | 0 | 0 | 0 | 0 |
| 20. Reinsurance in unauthorized and certified (\$) companies | 0 | 0 | 0 | 0 |
| 21. Net adjustments in assets and liabilities due to foreign exchange rates | 0 | 0 | 0 | 0 |
| 22. Liability for amounts held under uninsured plans | 827,770 | 0 | 827,770 | 65,817 |
| 23. Aggregate write-ins for other liabilities (including \$ current) | 1,754,644 | 0 | 1,754,644 | 1,336,821 |
| 24. Total liabilities (Lines 1 to 23) | 378,345,006 | 24,897,456 | 403,242,462 | 367,094,941 |
| 25. Aggregate write-ins for special surplus funds | XXX | XXX | 0 | 0 |
| 26. Common capital stock | XXX | XXX | 1 | 1 |
| 27. Preferred capital stock | XXX | XXX | 0 | 0 |
| 28. Gross paid in and contributed surplus | XXX | XXX | 142,200,952 | 115,700,952 |
| 29. Surplus notes | XXX | XXX | 0 | |
| 30. Aggregate write-ins for other than special surplus funds | XXX | XXX | 0 | 0 |
| 31. Unassigned funds (surplus) | XXX | XXX | 31,211,423 | 30,738,738 |
| 32. Less treasury stock, at cost: | | | | |
| 32.1 shares common (value included in Line 26 \$) | XXX | XXX | 0 | |
| 32.2 shares preferred (value included in Line 27 \$) | XXX | XXX | 0 | |
| 33. Total capital and surplus (Lines 25 to 31 minus Line 32) | XXX | XXX | 173,412,376 | 146,439,691 |
| 34. Total liabilities, capital and surplus (Lines 24 and 33) | XXX | XXX | 576,654,838 | 513,534,632 |
| DETAILS OF WRITE-INS | | | | |
| 2301. Escheat payable | 1,754,644 | 0 | 1,754,644 | 1,336,821 |
| 2302. | | | | |
| 2303. | | | | |
| 2398. Summary of remaining write-ins for Line 23 from overflow page | 0 | 0 | 0 | 0 |
| 2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above) | 1,754,644 | 0 | 1,754,644 | 1,336,821 |
| 2501. | XXX | XXX | | |
| 2502. | XXX | XXX | | |
| 2503. | XXX | XXX | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | XXX | XXX | 0 | 0 |
| 2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above) | XXX | XXX | 0 | 0 |
| 3001. | XXX | XXX | | |
| 3002. | XXX | XXX | | |
| 3003. | XXX | XXX | | |
| 3098. Summary of remaining write-ins for Line 30 from overflow page | XXX | XXX | 0 | 0 |
| 3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above) | XXX | XXX | 0 | 0 |

STATEMENT OF REVENUE AND EXPENSES

| | Current Year To Date | | Prior Year To Date | Prior Year Ended December 31 |
|--|-------------------------|-------------|-----------------------|---------------------------------|
| | 1 Uncovered | 2 Total | 3 Total | 4 Total |
| 1. Member Months | XXX | 375,120 | 288,873 | 622,172 |
| 2. Net premium income (including \$ non-health premium income)..... | XXX | 884,984,498 | 678,766,142 | 1,416,411,850 |
| 3. Change in unearned premium reserves and reserve for rate credits..... | XXX | 8,222,378 | 36,739,145 | 83,567,639 |
| 4. Fee-for-service (net of \$ medical expenses) | XXX | 0 | 0 | 0 |
| 5. Risk revenue | XXX | 0 | | 0 |
| 6. Aggregate write-ins for other health care related revenues | XXX | 0 | 0 | 0 |
| 7. Aggregate write-ins for other non-health revenues | XXX | 0 | 0 | 0 |
| 8. Total revenues (Lines 2 to 7) | XXX | 893,206,876 | 715,505,287 | 1,499,979,489 |
| Hospital and Medical: | | | | |
| 9. Hospital/medical benefits | 48,572,649 | 492,067,456 | 362,799,042 | 850,834,955 |
| 10. Other professional services | 27,214,577 | 275,698,526 | 218,717,456 | 408,328,549 |
| 11. Outside referrals | 20,283,467 | 20,283,467 | 15,478,774 | 38,416,884 |
| 12. Emergency room and out-of-area | 678,313 | 6,871,677 | 8,442,696 | 14,786,950 |
| 13. Prescription drugs | 0 | 17,283,257 | 16,693,902 | 31,697,074 |
| 14. Aggregate write-ins for other hospital and medical | 0 | 0 | 0 | 0 |
| 15. Incentive pool, withhold adjustments and bonus amounts | 0 | 1,332,800 | 694,136 | 1,583,827 |
| 16. Subtotal (Lines 9 to 15) | 96,749,006 | 813,537,183 | 622,826,006 | 1,345,648,239 |
| Less: | | | | |
| 17. Net reinsurance recoveries | 0 | 167,854 | 0 | |
| 18. Total hospital and medical (Lines 16 minus 17) | 96,749,006 | 813,369,329 | 622,826,006 | 1,345,648,239 |
| 19. Non-health claims (net) | 0 | 0 | 0 | |
| 20. Claims adjustment expenses, including \$ 41,993,985 cost containment expenses | 0 | 51,174,154 | 23,373,373 | 65,579,255 |
| 21. General administrative expenses | 0 | 37,169,711 | 43,738,716 | 100,313,381 |
| 22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only) . | 0 | 0 | 0 | 0 |
| 23. Total underwriting deductions (Lines 18 through 22)..... | 96,749,006 | 901,713,194 | 689,938,095 | 1,511,540,875 |
| 24. Net underwriting gain or (loss) (Lines 8 minus 23) | XXX | (8,506,318) | 25,567,192 | (11,561,386) |
| 25. Net investment income earned | 0 | 7,849,725 | 6,745,825 | 13,677,278 |
| 26. Net realized capital gains (losses) less capital gains tax of \$(300,200) | 0 | (1,410,758) | (842,692) | (3,798,023) |
| 27. Net investment gains (losses) (Lines 25 plus 26) | 0 | 6,438,967 | 5,903,133 | 9,879,255 |
| 28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$)]..... | 0 | 0 | 0 | |
| 29. Aggregate write-ins for other income or expenses | 0 | (34,550) | (229,461) | 34,049 |
| 30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) | XXX | (2,101,901) | 31,240,864 | (1,648,082) |
| 31. Federal and foreign income taxes incurred | XXX | (1,679,747) | 7,592,151 | (1,339,586) |
| 32. Net income (loss) (Lines 30 minus 31) | XXX | (422,154) | 23,648,713 | (308,496) |
| DETAILS OF WRITE-INS | | | | |
| 0601. | XXX | | | |
| 0602. | XXX | | | |
| 0603. | XXX | | | |
| 0698. Summary of remaining write-ins for Line 6 from overflow page | XXX | 0 | 0 | 0 |
| 0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above) | XXX | 0 | 0 | 0 |
| 0701. | XXX | | | |
| 0702. | XXX | | | |
| 0703. | XXX | | | |
| 0798. Summary of remaining write-ins for Line 7 from overflow page | XXX | 0 | 0 | 0 |
| 0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above) | XXX | 0 | 0 | 0 |
| 1401. | | | | |
| 1402. | | | | |
| 1403. | | | | |
| 1498. Summary of remaining write-ins for Line 14 from overflow page | 0 | 0 | 0 | 0 |
| 1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) | 0 | 0 | 0 | 0 |
| 2901. Regulatory fines | | (34,550) | (229,461) | 34,049 |
| 2902. | | | | |
| 2903. | | | | |
| 2998. Summary of remaining write-ins for Line 29 from overflow page | 0 | 0 | 0 | 0 |
| 2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above) | 0 | (34,550) | (229,461) | 34,049 |

STATEMENT OF REVENUE AND EXPENSES (Continued)

| | 1 Current Year to Date | 2 Prior Year to Date | 3 Prior Year Ended December 31 |
|---|------------------------------|----------------------------|--------------------------------------|
| CAPITAL AND SURPLUS ACCOUNT | | | |
| 33. Capital and surplus prior reporting year..... | 146,439,693 | 169,572,610 | 169,572,610 |
| 34. Net income or (loss) from Line 32 | (422,154) | 23,648,713 | (308,496) |
| 35. Change in valuation basis of aggregate policy and claim reserves | 0 | | |
| 36. Change in net unrealized capital gains (losses) less capital gains tax of \$0 | 0 | | |
| 37. Change in net unrealized foreign exchange capital gain or (loss) | 0 | | |
| 38. Change in net deferred income tax | 0 | 1,244,604 | 479,635 |
| 39. Change in nonadmitted assets | 894,837 | 653,975 | 1,695,944 |
| 40. Change in unauthorized and certified reinsurance | 0 | 0 | 0 |
| 41. Change in treasury stock | 0 | 0 | 0 |
| 42. Change in surplus notes | 0 | 0 | 0 |
| 43. Cumulative effect of changes in accounting principles..... | 0 | | |
| 44. Capital Changes: | | | |
| 44.1 Paid in | 0 | | 0 |
| 44.2 Transferred from surplus (Stock Dividend)..... | 0 | 0 | 0 |
| 44.3 Transferred to surplus..... | 0 | | |
| 45. Surplus adjustments: | | | |
| 45.1 Paid in | 26,500,000 | 0 | 0 |
| 45.2 Transferred to capital (Stock Dividend) | 0 | | |
| 45.3 Transferred from capital | 0 | | |
| 46. Dividends to stockholders | 0 | (25,000,000) | (25,000,000) |
| 47. Aggregate write-ins for gains or (losses) in surplus | 0 | 0 | 0 |
| 48. Net change in capital & surplus (Lines 34 to 47) | 26,972,683 | 547,292 | (23,132,917) |
| 49. Capital and surplus end of reporting period (Line 33 plus 48) | 173,412,376 | 170,119,902 | 146,439,693 |
| DETAILS OF WRITE-INS | | | |
| 4701. | | | |
| 4702. | | | |
| 4703. | | | |
| 4798. Summary of remaining write-ins for Line 47 from overflow page | 0 | 0 | 0 |
| 4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above) | 0 | 0 | 0 |

CASH FLOW

| | 1 Current Year To Date | 2 Prior Year To Date | 3 Prior Year Ended December 31 |
|---|------------------------------|----------------------------|--------------------------------------|
| Cash from Operations | | | |
| 1. Premiums collected net of reinsurance | 878,354,110 | 702,164,867 | 1,394,448,632 |
| 2. Net investment income | 6,437,331 | 6,372,404 | 12,645,517 |
| 3. Miscellaneous income | 0 | 0 | 0 |
| 4. Total (Lines 1 to 3) | 884,791,441 | 708,537,271 | 1,407,094,149 |
| 5. Benefit and loss related payments | 801,140,432 | 604,794,231 | 1,272,366,359 |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | |
| 7. Commissions, expenses paid and aggregate write-ins for deductions | 83,241,502 | 40,437,910 | 148,080,186 |
| 8. Dividends paid to policyholders | | | |
| 9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses) | (9,892,109) | 1,213,256 | 1,825,313 |
| 10. Total (Lines 5 through 9) | 874,489,825 | 646,445,397 | 1,422,271,858 |
| 11. Net cash from operations (Line 4 minus Line 10) | 10,301,616 | 62,091,874 | (15,177,709) |
| Cash from Investments | | | |
| 12. Proceeds from investments sold, matured or repaid: | | | |
| 12.1 Bonds | 59,597,127 | 24,020,287 | 67,354,433 |
| 12.2 Stocks | 0 | 0 | 0 |
| 12.3 Mortgage loans | 340,319 | 323,252 | 654,927 |
| 12.4 Real estate | 0 | 0 | 0 |
| 12.5 Other invested assets | 0 | 0 | 0 |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments | (111) | (131) | (101) |
| 12.7 Miscellaneous proceeds | 2,005,625 | 9,375 | 0 |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7) | 61,942,960 | 24,352,783 | 68,009,259 |
| 13. Cost of investments acquired (long-term only): | | | |
| 13.1 Bonds | 43,127,110 | 33,550,716 | 45,608,662 |
| 13.2 Stocks | 0 | 0 | 0 |
| 13.3 Mortgage loans | 0 | 0 | 0 |
| 13.4 Real estate | 0 | 0 | 0 |
| 13.5 Other invested assets | 0 | 0 | 0 |
| 13.6 Miscellaneous applications | 0 | 4,294,042 | 4,981,528 |
| 13.7 Total investments acquired (Lines 13.1 to 13.6) | 43,127,110 | 37,844,758 | 50,590,190 |
| 14. Net increase (or decrease) in contract loans and premium notes | 0 | 0 | 0 |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) | 18,815,850 | (13,491,975) | 17,419,069 |
| Cash from Financing and Miscellaneous Sources | | | |
| 16. Cash provided (applied): | | | |
| 16.1 Surplus notes, capital notes | 0 | 0 | 0 |
| 16.2 Capital and paid in surplus, less treasury stock | 26,500,000 | 0 | 0 |
| 16.3 Borrowed funds | 0 | 0 | 0 |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities | 0 | 0 | 0 |
| 16.5 Dividends to stockholders | 0 | 25,000,000 | 25,000,000 |
| 16.6 Other cash provided (applied) | 27,060,082 | 15,146,881 | 28,268,368 |
| 17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) | 53,560,082 | (9,853,119) | 3,268,368 |
| RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS | | | |
| 18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) . | 82,677,548 | 38,746,780 | 5,509,728 |
| 19. Cash, cash equivalents and short-term investments: | | | |
| 19.1 Beginning of year | 65,486,831 | 59,977,103 | 59,977,103 |
| 19.2 End of period (Line 18 plus Line 19.1) | 148,164,379 | 98,723,883 | 65,486,831 |

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

| | | | |
|--|-----------|-----------|-----------|
| 20.0001. Non-Cash Investment Exchanges | 1,000,000 | 4,483,062 | 6,323,652 |
|--|-----------|-----------|-----------|

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

| | 1 | Comprehensive (Hospital & Medical) | | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
|--|-------------|---------------------------------------|-------|------------------------|-------------|-------------|---|-------------------------|-----------------------|------------|----------------------|-------------------|--------------|---------------------|
| | | 2 | 3 | | | | | | | | | | | |
| | Total | Individual | Group | Medicare Supplement | Vision Only | Dental Only | Federal Employees Health Benefits Plan | Title XVIII Medicare | Title XIX Medicaid | Credit A&H | Disability Income | Long-Term Care | Other Health | Other Non-Health |
| Total Members at end of: | | | | | | | | | | | | | | |
| 1. Prior Year | 57,691 | 0 | 0 | 0 | 0 | 0 | 0 | 14,866 | 42,825 | 0 | 0 | 0 | 0 | 0 |
| 2. First Quarter | 61,918 | 0 | 0 | 0 | 0 | 0 | 0 | 14,791 | 47,127 | 0 | 0 | 0 | 0 | 0 |
| 3. Second Quarter | 65,376 | | | | | | | 13,643 | 51,733 | | | | | |
| 4. Third Quarter | 0 | | | | | | | 0 | 0 | | | | | |
| 5. Current Year | 0 | | | | | | | 0 | 0 | | | | | |
| 6. Current Year Member Months | 375,120 | | | | | | | 86,700 | 288,420 | | | | | |
| Total Member Ambulatory Encounters for Period: | | | | | | | | | | | | | | |
| 7 Physician | 481,420 | | | | | | | 150,551 | 330,869 | | | | | |
| 8. Non-Physician | 2,450,500 | | | | | | | 146,137 | 2,304,363 | | | | | |
| 9. Total | 2,931,920 | 0 | 0 | 0 | 0 | 0 | 0 | 296,688 | 2,635,232 | 0 | 0 | 0 | 0 | 0 |
| 10. Hospital Patient Days Incurred | 45,815 | | | | | | | 21,291 | 24,524 | | | | | |
| 11. Number of Inpatient Admissions | 6,870 | | | | | | | 2,756 | 4,114 | | | | | |
| 12. Health Premiums Written (a) | 885,847,210 | | | | | | | 189,049,742 | 696,797,468 | | | | | |
| 13. Life Premiums Direct | 0 | | | | | | | 0 | 0 | | | | | |
| 14. Property/Casualty Premiums Written | 0 | | | | | | | 0 | 0 | | | | | |
| 15. Health Premiums Earned..... | 894,069,588 | | | | | | | 189,049,742 | 705,019,846 | | | | | |
| 16. Property/Casualty Premiums Earned | 0 | | | | | | | 0 | 0 | | | | | |
| 17. Amount Paid for Provision of Health Care Services..... | 801,308,286 | | | | | | | 125,851,401 | 675,456,885 | | | | | |
| 18. Amount Incurred for Provision of Health Care Services | 813,537,183 | | | | | | | 126,215,995 | 687,321,188 | | | | | |

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 189,049,742

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

oo

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

| Line of Business | Claims Paid Year to Date | | Liability End of Current Quarter | | 5 Claims Incurred in Prior Years (Columns 1 + 3) | 6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year |
|--|---|---|--|---|---|--|
| | 1 On Claims Incurred Prior to January 1 of Current Year | 2 On Claims Incurred During the Year | 3 On Claims Unpaid Dec. 31 of Prior Year | 4 On Claims Incurred During the Year | | |
| 1. Comprehensive (hospital and medical) individual | | | | | 0 | 0 |
| 2. Comprehensive (hospital and medical) group | | | | | 0 | 0 |
| 3. Medicare Supplement | | | | | 0 | 0 |
| 4. Vision only | | | | | 0 | 0 |
| 5. Dental only | | | | | 0 | 0 |
| 6. Federal Employees Health Benefits Plan | | | | | 0 | 0 |
| 7. Title XVIII - Medicare | 30,198,160 | 95,653,241 | 3,203,350 | 36,767,903 | 33,401,510 | 40,269,602 |
| 8. Title XIX - Medicaid | 124,491,109 | 549,532,559 | 26,534,418 | 192,481,018 | 151,025,527 | 207,867,008 |
| 9. Credit A&H | | | | | 0 | 0 |
| 10. Disability Income | | | | | 0 | 0 |
| 11. Long-term care | | | | | 0 | 0 |
| 12. Other health | | | | | 0 | 0 |
| 13. Health subtotal (Lines 1 to 12) | 154,689,269 | 645,185,800 | 29,737,768 | 229,248,921 | 184,427,037 | 248,136,610 |
| 14. Health care receivables (a) | 0 | 8,514,980 | 0 | 0 | 0 | 9,826,361 |
| 15. Other non-health | 0 | 0 | 0 | 0 | 0 | 0 |
| 16. Medical incentive pools and bonus amounts | 187,531 | 1,077,832 | 2,089,477 | 78,241 | 2,277,008 | 2,100,281 |
| 17. Totals (Lines 13 - 14 + 15 + 16) | 154,876,800 | 637,748,652 | 31,827,245 | 229,327,162 | 186,704,045 | 240,410,530 |

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

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

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

A reconciliation of the Company's net income and surplus between NAIC SAP and practices prescribed and permitted by the State of Ohio for the periods ended June 30, 2024 and December 31, 2023 is as follows:

| | SSAP # | F/S Page | F/S Line # | 2024 | 2023 |
|--|--------|-------------|---------------|----------------|----------------|
| NET INCOME | | | | | |
| (1) Aetna Better Health Inc. (an Ohio Corporation) state basis (Page 4, Line 32, Columns 2 & 4) | XXX | XXX | XXX | \$ (422,154) | \$ (308,496) |
| (2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP: | | | | | |
| (3) State Permitted Practices that are an increase/(decrease) from NAIC SAP: | | | | | |
| (4) Net Income NAIC SAP (1-2-3=4) | XXX | XXX | XXX | \$ (422,154) | \$ (308,496) |
| SURPLUS | | | | | |
| (5) Aetna Better Health Inc. (an Ohio Corporation) State basis (Page 3, Line 33, Columns 3 & 4) | XXX | XXX | XXX | \$ 173,412,376 | \$ 146,439,691 |
| (6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP: | | | | | |
| (7) State Permitted Practices that are an increase/(decrease) from NAIC SAP: | | | | | |
| (8) Statutory Surplus NAIC SAP (5-6-7=8) | XXX | XXX | XXX | \$ 173,412,376 | \$ 146,439,691 |

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

The preparation of these financial statements in conformity with Ohio Accounting Practices requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and revenues and expenses. Actual results could differ from those estimates.

C. Accounting Policies

The Company applies the following significant accounting policies:

(1) No significant change.

(2) Bonds

Bonds, which include special deposits, are carried at amortized cost except for those bonds with an NAIC designation of 3 through 6, which are carried at the lower of amortized cost or fair value. The amount carried at fair value is not material to the financial statements. Bond premiums and discounts are amortized using the scientific interest method. When quoted prices in active markets for identical assets are available, the Company uses these quoted market prices to determine the fair value of bonds. This is used primarily for U.S. government securities. In other cases where a quoted market price for identical assets in an active market is either not available or not observable, the Company estimates fair values using valuation methodologies based on available and observable market information or by using a matrix pricing model. If quoted market prices are not available, the Company determines fair value using broker quotes or an internal analysis of each investment's financial performance and cash flow projections. The Company had no investments where fair value was determined using broker quotes or an internal analysis of financial performance and cash flow projections at June 30, 2024. Bonds include all investments whose maturity is greater than one year when purchased. All adjustments between amortized cost and carrying value are reflected in unrealized capital gains and losses and are reported as direct adjustments to surplus.

Bonds are recorded as purchases or sales on the trade date.

The Company periodically reviews its bonds to determine whether a decline in fair value below the carrying value is other-than-temporary. For bonds, other than loan-backed and structured securities ("LB&SS") discussed in Note 1C. (6) below, an

NOTES TO FINANCIAL STATEMENTS

other-than-temporary impairment (“OTTI”) shall be recorded if it is probable that the Company will be unable to collect all amounts due according to the contractual terms in effect at the date of acquisition. Declines deemed to be OTTI in the cost basis are recognized as realized capital losses. Yield-related impairments are deemed other-than-temporary when the Company intends to sell an investment at the reporting date before recovery of the cost of the investment.

The Company analyzes all relevant facts and circumstances for each investment when performing its analysis to determine whether an OTTI exists. Among the factors considered in evaluating whether a decline is other-than-temporary, management considers whether the decline in fair value results from a change in the quality of the investment security itself, whether the decline results from a downward movement in the market as a whole, the prospects for realizing the carrying value of the bond based on the investee’s current and short-term prospects for recovery and other factors. The risks inherent in assessing the impairment of an investment include the risk that market factors may differ from the Company’s expectations and the risk that facts and circumstances factored into its assessment may change with the passage of time. Unexpected changes to market factors and circumstances that were not present in past reporting periods may result in a current period decision to sell securities that were not other-than-temporarily-impaired in prior reporting periods.

The Company had no Securities Valuation Office-identified investments that are being reported at a different measurement method from the prior year annual statement.

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

(6) Loan-Backed and Structured Securities

LB&SS are carried at amortized cost adjusted for unamortized premiums and discounts and are accounted for using the retrospective adjustment method. Premiums and discounts on loan-backed and structured securities are amortized using the scientific method over the estimated remaining term of the securities, adjusted for anticipated prepayments.

For LB&SS, the Company records OTTI when the fair value of the loan-backed or structured security is less than the amortized cost basis at the balance sheet date and (1) the Company intends to sell the investment, or (2) the Company does not have the intent and ability to retain the investment for the time sufficient to recover the amortized cost basis, or (3) the Company does not expect to recover the entire amortized cost basis of the security, even if it does not intend to sell the security and has the intent and ability to hold. If it is determined an OTTI has occurred because of (1) or (2), the amount of the OTTI is equal to the difference between the amortized cost and the fair value of the security at the Balance Sheet date and this difference is recorded as a realized capital loss. If it is determined an OTTI has occurred because of (3), the amount of the OTTI is equal to the difference between the amortized cost and the present value of cash flows expected to be collected, discounted at the loan-backed or structured security’s effective interest rate and this difference is also accounted for as a realized capital loss.

(7) through (18): No significant change.

D. Going Concern

As of August 12, 2024, management evaluated whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company’s ability to continue as a going concern and management has determined that it is not probable that the Company will be unable to meet its obligations as they become due within one year after the financial statements are available to be issued. Management will continuously evaluate the Company’s ability to continue as a going concern and will take appropriate action and will make appropriate disclosures if there is any change in any condition or events that would raise substantial doubt about the Company’s ability to continue as a going concern.

2. Accounting Changes and Corrections of Errors

The Company did not have any accounting changes or corrections of errors in the period ended June 30, 2024.

3. Business Combinations and Goodwill

No significant change.

4. Discontinued Operations

No significant change.

5. Investments

A. through C.: No significant change.

D. Loan-Backed Securities

(1) Prepayment assumptions for single class and multi-class mortgage-backed/loan-backed securities were obtained from industry market sources.

(2) The Company did not recognize any OTTI on loan-backed and structured securities in which the Company had the (1) intent to sell, (2) did not have the intent and ability to retain for a period of time sufficient to recover the amortized cost basis or (3) present value of cash flows expected to be collected is less than the amortized cost basis of the securities in

NOTES TO FINANCIAL STATEMENTS

accordance with Statements of Statutory Accounting Principles (“SSAP”) No. 43R, Loan-Backed and Structured Securities ("SSAP No. 43R") at June 30, 2024.

- (3) The Company had no recognized OTTI on loan-backed and structured securities currently held, in which the present value of cash flows expected to be collected is less than the amortized cost basis at the reporting date June 30, 2024.
- (4) The Company’s unrealized loss position on loan-backed and structured securities held by the Company at June 30, 2024 is as follows:

| | | |
|---|----|-----------|
| a. The aggregate amount of unrealized losses: | | |
| 1. Less than 12 Months | \$ | (10,183) |
| 2. 12 Months or Longer | | (385,760) |
| b. The aggregate related fair value of securities with unrealized losses: | | |
| 1. Less than 12 Months | \$ | 1,989,675 |
| 2. 12 Months or Longer | | 4,642,260 |

- (5) The Company has reviewed the loan-backed and structured securities in accordance with SSAP No. 43R in the table above and has concluded that these are performing assets generating investment income to support the needs of the business. Furthermore, the Company has no intention to sell the securities at June 30, 2024 before their cost can be recovered and does have the intent and ability to retain the securities for the time sufficient to recover the amortized cost basis; therefore, no OTTI write-down to fair value was determined to have occurred on these securities.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

- (1) and (2): No significant change.
- (3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or repledge as of June 30, 2024.
- (4) through (7): No significant change.

F. The Company did not have any repurchase agreements transactions accounted for as secured borrowing at June 30, 2024.

G. The Company did not have any reverse repurchase agreements transactions accounted for as secured borrowing at June 30, 2024.

H. The Company did not have any repurchase agreements transactions accounted for as a sale at June 30, 2024.

I. The Company did not have any reverse repurchase agreements transactions accounted for as a sale at June 30, 2024.

J. through L.: No significant change.

M. The Company did not have any working capital finance investments at June 30, 2024.

N. The Company did not have any offsetting and netting of derivative, repurchase and reverse repurchase, and securities borrowing and securities lending assets or liabilities at June 30, 2024.

O. through Q.: No significant change.

R. Reporting Entity’s Share of Cash Pool by Asset Type:

The Company’s investment in the qualified cash pool is reported in cash equivalents. The Company’s investment in the qualified cash pool is \$141,961,964 as of June 30, 2024. The Company did not have an investment in a qualified cash pool at December 31, 2023. The following table presents the percent share distribution by underlying asset type of the total qualified cash pool balance as of June 30, 2024.

| Asset Type | Percent Share |
|----------------------------|---------------|
| (1) Cash | — % |
| (2) Cash Equivalents | 98.32 % |
| (3) Short-Term Investments | 1.68 % |
| (4) Total | 100.00 % |

6. Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

7. Investment Income

No significant change.

NOTES TO FINANCIAL STATEMENTS

8. Derivative Instruments

The Company did not have any derivative instruments at June 30, 2024.

9. Income Taxes

No significant change.

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

A. and B.:

Transactions occurring between the Company and its parent, subsidiaries and affiliates excluding reinsurance transactions and non-insurance transactions involving less than ½ of 1% of the Company’s total admitted assets and cost allocation transactions follow:

June 30, 2024

| Date of transaction | Explanation of transaction | Name of reporting entity | Name of affiliate | Assets received by insurer | | Assets transferred by insurer | |
|---------------------|----------------------------|--|----------------------------|----------------------------|-----------------------|-------------------------------|-----------------------|
| | | | | Statement value | Statement description | Statement value | Statement description |
| February 5, 2024 | Capital Contribution | Aetna Better Health Inc. (an Ohio corporation) | Aetna Health Holdings, LLC | \$ 26,500,000 | Cash | | |

C. through O.: No significant change.

11. Debt

A. The Company did not have any items related to debt, including capital notes at June 30, 2024.

B. The Company did not have any Federal Home Loan Bank agreements at June 30, 2024.

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

The Company did not have a retirement plan, deferred compensation plan or other postretirement benefit plan at June 30, 2024.

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

No significant change.

14. Liabilities, Contingencies and Assessments

No significant change.

15. Leases

No significant change.

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

No significant change.

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

A. Transfers of Receivables Reported as Sales

No significant change.

B. Transfer and Servicing of Financial Assets

- (1) No significant change.
- (2) and (3): The Company did not have any servicing assets or liabilities at June 30, 2024.
- (4) The Company did not have any securitized financial assets at June 30, 2024.
- (5) through (7): No significant change.

C. Wash Sales

NOTES TO FINANCIAL STATEMENTS

- (1) In the course of the Company's asset management, securities are sold and reacquired within 30 days of the sale date to enhance the Company's yield on its investment portfolio.
- (2) The Company had no securities sold during the quarter ended June 30, 2024 and reacquired within 30 days of the sale date.

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

No significant change.

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

No significant change.

20. Fair Value Measurements

A.

- (1) The Company had no material assets and liabilities that are measured and reported at fair value in the financial statements as of June 30, 2024.
- (2) There were no material realized and unrealized capital gains, purchases, sales, settlements, or transfers into or out of the Company's Level 3 financial assets during the period ending June 30, 2024.
- (3) Transfers in and out of all levels are recognized at the end of the reporting period of which the transfer occurred.
- (4) The Company's fair value measurement valuation techniques are described in B. below.
- (5) The Company did not have any derivative instruments at June 30, 2024.

B. The fair values of these instruments are based on valuations that include inputs that can be classified within one of three levels of a hierarchy. The following are the levels of the hierarchy and a brief description of the type of valuation information (“inputs”) that qualifies a financial asset or liability for each level:

- Level 1** - Unadjusted quoted prices for identical assets or liabilities in active markets.
- Level 2** - Inputs other than Level 1 that are based on observable market data. These include: quoted prices for similar assets in active markets, quoted prices for identical assets in inactive markets, inputs that are observable that are not prices (such as interest rates and credit risks) and inputs that are derived from or corroborated by observable markets.
- Level 3** - Developed from unobservable data, reflecting the Company's own assumptions.

Financial assets and liabilities are classified based upon the lowest level of input that is significant to the valuation. When quoted prices in active markets for identical assets and liabilities are available, the Company uses these quoted market prices to determine the fair value of financial assets and liabilities and classifies these assets and liabilities as Level 1. In other cases where a quoted market price for identical assets and liabilities in an active market is either not available or not observable, the Company estimates fair value using valuation methodologies based on available and observable market information or by using a matrix pricing model. These financial assets and liabilities would then be classified as Level 2. If quoted market prices are not available, the Company determines fair value using broker quotes or an internal analysis of each investment’s financial performance and cash flow projections. Thus, financial assets and liabilities may be classified in Level 3 even though there may be some significant inputs that may be observable.

C. The carrying values and estimated fair values of the Company's financial instruments at June 30, 2024 were as follows:

| Type of Financial Instrument | Aggregate Fair Value | Admitted Assets | (Level 1) | (Level 2) | (Level 3) | Net Asset Value (NAV) | Not Practicable (Carrying Value) |
|---|----------------------|-----------------|---------------|----------------|-----------|-----------------------|----------------------------------|
| Bonds, short-term investments, and cash equivalents | \$ 323,156,715 | \$ 327,203,784 | \$ 18,269,727 | \$ 304,886,988 | \$ — | \$ — | \$ — |
| Mortgage loans | 2,426,448 | 2,473,800 | — | — | 2,426,448 | — | — |

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

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

21. Other Items

No significant change.

22. Events Subsequent

NOTES TO FINANCIAL STATEMENTS

A. Type I - Recognized Subsequent Events

Subsequent events have been considered through August 12, 2024 for the statutory statement issued on August 12, 2024.

The Company had no known reportable recognized subsequent events.

B. Type II - Non-Recognized Subsequent Events

Subsequent events have been considered through August 12, 2024 for the statutory statement issued on August 12, 2024.

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

23. Reinsurance

No significant change.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. through D.: No significant change.

E. Risk Sharing Provisions of the Affordable Care Act

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

(2) through (5): Not applicable.

25. Change in Incurred Claims and Claim Adjustment Expenses

A. Reserves as of December 31, 2023 were \$257,421,257. As of June 30, 2024, \$162,061,167 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$31,827,245 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$63,532,846 favorable prior-year development since December 31, 2023 to June 30, 2024. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims. Included in this decrease, the Company experienced \$6,868,092 of favorable prior year claim development on retrospectively rated policies. However, the business to which it relates is subject to premium adjustments.

B. There has been no significant change in the Company's methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

26. Intercompany Pooling Arrangements

No significant change.

27. Structured Settlements

No significant change.

28. Health Care Receivables

No significant change.

29. Participating Policies

No significant change.

30. Premium Deficiency Reserves

No significant change.

31. Anticipated Salvage and Subrogation

No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes [] No [X]

1.2

If yes, has the report been filed with the domiciliary state?

Yes [] No []

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [] No [X]

2.2

If yes, date of change:

3.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1 and 1A.

Yes [X] No []

3.2

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

Yes [X] No []

3.3

If the response to 3.2 is yes, provide a brief description of those changes.
Effective April 1, 2024, Texas Health + Aetna Health Insurance Company merged into Aetna Life Insurance Company. Effective April 1, 2024, Texas Health + Aetna Health Plan Inc. merged into Aetna Health Inc. (Texas). Effective June 7, 2024, Carefree Insurance Services, Inc. changed its name to Attain Insurance Services Inc. Effective July 1, 2024, Texas Health + Aetna Health Insurance Holding Company LLC was dissolved.

3.4

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

Yes [X] No []

3.5

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

0000064803

4.1

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

Yes [] No [X]

4.2

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

| 1 Name of Entity | 2 NAIC Company Code | 3 State of Domicile |
|---------------------|------------------------|------------------------|
| | | |

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?
If yes, attach an explanation.

Yes [] No [X] N/A []

6.1

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

12/31/2020

6.2

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

12/31/2020

6.3

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

06/07/2022

6.4

By what department or departments?
Ohio Department of Insurance

6.5

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

Yes [] No [] N/A [X]

6.6

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

Yes [] No [] N/A [X]

7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes [] No [X]

7.2

If yes, give full information:

8.1

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

Yes [] No [X]

8.2

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

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [] No [X]

8.4

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

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

GENERAL INTERROGATORIES

- 9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
(c) Compliance with applicable governmental laws, rules and regulations;
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
(e) Accountability for adherence to the code.

Yes [X] No []
- 9.11

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

Has the code of ethics for senior managers been amended?

Yes [X] No []
- 9.21

If the response to 9.2 is Yes, provide information related to amendment(s).
In the first quarter of 2024, the Code of Conduct was amended. Added "Responsible Use of Technology" as a new section and made minor updates to the "Non-discrimination, harassment, retaliation" section.
- 9.3

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

Yes [] No [X]
- 9.31

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

FINANCIAL

- 10.1

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

Yes [] No [X]
- 10.2

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

INVESTMENT

- 11.1

Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

Yes [] No [X]
- 11.2

If yes, give full and complete information relating thereto:
.....
12.

Amount of real estate and mortgages held in other invested assets in Schedule BA:

\$0
13.

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

\$0
- 14.1

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

Yes [X] No []
- 14.2

If yes, please complete the following:

| | 1 | 2 |
|---|---|--|
| | Prior Year-End Book/Adjusted Carrying Value | Current Quarter Book/Adjusted Carrying Value |
| 14.21 Bonds | \$0 | \$0 |
| 14.22 Preferred Stock | \$0 | \$0 |
| 14.23 Common Stock | \$0 | \$0 |
| 14.24 Short-Term Investments | \$0 | \$0 |
| 14.25 Mortgage Loans on Real Estate | \$0 | \$0 |
| 14.26 All Other | \$26,115,981 | \$27,553,243 |
| 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) | \$26,115,981 | \$27,553,243 |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above | \$0 | \$0 |
- 15.1

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

Yes [] No [X]
- 15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A []
If no, attach a description with this statement.
.....
16.

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

16.1

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

\$0

16.2

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

\$0

16.3

Total payable for securities lending reported on the liability page.

\$0

GENERAL INTERROGATORIES

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

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

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

| 1 Name(s) | 2 Location(s) | 3 Complete Explanation(s) |
|--------------|------------------|------------------------------|
| | | |

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No [X]
- 17.4 If yes, give full information relating thereto:

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

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

| 1 Name of Firm or Individual | 2 Affiliation |
|---|------------------|
| Derek S. Blunt as Senior Investment Officer | A..... |

- 17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [] No [X]
- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [] No [X]

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

| 1 | 2 | 3 | 4 | 5 |
|--|----------------------------|-------------------------------|----------------------|---|
| Central Registration Depository Number | Name of Firm or Individual | Legal Entity Identifier (LEI) | Registered With | Investment Management Agreement (IMA) Filed |
| N/A | Derek S. Blunt | N/A | Not registered | NO..... |

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []
- 18.2 If no, list exceptions:
.....

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:
a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
b. Issuer or obligor is current on all contracted interest and principal payments.
c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
Has the reporting entity self-designated 5GI securities? Yes [] No [X]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
a. The security was purchased prior to January 1, 2018.
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.
Has the reporting entity self-designated PLGI securities? Yes [] No [X]

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
a. The shares were purchased prior to January 1, 2019.
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
d. The fund only or predominantly holds bonds in its portfolio.
e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

GENERAL INTERROGATORIES

PART 2 - HEALTH

1.

Operating Percentages:

1.1 A&H loss percent

95.8 %

1.2 A&H cost containment percent

4.7 %

1.3 A&H expense percent excluding cost containment expenses

5.2 %
- 2.1

Do you act as a custodian for health savings accounts?

Yes ☐ No ☒
- 2.2

If yes, please provide the amount of custodial funds held as of the reporting date

\$
- 2.3

Do you act as an administrator for health savings accounts?

Yes ☐ No ☒
- 2.4

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

\$
3.

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

Yes ☐ No ☒
- 3.1

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

Yes ☐ No ☒

STATEMENT AS OF JUNE 30, 2024 OF THE Aetna Better Health Inc. (an Ohio corporation)

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

[illegible]

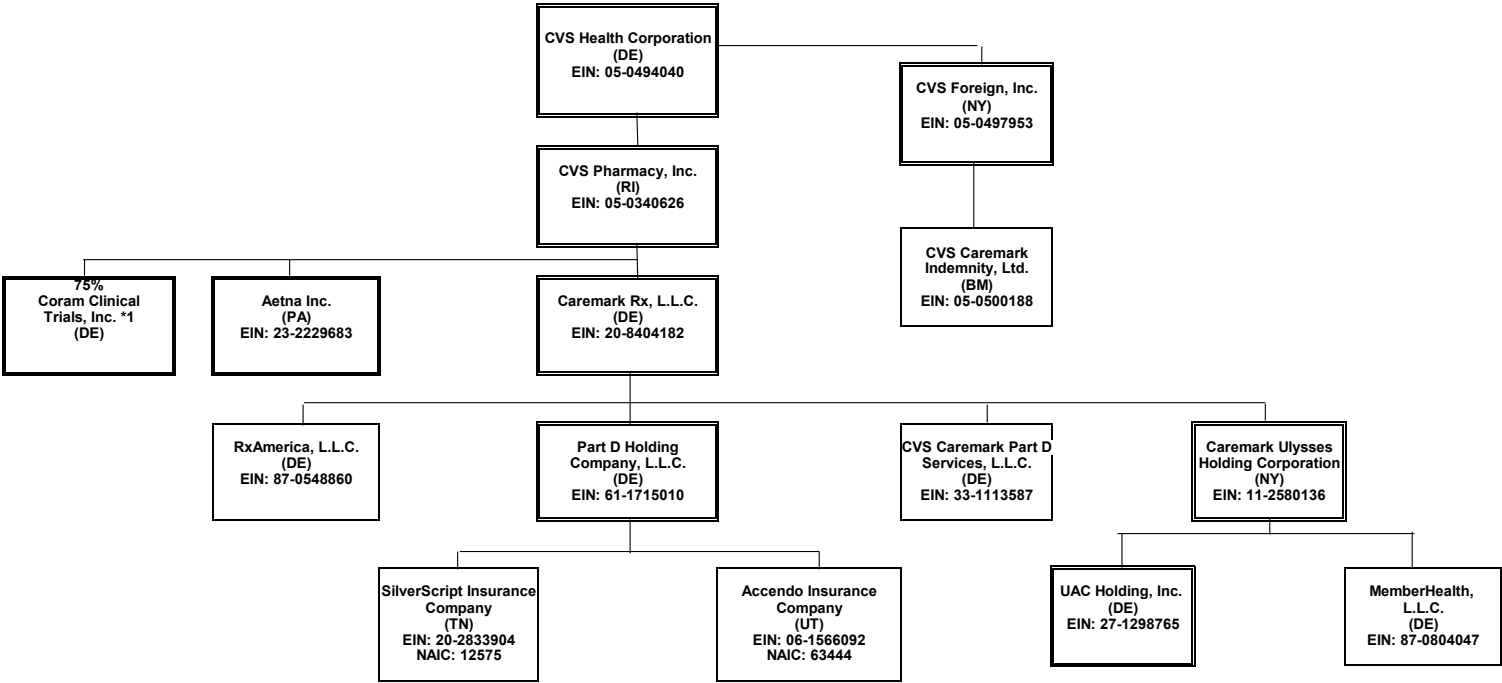
SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

| | | 1 | Direct Business Only | | | | | | | | |
|----------------------|---|-------------------|------------------------------|----------------------|--------------------|----------------|--|--|----------------------------|---------------------------|------------------------|
| | | | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| States, etc. | | Active Status (a) | Accident and Health Premiums | Medicare Title XVIII | Medicaid Title XIX | CHIP Title XXI | Federal Employees Health Benefits Program Premiums | Life and Annuity Premiums & Other Considerations | Property/Casualty Premiums | Total Columns 2 Through 8 | Deposit-Type Contracts |
| 1. | Alabama | AL | ..N.. | | | | | | |0 | |
| 2. | Alaska | AK | ..N.. | | | | | | |0 | |
| 3. | Arizona | AZ | ..N.. | | | | | | |0 | |
| 4. | Arkansas | AR | ..N.. | | | | | | |0 | |
| 5. | California | CA | ..N.. | | | | | | |0 | |
| 6. | Colorado | CO | ..N.. | | | | | | |0 | |
| 7. | Connecticut | CT | ..N.. | | | | | | |0 | |
| 8. | Delaware | DE | ..N.. | | | | | | |0 | |
| 9. | District of Columbia | DC | ..N.. | | | | | | |0 | |
| 10. | Florida | FL | ..N.. | | | | | | |0 | |
| 11. | Georgia | GA | ..N.. | | | | | | |0 | |
| 12. | Hawaii | HI | ..N.. | | | | | | |0 | |
| 13. | Idaho | ID | ..N.. | | | | | | |0 | |
| 14. | Illinois | IL | ..N.. | | | | | | |0 | |
| 15. | Indiana | IN | ..N.. | | | | | | |0 | |
| 16. | Iowa | IA | ..N.. | | | | | | |0 | |
| 17. | Kansas | KS | ..N.. | | | | | | |0 | |
| 18. | Kentucky | KY | ..N.. | | | | | | |0 | |
| 19. | Louisiana | LA | ..N.. | | | | | | |0 | |
| 20. | Maine | ME | ..N.. | | | | | | |0 | |
| 21. | Maryland | MD | ..N.. | | | | | | |0 | |
| 22. | Massachusetts | MA | ..N.. | | | | | | |0 | |
| 23. | Michigan | MI | ..N.. | | | | | | |0 | |
| 24. | Minnesota | MN | ..N.. | | | | | | |0 | |
| 25. | Mississippi | MS | ..N.. | | | | | | |0 | |
| 26. | Missouri | MO | ..N.. | | | | | | |0 | |
| 27. | Montana | MT | ..N.. | | | | | | |0 | |
| 28. | Nebraska | NE | ..N.. | | | | | | |0 | |
| 29. | Nevada | NV | ..N.. | | | | | | |0 | |
| 30. | New Hampshire | NH | ..N.. | | | | | | |0 | |
| 31. | New Jersey | NJ | ..N.. | | | | | | |0 | |
| 32. | New Mexico | NM | ..N.. | | | | | | |0 | |
| 33. | New York | NY | ..N.. | | | | | | |0 | |
| 34. | North Carolina | NC | ..N.. | | | | | | |0 | |
| 35. | North Dakota | ND | ..N.. | | | | | | |0 | |
| 36. | Ohio | OH | ..L.. | 189,049,742 | 696,797,468 | | | | | 885,847,210 | |
| 37. | Oklahoma | OK | ..N.. | | | | | | |0 | |
| 38. | Oregon | OR | ..N.. | | | | | | |0 | |
| 39. | Pennsylvania | PA | ..N.. | | | | | | |0 | |
| 40. | Rhode Island | RI | ..N.. | | | | | | |0 | |
| 41. | South Carolina | SC | ..N.. | | | | | | |0 | |
| 42. | South Dakota | SD | ..N.. | | | | | | |0 | |
| 43. | Tennessee | TN | ..N.. | | | | | | |0 | |
| 44. | Texas | TX | ..N.. | | | | | | |0 | |
| 45. | Utah | UT | ..N.. | | | | | | |0 | |
| 46. | Vermont | VT | ..N.. | | | | | | |0 | |
| 47. | Virginia | VA | ..N.. | | | | | | |0 | |
| 48. | Washington | WA | ..N.. | | | | | | |0 | |
| 49. | West Virginia | WV | ..N.. | | | | | | |0 | |
| 50. | Wisconsin | WI | ..N.. | | | | | | |0 | |
| 51. | Wyoming | WY | ..N.. | | | | | | |0 | |
| 52. | American Samoa | AS | ..N.. | | | | | | |0 | |
| 53. | Guam | GU | ..N.. | | | | | | |0 | |
| 54. | Puerto Rico | PR | ..N.. | | | | | | |0 | |
| 55. | U.S. Virgin Islands | VI | ..N.. | | | | | | |0 | |
| 56. | Northern Mariana Islands | MP | ..N.. | | | | | | |0 | |
| 57. | Canada | CAN | ..N.. | | | | | | |0 | |
| 58. | Aggregate Other Aliens | OT | XXX.....0 |0 |0 |0 |0 |0 |0 |0 |0 |
| 59. | Subtotal | XXX..... |0 | 189,049,742 | 696,797,468 |0 |0 |0 |0 | 885,847,210 |0 |
| 60. | Reporting Entity Contributions for Employee Benefit Plans | XXX..... | | | | | | | |0 | |
| 61. | Totals (Direct Business) | XXX..... | 0 | 189,049,742 | 696,797,468 | 0 | 0 | 0 | 0 | 885,847,210 | 0 |
| DETAILS OF WRITE-INS | | | | | | | | | | | |
| 58001. | ..... | XXX..... | | | | | | | | | |
| 58002. | ..... | XXX..... | | | | | | | | | |
| 58003. | ..... | XXX..... | | | | | | | | | |
| 58998. | Summary of remaining write-ins for Line 58 from overflow page | XXX..... |0 |0 |0 |0 |0 |0 |0 |0 |0 |
| 58999. | Totals (Lines 58001 through 58003 plus 58998)(Line 58 above) | XXX..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

(a) Active Status Counts:
1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 1 4. Q - Qualified - Qualified or accredited reinsurer..... 0
2. R - Registered - Non-domiciled RRGs..... 0 5. N - None of the above - Not allowed to write business in the state..... 56
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. 0

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

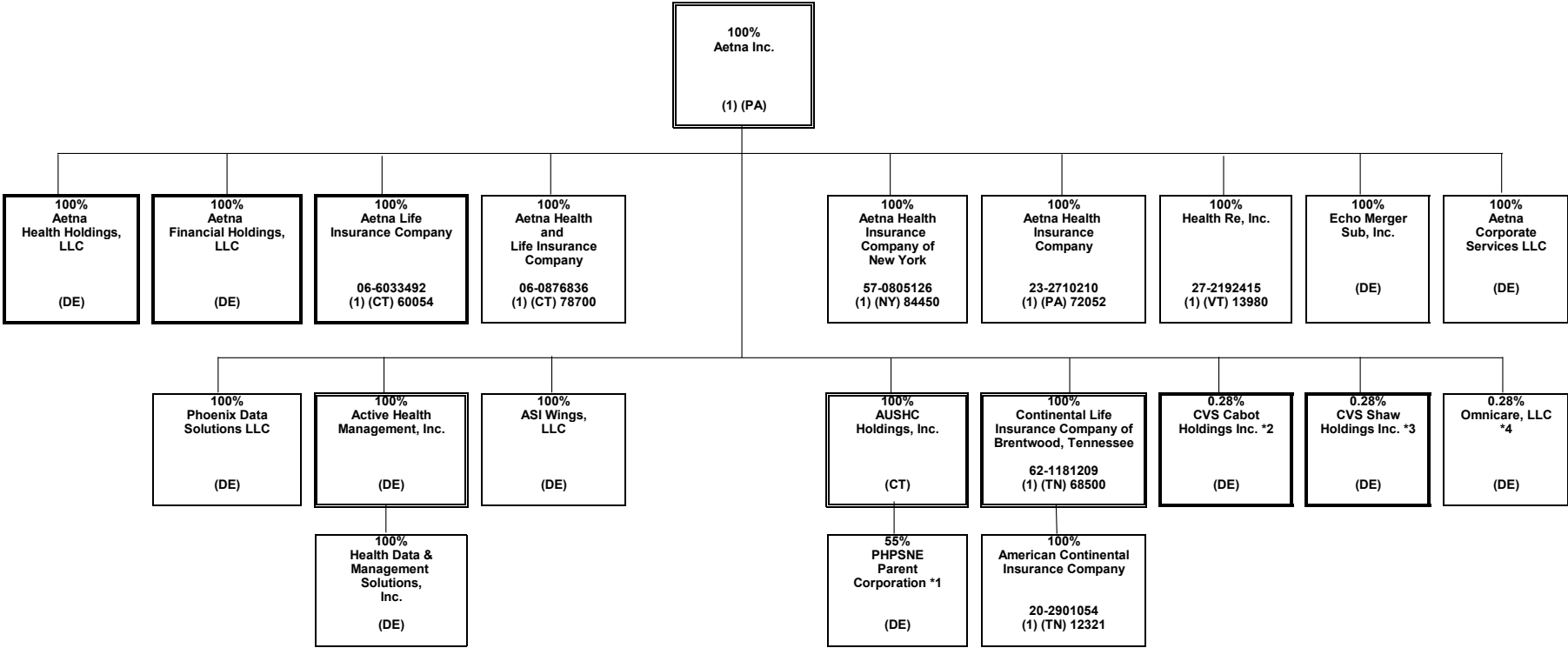


This organizational chart reflects the insurance entity reporting system and identifies the relationship between the ultimate parent and all member insurers. The ultimate controlling company is a Fortune 6 company with numerous subsidiaries, the majority of which do not interact with the insurance entities.
(1) Insurers/HMO's
Percentages are rounded to the nearest whole percent and based on ownership of voting rights.
Double borders indicate entity has subsidiaries shown on the same page.
Bold borders indicate entity has subsidiaries shown on a separate page.

*1 Coram Clinical Trials, Inc. is also 25% owned by Aetna Life Insurance Company

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

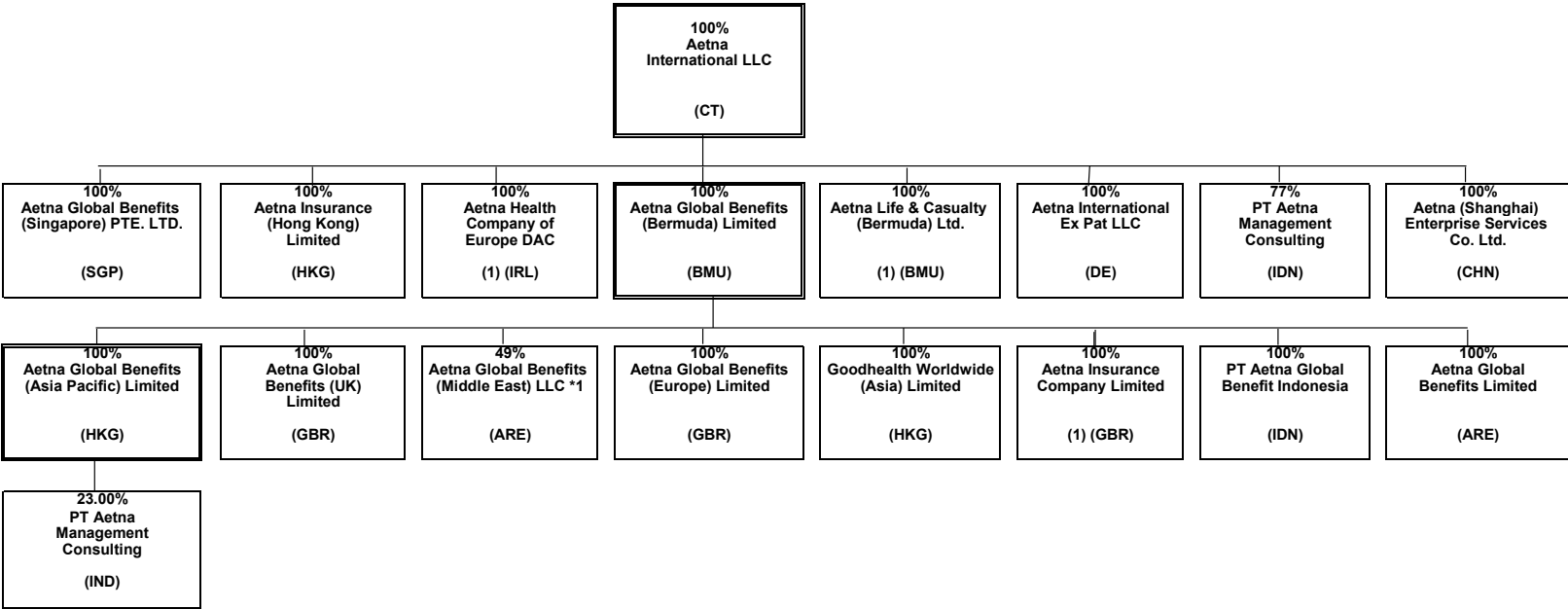
PART 1 - ORGANIZATIONAL CHART



*1 PHPSNE Parent Corporation is also 45% owned by third parties.
*2 CVS Cabot Holdings Inc. is also 99.72% owned by Coram Clinical Trials, Inc.
*3 CVS Shaw Holdings Inc. is also 99.72% owned by Coram Clinical Trials, Inc.
*4 Omnicare, LLC is also owned by CVS Cabot Holdings Inc and CVS Shaw Holdings Inc., each with 49.86% ownership.

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

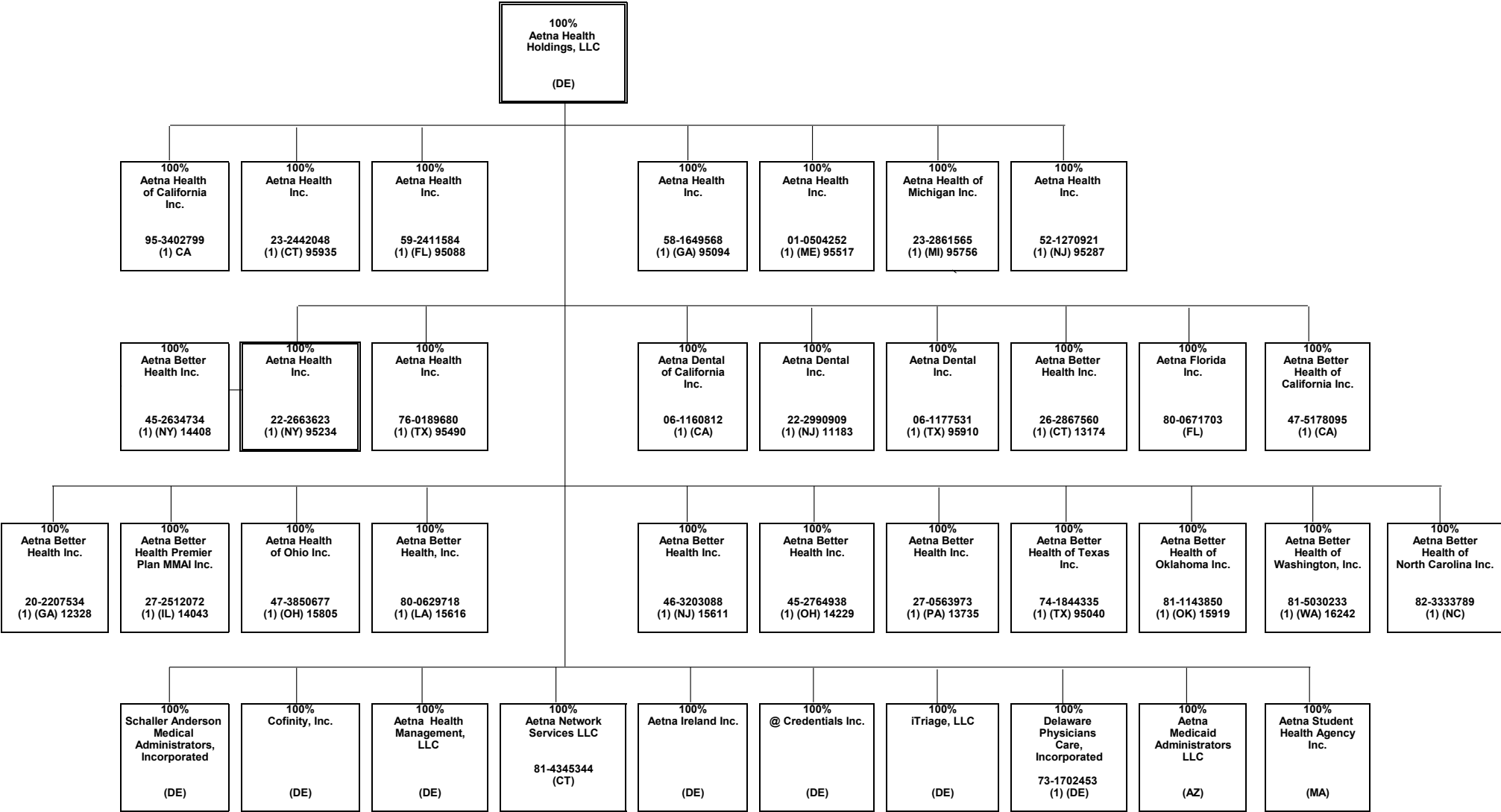
PART 1 - ORGANIZATIONAL CHART



*1 Aetna Global Benefits (Middle East) LLC is also 51% owned by Euro Gulf LLC, Aetna's Nominee.

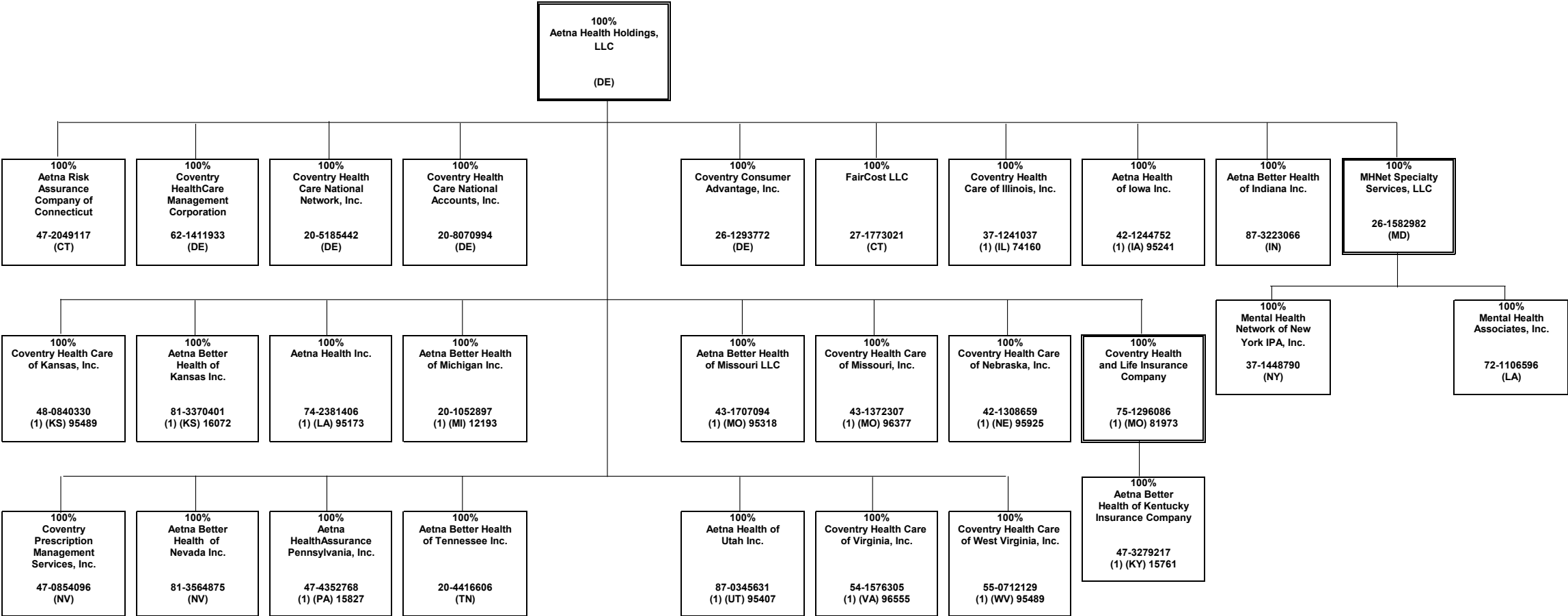
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



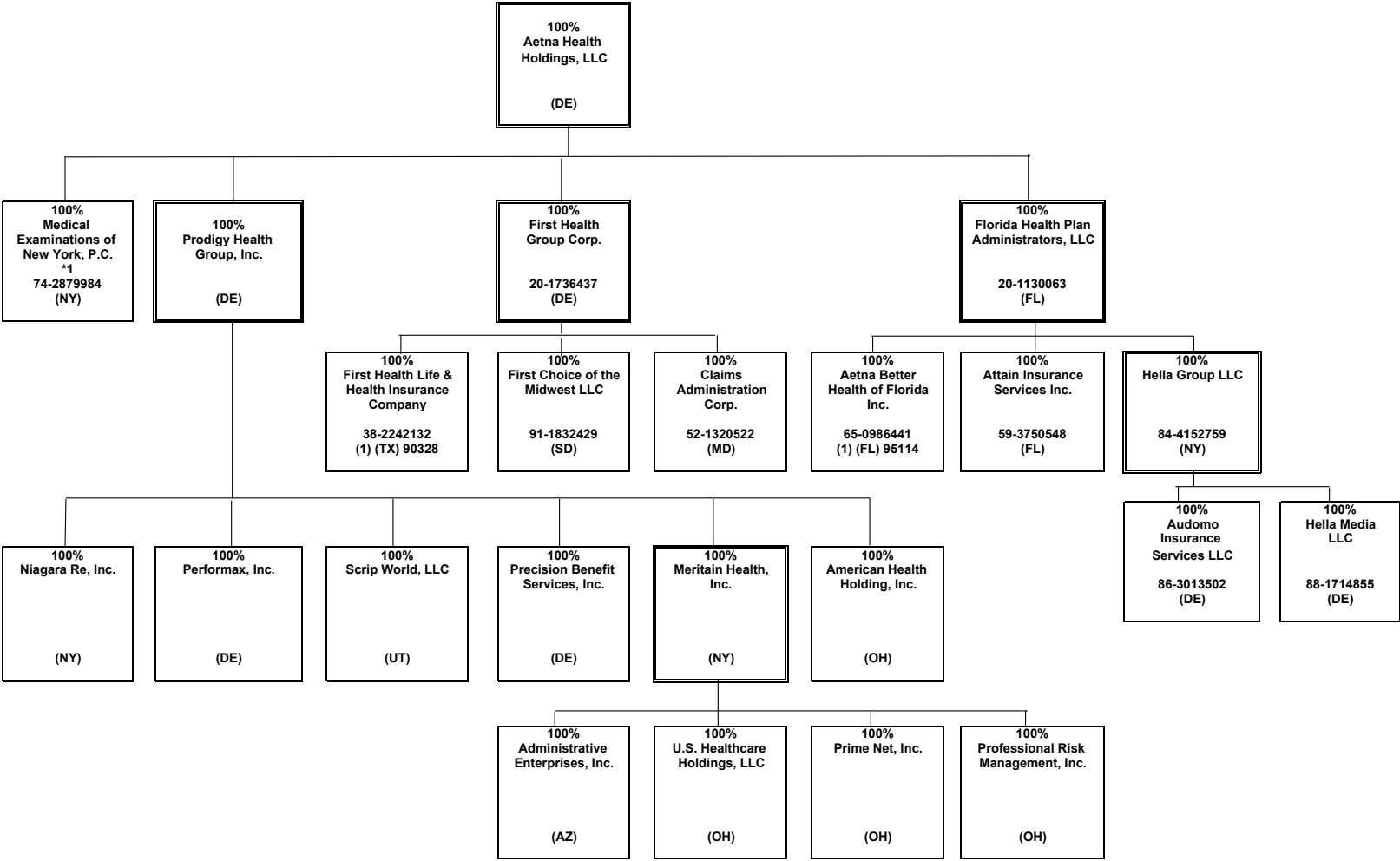
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



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

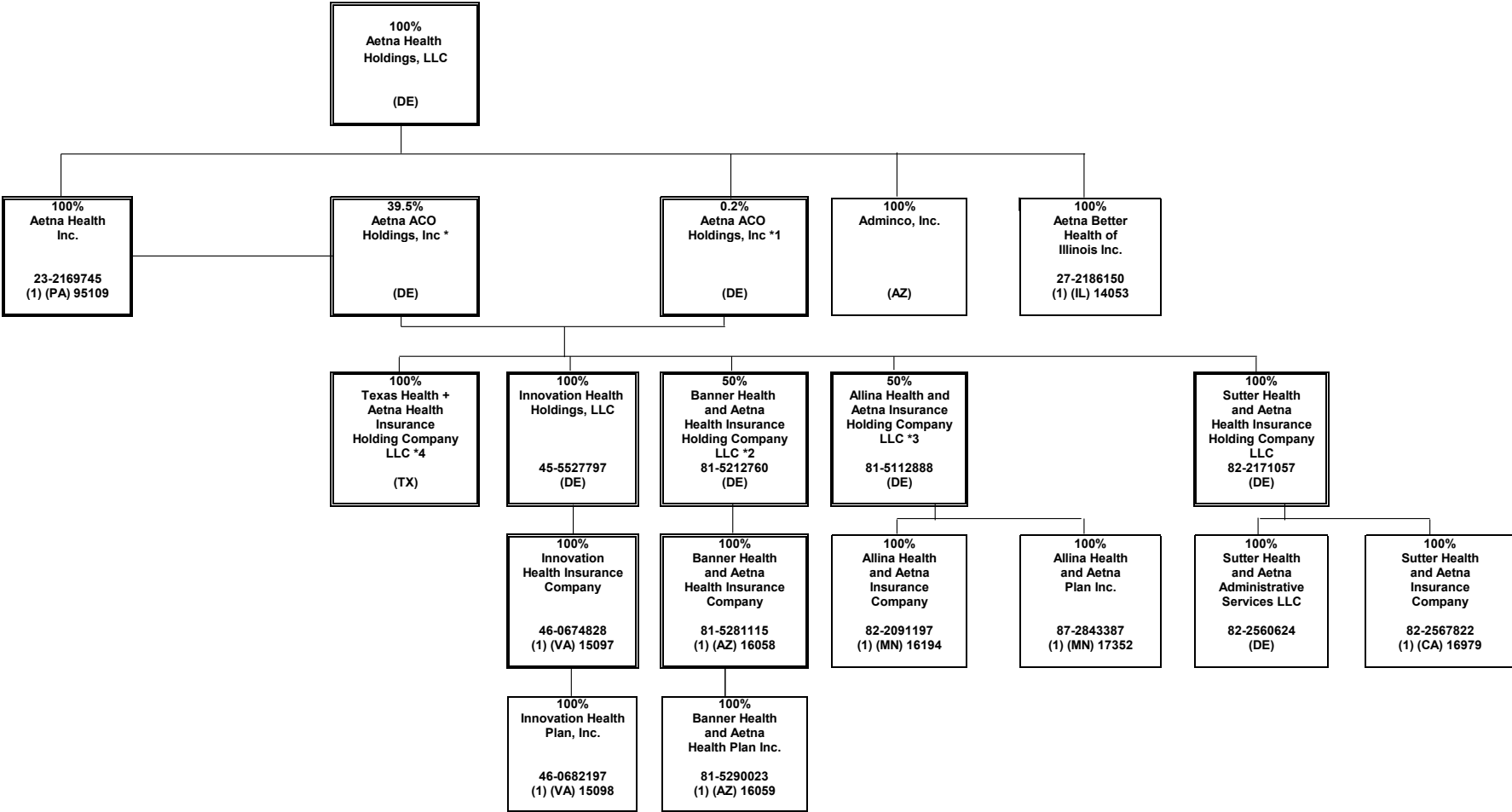
PART 1 - ORGANIZATIONAL CHART



*1 Owned via a nominee

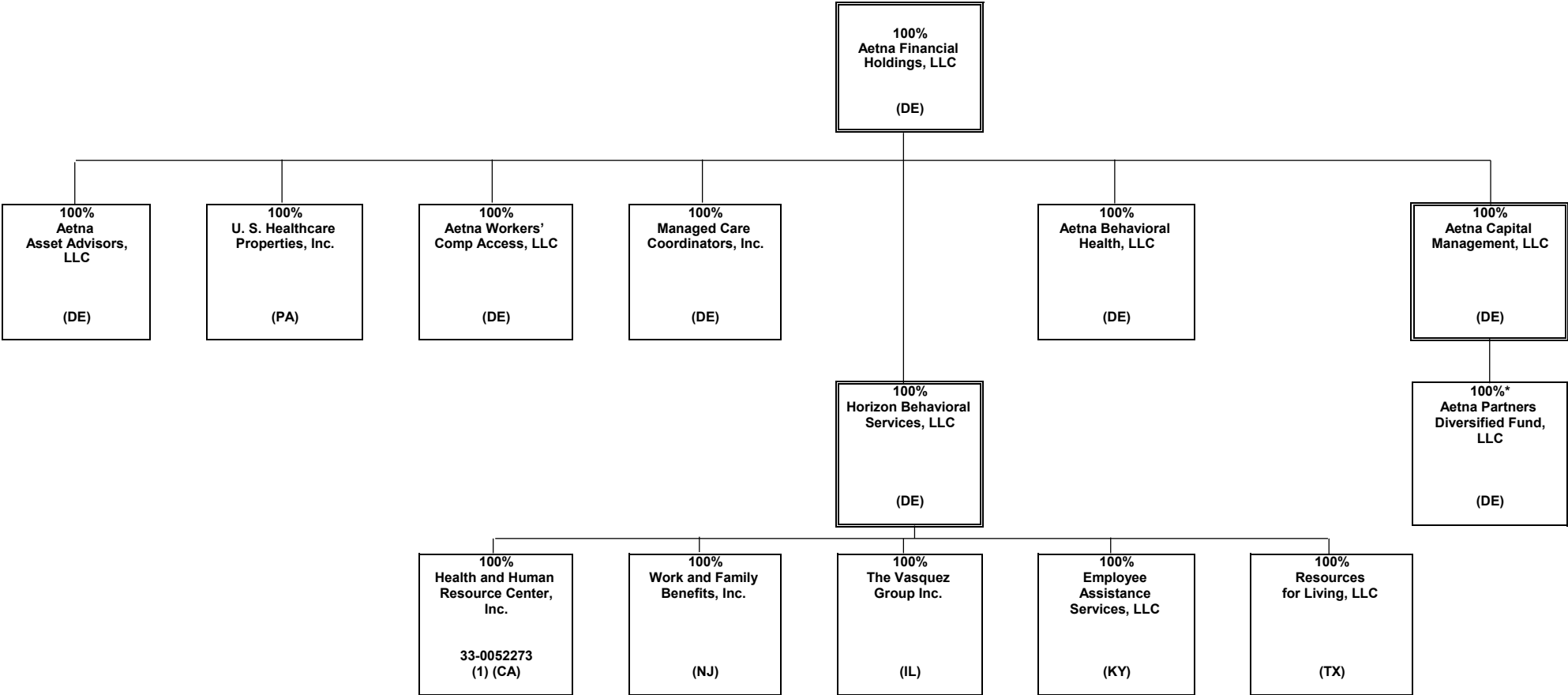
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



*1 Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).
*2 Banner Health and Aetna Health Insurance Holding Company LLC is also 50% owned by Banner Health.
*3 Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.
*4 Effective on July 1, 2024, Texas Health + Aetna Health Insurance Holding Company was dissolved.

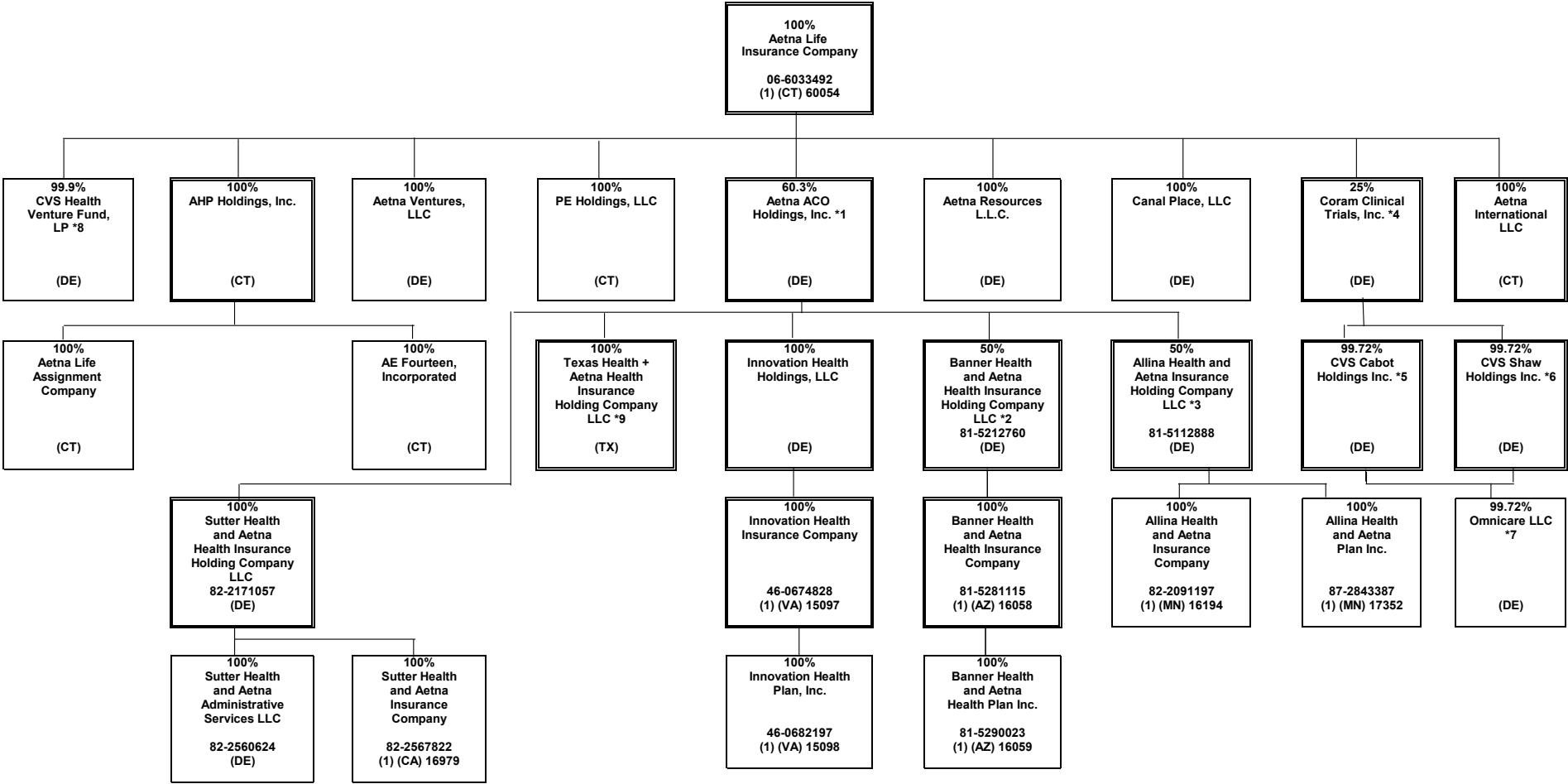
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



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

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

PART 1 - ORGANIZATIONAL CHART



*1 Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).
*2 Banner Health and Aetna Health Insurance Holding Company LLC is also 50% owned by Banner Health.
*3 Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health System.
*4 Coram Clinical Trials, Inc. is also 75% owned by CVS Pharmacy, Inc.
*5 CVS Cabot Holdings Inc. is also .28% owned by Aetna Inc.
*6 CVS Shaw Holdings Inc. is also .28% owned by Aetna Inc.
*7 Remaining .28% owned by Aetna Inc. CVS Cabot Holdings Inc. and CVS Shaw Holdings Inc. each owning 49.86%.
*8 CVS Health Venture Fund, LP is also 0.1% owned by CVS Helath Ventures Fund GP, LLC
*9 Effective on July 1, 2024, Texas Health + Aetna Health Insurance Holding Company was dissolved.

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13 If Control is Owner- ship Provide Percent- age | 14 Ultimate Controlling Entity(ies)/Person(s) | 15 Is an SCA Filing Re- quired? (Yes/No) | 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) | | | | | |
| .0001 | CVS HEALTH GROUP | | 05-0494040 | | 0000064803 | NYSE | CVS Health Corporation | ..DE | ..UIP | Board of Directors | Board of Directors | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 63444 | 06-1566092 | | | | Accendo Insurance Company | ..UT | ..IA | Part D Holding Company, L.L.C. | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 12575 | 20-2833904 | | | | SilverScript Insurance Company | ..TN | ..IA | Part D Holding Company, L.L.C. | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 05-0340626 | | | | CVS Pharmacy, Inc. | ..RI | ..UIP | CVS Health Corporation | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 20-8404182 | | | | Caremark Rx, L.L.C. | ..DE | ..NIA | CVS Pharmacy, Inc | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 61-1715010 | | | | Part D Holding Company, L.L.C. | ..DE | ..NIA | Caremark, Rx., L.L.C. | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 33-1113587 | | | | CVS Caremark Part D Services, L.L.C. | ..DE | ..NIA | Caremark, Rx., L.L.C. | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 87-0548860 | | | | RxAmerica, L.L.C. | ..DE | ..NIA | Caremark, Rx., L.L.C. | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 11-2580136 | | | | Caremark Ulysses Holding Corporation | ..NY | ..NIA | Caremark, Rx., L.L.C. | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 87-0804047 | | | | MemberHealth, L.L.C. | ..DE | ..NIA | Caremark Ulysses Holding Corporation | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 05-0500188 | | | | CVS Caremark Indemnity, Ltd. | ..BMU | ..IA | CVS Foreign, Inc. | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 27-1298765 | | | | UAC Holding, Inc. | ..DE | ..NIA | Caremark Ulysses Holding Corporation | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 05-0497953 | | | | CVS Foreign, Inc. | ..NY | ..NIA | CVS Health Corporation | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 58-2160656 | | | | Coram Clinical Trials, Inc. | ..DE | ..NIA | CVS Pharmacy, Inc | Ownership | 75.000 | CVS Health Corporation | ...NO | ...7 |
| .0001 | CVS HEALTH GROUP | 00000 | 23-2229683 | 3060706 | 0001122304 | | Aetna Inc. | ..PA | ..UIP | CVS Pharmacy, Inc | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 30-0123754 | | | | Aetna Health Holdings, LLC | ..DE | ..UDP | Aetna Inc. | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 95-3402799 | | | | Aetna Health of California Inc. | ..CA | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 95935 | 23-2442048 | | | | Aetna Health Inc. | ..CT | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 95088 | 59-2411584 | | | | Aetna Health Inc. | ..FL | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 95094 | 58-1649568 | | | | Aetna Health Inc. | ..GA | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 95517 | 01-0504252 | | | | Aetna Health Inc. | ..ME | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 95756 | 23-2861565 | | | | Aetna Health of Michigan Inc. | ..MI | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 95287 | 52-1270921 | | | | Aetna Health Inc. | ..NJ | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 95234 | 22-2663623 | | | | Aetna Health Inc. | ..NY | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 14408 | 45-2634734 | | | | Aetna Better Health Inc. | ..NY | ..IA | Aetna Health Inc. (NY) | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 95490 | 76-0189680 | | | | Aetna Health Inc. | ..TX | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 95040 | 74-1844335 | | | | Aetna Better Health of Texas Inc. | ..TX | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 12328 | 20-2207534 | | | | Aetna Better Health Inc. | ..GA | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 06-1160812 | | | | Aetna Dental of California Inc. | ..CA | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 11183 | 22-2990909 | | | | Aetna Dental Inc. | ..NJ | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 95910 | 06-1177531 | | | | Aetna Dental Inc. | ..TX | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 13-3670795 | | | | Aetna Health Management, LLC | ..DE | ..NIA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 22-3187443 | | | | Aetna Ireland Inc. | ..DE | ..NIA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 20-1274723 | | | | Cofinity, Inc. | ..DE | ..NIA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 23-2671370 | | | | @Credentials Inc. | ..DE | ..NIA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 13735 | 27-0563973 | | | | Aetna Better Health Inc. | ..PA | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 13174 | 26-2867560 | | | | Aetna Better Health Inc. | ..CT | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 47-5178095 | | | | Aetna Better Health of California Inc. | ..CA | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 14043 | 27-2512072 | | | | Aetna Better Health Premier Plan MMAI Inc. | ..IL | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 15805 | 47-3850677 | | | | Aetna Health of Ohio Inc. | ..OH | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 15616 | 80-0629718 | | | | Aetna Better Health, Inc. | ..LA | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 80-0671703 | | | | Aetna Florida Inc. | ..FL | ..NIA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 14229 | 45-2764938 | | | | Aetna Better Health Inc. | ..OH | ..RE | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 15611 | 46-3203088 | | | | Aetna Better Health Inc. | ..NJ | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 15919 | 81-1143850 | | | | Aetna Better Health of Oklahoma Inc. | ..OK | ..IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 04-2708160 | | | | Aetna Student Health Agency Inc. | ..MA | ..NIA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 73-1702453 | | | | Delaware Physicians Care, Incorporated | ..DE | ..NIA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |
| .0001 | CVS HEALTH GROUP | 00000 | 01-0826783 | | | | Schaller Anderson Medical Administrators, Incorporated | ..DE | ..NIA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | ...NO | ...0 |

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) | * |
| .0001 | CVS HEALTH GROUP | 00000 | 86-0842559 | | | | Aetna Medicaid Administrators LLC | AZ | NIA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 45-2944270 | | | | iTriage, LLC | DE | NIA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 16-1471176 | | | | Prodigy Health Group, Inc. | DE | NIA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 45-4901541 | | | | Aetna ACO Holdings, Inc. | DE | NIA | Aetna Health Holdings, LLC | Ownership | 0.200 | CVS Health Corporation | YES | 2 |
| .0001 | CVS HEALTH GROUP | 00000 | 74-2879984 | | | | Medical Examinations of New York, P.C. | NY | NIA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 12 |
| .0001 | CVS HEALTH GROUP | 00000 | 45-5527797 | | | | Innovation Health Holdings, LLC | DE | NIA | Aetna ACO Holdings, Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 15097 | 46-0674828 | | | | Innovation Health Insurance Company | VA | IA | Innovation Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 15098 | 46-0682197 | | | | Innovation Health Plan, Inc. | VA | IA | Innovation Health Insurance Company | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| | | | | | | | Texas Health + Aetna Health Insurance Holding Company LLC | TX | NIA | Aetna ACO Holdings, Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 13 |
| .0001 | CVS HEALTH GROUP | 95109 | 23-2169745 | | | | Aetna Health Inc. | PA | IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 45-4901541 | | | | Aetna ACO Holdings, Inc. | DE | NIA | Aetna Health Inc. (PA) | Ownership | 39.500 | CVS Health Corporation | YES | 2 |
| .0001 | CVS HEALTH GROUP | 00000 | 20-0438576 | | | | Niagara Re, Inc. | NY | NIA | Prodigy Health Group, Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 52-2200070 | | | | Performax, Inc. | DE | NIA | Prodigy Health Group, Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 87-0632355 | | | | Scrip World, LLC | UT | NIA | Prodigy Health Group, Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 27-1760756 | | | | Precision Benefit Services, Inc. | DE | NIA | Prodigy Health Group, Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 31-1368946 | | | | American Health Holding, Inc. | OH | NIA | Prodigy Health Group, Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 16-1264154 | | | | Meritain Health, Inc. | NY | NIA | Prodigy Health Group, Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 86-0537707 | | | | Adminco, Inc. | AZ | NIA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 86-0527428 | | | | Administrative Enterprises, Inc. | AZ | NIA | Meritain Health, Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 16-1684061 | | | | U.S. Healthcare Holdings, LLC | OH | NIA | Meritain Health, Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 34-1670299 | | | | Prime Net, Inc. | OH | NIA | Meritain Health, Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 34-1348032 | | | | Professional Risk Management, Inc. | OH | NIA | Meritain Health, Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| | | | | | | | Continental Life Insurance Company of Brentwood, Tennessee | TN | IA | Aetna Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 68500 | 62-1181209 | | | | Continental Life Insurance Company of Brentwood, Tennessee | TN | IA | Continental Life Insurance Company of Brentwood, Tennessee | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 12321 | 20-2901054 | | | | American Continental Insurance Company | TN | IA | Aetna Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 60054 | 06-6033492 | | | | Aetna Life Insurance Company | CT | IA | Aetna Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 45-4901541 | | | | Aetna ACO Holdings, Inc. | DE | NIA | Aetna Life Insurance Company | Ownership | 60.300 | CVS Health Corporation | YES | 2 |
| .0001 | CVS HEALTH GROUP | 00000 | 06-1270755 | | | | AHP Holdings, Inc. | CT | NIA | Aetna Life Insurance Company | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 06-1028469 | | | | AE Fourteen, Incorporated | CT | NIA | AHP Holdings, Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 06-1373153 | | | | Aetna Life Assignment Company | CT | NIA | AHP Holdings, Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 20-3678339 | | | | PE Holdings, LLC | CT | NIA | Aetna Life Insurance Company | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 06-1423207 | | | | Aetna Resources L.L.C. | DE | NIA | Aetna Life Insurance Company | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | Canal Place, LLC | DE | NIA | Aetna Life Insurance Company | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 20-3180700 | | | | Aetna Ventures, LLC | DE | NIA | Aetna Life Insurance Company | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 58-2160656 | | | | Coram Clinical Trials, Inc. | DE | NIA | Aetna Life Insurance Company | Ownership | 25.000 | CVS Health Corporation | NO | 7 |
| .0001 | CVS HEALTH GROUP | 00000 | 85-3918720 | | | | CVS Cabot Holdings Inc. | DE | NIA | Coram Clinical Trials, Inc. | Ownership | 99.720 | CVS Health Corporation | NO | 8 |
| .0001 | CVS HEALTH GROUP | 00000 | 85-3918567 | | | | CVS Shaw Holdings Inc. | DE | NIA | Coram Clinical Trials, Inc. | Ownership | 99.720 | CVS Health Corporation | NO | 9 |
| .0001 | CVS HEALTH GROUP | 00000 | 31-1001351 | | | | Omnicare, LLC | DE | NIA | CVS Cabot Holdings Inc | Ownership | 49.860 | CVS Health Corporation | NO | 10 |
| .0001 | CVS HEALTH GROUP | 00000 | 31-1001351 | | | | Omnicare, LLC | DE | NIA | CVS Shaw Holdings Inc | Ownership | 49.860 | CVS Health Corporation | NO | 10 |
| .0001 | CVS HEALTH GROUP | 00000 | 41-2035961 | | | | Aetna Financial Holdings, LLC | DE | NIA | Aetna Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 26-2030792 | | | | Aetna Asset Advisors, LLC | DE | NIA | Aetna Financial Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 23-2354500 | | | | U.S. Healthcare Properties, Inc. | PA | NIA | Aetna Financial Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 38-3704481 | | | | Aetna Capital Management, LLC | DE | NIA | Aetna Financial Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 11-3667142 | | 0001314522 | | Aetna Partners Diversified Fund, LLC | DE | NIA | Aetna Capital Management, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 1 |
| .0001 | CVS HEALTH GROUP | 00000 | 20-0446676 | | | | Aetna Workers' Comp Access, LLC | DE | NIA | Aetna Financial Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 20-0446713 | | | | Aetna Behavioral Health, LLC | DE | NIA | Aetna Financial Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 23-2670015 | | | | Managed Care Coordinators, Inc. | DE | NIA | Aetna Financial Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |

STATEMENT AS OF JUNE 30, 2024 OF THE Aetna Better Health Inc. (an Ohio corporation)

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13 If Control is Owner- ship Provide Percent- age | 14 Ultimate Controlling Entity(ies)/Person(s) | 15 Is an SCA Filing Re- quired? (Yes/No) | 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) | | | | | |
| .0001 | CVS HEALTH GROUP | 00000 | 59-3269144 | | | | Horizon Behavioral Services, LLC | DE | NIA | Aetna Financial Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 61-1193498 | | | | Employee Assistance Services, LLC | KY | NIA | Horizon Behavioral Services, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 33-0052273 | | | | Health and Human Resource Center, Inc. | CA | IA | Horizon Behavioral Services, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 75-2420973 | | | | Resources for Living, LLC | TX | NIA | Horizon Behavioral Services, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 36-3681261 | | | | The Vasquez Group Inc. | IL | NIA | Horizon Behavioral Services, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 22-3178125 | | | | Work and Family Benefits, Inc. | NJ | NIA | Horizon Behavioral Services, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 27-1773021 | | | | FairCost LLC | CT | NIA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 78700 | 06-0876836 | | | | Aetna Health and Life Insurance Company | CT | IA | Aetna Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 72052 | 23-2710210 | | | | Aetna Health Insurance Company | PA | IA | Aetna Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 84450 | 57-0805126 | | | | Aetna Health Insurance Company of New York | NY | IA | Aetna Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 06-1571642 | | | | Aetna International LLC | CT | NIA | Aetna Life Insurance Company | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 98-0211470 | | | | Aetna Life & Casualty (Bermuda) Ltd. | BMU | IA | Aetna International LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 86-1455140 | | | | Aetna International Ex Pat LLC | DE | NIA | Aetna International LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | Aetna Global Benefits (Bermuda) Limited | BMU | NIA | Aetna International LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | Aetna Global Benefits (Europe) Limited | GBR | NIA | Aetna Global Benefits (Bermuda) Limited | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | Goodhealth Worldwide (Asia) Limited | HKG | NIA | Aetna Global Benefits (Bermuda) Limited | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | Aetna Global Benefits Limited | ARE | NIA | Aetna Global Benefits (Bermuda) Limited | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | PT Aetna Global Benefits Indonesia | IDN | NIA | Aetna Global Benefits (Bermuda) Limited | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | Aetna Global Benefits (Middle East) LLC | ARE | NIA | Aetna Global Benefits (Bermuda) Limited | Ownership | 49.000 | CVS Health Corporation | NO | 3 |
| | | | | | | | Aetna Global Benefits (Asia Pacific) Limited | | | | | | | | |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | | HKG | NIA | Aetna Global Benefits (Bermuda) Limited | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | PT Aetna Management Consulting | IDN | NIA | Aetna International LLC Aetna Global Benefits (Asia Pacific) | Ownership | 77.000 | CVS Health Corporation | NO | 0 |
| | | | | | | | | | | | | | | | |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | PT Aetna Management Consulting | IDN | NIA | Limited | Ownership | 23.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | Aetna Global Benefits (UK) Limited | GBR | NIA | Aetna Global Benefits (Bermuda) Limited | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | Aetna Insurance Company Limited | GBR | IA | Aetna Global Benefits (Bermuda) Limited | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | Aetna Health Company of Europe DAC | IRL | IA | Aetna International LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| | | | | | | | Aetna (Shanghai) Enterprise Services Co. Ltd. | | | | | | | | |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | | CHN | NIA | Aetna International LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | Aetna Global Benefits (Singapore) PTE. LTD. | SGP | NIA | Aetna International LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 22-2578985 | | | | AUSHC Holdings, Inc. | CT | NIA | Aetna Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | | | | | Aetna Insurance (Hong Kong) Limited | HKG | IA | Aetna International LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 06-1182176 | | | | PHPSNE Parent Corporation | DE | NIA | AUSHC Holdings, Inc. | Ownership | 55.000 | CVS Health Corporation | NO | 4 |
| .0001 | CVS HEALTH GROUP | 00000 | 52-2182411 | | | | Active Health Management, Inc. | DE | NIA | Aetna Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 47-0970432 | | | | Health Data & Management Solutions, Inc. | DE | NIA | Active Health Management, Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 13980 | 27-2192415 | | | | Health Re, Inc. | VT | IA | Aetna Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 81-0579372 | | | | Phoenix Data Solutions LLC | DE | NIA | Aetna Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 51-0029326 | | | | ASI Wings, LLC | DE | NIA | Aetna Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 47-4556274 | | | | Echo Merger Sub, Inc. | DE | NIA | Aetna Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 47-4547145 | | | | Aetna Corporate Services, LLC | DE | NIA | Aetna Inc. | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 85-3918720 | | | | CVS Cabot Holdings Inc. | DE | NIA | Aetna Inc. | Ownership | 0.280 | CVS Health Corporation | NO | 8 |
| .0001 | CVS HEALTH GROUP | 00000 | 85-3918567 | | | | CVS Shaw Holdings Inc. | DE | NIA | Aetna Inc. | Ownership | 0.280 | CVS Health Corporation | NO | 9 |
| .0001 | CVS HEALTH GROUP | 00000 | 31-1001351 | | | | Omnicare, LLC | DE | NIA | Aetna Inc. | Ownership | 0.280 | CVS Health Corporation | NO | 10 |
| .0001 | CVS HEALTH GROUP | 81973 | 75-1296086 | | | | Coventry Health and Life Insurance Company | MO | IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| | | | | | | | Aetna Better Health of Kentucky Insurance Company | | | | | | | | |
| .0001 | CVS HEALTH GROUP | 15761 | 47-3279217 | | | | | KY | IA | | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 00000 | 81-4345344 | | | | Aetna Network Services LLC | CT | NIA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |
| .0001 | CVS HEALTH GROUP | 95241 | 42-1244752 | | | | Aetna Health of Iowa Inc. | IA | IA | Aetna Health Holdings, LLC | Ownership | 100.000 | CVS Health Corporation | NO | 0 |

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13 If Control is Owner- ship Provide Percent- age | 14 Ultimate Controlling Entity(ies)/Person(s) | 15 Is an SCA Filing Re- quired? (Yes/No) | 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 | Rela- tion- ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | | | | | |
| .0001... | CVS HEALTH GROUP | 95925 | 42-1308659 .. | | | | Coventry Health Care of Nebraska, Inc. | ..NE..... | ..IA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 47-2049117 .. | | | | Aetna Risk Assurance Company of Connecticut Inc. | ..CT..... | ..IA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 95173 | 74-2381406 .. | | | | Aetna Health Inc. | ..LA..... | ..IA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 47-0854096 .. | | | | Coventry Prescription Management Services, Inc. | ..NV..... | ..NIA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 16148 | 81-3564875 .. | | | | Aetna Better Health of Nevada Inc. | ..NV..... | ..NIA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 96555 | 54-1576305 .. | | | | Coventry Health Care of Virginia, Inc. | ..VA..... | ..IA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 96377 | 43-1372307 .. | | | | Coventry Health Care of Missouri, Inc. | ..MO..... | ..IA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 95318 | 43-1702094 .. | | | | Aetna Better Health of Missouri LLC | ..MO..... | ..IA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 95408 | 55-0712129 .. | | | | Coventry Health Care of West Virginia, Inc. | ..WV..... | ..IA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 62-1411933 .. | | | | Coventry HealthCare Management Corporation .. | ..DE..... | ..NIA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 15827 | 47-4352768 .. | | | | Aetna HealthAssurance Pennsylvania, Inc. | ..PA..... | ..IA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 95489 | 48-0840330 .. | | | | Coventry Health Care of Kansas, Inc. | ..KS..... | ..IA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 16072 | 81-3370401 .. | | | | Aetna Better Health of Kansas Inc. | ..KS..... | ..IA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 12193 | 20-1052897 .. | | | | Aetna Better Health of Michigan Inc. | ..MI..... | ..IA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 95407 | 87-0345631 .. | | | | Aetna Health of Utah Inc. | ..UT..... | ..IA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 20-4416606 .. | | | | Aetna Better Health of Tennessee Inc. | ..TN..... | ..NIA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 74160 | 37-1241037 .. | | | | Coventry Health Care of Illinois, Inc. | ..IL..... | ..IA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 20-8070994 .. | | | | Coventry Health Care National Accounts, Inc. | ..DE..... | ..NIA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 20-5185442 .. | | | | Coventry Health Care National Network, Inc. | ..DE..... | ..NIA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 26-1293772 .. | | | | Coventry Consumer Advantage, Inc. | ..DE..... | ..NIA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 20-1736437 .. | | | | First Health Group Corp. | ..DE..... | ..NIA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 90328 | 38-2242132 .. | | | | First Health Life & Health Insurance Company | ..TX..... | ..IA..... | First Health Group Corp. | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 91-1832429 .. | | | | First Choice of the Midwest LLC | ..SD..... | ..NIA..... | First Health Group Corp. | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 52-1320522 .. | | | | Claims Administration Corp. | ..MD..... | ..NIA..... | First Health Group Corp. | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 20-1130063 .. | | | | Florida Health Plan Administrators, LLC | ..FL..... | ..NIA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 95114 | 65-0986441 .. | | | | Aetna Better Health of Florida Inc. | ..FL..... | ..IA..... | Florida Health Plan Administrators, LLC ... | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 95266 | 84-4152759 .. | | | | Hella Group LLC | ..NY..... | ..NIA..... | Florida Health Plan Administrators, LLC ... | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 86-3013502 .. | | | | Audomo Insurance Services LLC | ..DE..... | ..NIA..... | Hella Group LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 88-1714855 .. | | | | Hella Media LLC | ..DE..... | ..NIA..... | Hella Group LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 59-3750548 .. | | | | Attain Insurance Services Inc. | ..FL..... | ..NIA..... | Florida Health Plan Administrators, LLC ... | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 26-1582982 .. | | | | MHNet Specialty Services, LLC | ..MD..... | ..NIA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 37-1448790 .. | | | | Mental Health Network of New York IPA, Inc. | ..NY..... | ..NIA..... | MHNet Specialty Services, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 72-1106596 .. | | | | Mental Health Associates, Inc. | ..LA..... | ..NIA..... | MHNet Specialty Services, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 16242 | 81-5030233 .. | | | | Aetna Better Health of Washington, Inc. | ..WA..... | ..IA..... | Aetna Health Holdings, LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 81-5212760 .. | | | | Banner Health and Aetna Health Insurance Holding Company LLC | ..DE..... | ..NIA..... | Aetna ACO Holdings, Inc. | Ownership..... | 50.000 ... | CVS Health Corporation | ...NO..... | ...5 |
| .0001... | CVS HEALTH GROUP | 16058 | 81-5281115 .. | | | | Banner Health and Aetna Health Insurance Company | ..AZ..... | ..IA..... | Banner Health and Aetna Health Insurance Holding Company LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 16059 | 81-5290023 .. | | | | Banner Health and Aetna Health Plan Inc. | ..AZ..... | ..IA..... | Banner Health and Aetna Health Insurance Company | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 00000 | 81-5112888 .. | | | | Allina Health and Aetna Health Insurance Holding Company LLC | ..DE..... | ..NIA..... | Aetna ACO Holdings, Inc. | Ownership..... | 50.000 ... | CVS Health Corporation | ...NO..... | ...6 |
| .0001... | CVS HEALTH GROUP | 16194 | 82-2091197 .. | | | | Allina Health and Aetna Insurance Company ... | ..MN..... | ..IA..... | Allina Health and Aetna Health Insurance Holding Company LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |
| .0001... | CVS HEALTH GROUP | 17352 | 87-2843387 .. | | | | Allina Health and Aetna Health Plan Inc. | ..MN..... | ..IA..... | Allina Health and Aetna Health Insurance Holding Company LLC | Ownership..... | 100.000 ... | CVS Health Corporation | ...NO..... | ...0 |

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 | Rela-tion-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) | * |
| . 0001 ... | CVS HEALTH GROUP | 00000 | 82-2171057 .. | ..... | ..... | ..... | Sutter Health and Aetna Insurance Holding Company LLC | .. DE..... | NIA..... | Aetna ACO Holdings, Inc. | Ownership..... | .. 100.000 ... | CVS Health Corporation | NO..... | 0 |
| . 0001 ... | CVS HEALTH GROUP | 00000 | 82-2560624 .. | ..... | ..... | ..... | Sutter Health and Aetna Administrative Services LLC | .. DE..... | NIA..... | Sutter Health and Aetna Insurance Holding Company LLC | Ownership..... | .. 100.000 ... | CVS Health Corporation | NO..... | 0 |
| . 0001 ... | CVS HEALTH GROUP | 16979 | 82-2567822 .. | ..... | ..... | ..... | Sutter Health and Aetna Insurance Company ... | .. CA..... | IA..... | Sutter Health and Aetna Insurance Holding Company LLC | Ownership..... | .. 100.000 ... | CVS Health Corporation | NO..... | 0 |
| . 0001 ... | CVS HEALTH GROUP | 16558 | 82-3333789 .. | ..... | ..... | ..... | Aetna Better Health of North Carolina Inc. .. | .. NC..... | IA..... | Aetna Health Holdings, LLC | Ownership..... | .. 100.000 ... | CVS Health Corporation | NO..... | 0 |
| . 0001 ... | CVS HEALTH GROUP | 14053 | 27-2186150 .. | ..... | ..... | ..... | Aetna Better Health of Illinois Inc. | .. IL..... | IA..... | Aetna Health Holdings, LLC | Ownership..... | .. 100.000 ... | CVS Health Corporation | NO..... | 0 |
| . 0001 ... | CVS HEALTH GROUP | 00000 | 87-3223066 .. | ..... | ..... | ..... | Aetna Better Health of Indiana Inc. | .. IN..... | NIA..... | Aetna Health Holdings, LLC | Ownership..... | .. 100.000 ... | CVS Health Corporation | NO..... | 0 |
| . 0001 ... | CVS HEALTH GROUP | 00000 ..... | ..... | ..... | ..... | ..... | CVS Health Venture Fund, LP | .. DE..... | NIA..... | Aetna Life Insurance Company | Ownership..... | .. 100.000 ... | CVS Health Corporation | NO..... | 11 |

| Asterisk | Explanation |
|----------|---|
| 1 | Aetna Capital Management, LLC is the managing member of Aetna Partners Diversified Fund, LLC ("APDF"). APDF is a fund of hedge funds and certain other subsidiaries of CVS Health Group invest in this fund, which does not confer any managing or controlling ownership interests in APDF. Aetna Life Insurance Company is the largest investor in APDF and currently owns a majority of the non-managing member interests of APDF. |
| 2 | Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share). |
| 3 | Aetna Global Benefits (Middle East) LLC is also 51% owned by Euro Gulf LLC, Aetna's Nominee. |
| 4 | PHPSNE Parent Corporation is 55% owned by AUSHC Holdings, Inc. The remaining 45% is owned by thirteen different hospitals (non-affiliates) which are shareholders with varying degrees of ownership. |
| 5 | Banner Health and Aetna Health Insurance Holding Company LLC is also 50% owned by Banner Health. |
| 6 | Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health System. |
| 7 | Coram Clinical Trials, Inc. is 75% owned by CVS Pharmacy, Inc. and 25% owned by Aetna Life Insurance Company. |
| 8 | CVS Cabot Holdings Inc is owned 99.72% by Coram Clinical Trials, Inc. and 0.28% owned by Aetna Inc. |
| 9 | CVS Shaw Holdings Inc is owned 99.72% by Coram Clinical Trials, Inc. and 0.28% owned by Aetna Inc. |
| 10 | Omnicare, LLC is 0.28% owned by Aetna Inc. The Company is also owned by CVS Cabot Holdings Inc. and CVS Shaw Holdings Inc., with 49.86% each ownership. |
| 11 | CVS Health Venture Fund, LP is also 0.1% owned by CVS Health Ventures Fund GP, LLC |
| 12 | Medical Examinations of New York, P.C. is owned via a nominee. |
| 13 | Effective July 1, 2024, Texas Health + Aetna Health Insurance Holding Company was dissolved. |

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

| | Response |
|--|----------|
| 1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement? | NO |
| AUGUST FILING | |
| 2. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter. | YES |

Explanation:

1. The data for this supplement is not required to be filed.

Bar Code:

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



OVERFLOW PAGE FOR WRITE-INS

NONE

SCHEDULE A - VERIFICATION

Real Estate

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

SCHEDULE B - VERIFICATION

Mortgage Loans

| | 1 | 2 |
|---|--------------|---------------------------------|
| | Year to Date | Prior Year Ended December 31 |
| 1. Book value/recorded investment excluding accrued interest, December 31 of prior year | 2,810,388 | 3,487,758 |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | |
| 2.2 Additional investment made after acquisition | | |
| 3. Capitalized deferred interest and other | | 0 |
| 4. Accrual of discount | | 0 |
| 5. Unrealized valuation increase/(decrease) | | 0 |
| 6. Total gain (loss) on disposals | | 0 |
| 7. Deduct amounts received on disposals | 340,319 | 654,927 |
| 8. Deduct amortization of premium and mortgage interest points and commitment fees | (3,731) | 22,443 |
| 9. Total foreign exchange change in book value/recorded investment excluding accrued interest | | 0 |
| 10. Deduct current year's other than temporary impairment recognized | | 0 |
| 11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) | 2,473,800 | 2,810,388 |
| 12. Total valuation allowance | | |
| 13. Subtotal (Line 11 plus Line 12) | 2,473,800 | 2,810,388 |
| 14. Deduct total nonadmitted amounts | | 0 |
| 15. Statement value at end of current period (Line 13 minus Line 14) | 2,473,800 | 2,810,388 |

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

| | 1 | 2 |
|--|--------------|---------------------------------|
| | Year to Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year | 26,115,981 | 24,186,741 |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | |
| 2.2 Additional investment made after acquisition | | |
| 3. Capitalized deferred interest and other | 1,437,262 | 1,929,240 |
| 4. Accrual of discount | | 0 |
| 5. Unrealized valuation increase/(decrease) | | 0 |
| 6. Total gain (loss) on disposals | | |
| 7. Deduct amounts received on disposals | | |
| 8. Deduct amortization of premium and depreciation | | 0 |
| 9. Total foreign exchange change in book/adjusted carrying value | | 0 |
| 10. Deduct current year's other than temporary impairment recognized | | 0 |
| 11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) | 27,553,243 | 26,115,981 |
| 12. Deduct total nonadmitted amounts | | |
| 13. Statement value at end of current period (Line 11 minus Line 12) | 27,553,243 | 26,115,981 |

SCHEDULE D - VERIFICATION

Bonds and Stocks

| | 1 | 2 |
|---|--------------|---------------------------------|
| | Year to Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year | 203,542,612 | 230,226,310 |
| 2. Cost of bonds and stocks acquired | 44,127,110 | 51,932,314 |
| 3. Accrual of discount | 262,124 | 368,762 |
| 4. Unrealized valuation increase/(decrease) | 0 | |
| 5. Total gain (loss) on disposals | (1,097,346) | (2,337,488) |
| 6. Deduct consideration for bonds and stocks disposed of | 60,627,127 | 73,613,680 |
| 7. Deduct amortization of premium | 382,051 | 1,217,756 |
| 8. Total foreign exchange change in book/adjusted carrying value | 0 | |
| 9. Deduct current year's other than temporary impairment recognized | 613,502 | 1,751,445 |
| 10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees | 30,000 | (64,405) |
| 11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) | 185,241,820 | 203,542,612 |
| 12. Deduct total nonadmitted amounts | 0 | |
| 13. Statement value at end of current period (Line 11 minus Line 12) | 185,241,820 | 203,542,612 |

STATEMENT AS OF JUNE 30, 2024 OF THE Aetna Better Health Inc. (an Ohio corporation)

SCHEDULE D - PART 1B

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

| NAIC Designation | 1 Book/Adjusted Carrying Value Beginning of Current Quarter | 2 Acquisitions During Current Quarter | 3 Dispositions During Current Quarter | 4 Non-Trading Activity During Current Quarter | 5 Book/Adjusted Carrying Value End of First Quarter | 6 Book/Adjusted Carrying Value End of Second Quarter | 7 Book/Adjusted Carrying Value End of Third Quarter | 8 Book/Adjusted Carrying Value December 31 Prior Year |
|-------------------------------------|---|--|--|--|---|--|---|---|
| BONDS | | | | | | | | |
| 1. NAIC 1 (a) | 238,101,045 | 104,150,683 | 209,699,748 | 1,703,237 | 238,101,045 | 134,255,217 | 0 | 229,516,275 |
| 2. NAIC 2 (a) | 53,759,672 | 1,000,000 | 1,777,036 | (1,996,033) | 53,759,672 | 50,986,603 | 0 | 41,830,884 |
| 3. NAIC 3 (a) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 4. NAIC 4 (a) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 5. NAIC 5 (a) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 6. NAIC 6 (a) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 7. Total Bonds | 291,860,717 | 105,150,683 | 211,476,784 | (292,796) | 291,860,717 | 185,241,820 | 0 | 271,347,159 |
| PREFERRED STOCK | | | | | | | | |
| 8. NAIC 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9. NAIC 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 10. NAIC 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 11. NAIC 4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 12. NAIC 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 13. NAIC 6 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 14. Total Preferred Stock | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 15. Total Bonds and Preferred Stock | 291,860,717 | 105,150,683 | 211,476,784 | (292,796) | 291,860,717 | 185,241,820 | 0 | 271,347,159 |

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

Schedule DA - Part 1 - Short-Term Investments

N O N E

Schedule DA - Verification - Short-Term Investments

N O N E

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

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

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

N O N E

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

N O N E

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

N O N E

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

| | 1 | 2 |
|---|---------------|---------------------------------|
| | Year To Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year | 67,814,620 | 66,419,116 |
| 2. Cost of cash equivalents acquired | 1,830,913,795 | 3,125,383,090 |
| 3. Accrual of discount | 1,694,344 | 4,224,159 |
| 4. Unrealized valuation increase/(decrease) | 0 | 0 |
| 5. Total gain (loss) on disposals | (111) | (101) |
| 6. Deduct consideration received on disposals | 1,758,460,684 | 3,128,211,644 |
| 7. Deduct amortization of premium | 0 | 0 |
| 8. Total foreign exchange change in book/adjusted carrying value | 0 | 0 |
| 9. Deduct current year's other than temporary impairment recognized | 0 | 0 |
| 10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) | 141,961,964 | 67,814,620 |
| 11. Deduct total nonadmitted amounts | 0 | 0 |
| 12. Statement value at end of current period (Line 10 minus Line 11) | 141,961,964 | 67,814,620 |

STATEMENT AS OF JUNE 30, 2024 OF THE Aetna Better Health Inc. (an Ohio corporation)

SCHEDULE A - PART 2

Showing All Real Estate ACQUIRED AND ADDITIONS MADE During the Current Quarter

[illegible]

SCHEDULE A - PART 3

Showing All Real Estate DISPOSED During the Quarter, Including Payments During the Final Year on "Sales Under Contract"

[illegible]

SCHEDULE B - PART 2

[illegible][illegible]

STATEMENT AS OF JUNE 30, 2024 OF THE Aetna Better Health Inc. (an Ohio corporation)

SCHEDULE BA - PART 2

Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter

| 1 | 2 | Location | | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | | |
|----------------------|---------------------|----------|---|-----------------------------------|---|--------------------------|-------------------|------------------------------------|--|------------------------|--------------------------------------|-------------------------|--|--|
| CUSIP Identification | Name or Description | 3 | 4 | Name of Vendor or General Partner | NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol | Date Originally Acquired | Type and Strategy | Actual Cost at Time of Acquisition | Additional Investment Made After Acquisition | Amount of Encumbrances | Commitment for Additional Investment | Percentage of Ownership | | |
| | | | | NONE | | | | | | | | | | |
| | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | |
| 6299999 - Totals | | | | | | | | | | | | XXX | | |

SCHEDULE BA - PART 3

Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter

[illegible]

SCHEDULE D - PART 3

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|--|---------|-----------------------|-------------------------|---------------------------|-----------------------|-----------------------|---|---|
| CUSIP Identification | Description | Foreign | Date Acquired | Name of Vendor | Number of Shares of Stock | Actual Cost | Par Value | Paid for Accrued Interest and Dividends | NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol |
| 64966S-EL-6 | NEW YORK NY TXBL-REF-FISCAL 2021-SER D REF 0.832% 08/01/24 ..... | ..... | .....04/22/2024 | Tax Free Exchange ..... | ..... | ..... 75,000 | 75,000 | 140 | 1.C Z |
| 64966S-EW-2 | NEW YORK NY TXBL-REF-FSOL 2021 SER D UNREF 0.832% 08/01/24 ..... | ..... | .....04/22/2024 | Tax Free Exchange ..... | ..... | ..... 925,000 | 925,000 | 1,732 | 1.C FE |
| 0709999999. Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions | | | | | | 1,000,000 | 1,000,000 | 1,872 | XXX |
| 62954W-AM-7 | NTT FINANCE CORP SR UNSECURED 5.110% 07/02/29 | D..... |06/25/2024 | CHASE SECURITIES ..... | ..... | ..... 1,000,000 | 1,000,000 | 0 | 1.F FE |
| 65535H-BR-9 | NOMURA HOLDINGS INC SR UNSECURED 5.594% 07/02/27 | D..... |06/27/2024 | NOMURA SECURITIES ..... | ..... | ..... 1,000,000 | 1,000,000 | 0 | 2.A Z |
| 1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) | | | | | | 2,000,000 | 2,000,000 | 0 | XXX |
| 2509999997. Total - Bonds - Part 3 | | | | | | 3,000,000 | 3,000,000 | 1,872 | XXX |
| 2509999998. Total - Bonds - Part 5 | | | | | | XXX | XXX | XXX | XXX |
| 2509999999. Total - Bonds | | | | | | 3,000,000 | 3,000,000 | 1,872 | XXX |
| 4509999997. Total - Preferred Stocks - Part 3 | | | | | | 0 | XXX | 0 | XXX |
| 4509999998. Total - Preferred Stocks - Part 5 | | | | | | XXX | XXX | XXX | XXX |
| 4509999999. Total - Preferred Stocks | | | | | | 0 | XXX | 0 | XXX |
| 5989999997. Total - Common Stocks - Part 3 | | | | | | 0 | XXX | 0 | XXX |
| 5989999998. Total - Common Stocks - Part 5 | | | | | | XXX | XXX | XXX | XXX |
| 5989999999. Total - Common Stocks | | | | | | 0 | XXX | 0 | XXX |
| 5999999999. Total - Preferred and Common Stocks | | | | | | 0 | XXX | 0 | XXX |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 6009999999 - Totals | | | | | | 3,000,000 | XXX | 1,872 | XXX |

STATEMENT AS OF JUNE 30, 2024 OF THE Aetna Better Health Inc. (an Ohio corporation)

SCHEDULE D - PART 4

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Change In Book/Adjusted Carrying Value | | | | | 16 | 17 | 18 | 19 | 20 | 21 | 22 | |
|---|--|--------------|------------------|---------------------------------|---------------------------------|--------------------|------------|----------------|--|--|--|---|---|---|---|--|---|-------------------------------------|---|--|--|-------|
| | | | | | | | | | | 11 | 12 | 13 | 14 | 15 | | | | | | | | |
| CUSIP Identification | Description | For- eign | Disposal Date | Name of Purchaser | Number of Shares of Stock | Consid- eration | Par Value | Actual Cost | Prior Year Book/ Adjusted Carrying Value | Unrealized Valuation Increase/ (Decrease) | Current Year's (Amor- tization)/ Accretion | Current Year's Other Than Temporary Impairment Recogn- ized | Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13) | Total Foreign Exchange Change in Book /Adjusted Carrying Value | Book/ Adjusted Carrying Value at Disposal Date | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Bond Interest/ Stock Dividends Received During Year | Stated Con- tractual Maturity Date | NAIC Desig- nation, NAIC Desig- nation Modifier and SVO Admini- strative Symbol | |
| ..91282C-BC-4 | US TREASURY NOTE/BOND 0.375% 12/31/25 ..... | ..... | 04/26/2024 | Strategas Securities, LLC ..... | ..... | 2,776,172 | 3,000,000 | 2,904,141 | 2,951,597 |0 |7,841 |0 |7,841 |0 |2,959,438 |0 |(183,266) |(183,266) |3,709 | 12/31/2025 | 1.A | ..... |
| ..91282C-JX-0 | US TREASURY NOTE/BOND 4.000% 01/31/31 ..... | ..... | 04/11/2024 | MIZUHO SECURITIES USA ..... | ..... | 2,412,500 | 2,500,000 | 2,513,672 |0 |0 |(446) |0 |(446) |0 |2,513,226 |0 |(100,726) |(100,726) |19,780 | 01/31/2031 | 1.A | ..... |
| 0109999999. Subtotal - Bonds - U.S. Governments | | | | | | 5,188,672 | 5,500,000 | 5,417,813 | 2,951,597 | 0 | 7,395 | 0 | 7,395 | 0 | 5,472,664 | 0 | (283,992) | (283,992) | 23,489 | XXX | XXX | |
| ..13063C-RT-9 | CALIFORNIA ST REF 5.000% 03/01/28 ..... | ..... | 06/13/2024 | BARCLAY INVESTMENTS ..... | ..... | 5,052,150 | 5,000,000 | 5,964,000 | 5,126,925 |0 |(48,869) |0 |(48,869) |0 |5,078,057 |0 |(25,907) |(25,907) |196,528 | 03/01/2028 | 1.C FE | ..... |
| ..25476F-SR-0 | COLUMBIA DIST OF SER D 5.000% 06/01/27 ..... | ..... | 06/13/2024 | RAMIREZ ..... | ..... | 3,632,615 | 3,500,000 | 4,121,180 | 3,701,001 |0 |(30,063) |0 |(30,063) |0 |3,670,938 |0 |(38,323) |(38,323) |93,819 | 06/01/2027 | 1.B FE | ..... |
| ..57582R-3G-9 | MASSACHUSETTS STATE OF REF-SER B 5.000% 05/01/38 ..... | ..... | 06/04/2024 | Hilltop Securities ..... | ..... | 673,452 | 600,000 | 687,486 | 683,862 |0 |(3,310) |0 |(3,310) |0 |680,553 |0 |(7,101) |(7,101) |17,833 | 05/01/2038 | 1.B FE | ..... |
| ..880541-E4-5 | TENNESSEE STATE OF REF-SER A 4.000% 11/01/39 ..... | ..... | 05/14/2024 | Raymond James ..... | ..... | 1,634,115 | 1,580,000 | 1,971,003 | 1,882,407 |0 |(13,716) |0 |(13,716) |0 |1,868,691 |0 |(234,576) |(234,576) |34,233 | 11/01/2039 | 1.A FE | ..... |
| 0509999999. Subtotal - Bonds - U.S. States, Territories and Possessions | | | | | | 10,992,332 | 10,680,000 | 12,743,669 | 11,394,195 | 0 | (95,958) | 0 | (95,958) | 0 | 11,298,239 | 0 | (305,907) | (305,907) | 342,413 | XXX | XXX | |
| ..399262-LV-4 | GROSSMONT CA UNION HIGH SCH REF-ELECTION 2008 3.000% 08/01/33 ..... | ..... | 05/08/2024 | RAMIREZ ..... | ..... | 2,386,850 | 2,500,000 | 2,456,750 | 2,473,131 |0 |834 |0 |834 |0 |2,473,966 |0 |(87,116) |(87,116) |58,125 | 08/01/2033 | 1.C FE | ..... |
| ..64966Q-RH-5 | NEW YORK NY TXBL-REF-FISCAL 2021-SER D 0.832% 08/01/24 ..... | ..... | 04/22/2024 | Tax Free Exchange ..... | ..... | 1,000,000 | 1,000,000 | 1,000,000 | 1,000,000 |0 |0 |0 |0 |0 |1,000,000 |0 |0 |0 |6,032 | 08/01/2024 | 1.C FE | ..... |
| 0709999999. Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions | | | | | | 3,386,850 | 3,500,000 | 3,456,750 | 3,473,131 | 0 | 834 | 0 | 834 | 0 | 3,473,966 | 0 | (87,116) | (87,116) | 64,157 | XXX | XXX | |
| ..3128MJ-YG-9 | FED HOME LOAN MTGE CORP GOLD POOL NO 3.000% 06/01/46 ..... | ..... | 06/01/2024 | Paydown ..... | ..... | 8,854 | 8,854 | 8,556 | 8,606 |0 |249 |0 |249 |0 |8,854 |0 |0 |0 |112 | 06/01/2046 | 1.A | ..... |
| ..3132DM-BB-6 | FED NATL MTGE ASSN POOL NO FR SD0866 3.500% 02/01/52 ..... | ..... | 06/01/2024 | Paydown ..... | ..... | 75,974 | 75,974 | 79,601 | 79,391 |0 |(3,417) |0 |(3,417) |0 |75,974 |0 |0 |0 |1,089 | 02/01/2052 | 1.A | ..... |
| ..3132DV-4G-7 | FNMA POOL FR SD8023 2.500% 11/01/49 ..... | ..... | 06/01/2024 | Paydown ..... | ..... | 11,569 | 11,569 | 11,721 | 11,701 |0 |(133) |0 |(133) |0 |11,569 |0 |0 |0 |123 | 11/01/2049 | 1.A | ..... |
| ..3138EQ-GL-0 | FED NATL MTGE ASSN POOL NO AL7402 3.000% 09/01/30 ..... | ..... | 06/01/2024 | Paydown ..... | ..... | 53,012 | 53,012 | 54,942 | 53,858 |0 |(846) |0 |(846) |0 |53,012 |0 |0 |0 |682 | 09/01/2030 | 1.A | ..... |
| ..3140J5-3X-5 | FED NATL MTGE ASSN POOL NO BM1713 3.500% 09/01/47 ..... | ..... | 06/01/2024 | Paydown ..... | ..... | 59,467 | 59,467 | 59,077 | 59,117 |0 |349 |0 |349 |0 |59,467 |0 |0 |0 |791 | 09/01/2047 | 1.A | ..... |
| ..3140MG-LU-3 | FED NATL MTGE ASSN POOL NO FN BV3038 2.500% 02/01/52 ..... | ..... | 06/01/2024 | Paydown ..... | ..... | 40,465 | 40,465 | 40,395 | 40,395 |0 |70 |0 |70 |0 |40,465 |0 |0 |0 |451 | 02/01/2052 | 1.A | ..... |
| ..3140QL-MX-1 | FED NATL MTGE ASSN POOL NO FN CB1273 2.000% 08/01/51 ..... | ..... | 06/01/2024 | Paydown ..... | ..... | 44,859 | 44,859 | 34,561 | 34,634 |0 |10,225 |0 |10,225 |0 |44,859 |0 |0 |0 |378 | 08/01/2051 | 1.A | ..... |
| ..3140QP-2F-3 | FED NATL MTGE ASSN POOL NO FN CB4373 4.000% 08/01/52 ..... | ..... | 06/01/2024 | Paydown ..... | ..... | 39,529 | 39,529 | 39,680 | 39,670 |0 |(142) |0 |(142) |0 |39,529 |0 |0 |0 |670 | 08/01/2052 | 1.A | ..... |
| ..3140XG-ST-7 | FED NATL MTGE ASSN POOL NO FN FS1429 3.500% 04/01/52 ..... | ..... | 06/01/2024 | Paydown ..... | ..... | 37,761 | 37,761 | 36,675 | 36,720 |0 |1,041 |0 |1,041 |0 |37,761 |0 |0 |0 |519 | 04/01/2052 | 1.A | ..... |
| ..3140XG-UG-1 | FED NATL MTGE ASSN POOL NO FN FS1501 4.000% 08/01/51 ..... | ..... | 06/01/2024 | Paydown ..... | ..... | 39,812 | 39,812 | 40,061 | 40,045 |0 |(232) |0 |(232) |0 |39,812 |0 |0 |0 |668 | 08/01/2051 | 1.A | ..... |
| ..31418B-6G-6 | FED NATL MTGE ASSN POOL NO MA2670 3.000% 07/01/46 ..... | ..... | 06/01/2024 | Paydown ..... | ..... | 12,944 | 12,944 | 12,452 | 12,532 |0 |412 |0 |412 |0 |12,944 |0 |0 |0 |163 | 07/01/2046 | 1.A | ..... |
| ..762196-C3-5 | RHODE ISLAND ST HLTH & EDUCNL SOCIAL BOND- PUBLIC SCHOOLS REV 4.000% 05/15/36 ..... | ..... | 05/14/2024 | OPPENHEIMER & CO. .... | ..... | 507,935 | 500,000 | 471,050 | 473,029 |0 |636 |0 |636 |0 |473,665 |0 |34,270 |34,270 |10,056 | 05/15/2036 | 1.C FE | ..... |
| ..765433-KG-1 | RICHMOND VA PUBLIC UTILITY REF-REV 5.000% 01/15/29 ..... | ..... | 04/03/2024 | SIEBERT, BRANDFORD & CO ..... | ..... | 8,482,167 | 8,230,000 | 9,666,135 | 8,586,247 |0 |(44,766) |0 |(44,766) |0 |8,541,480 |0 |(59,313) |(59,313) |297,194 | 01/15/2029 | 1.C FE | ..... |
| 0909999999. Subtotal - Bonds - U.S. Special Revenues | | | | | | 9,414,348 | 9,154,246 | 10,554,906 | 9,475,945 | 0 | (36,554) | 0 | (36,554) | 0 | 9,439,391 | 0 | (25,043) | (25,043) | 312,896 | XXX | XXX | |
| ..02589B-AA-8 | AMERICAN EXPRESS CREDIT ACCOUN SERIES 22-1 CLASS A 2.210% 03/15/27 ..... | ..... | 05/13/2024 | US BANCORP ..... | ..... | 1,946,250 | 2,000,000 | 1,941,414 | 1,934,505 |0 |20,581 |6,053 |14,528 |0 |1,949,033 |0 |(2,783) |(2,783) |18,417 | 03/15/2027 | 1.A FE | ..... |
| ..38869P-AN-4 | GRAPHIC PACKAGING INTL SECURED 0.821% 04/15/24 ..... | ..... | 04/15/2024 | Maturity ..... | ..... | 1,000,000 | 1,000,000 | 1,000,000 | 1,000,000 |0 |0 |0 |0 |0 |1,000,000 |0 |0 |0 |4,105 | 04/15/2024 | 2.C FE | ..... |
| ..48252K-AA-7 | KKR FINANCIAL CLO LTD SERIES 21 CLASS A 6.591% 04/15/31 ..... | ..... | 04/15/2024 | Paydown ..... | ..... | 260,316 | 260,316 | 257,323 | 257,267 |0 |3,050 |0 |3,050 |0 |260,316 |0 |0 |0 |8,707 | 04/15/2031 | 1.A FE | ..... |
| ..59156R-BH-0 | METLIFE INC SR UNSECURED 3.600% 04/10/24 ..... | ..... | 04/10/2024 | Maturity ..... | ..... | 1,500,000 | 1,500,000 | 1,504,605 | 1,500,115 |0 |(115) |0 |(115) |0 |1,500,000 |0 |0 |0 |27,000 | 04/10/2024 | 1.G FE | ..... |
| ..67421Q-AA-0 | CRESTWOOD MID PARTNER LP SR UNSECURED 8.000% 04/01/29 ..... | ..... | 04/15/2024 | Call 104.0000 ..... | ..... | 780,000 | 750,000 | 778,125 |0 |0 |(1,089) |0 |(1,089) |0 |777,036 |0 |(27,036) |(27,036) |62,333 | 04/01/2029 | 2.B FE | ..... |
| 1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) | | | | | | 5,486,566 | 5,510,316 | 5,481,467 | 4,691,887 | 0 | 22,427 | 6,053 | 16,374 | 0 | 5,486,385 | 0 | (29,819) | (29,819) | 120,562 | XXX | XXX | |

STATEMENT AS OF JUNE 30, 2024 OF THE Aetna Better Health Inc. (an Ohio corporation)

SCHEDULE D - PART 4

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Change In Book/Adjusted Carrying Value | | | | | 16 | 17 | 18 | 19 | 20 | 21 | 22 |
|---|-------------|--------------|------------------|----------------------|---------------------------------|--------------------|------------|----------------|--|--|--|---|---|---|---|--|---|-------------------------------------|---|--|--|
| | | | | | | | | | | 11 | 12 | 13 | 14 | 15 | | | | | | | |
| CUSIP Ident- ification | Description | For- eign | Disposal Date | Name of Purchaser | Number of Shares of Stock | Consid- eration | Par Value | Actual Cost | Prior Year Book/ Adjusted Carrying Value | Unrealized Valuation Increase/ (Decrease) | Current Year's (Amor- tization)/ Accretion | Current Year's Other Than Temporary Impairment Recog- nized | Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13) | Total Foreign Exchange Change in Book /Adjusted Carrying Value | Book/ Adjusted Carrying Value at Disposal Date | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Bond Interest/ Stock Dividends Received During Year | Stated Con- tractual Maturity Date | NAIC Desig- nation, NAIC Desig- nation Modifier and SVO Admini- strative Symbol |
| 2509999997. Total - Bonds - Part 4 | | | | | | 34,468,768 | 34,344,562 | 37,654,605 | 31,986,755 | 0 | (101,856) | 6,053 | (107,909) | 0 | 35,170,645 | 0 | (731,877) | (731,877) | 863,517 | XXX | XXX |
| 2509999998. Total - Bonds - Part 5 | | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 2509999999. Total - Bonds | | | | | | 34,468,768 | 34,344,562 | 37,654,605 | 31,986,755 | 0 | (101,856) | 6,053 | (107,909) | 0 | 35,170,645 | 0 | (731,877) | (731,877) | 863,517 | XXX | XXX |
| 4509999997. Total - Preferred Stocks - Part 4 | | | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX |
| 4509999998. Total - Preferred Stocks - Part 5 | | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 4509999999. Total - Preferred Stocks | | | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX |
| 5989999997. Total - Common Stocks - Part 4 | | | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX |
| 5989999998. Total - Common Stocks - Part 5 | | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 5989999999. Total - Common Stocks | | | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX |
| 5999999999. Total - Preferred and Common Stocks | | | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX |
| 6009999999 - Totals | | | | | | 34,468,768 | XXX | 37,654,605 | 31,986,755 | 0 | (101,856) | 6,053 | (107,909) | 0 | 35,170,645 | 0 | (731,877) | (731,877) | 863,517 | XXX | XXX |

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

Schedule DB - Part B - Section 1 - Futures Contracts Open
N O N E

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

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

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

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

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees
N O N E

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

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

SCHEDULE E - PART 2 - CASH EQUIVALENTS

[illegible]