

Exhibit 15-E

Annual Statements of Aetna Better Health Inc. (a Connecticut corporation) For Years 2014-2016.



HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2016
OF THE CONDITION AND AFFAIRS OF THE

Aetna Better Health Inc. (a Connecticut corporation)

NAIC Group Code 0001 0901 NAIC Company Code 13174 Employer's ID Number 26-2867560
(Current) (Prior)

Organized under the Laws of Connecticut, State of Domicile or Port of Entry CT

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

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

Incorporated/Organized 06/25/2008 Commenced Business 08/01/2008

Statutory Home Office 151 Farmington Avenue Hartford, CT, US 06158
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 1425 Union Meeting Road
(Street and Number)
Blue Bell, PA, US 800-872-3852
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 1425 Union Meeting Road Blue Bell, PA, US
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 151 Farmington Avenue
(Street and Number)
Hartford, CT, US 06158 800-872-3852
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.aetna.com

Statutory Statement Contact Dawn Marie Schoen 215-775-6508
(Name) (Area Code) (Telephone Number)
Aetna.HMOReporting@aetna.com 850-262-7767
(E-mail Address) (FAX Number)

OFFICERS

President Laurie Ann Brubaker # Principal Financial Officer and Controller Dawn Marie Schoen
Secretary Robert Mark Kessler

OTHER

Kevin James Casey, Senior Investment Officer Elaine Rose Cofrancesco, Vice President and Treasurer Gregory Stephen Marino, Vice President
Edward Chung-I Lee, Vice President and Assistant Secretary Steven Matthew Conte, Assistant Controller

DIRECTORS OR TRUSTEES

Debra Jean Bacon Laurie Ann Brubaker # Mary Louise Osborne

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.

Laurie Ann Brubaker
Laurie Ann Brubaker
President

Robert Mark Kessler
Robert Mark Kessler
Secretary

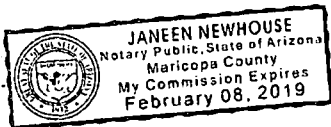
Dawn Marie Schoen
Dawn Marie Schoen
Principal Financial Officer and Controller

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

Subscribed and sworn to before me this

26 day of January 2017

Janeen Newhouse
NOTARY PUBLIC (Seal)



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

Subscribed and sworn to before me this

26 day of January 2017

Janeen Newhouse
NOTARY PUBLIC (Seal)

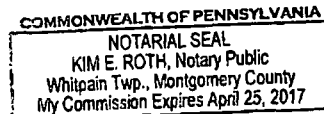


State of..... Pennsylvania
County of..... Montgomery

Subscribed and sworn to before me this

24 day of February, 2017

Kim E. Roth
NOTARY PUBLIC (Seal)



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

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D).....	999,092	0	999,092	1,489,201
2. Stocks (Schedule D):				
2.1 Preferred stocks.....	0	0	0	0
2.2 Common stocks.....	0	0	0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$0 encumbrances).....	0	0	0	0
4.2 Properties held for the production of income (less \$0 encumbrances).....	0	0	0	0
4.3 Properties held for sale (less \$0 encumbrances).....	0	0	0	0
5. Cash (\$380,771, Schedule E - Part 1), cash equivalents (\$1,709,346, Schedule E - Part 2) and short-term investments (\$3,591, Schedule DA).....	2,093,708	0	2,093,708	1,529,601
6. Contract loans, (including \$0 premium notes).....	0	0	0	0
7. Derivatives (Schedule DB).....	0	0	0	0
8. Other invested assets (Schedule BA).....	0	0	0	0
9. Receivables for securities.....	0	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL).....	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).....	3,092,800	0	3,092,800	3,028,802
13. Title plants less \$0 charged off (for Title insurers only).....	0	0	0	0
14. Investment income due and accrued.....	7,563	0	7,563	11,346
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	0	0	0	0
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums).....	0	0	0	0
15.3 Accrued retrospective premiums (\$0) and contracts subject to redetermination (\$0).....	0	0	0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	0	0	0	0
16.2 Funds held by or deposited with reinsured companies.....	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts.....	0	0	0	0
17. Amounts receivable relating to uninsured plans.....	0	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon.....	4,375	0	4,375	3,117
18.2 Net deferred tax asset.....	0	0	0	0
19. Guaranty funds receivable or on deposit.....	0	0	0	0
20. Electronic data processing equipment and software.....	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$0).....	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates.....	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates.....	0	0	0	0
24. Health care (\$0) and other amounts receivable.....	0	0	0	0
25. Aggregate write-ins for other than invested assets.....	0	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	3,104,738	0	3,104,738	3,043,265
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0	0
28. Total (Lines 26 and 27).....	3,104,738	0	3,104,738	3,043,265
DETAILS OF WRITE-INS				
1101.	0	0	0	0
1102.	0	0	0	0
1103.	0	0	0	0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above).....	0	0	0	0
2501.	0	0	0	0
2502.	0	0	0	0
2503.	0	0	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above).....	0	0	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$0 reinsurance ceded).....	0	0	0	15,942
2. Accrued medical incentive pool and bonus amounts.....	0	0	0	0
3. Unpaid claims adjustment expenses.....	0	0	0	0
4. Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act.....	0	0	0	0
5. Aggregate life policy reserves.....	0	0	0	0
6. Property/casualty unearned premium reserves.....	0	0	0	0
7. Aggregate health claim reserves.....	0	0	0	0
8. Premiums received in advance.....	0	0	0	0
9. General expenses due or accrued.....	3,286	0	3,286	1,765
10.1 Current federal and foreign income tax payable and interest thereon (including \$0 on realized capital gains (losses))....	0	0	0	0
10.2 Net deferred tax liability.....	121	0	121	1,451
11. Ceded reinsurance premiums payable.....	0	0	0	0
12. Amounts withheld or retained for the account of others.....	0	0	0	0
13. Remittances and items not allocated.....	0	0	0	0
14. Borrowed money (including \$0 current) and interest thereon \$0 (including \$0 current).....	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates.....	0	0	0	0
16. Derivatives.....	0	0	0	0
17. Payable for securities.....	0	0	0	0
18. Payable for securities lending.....	0	0	0	0
19. Funds held under reinsurance treaties (with \$0 authorized reinsurers, \$0 unauthorized reinsurers and \$0 certified reinsurers).....	0	0	0	0
20. Reinsurance in unauthorized and certified (\$0) companies.....	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates.....	0	0	0	0
22. Liability for amounts held under uninsured plans.....	0	0	0	0
23. Aggregate write-ins for other liabilities (including \$0 current).....	5,595	0	5,595	0
24. Total liabilities (Lines 1 to 23).....	9,012	0	9,012	19,158
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	0	0
26. Common capital stock.....	XXX	XXX	10	10
27. Preferred capital stock.....	XXX	XXX	0	0
28. Gross paid in and contributed surplus.....	XXX	XXX	2,309,990	2,309,990
29. Surplus notes.....	XXX	XXX	0	0
30. Aggregate write-ins for other than special surplus funds.....	XXX	XXX	0	0
31. Unassigned funds (surplus).....	XXX	XXX	785,726	714,107
32. Less treasury stock, at cost:				
32.1 .....0 shares common (value included in Line 26 \$0).....	XXX	XXX	0	0
32.2 .....0 shares preferred (value included in Line 27 \$0).....	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	3,095,726	3,024,107
34. Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	3,104,738	3,043,265
DETAILS OF WRITE-INS				
2301. Escheat Payable.....	5,595	0	5,595	0
2302.	0	0	0	0
2303.	0	0	0	0
2398. Summary of remaining write-ins for Line 23 from overflow page.....	0	0	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above).....	5,595	0	5,595	0
2501.	XXX	XXX	0	0
2502.	XXX	XXX	0	0
2503.	XXX	XXX	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	XXX	XXX	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above).....	XXX	XXX	0	0
3001.	XXX	XXX	0	0
3002.	XXX	XXX	0	0
3003.	XXX	XXX	0	0
3098. Summary of remaining write-ins for Line 30 from overflow page.....	XXX	XXX	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098)(Line 30 above).....	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months.....	XXX	.0	.0
2. Net premium income (including \$0 non-health premium income).....	XXX	.0	.0
3. Change in unearned premium reserves and reserve for rate credits	XXX	.0	.0
4. Fee-for-service (net of \$0 medical expenses).....	XXX	.0	.0
5. Risk revenue	XXX	.0	.0
6. Aggregate write-ins for other health care related revenues	XXX	.0	.0
7. Aggregate write-ins for other non-health revenues	XXX	.0	.0
8. Total revenues (Lines 2 to 7)	XXX	.0	.0
Hospital and Medical:			
9. Hospital/medical benefits .....	.0	(66,642)	(24,643)
10. Other professional services .....	.0	.0	.0
11. Outside referrals .....	.0	.0	.0
12. Emergency room and out-of-area .....	.0	.0	.0
13. Prescription drugs .....	.0	.0	.0
14. Aggregate write-ins for other hospital and medical.....	.0	.0	.0
15. Incentive pool, withhold adjustments and bonus amounts .....	.0	.0	.0
16. Subtotal (Lines 9 to 15).....	.0	(66,642)	(24,643)
Less:			
17. Net reinsurance recoveries .....	.0	.0	.0
18. Total hospital and medical (Lines 16 minus 17) .....	.0	(66,642)	(24,643)
19. Non-health claims (net).....	.0	.0	.0
20. Claims adjustment expenses, including \$0 cost containment expenses .....	.0	.0	.0
21. General administrative expenses .....	.0	4,815	1,527
22. Increase in reserves for life and accident and health contracts (including \$0 increase in reserves for life only) .....	.0	.0	.0
23. Total underwriting deductions (Lines 18 through 22).....	.0	(61,827)	(23,116)
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	61,827	23,116
25. Net investment income earned (Exhibit of Net Investment Income, Line 17) .....	.0	48,350	47,729
26. Net realized capital gains (losses) less capital gains tax of \$219 .....	.0	(213)	.0
27. Net investment gains (losses) (Lines 25 plus 26) .....	.0	48,137	47,729
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$0) (amount charged off \$0 )] .....	.0	.0	.0
29. Aggregate write-ins for other income or expenses .....	.0	.0	.0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	109,964	70,845
31. Federal and foreign income taxes incurred	XXX	39,675	24,222
32. Net income (loss) (Lines 30 minus 31)	XXX	70,289	46,623
DETAILS OF WRITE-INS			
0601.	XXX	.0	.0
0602.	XXX	.0	.0
0603.	XXX	.0	.0
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	.0	.0
0699. Totals (Lines 0601 thru 0603 plus 0698)(Line 6 above)	XXX	.0	.0
0701.	XXX	.0	.0
0702.	XXX	.0	.0
0703.	XXX	.0	.0
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	.0	.0
0799. Totals (Lines 0701 thru 0703 plus 0798)(Line 7 above)	XXX	.0	.0
1401. ....	.0	.0	.0
1402. ....	.0	.0	.0
1403. ....	.0	.0	.0
1498. Summary of remaining write-ins for Line 14 from overflow page .....	.0	.0	.0
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above) .....	.0	.0	.0
2901. ....	.0	.0	.0
2902. ....	.0	.0	.0
2903. ....	.0	.0	.0
2998. Summary of remaining write-ins for Line 29 from overflow page .....	.0	.0	.0
2999. Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above) .....	.0	.0	.0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year	2 Prior Year
CAPITAL AND SURPLUS ACCOUNT		
33. Capital and surplus prior reporting year.....	3,024,107	2,978,057
34. Net income or (loss) from Line 32	70,289	46,623
35. Change in valuation basis of aggregate policy and claim reserves .....	.0	.0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$0 .....	.0	.0
37. Change in net unrealized foreign exchange capital gain or (loss) .....	.0	.0
38. Change in net deferred income tax	1,330	(573)
39. Change in nonadmitted assets .....	.0	.0
40. Change in unauthorized and certified reinsurance .....	.0	.0
41. Change in treasury stock .....	.0	.0
42. Change in surplus notes .....	.0	.0
43. Cumulative effect of changes in accounting principles.....	.0	.0
44. Capital Changes:		
44.1 Paid in .....	.0	.0
44.2 Transferred from surplus (Stock Dividend).....	.0	.0
44.3 Transferred to surplus.....	.0	.0
45. Surplus adjustments:		
45.1 Paid in .....	.0	.0
45.2 Transferred to capital (Stock Dividend).....	.0	.0
45.3 Transferred from capital .....	.0	.0
46. Dividends to stockholders .....	.0	.0
47. Aggregate write-ins for gains or (losses) in surplus .....	.0	.0
48. Net change in capital and surplus (Lines 34 to 47)	71,619	46,050
49. Capital and surplus end of reporting period (Line 33 plus 48)	3,095,726	3,024,107
DETAILS OF WRITE-INS		
4701. ....	.0	.0
4702. ....	.0	.0
4703. ....	.0	.0
4798. Summary of remaining write-ins for Line 47 from overflow page .....	.0	.0
4799. Totals (Lines 4701 thru 4703 plus 4798)(Line 47 above)	0	0

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	0	0
2. Net investment income	51,226	46,099
3. Miscellaneous income	0	0
4. Total (Lines 1 through 3)	51,226	46,099
5. Benefit and loss related payments	(50,700)	(24,643)
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	3,284	0
8. Dividends paid to policyholders	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses)	41,152	13,410
10. Total (Lines 5 through 9)	(6,264)	(11,233)
11. Net cash from operations (Line 4 minus Line 10)	57,490	57,332
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	1,000,000	0
12.2 Stocks	0	0
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	6	0
12.7 Miscellaneous proceeds	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	1,000,006	0
13. Cost of investments acquired (long-term only):		
13.1 Bonds	498,984	0
13.2 Stocks	0	0
13.3 Mortgage loans	0	0
13.4 Real estate	0	0
13.5 Other invested assets	0	0
13.6 Miscellaneous applications	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	498,984	0
14. Net increase (decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	501,022	0
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
16.5 Dividends to stockholders	0	0
16.6 Other cash provided (applied)	5,595	(543,234)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	5,595	(543,234)
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)	564,107	(485,902)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	1,529,601	2,015,503
19.2 End of year (Line 18 plus Line 19.1)	2,093,708	1,529,601
Note: Supplemental disclosures of cash flow information for non-cash transactions:		
20.0001.	0	0
20.0002.	0	0
20.0003.	0	0

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Net premium income.....	0	0	0	0	0	0	0	0	0	0
2. Change in unearned premium reserves and reserve for rate credit.....	0	0	0	0	0	0	0	0	0	0
3. Fee-for-service (net of \$ 0 medical expenses).....	0	0	0	0	0	0	0	0	0	0
4. Risk revenue.....	0	0	0	0	0	0	0	0	0	0
5. Aggregate write-ins for other health care related revenues.....	0	0	0	0	0	0	0	0	0	0
6. Aggregate write-ins for other non-health care related revenues.....	0	0	0	0	0	0	0	0	0	0
7. Total revenues (Lines 1 to 6).....	0	0	0	0	0	0	0	0	0	0
8. Hospital/medical benefits.....	(66,842)	0	0	0	0	0	0	0	0	0
9. Other professional services.....	0	0	0	0	0	0	0	0	0	0
10. Outside referrals.....	0	0	0	0	0	0	0	0	0	0
11. Emergency room and out-of-area.....	0	0	0	0	0	0	0	0	0	0
12. Prescription drugs.....	0	0	0	0	0	0	0	0	0	0
13. Aggregate write-ins for other hospital and medical.....	0	0	0	0	0	0	0	0	0	0
14. Incentive pool, withhold adjustments and bonus amounts.....	0	0	0	0	0	0	0	0	0	0
15. Subtotal (Lines 8 to 14).....	(66,842)	0	0	0	0	0	0	0	0	0
16. Net reinsurance recoveries.....	0	0	0	0	0	0	0	0	0	0
17. Total medical and hospital (Lines 15 minus 16).....	(66,842)	0	0	0	0	0	0	0	0	0
18. Non-health claims (net).....	0	0	0	0	0	0	0	0	0	0
19. Claims adjustment expenses including \$ 0 cost containment expenses.....	0	0	0	0	0	0	0	0	0	0
20. General administrative expenses.....	4,815	0	0	0	0	0	0	0	0	0
21. Increase in reserves for accident and health contracts.....	0	0	0	0	0	0	0	0	0	0
22. Increase in reserves for life contracts.....	0	0	0	0	0	0	0	0	0	0
23. Total underwriting deductions (Lines 17 to 22).....	(61,827)	0	0	0	0	0	0	0	0	0
24. Total underwriting gain or (loss) (Line 7 minus Line 23).....	61,827	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS										
0501.....										
0502.....										
0503.....										
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0	0	0	0	0	0	0	0
Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0	0	0	0	0	0	0	0	0
0601.....										
0602.....										
0603.....										
0698. Summary of remaining write-ins for Line 6 from overflow page.....	0	0	0	0	0	0	0	0	0	0
Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above).....	0	0	0	0	0	0	0	0	0	0
1301.....										
1302.....										
1303.....										
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0	0	0	0	0	0
Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above).....	0	0	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT
 PART 1 - PREMIUMS

Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Ceded	4 Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical)				
2. Medicare Supplement				
3. Dental only				
4. Vision only				
5. Federal Employees Health Benefits Plan				
6. Title XVIII - Medicare				
7. Title XIX - Medicaid				
8. Other health				
9. Health subtotal (Lines 1 through 8)				
10. Life				
11. Property/casualty				
12. Totals (Lines 9 to 11)				

NONE

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Payments during the year:										
1.1 Direct	(50,700)	0	0	0	0	0	0	(50,700)	0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
1.4 Net	(50,700)	0	0	0	0	0	0	(50,700)	0	0
2. Paid medical incentive pools and bonuses	0	0	0	0	0	0	0	0	0	0
3. Claim liability December 31, current year from Part 2A:										
3.1 Direct	0	0	0	0	0	0	0	0	0	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
3.4 Net	0	0	0	0	0	0	0	0	0	0
4. Claim reserve December 31, current year from Part 2D:										
4.1 Direct	0	0	0	0	0	0	0	0	0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
4.4 Net	0	0	0	0	0	0	0	0	0	0
5. Accrued medical incentive pools and bonuses, current year	0	0	0	0	0	0	0	0	0	0
6. Net healthcare receivables (a)	0	0	0	0	0	0	0	0	0	0
7. Amounts recoverable from reinsurers December 31, current year	0	0	0	0	0	0	0	0	0	0
8. Claim liability December 31, prior year from Part 2A:	15,942	0	0	0	0	0	0	15,942	0	0
8.1 Direct	15,942	0	0	0	0	0	0	15,942	0	0
8.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
8.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
8.4 Net	15,942	0	0	0	0	0	0	15,942	0	0
9. Claim reserve December 31, prior year from Part 2D:										
9.1 Direct	0	0	0	0	0	0	0	0	0	0
9.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
9.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
9.4 Net	0	0	0	0	0	0	0	0	0	0
10. Accrued medical incentive pools and bonuses, prior year	0	0	0	0	0	0	0	0	0	0
11. Amounts recoverable from reinsurers December 31, prior year	0	0	0	0	0	0	0	0	0	0
12. Incurred Benefits:										
12.1 Direct	(66,642)	0	0	0	0	0	0	(66,642)	0	0
12.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
12.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
12.4 Net	(66,642)	0	0	0	0	0	0	(66,642)	0	0
13. Incurred medical incentive pools and bonuses	0	0	0	0	0	0	0	0	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Reported in Process of Adjustment:										
1.1 Direct										
1.2 Reinsurance assumed										
1.3 Reinsurance ceded										
1.4 Net										
2. Incurred but Unreported:										
2.1 Direct										
2.2 Reinsurance assumed										
2.3 Reinsurance ceded										
2.4 Net										
3. Amounts Withheld from Paid Claims and Capitations:										
3.1 Direct										
3.2 Reinsurance assumed										
3.3 Reinsurance ceded										
3.4 Net										
4. TOTALS:										
4.1 Direct										
4.2 Reinsurance assumed										
4.3 Reinsurance ceded										
4.4 Net										

NONE

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid During the Year			Claim Reserve and Claim Liability		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 December 31 of Prior Year	4 On Claims Incurred During the Year			
1. Comprehensive (hospital and medical)	0	0	0	0	0	0	0
2. Medicare Supplement	0	0	0	0	0	0	0
3. Dental Only	0	0	0	0	0	0	0
4. Vision Only	0	0	0	0	0	0	0
5. Federal Employees Health Benefits Plan	0	0	0	0	0	0	0
6. Title XVIII - Medicare	0	0	0	0	0	0	0
7. Title XIX - Medicaid	(50,700)	0	0	0	0	(50,700)	15,942
8. Other health	0	0	0	0	0	0	0
9. Health subtotal (Lines 1 to 8)	(50,700)	0	0	0	0	(50,700)	15,942
10. Healthcare receivables (a)	0	0	0	0	0	0	0
11. Other non-health	0	0	0	0	0	0	0
12. Medical incentive pools and bonus amounts	0	0	0	0	0	0	0
13. Totals (Lines 9 - 10 + 11 + 12)	(50,700)	0	0	0	0	(50,700)	15,942

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

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

UNDERWRITING AND INVESTMENT EXHIBIT
PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(000 Omitted)

Section A - Paid Health Claims - Comprehensive (Hospital & Medical)

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior	(830)	(828)	(830)	(830)	(830)
2. 2012	0	0	0	0	0
3. 2013	XXX	XXX	XXX	XXX	XXX
4. 2014	XXX	XXX	XXX	XXX	XXX
5. 2015	XXX	XXX	XXX	XXX	XXX
6. 2016	XXX	XXX	XXX	XXX	XXX

Section B - Incurred Health Claims - Comprehensive (Hospital & Medical)

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior	(830)	(828)	(830)	(830)	(830)
2. 2012	0	0	0	0	0
3. 2013	XXX	XXX	XXX	XXX	XXX
4. 2014	XXX	XXX	XXX	XXX	XXX
5. 2015	XXX	XXX	XXX	XXX	XXX
6. 2016	XXX	XXX	XXX	XXX	XXX

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Comprehensive (Hospital & Medical)

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payment	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Payments (Col. 2 + 3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1. 2012	1,669	0	0	0.0	0	0.0	0	0	0	0.0
2. 2013	0	0	0	0.0	0	0.0	0	0	0	0.0
3. 2014	0	0	0	0.0	0	0.0	0	0	0	0.0
4. 2015	0	0	0	0.0	0	0.0	0	0	0	0.0
5. 2016	0	0	0	0.0	0	0.0	0	0	0	0.0

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
 (000 Omitted)

Section A - Paid Health Claims - Medicare Supplement

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XXX	XXX			
5. 2015	XXX	XXX	XXX		
6. 2016	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims - Medicare Supplement

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XXX	XXX			
5. 2015	XXX	XXX	XXX		
6. 2016	XXX	XXX	XXX	XXX	

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Medicare Supplement

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Ratio (Col. 3/2)	4 Claim and Claim Adjustment Expense Ratio (Col. 4/2)	5 Claim and Claim Adjustment Expense Ratio (Col. 5/2)	6 Claims Unpaid (Col. 5/1) Percent	7 Unpaid Claims Adjustment Expenses	8 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
2. 2013										
3. 2014										
4. 2015										
5. 2016										

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
 (000 Omitted)

Section A - Paid Health Claims - Dental Only

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XXX	XXX			
5. 2015	XXX	XXX	XXX		
6. 2016	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims - Dental Only

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XXX	XXX			
5. 2015	XXX	XXX	XXX		
6. 2016	XXX	XXX	XXX	XXX	

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Dental Only

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense (Col. 3/2)	4 Claim Adjustment Expense (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
2. 2013										
3. 2014										
4. 2015										
5. 2016										

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

UNDERWRITING AND INVESTMENT EXHIBIT
PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(000 Omitted)

Section A - Paid Health Claims - Vision Only

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XXX	XXX			
5. 2015	XXX	XXX	XXX		
6. 2016	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims - Vision Only

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XXX	XXX			
5. 2015	XXX	XXX	XXX		
6. 2016	XXX	XXX	XXX	XXX	

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Vision Only

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payment	Claim Adjustment Expense Payment	Claim Adjustment Expense Payment (Col. 3) Percent	Claim and Claim Adjustment Expense Payments	(Col. 5) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9) Percent
1. 2012										
2. 2013										
3. 2014										
4. 2015										
5. 2016										

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

UNDERWRITING AND INVESTMENT EXHIBIT
PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(000 Omitted)

Section A - Paid Health Claims - Federal Employees Health Benefits Plan Premium

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XXX	XXX			
5. 2015	XXX	XXX	XXX		
6. 2016	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims - Federal Employees Health Benefits Plan Premium

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XXX	XXX			
5. 2015	XXX	XXX	XXX		
6. 2016	XXX	XXX	XXX	XXX	

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Federal Employees Health Benefits Plan Premium

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payment	Claim Adjustment Expense Ratio (Col. 3/2)	Claim and Claim Adjustment Expense Ratio (Col. 4/2)	Claim and Claim Adjustment Expense Ratio (Col. 5/2)	Claims Unpaid (Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	Total Claims and Claims Adjustment Expense Incurred (Col. 9/1) Percent
1. 2012										
2. 2013										
3. 2014										
4. 2015										
5. 2016										

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

UNDERWRITING AND INVESTMENT EXHIBIT
PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(000 Omitted)

Section A - Paid Health Claims - Title XVIII

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XXX	XXX			
5. 2015	XXX	XXX	XXX		
6. 2016	XXX	XXX	XXX	XXX	

NONE

Section B - Incurred Health Claims - Title XVIII

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XXX	XXX			
5. 2015	XXX	XXX	XXX		
6. 2016	XXX	XXX	XXX	XXX	

NONE

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XVIII

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payment	Claim Adjustment Expense (Col. 32)	Claim Adjustment Expense Ratio (Col. 32/2)	Claim and Claim Adjustment Payments	Claim Adjustment Expense Ratio (Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1. 2012										
2. 2013										
3. 2014										
4. 2015										
5. 2016										

NONE

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
 (000 Omitted)

Section A - Paid Health Claims - Other

	Cumulative Net Amounts Paid				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XXX	XXX			
5. 2015	XXX	XXX	XXX		
6. 2016	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims - Other

	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XXX	XXX			
5. 2015	XXX	XXX	XXX		
6. 2016	XXX	XXX	XXX	XXX	

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Other

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense (Col. 3) / Premiums (Col. 1) Percent	4 Claim and Claim Adjustment Expense Payments (Col. 3) / Premiums (Col. 1) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 3) / Premiums (Col. 1) Percent	6 (Col. 5) / (Col. 1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9) / Percent
2. 2013										
3. 2014										
4. 2015										
5. 2016										

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

UNDERWRITING AND INVESTMENT EXHIBIT
PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(000 Omitted)

Section A - Paid Health Claims - Grand Total

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior	23,075	24,488	24,400	24,375	24,324
2. 2012	0	0	0	0	0
3. 2013	XXX	XXX	XXX	XXX	XXX
4. 2014	XXX	XXX	XXX	XXX	XXX
5. 2015	XXX	XXX	XXX	XXX	XXX
6. 2016	XXX	XXX	XXX	XXX	0

Section B - Incurred Health Claims - Grand Total

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior	3,395	2,666	24,416	24,391	24,324
2. 2012	0	0	0	0	0
3. 2013	XXX	XXX	XXX	XXX	XXX
4. 2014	XXX	XXX	XXX	XXX	XXX
5. 2015	XXX	XXX	XXX	XXX	XXX
6. 2016	XXX	XXX	XXX	XXX	0

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Grand Total

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payment	Claim Adjustment Expense Payments	Claim Adjustment Expense Payments (Col. 3) Percent (Col. 3/2)	Claim and Claim Adjustment Payments (Col. 2 + 3)	Claim Adjustment Expense Payments (Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1. 2012	(673)	0	0	0.0	0	0.0	0	0	0	0.0
2. 2013	0	0	0	0.0	0	0.0	0	0	0	0.0
3. 2014	0	0	0	0.0	0	0.0	0	0	0	0.0
4. 2015	0	0	0	0.0	0	0.0	0	0	0	0.0
5. 2016	0	0	0	0.0	0	0.0	0	0	0	0.0

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

UNDERWRITING AND INVESTMENT EXHIBIT
PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY

	1 Total	2 Comprehensive (Hospital & Medical)	3 Medicare Supplement	4 Dental Only	5 Vision Only	6 Federal Employees Health Benefits Plan	7 Title XVIII Medicare	8 Title XIX Medicaid	9 Other
1. Unearned premium reserves									
2. Additional policy reserves (a)									
3. Reserve for future contingent benefits									
4. Reserve for rate credits or experience rating refunds (including \$) for investment income									
5. Aggregate write-ins for other policy reserves									
6. Totals (gross)									
7. Reinsurance ceded									
8. Totals (Net)(Page 3, Line 4)									
9. Present value of amounts not yet due on claims									
10. Reserve for future contingent benefits									
11. Aggregate write-ins for other claim reserves									
12. Totals (gross)									
13. Reinsurance ceded									
14. Totals (Net)(Page 3, Line 7)									
NONE									
DETAILS OF WRITE-INS									
0501.									
0502.									
0503.									
0598. Summary of remaining write-ins for Line 5 from overflow page									
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)									
1101.									
1102.									
1103.									
1198. Summary of remaining write-ins for Line 11 from overflow page									
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)									

(a) Includes \$ premium deficiency reserve.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
1. Rent (\$0 for occupancy of own building).....	0	0	0	0	0
2. Salary, wages and other benefits	0	0	0	0	0
3. Commissions (less \$0 ceded plus \$0 assumed).....	0	0	0	0	0
4. Legal fees and expenses	0	0	0	0	0
5. Certifications and accreditation fees	0	0	0	0	0
6. Auditing, actuarial and other consulting services	0	0	0	0	0
7. Traveling expenses	0	0	0	0	0
8. Marketing and advertising	0	0	0	0	0
9. Postage, express and telephone	0	0	0	0	0
10. Printing and office supplies	0	0	0	0	0
11. Occupancy, depreciation and amortization	0	0	0	0	0
12. Equipment	0	0	0	0	0
13. Cost or depreciation of EDP equipment and software	0	0	0	0	0
14. Outsourced services including EDP, claims, and other services	0	0	0	0	0
15. Boards, bureaus and association fees	0	0	0	0	0
16. Insurance, except on real estate	0	0	0	0	0
17. Collection and bank service charges	0	0	0	0	0
18. Group service and administration fees	0	0	0	0	0
19. Reimbursements by uninsured plans	0	0	0	0	0
20. Reimbursements from fiscal intermediaries	0	0	0	0	0
21. Real estate expenses	0	0	0	0	0
22. Real estate taxes	0	0	0	0	0
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes	0	0	4,815	0	4,815
23.2 State premium taxes	0	0	0	0	0
23.3 Regulatory authority licenses and fees	0	0	0	0	0
23.4 Payroll taxes	0	0	0	0	0
23.5 Other (excluding federal income and real estate taxes)	0	0	0	0	0
24. Investment expenses not included elsewhere	0	0	0	0	0
25. Aggregate write-ins for expenses	0	0	0	0	0
26. Total expenses incurred (Lines 1 to 25).....	0	0	4,815	0	(a) 4,815
27. Less expenses unpaid December 31, current year	0	0	3,296	0	3,296
28. Add expenses unpaid December 31, prior year	0	0	1,765	0	1,765
29. Amounts receivable relating to uninsured plans, prior year	0	0	0	0	0
30. Amounts receivable relating to uninsured plans, current year	0	0	0	0	0
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30).....	0	0	3,284	0	3,284
DETAILS OF WRITE-INS					
2501.					
2502.					
2503.					
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above).....	0	0	0	0	0

(a) Includes management fees of \$0 to affiliates and \$0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. government bonds	(a) 3,383	4,159
1.1 Bonds exempt from U.S. tax	(a) 0	0
1.2 Other bonds (unaffiliated)	(a) 38,870	34,311
1.3 Bonds of affiliates	(a) 0	0
2.1 Preferred stocks (unaffiliated)	(b) 0	0
2.11 Preferred stocks of affiliates	(b) 0	0
2.2 Common stocks (unaffiliated)	0	0
2.21 Common stocks of affiliates	0	0
3. Mortgage loans	(c) 0	0
4. Real estate	(d) 0	0
5. Contract Loans	0	0
6. Cash, cash equivalents and short-term investments	(e) 9,880	9,880
7. Derivative instruments	(f) 0	0
8. Other invested assets	0	0
9. Aggregate write-ins for investment income	0	0
10. Total gross investment income	52,133	48,350
11. Investment expenses		(g) 0
12. Investment taxes, licenses and fees, excluding federal income taxes		(g) 0
13. Interest expense		(h) 0
14. Depreciation on real estate and other invested assets		(i) 0
15. Aggregate write-ins for deductions from investment income		0
16. Total deductions (Lines 11 through 15)		0
17. Net investment income (Line 10 minus Line 16)		48,350
DETAILS OF WRITE-INS		
0901.		
0902.		
0903.		
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page		0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		0

- (a) Includes \$907 accrual of discount less \$0 amortization of premium and less \$215 paid for accrued interest on purchases.
- (b) Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued dividends on purchases.
- (c) Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest on purchases.
- (d) Includes \$0 for company's occupancy of its own buildings; and excludes \$0 interest on encumbrances.
- (e) Includes \$9,875 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest on purchases.
- (f) Includes \$0 accrual of discount less \$0 amortization of premium.
- (g) Includes \$0 investment expenses and \$0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$0 interest on surplus notes and \$0 interest on capital notes.
- (i) Includes \$0 depreciation on real estate and \$0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	2	3	4	5
	Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds	0	0	0	0	0
1.1 Bonds exempt from U.S. tax	0	0	0	0	0
1.2 Other bonds (unaffiliated)	0	0	0	0	0
1.3 Bonds of affiliates	0	0	0	0	0
2.1 Preferred stocks (unaffiliated)	0	0	0	0	0
2.11 Preferred stocks of affiliates	0	0	0	0	0
2.2 Common stocks (unaffiliated)	0	0	0	0	0
2.21 Common stocks of affiliates	0	0	0	0	0
3. Mortgage loans	0	0	0	0	0
4. Real estate	0	0	0	0	0
5. Contract loans	0	0	0	0	0
6. Cash, cash equivalents and short-term investments	6	0	6	0	0
7. Derivative instruments	0	0	0	0	0
8. Other invested assets	0	0	0	0	0
9. Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10. Total capital gains (losses)	6	0	6	0	0
DETAILS OF WRITE-INS					
0901.					
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0	0	0	0

Exhibit of Nonadmitted Assets

NONE

Exhibit 1 - Enrollment by Product Type for Health Business Only

NONE

Exhibit 2 - A&H Premiums Due and Unpaid

NONE

Exhibit 3 - Health Care Receivables

NONE

Exhibit 3A - Health Care Receivables Collected and Accrued

NONE

Exhibit 4 - Claims Unpaid and Incentive Pool, Withhold and Bonus

NONE

Exhibit 5 - Amounts Due From Parent, Subsidiaries and Affiliates

NONE

Exhibit 6 - Amounts Due To Parent, Subsidiaries and Affiliates

NONE

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

EXHIBIT 7 PART 1 - SUMMARY OF TRANSACTIONS WITH PROVIDERS

1	2	3	4	5	6
Payment Method	Column 1 as a % of Total Payments	Total Members Covered	Column 3 as a % of Total Members	Column 1 Expenses Paid to Affiliated Providers	Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:					
1. Medical groups	0.0	0	0.0	0	0
2. Intermediaries	0.0	0	0.0	0	0
3. All other providers	0.0	0	0.0	0	0
4. Total capitation payments	0.0	0	0.0	0	0
Other Payments:					
5. Fee-for-service	0.0	XXX	XXX	0	0
6. Contractual fee payments	(50,700)	XXX	XXX	0	(50,700)
7. Bonus/withhold arrangements - fee-for-service	0.0	XXX	XXX	0	0
8. Bonus/withhold arrangements - contractual fee payments	0.0	XXX	XXX	0	0
9. Non-contingent salaries	0.0	XXX	XXX	0	0
10. Aggregate cost arrangements	0.0	XXX	XXX	0	0
11. All other payments	0.0	XXX	XXX	0	0
12. Total other payments	(50,700)	XXX	XXX	0	(50,700)
13. TOTAL (Line 4 plus Line 12)	100%	XXX	XXX	0	(50,700)

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

1	2	3	4	5	6
NAIC Code	Name of Intermediary	Capitation Paid	Average Monthly Capitation	Intermediary's Total Adjusted Capital	Intermediary's Authorized Control Level RBC
	NONE				
9999999 Totals			XXX	XXX	XXX

Exhibit 8 - Furniture and Equipment Owned

NONE

NOTES TO FINANCIAL STATEMENTS

1. Summary of significant accounting policies and going concernA. Accounting practices

The accompanying statutory financial statements of Aetna Better Health Inc. (a Connecticut corporation) (the "Company"), indirectly a wholly-owned subsidiary of Aetna Inc. ("Aetna"), have been prepared in conformity with accounting practices prescribed or permitted by the State of Connecticut Insurance Department ("Connecticut Department") ("Connecticut Accounting Practices"). The Connecticut Department recognizes only statutory accounting practices prescribed or permitted by the State of Connecticut 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 Connecticut for the years ending December 31, 2016 and 2015 is as follows:

	SSAP #	F/S Page	F/S Line #	2016	2015
Net income					
(1) The Company's state basis	XXX	XXX	XXX	\$70,289	\$46,623
(2) Connecticut prescribed practices that increase/ (decrease) NAIC SAP	N/A	N/A	N/A	-	-
(3) Connecticut permitted practices that increase/ (decrease) NAIC SAP	N/A	N/A	N/A	-	-
(4) NAIC SAP				<u>\$70,289</u>	<u>\$46,623</u>
Surplus					
(5) The Company's state basis	XXX	XXX	XXX	\$3,095,726	\$3,024,107
(6) Connecticut prescribed practices that increase/ (decrease) NAIC SAP	N/A	N/A	N/A	-	-
(7) Connecticut permitted practices that increase/ (decrease) NAIC SAP	N/A	N/A	N/A	-	-
(8) NAIC SAP				<u>\$3,095,726</u>	<u>\$3,024,107</u>

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

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

C. Accounting policies

The Company applies the following significant accounting policies:

(1) Cash, cash equivalents and short-term investments

Cash, cash equivalents and short-term investments, consisting primarily of money market instruments and other debt issues with an original maturity of up to one year, are carried at amortized cost. Short-term investments consist primarily of investments purchased with an original maturity date of greater than three months but less than one year. Cash equivalents consist of highly liquid instruments, which mature within three months from the date of purchase. The carrying amount of cash, cash equivalents and short-term investments approximates fair value.

(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 December 31, 2016 and 2015. Bonds include all investments whose maturity is greater than one year when purchased.

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, an 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.

For loan-backed and structured securities, 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.

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 our expectations and the risk that facts and circumstances factored into our 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.

- (3) The Company did not own any common stock at December 31, 2016 or 2015.
- (4) The Company did not own any preferred stock at December 31, 2016 or 2015.
- (5) The Company did not have any mortgage loans at December 31, 2016 or 2015.
- (6) Securities lending

The Company engages in securities lending by lending certain securities from its investment portfolio to other institutions for short periods of time. Borrowers must post cash collateral in the amount of 102% to 105% of the fair value of a loaned security. The fair value of the loaned securities is monitored on a daily basis, with additional collateral obtained or refunded as the fair value of the loaned securities fluctuates. The collateral is retained and invested by a lending agent according to the Company's guidelines to generate additional investment income for the Company. Pursuant to SSAP No. 103 - *Transfers and Servicing of Financial Assets and Extinguishments of Liabilities* ("SSAP No. 103"), collateral required under the Company's securities lending program is carried on the Company's Statutory Statements of Assets and Liabilities, Capital and Surplus as both a receivable and payable. Also pursuant to SSAP No. 103, if the collateral received from a counterparty is less than 100 percent at the reporting date, the difference between the actual collateral and 100 percent is nonadmitted. Collateral value is measured and compared to the loaned securities in aggregate by counterparty. The Company did not have any loaned securities at December 31, 2016 or 2015.

- (7) The Company did not have any investments in any subsidiaries or affiliated companies at December 31, 2016 or 2015.
- (8) The Company did not have any investments in any joint ventures, partnerships and limited liability companies at December 31, 2016 or 2015.
- (9) The Company did not have any derivatives at December 31, 2016 or 2015.

(10) Aggregate health policy reserves and related expenses

Premium deficiency reserves ("PDR") are recognized when it is probable that the expected future hospital and medical costs, including maintenance costs, will exceed anticipated future premiums and reinsurance recoveries on existing contracts. Where allowed, anticipated investment income is considered in the calculation of any PDR. For purposes of calculating a PDR, contracts are grouped in manner consistent with the method of acquiring, servicing and measuring the profitability of such contracts. The Company had no PDR at December 31, 2016 or 2015.

(11) Hospital and medical costs and claims adjustment expenses and related reserves

Hospital and medical costs consist principally of fee-for-service medical claims and capitation costs. Claims unpaid and aggregate health claim reserves include the Company's estimate of payments to be made on claims reported but not yet paid and for health care services rendered to enrollees but not yet reported to the Company as of the Statutory Statements of Assets and Liabilities, Capital and Surplus date. Such estimates are developed using actuarial principles and assumptions, which consider, among other things, historical and projected claim submission and processing payment patterns, medical cost trends, historical utilization of health care services, claim inventory levels, medical inflation, contract requirement changes in membership and product mix, seasonality and other relevant factors. The Company reflects changes in estimates in hospital and medical costs in the Statutory Statements of Revenue and Expenses in the period they are determined. Capitation costs, which are recorded in hospital and medical expenses in the Statutory Statements of Revenue and Expenses, represent contractual monthly fees paid to participating physicians and other medical providers for providing medical care, regardless of the medical services provided to the enrollee.

The Company uses the triangulation method to estimate reserves for claims incurred but not reported. The method of triangulation makes estimates of completion factors that are then applied to the total paid claims (net of coordination of benefits) to date for each incurral month. This provides an estimate of the total projected incurred claims and total amount outstanding or claims incurred but not reported (claims unpaid). For the most current dates of service where there is insufficient paid claim data to rely solely on the triangulation method, the Company examines cost and utilization trends as well as environmental factors, plan changes, provider contracts, changes in membership and/or benefits, and historical seasonal patterns to estimate the reserve required for these months.

Claims adjustment expenses, which include cost containment expenses, represent the costs incurred related to the claim settlement process such as costs to record, process and adjust claims. These expenses are included in the Company's management agreement with an affiliate described in Note 10.

(12) The Company did not modify its capitalization policy from the prior period.

(13) The Company did not have any pharmaceutical rebate receivables at December 31, 2016 or 2015.

(14) Premiums and amounts due and unpaid

Premium revenue for prepaid health care products is recognized as income in the month in which enrollees are entitled to health care services. The Company had no premium in 2016 or 2015.

(15) Investment income due and accrued

Accrued investment income consists primarily of interest. Interest is recognized on an accrual basis and dividends are recorded as earned on the ex-dividend date. Due and accrued income is not recorded on: (a) bonds in default; and (b) bonds delinquent more than 90 days or where collection of interest is improbable. At December 31, 2016 and 2015, the Company did not have any nonadmitted investment income due and accrued.

(16) Covered and uncovered expenses and related liabilities

Covered expenses and related liabilities represent costs for health care expenses for which a member is not responsible in the event of the insolvency of the Company. Uncovered expenses and related liabilities represent costs to the Company for health care services that are the obligation of the Company and for which a member may also be liable in the event of the Company's insolvency.

(17) Federal income taxes

The Company is included in the consolidated federal income tax return of its parent company, Aetna and Aetna's other wholly-owned subsidiaries pursuant to the terms of a tax sharing agreement. In accordance with a written tax sharing agreement with an affiliate, the Company's current federal income tax provisions are generally computed as if the Company were filing a separate federal income tax return; current income tax benefits, including those resulting from net operating losses, are recognized to the extent realized in the consolidated return. Pursuant to this agreement, the Company has the enforceable right to recoup federal income taxes paid in prior years in the event of future net losses, which it may incur, or to recoup its net losses carried forward as an offset to future net income subject to federal income taxes.

Income taxes are accounted for under the asset and liability method. Deferred income tax assets ("DTAs") and liabilities ("DTLs") represent the expected future tax consequences of temporary differences generated by statutory accounting as defined in SSAP No. 101. DTAs and DTLs are measured using enacted tax rates expected to apply to taxable income in the years in which those temporary differences are expected to be recovered or settled. DTAs and DTLs are computed by means of identifying temporary differences which are measured using a balance sheet approach whereby statutory and tax basis balance sheets are compared. Current income tax recoverables include all current income taxes, including interest, reasonably expected to be recovered in a subsequent accounting period.

Pursuant to SSAP No. 101, gross DTAs are first reduced by a statutory valuation allowance adjustment to an amount that is more likely than not to be realized ("adjusted gross DTAs"). Adjusted gross DTAs are then admitted in an amount equal to the sum of paragraphs a. b. and c. below:

- a. Federal income taxes paid in prior years that can be recovered through loss carrybacks for existing temporary differences that reverse during a timeframe corresponding with Internal Revenue Service ("IRS") tax loss carryback provisions.
- b. The amount of adjusted gross DTAs, after the application of paragraph a. above, expected to be realized within the applicable period and that is no greater than the applicable percentage as determined using the applicable Realization Threshold Limitation Table. The applicable period refers to the number of years in which the DTA will reverse in the Company's tax return and the applicable percentage refers to the percentage of the Company's statutory capital and surplus as required to be shown on the statutory balance sheet adjusted to exclude any net DTAs, electronic data processing equipment and operating system software and any net positive goodwill ("Stat Cap ExDTA").

The Realization Threshold Limitation Tables allow DTAs to be admitted based upon either realization within 3 years and 15% of Stat Cap ExDTA, 1 year and 10% of Stat Cap ExDTA, or no DTA admitted pursuant to this paragraph b. In general, the Realization Threshold Limitation Tables allow the Company to admit more DTAs if total DTAs as reported by the Company are a smaller percentage of statutory capital and surplus.

- c. The amount of gross DTAs, after the application of paragraphs a. and b. above that can be offset against existing gross DTLs. In applying this offset, the Company considers the character (i.e. ordinary versus capital) of the DTAs and DTLs such that offsetting would be permitted in the tax return under existing enacted federal income tax laws and regulations and the reversal patterns of temporary differences.

Changes in DTAs and DTLs are recognized as a separate component of gains and losses in surplus ("Change in net deferred income tax") except to the extent allocated to changes in unrealized gains and losses. Changes in DTAs and DTLs allocated to unrealized gains and losses are netted against the related changes in unrealized gains and losses and are reported as "Change in net unrealized capital gains (losses)", also a separate component of gains and losses in surplus.

D. Going concern

After evaluation at December 31, 2016, management has no concern over the Company's ability to continue as a going concern at this time. 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 years ending December 31, 2016 and 2015.

3. Business combinations and goodwill

The Company was not a part of any business combinations that involved the statutory purchase method, a statutory merger, an assumption reinsurance, or an impairment loss in the years ending December 31, 2016 and 2015.

4. Discontinued operations

The Company ceased operations effective December 31, 2011. The Company's contract with the State of Connecticut, Department of Social Services expired on December 31, 2011 and was not renewed.

5. Investments

- A. The Company did not have any mortgage loans, including Mezzanine Real Estate Loans, at December 31, 2016 or 2015.

- B. The Company did not have any debt restructuring in the years ending December 31, 2016 and 2015.
- C. The Company did not have any reverse mortgages at December 31, 2016 or 2015.
- D. Loan-Backed Securities
 - (1) Prepayment assumptions for single class and multi-class mortgage backed/asset backed securities were obtained from industry market sources.
 - (2) The Company had no OTTI losses during 2016 on loan-backed and structured securities in which the Company had the (1) intent to sell, (2) did not have the intent and ability to retain for a period of time sufficient to recover the amortized cost basis or (3) present value of cash flows expected to be collected is less than the amortized cost basis of the securities in accordance with SSAP No. 43R - *Loan-Backed and Structured Securities*.
 - (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 December 31, 2016.
 - (4) The Company had no unrealized loss position on loan-backed and structured securities held by the Company at December 31, 2016.
- E. Repurchase Agreements and/or Securities Lending Transactions
 - (1) The Company did not have any repurchase agreements or loaned securities transactions at December 31, 2016.
 - (2) The Company did not pledge any of its assets as collateral, which are classified as securities pledged to creditors as of December 31, 2016.
 - (3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or repledge as of December 31, 2016.
 - (4) The Company did not have securities lending transactions administered by an affiliated agent which is "one line" reported at December 31, 2016.
 - (5) The Company did not have any repurchase agreements, loaned securities or dollar repurchase agreements at December 31, 2016.
 - (6) The Company has not accepted collateral that is not permitted by contract or custom to sell or repledge as of December 31, 2016.
 - (7) The Company did not have any collateral for transactions that extend beyond one year from the reporting date.
- F. The Company did not have any real estate at December 31, 2016 or 2015.
- G. The Company did not have any low-income housing tax credits at December 31, 2016.

H. Restricted Assets

(1) Restricted assets (including pledged):

Restricted Asset Category	1	2	3	4	5	6	7
	Total gross (admitted & nonadmitted) restricted from current year	Total gross (admitted & nonadmitted) restricted from prior year	Increase (decrease) (1 minus 2)	Total current year nonadmitted restricted	Total current year admitted restricted (1 minus 4)	Percentage gross (admitted & nonadmitted) restricted to total assets	Percentage admitted restricted to total admitted assets
a. Subject to contractual obligation for which liability is not shown	-	-	-	-	-	-	-
b. Collateral held under security lending agreements	-	-	-	-	-	-	-
c. Subject to repurchase agreements	-	-	-	-	-	-	-
d. Subject to reverse repurchase agreements	-	-	-	-	-	-	-
e. Subject to dollar repurchase agreements	-	-	-	-	-	-	-
f. Subject to dollar reverse repurchase agreements	-	-	-	-	-	-	-
g. Placed under option contracts	-	-	-	-	-	-	-
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	-	-	-	-	-	-	-
i. FHLB capital stock	-	-	-	-	-	-	-
j. On deposit with states	\$499,210	\$499,442	\$(232)	-	\$499,210	16.079%	16.079%
k. On deposit with other regulatory bodies	-	-	-	-	-	-	-
l. Pledged as collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	-	-
m. Pledged as collateral not captured in other categories	-	-	-	-	-	-	-
n. Other restricted assets	-	-	-	-	-	-	-
o. Total restricted assets	\$499,210	\$499,442	\$(232)	-	\$499,210	16.079%	16.079%

(2) The Company did not have any assets pledged as collateral not captured in other categories at December 31, 2016.

(3) The Company did not have any other restricted assets at December 31, 2016.

(4) The Company did not have any collateral received and reflected within its financial statements at December 31, 2016.

I. The Company did not have any working capital finance investments at December 31, 2016.

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

- J. The Company did not have any offsetting and netting of financial assets or liabilities at December 31, 2016.
- K. The Company did not have any structured notes at December 31, 2016.
- L. The Company did not have any 5* securities at December 31, 2016.

6. Joint ventures, partnerships, and limited liability companies

- A. The Company did not have any joint ventures, partnerships, or limited liability companies that exceeded 10% of its admitted assets at December 31, 2016 or 2015.
- B. The Company does not have any impaired investments in joint ventures, partnerships, or limited liability companies at December 31, 2016 or 2015.

7. Investment income

- A. There was no investment income due and accrued excluded from surplus at December 31, 2016 or 2015, except in bonds where collection of interest was uncertain.
- B. There was no amount excluded at December 31, 2016 or 2015.

8. Derivative instruments

The Company did not have any derivative instruments at December 31, 2016 or 2015.

9. Income taxes

A.

- 1. The components of the net DTAs recognized in the Company's Statutory Statements of Assets, Liabilities, Surplus and Other Funds are as follows:

	December 31, 2016		
	Ordinary	Capital	Total
(a) Gross DTAs	-	-	-
(b) Statutory valuation allowance adjustment	-	-	-
(c) Adjusted gross DTAs	-	-	-
(d) DTAs nonadmitted	-	-	-
(e) Subtotal net admitted DTAs	-	-	-
(f) DTLs	-	\$(121)	\$(121)
(g) Net admitted DTAs/(DTLs)	-	\$(121)	\$(121)

	December 31, 2015		
	Ordinary	Capital	Total
(a) Gross DTAs	\$46	-	\$46
(b) Statutory valuation allowance adjustment	-	-	-
(c) Adjusted gross DTAs	46	-	46
(d) DTAs nonadmitted	-	-	-
(e) Subtotal net admitted DTAs	46	-	46
(f) DTLs	-	\$(1,497)	(1,497)
(g) Net admitted DTAs/(DTLs)	\$46	\$(1,497)	\$(1,451)

	Change		
	Ordinary	Capital	Total
(a) Gross DTAs	\$(46)	-	\$(46)
(b) Statutory valuation allowance adjustment	-	-	-
(c) Adjusted gross DTAs	(46)	-	(46)
(d) DTAs nonadmitted	-	-	-
(e) Subtotal net admitted DTAs	(46)	-	(46)
(f) DTLs	-	\$1,376	1,376
(g) Net admitted DTAs/(DTLs)	\$(46)	\$1,376	\$1,330

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

2. The amount of admitted gross DTAs admitted under each component of SSAP No. 101:

	December 31, 2016		
	Ordinary	Capital	Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	-	-	-
(b) Adjusted gross DTAs expected to be realized (excluding the amount of DTAs) after application of the threshold limitations (the lesser of 2(b)1 and 2(b)2 below)	-	-	-
1. Adjusted gross DTAs expected to realized following the balance sheet date	-	-	-
2. Adjusted gross DTAs allowed per limitation threshold	XXX	XXX	\$464,359
(c) Adjusted gross DTAs (excluding the amount of DTAs from 2(a) and 2(b) above) offset by gross DTLs	-	-	-
(d) DTAs admitted as the result of application of SSAP No. 101	-	-	-

	December 31, 2015		
	Ordinary	Capital	Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$46	-	\$46
(b) Adjusted gross DTAs expected to be realized (excluding the amount of DTAs) after application of the threshold limitations (the lesser of 2(b)1 and 2(b)2 below)	-	-	-
1. Adjusted gross DTAs expected to realized following the balance sheet date	-	-	-
2. Adjusted gross DTAs allowed per limitation threshold	XXX	XXX	453,834
(c) Adjusted gross DTAs (excluding the amount of DTAs from 2(a) and 2(b) above) offset by gross DTLs	-	-	-
(d) DTAs admitted as the result of application of SSAP No. 101	\$46	-	\$46

	Change		
	Ordinary	Capital	Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$(46)	-	\$(46)
(b) Adjusted gross DTAs expected to be realized (excluding the amount of DTAs) after application of the threshold limitations (the lesser of 2(b)1 and 2(b)2 below)	-	-	-
1. Adjusted gross DTAs expected to realized following the balance sheet date	-	-	-
2. Adjusted gross DTAs allowed per limitation threshold	XXX	XXX	10,525
(c) Adjusted gross DTAs (excluding the amount of DTAs from 2(a) and 2(b) above) offset by gross DTLs	-	-	-
(d) DTAs admitted as the result of application of SSAP No. 101	\$(46)	-	\$(46)

3.

	2016	2015
(a) Ratio percentage used to determine recovery period and threshold limitation amount	38,380%	28,708%
(b) Amount of adjusted capital and surplus used to determine recovery period threshold limitation in 2(b)2 above	\$3,095,726	\$3,025,558

4. The impact of tax planning strategies is as follows:

	December 31, 2016		
	Ordinary	Capital	Total
(a) Determination of adjusted gross DTAs and net admitted DTAs, by tax character as a percentage			
1. Adjusted gross DTAs amount from Note 9A1(c)	-	-	-
2. Percentage of adjusted DTAs by tax character attributable to the impact of tax planning strategies	0%	0%	0%
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	-	-	-
4. Percentage of net admitted adjusted DTAs by tax character admitted because of the impact of tax planning strategies	0%	0%	0%

	December 31, 2015		
	Ordinary	Capital	Total
(a) Determination of adjusted gross DTAs and net admitted DTAs, by tax character as a percentage			
1. Adjusted gross DTAs amount from Note 9A1(c)	\$46	-	\$46
2. Percentage of adjusted DTAs by tax character attributable to the impact of tax planning strategies	0%	0%	0%
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$46	-	\$46
4. Percentage of net admitted adjusted DTAs by tax character admitted because of the impact of tax planning strategies	0%	0%	0%

	Change		
	Ordinary	Capital	Total
(a) Determination of adjusted gross DTAs and net admitted DTAs, by tax character as a percentage			
1. Adjusted gross DTAs amount from Note 9A1(c)	\$(46)	-	\$(46)
2. Percentage of adjusted DTAs by tax character attributable to the impact of tax planning strategies	0%	0%	0%
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$(46)	-	\$(46)
4. Percentage of net admitted adjusted DTAs by tax character admitted because of the impact of tax planning strategies	0%	0%	0%

(b) Does the Company's tax-planning strategies include the use of reinsurance? Yes No

B. There are no DTLs that were not recognized at December 31, 2016 or 2015.

C. Current income taxes incurred consist of the following major components:

	December 31,		Change
	2016	2015	
1. Current income tax			
(a) Federal	\$39,675	\$24,222	\$15,453
(b) Foreign	-	-	-
(c) Subtotal	39,675	24,222	15,453
(d) Federal income tax on net capital gains	219	-	219
(f) Other	-	-	-
(g) Federal and foreign income taxes incurred	\$39,894	\$24,222	\$15,672

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

	December 31,		Change
	2016	2015	
2. DTAs:			
(a) Ordinary			
Claims unpaid	-	\$46	\$(46)
Total ordinary DTAs	-	46	(46)
(b) Statutory valuation allowance adjustment	-	-	-
(c) Nonadmitted ordinary DTAs	-	-	-
(d) Admitted ordinary DTAs	-	46	(46)
(e) Capital			
Investments - impairments	-	-	-
Total admitted capital DTAs	-	-	-
(f) Statutory valuation allowance adjustment	-	-	-
(g) Nonadmitted capital DTAs	-	-	-
(h) Admitted capital DTAs	-	-	-
(i) Admitted DTAs	-	46	(46)
3. DTLs:			
(a) Ordinary			
Ordinary DTLs	-	-	-
(b) Capital			
Investments - deferred	\$121	1,497	(1,376)
Capital DTLs	121	1,497	(1,376)
(c) Total DTLs	121	1,497	(1,376)
4. Net admitted DTAs	\$(121)	\$(1,451)	\$1,330

The change in net deferred income taxes is comprised of the following:

	December 31,		Change
	2016	2015	
Gross DTAs	-	\$46	\$(46)
Less: Gross DTLs	\$(121)	(1,497)	1,376
Net DTAs	\$(121)	\$(1,451)	1,330
Less: Tax effect of unrealized gains (losses)			-
Change in net deferred income tax			\$1,330

The valuation allowance adjustment to gross DTAs was \$0 for both December 31, 2016 and 2015.

- D. The provision for federal income taxes is different from that which would be obtained by applying the statutory federal income tax rate to income before income taxes. The items causing this difference were as follows:

	December 31, 2016	Effective tax rate	December 31, 2015	Effective tax rate
	Provision computed at statutory rate	\$38,565	35.0%	\$24,796	35.0%
Total	\$38,565	35.0%	\$24,796	35.0%
Federal and foreign income tax expense incurred	\$39,894	36.2%	\$24,222	34.2%
Change in net deferred income taxes	(1,330)	(1.2)%	573	0.8%
Total statutory income taxes	\$38,565	35.0%	\$24,795	35.0%

The transfer pricing adjustment allows taxpayers to apply different methods to price current period intercompany services at arm's length prices as compared to what would be charged to an unrelated entity, which results in a permanent deduction for tax reporting purposes.

E.

1. At December 31, 2016, the Company had no net capital loss or net operating loss carryforwards for tax purposes.
2. The amount of federal income taxes incurred that are available for recoupment in the event of future net losses is \$39,894 and \$24,222 for the years ended December 31, 2016 and 2015, respectively.
3. The Company did not report any deposits as admitted assets under Internal Revenue Code Section 6603 at December 31, 2016 and 2015.

F.

1. At December 31, 2016, the Company's Federal Income Tax Return was consolidated with the following entities:

Aetna Inc.	Broadspire National Services, Inc.
@ Credentials Inc.	bswift, LLC
Active Health Management Inc.	Carefree Insurance Services, Inc.
Adminco, Inc.	Claims Administration Corporation
Administrative Enterprises, Inc.	Cofinity, Inc.
AE Fourteen Incorporated	Corporate Benefit Strategies, Inc.
Aetna ACO Holdings, Inc.	Coventry Consumer Advantage, Inc.
Aetna Better Health Inc. (Connecticut)	Coventry Health and Life Insurance Company
Aetna Better Health Inc. (Georgia)	Coventry Health Care National Accounts, Inc.
Aetna Better Health Inc. (Illinois)	Coventry Health Care National Network, Inc.
Aetna Better Health Inc. (New Jersey)	Coventry Health Care of Delaware, Inc.
Aetna Better Health Inc. (New York)	Coventry Health Care of Florida, Inc.
Aetna Better Health Inc. (Ohio)	Coventry Health Care of Illinois, Inc.
Aetna Better Health Inc. (Pennsylvania)	Coventry Health Care of Kansas, Inc.
Aetna Better Health Inc. (Tennessee)	Coventry Health Care of Missouri, Inc.
Aetna Better Health of California Inc.	Coventry Health Care of Nebraska, Inc.
Aetna Better Health of Iowa Inc.	Coventry Health Care of the Carolinas, Inc.
Aetna Better Health of Kansas Inc.	Coventry Health Care of Virginia, Inc.
Aetna Better Health of Kentucky Insurance Company	Coventry Health Care of West Virginia, Inc.
Aetna Better Health of Michigan Inc.	Coventry Health Care Workers' Compensation, Inc.
Aetna Better Health of Missouri LLC	Coventry Health Plan of Florida, Inc.
Aetna Better Health of Nevada Inc.	Coventry HealthCare Management Corporation
Aetna Better Health of Oklahoma Inc.	Coventry Prescription Management Services, Inc.
Aetna Better Health of Texas Inc.	Coventry Rehabilitation Services, Inc.
Aetna Better Health, Inc. (Louisiana)	Coventry Transplant Network, Inc.
Aetna Dental Inc. (New Jersey)	Delaware Physicians Care, Incorporated
Aetna Dental Inc. (Texas)	Echo Merger Sub, Inc.
Aetna Dental of California Inc.	First Health Group Corp.
Aetna Florida Inc. (fka Aetna Better Health Inc. (Florida))	First Health Life and Health Insurance Company
Aetna Health and Life Insurance Company	First Script Network Services, Inc.
Aetna Health Inc. (Connecticut)	Florida Health Plan Administrators, LLC
Aetna Health Inc. (Florida)	FOCUS Healthcare Management, Inc.
Aetna Health Inc. (Georgia)	Futrix Inc.
Aetna Health Inc. (Louisiana)	Group Dental Service of Maryland, Inc.
Aetna Health Inc. (Maine)	Group Dental Service, Inc.
Aetna Health Inc. (Michigan)	Health and Human Resource Center, Inc.
Aetna Health Inc. (New Jersey)	Health Data & Management Solutions, Inc.
Aetna Health Inc. (New York)	Health Re, Incorporated
Aetna Health Inc. (Pennsylvania)	HealthAmerica Pennsylvania, Inc.
Aetna Health Inc. (Texas)	HealthAssurance Pennsylvania, Inc.
Aetna Health Insurance Company	Managed Care Coordinators, Inc.
Aetna Health Insurance Company of New York	Medicity Inc.
Aetna Health of California, Inc.	Mental Health Associates, Inc.
Aetna Health of Iowa Inc. (fka Aetna Health Inc. (Iowa))	Mental Health Network of New York IPA, Inc.
Aetna Health of Utah, Inc.	Meritain Health, Inc.
Aetna HealthAssurance Pennsylvania, Inc.	MetraComp, Inc.
Aetna Insurance Company of Connecticut	MHNet Life and Health Insurance Company
Aetna Integrated Informatics, Inc.	MHNet of Florida, Inc.
Aetna International Inc.	Niagara Re, Inc.
Aetna Ireland Inc.	PayFlex Holdings, Inc.
Aetna Life & Casualty (Bermuda) Ltd.	PayFlex Systems USA, Inc.
Aetna Life Assignment Company	Performax, Inc.
Aetna Life Insurance Company	Precision Benefit Services, Inc.
	Prime Net, Inc.
	Prodigy Health Group, Inc.
	Professional Risk Management, Inc.

Aetna Risk Assurance Company of Connecticut, Inc.	Resources for Living, LLC
Aetna Student Health Agency Inc.	Schaller Anderson Medical Administrators, Incorporated
AHP Holdings, Inc.	Strategic Resource Company
Allviant Corporation	The Vasquez Group Inc.
American Health Holding, Inc.	U.S. Health Care Properties, Inc.
AUSHC Holdings, Inc.	Work and Family Benefits, Inc.

2. As explained in Note 1, the Company participates in a tax sharing agreement with its parent and affiliates.
- G. The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

10. Information concerning Parent, subsidiaries, affiliates, and other related parties

A. B. and C.

The Company did not pay any dividends in 2016 or 2015. The Company did not receive any capital contributions in 2016 or 2015.

- D. Amounts due to and due from affiliates shown in the accompanying Statutory Statements of Assets, Liabilities, Capital and Surplus include the Company's net receipts and disbursements processed by affiliates and transactions related to its administrative services agreement with Aetna Medicaid Administrators LLC (formerly Schaller Anderson, LLC) ("AMA"), indirectly a wholly-owned subsidiary of Aetna.

At December 31, 2016 and 2015, the Company had no amounts due to or due from affiliates.

The terms of settlement require that these amounts be settled within 45 days after the end of the calendar quarter.

- E. At December 31, 2016 and 2015, the Company did not have any guarantees or undertakings with its affiliates or parent company.
- F. As of and for the years ending December 31, 2016 and 2015, the Company had the following significant transactions with affiliates:

The Company and AMA are parties to an administrative services agreement, under which AMA provides certain administrative services, including accounting and processing of premiums and claims. Under this agreement, the Company remits a percentage of its earned premium revenue, as applicable, to AMA as a fee. The Company did not incur fees in 2016 or 2015. This agreement also provides for interest on all intercompany balances. There was no interest earned (incurred) on amounts due from/(to) affiliates in 2016 and 2015.

The Company has an insolvency agreement with Aetna Life Insurance Company ("ALIC"), a wholly-owned subsidiary of Aetna. This agreement provides that in the event that the Company ceases operations or becomes insolvent, ALIC will continue to pay benefits for any members confined as inpatients on the date of insolvency until their discharge or expiration of benefits pursuant to Connecticut General Statute 38a-193(d). This agreement also provides that ALIC will continue benefits for any member until the end of the contract period for which premium has been paid, but for no longer than thirty-one days. ALIC will also make available to members, for a period of thirty-one days, replacement insurance policies.

As explained in Note 1, the Company participates in a tax sharing agreement with Aetna and Aetna's other subsidiaries. All federal income tax receivables/payables were due from/due to Aetna.

- G. All outstanding shares of the Company are owned by Aetna Health Holdings, LLC, whose ultimate parent is Aetna.
- H. At December 31, 2016, the Company did not own shares of any upstream intermediate of Aetna.
- I. At December 31, 2016, the Company did not hold any investments in any subsidiary, controlled or affiliated ("SCA") entity that exceeded 10% of the Company's admitted assets.
- J. At December 31, 2016, the Company did not hold any investments in any impaired SCA entity.
- K. At December 31, 2016, the Company did not hold any investments in any foreign insurance subsidiaries.
- L. At December 31, 2016, the Company did not hold any investments in a downstream noninsurance holding company.

M and N.

At December 31, 2016, the Company did not have any SCA investments.

11. Debt

- A. The Company did not have any items related to debt, including capital notes at December 31, 2016.
- B. The Company did not have any Federal Home Loan Bank agreements at December 31, 2016.

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 December 31, 2016 or 2015.

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

- (1) The Company had 20,000 shares of common stock authorized with a par value of \$.01, with 1,000 shares issued and outstanding at December 31, 2016 and 2015.
- (2) The Company did not have any preferred stock authorized or outstanding at December 31, 2016 or 2015.

(3) Dividend restrictions

Pursuant to State of Connecticut statute, the Company may not make any extraordinary dividend or any other extraordinary distribution until the Connecticut Department has approved such payment or until thirty days after the Connecticut Department has received notice from the Company of the declaration thereof within which period it has not disapproved such payment, whichever is sooner. An extraordinary dividend or distribution is any dividend or distribution of cash or other property, whose fair market value together with that of other dividends or distributions made within the preceding twelve months, exceeds the greater of (1) ten percent of the Company's surplus with respect to policyholders as of the thirty-first of December last preceding, or (2) the Company's net income, not including realized capital gains, for the twelve month period ending the thirty-first day of December last preceding. Ordinary dividends are ultimately limited to earned surplus.

- (4) The Company did not pay any dividends in 2016 or 2015.
- (5) At December 31, 2016, there was no portion of the Company's profits that may be paid as ordinary dividends to its shareholder without prior approval from the Connecticut Department.
- (6) There were no restrictions placed on the Company's surplus, including for whom the surplus was being held at December 31, 2016 or 2015, except as noted in Note 21.
- (7) Not applicable to the Company.
- (8) The Company did not hold any stock for any special purposes at December 31, 2016 or 2015.
- (9) There were no changes in the balances of any special surplus funds from the prior period.
- (10) At December 31, 2016 and 2015, there was no portion of unassigned funds (surplus) that was represented or reduced by unrealized gains and losses.
- (11) The Company has not issued any surplus notes or debentures or similar obligations at December 31, 2016 or 2015.
- (12) The Company did not participate in any quasi-reorganizations during the statement year.
- (13) The Company did not participate in any quasi-reorganizations in the past 10 years.

14. Contingencies

- A. The Company did not have any contingent commitments at December 31, 2016 or 2015.
- B. The Company did not have any contingent assessments at December 31, 2016 or 2015.
- C. The Company did not have any gain contingencies at December 31, 2016 or 2015.
- D. The Company did not have any claims related extra contractual obligation and bad faith losses stemming from lawsuits at December 31, 2016 or 2015.
- E. The Company did not have any joint and several liability arrangements at December 31, 2016 or 2015.

- F. Various liabilities arise in the normal course of the Company's business and have been recorded. In the opinion of management, any ultimate contingent losses will not have a material adverse effect on the Company's future results of operations and financial position. The Company, to the best of its knowledge, has no assets that it considers impaired that are not already recorded in the Company's books. The Company has coverage for certain litigation exposures (\$10,000,000 per claim and in the aggregate including defense costs) through an unaffiliated insurance company.

15. Leases

The Company did not have any material lease obligations at December 31, 2016 or 2015

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

The Company did not have any financial instruments with off-balance sheet risk or financial instruments with concentrations of credit risk at December 31, 2016 or 2015.

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

A. Transfers of receivables reported as sales

- (1) The Company did not have any transfers of receivables as sales for the years ending December 31, 2016 and 2015.

B. Transfer and servicing of financial assets

- (1) The Company's policy for requiring collateral or other security for security lending transactions as required in SSAP No. 103 is discussed in Note 1. The Company did not have any loaned securities at December 31, 2016 or 2015.

(2) and (3)

The Company did not have any servicing assets or liabilities at December 31, 2016 or 2015.

- (4) The Company did not have any securitized financial assets at December 31, 2016 or 2015.

- (5) The Company did not have any transfers of financial assets at December 31, 2016 or 2015.

- (6) The Company did not have any transfers of receivables with recourse at December 31, 2016 or 2015.

- (7) The Company did not have any repurchase or reverse repurchase agreements at December 31, 2016 or 2015.

C. Wash sales

- (1) The Company did not have any wash sales for the years ending December 31, 2016 or 2015.

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

- A. The Company did not serve as an Administrative Services Only for uninsured accident and health plans or the uninsured portion of partially insured plans for the period ended December 31, 2016.

- B. The Company did not serve as an Administrative Services Contract plan administrator for uninsured accident and health plans or the uninsured portion of partially insured plans for the period ended December 31, 2016.

- C. The Company did not have any Medicare or other similarly structured cost based reimbursement contracts for the period ended December 31, 2016.

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

The Company did not have any material direct premiums written through/produced by managing general agents or third party administrators for the years ended December 31, 2016 and 2015.

20. Fair value measurements

A. and B.

The Company had no material assets or liabilities measured and reported at fair value at December 31, 2016 or 2015.

- C. Certain of the Company's financial instruments are measured at fair value in the financial statements. The fair values of these instruments are based on valuations that include inputs that can be classified within one of three levels of a hierarchy established by U.S. generally accepted accounting principles. The following are the levels of the hierarchy and a brief description of the type of valuation information ("inputs") that qualifies a financial asset or liability for each level:

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

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

The carrying values and estimated fair values of the Company's financial instruments at December 31, 2016 and 2015 were as follows:

December 31, 2016

(in thousands)	Aggregate fair value	Admitted assets	Level 1	Level 2	Level 3	Not practicable (carrying value)
Bonds, short-term investments and cash equivalents	\$2,740,629	\$2,712,029	\$2,204,705	\$535,924	-	-
Total	\$2,740,629	\$2,712,029	\$2,204,705	\$535,924	-	-

December 31, 2015

(in thousands)	Aggregate fair value	Admitted assets	Level 1	Level 2	Level 3	Not practicable (carrying value)
Bonds, short-term investments and cash equivalents	\$2,701,078	\$2,659,890	\$499,649	\$2,201,429	-	-
Total	\$2,701,078	\$2,659,890	\$499,649	\$2,201,429	-	-

The valuation methods and assumptions used by the Company in estimating the fair value of debt securities are discussed in Note 1.

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 2016 or 2015. There were no transfers between the Company's Level 1 or 2 financial assets during 2016 or 2015.

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

- D. The Company did not have any financial instruments where it was not practicable to estimate the fair value.

21. Other items

- A. Extraordinary items

The Company did not have any extraordinary items for the years ended December 31, 2016 and 2015.

B. Troubled debt restructuring: debtors

The Company did not have any troubled debt restructuring in the years ended December 31, 2016 and 2015.

C. Other disclosures and unusual items

(1) Minimum capital and surplus

Pursuant to the laws of Connecticut, the Company is required to maintain a capital and surplus at an amount that is equal to the greater of \$3,000,000, 2% of prior year statutory premium revenue on the first \$150,000,000 plus 1% on premium revenue in excess of \$150,000,000 or two months of its cost of uncovered expenditures. At December 31, 2016 and 2015, the Company's capital and surplus exceeded all such requirements.

The NAIC and the State of Connecticut adopted risk-based capital ("RBC") standards for health organizations, including HMOs, that are designed to identify weakly capitalized companies by comparing each company's adjusted capital and surplus to its required capital and surplus (the "RBC Ratio"). The RBC Ratio is designed to reflect the risk profile of the company. Within certain ratio ranges, regulators have increasing authority to take action as the RBC Ratio decreases. There are four levels of regulatory action, ranging from requiring insurers to submit a comprehensive plan to the state insurance commissioner to requiring the state insurance commissioner to place the insurer under regulatory control. At December 31, 2016 and 2015, the Company had capital and surplus that exceeded the highest threshold specified by the RBC rules.

(2) Contract with the State of Connecticut, Department of Social Services

The contract between the Company and the State of Connecticut, Department of Social Services was effective July 1, 2008 and terminated December 31, 2011. The Company insured Medicaid and the Children's Health Insurance Program ("CHIP") membership through its contract with the State of Connecticut Department of Social Services. This contract expired on December 31, 2011 and was not renewed.

(3) Health Care Reform

The Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010 (as amended, collectively, "Health Care Reform" or "ACA"), has made broad-based changes to the U.S. health care system. On January 20, 2017, the President signed an executive order that gives the regulatory agencies that enforce the ACA the authority to interpret regulations issued under the ACA in a way that limits fiscal burdens on states and financial or regulatory burdens on individuals, providers, health insurers and others. The practical implications of that order are unclear, and the future of the ACA is uncertain. While we anticipate efforts in 2017 and beyond to substantially modify, repeal or replace the ACA, the Company expects aspects of the ACA to continue to significantly impact the Company's business operations and operating results, including the Company's pricing, medical benefit ratios and the geographies in which the Company's products are available. Health Care Reform has presented the Company with business opportunities, but also with financial and regulatory challenges. Most of the ACA's key components were phased in during or prior to 2014, including Public Exchanges, required minimum MLRs in commercial and Medicare products, the individual coverage mandate, guaranteed issue, rating limits in individual and small group products, significant new industry-wide fees, assessments and taxes, enhanced premium rate review and disclosure processes, reduced Medicare Advantage payment rates to insurers, and linking Medicare Advantage payments to a plan's Centers for Medicare and Medicaid Services ("CMS") quality performance ratings or "star ratings." The effects of these changes are reflected in the Company's operating results. If the ACA is not amended, repealed or replaced, certain of its components will continue to be phased in until 2020.

The Company has dedicated and expects to continue to be required to dedicate significant resources and incur significant expenses during 2017 to implement and comply with Health Care Reform and changes in Health Care Reform as well as state level health care reform. While most of the significant aspects of Health Care Reform became effective during or prior to 2014, significant parts of Health Care Reform, including aspects of nondiscrimination requirements, continue to evolve through the promulgation of executive orders, regulations and guidance. Additional changes to Health Care Reform and those regulations and guidance at the federal and/or state level are likely, and those changes are likely to be significant. Growing state and federal budgetary pressures make it more likely that any changes, including changes at the state level in response to changes to, or repeal or replacement of, Health Care Reform and/or changes in the funding levels and/or payment mechanisms of federally supported benefit programs, will be adverse to us. Given the inherent difficulty of foreseeing the nature and scope of future changes to Health Care Reform and how states, businesses and individuals will respond to those changes, the Company cannot predict the impact to the Company of future changes to Health Care Reform. It is reasonably possible that repeal or replacement of or other changes to Health Care Reform and/or states' responses to such changes, in the aggregate, could have a significant adverse effect on the Company's business operations and financial results.

Potential repeal of Health Care Reform, ongoing legislative and regulatory changes to Health Care Reform, other pending efforts in the U.S. Congress to amend or restrict funding for various aspects of Health Care Reform (including risk corridors and Health Care Reform's Cost Sharing Subsidy program), the results of the 2016 presidential, congressional and state level elections, pending litigation challenging aspects of the law and federal budget negotiations continue to create uncertainty about the ultimate impact of Health Care Reform. Examples of recent legislative and regulatory changes include: the January 20, 2017 executive order relating to Health Care Reform; the November 2016 HHS announcement that risk corridor collections for the 2015 program year will be applied first to amounts owed to plans for the 2014 program year; the May 2016 final regulations relating to Health Care Reform's non-discrimination requirements; the December 2015 suspension of the health insurer fee for 2017 and two year delay of the "Cadillac" tax on high-cost employer-sponsored health coverage; the October 2015 PACE, which leaves groups with 51 to 100 employees within the large group category for each state unless the state exercises its option to include these groups within the small group category; and the October 2015 HHS announcement that Health Care Reform's risk corridor receivables for the 2014 program year would only be funded at 12.6%. With respect to pending litigation, in May 2016, the U.S. District Court for the District of Columbia ruled that the U.S. Department of Health and Human Services does not have the authority to make payments under Health Care Reform's Cost Sharing Subsidy program. Implementation of this decision has been stayed pending appeal. A final ruling that adversely impacts the Cost Sharing Subsidy program could cause significant adverse selection in individual Public Exchange products and instability in the individual Public Exchange marketplace and could have a material adverse effect on the Company's business, cash flows, financial condition and operating results as well as hinder the Company's ability to offer Public Exchange products.

As described above, the availability of funding for the ACA's temporary risk corridor program is an example of this uncertainty. The Company continues to believe that receipt of any risk corridor payment from HHS for the 2016 or 2015 program year and receipt of such payments in excess of the announced prorated amount for the 2014 program year are uncertain. At December 31, 2016, the Company had no receivable for the remaining 2014 program year prorated amount that had not been collected from HHS and had no receivable for either of the 2015 or 2016 program years. In addition, these limited risk corridor payments created additional instability in the marketplace for individual commercial products in 2016 and going forward by contributing to decisions by health plans to change or stop offering their Public Exchange products. 2016 was the last program year for Health Care Reform's risk corridor program. Ongoing uncertainty regarding the funding of Health Care Reform-related programs and subsidies can be expected to create additional instability in the marketplace.

In addition to efforts to amend, repeal or replace Health Care Reform and the related regulations, the federal and state governments also continue to enact and seriously consider many other broad-based legislative and regulatory proposals that have had a material impact on or could materially impact various aspects of the health care and related benefits system and the Company's business. The Company cannot predict whether pending or future federal or state legislation or court proceedings, including future U.S. Congressional appropriations, will change various aspects of the health care and related benefits system or Health Care Reform or the impact those changes will have on the Company's business operations or operating results, but the effects could be materially adverse.

In addition, Health Care Reform ties a portion of each Medicare Advantage plans' reimbursement to the achievement of favorable CMS quality performance measures ("star ratings"). Since 2015, only Medicare Advantage plans with an overall star rating of four or more stars, (out of five stars) are eligible for a quality bonus in their basic premium rates. As a result, the Company's Medicare Advantage plans' operating results in 2017 and going forward will be significantly affected by their star ratings.

- D. The Company did not have any business interruption insurance recoveries for the years ending December 31, 2016 or 2015.
- E. The Company did not have any transferable and non-transferable state tax credits for the years ending December 31, 2016 or 2015.
- F. The Company did not have any subprime mortgage related risk exposures at December 31, 2016 or 2015.
- G. The Company did not have any retained assets at December 31, 2016 or 2015.
- H. The Company did not have any insurance-linked securities ("ILS") contracts at December 31, 2016 or 2015.

22. Events subsequent

A. Type I - Recognized subsequent events

Subsequent events have been considered through February 24, 2017 for the statutory statement issued on March 1, 2017.

The Company had no known reportable recognized subsequent events.

B. Type II - Nonrecognized subsequent events

Subsequent events have been considered through February 24, 2017 for the statutory statement issued on March 1, 2017.

The Company had no known reportable nonrecognized subsequent events.

23. Reinsurance

The Company did not have any reinsurance recoverables in dispute, reinsurance assumed, uncollectible reinsurance, commutation of ceded reinsurance, or retroactive reinsurance at December 31, 2016 or 2015.

24. Retrospectively rated contracts and contracts subject to redetermination

A. and B.

The Company did not have any retrospectively rated contracts in 2016 or 2015.

C. Contracts subject to redetermination

The Company did not have any contracts subject to redetermination in 2016 or 2015.

D. Medical loss ratio rebates required pursuant to the Public Health Service Act

The Company did not have any medical loss ratios required pursuant to the Public Health Service Act in 2016 or 2015.

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)? No

(2) through (5): Not applicable.

25. Change in incurred claims and claims adjustment expense

The following table shows the components of the change in claims unpaid, unpaid claims adjustment expense and aggregate health claim reserves for the years ending December 31, 2016 and 2015.

<u>(in thousands)</u>	<u>2016</u>	<u>2015</u>
Balance, January 1	\$16	\$16
Health care receivable	-	-
Balance, January 1, net of health care receivable	<u>16</u>	<u>16</u>
Incurred related to:		
Current year	-	-
Prior years	(67)	(25)
Total incurred	<u>(67)</u>	<u>(25)</u>
Paid related to:		
Current year	-	-
Prior years	(51)	(25)
Total paid	<u>(51)</u>	<u>(25)</u>
Balance, December 31, net of health care receivable	-	16
Health care receivable	-	-
Balance, December 31	<u>-</u>	<u>\$16</u>

In 2016, reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years decreased by \$16 thousand from \$16 thousand in 2015 to \$0 in 2016. In 2015, reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years remained unchanged from 2014. Historical health care cost trend rates are not necessarily representative of current trends. The Company considers historical trend rates together with knowledge of recent events that may impact current trends when developing estimates of current trend rates. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

Net coordination of benefits are implicit in the claims incurred but not reported calculation and could not be specifically identified.

26. Intercompany pooling arrangements

The Company did not have any intercompany pooling arrangements at December 31, 2016 or 2015.

27. Structured settlements

Not applicable to health entities.

28. Health care receivables

A. Pharmaceutical rebate receivables

The Company did not have any pharmaceutical rebate receivables at December 31, 2016 or 2015.

B. Risk sharing receivables

The Company did not have any admitted risk sharing receivables at December 31, 2016 or 2015.

29. Participating policies

The Company did not have any participating policies at December 31, 2016 or 2015.

30. Premium deficiency reserves

	<u>December 31, 2016</u>
1. Liability carried for premium deficiency reserves	\$0
2. Date of the most recent evaluation of this liability	12/31/2016
3. Was anticipated investment income utilized in the calculation?	No

31. Anticipated salvage and subrogation

See discussion of hospital and medical costs and claims adjustment expenses and related reserves in Note 1.

GENERAL INTERROGATORIES

**PART 1 - COMMON INTERROGATORIES
GENERAL**

- 1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
If yes, complete Schedule Y, Parts 1, 1A and 2
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [X] No [] N/A []
- 1.3 State Regulating? Connecticut
- 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 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2015
- 3.2 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. 12/31/2010
- 3.3 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). 04/05/2012
- 3.4 By what department or departments?
State of Connecticut Insurance Department
- 3.5 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]
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [X] N/A []
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business? Yes [] No [X]
4.12 renewals? Yes [] No [X]
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business? Yes [] No [X]
4.22 renewals? Yes [] No [X]
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 5.2 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 |
|---------------------|------------------------|------------------------|
| | | |
- 6.1 Has the 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]
- 6.2 If yes, give full information:
N/A
- 7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]
- 7.2 If yes,
7.21 State the percentage of foreign control; 0.0 %
7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).

1 Nationality	2 Type of Entity

GENERAL INTERROGATORIES

- 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.
N/A
- 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

- 9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
N/A; The Company has received an exemption from filing the audited financial statements.
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [] No [X]
- 10.2 If the response to 10.1 is yes, provide information related to this exemption:
N/A
- 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]
- 10.4 If the response to 10.3 is yes, provide information related to this exemption:
N/A
- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [] N/A []
- 10.6 If the response to 10.5 is no or n/a, please explain
N/A
- 11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
William R. Jones, FSA, MAAA; 151 Farmington Avenue, RE2R; Hartford, CT 06156
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]
 - 12.11 Name of real estate holding company N/A
 - 12.12 Number of parcels involved 0
 - 12.13 Total book/adjusted carrying value \$ 0
- 12.2 If, yes provide explanation:
N/A
- 13. **FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**
- 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
N/A
- 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No [X]
- 13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No [X]
- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A [X]
- 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
 - (a) Honesty 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.
- 14.11 If the response to 14.1 is No, please explain:
N/A
- 14.2 Has the code of ethics for senior managers been amended? Yes [X] No []
- 14.21 If the response to 14.2 is yes, provide information related to amendment(s).
See Attachment A
- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
- 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).
N/A

GENERAL INTERROGATORIES

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [X]
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [X] No []
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [X] No []
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person? Yes [X] No []

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.11 To directors or other officers \$0
 - 20.12 To stockholders not officers \$0
 - 20.13 Trustees, supreme or grand (Fraternal Only) \$0
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.21 To directors or other officers \$0
 - 20.22 To stockholders not officers \$0
 - 20.23 Trustees, supreme or grand (Fraternal Only) \$0
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- 21.21 Rented from others \$0
 - 21.22 Borrowed from others \$0
 - 21.23 Leased from others \$0
 - 21.24 Other \$0
- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [] No [X]
- 22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment \$0
 - 22.22 Amount paid as expenses \$0
 - 22.23 Other amounts paid \$0
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$0

INVESTMENT

- 24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.03) Yes [X] No []
- 24.02 If no, give full and complete information relating thereto
N/A
- 24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)
N/A
- 24.04 Does the Company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? Yes [] No [] N/A [X]
- 24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs \$0
- 24.06 If answer to 24.04 is no, report amount of collateral for other programs \$0
- 24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]
- 24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]
- 24.09 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A [X]

GENERAL INTERROGATORIES

24.10 For the reporting entity's security lending program state the amount of the following as December 31 of the current year:

24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$	0
24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$	0
24.103 Total payable for securities lending reported on the liability page.	\$	0

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03). Yes No

25.2 If yes, state the amount thereof at December 31 of the current year:

25.21 Subject to repurchase agreements	\$	0
25.22 Subject to reverse repurchase agreements	\$	0
25.23 Subject to dollar repurchase agreements	\$	0
25.24 Subject to reverse dollar repurchase agreements	\$	0
25.25 Placed under option agreements	\$	0
25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock	\$	0
25.27 FHLB Capital Stock	\$	0
25.28 On deposit with states	\$	499,210
25.29 On deposit with other regulatory bodies	\$	0
25.30 Pledged as collateral - excluding collateral pledged to an FHLB	\$	0
25.31 Pledged as collateral to FHLB - including assets backing funding agreements	\$	0
25.32 Other	\$	0

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes No

26.2 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.

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes No

27.2 If yes, state the amount thereof at December 31 of the current year. \$

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

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

1 Name of Custodian(s)	2 Custodian's Address
State Street Bank and Trust Company	State Street Financial Center; One Lincoln Street; Boston, MA 02111-29000

28.02 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)

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? Yes No

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

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

GENERAL INTERROGATORIES

28.05 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
Kevin J. Casey as Senior Investment Officer	A.....

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's assets?..... Yes [] No [X]

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's assets?..... Yes [] No [X]

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

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

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? Yes [] No [X]

29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
29.2999 - Total		0

29.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds	2,712,029	2,740,629	28,600
30.2 Preferred stocks	0	0	0
30.3 Totals	2,712,029	2,740,629	28,600

30.4 Describe the sources or methods utilized in determining the fair values:
See Attachment A

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [X] No []

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [X] No []

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:
N/A

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

32.2 If no, list exceptions:
N/A

GENERAL INTERROGATORIES

OTHER

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?\$0

33.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid

34.1 Amount of payments for legal expenses, if any?\$0

34.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?\$0

35.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid

December 31, 2016
General Interrogatories Responses

Question 14.21:

The key substantive changes include:

- Updated message from the Chairman
- Updated and expanded examples of conflicts of interest by increasing the threshold of stock ownership and adding running for, or holding, a public office
- Increased the business gift limit from \$25.00 to \$50.00
- Updated gift, reward, incentive and promotional program restrictions for members of government plans
- Added a section on employees' responsibility for their licensure and certification renewals
- Clarified the definition of 'social media' and expanded the rules for its use
- Updated guidance on protecting Aetna's intellectual property
- Expanded guidance regarding personal political contributions
- Clarified reporting requirements for government contract lobbying or procurement activities
- Introduced the requirement to report a felony conviction or plea to Investigative Services
- Added a section that specifically addresses Fraud, Waste and Abuse
- Added a section on proper supplier engagement process

There are also numerous non-substantive clarifying and conforming changes and updates to the factual information contained in the Code of Conduct, such as the level of giving by the Aetna Foundation since 1980, the inclusion of 'bullying' as a form of harassment, and the addition of anti-human trafficking, bribery and kickback laws relating to our government business.

Question 30.4:

Fair value of long term bonds and preferred stocks are determined based on quoted market prices when available, fair values using valuation methodologies based on available and observable market information or by using matrix pricing. If quoted market prices are not available, we determine fair value using broker quoted or an internal analysis of each investment's financial performance and cash flow projections. Short Term investments are carried at amortized cost which approximates fair value. The carrying value of cash equivalents which approximates fair value.

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [] No [X]

1.2 If yes, indicate premium earned on U.S. business only.\$ 0

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?\$ 0

1.31 Reason for excluding

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above\$ 0

1.5 Indicate total incurred claims on all Medicare Supplement Insurance.\$ 0

1.6 Individual policies:

Most current three years:

1.61 Total premium earned\$ 0

1.62 Total incurred claims\$ 0

1.63 Number of covered lives0

All years prior to most current three years:

1.64 Total premium earned\$ 0

1.65 Total incurred claims\$ 0

1.66 Number of covered lives0

1.7 Group policies:

Most current three years:

1.71 Total premium earned\$ 0

1.72 Total incurred claims\$ 0

1.73 Number of covered lives0

All years prior to most current three years:

1.74 Total premium earned\$ 0

1.75 Total incurred claims\$ 0

1.76 Number of covered lives0

2. Health Test:

		1	2	
		Current Year	Prior Year	
2.1	Premium Numerator	0	0	
2.2	Premium Denominator	0	0	
2.3	Premium Ratio (2.1/2.2)	0.000	0.000	
2.4	Reserve Numerator	0	15,942	
2.5	Reserve Denominator	0	15,942	
2.6	Reserve Ratio (2.4/2.5)	0.000	1.000	

3.1 Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, as and if the earnings of the reporting entity permits? Yes [] No [X]

3.2 If yes, give particulars:
N/A

4.1 Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency? Yes [] No [X]

4.2 If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered? Yes [] No [X]

5.1 Does the reporting entity have stop-loss reinsurance? Yes [] No [X]

5.2 If no, explain:
The Company does not have stop loss insurance.

5.3 Maximum retained risk (see instructions)

5.31 Comprehensive Medical\$ 0

5.32 Medical Only\$ 0

5.33 Medicare Supplement\$ 0

5.34 Dental & Vision\$ 0

5.35 Other Limited Benefit Plan\$ 0

5.36 Other\$ 0

6. Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:
The Company does not currently sell to or insure members in Connecticut

7.1 Does the reporting entity set up its claim liability for provider services on a service date basis? Yes [X] No []

7.2 If no, give details
N/A

8. Provide the following information regarding participating providers:

8.1 Number of providers at start of reporting year0

8.2 Number of providers at end of reporting year0

9.1 Does the reporting entity have business subject to premium rate guarantees? Yes [] No [X]

9.2 If yes, direct premium earned:

9.21 Business with rate guarantees between 15-36 months...\$ 0

9.22 Business with rate guarantees over 36 months\$ 0

GENERAL INTERROGATORIES

10.1 Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts? Yes [] No [X]

10.2 If yes: 10.21 Maximum amount payable bonuses\$0
10.22 Amount actually paid for year bonuses\$0
10.23 Maximum amount payable withholds\$0
10.24 Amount actually paid for year withholds\$0

11.1 Is the reporting entity organized as: 11.12 A Medical Group/Staff Model, Yes [] No [X]
11.13 An Individual Practice Association (IPA), or, Yes [] No [X]
11.14 A Mixed Model (combination of above)? Yes [] No [X]

11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements? Yes [X] No []

11.3 If yes, show the name of the state requiring such minimum capital and surplus. Connecticut

11.4 If yes, show the amount required.\$ 1,000,000

11.5 Is this amount included as part of a contingency reserve in stockholder's equity? Yes [] No [X]

11.6 If the amount is calculated, show the calculation
 See Notes to Financial Statement - Note 21, Other Items, C., Other Disclosures.

12. List service areas in which reporting entity is licensed to operate:

1 Name of Service Area
Fairfield, Hartford, Litchfield, Middlesex, New Haven, New London, Tolland, Windham

13.1 Do you act as a custodian for health savings accounts? Yes [] No [X]

13.2 If yes, please provide the amount of custodial funds held as of the reporting date.\$0

13.3 Do you act as an administrator for health savings accounts? Yes [] No [X]

13.4 If yes, please provide the balance of funds administered as of the reporting date.\$0

14.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? Yes [] No [] N/A [X]

14.2 If the answer to 14.1 is yes, please provide the following:

1 Company Name	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other

15. Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):

15.1 Direct Premium Written\$0

15.2 Total Incurred Claims\$0

15.3 Number of Covered Lives0

*Ordinary Life Insurance Includes
Term (whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary guarantee)
Universal Life (with or without secondary guarantee)
Variable Universal Life (with or without secondary guarantee)

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

FIVE-YEAR HISTORICAL DATA

	1 2016	2 2015	3 2014	4 2013	5 2012
Balance Sheet (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28)	3,104,738	3,043,265	3,538,349	3,048,138	19,744,351
2. Total liabilities (Page 3, Line 24)	9,012	19,158	560,292	152,516	2,223,454
3. Statutory minimum capital and surplus requirement	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000
4. Total capital and surplus (Page 3, Line 33)	3,095,726	3,024,107	2,978,057	2,895,622	17,520,897
Income Statement (Page 4)					
5. Total revenues (Line 8)	0	0	0	0	(673,035)
6. Total medical and hospital expenses (Line 18)	(66,642)	(24,643)	(81,254)	(758,664)	(4,036,540)
7. Claims adjustment expenses (Line 20)	0	0	0	0	0
8. Total administrative expenses (Line 21)	4,815	1,527	31	(6,476)	(555,082)
9. Net underwriting gain (loss) (Line 24)	61,827	23,116	81,223	765,140	3,918,587
10. Net investment gain (loss) (Line 27)	48,137	47,729	28,517	310,139	522,873
11. Total other income (Lines 28 plus 29)	0	0	0	0	0
12. Net income or (loss) (Line 32)	70,289	46,623	66,083	766,480	4,019,564
Cash Flow (Page 6)					
13. Net cash from operations (Line 11)	57,490	57,332	(68,799)	4,232,394	10,017,572
Risk-Based Capital Analysis					
14. Total adjusted capital	3,095,726	3,024,107	2,978,057	2,895,622	17,520,897
15. Authorized control level risk-based capital	8,066	10,539	11,259	10,530	25,286
Enrollment (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7)	0	0	0	0	0
17. Total members months (Column 6, Line 7)	0	0	0	0	0
Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Lines 18 plus Line 19)	0.0	0.0	0.0	0.0	599.8
20. Cost containment expenses	0.0	0.0	0.0	0.0	0.0
21. Other claims adjustment expenses	0.0	0.0	0.0	0.0	0.0
22. Total underwriting deductions (Line 23)	0.0	0.0	0.0	0.0	682.2
23. Total underwriting gain (loss) (Line 24)	0.0	0.0	0.0	0.0	(582.2)
Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 13, Col. 5)	(50,700)	(8,701)	(72,531)	1,421,573	25,254,957
25. Estimated liability of unpaid claims-[prior year (Line 13, Col. 6)]	15,942	15,942	8,723	2,180,237	29,291,497
Investments In Parent, Subsidiaries and Affiliates					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1)	0	0	0	0	0
27. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)	0	0	0	0	0
28. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)	0	0	0	0	0
29. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	0
30. Affiliated mortgage loans on real estate	0	0	0	0	0
31. All other affiliated	0	0	0	0	0
32. Total of above Lines 26 to 31	0	0	0	0	0
33. Total investment in parent included in Lines 26 to 31 above	0	0	0	0	0

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors? Yes [] No []
 if no, please explain:



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Aetna Better Health Inc. (a Connecticut corporation) 2. Hartford, CT

NAIC Group Code	0001	BUSINESS IN THE STATE OF			DURING THE YEAR					(LOCATION)		
		1	2	3	4	5	6	7	8	9	10	
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:												
1.	Prior Year	0	0	0	0	0	0	0	0	0	0	
2.	First Quarter	0	0	0	0	0	0	0	0	0	0	
3.	Second Quarter	0	0	0	0	0	0	0	0	0	0	
4.	Third Quarter	0	0	0	0	0	0	0	0	0	0	
5.	Current Year	0	0	0	0	0	0	0	0	0	0	
6.	Current Year Member Months	0	0	0	0	0	0	0	0	0	0	
Total Member Ambulatory Encounters for Year:												
7.	Physician	0	0	0	0	0	0	0	0	0	0	
8.	Non-Physician	0	0	0	0	0	0	0	0	0	0	
9.	Total	0	0	0	0	0	0	0	0	0	0	
10.	Hospital Patient Days Incurred	0	0	0	0	0	0	0	0	0	0	
11.	Number of Inpatient Admissions	0	0	0	0	0	0	0	0	0	0	
12.	Health Premiums Written (b)	0	0	0	0	0	0	0	0	0	0	
13.	Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	
14.	Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	
15.	Health Premiums Earned	0	0	0	0	0	0	0	0	0	0	
16.	Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	
17.	Amount Paid for Provision of Health Care Services	(50,700)	0	0	0	0	0	0	0	0	(50,700)	
18.	Amount Incurred for Provision of Health Care Services	(66,642)	0	0	0	0	0	0	0	0	(66,642)	

(a) For health business: number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0
 (b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$0



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Aetna Better Health Inc. (a Connecticut corporation) 2. Hartford, CT

NAIC Group Code	0001	BUSINESS IN THE STATE OF			DURING THE YEAR						(LOCATION)		
		1	2	3	4	5	6	7	8	9	10		
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:													
1.	Prior Year	0	0	0	0	0	0	0	0	0	0	0	
2.	First Quarter	0	0	0	0	0	0	0	0	0	0	0	
3.	Second Quarter	0	0	0	0	0	0	0	0	0	0	0	
4.	Third Quarter	0	0	0	0	0	0	0	0	0	0	0	
5.	Current Year	0	0	0	0	0	0	0	0	0	0	0	
6.	Current Year Member Months	0	0	0	0	0	0	0	0	0	0	0	
Total Member Ambulatory Encounters for Year:													
7.	Physician	0	0	0	0	0	0	0	0	0	0	0	
8.	Non-Physician	0	0	0	0	0	0	0	0	0	0	0	
9.	Total	0	0	0	0	0	0	0	0	0	0	0	
10.	Hospital Patient Days Incurred	0	0	0	0	0	0	0	0	0	0	0	
11.	Number of Inpatient Admissions	0	0	0	0	0	0	0	0	0	0	0	
12.	Health Premiums Written (b)	0	0	0	0	0	0	0	0	0	0	0	
13.	Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	0	
14.	Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	0	
15.	Health Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	
16.	Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	
17.	Amount Paid for Provision of Health Care Services	(50,700)	0	0	0	0	0	0	0	0	0	(50,700)	
18.	Amount Incurred for Provision of Health Care Services	(66,642)	0	0	0	0	0	0	0	0	0	(66,642)	

(a) For health business: number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0
 (b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$0

Schedule S - Part 1 - Section 2

NONE

Schedule S - Part 2

NONE

Schedule S - Part 3 - Section 2

NONE

Schedule S - Part 4

NONE

Schedule S - Part 4 - Bank Footnote

NONE

Schedule S - Part 5

NONE

Schedule S - Part 5 - Bank Footnote

NONE

Schedule S - Part 6

NONE

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	3,092,800	0	3,092,800
2. Accident and health premiums due and unpaid (Line 15)	0	0	0
3. Amounts recoverable from reinsurers (Line 16.1)	0	0	0
4. Net credit for ceded reinsurance	XXX	0	0
5. All other admitted assets (Balance)	11,938	0	11,938
6. Total assets (Line 28)	3,104,738	0	3,104,738
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1)	0	0	0
8. Accrued medical incentive pool and bonus payments (Line 2)	0	0	0
9. Premiums received in advance (Line 8)	0	0	0
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19 first inset amount plus second inset amount)	0	0	0
11. Reinsurance in unauthorized companies (Line 20 minus inset amount)	0	0	0
12. Reinsurance with Certified Reinsurers (Line 20 inset amount)	0	0	0
13. Funds held under reinsurance treaties with Certified Reinsurers (Line 19 third inset amount)	0	0	0
14. All other liabilities (Balance)	9,012	0	9,012
15. Total liabilities (Line 24)	9,012	0	9,012
16. Total capital and surplus (Line 33)	3,095,726	XXX	3,095,726
17. Total liabilities, capital and surplus (Line 34)	3,104,738	0	3,104,738
NET CREDIT FOR CEDED REINSURANCE			
18. Claims unpaid	0		
19. Accrued medical incentive pool	0		
20. Premiums received in advance	0		
21. Reinsurance recoverable on paid losses	0		
22. Other ceded reinsurance recoverables	0		
23. Total ceded reinsurance recoverables	0		
24. Premiums receivable	0		
25. Funds held under reinsurance treaties with authorized and unauthorized reinsurers	0		
26. Unauthorized reinsurance	0		
27. Reinsurance with Certified Reinsurers	0		
28. Funds held under reinsurance treaties with Certified Reinsurers	0		
29. Other ceded reinsurance payables/offsets	0		
30. Total ceded reinsurance payables/offsets	0		
31. Total net credit for ceded reinsurance	0		

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

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

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

Explanation of basis of allocation by states, premiums by state, etc.

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

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

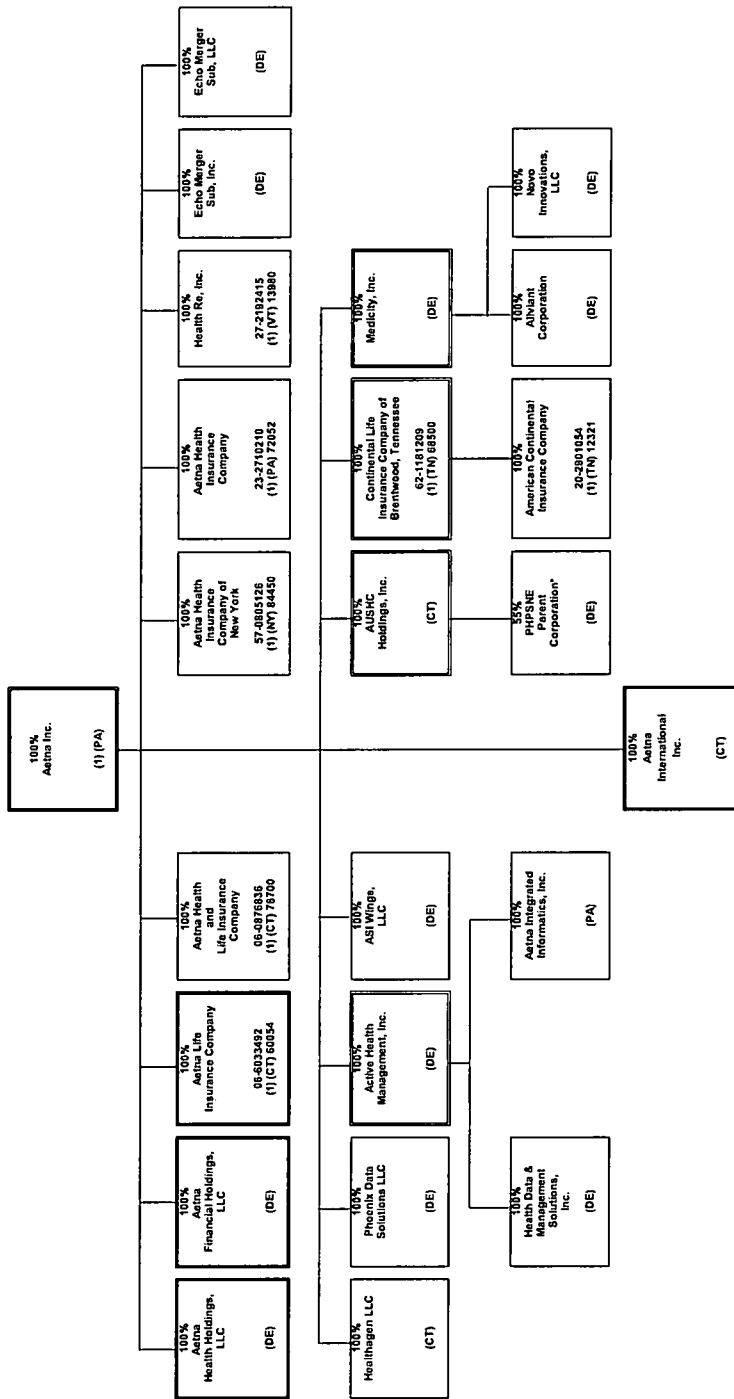
Allocated by States and Territories

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

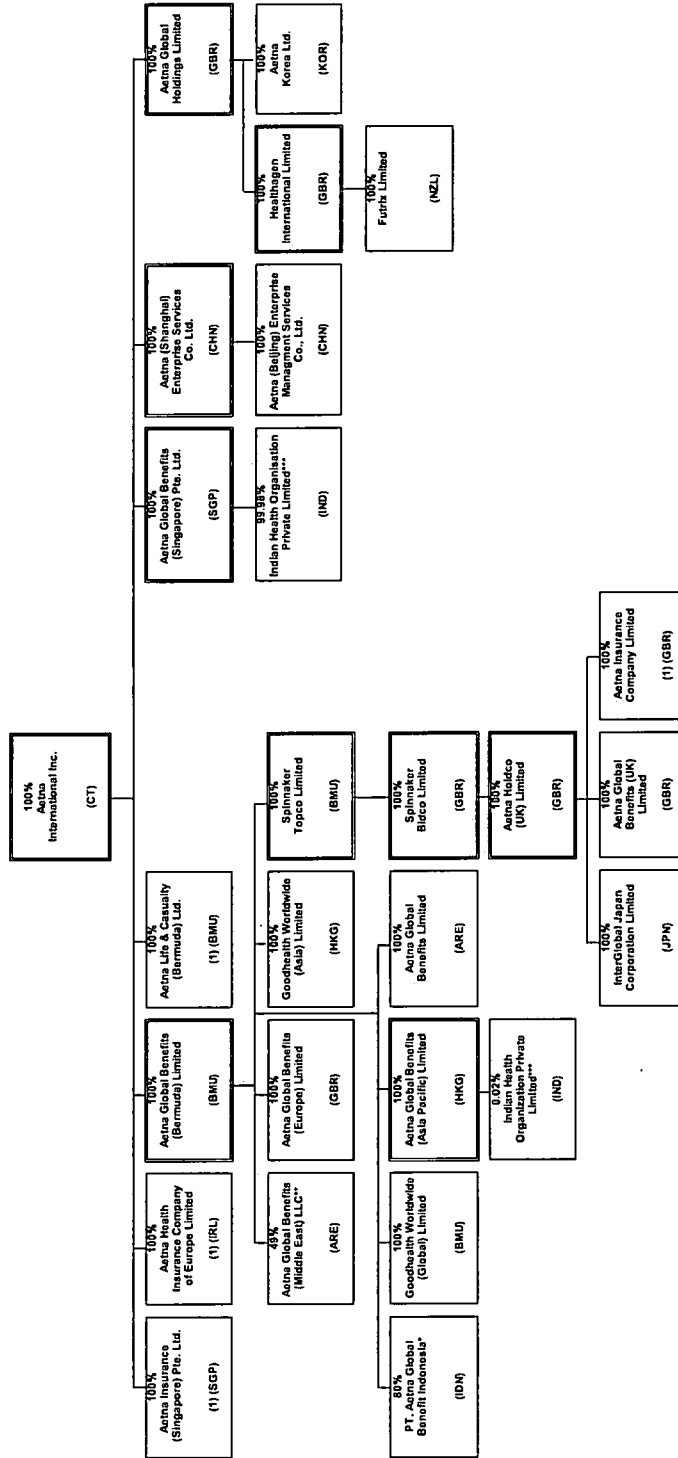
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



(1) Insurance/HMO's. Percentages are rounded to the nearest whole percent and based on ownership of voting rights. Double borders indicate entity has subsidiaries shown on the same page. Bold borders indicate entity has subsidiaries shown on a separate page. *55% is owned by AUSHC Holdings, Inc. and 45% is owned by third parties.

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

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

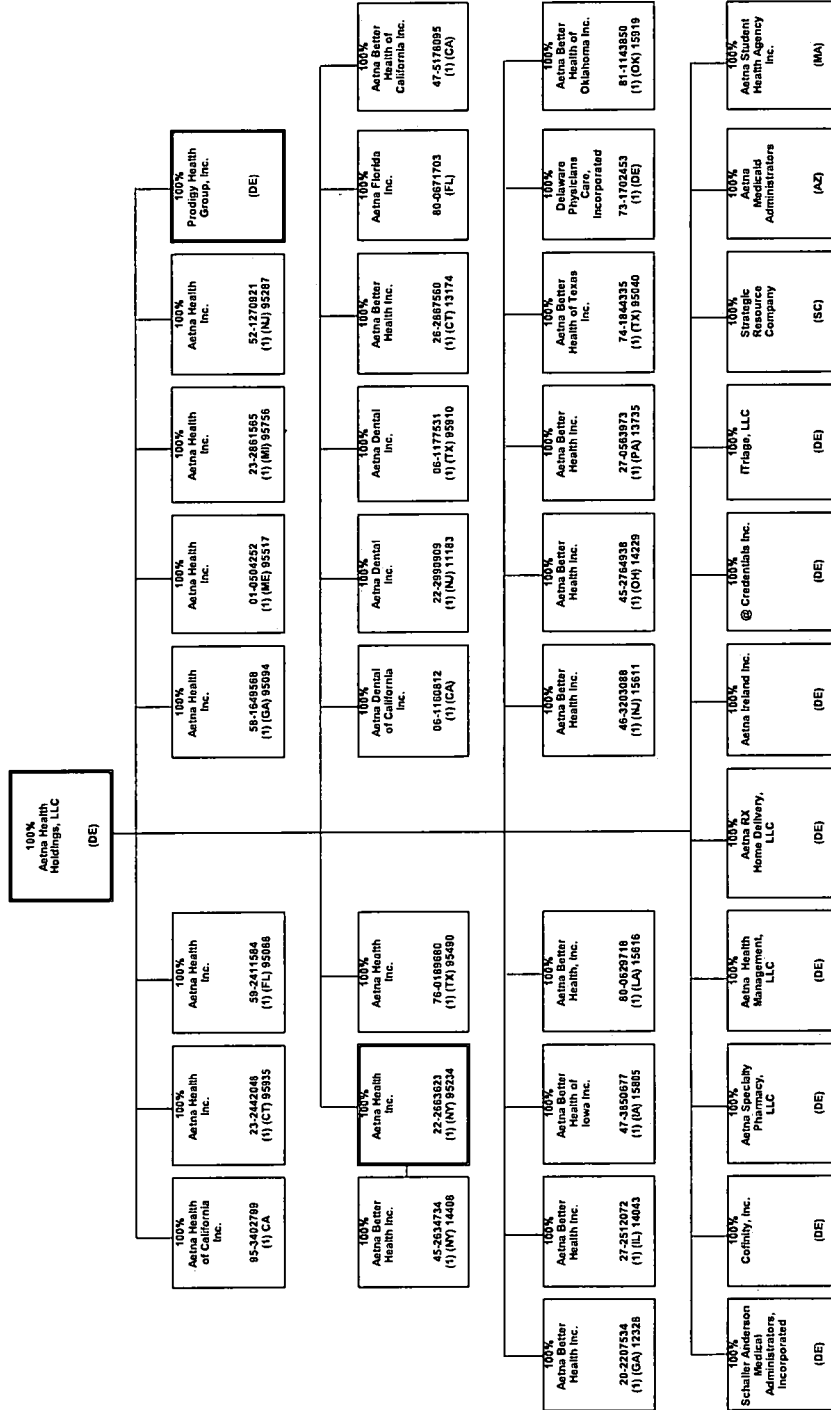


*Aetna Global Benefits (Bermuda) Limited owns 80% and 20% is owned by Subhatsvsh Rhoel Aetna's Nominee.
 ** Aetna Global Benefits (Bermuda) Limited owns 48% and 51% is owned by Euro Gulf LLC, Aetna's Nominee.
 *** Aetna Global Benefits (Asia Pacific) Limited owns 0.019857% of Indian Health Organization Private Limited and Aetna Global Benefits (Singapore) Pte. Ltd. owns 99.980143%.

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

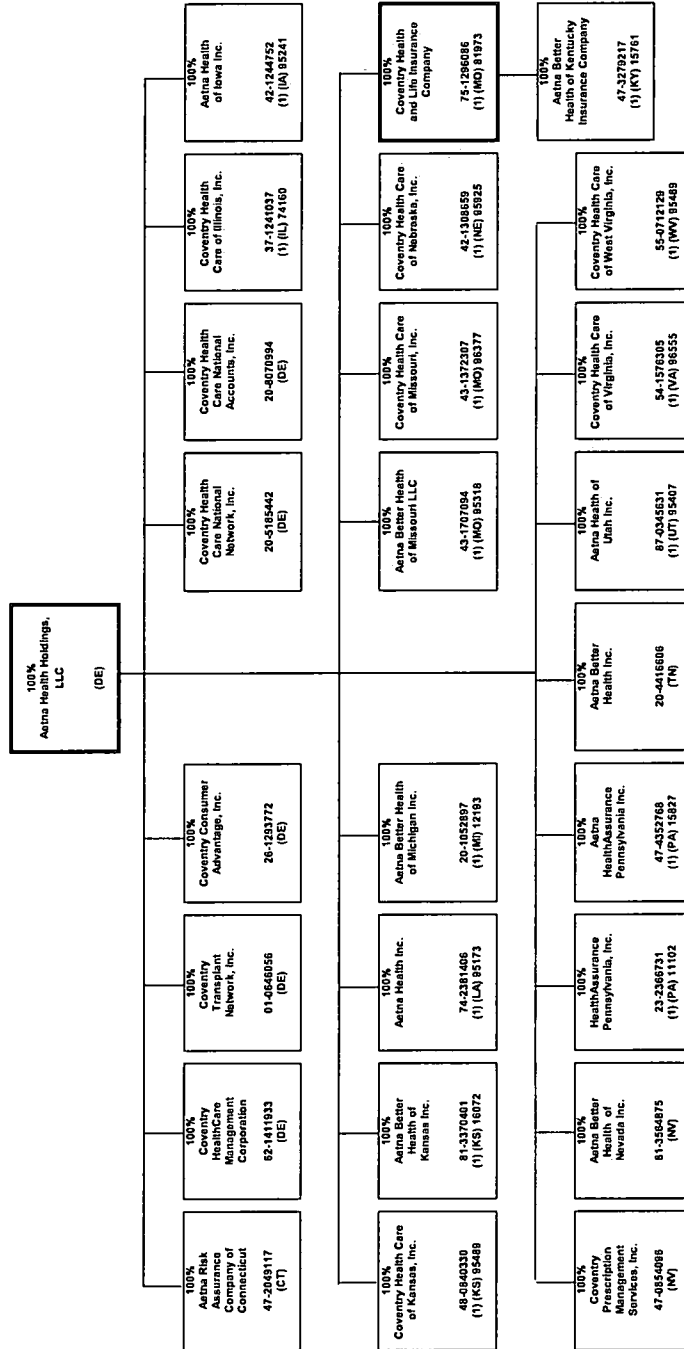
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



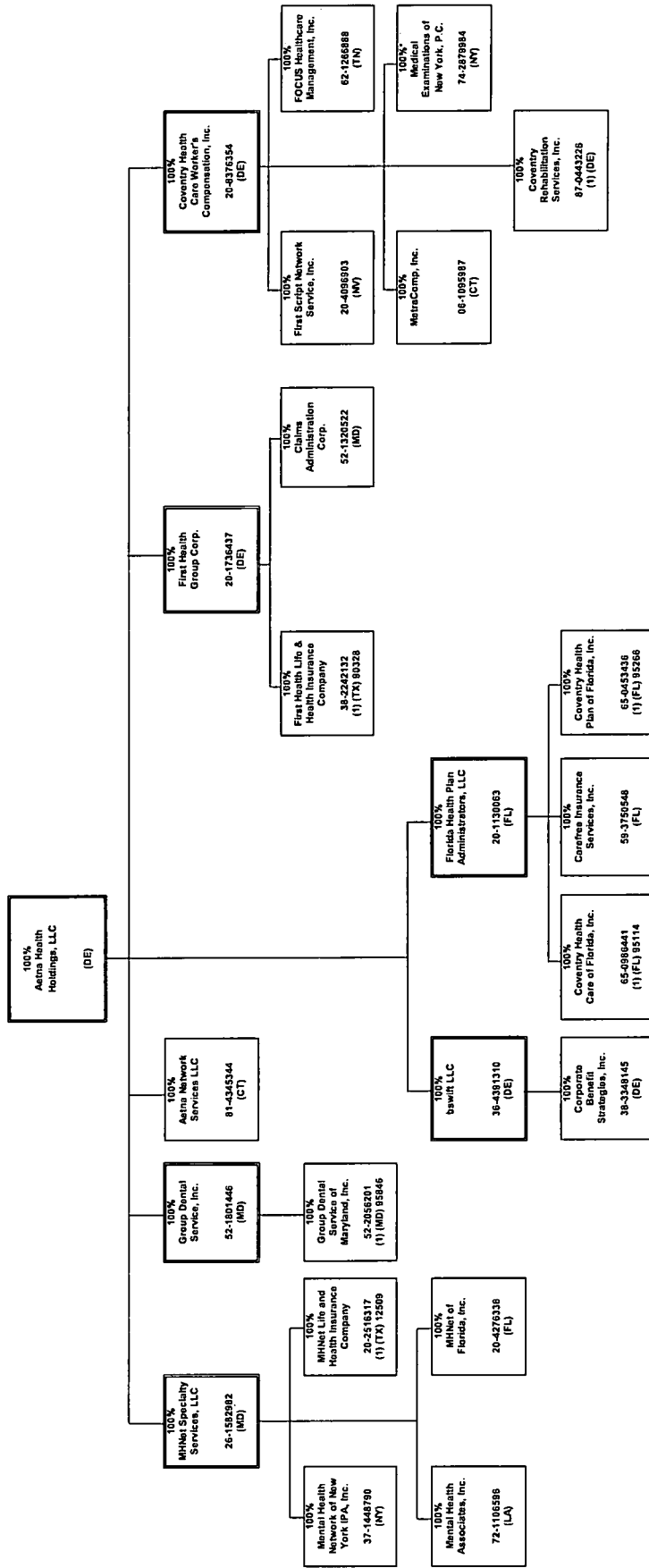
ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

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

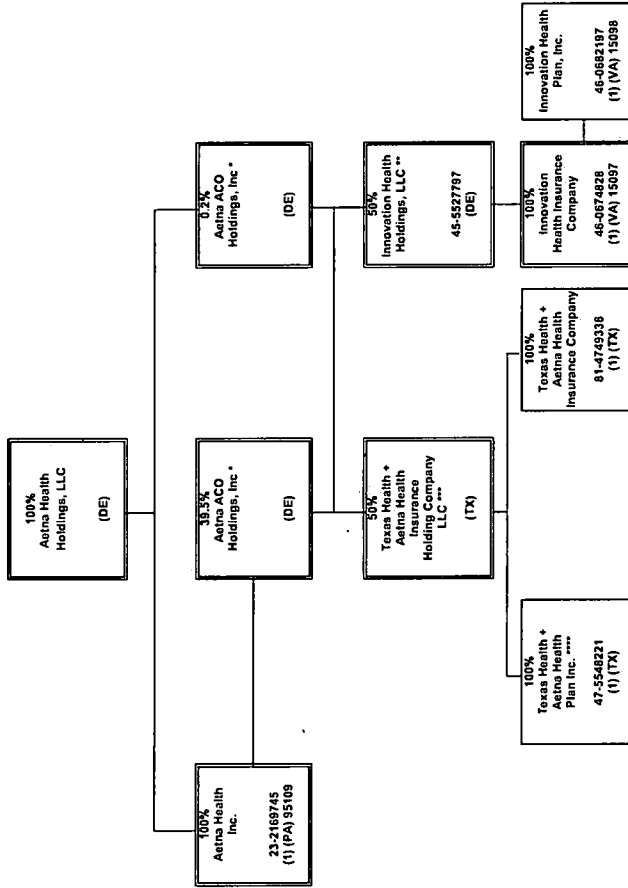


*100% owned through Aetna's nominees

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

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

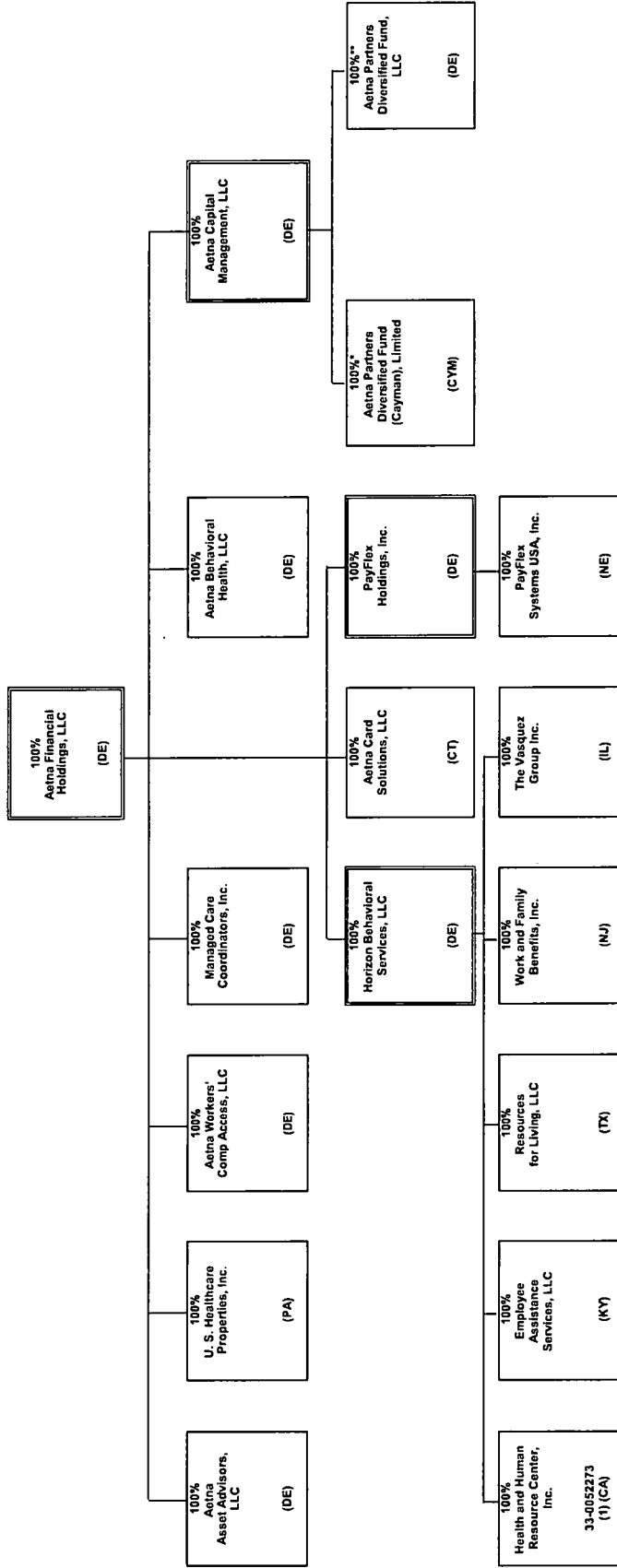
PART 1 - ORGANIZATIONAL CHART



* 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).
 ** Innovation Health Holdings, LLC is 50% owned by Aetna ACO Holdings, Inc. and 50% owned by Inova Health System Foundation, an unaffiliated company.
 *** Texas Health + Aetna Health Insurance Holding Company LLC is 50% owned by Aetna ACO Holdings Inc. and 50% owned by Texas Health Resources, an unaffiliated company.
 **** Texas Health + Aetna Health Plan Inc. will become a direct subsidiary of Texas Health + Aetna Health Insurance Company in February 2017.

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

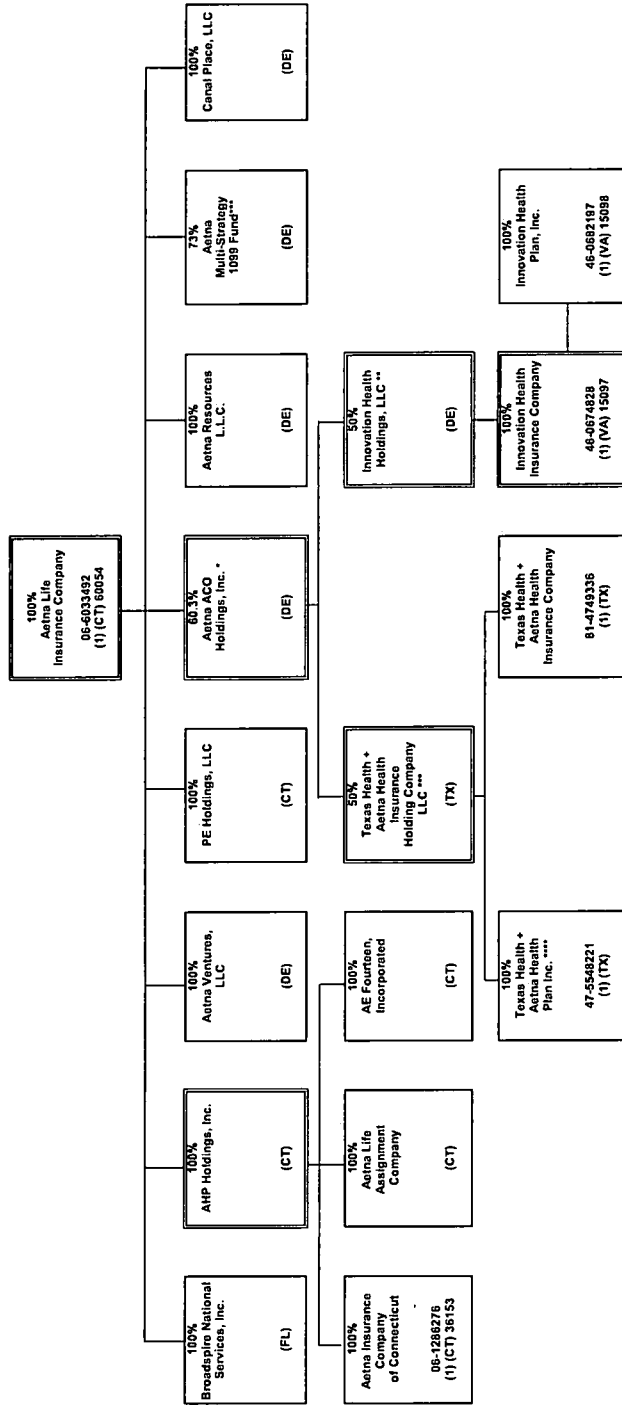
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



* Aetna Life Insurance Company owns the Class C participating shares of Aetna Partners Diversified Fund (Cayman), Limited.
 ** Aetna Life Insurance Company and Aetna Health and Life Insurance Company own substantially all of the non-managing member interests of Aetna Partners Diversified Fund, LLC.

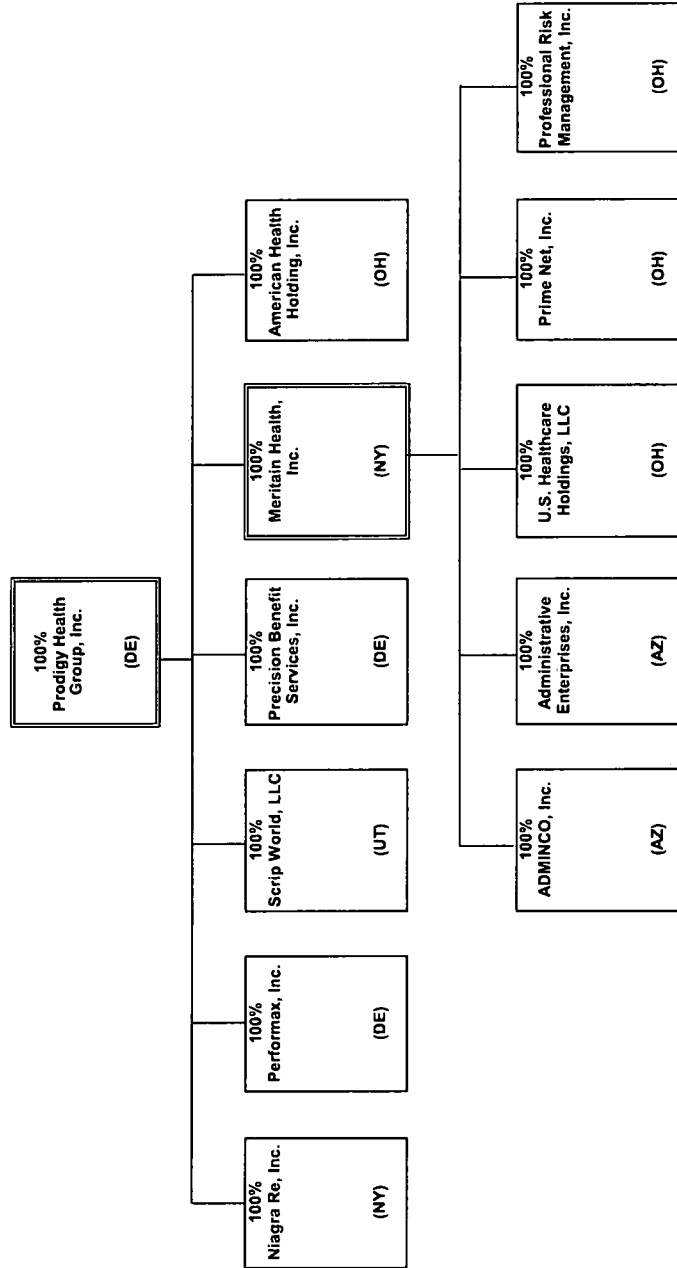
ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

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



* 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).
 ** Innovation Health Holdings, LLC is 50% owned by Aetna ACO Holdings, Inc. and 50% owned by Inova Health System Foundation, an unaffiliated company.
 *** Texas Health + Aetna Health Insurance Holdings, LLC is 50% owned by Texas Health + Aetna Health Insurance Company and 50% owned by Texas Health + Aetna Health Insurance Company (an unaffiliated company).
 **** Texas Health + Aetna Health Plan, Inc. will become a direct subsidiary of Texas Health + Aetna Health Insurance Company in February 2017.

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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

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)	Parent, Subsidiaries or Affiliates	Dominant Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	Control is Ownership Provide Percentage	Ultimate Controlling Entities/Person(s)	Is an SCA Filing Required? (Y/N)	
.001	AETNA INC.	0000	21-228283	393706	112204	N	Aetna Inc.	CT	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	30-012354	0	0		Aetna Health Holdings, LLC	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	35-042789	0	0		Aetna Health of California Inc.	CA	IA	Aetna Health of California Inc.	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	5635	22-244208	0	0		Aetna Health Inc.	GA	IA	Aetna Health Inc.	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	5058	59-241134	0	0		Aetna Health Inc.	GA	IA	Aetna Health Inc.	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	5054	58-194566	0	0		Aetna Health Inc.	GA	IA	Aetna Health Inc.	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	5517	01-460452	0	0		Aetna Health Inc.	IL	IA	Aetna Health Inc.	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	5756	22-285156	0	0		Aetna Health Inc.	IL	IA	Aetna Health Inc.	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	5927	58-127921	0	0		Aetna Health Inc.	IL	IA	Aetna Health Inc.	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	5924	22-263023	0	0		Aetna Better Health Inc.	IL	IA	Aetna Health Inc.	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	3468	42-263474	0	0		Aetna Health Inc.	IL	IA	Aetna Health Inc.	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	5659	17-103880	0	0		Aetna Better Health of Texas Inc.	TX	IA	Aetna Health Inc.	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	5659	17-103880	0	0		Aetna Better Health of Texas Inc.	TX	IA	Aetna Health Inc.	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	3228	26-297534	0	0		Aetna Health Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	1183	06-168432	0	0		Aetna Health Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	22-290969	0	0		Aetna Health Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	5910	06-117531	0	0		Aetna Health Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	30-012370	0	0		Aetna Rx New Delivery, LLC	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	13-397079	0	0		Aetna Health of New Jersey, LLC	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	22-318743	0	0		Aetna Health of New Jersey, LLC	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	51-109768	0	0		Aetna Specialty Pharmacy, LLC	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	28-127472	0	0		Aetna Specialty Pharmacy, LLC	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	22-287120	0	0		Coventry, Inc.	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	51-464044	0	0		Credentia Inc.	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	3735	27-483073	0	0		Strategic Resource Company	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0174	42-291982	0	0		Aetna Better Health Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	4592	22-281922	0	0		Aetna Better Health Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	4693	21-251092	0	0		Aetna Better Health Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	1565	80-069718	0	0		Aetna Better Health Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	80-069718	0	0		Aetna Better Health Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	1429	25-276438	0	0		Aetna Better Health Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	1581	46-300088	0	0		Aetna Better Health Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	15919	81-143850	0	0		Aetna Student Health Agency, Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	04-2708160	0	0		Aetna Student Health Agency, Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	79-102453	0	0		Dalence Physicians Care, Incorporated	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	01-068783	0	0		Schaller Anderson Medical Administrators, Incorporated	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	82-062459	0	0		Aetna Medicaid Administrators LLC	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	45-291476	0	0		Triage, LLC	AZ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	45-291476	0	0		Triage, LLC	AZ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	45-291476	0	0		Triage, LLC	AZ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	45-552797	0	0		Aetna Health Holdings, Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	1567	46-0674628	0	0		Immolation Health Insurance Company	VA	IA	Aetna Health Holdings, LLC	Ownership	50.000	Aetna Inc.	N	4
.001	AETNA INC.	1568	46-0674628	0	0		Immolation Health Insurance Company	VA	IA	Aetna Health Holdings, LLC	Ownership	50.000	Aetna Inc.	N	4
.001	AETNA INC.	0000	81-378957	0	0		Texas Health + Aetna Health Insurance Holding Company LLC	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	81-474536	0	0		Texas Health + Aetna Health Insurance Holding Company LLC	TX	IA	Aetna Health Holdings, LLC	Ownership	50.000	Aetna Inc.	N	11
.001	AETNA INC.	0000	47-554821	0	0		Texas Health + Aetna Health Plan Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	5109	22-2199745	0	0		Aetna Health Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	12
.001	AETNA INC.	0000	49-031341	0	0		Aetna Health Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.001	AETNA INC.	0000	23-0536975	0	0		Prudential Health Group, Inc.	NY	IA	Aetna Health Holdings, LLC	Ownership	38.500	Aetna Inc.	N	4
.001	AETNA INC.	0000	23-0536975	0	0		Prudential Health Group, Inc.	NY	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

**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)	Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(es)/Person(s)	Is an SCA Filing Required? (Y/N)	
0001	AETNA INC			0			Performer, Inc.	DE	N/A		Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		53-826265	0			Scriptap, LLC	DE	N/A	Prodigy Health Corp, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		87-822615	0			Scriptap, LLC	DE	N/A	Prodigy Health Corp, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		27-137275	0			Scriptap, LLC	DE	N/A	Prodigy Health Corp, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		31-135846	0			Aetna Health Holding, Inc.	DE	N/A	Prodigy Health Corp, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		19-1056154	0			ADIMCO, Inc.	AZ	N/A	Veritain Health, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		66-457707	0			Administrative Enterprises, Inc.	AZ	N/A	Veritain Health, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		66-457749	0			U.S. Healthcare Holdings, LLC	OK	N/A	Veritain Health, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		15-1584081	0			Prize Net, Inc.	OH	N/A	Veritain Health, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		34-167029	0			Professional Risk Management, Inc.	OH	N/A	Veritain Health, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		34-134633	0			Continental Life Insurance Company of Brentwood, Tennessee	TN	N/A		Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		62-118126	0			American Continental Insurance Company	TN	N/A	Continental Life Insurance Company of Brentwood, Tennessee	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		20-200164	0			Aetna Life Insurance Company	DE	N/A	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		20-200165	0			Aetna Life Insurance Company	DE	N/A	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		45-160164	0			WP Holdings, Inc.	DE	N/A	WP Holdings, Inc.	Ownership	50.300	Aetna Inc.	N	4
0001	AETNA INC		06-270755	0			Aetna Insurance Company of Connecticut	CT	N/A	WP Holdings, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		06-198276	0			AE Fourteen Incorporated	CT	N/A	WP Holdings, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		06-102669	0			Aetna Life Insurance Company	CT	N/A	WP Holdings, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		06-373153	0			AE Holdings, LLC	CT	N/A	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		06-142207	0			Aetna Resources L.L.C.	DE	N/A	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		20-318070	0			Canal Plex, LLC	DE	N/A	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		20-318070	0			Aetna Ventures, LLC	DE	N/A	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		59-105747	0			Bradshire National Services, Inc.	FL	N/A	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		41-203581	0			Aetna Multi-Strategy 1059 Fund	DE	N/A	Aetna Life Insurance Company	Ownership	73.000	Aetna Inc.	N	9
0001	AETNA INC		20-200775	0			Aetna Financial Holdings, LLC	DE	N/A	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		20-200775	0			Aetna Financial Holdings, LLC	DE	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		58-370483	0			U.S. Healthcare Properties, Inc.	PA	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		11-565742	0	134522		Aetna Capital Management, LLC	DE	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC			0			Aetna Partners Diversified Fund (Japan), Limited	DE	N/A	Aetna Capital Management, LLC	Ownership	100.000	Aetna Inc.	N	1
0001	AETNA INC			0	148020		Aetna Behavioral Health, LLC	DE	N/A	Aetna Capital Management, LLC	Ownership	100.000	Aetna Inc.	N	2
0001	AETNA INC		20-444878	0			Aetna Behavioral Health, LLC	DE	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		20-444878	0			Managed Care Coordinators, Inc.	DE	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		23-207015	0			Horizon Behavioral Services, LLC	DE	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		59-235144	0			Employee Assistance Services, LLC	DE	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		61-135649	0			Health and Human Resource Center, Inc.	CA	N/A	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		30-052273	0			Resources for Living, LLC	TX	N/A	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		75-242673	0			The Visage Group Inc.	IL	N/A	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		36-381261	0			Work and Family Benefits, Inc.	IN	N/A	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		22-170742	0			Aetna Card Solutions, LLC	CT	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		50-215474	0			Profitability Solutions, LLC	CT	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		91-177443	0			Aetna Health and Life Insurance Company	PA	N/A	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		06-487638	0			Aetna Health Insurance Company	PA	N/A	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		22-271219	0			Aetna International Inc.	NY	N/A	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		84-50	0			Aetna Life Casualty (Barbados) Ltd.	BM	N/A	Aetna International Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		57-4865126	0			Aetna Insurance (Singapore) Pte. Ltd.	SG	N/A	Aetna International Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		66-1571642	0			Aetna Global Benefits (Barbados) Limited	BM	N/A	Aetna International Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		98-4211470	0			Goodwith Benefits (Global) Limited	BM	N/A	Aetna Global Benefits (Barbados) Limited	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC			0			Aetna Global Benefits (Global) Limited	BM	N/A	Aetna Global Benefits (Barbados) Limited	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC			0			Aetna Global Benefits (Europe) Limited	BE	N/A	Aetna Global Benefits (Barbados) Limited	Ownership	100.000	Aetna Inc.	N	0

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

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)	Parent, Subsidiaries Or Affiliates	Domestic Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	
0001	AETNA INC.	00000	47-054096	0			Country Prescription Management Services, Inc.	W	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	81-556475	0			Aetna Better Health of Nevada, Inc.	W	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	56555	54-576205	0			Country Health Care of Virginia, Inc.	VA	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	01-064656	0			Country Transplant Network, Inc.	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	56377	43-572207	0			Country Health Care of Missouri, Inc.	MO	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	55318	43-102694	0			Aetna Better Health of Wisconsin, LLC	WI	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	56468	55-071219	0			Country Health Care of West Virginia, Inc.	WV	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	62-411933	0			Country HealthCare Management Corporation	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	3527	47-435768	0			Aetna Health Insurance Pennsylvania, Inc.	PA	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	5649	44-040330	0			Country Health Care of Kansas, Inc.	KS	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	41-520500	0			Aetna Better Health of Kansas, Inc.	KS	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	3163	47-435768	0			Aetna Better Health of Michigan, Inc.	MI	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	5647	47-435768	0			Aetna Better Health of Michigan, Inc.	MI	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	20-441896	0			Aetna Better Health of Michigan, Inc.	MI	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	74160	37-324107	0			Aetna Better Health of Michigan, Inc.	MI	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	20-807694	0			Country Health Care of Illinois, Inc.	IL	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	20-518542	0			Country Health Care National Network, Inc.	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	26-193172	0			Country Consumer Advantage, Inc.	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	20-837654	0			Country Health Care Workers' Compensation, Inc.	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	20-406930	0			First Scrip Network Service, Inc.	IN	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	06-105807	0			NetComp, Inc.	CT	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	74-297384	0			Medical Examinations of New York, P.C.	NY	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	62-156468	0			FQDS Healthcare Management, Inc.	IN	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	87-044329	0			Country Rehabilitation Services, Inc.	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	20-173847	0			First Health Group Corp.	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	90328	38-242132	0			First Health Life & Health Insurance Company	TX	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	55-130522	0			Cities Administration Corp.	MD	N/A	First Health Group Corp.	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	20-130063	0			Florida Health Plan Administrators, LLC	FL	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	95114	65-095941	0			Country Health Plan of Florida, Inc.	FL	N/A	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	5666	65-053648	0			Country Health Plan of Florida, Inc.	FL	N/A	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	39-370648	0			Caroline Insurance Services, Inc.	FL	N/A	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	39-204145	0			Carroll LLC	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	26-150282	0			Whispering Health Strategies, Inc.	MD	N/A	Carroll LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	37-448790	0			Whispering Health Strategies, Inc.	MD	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	12569	20-251617	0			Wheal Life and Health Insurance Company	TX	N/A	Wheal Specialty Services, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	20-110556	0			Wheal Health Associates, Inc.	LA	N/A	Wheal Specialty Services, LLC	Ownership	100.000	Aetna Inc.	N	D
0001	AETNA INC.	00000	20-4276339	0			Wheal of Florida, Inc.	FL	N/A	Wheal Specialty Services, LLC	Ownership	100.000	Aetna Inc.	N	D

Asignsk	Explanation
1	Aetna Life Insurance Company and Aetna Health and Life Insurance Company own substantially all of the non-voting membership interests.

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

Asterisk	Explanation
2	Aetna Life Insurance Company owns the Class C participating shares.
3	Aetna Global Benefits (Aetna Pacific) Limited and 0.0098507% of Indian Health Organization Private Limited and Aetna Global Benefits (Singapore) Pte. Ltd. owns 99,990,143.
4	Aetna Aetna Holdings, Inc. is owned by Aetna Life Insurance Company (60.3%), Aetna Health Inc. (PA) (33.3%) and Aetna Health Holdings, LLC (6.4%).
5	Aetna Global Benefits (Bermuda) Limited owns 8% and 2% is owned by Aetna Health, Aetna's Reinsurer.
6	Aetna Global Benefits (Bermuda) Limited owns 48% and 51% is owned by Aetna Life Insurance Company and Aetna's Reinsurer.
7	Aetna Aetna Holdings, Inc. owns 50% and 50% is owned by Aetna Health System Foundation, an unaffiliated company.
8	73% is owned by Aetna Health Holdings, Inc. The remaining 48% is owned by thirteen different hospitals (non-affiliates), which are shareholders with varying degrees of ownership.
9	100% owned through Aetna's reinsurers.
10	Texas Health - Aetna Health Insurance Holding Company, LLC is 50% owned by Aetna Aetna Holdings, Inc. and 50% by Texas Health Resources, an unaffiliated company.
11	Texas Health - Aetna Health Insurance Holding Company, LLC is 50% owned by Aetna Aetna Holdings, Inc. and 50% by Texas Health Resources, an unaffiliated company.
12	Texas Health - Aetna Health Plan Inc. will become a direct subsidiary of Texas Health - Aetna Health Insurance Company in February 2017.

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	(Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)	
52-2182411		Active Health Management, Inc.	0	0	0	0	11,316,492	0	0	11,316,492	0	
14408	45-2634734	Aetna Behavioral Health, LLC	0	0	0	0	(368,653)	0	0	(368,653)	0	
14229	45-2764938	Aetna Better Health Inc. (a New York corporation)	0	0	0	0	(23,184,357)	0	0	(23,184,357)	0	
80-0671703		Aetna Better Health Inc. (an Ohio corporation)	0	0	0	0	(73,755,972)	0	0	(73,755,972)	0	
12228	20-2207534	Aetna Better Health Inc. (FL)	0	0	0	0	(6,121)	0	0	(6,121)	0	
14043	27-2512072	Aetna Better Health Inc. (GA)	0	0	0	0	(1,100)	0	0	(1,100)	0	
15616	46-3203086	Aetna Better Health Inc. (IL)	0	55,000,000	0	0	(102,203,205)	0	0	(47,203,205)	0	
15611	47-3850677	Aetna Better Health Inc. (IN)	0	100,000	0	0	0	0	0	100,000	0	
15805	47-3279217	Aetna Better Health of Iowa Inc.	0	0	0	0	0	0	0	0	0	
12193	20-1052887	Aetna Better Health of Kentucky Insurance Company	0	96,760,000	0	0	(85,745,955)	0	0	11,014,045	0	
95318	43-1702094	Aetna Better Health of Michigan Inc.	0	0	0	0	(45,783,214)	0	0	(45,783,214)	0	
95040	74-1844335	Aetna Better Health of Missouri, LLC	0	0	0	0	(71,541,383)	86,285	0	(71,455,098)	0	
15616	80-0629718	Aetna Better Health of Texas Inc.	0	0	0	0	(29,845,213)	8,790,625	0	(21,054,588)	0	
13735	27-0563973	Aetna Better Health, Inc (LA)	0	50,000,000	0	0	(3,230,480)	0	0	(3,230,480)	0	
13174	26-2867560	Aetna Better Health, Inc (NJ)	0	6,000,000	0	0	(23,168,904)	0	0	(17,168,904)	0	
11183	38-3704481	Aetna Better Health, Inc. (a Connecticut Corporation)	(28,100,000)	0	0	0	(121,827,047)	0	0	(149,927,047)	0	
95910	22-2890909	Aetna Capital Management, LLC	0	0	0	0	(44,710)	0	0	(44,710)	0	
95910	05-1177531	Aetna Dental Inc. (NY)	0	0	0	0	2,392,209	0	0	2,392,209	0	
78700	05-0876936	Aetna Dental Inc. (TX)	(5,400,000)	0	0	0	(1,785,218)	0	0	(7,185,218)	0	
95935	23-242048	Aetna Dental of California Inc.	(6,000,000)	0	0	0	(7,168,985)	(48,810)	0	(12,617,795)	0	
95088	59-2411584	Aetna Health and Life Insurance Company	(29,514,236)	0	0	0	(7,187,468)	0	0	(13,187,468)	0	
95094	42-1244752	Aetna Health Holdings, LLC	604,000,000	(165,100,000)	(3,667,914)	0	(5,251,622)	86,041,778	19,345,107	29,608,006	(1,955,850,515)	
95241	59-2411584	Aetna Health Inc. (CT)	0	0	0	0	(25,274,982)	0	0	(25,274,982)	0	
95173	58-1649568	Aetna Health Inc. (GA)	0	0	0	0	(229,429,372)	0	0	(229,429,372)	0	
95517	01-0504252	Aetna Health Inc. (Iowa)	0	0	0	0	(95,205,636)	0	0	(95,205,636)	0	
95756	23-2861565	Aetna Health Inc. (LA)	0	0	0	0	(76,259,269)	0	0	(76,259,269)	0	
95287	52-1270921	Aetna Health Inc. (ME)	0	0	0	0	(12,976,662)	0	0	(12,976,662)	0	
95234	22-2663623	Aetna Health Inc. (MI)	0	0	0	0	(7,818,198)	0	0	(7,818,198)	0	
95109	23-2169745	Aetna Health Inc. (NJ)	0	0	0	0	(2,305)	0	0	(2,305)	0	
95450	76-0189580	Aetna Health Inc. (NY)	(305,400,000)	0	0	0	(107,699,515)	(5,765,829)	0	(113,465,344)	0	
72052	23-2710210	Aetna Health Inc. (TX)	(12,100,000)	0	0	0	(27,125,525)	0	0	(39,225,525)	0	
84450	75-3270039	Aetna Health Insurance Company	0	0	0	0	(551,613,250)	(230,911)	0	(857,244,161)	28,728	
		Aetna Health Insurance Company of Europe Limited	0	0	0	0	(62,336,574)	0	0	(62,336,574)	0	
		Aetna Health Insurance Company of New York	0	0	0	0	(484,632)	0	0	(484,632)	0	
		Aetna Health Management, LLC	0	0	0	0	(863,255)	0	0	(863,255)	0	
			0	0	0	0	50,632	0	0	50,632	0	
			0	0	0	0	1,823,991,437	0	0	1,823,991,437	0	

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	(Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	(Disbursements) Incurred Under Reinsurance Agreements		Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
95407	35-3402799	Aetna Health of California Inc.	(19,000,000)	0	0	0	(230,222,155)	0	0	0	(249,222,155)	0
95407	87-4049631	Aetna Health of Utah, Inc.	0	0	0	0	(72,105,301)	0	0	0	(72,105,301)	0
15827	47-4352768	Aetna Health Assurance Pennsylvania Inc.	0	0	0	0	(8,543,162)	0	0	0	(8,543,162)	0
	23-2229693	Aetna Inc.	1,668,400,000	0	0	0	1,131,473,744	0	0	0	2,799,873,744	0
36153	05-1286276	Aetna Insurance (Singapore) Pte. Ltd.	0	0	0	0	(1,147,421)	0	0	0	(1,147,421)	0
	05-1571614	Aetna Insurance Company of Connecticut	0	0	0	0	(154,279)	0	0	0	(154,279)	0
60054	05-6033492	Aetna International, Inc.	0	0	0	0	1,356,044	0	0	0	1,356,044	0
	05-1571614	Aetna Life & Casualty Bermuda Limited	0	0	0	0	(5,718,968)	0	0	0	(5,718,968)	0
	05-6033492	Aetna Life Insurance Company	(1,478,394,979)	(3,084,917)	(27,539,117)	0	(451,236,238)	(337,943,085)	0	0	(2,298,198,337)	3,182,127,883
	05-0842559	Aetna Medicaid Administrators, LLC	0	0	0	0	683,215,988	0	0	0	683,215,988	0
		Aetna Multi Strategy 1099 Fund	(1,580,582)	0	2,547,508	0	0	0	0	0	956,926	0
		Aetna Partners Diversified Fund (Cajman), Limited	(5,587,293)	0	6,004,444	0	0	0	0	0	407,151	0
	81-4579972	Aetna Partners Diversified Fund, LLC	(16,040,118)	0	15,140,852	0	0	0	0	0	(899,266)	0
	47-2049117	Aetna Risk Assurance Company of Connecticut	0	0	0	0	0	0	0	0	0	0
	30-0123760	Aetna RX Home Delivery, LLC	0	0	0	0	295,387,325	0	0	0	295,387,325	0
		Aetna Shanghai Enterprises Services Co. Ltd.	0	0	0	0	0	0	0	0	0	0
	57-1289768	Aetna Specialty Pharmacy, LLC	0	0	0	0	2,570	0	0	0	2,570	0
	96460	Aetna Student Health Agency, Inc.	0	0	0	0	31,995,057	0	0	0	31,995,057	0
	04-2708160	Aetna Student Health Agency, Inc.	0	0	0	0	35,090,047	0	0	0	35,090,047	0
	20-3180700	Aetna Ventures, LLC	(2,652,783)	3,084,917	0	0	0	0	0	0	322,124	0
12321	20-2901054	American Continental Insurance Company	0	0	0	0	(111,392,953)	0	0	0	(111,392,953)	0
	05-1423207	Azalea Hall, Inc.	0	0	0	0	218,000	0	0	0	218,000	0
	36-4391510	basill, LLC	0	0	0	0	0	0	0	0	0	0
68500	62-1181209	Continental Life Insurance Company of Connecticut	0	0	0	0	(8,900,000)	0	0	0	(8,900,000)	0
	75-1296086	Coventry Health & Life Insurance Company of Tennessee	0	0	0	0	(96,959,356)	0	0	0	(96,959,356)	0
	51-0293139	Coventry Health & Life Insurance Company of Delaware, Inc.	0	(96,760,000)	0	0	(571,290,040)	(12,990,134)	0	0	(681,030,174)	0
	95114	Coventry Health Care of Florida, Inc.	0	0	0	0	0	0	0	0	0	0
	37-1241937	Coventry Health Care of Illinois, Inc.	0	0	0	0	(584,051,775)	0	0	0	(584,051,775)	0
95489	48-0840330	Coventry Health Care of Kansas, Inc.	(45,000,000)	40,000,000	0	0	(101,290,169)	0	0	0	(61,290,169)	0
95377	43-1372307	Coventry Health Care of Missouri, Inc.	0	0	0	0	(104,446,742)	0	0	0	(104,446,742)	0
95925	42-1308659	Coventry Health Care of Nebraska, Inc.	0	0	0	0	(67,559,924)	0	0	0	(67,559,924)	0
95321	20-4029117	Coventry Health Care of the Carolinas, Inc.	0	15,000,000	0	0	(111,179,845)	3,850,669	0	0	(92,329,156)	0
	54-1576305	Coventry Health Care of Virginia, Inc.	0	0	0	0	0	0	0	0	0	0
95408	55-0712129	Coventry Health Care of West Virginia, Inc.	(15,000,000)	0	0	0	(90,134,557)	252,535	0	0	(104,882,022)	0
95266	65-0453436	Coventry Health Plan of Florida, Inc.	(72,000,000)	0	0	0	(42,419,806)	0	0	0	(114,419,806)	0
	62-1411933	Coventry HealthCare Management Corporation	(8,000,000)	0	0	0	(15,542)	0	0	0	(72,151,542)	0
	47-0854096	Coventry Prescription Mgmt. Services, Inc.	(14,000,000)	0	0	0	532,484,753	0	0	0	(8,000,000)	0
											518,484,753	0

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
90328	38-2242132	First Health Life & Health Ins Co.	(50,000,000)	0	0	0	(173,905,484)	0	0	(19,345,107)	(243,251,591)	0
95846	52-2056201	Group Dental Services of Maryland, Inc.	(3,000,000)	0	0	0	(1,125,215)	0	0	0	(4,125,215)	0
	32-6801446	Group Dental Services, Inc.	(2,000,000)	0	0	0	1,125,215	0	0	0	(874,785)	0
	33-4052273	Health and Human Resources Center, Inc.	(3,000,000)	0	0	0	(2,334,073)	0	0	0	(5,334,073)	0
13980	27-2192415	Health Re, Inc.	(135,000,000)	0	0	0	(60,689,352)	261,247,325	0	0	65,557,973	(1,226,217,064)
95060	46-2469464	HealthAmerica Pennsylvania Inc.	0	0	0	0	0	0	0	0	0	0
11102	25-1264318	HealthAmerica Pennsylvania, Inc.	(25,000,000)	0	0	0	0	0	0	0	0	0
	23-2366731	Horizon Behavioral Services LLC	3,000,000	0	0	0	(192,730,793)	0	0	0	(217,730,793)	0
45-5527797	46-0674628	Innovation Health Holdings, LLC	0	(15,399,959)	0	0	1,909,962	0	0	0	3,000,000	0
15097	46-0682197	Innovation Health Insurance Company	0	4,600,000	0	0	(56,931,900)	8,653,983	0	0	(13,491,037)	0
15098	46-2944270	Innovation Health Plan, Inc	0	10,789,999	0	0	(19,494,674)	0	0	0	(8,694,675)	(60,304)
		Irrigae, LLC	0	0	0	0	7,351,127	0	0	0	7,351,127	(28,728)
		Medicity, Inc.	0	0	0	0	0	0	0	0	0	0
		Mental Health Associates, Inc.	0	0	0	0	0	0	0	0	0	0
12509	72-1106596	Mutual Life and Health Insurance Company	0	0	0	0	1,775,816	0	0	0	200,000	0
	20-2516317	Mutual of Florida, Inc.	0	0	0	0	(459,737)	0	0	0	1,775,816	0
	26-1582982	PayFlex Systems USA, Inc.	0	0	0	0	(1,735)	0	0	0	(459,737)	0
		Coventry Health Care Workers' Compensation, Inc.	0	0	0	0	66,411,914	0	0	0	66,411,914	0
		First Health Group Corp.	(20,000,000)	0	0	0	35,832,431	0	0	0	35,832,431	0
		Florida Health Plan Administrators, LLC	50,000,000	0	0	0	0	0	0	0	(20,000,000)	0
		First Script Network Services, Inc.	(3,000,000)	(5,000,000)	0	0	0	0	0	0	50,000,000	0
		Aetna Better Health Inc. (KS)	0	2,000,000	0	0	0	0	0	0	(8,000,000)	0
		Aetna Better Health Inc. (UK)	0	2,000,000	0	0	0	0	0	0	(6,000,000)	0
		Canal Place, LLC	0	2,000,000	0	0	0	0	0	0	2,000,000	0
		Aetna Health Insurance Co of Pennsylvania	0	0	0	0	0	0	0	0	7,514,227	0
		Coventry Health Care Light Corp	0	0	0	0	0	6,045,550	0	0	6,045,550	0
		Aetna Health Inc. (Louisiana)	0	0	0	0	(611,594)	0	0	0	(611,594)	0
		Aetna Health Insurance Company (PA)	0	0	0	0	(63,408,991)	0	0	0	(63,408,991)	0
			0	0	0	0	(3,908,429)	0	0	0	(3,908,429)	0
			0	0	0	0	0	0	0	0	0	0
			0	0	0	0	0	0	0	0	0	0
			0	0	0	0	0	0	0	0	0	0
			0	0	0	0	0	0	0	0	0	0
			0	0	0	0	0	0	0	0	0	0
9999999	Contra Totals		(1)	0	0	0	(17)	0	XXX	0	(2)	0

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	<u>Responses</u>
MARCH FILING	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2. Will an actuarial opinion be filed by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?.....	YES
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?.....	YES
APRIL FILING	
5. Will Management's Discussion and Analysis be filed by April 1?	YES
6. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
7. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
JUNE FILING	
8. Will an audited financial report be filed by June 1?	WAIVED
9. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	WAIVED
AUGUST FILING	
10. 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?	WAIVED

The following supplemental reports are required to be filed as part of your annual 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.

MARCH FILING	
11. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
12. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?	NO
13. Will the Supplemental Property/Casualty data due March 1 be filed with the state of domicile and the NAIC?.....	NO
14. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?.....	NO
15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
16. Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
17. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?.....	NO
18. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
19. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
20. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?.....	NO
APRIL FILING	
21. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
22. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?	NO
23. Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC?	NO
24. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
25. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
AUGUST FILING	
26. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO

11.
12.
13.
14.
15.
16.
17.
18.
19.
20.
21.
22.
23.
24.
25.
26.

Bar Codes:

8. Audited Financial Report [Document Identifier 220]	
9. Accountants Letter of Qualifications [Document Identifier 221]	
10. Communication of Internal Control Related Matters Noted in Audit [Document Identifier 222]	
11. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
12. Life Supplement [Document Identifier 205]	
13. Property/Casualty Supplement [Document Identifier 207]	
14. SIS Stockholder Information Supplement [Document Identifier 420]	
15. Participating Opinion for Exhibit 5 [Document Identifier 371]	

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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



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



18. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]



19. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]



20. Relief from the Requirements for Audit Committees [Document Identifier 226]



21. Long-Term Care Experience Reporting Forms [Document Identifier 306]



22. Life Supplement [Document Identifier 211]



23. Property/Casualty Supplement Insurance Expense Exhibit [Document Identifier 213]



24. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]



25. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]



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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Assets Line 11

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1104.	0	0	0	0
1105.	0	0	0	0
1197. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0

Additional Write-ins for Assets Line 25

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
2504.	0	0	0	0
2505.	0	0	0	0
2597. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0

Additional Write-ins for Liabilities Line 23

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
2304.	0	0	0	0
2305.	0	0	0	0
2397. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0

Additional Write-ins for Liabilities Line 25

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
2504.	XXX	XXX	0	0
2505.	XXX	XXX	0	0
2597. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0

Additional Write-ins for Liabilities Line 30

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
3004.	XXX	XXX	0	0
3005.	XXX	XXX	0	0
3097. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0

Additional Write-ins for Statement of Revenue and Expenses Line 6

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
0604.	XXX	0	0
0605.	XXX	0	0
0697. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0

Additional Write-ins for Statement of Revenue and Expenses Line 7

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
0704.	XXX	0	0
0705.	XXX	0	0
0797. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0

Additional Write-ins for Statement of Revenue and Expenses Line 14

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1404.	0	0	0
1405.	0	0	0
1497. Summary of remaining write-ins for Line 14 from overflow page	0	0	0

Additional Write-ins for Statement of Revenue and Expenses Line 29

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
2904.	0	0	0
2905.	0	0	0
2997. Summary of remaining write-ins for Line 29 from overflow page	0	0	0

Additional Write-ins for Statement of Revenue and Expenses Line 47

	1 Current Year	2 Prior Year
	4704.	0	0
4705.	0	0
4797. Summary of remaining write-ins for Line 47 from overflow page	0	0

NONE

SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1	2	3	4	5	6
	Amount	Percentage	Amount	Securities Lending Reinvested Collateral Amount	Total (Col. 3 + 4) Amount	Percentage
1. Bonds:						
1.1 U.S. treasury securities	499,210	16.141	499,210	0	499,210	16.141
1.2 U.S. government agency obligations (excluding mortgage-backed securities):						
1.21 Issued by U.S. government agencies	0	0.000	0	0	0	0.000
1.22 Issued by U.S. government sponsored agencies	0	0.000	0	0	0	0.000
1.3 Non-U.S. government (including Canada, excluding mortgaged-backed securities)	0	0.000	0	0	0	0.000
1.4 Securities issued by states, territories, and possessions and political subdivisions in the U.S.:						
1.41 States, territories and possessions general obligations	0	0.000	0	0	0	0.000
1.42 Political subdivisions of states, territories and possessions and political subdivisions general obligations	0	0.000	0	0	0	0.000
1.43 Revenue and assessment obligations	0	0.000	0	0	0	0.000
1.44 Industrial development and similar obligations	0	0.000	0	0	0	0.000
1.5 Mortgage-backed securities (includes residential and commercial MBS):						
1.51 Pass-through securities:						
1.511 Issued or guaranteed by GNMA	0	0.000	0	0	0	0.000
1.512 Issued or guaranteed by FNMA and FHLMC	0	0.000	0	0	0	0.000
1.513 All other	0	0.000	0	0	0	0.000
1.52 CMOs and REMICs:						
1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA	0	0.000	0	0	0	0.000
1.522 Issued by non-U.S. Government issuers and collateralized by mortgage-backed securities issued or guaranteed by agencies shown in Line 1.521	0	0.000	0	0	0	0.000
1.523 All other	0	0.000	0	0	0	0.000
2. Other debt and other fixed income securities (excluding short-term):						
2.1 Unaffiliated domestic securities (includes credit tenant loans and hybrid securities)	499,882	16.163	499,882	0	499,882	16.163
2.2 Unaffiliated non-U.S. securities (including Canada)	0	0.000	0	0	0	0.000
2.3 Affiliated securities	0	0.000	0	0	0	0.000
3. Equity interests:						
3.1 Investments in mutual funds	0	0.000	0	0	0	0.000
3.2 Preferred stocks:						
3.21 Affiliated	0	0.000	0	0	0	0.000
3.22 Unaffiliated	0	0.000	0	0	0	0.000
3.3 Publicly traded equity securities (excluding preferred stocks):						
3.31 Affiliated	0	0.000	0	0	0	0.000
3.32 Unaffiliated	0	0.000	0	0	0	0.000
3.4 Other equity securities:						
3.41 Affiliated	0	0.000	0	0	0	0.000
3.42 Unaffiliated	0	0.000	0	0	0	0.000
3.5 Other equity interests including tangible personal property under lease:						
3.51 Affiliated	0	0.000	0	0	0	0.000
3.52 Unaffiliated	0	0.000	0	0	0	0.000
4. Mortgage loans:						
4.1 Construction and land development	0	0.000	0	0	0	0.000
4.2 Agricultural	0	0.000	0	0	0	0.000
4.3 Single family residential properties	0	0.000	0	0	0	0.000
4.4 Multifamily residential properties	0	0.000	0	0	0	0.000
4.5 Commercial loans	0	0.000	0	0	0	0.000
4.6 Mezzanine real estate loans	0	0.000	0	0	0	0.000
5. Real estate investments:						
5.1 Property occupied by company	0	0.000	0	0	0	0.000
5.2 Property held for production of income (including \$ of property acquired in satisfaction of debt)	0	0.000	0	0	0	0.000
5.3 Property held for sale (including \$ of property acquired in satisfaction of debt)	0	0.000	0	0	0	0.000
6. Contract loans	0	0.000	0	0	0	0.000
7. Derivatives	0	0.000	0	0	0	0.000
8. Receivables for securities	0	0.000	0	0	0	0.000
9. Securities Lending (Line 10, Asset Page reinvested collateral)	0	0.000	0	XXX	XXX	XXX
10. Cash, cash equivalents and short-term investments	2,093,708	67.696	2,093,708	0	2,093,708	67.696
11. Other invested assets	0	0.000	0	0	0	0.000
12. Total invested assets	3,092,800	100.000	3,092,800	0	3,092,800	100.000

Schedule A - Verification - Real Estate

NONE

Schedule B - Verification - Mortgage Loans

NONE

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

1.	Book/adjusted carrying value, December 31 of prior year	
2.	Cost of acquired:	
2.1	Actual cost at time of acquisition (Part 2, Column 8)	
2.2	Additional investment made after acquisition (Part 2, Column 9)	
3.	Capitalized deferred interest and other:	
3.1	Totals, Part 1, Column 16	
3.2	Totals, Part 3, Column 12	
4.	Accrual of discount	
5.	Unrealized valuation increase (decrease):	
5.1	Totals, Part 1, Column 13	
5.2	Totals, Part 3, Column 9	
6.	Total gain (loss) on disposals, Part 3, Column 19	
7.	Deduct amounts received on disposals, Part 3, Column 16	
8.	Deduct amortization of premium and depreciation	
9.	Total foreign exchange change in book/adjusted carrying value:	
9.1	Totals, Part 1, Column 17	
9.2	Totals, Part 3, Column 14	
10.	Deduct current year's other than temporary impairment recognized:	
10.1	Totals, Part 1, Column 15	
10.2	Totals, Part 3, Column 11	
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	
12.	Deduct total nonadmitted amounts	
13.	Statement value at end of current period (Line 11 minus Line 12)	

NONE

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

1.	Book/adjusted carrying value, December 31 of prior year	1,499,201
2.	Cost of bonds and stocks acquired, Part 3, Column 7	498,984
3.	Accrual of discount	907
4.	Unrealized valuation increase (decrease):	
4.1.	Part 1, Column 12	0
4.2.	Part 2, Section 1, Column 15	0
4.3.	Part 2, Section 2, Column 13	0
4.4.	Part 4, Column 11	0
5.	Total gain (loss) on disposals, Part 4, Column 19	0
6.	Deduction consideration for bonds and stocks disposed of, Part 4, Column 7	1,000,000
7.	Deduct amortization of premium	0
8.	Total foreign exchange change in book/adjusted carrying value:	
8.1.	Part 1, Column 15	0
8.2.	Part 2, Section 1, Column 19	0
8.3.	Part 2, Section 2, Column 16	0
8.4.	Part 4, Column 15	0
9.	Deduct current year's other than temporary impairment recognized:	
9.1.	Part 1, Column 14	0
9.2.	Part 2, Section 1, Column 17	0
9.3.	Part 2, Section 2, Column 14	0
9.4.	Part 4, Column 13	0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	999,092
11.	Deduct total nonadmitted amounts	0
12.	Statement value at end of current period (Line 10 minus Line 11)	999,092

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE D - SUMMARY BY COUNTRY

Long-Term Bonds and Stocks OWNED December 31 of Current Year

Description		1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS					
Governments (Including all obligations guaranteed by governments)	1. United States	499,210	495,359	498,984	500,000
	2. Canada	0	0	0	0
	3. Other Countries	0	0	0	0
	4. Totals	499,210	495,359	498,984	500,000
U.S. States, Territories and Possessions (Direct and guaranteed)	5. Totals	0	0	0	0
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	6. Totals	0	0	0	0
U.S. Special Revenue and Special Assessment Obligations and all Non- Guaranteed Obligations of Agencies and Authorities of Governments and their Political Subdivisions	7. Totals	0	0	0	0
Industrial and Miscellaneous, SVO Identified Funds and Hybrid Securities (unaffiliated)	8. United States	499,882	532,333	499,760	500,000
	9. Canada	0	0	0	0
	10. Other Countries	0	0	0	0
	11. Totals	499,882	532,333	499,760	500,000
Parent, Subsidiaries and Affiliates	12. Totals	0	0	0	0
	13. Total Bonds	999,092	1,027,692	998,744	1,000,000
PREFERRED STOCKS					
Industrial and Miscellaneous (unaffiliated)	14. United States	0	0	0	0
	15. Canada	0	0	0	0
	16. Other Countries	0	0	0	0
	17. Totals	0	0	0	0
Parent, Subsidiaries and Affiliates	18. Totals	0	0	0	0
	19. Total Preferred Stocks	0	0	0	0
COMMON STOCKS					
Industrial and Miscellaneous (unaffiliated)	20. United States	0	0	0	0
	21. Canada	0	0	0	0
	22. Other Countries	0	0	0	0
	23. Totals	0	0	0	0
Parent, Subsidiaries and Affiliates	24. Totals	0	0	0	0
	25. Total Common Stocks	0	0	0	0
	26. Total Stocks	0	0	0	0
	27. Total Bonds and Stocks	999,092	1,027,692	998,744	

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 10,7	9 Total from Col. 6 Prior Year	10 % From Col. 7 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (B)
1. U.S. Governments												
1.1 NAIC 1	1,712,937	489,210	0	0	0	0	2,212,147	81.6	500,560	18.8	2,212,147	0
1.2 NAIC 2	0	0	0	0	0	0	0	0	0	0	0	0
1.3 NAIC 3	0	0	0	0	0	0	0	0	0	0	0	0
1.4 NAIC 4	0	0	0	0	0	0	0	0	0	0	0	0
1.5 NAIC 5	0	0	0	0	0	0	0	0	0	0	0	0
1.6 NAIC 6	0	0	0	0	0	0	0	0	0	0	0	0
1.7 Totals	1,712,937	489,210	0	0	0	0	2,212,147	81.6	500,560	18.8	2,212,147	0
2. All Other Governments												
2.1 NAIC 1	0	0	0	0	0	0	0	0	499,902	18.8	0	0
2.2 NAIC 2	0	0	0	0	0	0	0	0	0	0	0	0
2.3 NAIC 3	0	0	0	0	0	0	0	0	0	0	0	0
2.4 NAIC 4	0	0	0	0	0	0	0	0	0	0	0	0
2.5 NAIC 5	0	0	0	0	0	0	0	0	0	0	0	0
2.6 NAIC 6	0	0	0	0	0	0	0	0	0	0	0	0
2.7 Totals	0	0	0	0	0	0	0	0	499,902	18.8	0	0
3. U.S. States, Territories and Possessions etc., Guaranteed												
3.1 NAIC 1	0	0	0	0	0	0	0	0	0	0	0	0
3.2 NAIC 2	0	0	0	0	0	0	0	0	0	0	0	0
3.3 NAIC 3	0	0	0	0	0	0	0	0	0	0	0	0
3.4 NAIC 4	0	0	0	0	0	0	0	0	0	0	0	0
3.5 NAIC 5	0	0	0	0	0	0	0	0	0	0	0	0
3.6 NAIC 6	0	0	0	0	0	0	0	0	0	0	0	0
3.7 Totals	0	0	0	0	0	0	0	0	0	0	0	0
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.1 NAIC 1	0	0	0	0	0	0	0	0	0	0	0	0
4.2 NAIC 2	0	0	0	0	0	0	0	0	0	0	0	0
4.3 NAIC 3	0	0	0	0	0	0	0	0	0	0	0	0
4.4 NAIC 4	0	0	0	0	0	0	0	0	0	0	0	0
4.5 NAIC 5	0	0	0	0	0	0	0	0	0	0	0	0
4.6 NAIC 6	0	0	0	0	0	0	0	0	0	0	0	0
4.7 Totals	0	0	0	0	0	0	0	0	0	0	0	0
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed												
5.1 NAIC 1	0	0	0	0	0	0	0	0	0	0	0	0
5.2 NAIC 2	0	0	0	0	0	0	0	0	0	0	0	0
5.3 NAIC 3	0	0	0	0	0	0	0	0	0	0	0	0
5.4 NAIC 4	0	0	0	0	0	0	0	0	0	0	0	0
5.5 NAIC 5	0	0	0	0	0	0	0	0	0	0	0	0
5.6 NAIC 6	0	0	0	0	0	0	0	0	0	0	0	0
5.7 Totals	0	0	0	0	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 10.7	9 Total from Col. 6 Prior Year	10 % From Col. 7 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
6. Industrial & Miscellaneous (Unaffiliated)												
6.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	1,159,571	43.6	0	0
6.2 NAIC 2	0	499,882	0	0	0	XXX	499,882	18.4	499,857	18.8	499,882	0
6.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.7 Totals	0	499,882	0	0	0	XXX	499,882	18.4	1,659,428	62.4	499,882	0
7. Hybrid Securities												
7.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8. Parent, Subsidiaries and Affiliates												
8.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
9. SVO Identified Funds												
9.1 NAIC 1	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
9.2 NAIC 2	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
9.3 NAIC 3	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
9.4 NAIC 4	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
9.5 NAIC 5	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
9.6 NAIC 6	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
9.7 Totals	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

10. Total Bonds Current Year	10. Total Bonds Current Year										11. Total Publicly Traded	12. Total Privately Placed (a)
	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	No Maturity Date	Total Current Year	Col. 7 as a % of Line 10.7	Total from Col. 6 Prior Year	% From Col. 7 Prior Year		
(d) 10.1 NAIC 1	1,712,937	499,210	0	0	0	0	2,212,147	81.6	XXX	XXX	2,212,147	0
(e) 10.2 NAIC 2	0	499,882	0	0	0	0	499,882	18.4	XXX	XXX	499,882	0
(f) 10.3 NAIC 3	0	0	0	0	0	0	0	0	XXX	XXX	0	0
(g) 10.4 NAIC 4	0	0	0	0	0	0	0	0	XXX	XXX	0	0
(h) 10.5 NAIC 5	0	0	0	0	0	0	0	0	XXX	XXX	0	0
(i) 10.6 NAIC 6	0	0	0	0	0	0	0	0	XXX	XXX	0	0
(j) 10.7 Totals	1,712,937	999,092	0	0	0	0	2,712,029	100.0	XXX	XXX	2,712,029	0
10.8 Line 10.7 as a % of Col. 7	63.2	36.8	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
11. Total Bonds Prior Year	2,160,033	499,857	0	0	0	0	2,659,890	81.2	2,160,033	18.8	2,659,890	0
11.1 NAIC 1	0	499,857	0	0	0	0	499,857	18.8	499,857	0	499,857	0
11.2 NAIC 2	0	0	0	0	0	0	0	0	0	0	0	0
11.3 NAIC 3	0	0	0	0	0	0	0	0	0	0	0	0
11.4 NAIC 4	0	0	0	0	0	0	0	0	0	0	0	0
11.5 NAIC 5	0	0	0	0	0	0	0	0	0	0	0	0
11.6 NAIC 6	0	0	0	0	0	0	0	0	0	0	0	0
11.7 Totals	2,160,033	499,857	0	0	0	0	2,659,890	81.2	2,160,033	18.8	2,659,890	0
11.8 Line 11.7 as a % of Col. 9	81.2	18.8	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
12. Total Publicly Traded Bonds	1,712,937	499,210	0	0	0	0	2,212,147	81.2	2,160,033	18.8	2,212,147	0
12.1 NAIC 1	0	499,882	0	0	0	0	499,882	18.4	499,857	0	499,882	0
12.2 NAIC 2	0	0	0	0	0	0	0	0	0	0	0	0
12.3 NAIC 3	0	0	0	0	0	0	0	0	0	0	0	0
12.4 NAIC 4	0	0	0	0	0	0	0	0	0	0	0	0
12.5 NAIC 5	0	0	0	0	0	0	0	0	0	0	0	0
12.6 NAIC 6	0	0	0	0	0	0	0	0	0	0	0	0
12.7 Totals	1,712,937	499,092	0	0	0	0	2,212,029	100.0	2,160,033	18.8	2,212,029	0
12.8 Line 12.7 as a % of Col. 7	63.2	36.8	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
12.9 Line 12.7 as a % of Line 10.7, Col. 7, Section 10	63.2	36.8	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
13. Total Privately Placed Bonds	0	0	0	0	0	0	0	0	0	0	0	0
13.1 NAIC 1	0	0	0	0	0	0	0	0	0	0	0	0
13.2 NAIC 2	0	0	0	0	0	0	0	0	0	0	0	0
13.3 NAIC 3	0	0	0	0	0	0	0	0	0	0	0	0
13.4 NAIC 4	0	0	0	0	0	0	0	0	0	0	0	0
13.5 NAIC 5	0	0	0	0	0	0	0	0	0	0	0	0
13.6 NAIC 6	0	0	0	0	0	0	0	0	0	0	0	0
13.7 Totals	0	0	0	0	0	0	0	0	0	0	0	0
13.8 Line 13.7 as a % of Col. 7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
13.9 Line 13.7 as a % of Line 10.7, Col. 7, Section 10	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

(a) Includes \$0 freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.
 (b) Includes \$0 current year, \$0 prior year of bonds with Z designations and \$0 current year of bonds with Z designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z*" means the SVO could not evaluate the obligation because valuation procedures for the security class are under regulatory review.
 (c) Includes \$0 current year, \$0 prior year of bonds with 5* designations and \$0 current year of bonds with 5* designations. "5*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.
 (d) Includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$1,712,937 ; NAIC 2 \$0 ; NAIC 3 \$0 ; NAIC 4 \$0 ; NAIC 5 \$0 ; NAIC 6 \$0

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues										11 Total Publicly Traded	12 Total Privately Placed	
	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 10's	9 Total from Col. 6 Prior Year	10 % From Col. 7 Prior Year			
1. U.S. Governments													
1.1 Issuer Obligations	1,712,837	499,210	0	0	0	XXX	2,212,147	81.6	500,560	18.8	2,212,147	0	
1.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
1.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
1.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
1.5 Totals	1,712,837	499,210	0	0	0	XXX	2,212,147	81.6	500,560	18.8	2,212,147	0	
2. All Other Governments													
2.1 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	499,902	18.8	0	0	
2.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
2.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
2.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
2.5 Totals	0	0	0	0	0	XXX	0	0.0	499,902	18.8	0	0	
3. U.S. States, Territories and Possessions, Guaranteed													
3.1 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
3.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
3.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
3.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
3.5 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed													
4.1 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
4.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
4.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
4.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
4.5 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
5. U.S. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed													
5.1 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
5.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
5.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
5.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
5.5 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
6. Industrial and Miscellaneous													
6.1 Issuer Obligations	0	499,882	0	0	0	XXX	499,882	18.4	1,659,428	62.4	499,882	0	
6.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
6.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
6.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
6.5 Totals	0	499,882	0	0	0	XXX	499,882	18.4	1,659,428	62.4	499,882	0	
7. Hybrid Securities													
7.1 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
7.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
7.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
7.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
7.5 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
8. Parent, Subsidiaries and Affiliates													
8.1 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
8.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
8.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
8.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	
8.5 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0	

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE D - PART 1A - SECTION 2 (Continued)

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 10.6	9 Total from Col. 6 Prior Year	10 % From Col. 7 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
9. SVO Identified Funds												
9.1 Exchange Traded Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
9.2 Bond Mutual Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
9.3 Totals	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
10. Total Bonds Current Year												
10.1 Issuer Obligations	1,712,937	999,092	0	0	0	XXX	2,712,029	100.0	XXX	XXX	2,712,029	0
10.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
10.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
10.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
10.5 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
10.6 Totals	1,712,937	999,092	0	0	0	XXX	2,712,029	100.0	XXX	XXX	2,712,029	0
10.7 Line 10.6 as a % of Col. 7	63.2	36.8	0.0	0.0	0.0	100.0	100.0	100.0	XXX	XXX	100.0	0.0
11. Total Bonds Prior Year												
11.1 Issuer Obligations	2,160,033	499,857	0	0	0	XXX	XXX	XXX	2,659,890	100.0	2,659,890	0
11.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.5 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
11.6 Totals	2,160,033	499,857	0	0	0	XXX	XXX	XXX	2,659,890	100.0	2,659,890	0
11.7 Line 11.6 as a % of Col. 9	81.2	18.8	0.0	0.0	0.0	100.0	100.0	100.0	XXX	XXX	100.0	0.0
12. Total Publicly Traded Bonds												
12.1 Issuer Obligations	1,712,937	999,092	0	0	0	XXX	2,712,029	100.0	2,659,890	100.0	2,712,029	0
12.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.5 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
12.6 Totals	1,712,937	999,092	0	0	0	XXX	2,712,029	100.0	2,659,890	100.0	2,712,029	0
12.7 Line 12.6 as a % of Col. 7	63.2	36.8	0.0	0.0	0.0	100.0	100.0	100.0	XXX	XXX	100.0	0.0
12.8 Line 12.6 as a % of Line 10.6, Col. 7, Section 10	63.2	36.8	0.0	0.0	0.0	100.0	100.0	100.0	XXX	XXX	100.0	0.0
13. Total Privately Placed Bonds												
13.1 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
13.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
13.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
13.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
13.5 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
13.6 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
13.7 Line 13.6 as a % of Col. 7	0.0	0.0	0.0	0.0	0.0	100.0	0.0	0.0	0	0.0	100.0	0.0
13.8 Line 13.6 as a % of Line 10.6, Col. 7, Section 10	0.0	0.0	0.0	0.0	0.0	100.0	0.0	0.0	0	0.0	100.0	0.0

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE DA - VERIFICATION BETWEEN YEARS

Short-Term Investments

	1 Total	2 Bonds	3 Mortgage Loans	4 Other Short-term Investment Assets (e)	5 Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, December 31 of prior year	1,118	1,118	0	0	0
2. Cost of short-term investments acquired	42,438	42,438	0	0	0
3. Accrual of discount	0	0	0	0	0
4. Unrealized valuation increase (decrease)	0	0	0	0	0
5. Total gain (loss) on disposals	0	0	0	0	0
6. Deduct consideration received on disposals	39,965	39,965	0	0	0
7. Deduct amortization of premium	0	0	0	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0	0	0	0
9. Deduct current year's other than temporary impairment recognized	0	0	0	0	0
10. Book adjusted carrying value at end of current period (Lines 1-2+3+4+5+6-7+8-9)	3,591	3,591	0	0	0
11. Deduct total nonadmitted amounts	0	0	0	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	3,591	3,591	0	0	0

(e) Indicate the category of such assets, for example, joint ventures, transportation equipment:

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

NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE E - VERIFICATION BETWEEN YEARS

(Cash Equivalents)

	1	2	3
	Total	Bonds	Other (a)
1. Book/adjusted carrying value, December 31 of prior year	1,159,571	1,159,571	0
2. Cost of cash equivalents acquired	23,665,660	23,665,660	0
3. Accrual of discount	9,875	9,875	0
4. Unrealized valuation increase (decrease)	0	0	0
5. Total gain (loss) on disposals	6	6	0
6. Deduct consideration received on disposals	23,125,766	23,125,766	0
7. Deduct amortization of premium	0	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0	0
9. Deduct current year's other than temporary impairment recognized	0	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	1,709,346	1,709,346	0
11. Deduct total nonadmitted amounts	0	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	1,709,346	1,709,346	0

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

Schedule A - Part 1 - Real Estate Owned

NONE

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

NONE

Schedule A - Part 3 - Real Estate Disposed

NONE

Schedule B - Part 1 - Mortgage Loans Owned

NONE

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

NONE

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

NONE

Schedule BA - Part 1 - Other Long-Term Invested Assets Owned

NONE

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

NONE

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1 CUSIP Identification	2 Description	3 Codes			7 Actual Cost	8 Rate Used to Obtain Fair Value	9 Fair Value	10 Par Value	11 Book/ Adjusted Carrying Value	12 Unrealized Valuation Increase/ (Decrease)	13 Current Year's (Amor- tization) Accrual	14 Current Year's Other- Than- Impairment Recognized	15 Total Foreign Exchange in Book/ Adjusted Carrying Value	16 Rate of Effective Rate	17 When Paid	18 Admitted Amount Due and Accrued	19 Amount Received During Year	20 Acquired	21 Dates	22 Stated Contractual Maturity Date
		4 F	5 O	6 R																
91202-45-2	US TREASURY NOTE/2000	00			498,864	98.0780	495,359	500,000	499,210	0	226	0	0	0.875	0.943	0	2,188	0	03/15/2019	XXX
01939999	Subtotal - U.S. Government Bonds				498,864	XXX	495,359	500,000	499,210	0	226	0	0	XXX	XXX	0	2,188	0	XXX	XXX
05939999	Total - U.S. Government Bonds				498,864	XXX	495,359	500,000	499,210	0	226	0	0	XXX	XXX	0	2,188	0	XXX	XXX
10939999	Total - All Other Government Bonds				0	XXX	0	0	0	0	0	0	0	XXX	XXX	0	0	0	XXX	XXX
17939999	Total - U.S. States, Territories and Possessions Bonds				0	XXX	0	0	0	0	0	0	0	XXX	XXX	0	0	0	XXX	XXX
24939999	Total - U.S. Political Subdivisions Bonds				0	XXX	0	0	0	0	0	0	0	XXX	XXX	0	0	0	XXX	XXX
31939999	Total - U.S. Special Revenues Bonds				0	XXX	0	0	0	0	0	0	0	XXX	XXX	0	0	0	XXX	XXX
60182-98-5	INDEX LINK ADJUSTED				499,750	106.4570	532,333	500,000	499,882	0	25	0	0	4.500	4.506	0	2,500	0	03/15/2020	XXX
32899999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations				499,750	XXX	532,333	500,000	499,882	0	25	0	0	XXX	XXX	0	2,500	0	XXX	XXX
38899999	Total - Industrial and Miscellaneous (Unaffiliated) Bonds				499,750	XXX	532,333	500,000	499,882	0	25	0	0	XXX	XXX	0	2,500	0	XXX	XXX
48899999	Total - Hybrid Securities				0	XXX	0	0	0	0	0	0	0	XXX	XXX	0	0	0	XXX	XXX
55899999	Total - Parent, Subsidiaries and Affiliates Bonds				0	XXX	0	0	0	0	0	0	0	XXX	XXX	0	0	0	XXX	XXX
60939999	Subtotal - SVO Identified Funds				0	XXX	0	0	0	0	0	0	0	XXX	XXX	0	0	0	XXX	XXX
77939999	Total - Issuer Obligations				998,744	XXX	1,027,692	1,000,000	999,092	0	251	0	0	XXX	XXX	0	24,688	0	XXX	XXX
78939999	Total - Residential Mortgage-Backed Securities				0	XXX	0	0	0	0	0	0	0	XXX	XXX	0	0	0	XXX	XXX
79939999	Total - Commercial Mortgage-Backed Securities				0	XXX	0	0	0	0	0	0	0	XXX	XXX	0	0	0	XXX	XXX
80939999	Total - Other Loan-Backed and Structured Securities				0	XXX	0	0	0	0	0	0	0	XXX	XXX	0	0	0	XXX	XXX
81939999	Total - SVO Identified Funds				0	XXX	0	0	0	0	0	0	0	XXX	XXX	0	0	0	XXX	XXX
83999999	Total Bonds				998,744	XXX	1,027,692	1,000,000	999,092	0	251	0	0	XXX	XXX	0	24,688	0	XXX	XXX

Schedule D - Part 2 - Section 1 - Preferred Stocks Owned

NONE

Schedule D - Part 2 - Section 2 - Common Stocks Owned

NONE

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE D - PART 3

Showing All Long-Term Bonds and Stocks ACQUIRED During Current Year

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends
91226-42-2	US TREASURY NOTE/BOND - 0.875% DV/15/19		05/02/2016	MIDCO SECURITIES USA		498,884	500,000	715
0595999	Subtotal - Bonds - U.S. Governments					498,884	500,000	715
8395998	Total - Bonds - Part 3					498,884	500,000	715
8395998	Total - Bonds					498,884	500,000	715
8999997	Total - Preferred Stocks - Part 3					0	XXX	0
8999998	Total - Preferred Stocks - Part 5					0	XXX	0
8999999	Total - Preferred Stocks					0	XXX	0
8799997	Total - Common Stocks - Part 3					0	XXX	0
8799998	Total - Common Stocks - Part 5					0	XXX	0
8999999	Total - Common Stocks					0	XXX	0
8999999	Total - Preferred and Common Stocks					0	XXX	0
9999999	Totals					498,884	XXX	715

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE D - PART 4

Showing All Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Year

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/Decrease	Current Year's Amortization/Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in Book/Adjusted Carrying Value (11+12-13)	Total Foreign Exchange Change in Book/Adjusted Carrying Value	Book/Adjusted Carrying Value at Disposal	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	
059999999	US TREASURY NOTE/2016 0.25% 05/15/16		05/15/2016	Aetna		500,000	500,000	495,781	495,442	0	359	0	359	0	500,000	0	0	0	0	0	05/15/2016
109999999	USRA FINANCE CORP 3.25%		09/20/16	Aetna		500,000	500,000	495,390	498,903	0	37	0	37	0	500,000	0	0	0	0	15,290	09/20/2016
619999997	Subtotal - Bonds - All Other Governments					500,000	500,000	495,390	498,903	0	37	0	37	0	500,000	0	0	0	0	15,290	XXX
619999998	Total - Bonds - Part 4					1,000,000	1,000,000	995,161	999,245	0	656	0	656	0	1,000,000	0	0	0	0	16,875	XXX
619999999	Total - Bonds					1,000,000	1,000,000	995,161	999,245	0	656	0	656	0	1,000,000	0	0	0	0	16,875	XXX
899999997	Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0
899999998	Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0
979999997	Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0
979999998	Total - Common Stocks - Part 5					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0
989999999	Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total - Preferred and Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0
999999999	Totals					1,000,000	XXX	995,161	999,245	0	656	0	656	0	1,000,000	0	0	0	0	16,875	XXX

Schedule D - Part 5 - Long Term Bonds and Stocks Acquired and Fully Disposed Of

NONE

Schedule D-Part 6-Section 1-Valuation of Shares of Subsidiary, Controlled or Affiliated Companies

NONE

Schedule D - Part 6 - Section 2

NONE

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE DA - PART 1

Showing All SHORT-TERM INVESTMENTS Owned December 31 of Current Year

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
CUSIP Identification	Description	Code	Foreign Code	Date Acquired	Name of Vendor	Maturity Date	Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's Accretion (Amortization)	Current Year's Other Than Temporary Impairment Recognized	Total Foreign Exchange Change in Book/Adjusted Carrying Value	Par Value	Actual Cost	Amount Due and Accrued Current Year on Bonds not in Default	Non-Admitted Due and Accrued	Rate of Interest	Effective Rate of Interest	When Paid	Amount Received During Year	Paid for Accrued Interest
05999999	Total - U.S. Government Bonds						0	0	0	0	0	0	0	0	0	0	0	0	0	0
17999999	Total - All Other Government Bonds						0	0	0	0	0	0	0	0	0	0	0	0	0	0
17999999	Total - U.S. States, Territories and Possessions Bonds						0	0	0	0	0	0	0	0	0	0	0	0	0	0
24999999	Total - U.S. Political Subdivisions Bonds						0	0	0	0	0	0	0	0	0	0	0	0	0	0
31999999	Total - U.S. Special Revenues Bonds						0	0	0	0	0	0	0	0	0	0	0	0	0	0
38999999	Total - Industrial and Miscellaneous (Unaffiliated) Bonds						0	0	0	0	0	0	0	0	0	0	0	0	0	0
48999999	Total - Hybrid Securities						0	0	0	0	0	0	0	0	0	0	0	0	0	0
55999999	Total - Parent, Subsidiaries and Affiliates Bonds						0	0	0	0	0	0	0	0	0	0	0	0	0	0
60999999	Subtotal - SVO Identified Funds						0	0	0	0	0	0	0	0	0	0	0	0	0	0
77999999	Total - Issuer Obligations						0	0	0	0	0	0	0	0	0	0	0	0	0	0
78999999	Total - Residential Mortgage-Backed Securities						0	0	0	0	0	0	0	0	0	0	0	0	0	0
79999999	Total - Commercial Mortgage-Backed Securities						0	0	0	0	0	0	0	0	0	0	0	0	0	0
80999999	Total - Other Loan-Backed and Structured Securities						0	0	0	0	0	0	0	0	0	0	0	0	0	0
81999999	Total - SVO Identified Funds						0	0	0	0	0	0	0	0	0	0	0	0	0	0
83999999	Total Bonds						0	0	0	0	0	0	0	0	0	0	0	0	0	0
86999999	Total - Parent, Subsidiaries and Affiliates						3.991	0	0	0	0	0	3.991	0	0	0	0	0	0	0
88999999	Total - Issuer Obligations						3.991	0	0	0	0	0	3.991	0	0	0	0	0	0	0
88999999	Subtotal - Exempl Money Market Mutual Funds - as Identified by the SVO						3.991	0	0	0	0	0	3.991	0	0	0	0	0	0	0
91999999	Totals						3.991	0	0	0	0	0	3.991	0	0	0	0	0	0	0

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

NONE

Schedule DB - Part A - Section 2 - Options, Caps, Floors, Collars, Swaps and Forwards Terminated

NONE

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

NONE

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

NONE

Schedule DB - Part B - Section 2 - Futures Contracts Terminated

NONE

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

NONE

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

NONE

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

NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

NONE

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned December 31 of Current Year

1	2	3	4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due and Accrued	Amount Received During Year
US TREASURY BILL		12/29/2016	0.50	07/29/2017	1,793,366	0	61
0199999 Subtotal - U.S. Governments - Issuer Obligations					1,793,366	0	61
0599999 Total - U.S. Government Bonds					1,793,366	0	61
1099999 Total - All Other Government Bonds					0	0	0
1799999 Total - U.S. States, Territories and Possessions Bonds					0	0	0
2499999 Total - U.S. Political Subdivisions Bonds					0	0	0
3199999 Total - U.S. Special Revenues Bonds					0	0	0
3899999 Total - Industrial and Miscellaneous (Unaffiliated) Bonds					0	0	0
4899999 Total - Hybrid Securities					0	0	0
5599999 Total - Parent, Subsidiaries and Affiliates Bonds					0	0	0
6099999 Subtotal - SVO Identified Funds					0	0	0
7299999 Total - Issuer Obligations					1,793,366	0	61
7899999 Total - Residential Mortgage-Backed Securities					0	0	0
7999999 Total - Commercial Mortgage-Backed Securities					0	0	0
8099999 Total - Other Loan-Backed and Structured Securities					0	0	0
8199999 Total - SVO Identified Funds					0	0	0
8399999 Total Bonds					1,793,366	0	61
8699999 Total Cash Equivalents					1,793,366	0	61

SCHEDULE E - PART 3 - SPECIAL DEPOSITS

States, Etc.	1 Type of Deposit	2 Purpose of Deposit	Deposits For the Benefit of All Policyholders		All Other Special Deposits	
			3 Book/Adjusted Carrying Value	4 Fair Value	5 Book/Adjusted Carrying Value	6 Fair Value
			1. Alabama	AL		0
2. Alaska	AK		0	0	0	0
3. Arizona	AZ		0	0	0	0
4. Arkansas	AR		0	0	0	0
5. California	CA		0	0	0	0
6. Colorado	CO		0	0	0	0
7. Connecticut	CT	B. RSD by INS CODE 38A-193	499,210	495,359	0	0
8. Delaware	DE		0	0	0	0
9. District of Columbia	DC		0	0	0	0
10. Florida	FL		0	0	0	0
11. Georgia	GA		0	0	0	0
12. Hawaii	HI		0	0	0	0
13. Idaho	ID		0	0	0	0
14. Illinois	IL		0	0	0	0
15. Indiana	IN		0	0	0	0
16. Iowa	IA		0	0	0	0
17. Kansas	KS		0	0	0	0
18. Kentucky	KY		0	0	0	0
19. Louisiana	LA		0	0	0	0
20. Maine	ME		0	0	0	0
21. Maryland	MD		0	0	0	0
22. Massachusetts	MA		0	0	0	0
23. Michigan	MI		0	0	0	0
24. Minnesota	MN		0	0	0	0
25. Mississippi	MS		0	0	0	0
26. Missouri	MO		0	0	0	0
27. Montana	MT		0	0	0	0
28. Nebraska	NE		0	0	0	0
29. Nevada	NV		0	0	0	0
30. New Hampshire	NH		0	0	0	0
31. New Jersey	NJ		0	0	0	0
32. New Mexico	NM		0	0	0	0
33. New York	NY		0	0	0	0
34. North Carolina	NC		0	0	0	0
35. North Dakota	ND		0	0	0	0
36. Ohio	OH		0	0	0	0
37. Oklahoma	OK		0	0	0	0
38. Oregon	OR		0	0	0	0
39. Pennsylvania	PA		0	0	0	0
40. Rhode Island	RI		0	0	0	0
41. South Carolina	SC		0	0	0	0
42. South Dakota	SD		0	0	0	0
43. Tennessee	TN		0	0	0	0
44. Texas	TX		0	0	0	0
45. Utah	UT		0	0	0	0
46. Vermont	VT		0	0	0	0
47. Virginia	VA		0	0	0	0
48. Washington	WA		0	0	0	0
49. West Virginia	WV		0	0	0	0
50. Wisconsin	WI		0	0	0	0
51. Wyoming	WY		0	0	0	0
52. American Samoa	AS		0	0	0	0
53. Guam	GU		0	0	0	0
54. Puerto Rico	PR		0	0	0	0
55. U.S. Virgin Islands	VI		0	0	0	0
56. Northern Mariana Islands	MP		0	0	0	0
57. Canada	CAN		0	0	0	0
58. Aggregate Alien and Other	OT	XXX	0	0	0	0
59. Subtotal	XXX	XXX	499,210	495,359	0	0
DETAILS OF WRITE-INS						
5801.						
5802.						
5803.						
5898. Summary of remaining write-ins for Line 58 from overflow page	XXX	XXX	0	0	0	0
5899. Totals (Lines 5801 thru 5803 plus 5898)(Line 58 above)	XXX	XXX	0	0	0	0

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK

Analysis of Operations By Lines of Business	7
Assets	2
Cash Flow	6
Exhibit 1 - Enrollment By Product Type for Health Business Only	17
Exhibit 2 - Accident and Health Premiums Due and Unpaid	18
Exhibit 3 - Health Care Receivables	19
Exhibit 3A - Analysis of Health Care Receivables Collected and Accrued.....	20
Exhibit 4 - Claims Unpaid and Incentive Pool, Withhold and Bonus	21
Exhibit 5 - Amounts Due From Parent, Subsidiaries and Affiliates	22
Exhibit 6 - Amounts Due To Parent, Subsidiaries and Affiliates	23
Exhibit 7 - Part 1 - Summary of Transactions With Providers	24
Exhibit 7 - Part 2 - Summary of Transactions With Intermediaries	24
Exhibit 8 - Furniture, Equipment and Supplies Owned	25
Exhibit of Capital Gains (Losses)	15
Exhibit of Net Investment Income	15
Exhibit of Nonadmitted Assets	16
Exhibit of Premiums, Enrollment and Utilization (State Page)	30
Five-Year Historical Data	29
General Interrogatories	27
Jurat Page	1
Liabilities, Capital and Surplus	3
Notes To Financial Statements	26
Overflow Page For Write-ins	44
Schedule A - Part 1	E01
Schedule A - Part 2	E02
Schedule A - Part 3	E03
Schedule A - Verification Between Years	SI02
Schedule B - Part 1	E04
Schedule B - Part 2	E05
Schedule B - Part 3	E06
Schedule B - Verification Between Years	SI02
Schedule BA - Part 1	E07
Schedule BA - Part 2	E08
Schedule BA - Part 3	E09
Schedule BA - Verification Between Years	SI03
Schedule D - Part 1	E10
Schedule D - Part 1A - Section 1	SI05
Schedule D - Part 1A - Section 2	SI08
Schedule D - Part 2 - Section 1	E11
Schedule D - Part 2 - Section 2	E12
Schedule D - Part 3	E13
Schedule D - Part 4	E14
Schedule D - Part 5	E15
Schedule D - Part 6 - Section 1	E16
Schedule D - Part 6 - Section 2	E16
Schedule D - Summary By Country	SI04
Schedule D - Verification Between Years	SI03
Schedule DA - Part 1	E17
Schedule DA - Verification Between Years	SI10
Schedule DB - Part A - Section 1	E18
Schedule DB - Part A - Section 2	E19
Schedule DB - Part A - Verification Between Years	SI11
Schedule DB - Part B - Section 1	E20
Schedule DB - Part B - Section 2	E21
Schedule DB - Part B - Verification Between Years	SI11
Schedule DB - Part C - Section 1	SI12
Schedule DB - Part C - Section 2	SI13
Schedule DB - Part D - Section 1	E22
Schedule DB - Part D - Section 2	E23
Schedule DB - Verification	SI14
Schedule DL - Part 1	E24
Schedule DL - Part 2	E25
Schedule E - Part 1 - Cash	E26
Schedule E - Part 2 - Cash Equivalents	E27
Schedule E - Part 3 - Special Deposits	E28
Schedule E - Verification Between Years	SI15

ANNUAL STATEMENT BLANK (Continued)

Schedule S - Part 1 - Section 2	31
Schedule S - Part 2	32
Schedule S - Part 3 - Section 2	33
Schedule S - Part 4	34
Schedule S - Part 5	35
Schedule S - Part 6.....	36
Schedule S - Part 7.....	37
Schedule T - Part 2 - Interstate Compact	39
Schedule T - Premiums and Other Considerations	38
Schedule Y - Information Concerning Activities of Insurer Members of a Holding Company Group	40
Schedule Y - Part 1A - Detail of Insurance Holding Company System	41
Schedule Y - Part 2 - Summary of Insurer's Transactions With Any Affiliates	42
Statement of Revenue and Expenses	4
Summary Investment Schedule	SI01
Supplemental Exhibits and Schedules Interrogatories	43
Underwriting and Investment Exhibit - Part 1	8
Underwriting and Investment Exhibit - Part 2	9
Underwriting and Investment Exhibit - Part 2A	10
Underwriting and Investment Exhibit - Part 2B	11
Underwriting and Investment Exhibit - Part 2C	12
Underwriting and Investment Exhibit - Part 2D	13
Underwriting and Investment Exhibit - Part 3	14



HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDING DECEMBER 31, 2015

OF THE CONDITION AND AFFAIRS OF

Aetna Better Health Inc. (a Connecticut corporation)

NAIC Group Code 0001 0001 NAIC Company Code 13174 Employer's ID Number 26-2867560
 (Current Period) (Prior Period)

Organized under the Laws of **Connecticut** State of Domicile or Port of Entry ... **Connecticut** Country of Domicile ... **United States**
 Licensed as business type: Life, Accident & Health [] Property/Casualty [] Hospital, Medical & Dental Service or Indemnity []
 Dental Service Corporation [] Vision Service Corporation [] Health Maintenance Organization [X]
 Other [] Is HMO Federally Qualified? Yes [] No [X]

Incorporated/Organized **June 25, 2008** Commenced Business **August 1, 2008**

Statutory Home Office **151 Farmington Avenue** **Hartford** **CT** ... **US** ... **06156**
 (Street and Number) (City, State, Country, and Zip Code)

Main Administrative Office **980 Jolly Road**
 (Street and Number)

..... **Blue Bell** **PA** ... **US** ... **19422-1904** **800-872-3862**
 (City, State, Country, and Zip Code) (Area Code) (Telephone Number)

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

Primary Location of Books and Records **151 Farmington Avenue**
 (Street and Number)

..... **Hartford** **CT** ... **US** ... **06156** **800-872-3862**
 (City, State, Country, and Zip Code) (Area Code) (Telephone Number)

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

Statutory Statement Contact **Dawn Marie Schoen** **215-775-6508**
 (Name) (Area Code) (Telephone Number) (Extension)

..... **Aetna.HMOReporting@aetna.com** **860-262-7767**
 (E-mail Address) (Fax Number)

OFFICERS

Pamela Sue Sedmak, President
Robert Mark Kessler, Secretary
Dawn Marie Schoen, Principal Financial Officer and Controller

OTHER Elaine Rose Cofrancesco, Treasurer
Edward Chung-I Lee, Vice President and Assistant Secretary
Gregory Stephen Martino, Vice President
Kevin James Casey, Senior Investment Officer
Steven Matthew Conte, Assistant Controller #

DIRECTORS OR TRUSTEES

Debra Jean Bacon **Mary Louise Osborne** **Pamela Sue Sedmak**

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

(Signature)
Pamela Sue Sedmak
 President

(Signature)
Robert Mark Kessler
 Secretary

(Signature)
Dawn Marie Schoen
 Principal Financial Officer and Controller

State of..... Arizona
 County of..... Maricopa
 Subscribed and sworn to before me this
22 day of **January** 2016

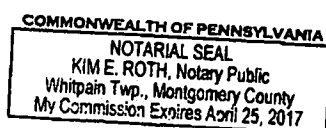
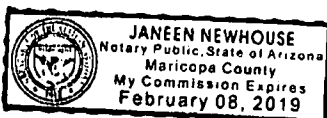
 NOTARY PUBLIC (Seal)

State of..... Arizona
 County of..... Maricopa
 @Subscribed and sworn to before me this
25 day of **January** 2016

 NOTARY PUBLIC (Seal)

State of..... Pennsylvania
 County of..... Montgomery
 @Subscribed and sworn to before me this
23rd day of **February** 2016

 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

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D).....	1,499,201	0	1,499,201	1,497,571
2. Stocks (Schedule D):				
2.1 Preferred stocks.....	0	0	0	0
2.2 Common stocks.....	0	0	0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	0	0	0	0
4.2 Properties held for the production of income (less \$.....0 encumbrances).....	0	0	0	0
4.3 Properties held for sale (less \$.....0 encumbrances).....	0	0	0	0
5. Cash (\$.....368,912, Schedule E-Part 1), cash equivalents (\$.....1,159,571, Schedule E-Part 2) and short-term investments (\$.....1,118, Schedule DA).....	1,529,601	0	1,529,601	2,015,503
6. Contract loans (including \$.....0 premium notes).....	0	0	0	0
7. Derivatives (Schedule DB).....	0	0	0	0
8. Other invested assets (Schedule BA).....	0	0	0	0
9. Receivables for securities.....	0	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL).....	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).....	3,028,802	0	3,028,802	3,513,074
13. Title plants less \$.....0 charged off (for Title insurers only).....	0	0	0	0
14. Investment income due and accrued.....	11,346	0	11,346	11,346
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	0	0	0	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	0	0	0	0
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....	0	0	0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	0	0	0	0
16.2 Funds held by or deposited with reinsured companies.....	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts.....	0	0	0	0
17. Amounts receivable relating to uninsured plans.....	0	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon.....	3,117	0	3,117	13,929
18.2 Net deferred tax asset.....	0	0	0	0
19. Guaranty funds receivable or on deposit.....	0	0	0	0
20. Electronic data processing equipment and software.....	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$.....0).....	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates.....	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates.....	0	0	0	0
24. Health care (\$.....0) and other amounts receivable.....	0	0	0	0
25. Aggregate write-ins for other than invested assets.....	0	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	3,043,265	0	3,043,265	3,538,349
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0	0
28. TOTALS (Lines 26 and 27).....	3,043,265	0	3,043,265	3,538,349

DETAILS OF WRITE-INS

1101.	0	0	0	0
1102.	0	0	0	0
1103.	0	0	0	0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501.	0	0	0	0
2502.	0	0	0	0
2503.	0	0	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	0	0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$.....0 reinsurance ceded).....	15,942	0	15,942	15,942
2. Accrued medical incentive pool and bonus amounts.....	0	0	0	0
3. Unpaid claims adjustment expenses.....	0	0	0	0
4. Aggregate health policy reserves, including the liability of \$.....0 for medical loss ratio rebate per the Public Health Service Act.....	0	0	0	0
5. Aggregate life policy reserves.....	0	0	0	0
6. Property/casualty unearned premium reserve.....	0	0	0	0
7. Aggregate health claim reserves.....	0	0	0	0
8. Premiums received in advance.....	0	0	0	0
9. General expenses due or accrued.....	1,765	0	1,765	238
10.1 Current federal and foreign income tax payable and interest thereon (including \$.....0 on realized capital gains (losses)).....	0	0	0	0
10.2 Net deferred tax liability.....	1,451	0	1,451	878
11. Ceded reinsurance premiums payable.....	0	0	0	0
12. Amounts withheld or retained for the account of others.....	0	0	0	0
13. Remittances and items not allocated.....	0	0	0	0
14. Borrowed money (including \$.....0 current) and interest thereon \$.....0 (including \$.....0 current).....	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates.....	0	0	0	543,234
16. Derivatives.....	0	0	0	0
17. Payable for securities.....	0	0	0	0
18. Payable for securities lending.....	0	0	0	0
19. Funds held under reinsurance treaties with (\$.....0 authorized reinsurers, \$.....0 unauthorized and \$.....0 certified reinsurers).....	0	0	0	0
20. Reinsurance in unauthorized and certified (\$.....0) companies.....	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates.....	0	0	0	0
22. Liability for amounts held under uninsured plans.....	0	0	0	0
23. Aggregate write-ins for other liabilities (including \$.....0 current).....	0	0	0	0
24. Total liabilities (Lines 1 to 23).....	19,158	0	19,158	560,292
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	0	0
26. Common capital stock.....	XXX	XXX	10	10
27. Preferred capital stock.....	XXX	XXX	0	0
28. Gross paid in and contributed surplus.....	XXX	XXX	2,309,990	2,309,990
29. Surplus notes.....	XXX	XXX	0	0
30. Aggregate write-ins for other than special surplus funds.....	XXX	XXX	0	0
31. Unassigned funds (surplus).....	XXX	XXX	714,107	668,057
32. Less treasury stock at cost:				
32.1 .....0.000 shares common (value included in Line 26 \$.....0).....	XXX	XXX	0	0
32.2 .....0.000 shares preferred (value included in Line 27 \$.....0).....	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	3,024,107	2,978,057
34. Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	3,043,265	3,538,349

DETAILS OF WRITE-INS

2301.	0	0	0	0
2302.	0	0	0	0
2303.	0	0	0	0
2398. Summary of remaining write-ins for Line 23 from overflow page.....	0	0	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above).....	0	0	0	0
2501.	XXX	XXX	0	0
2502.	XXX	XXX	0	0
2503.	XXX	XXX	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	XXX	XXX	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	XXX	XXX	0	0
3001.	XXX	XXX	0	0
3002.	XXX	XXX	0	0
3003.	XXX	XXX	0	0
3098. Summary of remaining write-ins for Line 30 from overflow page.....	XXX	XXX	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above).....	XXX	XXX	0	0

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**
STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member months.....	XXX	0	0
2. Net premium income (including \$.....0 non-health premium income).....	XXX	0	0
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	0	0
4. Fee-for-service (net of \$.....0 medical expenses).....	XXX	0	0
5. Risk revenue.....	XXX	0	0
6. Aggregate write-ins for other health care related revenues.....	XXX	0	0
7. Aggregate write-ins for other non-health revenues.....	XXX	0	0
8. Total revenues (Lines 2 to 7).....	XXX	0	0
Hospital and Medical:			
9. Hospital/medical benefits.....	0	(24,643)	(81,254)
10. Other professional services.....	0	0	0
11. Outside referrals.....	0	0	0
12. Emergency room and out-of-area.....	0	0	0
13. Prescription drugs.....	0	0	0
14. Aggregate write-ins for other hospital and medical.....	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts.....	0	0	0
16. Subtotal (Lines 9 to 15).....	0	(24,643)	(81,254)
Less:			
17. Net reinsurance recoveries.....	0	0	0
18. Total hospital and medical (Lines 16 minus 17).....	0	(24,643)	(81,254)
19. Non-health claims (net).....	0	0	0
20. Claims adjustment expenses, including \$.....0 cost containment expenses.....	0	0	0
21. General administrative expenses.....	0	1,527	31
22. Increase in reserves for life and accident and health contracts including \$.....0 increase in reserves for life only).....	0	0	0
23. Total underwriting deductions (Lines 18 through 22).....	0	(23,116)	(81,223)
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX	23,116	81,223
25. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	0	47,729	45,079
26. Net realized capital gains or (losses) less capital gains tax of \$.....0.....	0	0	(16,562)
27. Net investment gains or (losses) (Lines 25 plus 26).....	0	47,729	28,517
28. Net gain or (loss) from agents' or premium balances charged off ((amount recovered \$.....0) (amount charged off \$.....0)).....	0	0	0
29. Aggregate write-ins for other income or expenses.....	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29).....	XXX	70,845	109,740
31. Federal and foreign income taxes incurred.....	XXX	24,222	43,657
32. Net income (loss) (Lines 30 minus 31).....	XXX	46,623	66,083

DETAILS OF WRITE-INS

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

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
STATEMENT OF REVENUE AND EXPENSES (Continued)

CAPITAL AND SURPLUS ACCOUNT	1 Current Year	2 Prior Year
33. Capital and surplus prior reporting period.....	2,978,057	2,895,622
34. Net income or (loss) from Line 32.....	46,623	66,083
35. Change in valuation basis of aggregate policy and claim reserves.....	0	0
36. Change in net unrealized capital gains and (losses) less capital gains tax of \$.....0.....	0	0
37. Change in net unrealized foreign exchange capital gain or (loss).....	0	0
38. Change in net deferred income tax.....	(573)	16,131
39. Change in nonadmitted assets.....	0	221
40. Change in unauthorized and certified reinsurance.....	0	0
41. Change in treasury stock.....	0	0
42. Change in surplus notes.....	0	0
43. Cumulative effect of changes in accounting principles.....	0	0
44. Capital changes:		
44.1 Paid in.....	0	0
44.2 Transferred from surplus (Stock Dividend).....	0	0
44.3 Transferred to surplus.....	0	0
45. Surplus adjustments:		
45.1 Paid in.....	0	0
45.2 Transferred to capital (Stock Dividend).....	0	0
45.3 Transferred from capital.....	0	0
46. Dividends to stockholders.....	0	0
47. Aggregate write-ins for gains or (losses) in surplus.....	0	0
48. Net change in capital and surplus (Lines 34 to 47).....	46,050	82,435
49. Capital and surplus end of reporting period (Line 33 plus 48).....	3,024,107	2,978,057

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

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**
CASH FLOW

	1 Current Year	2 Prior Year
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....	.0	.0
2. Net investment income.....	46,099	43,532
3. Miscellaneous income.....	.0	221
4. Total (Lines 1 through 3).....	46,099	43,753
5. Benefit and loss related payments.....	(24,643)	(88,473)
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	.0	.0
7. Commissions, expenses paid and aggregate write-ins for deductions.....	.0	.0
8. Dividends paid to policyholders.....	.0	.0
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	13,410	201,025
10. Total (Lines 5 through 9).....	(11,233)	112,552
11. Net cash from operations (Line 4 minus Line 10).....	57,332	(68,799)
CASH FROM INVESTMENTS		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	.0	9,345
12.2 Stocks.....	.0	.0
12.3 Mortgage loans.....	.0	.0
12.4 Real estate.....	.0	.0
12.5 Other invested assets.....	.0	.0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....	.0	.0
12.7 Miscellaneous proceeds.....	.0	.0
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	.0	9,345
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	.0	.0
13.2 Stocks.....	.0	.0
13.3 Mortgage loans.....	.0	.0
13.4 Real estate.....	.0	.0
13.5 Other invested assets.....	.0	.0
13.6 Miscellaneous applications.....	.0	.0
13.7 Total investments acquired (Lines 13.1 to 13.6).....	.0	.0
14. Net increase (decrease) in contract loans and premium notes.....	.0	.0
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	.0	9,345
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....	.0	.0
16.2 Capital and paid in surplus, less treasury stock.....	.0	.0
16.3 Borrowed funds.....	.0	.0
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....	.0	.0
16.5 Dividends to stockholders.....	.0	.0
16.6 Other cash provided (applied).....	(543,234)	543,620
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	(543,234)	543,620
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	(485,902)	484,166
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	2,015,503	1,531,337
19.2 End of year (Line 18 plus Line 19.1).....	1,529,601	2,015,503
Note: Supplemental disclosures of cash flow information for non-cash transactions:		
20.0001 .....	.0	.0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital and Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plans	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Net premium income.....	0	0	0	0	0	0	0	0	0	0
2. Change in unearned premium reserves and reserve for rate credit.....	0	0	0	0	0	0	0	0	0	0
3. Fee-for-service (net of \$.....0 medical expenses).....	0	0	0	0	0	0	0	0	0	0
4. Risk revenue.....	0	0	0	0	0	0	0	0	0	XXX
5. Aggregate write-ins for other health care related revenues.....	0	0	0	0	0	0	0	0	0	XXX
6. Aggregate write-ins for other non-health care related revenues.....	0	0	0	0	0	0	0	0	0	XXX
7. Total revenues (Lines 1 to 6).....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
8. Hospital/medical benefits.....	(24,643)	0	0	0	0	0	0	(24,643)	0	XXX
9. Other professional services.....	0	0	0	0	0	0	0	0	0	XXX
10. Outside referrals.....	0	0	0	0	0	0	0	0	0	XXX
11. Emergency room and out-of-area.....	0	0	0	0	0	0	0	0	0	XXX
12. Prescription drugs.....	0	0	0	0	0	0	0	0	0	XXX
13. Aggregate write-ins for other hospital and medical.....	0	0	0	0	0	0	0	0	0	XXX
14. Incentive pool, withhold adjustments and bonus amounts.....	0	0	0	0	0	0	0	0	0	XXX
15. Subtotal (Lines 8 to 14).....	(24,643)	0	0	0	0	0	0	(24,643)	0	XXX
16. Net reinsurance recoveries.....	0	0	0	0	0	0	0	0	0	XXX
17. Total hospital and medical (Lines 15 minus 16).....	(24,643)	0	0	0	0	0	0	(24,643)	0	XXX
18. Non-health claims (net).....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
19. Claims adjustment expenses including \$.....0 cost containment expenses.....	0	0	0	0	0	0	0	0	0	0
20. General administrative expenses.....	1,527	0	0	0	0	0	0	1,527	0	0
21. Increase in reserves for accident and health contracts.....	0	0	0	0	0	0	0	0	0	0
22. Increase in reserve for life contracts.....	0	0	0	0	0	0	0	0	0	0
23. Total underwriting deductions (Lines 17 to 22).....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
24. Net underwriting gain or (loss) (Line 7 minus Line 23).....	(23,116)	0	0	0	0	0	0	(23,116)	0	0
	23,116	0	0	0	0	0	0	23,116	0	0

DETAILS OF WRITE-INS

0501.....	0	0	0	0	0	0	0	0	0	0
0502.....	0	0	0	0	0	0	0	0	0	XXX
0503.....	0	0	0	0	0	0	0	0	0	XXX
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0	0	0	0	0	0	0	XXX
0599. Total (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0	0	0	0	0	0	0	0	XXX
0601.....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0602.....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0603.....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0698. Summary of remaining write-ins for Line 6 from overflow page.....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0699. Total (Lines 0601 thru 0603 plus 0698) (Line 6 above).....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301.....	0	0	0	0	0	0	0	0	0	0
1302.....	0	0	0	0	0	0	0	0	0	XXX
1303.....	0	0	0	0	0	0	0	0	0	XXX
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0	0	0	0	0	XXX
1399. Total (Lines 1301 thru 1303 plus 1398) (Line 13 above).....	0	0	0	0	0	0	0	0	0	XXX

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Ceded	4 Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical).....	.....0	.....0	.....0	.....0
2. Medicare supplement.....	.....0	.....0	.....0	.....0
3. Dental only.....	.....0	.....0	.....0	.....0
4. Vision only.....	.....0	.....0	.....0	.....0
5. Federal employees health benefits plan.....	.....0	.....0	.....0	.....0
6. Title XVIII - Medicare.....	.....0	.....0	.....0	.....0
7. Title XIX - Medicaid.....	.....0	.....0	.....0	.....0
8. Other health.....	.....0	.....0	.....0	.....0
9. Health subtotal (Lines 1 through 8).....	.....0	.....0	.....0	.....0
10. Life.....	.....0	.....0	.....0	.....0
11. Property/casualty.....	.....0	.....0	.....0	.....0
12. Totals (Lines 9 to 11).....	.....0	.....0	.....0	.....0

NONE

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT
PART 2 - CLAIMS INCURRED DURING THE YEAR

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital and Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Payments during the year:										
1.1 Direct.....	(24,643)	.0	.0	.0	.0	.0	.0	(24,643)	.0	.0
1.2 Reinsurance assumed.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
1.3 Reinsurance ceded.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
1.4 Net.....	(24,643)	.0	.0	.0	.0	.0	.0	(24,643)	.0	.0
2. Paid medical incentive pools and bonuses.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. Claim liability December 31, current year from Part 2A:										
3.1 Direct.....	15,942	.0	.0	.0	.0	.0	.0	15,942	.0	.0
3.2 Reinsurance assumed.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3.3 Reinsurance ceded.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3.4 Net.....	15,942	.0	.0	.0	.0	.0	.0	15,942	.0	.0
4. Claim reserve December 31, current year from Part 2D:										
4.1 Direct.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4.2 Reinsurance assumed.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4.3 Reinsurance ceded.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4.4 Net.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. Accrued medical incentive pools and bonuses, current year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. Net healthcare receivables (a).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
7. Amounts recoverable from reinsurers December 31, current year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8. Claim liability December 31, prior year from Part 2A:										
8.1 Direct.....	15,942	.0	.0	.0	.0	.0	.0	15,942	.0	.0
8.2 Reinsurance assumed.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8.3 Reinsurance ceded.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8.4 Net.....	15,942	.0	.0	.0	.0	.0	.0	15,942	.0	.0
9. Claim reserve December 31, prior year from Part 2D:										
9.1 Direct.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
9.2 Reinsurance assumed.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
9.3 Reinsurance ceded.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
9.4 Net.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
10. Accrued medical incentive pools and bonuses, prior year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Amounts recoverable from reinsurers December 31, prior year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
12. Incurred benefits:										
12.1 Direct.....	(24,643)	.0	.0	.0	.0	.0	.0	(24,643)	.0	.0
12.2 Reinsurance assumed.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
12.3 Reinsurance ceded.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
12.4 Net.....	(24,643)	.0	.0	.0	.0	.0	.0	(24,643)	.0	.0
13. Incurred medical incentive pools and bonuses.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

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

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT
PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Medical and Hospital)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Reported in process of adjustment:										
1.1 Direct.....	0	0	0	0	0	0	0	0	0	0
1.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
1.4 Net.....	0	0	0	0	0	0	0	0	0	0
2. Incurred but unreported:										
2.1 Direct.....	15,942	0	0	0	0	0	0	15,942	0	0
2.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
2.4 Net.....	15,942	0	0	0	0	0	0	15,942	0	0
3. Amounts withheld from paid claims and capitations:										
3.1 Direct.....	0	0	0	0	0	0	0	0	0	0
3.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
3.4 Net.....	0	0	0	0	0	0	0	0	0	0
4. Totals:										
4.1 Direct.....	15,942	0	0	0	0	0	0	15,942	0	0
4.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
4.4 Net.....	15,942	0	0	0	0	0	0	15,942	0	0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid During the Year				Claim Reserve and Claim Liability December 31 of Current Year		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 December 31 of Prior Year	4 On Claims Incurred During the Year	5 On Claims Unpaid December 31 of Current Year	6 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical)	0	0	0	0	0	0	0	0
2. Medicare supplement	0	0	0	0	0	0	0	0
3. Dental only	0	0	0	0	0	0	0	0
4. Vision only	0	0	0	0	0	0	0	0
5. Federal employees health benefits plan	0	0	0	0	0	0	0	0
6. Title XVIII - Medicare	0	0	0	0	0	0	0	0
7. Title XIX - Medicaid	(24,643)	0	15,942	0	15,942	(8,701)	15,942	15,942
8. Other health	0	0	0	0	0	0	0	0
9. Health subtotal (Lines 1 to 8)	(24,643)	0	15,942	0	15,942	(8,701)	15,942	15,942
10. Healthcare receivables (e)	0	0	0	0	0	0	0	0
11. Other non-health	0	0	0	0	0	0	0	0
12. Medical incentive pools and bonus amounts	0	0	0	0	0	0	0	0
13. Totals (Lines 9 - 10 + 11 + 12)	(24,643)	0	15,942	0	15,942	(8,701)	15,942	15,942

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

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT
PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS
(000 Omitted)

SECTION A - PAID HEALTH CLAIMS - GRAND TOTAL

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior.....	24,950	25,444	25,384	25,384	25,384
2. 2011.....	189,817	212,398	213,871	213,783	213,758
3. 2012.....	XXX	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0

SECTION B - INCURRED HEALTH CLAIMS - GRAND TOTAL

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior.....	4,988	3,758	3,553	25,384	25,384
2. 2011.....	217,211	214,404	213,880	213,799	213,774
3. 2012.....	XXX	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - GRAND TOTAL

Years in Which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claim Payments	Claim Adjustment Expense Payments	Percent (Col. 3/2)	Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	Percent (Col. 5/1)	Claims Unpaid	Unpaid Claim Adjustment Expense	Total Claims and Claims Adjustment Expense Incurred (Col. 5 + 7 + 8)	Percent (Col. 9/1)
1. 2011.....	244,066	213,758	5,425	2.5	219,183	89.8	16	0	219,199	89.8
2. 2012.....	(673)	0	0	0.0	0	0.0	0	0	0	0.0
3. 2013.....	0	0	0	0.0	0	0.0	0	0	0	0.0
4. 2014.....	0	0	0	0.0	0	0.0	0	0	0	0.0
5. 2015.....	0	0	0	0.0	0	0.0	0	0	0	0.0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT
PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS
(000 Omitted)

SECTION A - PAID HEALTH CLAIMS - HOSPITAL AND MEDICAL

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior.....	499	512	509	509	509
2. 2011.....	5,356	4,523	4,518	4,516	4,516
3. 2012.....	XXX	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0

SECTION B - INCURRED HEALTH CLAIMS - HOSPITAL AND MEDICAL

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior.....	526	512	509	509	509
2. 2011.....	5,787	4,540	4,518	4,516	4,516
3. 2012.....	XXX	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - HOSPITAL AND MEDICAL

Years in Which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claim Payments	Claim Adjustment Expense Payments	Percent (Col. 3/2)	Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	Percent (Col. 5/1)	Claims Unpaid	Unpaid Claim Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5 + 7 + 8)	Percent (Col. 9/1)
1. 2011.....	3,637	4,516	159	3.5	4,675	128.5	0	0	4,675	128.5
2. 2012.....	1,669	0	0	0.0	0	0.0	0	0	0	0.0
3. 2013.....	0	0	0	0.0	0	0.0	0	0	0	0.0
4. 2014.....	0	0	0	0.0	0	0.0	0	0	0	0.0
5. 2015.....	0	0	0	0.0	0	0.0	0	0	0	0.0

**Underwriting and Investment Ex. - Pt. 2C - Development of Paid Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development of Incurred Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development Ratio Incurred Year Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development of Paid Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development of Incurred Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development Ratio Incurred Year Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development of Paid Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development of Incurred Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development Ratio Incurred Year Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development of Paid Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development of Incurred Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development Ratio Incurred Year Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development of Paid Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development of Incurred Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development Ratio Incurred Year Health Claims
NONE**

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT
PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS
(000 Omitted)

SECTION A - PAID HEALTH CLAIMS - TITLE XIX - MEDICAID

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior.....	24,451	24,932	24,875	24,875	24,875
2. 2011.....	184,461	207,875	209,353	209,267	209,242
3. 2012.....	XXX	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0

SECTION B - INCURRED HEALTH CLAIMS - TITLE XIX - MEDICAID

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior.....	4,462	3,246	3,044	24,875	24,875
2. 2011.....	211,424	209,864	209,362	209,283	209,258
3. 2012.....	XXX	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - TITLE XIX - MEDICAID

Years in Which Premiums were Earned and Claims were Incurred	Incurred Year Health Claim and Claim Adjustment Expense Ratio - Title XIX - Medicaid						Total Claims and Claims Adjustment Expense Incurred (Col. 5 + 7 + 8)	Percent (Col. 9/1)		
	1 Premiums Earned	2 Claim Payments	3 Claim Adjustment Expense Payments	4 Percent (Col. 3/2)	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 Percent (Col. 5/1)			7 Claims Unpaid	8 Unpaid Claim Adjustment Expenses
1. 2011.....	240,429	209,242	5,266	2.5	214,508	89.2	16	0	214,524	89.2
2. 2012.....	(2,342)	0	0	0.0	0	0.0	0	0	0	0.0
3. 2013.....	0	0	0	0.0	0	0.0	0	0	0	0.0
4. 2014.....	0	0	0	0.0	0	0.0	0	0	0	0.0
5. 2015.....	0	0	0	0.0	0	0.0	0	0	0	0.0

**Underwriting and Investment Ex. - Pt. 2C - Development of Paid Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development of Incurred Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2C - Development Ratio Incurred Year Health Claims
NONE**

**Underwriting and Investment Ex. - Pt. 2D - Aggregate Reserve for A&H Contracts Only
NONE**

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
1. Rent (\$.....0 for occupancy of own building).....0	0	0	0	0	0
2. Salaries, wages and other benefits.....0	0	0	0	0	0
3. Commissions (less \$.....0 ceded plus \$.....0 assumed).....0	0	0	0	0	0
4. Legal fees and expenses.....0	0	0	0	0	0
5. Certifications and accreditation fees.....0	0	0	0	0	0
6. Auditing, actuarial and other consulting services.....0	0	0	0	0	0
7. Traveling expenses.....0	0	0	0	0	0
8. Marketing and advertising.....0	0	0	0	0	0
9. Postage, express and telephone.....0	0	0	0	0	0
10. Printing and office supplies.....0	0	0	0	0	0
11. Occupancy, depreciation and amortization.....0	0	0	0	0	0
12. Equipment.....0	0	0	0	0	0
13. Cost or depreciation of EDP equipment and software.....0	0	0	0	0	0
14. Outsourced services including EDP, claims, and other services.....0	0	0	0	0	0
15. Boards, bureaus and association fees.....0	0	0	0	0	0
16. Insurance, except on real estate.....0	0	0	0	0	0
17. Collection and bank service charges.....0	0	0	0	0	0
18. Group service and administration fees.....0	0	0	0	0	0
19. Reimbursements by uninsured plans.....0	0	0	0	0	0
20. Reimbursements from fiscal intermediaries.....0	0	0	0	0	0
21. Real estate expenses.....0	0	0	0	0	0
22. Real estate taxes.....0	0	0	0	0	0
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes.....0	0	0	1,527	0	1,527
23.2 State premium taxes.....0	0	0	0	0	0
23.3 Regulatory authority licenses and fees.....0	0	0	0	0	0
23.4 Payroll taxes.....0	0	0	0	0	0
23.5 Other (excluding federal income and real estate taxes).....0	0	0	0	0	0
24. Investment expenses not included elsewhere.....0	0	0	0	0	0
25. Aggregate write-ins for expenses.....0	0	0	0	0	0
26. Total expenses incurred (Lines 1 to 25).....0	0	0	1,527	0	(a).....1,527
27. Less expenses unpaid December 31, current year.....0	0	0	1,765	0	1,765
28. Add expenses unpaid December 31, prior year.....0	0	0	238	0	238
29. Amounts receivable relating to uninsured plans, prior year.....0	0	0	0	0	0
30. Amounts receivable relating to uninsured plans, current year.....0	0	0	0	0	0
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30).....0	0	0	0	0	0

DETAILS OF WRITE-INS

2501.....0	0	0	0	0	0
2502.....0	0	0	0	0	0
2503.....0	0	0	0	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page.....0	0	0	0	0	0
2599. TOTALS (Lines 2501 thru 2503 plus 2598) (Line 25 above).....0	0	0	0	0	0

(a) Includes management fees of \$.....0 to affiliates and \$.....0 to non-affiliates.

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. government bonds.....	(a).....2,747	2,747
1.1 Bonds exempt from U.S. tax.....	(a).....0	0
1.2 Other bonds (unaffiliated).....	(a).....38,882	38,882
1.3 Bonds of affiliates.....	(a).....0	0
2.1 Preferred stocks (unaffiliated).....	(b).....0	0
2.11 Preferred stocks of affiliates.....	(b).....0	0
2.2 Common stocks (unaffiliated).....	.....0	0
2.21 Common stocks of affiliates.....	.....0	0
3. Mortgage loans.....	(c).....0	0
4. Real estate.....	(d).....0	0
5. Contract loans.....	.....0	0
6. Cash, cash equivalents and short-term investments.....	(e).....6,100	6,100
7. Derivative instruments.....	(f).....0	0
8. Other invested assets.....	.....0	0
9. Aggregate write-ins for investment income.....	.....0	0
10. Total gross investment income.....	47,729	47,729
11. Investment expenses.....		(g).....0
12. Investment taxes, licenses and fees, excluding federal income taxes.....		(g).....0
13. Interest expense.....		(h).....0
14. Depreciation on real estate and other invested assets.....		(i).....0
15. Aggregate write-ins for deductions from investment income.....		.....0
16. Total deductions (Lines 11 through 15).....		.....0
17. Net investment income (Line 10 minus Line 16).....		47,729

DETAILS OF WRITE-INS

0901. ....	.....0	.....0
0902. ....	.....0	.....0
0903. ....	.....0	.....0
0998. Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.....0	.....0
1501. ....	.....0	.....0
1502. ....	.....0	.....0
1503. ....	.....0	.....0
1598. Summary of remaining write-ins for Line 15 from overflow page.....	.....0	.....0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15 above).....	.....0	.....0

- (a) Includes \$.....1,630 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (b) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.
- (c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (d) Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.
- (e) Includes \$.....6,100 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (f) Includes \$.....0 accrual of discount less \$.....0 amortization of premium.
- (g) Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to Segregated and Separate Accounts.
- (h) Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.
- (i) Includes \$.....0 depreciation on real estate and \$.....0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. government bonds.....	.....0	.....0	.....0	.....0	.....0
1.1 Bonds exempt from U.S. tax.....	.....0	.....0	.....0	.....0	.....0
1.2 Other bonds (unaffiliated).....	.....0	.....0	.....0	.....0	.....0
1.3 Bonds of affiliates.....	.....0	.....0	.....0	.....0	.....0
2.1 Preferred stocks (unaffiliated).....	.....0	.....0	.....0	.....0	.....0
2.11 Preferred stocks of affiliates.....	.....0	.....0	.....0	.....0	.....0
2.2 Common stocks (unaffiliated).....	.....0	.....0	.....0	.....0	.....0
2.21 Common stocks of affiliates.....	.....0	.....0	.....0	.....0	.....0
3. Mortgage loans.....	.....0	.....0	.....0	.....0	.....0
4. Real estate.....	.....0	.....0	.....0	.....0	.....0
5. Contract loans.....	.....0	.....0	.....0	.....0	.....0
6. Cash, cash equivalents and short-term investments.....	.....0	.....0	.....0	.....0	.....0
7. Derivative instruments.....	.....0	.....0	.....0	.....0	.....0
8. Other invested assets.....	.....0	.....0	.....0	.....0	.....0
9. Aggregate write-ins for capital gains (losses).....	.....0	.....0	.....0	.....0	.....0
10. Total capital gains (losses).....	.....0	.....0	.....0	.....0	.....0

DETAILS OF WRITE-INS

0901. ....	.....0	.....0	.....0	.....0	.....0
0902. ....	.....0	.....0	.....0	.....0	.....0
0903. ....	.....0	.....0	.....0	.....0	.....0
0998. Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0	.....0	.....0	.....0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.....0	.....0	.....0	.....0	.....0

**Ex. of Nonadmitted Assets
NONE**

**Ex. 1 - Enrollment by Product Type for Health Business Only
NONE**

**Ex. 2 - Accident and Health Premiums Due and Unpaid
NONE**

**Ex. 3 - Health Care Receivables
NONE**

**Ex. 3A - Analysis of Health Care Receivables Collected and Accrued
NONE**

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Unpaid (Reported)						
0599999 - Unreported claim and other claim reserves						15,942
0799999 - Total claims unpaid						15,942

**Ex. 5 - Amounts Due from Parent, Subsidiaries and Affiliates
NONE**

**Ex. 6 - Amounts Due to Parent, Subsidiaries and Affiliates
NONE**

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
EXHIBIT 7 - PART 1 - SUMMARY OF TRANSACTIONS WITH PROVIDERS

1	2	3	4	5	6
Payment Method	Column 1 as a % of Total Payment	Total Members Covered	Column 3 as a % of Total Members	Column 1 Expenses Paid to Affiliated Providers	Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:					
1. Medical groups.....	0.00	0	0.00	0.00	0.00
2. Intermediaries.....	0.00	0	0.00	0.00	0.00
3. All other providers.....	0.00	0	0.00	0.00	0.00
4. Total capitation payments.....	0.00	0	0.00	0.00	0.00
Other Payments:					
5. Fee-for-service.....	0.00	XXX	XXX	0.00	0.00
6. Contractual fee payments.....	(24,643)	XXX	XXX	0.00	(24,643)
7. Bonus/withhold arrangements - fee-for-service.....	100.00	XXX	XXX	0.00	0.00
8. Bonus/withhold arrangements - contractual fee payments.....	0.00	XXX	XXX	0.00	0.00
9. Non-contingent salaries.....	0.00	XXX	XXX	0.00	0.00
10. Aggregate cost arrangements.....	0.00	XXX	XXX	0.00	0.00
11. All other payments.....	0.00	XXX	XXX	0.00	0.00
12. Total other payments.....	(24,643)	XXX	XXX	0.00	(24,643)
13. Total (Line 4 plus Line 12).....	100.00	XXX	XXX	0.00	(24,643)

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

1	2	3	4	5	6
NAIC Code	Name of Intermediary	Capitation Paid	Average Monthly Capitation	Intermediary's Total Adjusted Capital	Intermediary's Authorized Control Level RBC

NONE

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
EXHIBIT 8 - FURNITURE, EQUIPMENT AND SUPPLIES OWNED

	1	2	3	4	5	6
Description	Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
1. Administrative furniture and equipment.....	0	NONE	0	0	0	0
2. Medical furniture, equipment and fixtures.....	0		0	0	0	0
3. Pharmaceuticals and surgical supplies.....	0		0	0	0	0
4. Durable medical equipment.....	0		0	0	0	0
5. Other property and equipment.....	0		0	0	0	0
6. Total.....	0		0	0	0	0

NOTES TO FINANCIAL STATEMENTS

1. Summary of significant accounting policies and going concernA. Accounting practices

The accompanying statutory financial statements of Aetna Better Health Inc. (a Connecticut corporation) (the "Company"), indirectly a wholly-owned subsidiary of Aetna Inc. ("Aetna"), have been prepared in conformity with accounting practices prescribed or permitted by the State of Connecticut Insurance Department ("Connecticut Department") ("Connecticut Accounting Practices"). The Connecticut Department recognizes only statutory accounting practices prescribed or permitted by the State of Connecticut 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 capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Connecticut for the years ending December 31, 2015 and 2014 is as follows:

	State of Domicile	December 31, 2015	December 31, 2014
Net income (derived using Connecticut Accounting Practices)	CT	\$46,623	\$66,083
State of Connecticut Prescribed Practices: None	CT	-	-
State of Connecticut Permitted Practices: None	CT	-	-
Net income (derived using NAIC SAP)		<u>\$46,623</u>	<u>\$66,083</u>
Capital and surplus (derived using Connecticut Accounting Practices)	CT	\$3,024,107	\$2,978,057
State of Connecticut Prescribed Practices: None	CT	-	-
State of Connecticut Permitted Practices: None	CT	-	-
Capital and surplus (derived using NAIC SAP)		<u>\$3,024,107</u>	<u>\$2,978,057</u>

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

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

C. Accounting policies

The Company applies the following significant accounting policies:

(1) Cash, cash equivalents and short-term investments

Cash, cash equivalents and short-term investments, consisting primarily of money market instruments and other debt issues with an original maturity of up to one year, are carried at amortized cost. Short-term investments consist primarily of investments purchased with an original maturity date of greater than three months but less than one year. Cash equivalents consist of highly liquid instruments, which mature within three months from the date of purchase. The carrying amount of cash, cash equivalents and short-term investments approximates fair value.

(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 December 31, 2015 and 2014. Bonds include all investments whose maturity is greater than one year when purchased.

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, an 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.

For loan-backed and structured securities, 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.

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 our expectations and the risk that facts and circumstances factored into our 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.

- (3) The Company did not own any common stock at December 31, 2015 or 2014.
- (4) The Company did not own any preferred stock at December 31, 2015 or 2014.
- (5) The Company did not have any mortgage loans at December 31, 2015 or 2014.
- (6) Securities lending

The Company engages in securities lending by lending certain securities from its investment portfolio to other institutions for short periods of time. Borrowers must post cash collateral in the amount of 102% to 105% of the fair value of a loaned security. The fair value of the loaned securities is monitored on a daily basis, with additional collateral obtained or refunded as the fair value of the loaned securities fluctuates. The collateral is retained and invested by a lending agent according to the Company's guidelines to generate additional investment income for the Company. Pursuant to Statements of Statutory Accounting Principles ("SSAP") No. 103 - *Transfers and Servicing of Financial Assets and Extinguishments of Liabilities* ("SSAP No. 103"), collateral required under the Company's securities lending program is carried on the Company's balance sheet as both a receivable and payable. Also pursuant to SSAP No. 103, if the collateral received from a counterparty is less than 100 percent at the reporting date, the difference between the actual collateral and 100 percent is nonadmitted. Collateral value is measured and compared to the loaned securities in aggregate by counterparty. The Company did not have any loaned securities at December 31, 2015 or 2014.

- (7) The Company did not have any investments in any subsidiaries or affiliated companies at December 31, 2015 or 2014.
- (8) The Company did not have any investments in any joint ventures, partnerships and limited liability companies at December 31, 2015 or 2014.
- (9) The Company did not have any derivatives at December 31, 2015 or 2014.

(10) Aggregate health policy reserves and related expenses

Premium deficiency reserves ("PDR") are recognized when it is probable that the expected future hospital and medical costs, including maintenance costs, will exceed anticipated future premiums and reinsurance recoveries on existing contracts. Where allowed, anticipated investment income is considered in the calculation of any PDR. For purposes of calculating a PDR, contracts are grouped in manner consistent with the method of acquiring, servicing and measuring the profitability of such contracts. The Company had no PDR at December 31, 2015 or 2014.

Unearned premium reserves ("UEP") are recognized for premiums that are recorded by the Company that have not been earned as of the statement date. The Company had no UEP at December 31, 2015 or 2014.

(11) Hospital and medical costs and claims adjustment expenses and related reserves

Hospital and medical costs consist principally of fee-for-service medical claims and capitation costs. Claims unpaid include the Company's estimate of payments to be made on claims reported but not yet paid and for health care services rendered to enrollees but not yet reported to the Company as of the Statutory Statements of Assets and Liabilities, Capital and Surplus date. Such estimates are developed using actuarial principles and assumptions, which consider, among other things, historical and projected claim submission and processing patterns, medical cost trends, historical utilization of health care services, claim inventory levels, changes in membership and product mix, seasonality and other relevant factors. The Company reflects changes in estimates in hospital and medical costs in the Statutory Statements of Revenue and Expenses in the period they are determined. Capitation costs, which are recorded in hospital and medical expenses in the Statutory Statements of Revenue and Expenses, represent contractual monthly fees paid to participating physicians and other medical providers for providing medical care, regardless of the medical services provided to the enrollee.

The Company uses the triangulation method to estimate reserves for claims incurred but not reported. The method of triangulation makes estimates of completion factors that are then applied to the total paid claims (net of coordination of benefits) to date for each incurral month. This provides an estimate of the total projected incurred claims and total amount outstanding or claims incurred but not reported (claims unpaid). For the most current dates of service where there is insufficient paid claim data to rely solely on the triangulation method, the Company examines cost and utilization trends as well as environmental factors, plan changes, provider contracts, changes in membership and/or benefits, and historical seasonal patterns to estimate the reserve required for these months.

Claims adjustment expenses, which include cost containment expenses, represent the costs incurred related to the claim settlement process such as costs to record, process and adjust claims. These expenses are included in the Company's management agreement with an affiliate described in Note 10.

(12) The Company did not modify its capitalization policy from the prior period.

(13) The Company did not have any pharmaceutical rebate receivables at December 31, 2015 or 2014.

(14) Premiums and amounts due and unpaid

Premium revenue for prepaid health care products is recognized as income in the month in which enrollees are entitled to health care services. The Company had no premium in 2015 or 2014.

(15) Investment income due and accrued

Accrued investment income consists primarily of interest. Interest is recognized on an accrual basis and dividends are recorded as earned on the ex-dividend date. Due and accrued income is not recorded on: (a) bonds in default; and (b) bonds delinquent more than 90 days or where collection of interest is improbable. At December 31, 2015 and 2014, the Company did not have any nonadmitted investment income due and accrued.

(16) Covered and uncovered expenses and related liabilities

Covered expenses and related liabilities represent costs for health care expenses for which a member is not responsible in the event of the insolvency of the Company. Uncovered expenses and related liabilities represent costs to the Company for health care services that are the obligation of the Company and for which a member may also be liable in the event of the Company's insolvency.

(17) Federal income taxes

The Company is included in the consolidated federal income tax return of its parent company, Aetna and Aetna's other wholly-owned subsidiaries pursuant to the terms of a tax sharing agreement. In accordance with a written tax sharing agreement with an affiliate, the Company's current federal income tax provisions are generally computed as if the Company were filing a separate federal income tax return; current income tax benefits, including those resulting from net operating losses, are recognized to the

extent realized in the consolidated return. Pursuant to this agreement, the Company has the enforceable right to recoup federal income taxes paid in prior years in the event of future net losses, which it may incur, or to recoup its net losses carried forward as an offset to future net income subject to federal income taxes.

Income taxes are accounted for under the asset and liability method. Deferred income tax assets ("DTAs") and liabilities ("DTLs") represent the expected future tax consequences of temporary differences generated by statutory accounting as defined in SSAP No. 101 - *Income Taxes* ("SSAP No. 101"). DTAs and DTLs are measured using enacted tax rates expected to apply to taxable income in the years in which those temporary differences are expected to be recovered or settled. DTAs and DTLs are computed by means of identifying temporary differences which are measured using a balance sheet approach whereby statutory and tax basis balance sheets are compared. Current income tax recoverables include all current income taxes, including interest, reasonably expected to be recovered in a subsequent accounting period.

Pursuant to SSAP No. 101, gross DTAs are first reduced by a statutory valuation allowance adjustment to an amount that is more likely than not to be realized ("adjusted gross DTAs"). Adjusted gross DTAs are then admitted in an amount equal to the sum of paragraphs a. b. and c. below:

- a. Federal income taxes paid in prior years that can be recovered through loss carrybacks for existing temporary differences that reverse during a timeframe corresponding with Internal Revenue Service ("IRS") tax loss carryback provisions.
- b. The amount of adjusted gross DTAs, after the application of paragraph a. above, expected to be realized within the applicable period and that is no greater than the applicable percentage as determined using the applicable Realization Threshold Limitation Table. The applicable period refers to the number of years in which the DTA will reverse in the Company's tax return and the applicable percentage refers to the percentage of the Company's statutory capital and surplus as required to be shown on the statutory balance sheet adjusted to exclude any net DTAs, electronic data processing equipment and operating system software and any net positive goodwill ("Stat Cap ExDTA").

The Realization Threshold Limitation Tables allow DTAs to be admitted based upon either realization within 3 years and 15% of Stat Cap ExDTA, 1 year and 10% of Stat Cap ExDTA, or no DTA admitted pursuant to this paragraph b. In general, the Realization Threshold Limitation Tables allow the Company to admit more DTAs if total DTAs as reported by the Company are a smaller percentage of statutory capital and surplus.

- c. The amount of gross DTAs, after the application of paragraphs a. and b. above that can be offset against existing gross DTLs. In applying this offset, the Company considers the character (i.e. ordinary versus capital) of the DTAs and DTLs such that offsetting would be permitted in the tax return under existing enacted federal income tax laws and regulations and the reversal patterns of temporary differences.

Changes in DTAs and DTLs are recognized as a separate component of gains and losses in surplus ("Change in net deferred income tax") except to the extent allocated to changes in unrealized gains and losses. Changes in DTAs and DTLs allocated to unrealized gains and losses are netted against the related changes in unrealized gains and losses and are reported as "Change in net unrealized capital gains (losses)", also a separate component of gains and losses in surplus.

D. Going concern

Effective December 31, 2016, the Company will adopt amended accounting guidance related to management's evaluation of whether there is a substantial doubt about the entity's ability to continue as a going concern and the related disclosures and will make disclosures at that time and thereafter pursuant to the guidance.

2. Accounting changes and corrections of errors

The Company did not have any accounting changes or corrections of errors in the years ending December 31, 2015 and 2014.

3. Business combinations and goodwill

The Company was not a part of any business combinations that involved the statutory purchase method, a statutory merger, an assumption reinsurance, or an impairment loss in the years ending December 31, 2015 and 2014.

4. Discontinued operations

The Company ceased operations effective December 31, 2011. The Company's contract with the State of Connecticut, Department of Social Services expired on December 31, 2011 and was not renewed.

5. Investments

- A. The Company did not have any mortgage loans, including Mezzanine Real Estate Loans, at December 31, 2015 or 2014.
- B. The Company did not have any debt restructuring in the years ending December 31, 2015 and 2014.
- C. The Company did not have any reverse mortgages at December 31, 2015 or 2014.

D. Loan-Backed Securities

- (1) Prepayment assumptions for single class and multi-class mortgage backed/asset backed securities were obtained from industry market sources.
- (2) The Company had no OTTI losses during 2015 on loan-backed and structured securities in which the Company had the (1) intent to sell, (2) did not have the intent and ability to retain for a period of time sufficient to recover the amortized cost basis or (3) present value of cash flows expected to be collected is less than the amortized cost basis of the securities in accordance with SSAP No. 43R - *Loan-Backed and Structured Securities*.
- (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 December 31, 2015.
- (4) The Company had no unrealized loss position on loan-backed and structured securities held by the Company at December 31, 2015.

E. Repurchase Agreements and/or Securities Lending Transactions

- (1) The Company did not have any repurchase agreements or loaned securities transactions at December 31, 2015.
- (2) The Company did not pledge any of its assets as collateral, which are classified as securities pledged to creditors as of December 31, 2015.
- (3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or repledge as of December 31, 2015.
- (4) The Company did not have securities lending transactions administered by an affiliated agent which is "one line" reported at December 31, 2015.
- (5) The Company did not have any repurchase agreements, loaned securities or dollar repurchase agreements at December 31, 2015.
- (6) The Company has not accepted collateral that is not permitted by contract or custom to sell or repledge as of December 31, 2015.
- (7) The Company did not have any collateral for transactions that extend beyond one year from the reporting date.

- F. The Company did not have any real estate at December 31, 2015 or 2014.
- G. The Company did not have any low-income housing tax credits at December 31, 2015.

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**

H. Restricted Assets

(1) Restricted assets (including pledged):

Restricted Asset Category	1	2	3	4	5	6
	Total gross restricted from current year	Total gross restricted from prior year	Increase (decrease) (1 minus 2)	Total current year admitted restricted	Percentage gross restricted to total assets	Percentage admitted restricted to total admitted assets
a. Subject to contractual obligation for which liability is not shown	-	-	-	-	-	-
b. Collateral held under security lending agreements	-	-	-	-	-	-
c. Subject to repurchase agreements	-	-	-	-	-	-
d. Subject to reverse repurchase agreements	-	-	-	-	-	-
e. Subject to dollar repurchase agreements	-	-	-	-	-	-
f. Subject to dollar reverse repurchase agreements	-	-	-	-	-	-
g. Placed under option contracts	-	-	-	-	-	-
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	-	-	-	-	-	-
i. FHLB capital stock	-	-	-	-	-	-
j. On deposit with states	\$499,442	\$497,944	\$1,498	\$499,442	16.411%	16.411%
k. On deposit with other regulatory bodies	-	-	-	-	-	-
l. Pledged as collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	-
m. Pledged as collateral not captured in other categories	-	-	-	-	-	-
n. Other restricted assets	-	-	-	-	-	-
o. Total restricted assets	\$499,442	\$497,944	\$1,498	\$499,442	16.411%	16.411%

(2) The Company did not have any assets pledged as collateral not captured in other categories at December 31, 2015.

(3) The Company did not have any other restricted assets at December 31, 2015.

I. The Company did not have any working capital finance investments at December 31, 2015.

J. The Company did not have any offsetting and netting of financial assets or liabilities as of December 31, 2015.

K. The Company did not have any structured notes at December 31, 2015.

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)

6. Joint ventures, partnerships, and limited liability companies

A. The Company did not have any joint ventures, partnerships, or limited liability companies that exceeded 10% of its admitted assets at December 31, 2015 or 2014.

B. The Company does not have any impaired investments in joint ventures, partnerships, or limited liability companies at December 31, 2015 or 2014.

7. Investment income

A. and B.

There was no investment income due and accrued excluded from surplus at December 31, 2015 or 2014.

8. Derivative instruments

The Company did not have any derivative instruments at December 31, 2015 or 2014.

9. Income taxes

A.

1. The components of the net DTAs recognized in the Company's Statutory Statements of Assets, Liabilities, Surplus and Other Funds are as follows:

	December 31, 2015		
	Ordinary	Capital	Total
(a) Gross DTAs	\$46	-	\$46
(b) Statutory valuation allowance adjustment	-	-	-
(c) Adjusted gross DTAs	46	-	46
(d) DTAs nonadmitted	-	-	-
(e) Subtotal net admitted DTAs	46	-	46
(f) DTLs	-	\$(1,497)	(1,497)
(g) Net admitted DTAs/(DTLs)	\$46	\$(1,497)	\$(1,451)

	December 31, 2014		
	Ordinary	Capital	Total
(a) Gross DTAs	\$49	-	\$49
(b) Statutory valuation allowance adjustment	-	-	-
(c) Adjusted gross DTAs	49	-	49
(d) DTAs nonadmitted	-	-	-
(e) Subtotal net admitted DTAs	49	-	49
(f) DTLs	-	\$(927)	(927)
(g) Net admitted DTAs/(DTLs)	\$49	\$(927)	\$(878)

	Change		
	Ordinary	Capital	Total
(a) Gross DTAs	\$(3)	-	\$(3)
(b) Statutory valuation allowance adjustment	-	-	-
(c) Adjusted gross DTAs	(3)	-	(3)
(d) DTAs nonadmitted	-	-	-
(e) Subtotal net admitted DTAs	(3)	-	(3)
(f) DTLs	-	\$(570)	(570)
(g) Net admitted DTAs/(DTLs)	\$(3)	\$(570)	\$(573)

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)

2. The amount of admitted gross DTAs admitted under each component of SSAP No. 101:

	December 31, 2015		
	Ordinary	Capital	Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$46	-	\$46
(b) Adjusted gross DTAs expected to be realized (excluding the amount of DTAs) after application of the threshold limitations (the lesser of 2(b)1 and 2(b)2 below)	-	-	-
1. Adjusted gross DTAs expected to realized following the balance sheet date	-	-	-
2. Adjusted gross DTAs allowed per limitation threshold	XXX	XXX	453,834
(c) Adjusted gross DTAs (excluding the amount of DTAs from 2(a) and 2(b) above) offset by gross DTLs	-	-	-
(d) DTAs admitted as the result of application of SSAP No. 101	\$46	-	\$46

	December 31, 2014		
	Ordinary	Capital	Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$49	-	\$49
(b) Adjusted gross DTAs expected to be realized (excluding the amount of DTAs) after application of the threshold limitations (the lesser of 2(b)1 and 2(b)2 below)	-	-	-
1. Adjusted gross DTAs expected to realized following the balance sheet date	-	-	-
2. Adjusted gross DTAs allowed per limitation threshold	XXX	XXX	446,840
(c) Adjusted gross DTAs (excluding the amount of DTAs from 2(a) and 2(b) above) offset by gross DTLs	-	-	-
(d) DTAs admitted as the result of application of SSAP No. 101	\$49	-	\$49

	Change		
	Ordinary	Capital	Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$(3)	-	\$(3)
(b) Adjusted gross DTAs expected to be realized (excluding the amount of DTAs) after application of the threshold limitations (the lesser of 2(b)1 and 2(b)2 below)	-	-	-
1. Adjusted gross DTAs expected to realized following the balance sheet date	-	-	-
2. Adjusted gross DTAs allowed per limitation threshold	XXX	XXX	6,993
(c) Adjusted gross DTAs (excluding the amount of DTAs from 2(a) and 2(b) above) offset by gross DTLs	-	-	-
(d) DTAs admitted as the result of application of SSAP No. 101	\$(3)	-	\$(3)

- 3.

	2015	2014
(a) Ratio percentage used to determine recovery period and threshold limitation amount	28,708%	26,458%
(b) Amount of adjusted capital and surplus used to determine recovery period threshold limitation in 2(b)2 above	\$3,025,558	\$2,978,935

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)

4. The impact of tax planning strategies is as follows:

	December 31, 2015		
	Ordinary	Capital	Total
(a) Determination of adjusted gross DTAs and net admitted DTAs, by tax character as a percentage			
1. Adjusted gross DTAs amount from Note 9A1(c)	\$46	-	\$46
2. Percentage of adjusted DTAs by tax character attributable to the impact of tax planning strategies	0%	0%	0%
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$46	-	\$46
4. Percentage of net admitted adjusted DTAs by tax character admitted because of the impact of tax planning strategies	0%	0%	0%

	December 31, 2014		
	Ordinary	Capital	Total
(a) Determination of adjusted gross DTAs and net admitted DTAs, by tax character as a percentage			
1. Adjusted gross DTAs amount from Note 9A1(c)	\$49	-	\$49
2. Percentage of adjusted DTAs by tax character attributable to the impact of tax planning strategies	0%	0%	0%
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$49	-	\$49
4. Percentage of net admitted adjusted DTAs by tax character admitted because of the impact of tax planning strategies	0%	0%	0%

	Change		
	Ordinary	Capital	Total
(a) Determination of adjusted gross DTAs and net admitted DTAs, by tax character as a percentage			
1. Adjusted gross DTAs amount from Note 9A1(c)	\$(3)	-	\$(3)
2. Percentage of adjusted DTAs by tax character attributable to the impact of tax planning strategies	0%	0%	0%
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$(3)	-	\$(3)
4. Percentage of net admitted adjusted DTAs by tax character admitted because of the impact of tax planning strategies	0%	0%	0%

- (b) Does the Company's tax-planning strategies include the use of reinsurance? Yes No

B. There are no DTLs that were not recognized at December 31, 2015 or 2014.

C. Current income taxes incurred consist of the following major components:

	December 31,		Change
	2015	2014	
1. Current income tax			
(a) Federal	\$24,222	\$43,657	\$(19,435)
(b) Foreign	-	-	-
(c) Subtotal	24,222	43,657	(19,435)
(d) Federal income tax on net capital gains	-	16,862	(16,862)
(f) Other	-	-	-
(g) Federal and foreign income taxes incurred	\$24,222	\$60,519	\$(36,297)

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**

	December 31,		Change
	2015	2014	
2. DTAs:			
(a) Ordinary			
Claims unpaid	\$46	\$49	\$(3)
Total ordinary DTAs	46	49	(3)
(b) Statutory valuation allowance adjustment	-	-	-
(c) Nonadmitted ordinary DTAs	-	-	-
(d) Admitted ordinary DTAs	46	49	(3)
(e) Capital			
Investments - impairments	-	-	-
Total admitted capital DTAs	-	-	-
(f) Statutory valuation allowance adjustment	-	-	-
(g) Nonadmitted capital DTAs	-	-	-
(h) Admitted capital DTAs	-	-	-
(i) Admitted DTAs	46	49	(3)
3. DTLs:			
(a) Ordinary			
Ordinary DTLs	-	-	-
(b) Capital			
Investments - deferred	1,497	927	570
Capital DTLs	1,497	927	570
(c) Total DTLs	1,497	927	570
4. Net admitted DTAs	\$(1,451)	\$(878)	\$(573)

The change in net deferred income taxes is comprised of the following:

	December 31,		Change
	2015	2014	
Gross DTAs	\$46	\$49	\$(3)
Less: Gross DTLs	(1,497)	(927)	(570)
Net DTAs	\$(1,451)	\$(878)	(573)
Less: Tax effect of unrealized gains (losses)			-
Change in net deferred income tax			\$(573)

The valuation allowance adjustment to gross DTAs was \$0 for both December 31, 2015 and 2014.

- D. The provision for federal income taxes is different from that which would be obtained by applying the statutory federal income tax rate to income before income taxes. The items causing this difference were as follows:

	December 31, 2015	Effective tax rate	December 31, 2014	Effective tax rate
Provision computed at statutory rate	\$24,796	35.0%	\$44,311	35.0%
Change in nonadmitted assets	-	0.0%	77	0.1%
Total	\$24,796	35.0%	\$44,388	35.1%
Federal and foreign income tax expense incurred	\$24,222	34.2%	\$60,519	47.8%
Change in net deferred income taxes	573	0.8%	(16,131)	(12.7)%
Total statutory income taxes	\$24,795	35.0%	\$44,388	35.1%

The transfer pricing adjustment allows taxpayers to apply different methods to price current period intercompany services at arm's length prices as compared to what would be charged to an unrelated entity, which results in a permanent deduction for tax reporting purposes.

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)

E.

1. At December 31, 2015, the Company had no net capital loss or net operating loss carryforwards for tax purposes.
2. The amount of federal income taxes incurred that are available for recoupment in the event of future net losses is \$24,222 and \$60,518 for the years ended December 31, 2015 and 2014, respectively.
3. The Company did not report any deposits as admitted assets under Internal Revenue Code Section 6603 at December 31, 2015 and 2014.

F.

1. At December 31, 2015, the Company's Federal Income Tax Return was consolidated with the following entities:

Aetna Inc. - Parent Company	Cofinity, Inc.
@ Credentials Inc.	Corporate Benefit Strategies, Inc.
Active Health Management Inc.	Coventry Consumer Advantage, Inc.
Adminco, Inc.	Coventry Financial Management Services, Inc.
Administrative Enterprises, Inc.	Coventry Health and Life Insurance Company
AE Fourteen Incorporated	Coventry Health Care National Accounts, Inc.
Aetna ACO Holdings, Inc.	Coventry Health Care National Network, Inc.
Aetna Better Health Inc. (Connecticut)	Coventry Health Care of Delaware, Inc.
Aetna Better Health Inc. (Florida)	Coventry Health Care of Florida, Inc.
Aetna Better Health Inc. (Georgia)	Coventry Health Care of Georgia, Inc.
Aetna Better Health Inc. (Illinois)	Coventry Health Care of Illinois, Inc.
Aetna Better Health Inc. (New Jersey)	Coventry Health Care of Kansas, Inc.
Aetna Better Health Inc. (New York)	Coventry Health Care of Missouri, Inc.
Aetna Better Health Inc. (Ohio)	Coventry Health Care of Nebraska, Inc.
Aetna Better Health Inc. (Pennsylvania)	Coventry Health Care of Pennsylvania, Inc.
Aetna Better Health Inc. (Tennessee)	Coventry Health Care of Texas, Inc.
Aetna Better Health of California Inc.	Coventry Health Care of the Carolinas, Inc.
Aetna Better Health of Iowa Inc.	Coventry Health Care of Virginia, Inc.
Aetna Better Health of Kentucky Insurance Company	Coventry Health Care of West Virginia, Inc.
Aetna Better Health of Michigan Inc.	Coventry Health Care Workers Compensation, Inc.
Aetna Better Health of Missouri LLC	Coventry Health Plan of Florida, Inc.
Aetna Better Health of Texas Inc.	Coventry HealthCare Management Corporation
Aetna Better Health, Inc. (Louisiana)	Coventry Prescription Management Services, Inc.
Aetna Dental Inc. (New Jersey)	Coventry Rehabilitation Services, Inc.
Aetna Dental Inc. (Texas)	Coventry Transplant Network, Inc.
Aetna Dental of California Inc.	Delaware Physicians Care, Incorporated
Aetna Health and Life Insurance Company	Echo Merger Sub, Inc.
Aetna Health Finance, Inc.	First Health Group Corp.
Aetna Health Inc. (Connecticut)	First Health Life and Health Insurance Company
Aetna Health Inc. (Florida)	First Script Network Services, Inc.
Aetna Health Inc. (Georgia)	Florida Health Plan Administrators, LLC
Aetna Health Inc. (Iowa)	FOCUS Healthcare Management, Inc.
Aetna Health Inc. (Louisiana)	Group Dental Service of Maryland, Inc.
Aetna Health Inc. (Maine)	Group Dental Service, Inc.
Aetna Health Inc. (Michigan)	Health and Human Resource Center, Inc.
Aetna Health Inc. (New Jersey)	Health Data & Management Solutions, Inc.
Aetna Health Inc. (New York)	Health Re, Incorporated
Aetna Health Inc. (Pennsylvania)	HealthAmerica Pennsylvania, Inc.
Aetna Health Inc. (Texas)	HealthAssurance Financial Services, Inc.
Aetna Health Insurance Company	HealthAssurance Pennsylvania, Inc.
Aetna Health Insurance Company of New York	Managed Care Coordinators, Inc.
Aetna Health of California Inc.	Medicity Inc.
Aetna Health of Utah Inc.	Mental Health Associates, Inc.
Aetna HealthAssurance Pennsylvania Inc.	Mental Health Network of New York IPA, Inc.
Aetna Insurance Company of Connecticut	Meritain Health, Inc.
Aetna Integrated Informatics, Inc.	MetraComp, Inc.
Aetna International Inc.	MHNet Life and Health Insurance Co.
Aetna Ireland Inc.	MHNet of Florida, Inc.
Aetna Life & Casualty (Bermuda) Ltd.	Niagara Re, Inc.
Aetna Life Assignment Company	PayFlex Holdings, Inc.
Aetna Life Insurance Company	PayFlex Systems USA, Inc.
Aetna Risk Assurance Company of Connecticut, Inc.	Performax, Inc.
Aetna Risk Indemnity Company Limited	Precision Benefit Services, Inc.
Aetna Student Health Agency Inc.	Prime Net, Inc.
AHP Holdings, Inc.	Prodigy Health Group, Inc.
Allviant Corporation	Professional Risk Management, Inc.
American Health Holding, Inc.	Resources for Living, LLC

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**

AUSHC Holdings, Inc.
Broadspire National Services, Inc.
bSwift, LLC
Cambridge Life Insurance Company
Carefree Insurance Services, Inc.
Chickering Claims Administrators, Inc.
Claims Administration Corp.

Schaller Anderson Medical Administrators,
Incorporated
Strategic Resource Company
The Vasquez Group Inc.
U.S. Health Care Properties, Inc.
Work and Family Benefits, Inc.

2. As explained in Note 1, the Company participates in a tax sharing agreement with its parent and affiliates.
- G. The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

10. Information concerning Parent, subsidiaries, affiliates, and other related parties

A. B. and C.

The Company did not pay any dividends in 2015 or 2014. The Company did not receive any capital contributions in 2015 or 2014.

- D. Amounts due to and due from affiliates shown in the accompanying Statutory Statements of Assets, Liabilities, Capital and Surplus include the Company's net receipts and disbursements processed by affiliates and transactions related to its administrative services agreement with Aetna Medicaid Administrators LLC (formerly Schaller Anderson, LLC) ("AMA"), indirectly a wholly-owned subsidiary of Aetna.

At December 31, 2015, the Company had no amounts due to or due from affiliates. At December 31, 2014, the Company reported \$(542,234) as amounts due to AMA related to this agreement. At December 31, 2014, the Company had no amounts due from affiliates.

The terms of settlement require that these amounts be settled within 45 days after the end of the calendar quarter.

- E. At December 31, 2015, the Company did not have any guarantees or undertakings with its affiliates or parent company.
- F. As of and for the years ending December 31, 2015 and 2014, the Company had the following significant transactions with affiliates:

The Company and AMA are parties to an administrative services agreement, under which AMA provides certain administrative services, including accounting and processing of premiums and claims. Under this agreement, the Company remits 9% of its earned premium revenue, as applicable, to AMA as a fee. The Company did not incur fees in 2015 or 2014. This agreement also provides for interest on all intercompany balances. There was no interest earned (incurred) on amounts due from/(to) affiliates in 2015 and 2014.

The Company has an insolvency agreement with Aetna Life Insurance Company ("ALIC"), a wholly-owned subsidiary of Aetna. This agreement provides that in the event that the Company ceases operations or becomes insolvent, ALIC will continue to pay benefits for any members confined as inpatients on the date of insolvency until their discharge or expiration of benefits pursuant to Connecticut General Statute 38a-193(d). This agreement also provides that ALIC will continue benefits for any member until the end of the contract period for which premium has been paid, but for no longer than thirty-one days. ALIC will also make available to members, for a period of thirty-one days, replacement insurance policies.

The Company has coverage for certain litigation exposures (\$10,000,000 per claim and in the aggregate including defense costs) through an affiliated captive insurance company.

As explained in Note 1, the Company participates in a tax sharing agreement with Aetna and Aetna's other subsidiaries. All federal income tax receivables/payables were due from/due to Aetna.

- G. All outstanding shares of the Company are owned by Aetna Health Holdings, LLC, whose ultimate parent is Aetna.
- H. At December 31, 2015, the Company did not hold any investments in any affiliate and did not own shares of any upstream intermediate of Aetna.
- I. At December 31, 2015, the Company did not hold any investments in any subsidiary, controlled or affiliated ("SCA") entity.
- J. At December 31, 2015, the Company did not hold any investments in any impaired SCA entity.
- K. At December 31, 2015, the Company did not hold any investments in any foreign insurance subsidiaries.
- L. At December 31, 2015, the Company did not hold any investments in a downstream noninsurance holding company.

M and N.

At December 31, 2015, the Company did not have any SCA investments.

11. Debt

- A. The Company did not have any items related to debt, including capital notes at December 31, 2015.
- B. The Company did not have any Federal Home Loan Bank agreements at December 31, 2015.

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

The Company did not have a retirement plan, deferred compensation plan, or other postretirement benefit plan at December 31, 2015 or 2014.

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

- (1) The Company had 20,000 shares of common stock authorized with a par value of \$.01, with 1,000 shares issued and outstanding at December 31, 2015 and 2014.
- (2) The Company did not have any preferred stock authorized or outstanding at December 31, 2015 or 2014.
- (3) Dividend restrictions

Pursuant to State of Connecticut statute, the Company may not make any extraordinary dividend or any other extraordinary distribution until the Connecticut Department has approved such payment or until thirty days after the Connecticut Department has received notice from the Company of the declaration thereof within which period it has not disapproved such payment, whichever is sooner. An extraordinary dividend or distribution is any dividend or distribution of cash or other property, whose fair market value together with that of other dividends or distributions made within the preceding twelve months, exceeds the greater of (1) ten percent of the Company's surplus with respect to policyholders as of the thirty-first of December last preceding, or (2) the Company's net income, not including realized capital gains, for the twelve month period ending the thirty-first day of December last preceding. Ordinary dividends are ultimately limited to earned surplus.

- (4) The Company did not pay any dividends in 2015 or 2014.
- (5) At December 31, 2015, there was approximately \$0.7 million of the Company's profits that may be paid as ordinary dividends to its shareholder without prior approval from the Connecticut Department.
- (6) There were no restrictions placed on the Company's surplus, including for whom the surplus was being held at December 31, 2015 or 2014, except as noted in Note 21.
- (7) Not applicable to the Company.
- (8) The Company did not hold any stock for any special purposes at December 31, 2015 or 2014.
- (9) There were no changes in the balances of any special surplus funds from the prior period.
- (10) At December 31, 2015 and 2014, there was no portion of unassigned funds (surplus) that was represented or reduced by unrealized gains and losses.
- (11) The Company has not issued any surplus notes or debentures or similar obligations at December 31, 2015 or 2014.
- (12) The Company did not participate in any quasi-reorganizations during the statement year.
- (13) The Company did not participate in any quasi-reorganizations in the past 10 years.

14. Contingencies

- A. The Company did not have any contingent commitments at December 31, 2015 or 2014.
- B. The Company did not have any contingent assessments at December 31, 2015 or 2014.
- C. The Company did not have any gain contingencies at December 31, 2015 or 2014.
- D. The Company did not have any claims related extra contractual obligation and bad faith losses stemming from lawsuits at December 31, 2015 or 2014.
- E. The Company did not have any joint and several liability arrangements at December 31, 2015 or 2014.

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)

- F. Various liabilities arise in the normal course of the Company's business and have been recorded. In the opinion of management, any ultimate contingent losses will not have a material adverse effect on the Company's future results of operations and financial position. The Company, to the best of its knowledge, has no assets that it considers impaired that are not already recorded in the Company's books.

15. Leases

The Company did not have any material lease obligations at December 31, 2015 or 2014.

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

The Company did not have any financial instruments with off-balance sheet risk or financial instruments with concentrations of credit risk at December 31, 2015 or 2014.

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

A. Transfers of receivables reported as sales

- (1) The Company did not have any transfers of receivables as sales for the years ending December 31, 2015 and 2014.

B. Transfer and servicing of financial assets

- (1) The Company's policy for requiring collateral or other security for security lending transactions as required in SSAP No. 103 is discussed in Note 1. The Company did not have any loaned securities at December 31, 2015 or 2014.

(2) and (3)

The Company did not have any servicing assets or liabilities at December 31, 2015 or 2014.

- (4) The Company did not have any securitized financial assets at December 31, 2015 or 2014.

- (5) The Company did not have any transfers of financial assets at December 31, 2015 or 2014.

- (6) The Company did not have any transfers of receivables with recourse at December 31, 2015 or 2014.

- (7) The Company did not have any repurchase or reverse repurchase agreements at December 31, 2015 or 2014.

C. Wash sales

- (1) The Company did not have any wash sales for the years ending December 31, 2015 or 2014.

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

- A. The Company did not serve as an Administrative Services Only for uninsured accident and health plans or the uninsured portion of partially insured plans for the period ended December 31, 2015.

- B. The Company did not serve as an Administrative Services Contract plan administrator for uninsured accident and health plans or the uninsured portion of partially insured plans for the period ended December 31, 2015.

- C. The Company did not have any Medicare or other similarly structured cost based reimbursement contracts for the period ended December 31, 2015.

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

The Company did not have any material direct premiums written through/produced by managing general agents or third party administrators for the years ended December 31, 2015 and 2014.

20. Fair value measurements

A. and B.

The Company had no material assets or liabilities measured and reported at fair value at December 31, 2015 or 2014.

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)

C. Certain of the Company's financial instruments are measured at fair value in our balance sheets. The fair values of these instruments are based on valuations that include inputs that can be classified within one of three levels of a hierarchy established by U.S. generally accepted accounting principles. The following are the levels of the hierarchy and a brief description of the type of valuation information ("inputs") that qualifies a financial asset or liability for each level:

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

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

The carrying values and estimated fair values of the Company's financial instruments at December 31, 2015 and 2014 were as follows:

December 31, 2015

(in thousands)	Aggregate fair value	Admitted assets	Level 1	Level 2	Level 3	Not practicable (carrying value)
Bonds, short-term investments and cash equivalents	\$2,701,078	\$2,659,890	\$499,649	\$2,201,429	-	-
Total	\$2,701,078	\$2,659,890	\$499,649	\$2,201,429	-	-

December 31, 2014

(in thousands)	Aggregate fair value	Admitted assets	Level 1	Level 2	Level 3	Not practicable (carrying value)
Bonds, short-term investments and cash equivalents	\$2,674,931	\$2,612,161	\$498,946	\$2,175,985	-	-
Total	\$2,674,931	\$2,612,161	\$498,946	\$2,175,985	-	-

The valuation methods and assumptions used by the Company in estimating the fair value of debt securities are discussed in Note 1.

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 2015 or 2014.

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.

21. Other items

A. Extraordinary items

The Company did not have any extraordinary items for the years ended December 31, 2015 and 2014.

B. Troubled debt restructuring: debtors

The Company did not have any troubled debt restructuring in the years ended December 31, 2015 and 2014.

C. Other disclosures and unusual items

(1) Minimum capital and surplus

Pursuant to the laws of Connecticut, the Company is required to maintain a capital and surplus at an amount that is equal to the greater of \$3,000,000, 2% of prior year statutory premium revenue on the first \$150,000,000 plus 1% on premium revenue in excess of \$150,000,000 or two months of its cost of uncovered expenditures. At December 31, 2015 and 2014, the Company's capital and surplus exceeded all such requirements.

The NAIC and the State of Connecticut adopted risk-based capital ("RBC") standards for health organizations, including HMOs, that are designed to identify weakly capitalized companies by comparing each company's adjusted capital and surplus to its required capital and surplus (the "RBC Ratio"). The RBC Ratio is designed to reflect the risk profile of the company. Within certain ratio ranges, regulators have increasing authority to take action as the RBC Ratio decreases. There are four levels of regulatory action, ranging from requiring insurers to submit a comprehensive plan to the state insurance commissioner to requiring the state insurance commissioner to place the insurer under regulatory control. At December 31, 2015 and 2014, the Company had capital and surplus that exceeded the highest threshold specified by the RBC rules.

(2) Contract with the State of Connecticut, Department of Social Services

The contract between the Company and the State of Connecticut, Department of Social Services was effective July 1, 2008 and terminated December 31, 2011. The Company insured Medicaid and the Children's Health Insurance Program ("CHIP") membership through its contract with the State of Connecticut Department of Social Services. This contract expired on December 31, 2011 and was not renewed.

(3) Health Care Reform

The Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010 (collectively, "Health Care Reform" or "ACA"), enacted in March 2010, has changed and will continue to make broad-based changes to the U.S. health care system. The Company expects Health Care Reform and changes to Health Care Reform to continue to significantly impact the Company's business operations and financial results, including the Company's pricing, medical benefit ratios and the geographies in which the Company's products are available. Health Care Reform presents the Company with business opportunities, but also with financial and regulatory challenges. Most of the key components of Health Care Reform were phased in during or prior to 2014, including health insurance exchanges ("Public Exchanges"), required minimum medical loss ratios ("MLRs") in commercial and Medicare products, the individual coverage mandate, guaranteed issue, rating limits in individual and small group products, significant new industry-wide fees, assessments and taxes, enhanced premium rate review and disclosure processes, reduced Medicare Advantage payment rates to insurers, and linking Medicare Advantage payments to a plan's Centers for Medicare & Medicaid Services ("CMS") quality performance ratings or "star ratings." The effects of these changes are reflected in the Company's financial results. Certain components of Health Care Reform will continue to be phased in until 2020.

The Company is dedicating and will continue to be required to dedicate significant resources and incur significant expenses during 2016 to implement and comply with Health Care Reform and changes in Health Care Reform as well as state level health care reform. While most of the significant aspects of Health Care Reform became effective during or prior to 2014, significant parts of Health Care Reform, including aspects of Public Exchanges, nondiscrimination requirements, reinsurance, risk corridor and risk adjustment, continue to evolve through the promulgation of regulations and guidance at the federal level. It is likely that further changes will be made to Health Care Reform at the federal and/or state level as issues arise and its practical effects become clearer. Growing state and federal budgetary pressures make it more likely that any changes will be adverse to us. As a result, many of the specific aspects and impacts of Health Care Reform will not be known for several years, and given the inherent difficulty of foreseeing how individuals and businesses will respond to the choices afforded them by Health Care Reform, the Company cannot predict the full effect Health Care Reform will have on the Company or the impact of future changes to Health Care Reform. It is reasonably possible that Health Care Reform or changes to Health Care Reform, in the aggregate, could have a significant adverse effect on the Company's business operations and financial results.

Ongoing legislative and regulatory changes to Health Care Reform other pending efforts in the U.S. Congress to amend or restrict funding for various aspects of Health Care Reform (including risk corridors), the 2016 presidential election, pending litigation challenging aspects of the law and federal budget negotiations continue to create uncertainty about the ultimate impact of Health Care Reform. Examples of these legislative and regulatory changes include: the December 2015 suspension of the health insurer fee for 2017 and two year delay of the "Cadillac" tax on high-cost employer-sponsored health coverage; the October 2015 Protecting Affordable Coverage for Employees Act, which leaves

groups with 51 to 100 employees within the large group category for each state unless the state exercises its option to include these groups within the small group category; and the October 2015 HHS announcement that Health Care Reform risk corridor receivables for the 2014 program year would only be funded at 12.6%. The pending litigation includes the House of Representatives' challenge to HHS's ability to make payments under ACA's Cost Sharing Subsidiary program without an explicit appropriation.

As described above, the availability of funding for the ACA's temporary risk corridor program is an example of this uncertainty. In May 2014, CMS published a final rule on Public Exchanges. The final rule provides that payments to health plans under the ACA's risk corridor program will no longer be limited to the aggregate amount of the risk corridor collections received by HHS over the duration of the risk corridor program. However, it is possible that payments to health plans under the risk corridor program will require additional appropriation legislation to be passed by the U.S. Congress. In each of December 2014 and December 2015, legislation was enacted that prohibits HHS's use of certain funds to pay HHS's potential obligation under the ACA's risk corridor program. In October 2015, HHS announced that 2014 Health Care Reform risk corridor receivables would be funded at 12.6% to the extent HHS fully collects risk corridor payables. As a result, the Company continues to believe that receipt of any risk corridor payment from HHS for the 2015 program year and receipt of such payments in excess of the 12.6% prorated amount for the 2014 program year are uncertain. At December 31, 2015, the Company had no receivable for the remaining 2014 program year prorated amount that had not been collected from HHS and had no receivable for the 2015 program year. In addition, these limited risk corridor payments may create instability in the marketplace for individual commercial products in 2016 and going forward by, among other things, causing health plans to change or stop offering their Public Exchange products. 2016 is the last program year for the ACA's risk corridor program.

The federal and state governments also continue to enact and seriously consider many other broad-based legislative and regulatory proposals that have had a material impact on or could materially impact various aspects of the health care and related benefits system. The Company cannot predict whether pending or future federal or state legislation or court proceedings, including future U.S. Congressional appropriations, will change various aspects of the health care and related benefits system or Health Care Reform or the impact those changes will have on the Company's business operations or financial results, but the effects could be materially adverse.

In addition, Health Care Reform ties a portion of Medicare Advantage plans' reimbursement to the achievement of favorable CMS quality performance measures ("star ratings"). Since 2015, only Medicare Advantage plans with an overall star rating of four or more stars (out of five stars) are eligible for a quality bonus in their basic premium rates. As a result, the Company's Medicare Advantage plans' operating results in 2016 and going forward will be significantly affected by their star ratings.

- D. The Company did not have any business interruption insurance recoveries for the years ending December 31, 2015 or 2014.
- E. The Company did not have any transferable and non-transferable state tax credits for the years ending December 31, 2015 or 2014.
- F. The Company did not have any subprime mortgage related risk exposures at December 31, 2015 or 2014.
- G. The Company did not have any retained assets at December 31, 2015 or 2014.
- H. The Company did not have any joint and several liability arrangements at December 31, 2015 or 2014.

22. Events subsequent

A. Type I - Recognized subsequent events

Subsequent events have been considered through February 25, 2016 for the statutory statement issued on March 1, 2016.

The Company had no known reportable recognized subsequent events.

B. Type II - Nonrecognized subsequent events

Subsequent events have been considered through February 25, 2016 for the statutory statement issued on March 1, 2016.

The Company had no known reportable nonrecognized subsequent events.

23. Reinsurance

The Company did not have any reinsurance recoverables in dispute, reinsurance assumed, uncollectible reinsurance, commutation of ceded reinsurance, or retroactive reinsurance at December 31, 2015 or 2014.

24. Retrospectively rated contracts and contracts subject to redetermination

The Company did not have any retrospectively rated contracts or contracts subject to redetermination in 2015 or 2014.

25. Change in incurred claims and claims adjustment expense

The following table shows the components of the change in claims unpaid, unpaid claims adjustment expense and aggregate health claim reserves for the years ending December 31, 2015 and 2014.

(in thousands)	2015	2014
Balance, January 1	\$16	\$9
Health care receivable	-	-
Balance, January 1, net of health care receivable	16	9
Incurred related to:		
Current year	-	-
Prior years	(25)	(81)
Total incurred	(25)	(81)
Paid related to:		
Current year	-	-
Prior years	(25)	(88)
Total paid	(25)	(88)
Balance, December 31, net of health care receivable	16	16
Health care receivable	-	-
Balance, December 31	\$16	\$16

In 2015, reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years remained unchanged from 2014. In 2014, reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years increased by \$7 thousand from \$9 thousand in 2013 to \$16 thousand in 2014. Historical health care cost trend rates are not necessarily representative of current trends. The Company considers historical trend rates together with knowledge of recent events that may impact current trends when developing estimates of current trend rates. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

Net coordination of benefits are implicit in the claims incurred but not reported calculation and could not be specifically identified.

26. Intercompany pooling arrangements

The Company did not have any intercompany pooling arrangements at December 31, 2015 or 2014.

27. Structured settlements

Not applicable to health entities.

28. Health care receivables

A. Pharmaceutical rebate receivables

The Company did not have any pharmaceutical rebate receivables at December 31, 2015 or 2014.

B. Risk sharing receivables

The Company did not have any admitted risk sharing receivables at December 31, 2015 or 2014.

29. Participating policies

The Company did not have any participating policies at December 31, 2015 or 2014.

30. Premium deficiency reserves

December 31, 2015

1. Liability carried for premium deficiency reserves	\$0
2. Date of the most recent evaluation of this liability	12/31/2015
3. Was anticipated investment income utilized in the calculation?	Yes

31. Anticipated salvage and subrogation

See discussion of hospital and medical costs and claims adjustment expenses and related reserves in Note 1.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1 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, 1A and 2. Yes [X] No []
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [X] No [] N/A []
- 1.3 State regulating? Connecticut
- 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 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2015
- 3.2 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. 12/31/2010
- 3.3 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). 04/05/2012
- 3.4 By what department or departments? State of Connecticut Insurance Department
- 3.5 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]
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] N/A [X]
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
- 4.11 sales of new business? Yes [] No [X]
- 4.12 renewals? Yes [] No [X]
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
- 4.21 sales of new business? Yes [] No [X]
- 4.22 renewals? Yes [] No [X]
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 5.2 If yes, provide name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.
- | 1
Name of Entity | 2
NAIC Company Code | 3
State of Domicile |
|---------------------|------------------------|------------------------|
| N/A | 0 | |
- 6.1 Has the 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]
- 6.2 If yes, give full information: N/A
- 7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]
- 7.2 If yes,
- 7.21 State the percentage of foreign control 0.000%
- 7.22 State the nationality(ies) of the foreign person(s) or entity(ies); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(ies) (e.g., individual, corporation, government, manager or attorney-in-fact).
- | 1
Nationality | 2
Type of Entity |
|------------------|---------------------|
| N/A | |
- 8.1 Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board? Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company. N/A
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]
- 8.4 If the response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial 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 |
|---------------------|-----------------------------|----------|----------|-----------|----------|
| N/A | | | | | |
9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit? N/A: The Company has received an exemption from filing the audited financial statements.
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [] No [X]
- 10.2 If the response to 10.1 is yes, provide information related to this exemption: N/A
- 10.3 Has the insurer been granted any exemptions related to other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]
- 10.4 If the response to 10.3 is yes, provide information related to this exemption: N/A
- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [] N/A []
- 10.6 If the response to 10.5 is no or n/a, please explain: N/A

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
William R. Jones, FSA, MAAA; 151 Farmington Avenue, RE2R; Hartford, CT 06156
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]
- 12.11 Name of real estate holding company N/A
- 12.12 Number of parcels involved 0
- 12.13 Total book/adjusted carrying value \$ 0
- 12.2 If yes, provide explanation
N/A
13. **FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**
- 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
N/A
- 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No []
- 13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []
- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A [X]
- 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- (c) Compliance with applicable governmental laws, rules and regulations;
- (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- (e) Accountability for adherence to the code.
- 14.11 If the response to 14.1 is no, please explain:
N/A
- 14.2 Has the code of ethics for senior managers been amended? Yes [X] No []
- 14.21 If the response to 14.2 is yes, provide information related to amendment(s).
On September 25, 2015, the Board approved changes to the Code that included: (1) Increased focus and clarity regarding expectations of Aetna's vendors, including vendors to our Medicare business; (2) Increased clarity on the resources available to Aetna's vendors, including vendors to our Medicare business, to report possible compliance violations or business conduct or integrity concerns; (3) Increased clarity on the responsibility to report to, or respond to an inquiry from, a governmental authority about suspected violations of law; (4) Updated guidance on protecting Aetna's and our customers' information; (5) Updated information on Aetna's Medicare Compliance Program; and (6) Numerous non-substantive clarifying and conforming changes and updates to the factual information, such as the level of giving by the Aetna Foundation since 1980.
- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
- 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).
N/A
- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [X]
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount
0	N/A		0

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinator committee thereof? Yes [X] No []
17. Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors and all subordinator committees thereof? Yes [X] No []
18. Has the reporting entity an established procedure for disclosure to its Board of Directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? Yes [X] No []

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.11 To directors or other officers \$ 0
- 20.12 To stockholders not officers \$ 0
- 20.13 Trustees, supreme or grand (Fraternal only) \$ 0
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.21 To directors or other officers \$ 0
- 20.22 To stockholders not officers \$ 0
- 20.23 Trustees, supreme or grand (Fraternal only) \$ 0
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reporting in the statement? Yes [] No [X]
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- 21.21 Rented from others \$ 0
- 21.22 Borrowed from others \$ 0
- 21.23 Leased from others \$ 0
- 21.24 Other \$ 0
- 22.1 Does this statement include payments for assessments as described in the *Annual Statement Instructions* other than guaranty fund or guaranty association assessments? Yes [] No [X]
- 22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment \$ 0
- 22.22 Amount paid as expenses \$ 0
- 22.23 Other amounts paid \$ 0
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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

INVESTMENT

24.01 Were all of the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 24.03)? Yes No

24.02 If no, give full and complete information, relating thereto:
N/A

24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off balance sheet (an alternative is to reference Note 17 where this information is also provided).
See Notes to Financial Statement - Note 17, Sale, transfer and servicing of financial assets and extinguishments of liabilities.

24.04 Does the company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? Yes No N/A

24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. \$ 0

24.06 If answer to 24.04 is no, report amount of collateral for other programs \$ 0

24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes No N/A

24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes No N/A

24.09 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? Yes No N/A

24.10 For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:

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

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

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

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is current in force? (Exclude securities subject to Interrogatory 21.1 and 24.03.) Yes No

25.2 If yes, state the amount thereof at December of the current year:

25.21 Subject to repurchase agreements \$ 0

25.22 Subject to reverse repurchase agreements \$ 0

25.23 Subject to dollar repurchase agreements \$ 0

25.24 Subject to reverse dollar repurchase agreements \$ 0

25.25 Placed under option agreements \$ 0

25.26 Letter stock or securities restricted as sale - excluding FHLB Capital Stock \$ 0

25.27 FHLB Capital Stock \$ 0

25.28 On deposit with states \$ 499,442

25.29 On deposit with other regulatory bodies \$ 0

25.30 Pledged as collateral - excluding collateral pledged to an FHLB \$ 0

25.31 Pledged as collateral to FHLB - including assets backing funding agreements \$ 0

25.32 Other \$ 0

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
N/A		\$ <u>0</u>

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes No

26.2 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.

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes No

27.2 If yes, state the amount thereof at December of the current year: \$ 0

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

28.01 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

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

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

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? Yes No

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

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

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

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D-Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])? Yes [] No [X]

29.2 If yes, complete the following schedule:

1 CUSIP	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
	N/A	0
29.2999 TOTAL		0

29.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holdings	4 Date of Valuation
N/A		0	

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds	2,659,890	2,701,078	41,188
30.2 Preferred Stocks	0	0	0
30.3 Totals	2,659,890	2,701,078	41,188

30.4 Describe the sources or methods utilized in determining fair values:

Fair value of long term bonds and preferred stocks are determined based on quoted market prices when available, fair values using valuation methodologies based on available and observable market information or by using matrix pricing. If quoted market prices are not available, we determine fair value using broker quoted or an internal analysis of each investment's financial performance and cash flow projections. Short Term investments are carried at amortized cost which approximated fair value. The carrying value of cash equivalents approximated fair value.

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [X] No []

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [X] No []

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliance pricing source for purposes of disclosure of fair value for Schedule D:
N/A

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

32.2 If no, list exceptions:
N/A

OTHER

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$ 0

33.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
N/A	\$ 0

34.1 Amount of payments for legal expenses, if any? \$ 0

34.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
N/A	\$ 0

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$ 0

35.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
N/A	\$ 0

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**

GENERAL INTERROGATORIES

PART 2 – HEALTH INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?			Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
1.2	If yes, indicate premium earned on U.S. business only.	\$			0
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?	\$			0
1.31	Reason for excluding:				
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.	\$			0
1.5	Indicate total incurred claims on all Medicare Supplement insurance.	\$			0
1.6	Individual policies:				
	Most current three years:				
1.61	Total premium earned	\$			0
1.62	Total incurred claims	\$			0
1.63	Number of covered lives	\$			0
	All years prior to most current three years:				
1.64	Total premium earned	\$			0
1.65	Total incurred claims	\$			0
1.66	Number of covered lives	\$			0
1.7	Group policies:				
	Most current three years:				
1.71	Total premium earned	\$			0
1.72	Total incurred claims	\$			0
1.73	Number of covered lives	\$			0
	All years prior to most current three years:				
1.74	Total premium earned	\$			0
1.75	Total incurred claims	\$			0
1.76	Number of covered lives	\$			0
2.	Health Test:				
			1	2	
			Current Year	Prior Year	
2.1	Premium Numerator	\$	0	\$	0
2.2	Premium Denominator	\$	0	\$	0
2.3	Premium Ratio (2.1/2.2)	\$	0.000	\$	0.000
2.4	Reserve Numerator	\$	15,942	\$	15,942
2.5	Reserve Denominator	\$	15,942	\$	15,942
2.6	Reserve Ratio (2.4/2.5)	\$	100.000	\$	100.000
3.1	Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, as and if the earnings of the reporting entity permits?				Yes <input type="checkbox"/>
3.2	If yes, give particulars:				No <input checked="" type="checkbox"/>
	<u>N/A</u>				
4.1	Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency?				Yes <input type="checkbox"/>
4.2	If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered?				No <input checked="" type="checkbox"/>
5.1	Does the reporting entity have stop-loss reinsurance?				Yes <input type="checkbox"/>
5.2	If no, explain:				No <input checked="" type="checkbox"/>
	<u>The Company does not have stop loss reinsurance.</u>				
5.3	Maximum retained risk (see instructions)				
5.31	Comprehensive Medical	\$			0
5.32	Medical Only	\$			0
5.33	Medicare Supplement	\$			0
5.34	Dental and Vision	\$			0
5.35	Other Limited Benefit Plan	\$			0
5.36	Other	\$			0
6.	Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:				
	<u>The Company does not currently sell to or insure members in Connecticut.</u>				
7.1	Does the reporting entity set up its claim liability for provider services on a service date basis?				Yes <input checked="" type="checkbox"/>
					No <input type="checkbox"/>

GENERAL INTERROGATORIES

PART 2 – HEALTH INTERROGATORIES

7.2 If no, give details

N/A

8. Provide the following information regarding participating providers:

8.1 Number of providers at start of reporting year

0

8.2 Number of providers at end of reporting year

0

9.1 Does the reporting entity have business subject to premium rate guarantees?

Yes [] No [X]

9.2 If yes, direct premium earned:

9.21 Business with rate guarantees with rate guarantees between 15-36 months

\$ 0

9.22 Business with rate guarantees over 36 months

\$ 0

10.1 Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts?

Yes [] No [X]

10.2 If yes:

10.21 Maximum amount payable bonuses

\$ 0

10.22 Amount actually paid for year bonuses

\$ 0

10.23 Maximum amount payable withholds

\$ 0

10.24 Amount actually paid for year withholds

\$ 0

11.1 Is the reporting entity organized as:

11.12 A Medical Group/Staff Model,

Yes [] No [X]

11.13 An Individual Practice Association (IPA), or,

Yes [] No [X]

11.14 A Mixed Model (combination of above)?

Yes [] No [X]

11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements?

Yes [X] No []

11.3 If yes, show the name of the state requiring such minimum capital and surplus.

Connecticut

11.4 If yes, show the amount required.

\$ 1,000,000

11.5 Is this amount included as part of a contingency reserve in stockholder's equity?

Yes [] No [X]

11.6 If the amount is calculated, show the calculation

See Notes to Financial Statement - Note 21, Other Items, C., Other Disclosures.

12. List service areas in which reporting entity is licensed to operate:

1
Name of Service Area
Fairfield, Hartford, Litchfield, Middlesex,
New Haven, New London, Tolland, Windham

13.1 Do you act as a custodian for health savings accounts?

Yes [] No [X]

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

\$ 0

13.3 Do you act as an administrator for health savings accounts?

Yes [] No [X]

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

\$ 0

14.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers?

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

14.2 If the answer to 14.1 is yes, please provide the following:

1 Company Name	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other
	0		\$ 0	\$ 0	\$ 0	\$ 0

15. Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded).

15.1 Direct Premium Written

\$ 0

15.2 Total Incurred Claims

\$ 0

15.3 Number of Covered Lives

0

*Ordinary Life Insurance Includes
Term (whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary guarantee)
Universal Life (with or without secondary guarantee)
Variable Universal Life (with or without secondary guarantee)

**Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
FIVE-YEAR HISTORICAL DATA**

	1 2015	2 2014	3 2013	4 2012	5 2011
Balance Sheet Items (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28).....	3,043,265	3,538,349	3,048,138	19,744,351	65,005,396
2. Total liabilities (Page 3, Line 24).....	19,158	560,292	152,516	2,223,454	30,317,188
3. Statutory minimum capital and surplus requirement.....	1,000,000	1,000,000	1,000,000	1,000,000	17,540,828
4. Total capital and surplus (Page 3, Line 33).....	3,024,107	2,978,057	2,895,622	17,520,897	34,688,208
Income Statement Items (Page 4)					
5. Total revenues (Line 8).....	.0	.0	.0	(673,035)	244,066,368
6. Total medical and hospital expenses (Line 18).....	(24,643)	(81,254)	(758,664)	(4,036,540)	213,187,895
7. Claims adjustment expenses (Line 20).....	.0	.0	.0	.0	5,530,919
8. Total administrative expenses (Line 21).....	1,527	31	(6,476)	(555,082)	16,567,782
9. Net underwriting gain (loss) (Line 24).....	23,116	81,223	765,140	3,918,587	8,779,772
10. Net investment gain (loss) (Line 27).....	47,729	28,517	310,139	522,873	592,932
11. Total other income (Lines 28 plus 29).....	.0	.0	.0	.0	.0
12. Net income or (loss) (Line 32).....	46,623	66,083	766,480	4,019,564	7,278,143
Cash Flow (Page 6)					
13. Net cash from operations (Line 11).....	57,332	(68,799)	4,232,394	10,017,572	2,272,889
Risk-Based Capital Analysis					
14. Total adjusted capital.....	3,024,107	2,978,057	2,895,622	17,520,897	34,688,208
15. Authorized control level risk-based capital.....	10,539	11,259	10,530	25,286	8,770,414
Enrollment (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7).....	.0	.0	.0	.0	104,227
17. Total member months (Column 6, Line 7).....	.0	.0	.0	.0	1,267,341
Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3, and 5) x 100 .0					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5).....	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Line 18 plus Line 19).....	0.0	0.0	0.0	599.8	87.3
20. Cost containment expenses.....	0.0	0.0	0.0	0.0	1.8
21. Other claims adjustment expenses.....	0.0	0.0	0.0	0.0	0.5
22. Total underwriting deductions (Line 23).....	0.0	0.0	0.0	682.2	96.4
23. Total underwriting gain (loss) (Line 24).....	0.0	0.0	0.0	(582.2)	3.6
Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 13 Col. 5).....	(8,701)	(72,531)	1,421,573	25,254,957	26,847,441
25. Estimated liability of unpaid claims - [prior year (Line 13, Col. 6)]	15,942	8,723	2,180,237	29,291,497	30,869,770
Investments in Parent, Subsidiaries and Affiliates					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1).....	.0	.0	.0	.0	.0
27. Affiliated preferred stocks (Sch D. Summary, Line 18, Col. 1).....	.0	.0	.0	.0	.0
28. Affiliated common stocks (Sch D. Summary, Line 24, Col. 1).....	.0	.0	.0	.0	.0
29. Affiliated short-term investments (subtotal included in Sch. DA, Verification, Column 5, Line 10).....	.0	.0	.0	.0	.0
30. Affiliated mortgage loans on real estate.....	.0	.0	.0	.0	.0
31. All other affiliated.....	.0	.0	.0	.0	.0
32. Total of above Lines 26 to 31.....	.0	.0	.0	.0	.0
33. Total investment in parent included in Lines 26 to 31 above.....	.0	.0	.0	.0	.0

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes [] No []

If no, please explain:

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION.....Aetna Better Health Inc. (a Connecticut corporation) 2. Grand Total

BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR

NAIC Group Code....0001

(Location)

NAIC Company Code....13174

	1		3		4	5	6	7	8	9	10
	Total	Individual	Comprehensive (Hospital & Medical)	Group							
Total Members at end of:											
1. Prior year.....	0	0	0	0	0	0	0	0	0	0	0
2. First quarter.....	0	0	0	0	0	0	0	0	0	0	0
3. Second quarter.....	0	0	0	0	0	0	0	0	0	0	0
4. Third quarter.....	0	0	0	0	0	0	0	0	0	0	0
5. Current year.....	0	0	0	0	0	0	0	0	0	0	0
6. Current year member months.....	0	0	0	0	0	0	0	0	0	0	0
Total Member Ambulatory Encounters for Year:											
7. Physician.....	0	0	0	0	0	0	0	0	0	0	0
8. Non-physician.....	0	0	0	0	0	0	0	0	0	0	0
9. Totals.....	0	0	0	0	0	0	0	0	0	0	0
10. Hospital patient days incurred.....	0	0	0	0	0	0	0	0	0	0	0
11. Number of inpatient admissions.....	0	0	0	0	0	0	0	0	0	0	0
12. Health premiums written (b).....	0	0	0	0	0	0	0	0	0	0	0
13. Life premiums direct.....	0	0	0	0	0	0	0	0	0	0	0
14. Property/casualty premiums written.....	0	0	0	0	0	0	0	0	0	0	0
15. Health premiums earned.....	0	0	0	0	0	0	0	0	0	0	0
16. Property/casualty premiums earned.....	0	0	0	0	0	0	0	0	0	0	0
17. Amount paid for provision of health care services.....	(24,643)	0	0	0	0	0	0	0	0	0	(24,643)
18. Amount incurred for provision of health care services.....	(24,643)	0	0	0	0	0	0	0	0	0	(24,643)

(a) For health business: number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$.....0

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION.....Aetna Better Health Inc. (a Connecticut corporation) 2. Connecticut

BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR

(Location)

NAIC Group Code.....0001

NAIC Company Code.....13174

	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
	1 Total	2 Individual								3 Group
Total Members at end of:									
1. Prior year.....	0	0	0	0	0	0	0	0	0
2. First quarter.....	0	0	0	0	0	0	0	0	0
3. Second quarter.....	0	0	0	0	0	0	0	0	0
4. Third quarter.....	0	0	0	0	0	0	0	0	0
5. Current year.....	0	0	0	0	0	0	0	0	0
6. Current year member months.....	0	0	0	0	0	0	0	0	0
Total Member Ambulatory Encounters for Year:									
7. Physician.....	0	0	0	0	0	0	0	0	0
8. Non-physician.....	0	0	0	0	0	0	0	0	0
9. Totals.....	0	0	0	0	0	0	0	0	0
10. Hospital patient days incurred.....	0	0	0	0	0	0	0	0	0
11. Number of inpatient admissions.....	0	0	0	0	0	0	0	0	0
12. Health premiums written (b).....	0	0	0	0	0	0	0	0	0
13. Life premiums direct.....	0	0	0	0	0	0	0	0	0
14. Property/casualty premiums written.....	0	0	0	0	0	0	0	0	0
15. Health premiums earned.....	0	0	0	0	0	0	0	0	0
16. Property/casualty premiums earned.....	0	0	0	0	0	0	0	0	0
17. Amount paid for provision of health care services.....	(24,643)	0	0	0	0	0	0	0	(24,643)
18. Amount incurred for provision of health care services.....	(24,643)	0	0	0	0	0	0	0	(24,643)

(a) For health business: number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$.....0

Sch. S - Pt. 1 - Sn. 2
NONE

Sch. S - Pt. 2
NONE

Sch. S - Pt. 3 - Sn. 2
NONE

Sch. S - Pt. 4
NONE

Sch. S - Pt. 5
NONE

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**
SCHEDULE S - PART 6

Five-Year Exhibit of Reinsurance Ceded Business
(000 Omitted)

	1 2015	2 2014	3 2013	4 2012	5 2011
A. OPERATIONS ITEMS					
1. Premiums.....	0	0	0	0	12
2. Title XVIII - Medicare.....	0	0	0	0	0
3. Title XIX - Medicaid.....	0	0	0	0	263
4. Commissions and reinsurance expense allowance.....	0	0	0	0	0
5. Total hospital and medical expenses.....	0	0	0	0	197
B. BALANCE SHEET ITEMS					
6. Premiums receivable.....	0	0	0	0	0
7. Claims payable.....	0	0	0	0	0
8. Reinsurance recoverable on paid losses.....	0	0	0	0	0
9. Experience rating refunds due or unpaid.....	0	0	0	0	0
10. Commissions and reinsurance expense allowances due.....	0	0	0	0	0
11. Unauthorized reinsurance offset.....	0	0	0	0	0
12. Offset for reinsurance with certified reinsurers.....	0	0	0	0	XXX
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
13. Funds deposited by and withheld from (F).....	0	0	0	0	0
14. Letters of credit (L).....	0	0	0	0	0
15. Trust agreements (T).....	0	0	0	0	0
16. Other (O).....	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17. Multiple beneficiary trust.....	0	0	0	0	XXX
18. Funds deposited by and withheld from (F).....	0	0	0	0	XXX
19. Letters of credit (L).....	0	0	0	0	XXX
20. Trust agreements (T).....	0	0	0	0	XXX
21. Other (O).....	0	0	0	0	XXX

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**
SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	3,028,802	.0	3,028,802
2. Accident and health premiums due and unpaid (Line 15).....	.0	.0	.0
3. Amounts recoverable from reinsurers (Line 16.1).....	.0	.0	.0
4. Net credit for ceded reinsurance.....	XXX	.0	.0
5. All other admitted assets (balance).....	14,463	.0	14,463
6. Totals assets (Line 28).....	3,043,265	.0	3,043,265
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1).....	15,942	.0	15,942
8. Accrued medical incentive pool and bonus payments (Line 2).....	.0	.0	.0
9. Premiums received in advance (Line 8).....	.0	.0	.0
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19, first inset amount plus second inset amount).....	.0	.0	.0
11. Reinsurance in unauthorized companies (Line 20 minus inset amount).....	.0	.0	.0
12. Reinsurance with certified reinsurers (Line 20 inset amount).....	.0	.0	.0
13. Funds held under reinsurance treaties with certified reinsurers (Line 19 third inset amount).....	.0	.0	.0
14. All other liabilities (balance).....	3,216	.0	3,216
15. Total liabilities (Line 24).....	19,158	.0	19,158
16. Total capital and surplus (Line 33).....	3,024,107	XXX	3,024,107
17. Total liabilities, capital and surplus (Line 34).....	3,043,265	.0	3,043,265
NET CREDIT FOR CEDED REINSURANCE			
18. Claims unpaid.....	.0		
19. Accrued medical incentive pool.....	.0		
20. Premiums received in advance.....	.0		
21. Reinsurance recoverable on paid losses.....	.0		
22. Other ceded reinsurance recoverables.....	.0		
23. Total ceded reinsurance recoverables.....	.0		
24. Premiums receivable.....	.0		
25. Funds held under reinsurance treaties with authorized and unauthorized reinsurers.....	.0		
26. Unauthorized reinsurance.....	.0		
27. Reinsurance with certified reinsurers.....	.0		
28. Funds held under reinsurance treaties with certified reinsurers.....	.0		
29. Other ceded reinsurance payables/offsets.....	.0		
30. Total ceded reinsurance payables/offsets.....	.0		
31. Total net credit for ceded reinsurance.....	.0		

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

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

DETAILS OF WRITE-INS

58001.....	0	0	0	0	0	0	0	0	0
58002.....	0	0	0	0	0	0	0	0	0
58003.....	0	0	0	0	0	0	0	0	0
58998. Summary of remaining write-ins for line 58.....	0	0	0	0	0	0	0	0	0
58999. Total (Lines 58001 thru 58003 + 58998).....	0	0	0	0	0	0	0	0	0

(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer;
(E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.
Explanation of basis of allocation by states, premiums by state, etc.

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

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

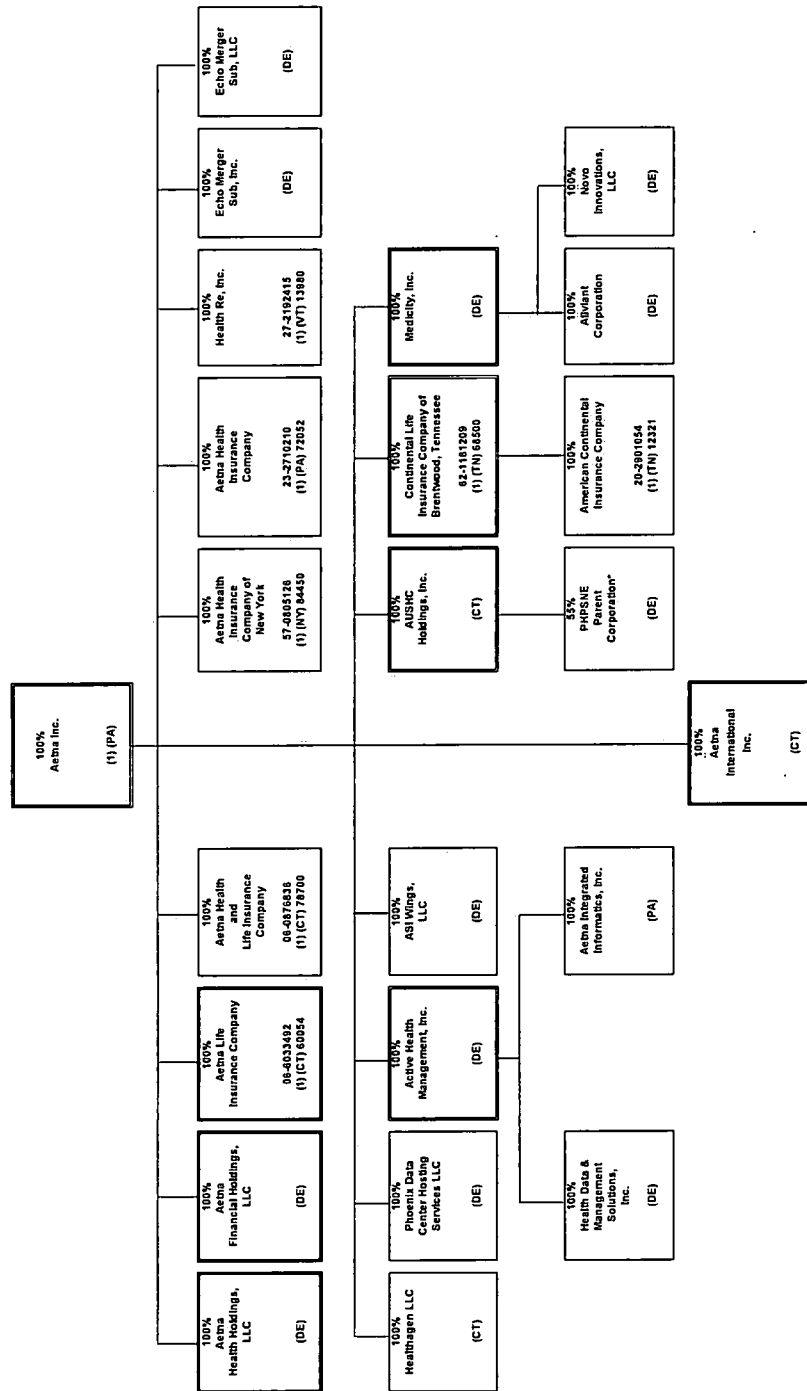
States, Etc.	Direct Business Only					6 Totals
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	
1. Alabama.....AL	0	0	0	0	0	0
2. Alaska.....AK	0	0	0	0	0	0
3. Arizona.....AZ	0	0	0	0	0	0
4. Arkansas.....AR	0	0	0	0	0	0
5. California.....CA	0	0	0	0	0	0
6. Colorado.....CO	0	0	0	0	0	0
7. Connecticut.....CT	0	0	0	0	0	0
8. Delaware.....DE	0	0	0	0	0	0
9. District of Columbia.....DC	0	0	0	0	0	0
10. Florida.....FL	0	0	0	0	0	0
11. Georgia.....GA	0	0	0	0	0	0
12. Hawaii.....HI	0	0	0	0	0	0
13. Idaho.....ID	0	0	0	0	0	0
14. Illinois.....IL	0	0	0	0	0	0
15. Indiana.....IN	0	0	0	0	0	0
16. Iowa.....IA	0	0	0	0	0	0
17. Kansas.....KS	0	0	0	0	0	0
18. Kentucky.....KY	0	0	0	0	0	0
19. Louisiana.....LA	0	0	0	0	0	0
20. Maine.....ME	0	0	0	0	0	0
21. Maryland.....MD	0	0	0	0	0	0
22. Massachusetts.....MA	0	0	0	0	0	0
23. Michigan.....MI	0	0	0	0	0	0
24. Minnesota.....MN	0	0	0	0	0	0
25. Mississippi.....MS	0	0	0	0	0	0
26. Missouri.....MO	0	0	0	0	0	0
27. Montana.....MT	0	0	0	0	0	0
28. Nebraska.....NE	0	0	0	0	0	0
29. Nevada.....NV	0	0	0	0	0	0
30. New Hampshire.....NH	0	0	0	0	0	0
31. New Jersey.....NJ	0	0	0	0	0	0
32. New Mexico.....NM	0	0	0	0	0	0
33. New York.....NY	0	0	0	0	0	0
34. North Carolina.....NC	0	0	0	0	0	0
35. North Dakota.....ND	0	0	0	0	0	0
36. Ohio.....OH	0	0	0	0	0	0
37. Oklahoma.....OK	0	0	0	0	0	0
38. Oregon.....OR	0	0	0	0	0	0
39. Pennsylvania.....PA	0	0	0	0	0	0
40. Rhode Island.....RI	0	0	0	0	0	0
41. South Carolina.....SC	0	0	0	0	0	0
42. South Dakota.....SD	0	0	0	0	0	0
43. Tennessee.....TN	0	0	0	0	0	0
44. Texas.....TX	0	0	0	0	0	0
45. Utah.....UT	0	0	0	0	0	0
46. Vermont.....VT	0	0	0	0	0	0
47. Virginia.....VA	0	0	0	0	0	0
48. Washington.....WA	0	0	0	0	0	0
49. West Virginia.....WV	0	0	0	0	0	0
50. Wisconsin.....WI	0	0	0	0	0	0
51. Wyoming.....WY	0	0	0	0	0	0
52. American Samoa.....AS	0	0	0	0	0	0
53. Guam.....GU	0	0	0	0	0	0
54. Puerto Rico.....PR	0	0	0	0	0	0
55. US Virgin Islands.....VI	0	0	0	0	0	0
56. Northern Mariana Islands.....MP	0	0	0	0	0	0
57. Canada.....CAN	0	0	0	0	0	0
58. Aggregate Other Alien.....OT	0	0	0	0	0	0
59. Totals.....	0	0	0	0	0	0

NONE

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**

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

PART 1 - ORGANIZATIONAL CHART

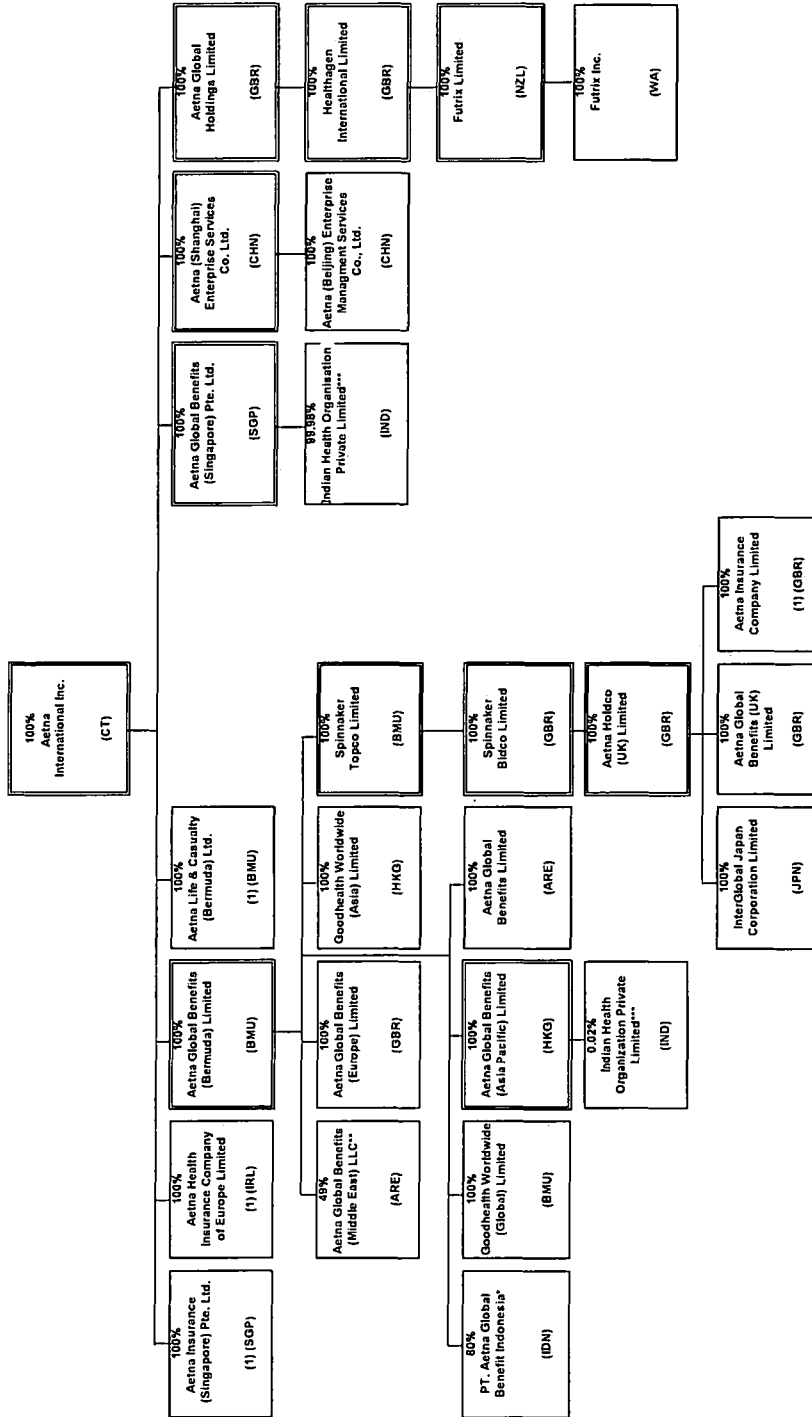


(1) Insurers/HMO's Percentages are rounded to the nearest whole percent and based on ownership of voting rights. Double borders indicate entity has subsidiaries shown on the same page. Bold borders indicate entity has subsidiaries shown on a separate page. *55% is owned by AUSHC Holdings, Inc. and 45% is owned by third parties.

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**

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

PART 1 - ORGANIZATIONAL CHART

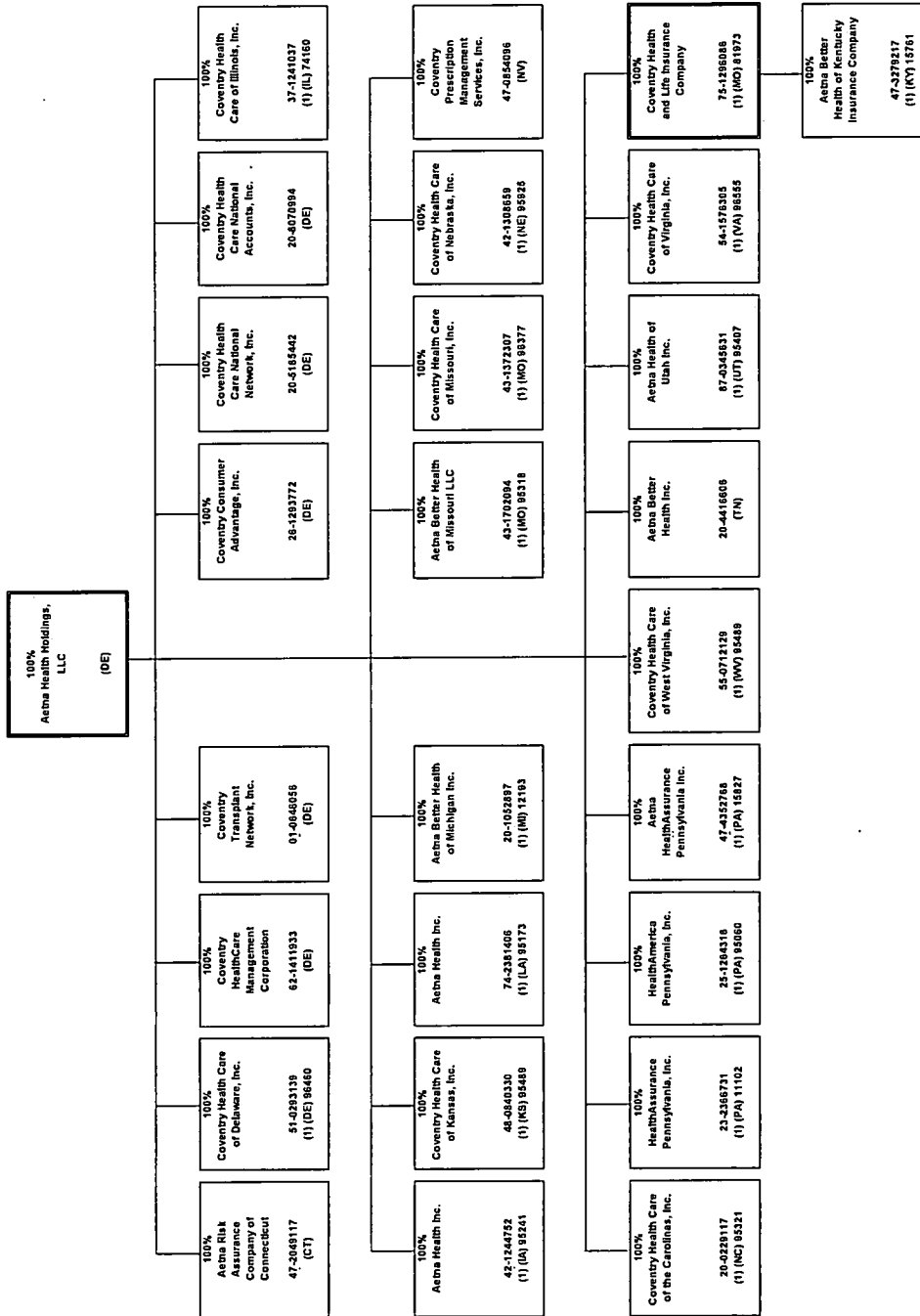


*Aetna Global Benefits (Bermuda) Limited owns 80% and 20% is owned by Subratyath Rivai, Aetna's Nominee.
 ** Aetna Global Benefits (Middle East) LLC owned by Euro Gulf LLC, Aetna's Nominee.
 *** Aetna Global Benefits (Asia Pacific) Limited owns 0.018857% of Indian Health Organisation Private Limited and Aetna Global Benefits (Singapore) Pte. Ltd. owns 89.980143%.

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)

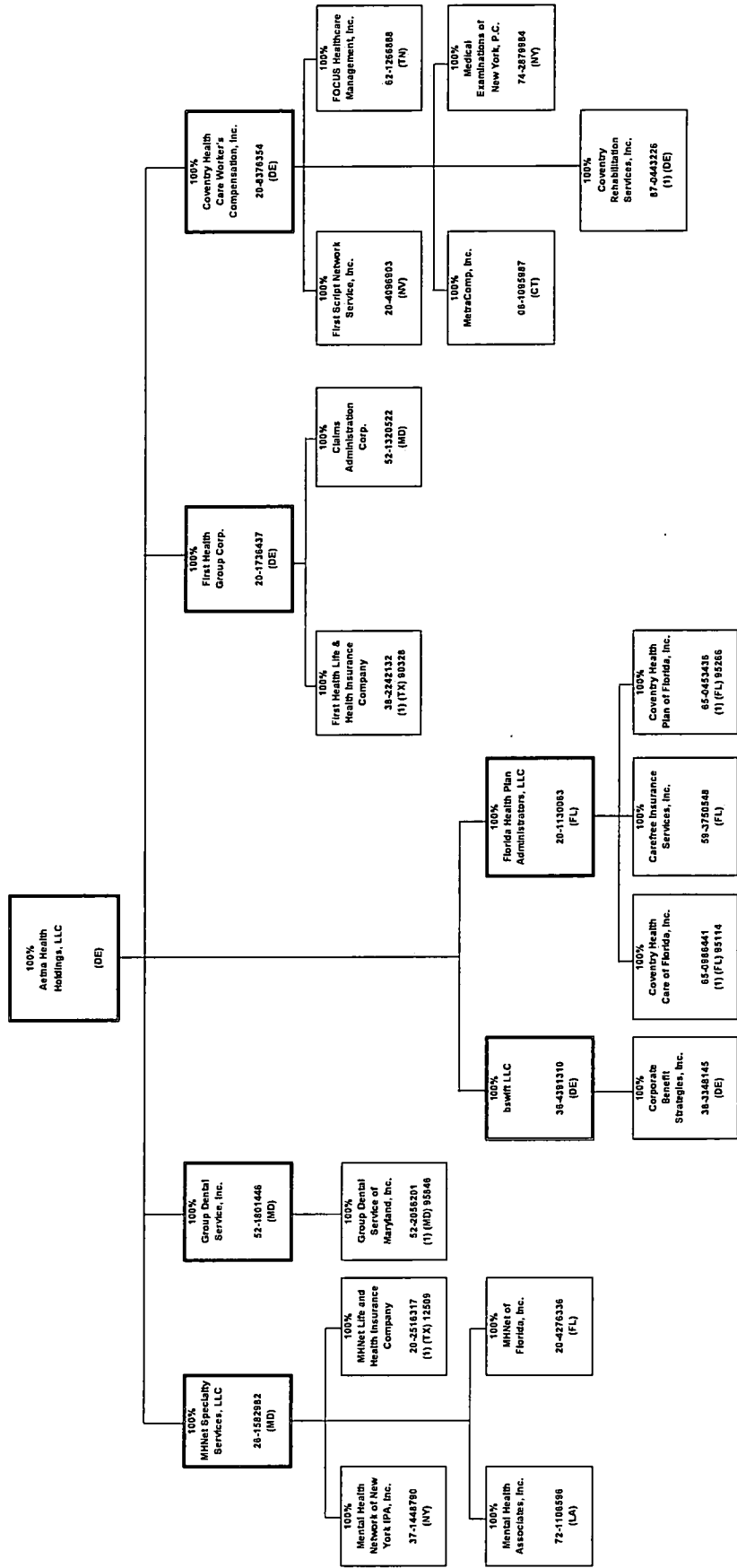
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)

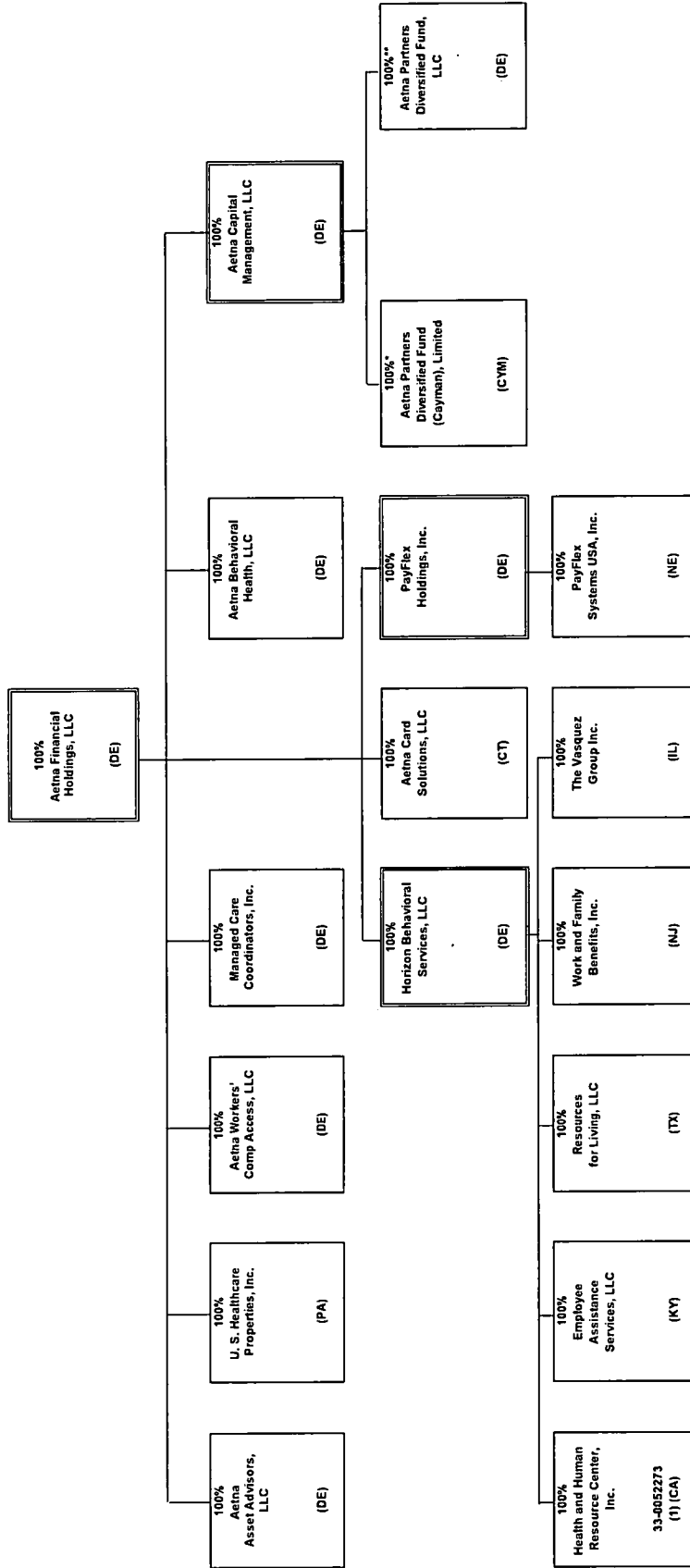
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)

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

PART 1 - ORGANIZATIONAL CHART



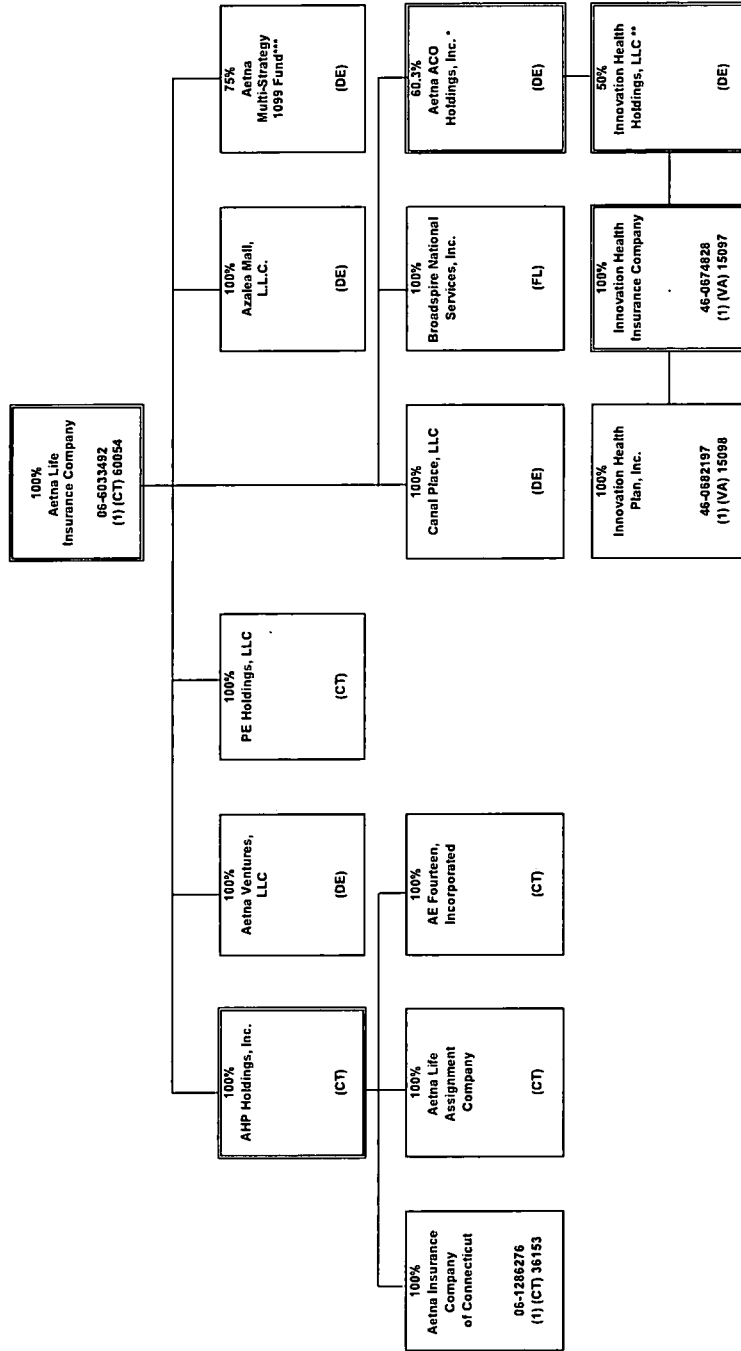
* Aetna Life Insurance Company owns the Class C participating shares of Aetna Partners Diversified Fund (Cayman), Limited.

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

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)

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

PART 1 - ORGANIZATIONAL CHART

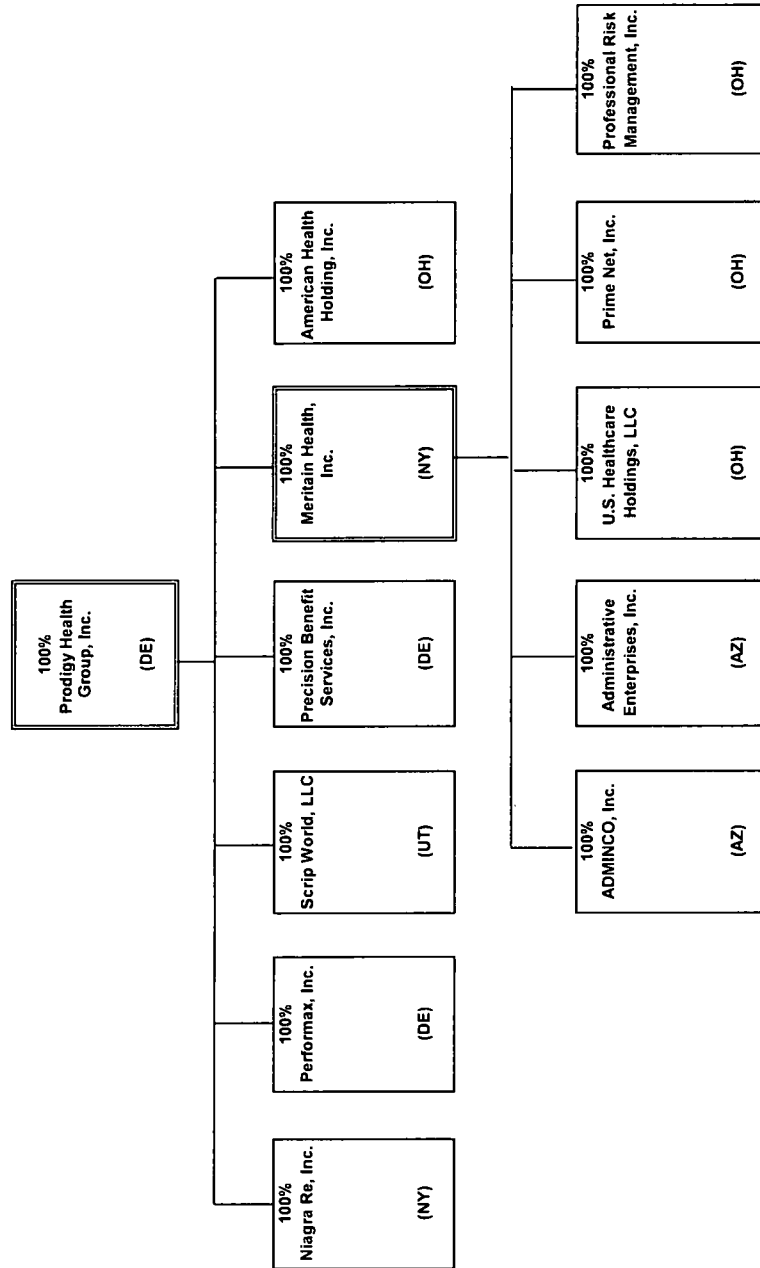


* Aetna Life Insurance Company owns 302 shares, Aetna Health Inc. (PA) owns 198 shares and Aetna Health Holdings, LLC owns 1 share.
 ** Innovation Health Holdings, LLC is 50% owned by Aetna ACO Holdings, Inc. and 50% owned by Inova Health System Foundation, an unaffiliated company.
 ***75% is invested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

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)

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

PART 1 - ORGANIZATIONAL CHART



Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
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
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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Controls Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	
0001	AETNA INC.	00000	23-2223663	3060706	1122304	N	Aetna Inc.	PA	UIP	Aetna Inc.	Ownership	0.000	Aetna Inc.	0
0001	AETNA INC.	00000	30-0123754	0	0		Aetna Health Holdings, LLC	DE	UOP	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	45-4901541	0	0		Aetna ACO Holdings, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	0.200	Aetna Inc.	4
0001	AETNA INC.	00000	45-527797	0	0		Innovation Health Holdings, LLC	DE	NIA	Aetna ACO Holdings, Inc.	Ownership	50.000	Aetna Inc.	7
0001	AETNA INC.	15097	46-0674828	0	0		Innovation Health Insurance Company	VA	IA	Innovation Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	15098	46-0662197	0	0		Innovation Health Plan, Inc.	VA	IA	Innovation Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	95-3402799	0	0		Aetna Health of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	99935	23-2442048	0	0		Aetna Health Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95086	59-2411584	0	0		Aetna Health Inc.	FL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95094	58-1649588	0	0		Aetna Health Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95517	01-0504252	0	0		Aetna Health Inc.	ME	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95756	23-2861565	0	0		Aetna Health Inc.	MI	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95287	52-1270921	0	0		Aetna Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95234	22-2663623	0	0		Aetna Health Inc.	NY	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	14408	45-2534734	0	0		Aetna Better Health Inc.	NY	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95109	23-2169745	0	0		Aetna Health Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	45-4901541	0	0		Aetna ACO Holdings, Inc.	DE	NIA	Aetna Health Inc. (PA)	Ownership	39.500	Aetna Inc.	4
0001	AETNA INC.	95490	76-0186680	0	0		Aetna Health Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95040	74-1844335	0	0		Aetna Better Health of Texas Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	12328	20-2207534	0	0		Aetna Better Health Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	05-1160812	0	0		Aetna Dental of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	11183	22-2990909	0	0		Aetna Dental Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95910	06-1177531	0	0		Aetna Dental Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	30-0123760	0	0		Aetna Rx Home Delivery, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	13-3670795	0	0		Aetna Health Management, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	22-3187443	0	0		Aetna Ireland Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	57-1205768	0	0		Aetna Specialty Pharmacy, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-1274723	0	0		Colinity, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	23-2671370	0	0		@Credentials Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	57-0640344	0	0		Strategic Resource Company	SC	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	13735	27-0563973	0	0		Aetna Better Health Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	13174	26-2667580	0	0		Aetna Better Health Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	47-5170395	0	0		Aetna Better Health of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	14043	27-2512072	0	0		Aetna Better Health Inc.	IL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	15805	47-3850577	0	0		Aetna Better Health of Iowa Inc.	IA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	15616	80-0629718	0	0		Aetna Better Health, Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**
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
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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	
0001	AETNA INC.	00000	80-0671703	0	0	Aetna Better Health Inc.	Aetna Better Health Inc.	FL	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	14229	25-2769338	0	0	Aetna Better Health Inc.	Aetna Better Health Inc.	OH	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	15611	46-3203088	0	0	Aetna Better Health Inc.	Aetna Better Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	04-2708160	0	0	Aetna Student Health Agency Inc.	Aetna Student Health Agency Inc.	MA	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	73-1702453	0	0	Delaware Physicians Care, Incorporated	Delaware Physicians Care, Incorporated	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	01-0826783	0	0	Schaller Anderson Medical Administrators, Incorporated	Schaller Anderson Medical Administrators, Incorporated	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	86-0842559	0	0	Aetna Medicaid Administrators LLC	Aetna Medicaid Administrators LLC	AZ	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	45-2944270	0	0	TriAge, LLC	TriAge, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	16-1471176	0	0	Prodigy Health Group, Inc.	Prodigy Health Group, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-9438576	0	0	Niagara Re, Inc.	Niagara Re, Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	52-2200070	0	0	Performax, Inc.	Performax, Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	87-0632355	0	0	Scip World, LLC	Scip World, LLC	UT	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	27-1760756	0	0	Precision Benefit Services, Inc.	Precision Benefit Services, Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	31-1368946	0	0	American Health Holding, Inc.	American Health Holding, Inc.	OH	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	16-1284154	0	0	Meridian Health, Inc.	Meridian Health, Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	86-0537707	0	0	ADMINCO, Inc.	ADMINCO, Inc.	AZ	NIA	Meridian Health, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	86-0527428	0	0	Administrative Enterprises, Inc.	Administrative Enterprises, Inc.	AZ	NIA	Meridian Health, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	16-1684061	0	0	U.S. Healthcare Holdings, LLC	U.S. Healthcare Holdings, LLC	OH	NIA	Meridian Health, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	34-1670299	0	0	Prime Net, Inc.	Prime Net, Inc.	OH	NIA	Meridian Health, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	34-1348032	0	0	Professional Risk Management, Inc.	Professional Risk Management, Inc.	OH	NIA	Meridian Health, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	68500	52-1181209	0	0	Continental Life Insurance Company of Brentwood, Tennessee	Continental Life Insurance Company of Brentwood, Tennessee	TN	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	12321	20-2901054	0	0	American Continental Insurance Company	American Continental Insurance Company	TN	IA	Continental Life Insurance Company of Brentwood, Tennessee	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	60054	06-6033492	0	0	Aetna Life Insurance Company	Aetna Life Insurance Company	CT	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	45-4901541	0	0	Aetna ACO Holdings, Inc.	Aetna ACO Holdings, Inc.	CT	NIA	Aetna Life Insurance Company	Ownership	60.300	Aetna Inc.	4
0001	AETNA INC.	00000	06-1270755	0	0	AHP Holdings, Inc.	AHP Holdings, Inc.	CT	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	36153	06-1286276	0	0	Aetna Insurance Company of Connecticut	Aetna Insurance Company of Connecticut	CT	IA	AHP Holdings, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	06-1028469	0	0	Aetna Fourteen, Incorporated	Aetna Fourteen, Incorporated	CT	NIA	AHP Holdings, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	06-1373153	0	0	PE Holdings, LLC	PE Holdings, LLC	CT	NIA	AHP Holdings, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-1678339	0	0	Aetna Life Assignment Company	Aetna Life Assignment Company	CT	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	06-1423207	0	0	Azalea Mall, L.L.C.	Azalea Mall, L.L.C.	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-3180700	0	0	Canal Plaza, LLC	Canal Plaza, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	59-2108747	0	0	Aetna Ventures, LLC	Aetna Ventures, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	41-2035961	0	0	Broadspire National Services, Inc.	Broadspire National Services, Inc.	FL	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	26-2030792	0	0	Aetna Multi-Strategy 1999 Fund	Aetna Multi-Strategy 1999 Fund	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	9
0001	AETNA INC.	00000	41-2035961	0	0	Aetna Financial Holdings, LLC	Aetna Financial Holdings, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	26-2030792	0	0	Aetna Asset Advisors, LLC	Aetna Asset Advisors, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	23-2354500	0	0	U.S. Healthcare Properties, Inc.	U.S. Healthcare Properties, Inc.	PA	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
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
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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Management Board, Attorney-in-Fact, Influence, Other)	If Controls Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	
0001	AETNA INC.	00000	38-3704481	0	0		Aetna Capital Management, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	11-3667142	0	1314522		Aetna Partners Diversified Fund, LLC	DE	NIA	Aetna Capital Management, LLC	Ownership	100.000	Aetna Inc.	1
0001	AETNA INC.	00000		0	1460020		Aetna Partners Diversified Fund (Cayman), Limited	CYM	NIA	Aetna Capital Management, LLC	Ownership	100.000	Aetna Inc.	2
0001	AETNA INC.	00000	20-0446676	0	0		Aetna Workers' Comp Access, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-0446713	0	0		Aetna Behavioral Health, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	23-2670015	0	0		Managed Care Coordinators, Inc.	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	59-3269144	0	0		Horizon Behavioral Services, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	61-1193498	0	0		Employee Assistance Services, LLC	KY	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	33-0052273	0	0		Health and Human Resource Center, Inc.	CA	IA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	75-2420973	0	0		Resources for Living, LLC	TX	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	36-3681261	0	0		The Vasquez Group Inc.	IL	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	22-3178125	0	0		Work and Family Benefits, Inc.	NJ	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	27-1773021	0	0		Aetna Card Solutions, LLC	CT	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-5216478	0	0		PayFlex Holdings, Inc.	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	91-1774434	0	0		PayFlex Systems USA, Inc.	NE	NIA	PayFlex Holdings, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	78700	06-0876836	0	0		Aetna Health and Life Insurance Company	CT	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	72052	23-2710210	0	0		Aetna Health Insurance Company	PA	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	84450	57-0805126	0	0		Aetna Health Insurance Company of New York	NY	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	06-1571642	0	0		Aetna Life & Casualty (Bermuda) Ltd.	CT	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	98-0211470	0	0		Aetna Insurance (Singapore) Pte. Ltd.	BMU	IA	Aetna International Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Bermuda) Limited	SGP	IA	Aetna International Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Goodhealth Worldwide (Global) Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Europe) Limited	BGR	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Goodhealth Worldwide (Asia) Limited	HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Global Benefits Limited	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		PT. Aetna Global Benefits Indonesia	IDN	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	80.000	Aetna Inc.	5
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Middle East) LLC	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	49.000	Aetna Inc.	6
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Asia Pacific) Limited	HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Spinmaker Topco Limited	BMU	NIA	Spinmaker Topco Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Spinmaker Bidco Limited	GBR	NIA	Spinmaker Bidco Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Holdco (UK) Limited	GBR	NIA	Spinmaker Bidco Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		InterGlobal Japan Corporation Limited	JPN	NIA	Aetna Holdco (UK) Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (UK) Limited	GBR	NIA	Aetna Holdco (UK) Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Insurance Company Limited	GBR	IA	Aetna Holdco (UK) Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Indian Health Organisation Private Limited	IND	NIA	Aetna Global Benefits (Asia Pacific) Limited	Ownership	0.020	Aetna Inc.	3
0001	AETNA INC.	00000		0	0		Aetna Health Insurance Company of Europe Limited	IRL	IA	Aetna International Inc.	Ownership	100.000	Aetna Inc.	0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
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
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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Management Board, Influence-in-Fact, Attorney-in-Fact, Other)	If Controls Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	
0001	AETNA INC.	00000		0	0		Aetna (Shanghai) Enterprise Services Co. Ltd.	CHN	NIA	Aetna International Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna (Beijing) Enterprise Management Services Co., Ltd.	CHN	NIA	Aetna (Shanghai) Enterprise Services Co. Ltd.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Singapore) PTE, LTD	SGP	NIA	Aetna International Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	22-257895	0	0		Indian Health Organisation Private Limited	IND	NIA	Aetna Global Benefits (Singapore) PTE, LTD	Ownership	99.980	Aetna Inc.	3
0001	AETNA INC.	00000		0	0		AUSHC Holdings, Inc.	CT	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Global Holdings Limited	GBR	NIA	Aetna International Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Healthhagen International Limited	GBR	NIA	Aetna Global Holdings Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Futrix Limited	NZL	NIA	Healthhagen International Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Futrix, Inc.	NZL	NIA	Futrix Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	06-1182176	0	0		PHSPNE Parent Corporation	DE	NIA	AUSHC Holdings, Inc.	Ownership	55.000	Aetna Inc.	8
0001	AETNA INC.	00000	52-2182411	0	0		Active Health Management, Inc.	DE	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	47-0970432	0	0		Health Data & Management Solutions, Inc.	DE	NIA	Active Health Management, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	23-2604867	0	0		Aetna Integrated Informatics, Inc.	PA	NIA	Active Health Management, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	13960	27-2192415	0	0		Health Re, Inc.	VT	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	81-0579372	0	0		Phoenix Data Center Hosting Services, LLC	VT	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	46-2469464	0	0		Healthhagen LLC	CT	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	51-0029326	0	0		ASI Wings, L.L.C.	DE	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	33-0807547	0	0		Medicity, Inc.	DE	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	0	0	0		Echo Merger Sub, Inc.	DE	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	27-0259978	0	0		Echo Merger Sub, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	27-1170966	0	0		Nova Innovations, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	27-1170966	0	0		Alliant Corporation	DE	NIA	Medicity Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	15761	81973	0	0		Coverity Health and Life Insurance Company	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	51-0293139	0	0		Coverity Health of Kentucky Insurance Company	KY	IA	Coverity Health and Life Insurance Company	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	42-1244752	0	0		Coverity Health Care of Delaware, Inc.	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	52-1801446	0	0		Coverity Health Care of Delaware, Inc.	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	52-2056201	0	0		Group Dental Service, Inc.	MD	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95241	42-1244752	0	0		Aetna Health Inc.	IA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95925	42-1306659	0	0		Coverity Health Care of Nebraska, Inc.	NE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	47-208117	0	0		Aetna Risk Assurance Company of Connecticut Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	74-2381406	0	0		Aetna Health Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95060	25-1264318	0	0		HealthAmerica Pennsylvania, Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	23-2366731	0	0		HealthAssurance Pennsylvania, Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	47-0854086	0	0		Coverity Prescription Management Services, Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	96555	54-1576305	0	0		Coverity Health Care of Virginia, Inc.	VA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	01-0646056	0	0		Coverity Transplant Network, Inc.	VA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	96377	43-1372307	0	0		Coverity Health Care of Missouri, Inc.	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
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
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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Management Board, Attorney-in-Fact, Influence, Other)	If Controls Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	
0001	AETNA INC.	55318	43-170294	0	0		Aetna Better Health of Missouri LLC	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95408	55-0712129	0	0		Coventry Health Care of West Virginia, Inc.	WV	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95321	20-0229117	0	0		Coventry Health Care of the Carolinas, Inc.	NC	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	62-1411933	0	0		Coventry HealthCare Management Corporation	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	15827	47-4352768	0	0		Aetna Health Assurance Pennsylvania, Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95469	48-0840330	0	0		Coventry Health Care of Kansas, Inc.	KS	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	12193	20-1052897	0	0		Aetna Better Health of Michigan Inc.	MI	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95407	87-0345631	0	0		Aetna Health of Utah Inc.	UT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-4416606	0	0		Aetna Better Health Inc.	TN	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	74160	37-1241037	0	0		Coventry Health Care of Illinois, Inc.	IL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-4070994	0	0		Coventry Health Care National Accounts, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-5185442	0	0		Coventry Health Care National Network, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	26-1293772	0	0		Coventry Consumer Advantage, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-6376354	0	0		Coventry Health Care Workers' Compensation, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-0989903	0	0		First Script Network Service, Inc.	NV	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	74-289984	0	0		MeiaComp, Inc.	CT	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	62-1266888	0	0		Medical Examinations of New York, P.C.	NY	NIA	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	87-0443226	0	0		FOCUS Healthcare Management, Inc.	TN	NIA	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-1736437	0	0		Coventry Rehabilitation Services, Inc.	DE	NIA	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	90328	38-2242132	0	0		First Health Group Corp.	TX	NIA	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	52-1320522	0	0		First Health Life & Health Insurance Company	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-1130063	0	0		Claims Administration Corp.	MD	NIA	First Health Group Corp.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95114	65-0986441	0	0		Florida Health Plan Administrators, LLC	FL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95266	65-4453436	0	0		Coventry Health Care of Florida, Inc.	FL	IA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	59-37590548	0	0		Carefree Insurance Services, Inc.	FL	NIA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	36-3381310	0	0		bswift LLC	DE	NIA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	38-3348145	0	0		Corporate Benefit Strategies, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	26-1562982	0	0		MHNet Specialty Services, LLC	MD	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	37-1448790	0	0		Mental Health Network of New York IPA, Inc.	NY	NIA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	12509	20-2516317	0	0		MHNet Life and Health Insurance Company	TX	IA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	72-1106596	0	0		Mental Health Associates, Inc.	LA	NIA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-4276336	0	0		MHNet of Florida, Inc.	FL	NIA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	0

Asterisk Explanation
 1 Aetna Life Insurance Company and Aetna Health and Life Insurance Company own substantially all of the non-managing membership interests.
 2 Aetna Life Insurance Company owns the Class C participating shares.

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**
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
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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	
3	Aetna Global Benefits (Asia Pacific) Limited						Private Limited and Aetna Global Benefits (Singapore) Pte. Ltd. owns 99.980143%.							
4	Aetna ACO Holdings, Inc.						Aetna Health Inc. (PA) (39%) and Aetna Health Holdings, LLC (1%)							
5	Aetna Global Benefits (Bermuda) Limited						owns 80% and 20% is owned by Shamsyah Rival, Aetna's Nominee.							
6	Aetna Global Benefits (Bermuda) Limited						owns 49% and 51% is owned by Euro Gulf LLC, Aetna's Nominee.							
7	Aetna ACO Holdings Inc.						owns 50% and 50% is owned by Innovation Health System Foundation, an unaffiliated company.							
8	Aetna ACO Holdings Inc.						owns 50% and 50% is owned by Innovation Health System Foundation, an unaffiliated company.							
9	Aetna ACO Holdings Inc.						owns 45% and 55% is owned by AIJSHC Holdings, Inc. The remaining 45% is owned by thirteen different hospitals (non-affiliates) which are shareholders with varying degrees of ownership.							
							owns 25% and 75% is invested and owned by external accredited investors.							

Statement as of December 31, 2015, of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken	
0	52-2182411	Aetna Health Management, Inc.	0	0	0	0	106,285,196	0	0	0	106,285,196	0
0	0	Aetna Behavioral Health, LLC	0	0	0	0	(451,564)	0	0	0	(451,564)	0
14408	45-2634734	Aetna Better Health Inc. (a New York corporation)	0	0	0	0	(19,146,481)	0	0	0	(19,146,481)	0
14229	45-2764938	Aetna Better Health Inc. (an Ohio corporation)	0	85,000,000	0	0	(55,447,745)	0	0	0	29,552,255	0
0	80-0671703	Aetna Better Health Inc. (FL)	0	0	0	0	(35)	0	0	0	(35)	0
12328	20-2207534	Aetna Better Health Inc. (GA)	0	0	0	0	5,837	0	0	0	5,837	0
14043	27-2512072	Aetna Better Health Inc. (IL)	0	95,000,000	0	0	(103,388,907)	0	0	0	(8,388,907)	0
0	0	Aetna Better Health Inc. (IN)	0	0	0	0	(598)	0	0	0	(598)	0
15805	47-3850677	Aetna Better Health of Iowa Inc.	0	1,000,000	0	0	0	0	0	0	1,000,000	0
0	47-3279217	Aetna Better Health of Kentucky Insurance Company	0	3,250,000	0	0	(1,986)	0	0	0	3,248,014	0
12193	20-1052897	Aetna Better Health of Michigan Inc.	0	9,000,000	0	0	(36,820,380)	42,319	0	0	(27,778,061)	191,636
95318	43-1702094	Aetna Better Health of Missouri LLC	0	0	0	0	(91,174,161)	0	0	0	(91,174,161)	0
95040	74-1844335	Aetna Better Health of Texas Inc.	0	26,200,000	0	0	(2,529,898)	0	0	0	23,670,102	0
15516	80-0629718	Aetna Better Health, Inc (LA)	0	34,000,000	0	0	(17,462,222)	0	0	0	16,537,778	0
15611	46-3203088	Aetna Better Health, Inc (NJ)	0	10,000,000	0	0	(4,676,163)	0	0	0	5,323,837	0
13735	27-0563973	Aetna Better Health, Inc (PA)	0	0	0	0	(105,852,272)	0	0	0	(105,852,272)	0
13174	26-2667560	Aetna Better Health, Inc. (a Connecticut Corporation)	0	0	0	0	(25,749)	0	0	0	(25,749)	0
0	38-3704481	Aetna Capital Management, LLC	0	0	0	(1,000)	0	0	0	0	2,453,845	0
11183	22-2990909	Aetna Dental Inc. (NJ)	0	0	0	0	(1,915,157)	0	0	0	(2,315,157)	0
95910	06-1177531	Aetna Dental Inc. (TX)	0	0	0	0	(8,576,714)	(46,764)	0	0	(15,123,478)	0
78700	06-1160812	Aetna Dental of California Inc.	0	0	0	0	(10,164,168)	0	0	0	(17,064,168)	0
0	06-0876836	Aetna Health and Life Insurance Company	0	0	(3,106,054)	0	(21,611,102)	44,120,080	0	0	(61,477,339)	(1,861,691,301)
0	30-0123754	Aetna Health Holdings, LLC	449,300,000	0	0	0	(12,578)	0	0	114,699	(34,797,879)	0
95935	23-2442048	Aetna Health Inc. (CT)	0	(484,200,000)	0	0	(21,879,989)	0	0	0	(21,879,989)	0
95088	59-2411584	Aetna Health Inc. (FL)	0	30,000,000	0	0	(187,757,227)	0	0	0	(181,757,227)	0
95094	58-1849568	Aetna Health Inc. (GA)	0	0	0	0	(191,220,470)	0	0	0	(112,420,470)	0
95241	42-1244752	Aetna Health Inc. (Iowa)	0	16,000,000	0	0	(83,930,129)	0	0	0	(67,930,129)	0
95173	74-2381406	Aetna Health Inc. (LA)	0	2,000,000	0	0	(53,116,693)	0	0	0	(51,116,693)	0
95517	01-0504252	Aetna Health Inc. (ME)	0	0	0	0	(8,511,313)	0	0	0	(10,911,313)	0
95287	23-2661565	Aetna Health Inc. (MI)	0	0	0	0	4,431	0	0	0	4,431	0
95284	52-1270921	Aetna Health Inc. (NJ)	0	0	0	0	(137,337,545)	(7,358,905)	0	0	(184,796,450)	8,681
95109	23-2169745	Aetna Health Inc. (NY)	0	0	0	0	(42,343,397)	0	0	0	(42,343,397)	0
95490	76-0188680	Aetna Health Inc. (PA)	0	0	0	0	(366,660,017)	(765,666)	0	0	(517,445,683)	51,925
72052	23-2710210	Aetna Health Insurance Company	0	0	0	0	(56,929,103)	0	0	0	(80,029,103)	0
0	75-3270039	Aetna Health Insurance Company of Europe Limited	0	0	0	0	(1,649,059)	7,612,477	0	0	5,963,418	(6,681)
84450	57-0805126	Aetna Health Insurance Company of New York	0	0	0	0	(3,852,080)	0	0	0	(3,852,080)	0
0	13-3670795	Aetna Health Management, LLC	0	0	0	0	3,956	0	0	0	3,956	0
0	95-3402799	Aetna Health of California Inc.	0	0	0	0	2,652,590,452	0	0	0	2,652,590,452	0
95407	87-0345631	Aetna Health of Utah, Inc.	0	0	0	0	(233,909,293)	0	0	0	(289,100,293)	0
15627	47-4352768	Aetna Health Assurance Pennsylvania Inc.	0	5,000,000	0	0	(109,509,545)	0	0	0	(109,509,545)	0
			0	0	0	0	0	0	0	0	5,000,000	0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliates	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)	
0	23-225663	Aetna Inc.	1,782,000,000	0	0	0	1,137,655,063	0	0	0	2,920,655,063	0
0	06-1286276	Aetna Insurance (Singapore) Pte. Ltd	0	0	0	0	(957,581)	0	0	0	(957,581)	0
0	06-1571642	Aetna Insurance Company of Connecticut	0	0	0	0	5,613	(70,429,222)	0	0	(70,429,222)	0
0	06-1571642	Aetna International, Inc.	0	0	0	0	1,437,607	0	0	0	1,437,607	0
0	06-6033492	Aetna Life & Casualty Bermuda Limited	0	0	0	0	(6,062,953)	0	0	0	(6,062,953)	0
0	06-6033492	Aetna Life Insurance Company	(1,415,105,471)	(3,448,770)	(20,472,231)	1,000	(698,554,934)	(312,751,185)	0	0	(2,450,331,591)	2,737,669,646
0	86-0842559	Aetna Medicaid Administrators, LLC	0	0	0	0	570,079,283	0	0	0	570,079,283	0
0	01-059372	Aetna Multi Strategy 1099 Fund	(2,872,294)	0	2,055,783	0	0	0	0	0	(816,451)	0
0	81-059372	Aetna Partners Diversified Fund (Cayman), Limited	(10,348,407)	0	5,001,531	0	0	0	0	0	(5,346,876)	0
0	47-204917	Aetna Partners Diversified Fund, LLC	(28,564,116)	0	12,821,539	0	0	0	0	0	(15,742,577)	0
0	30-0123760	Aetna Risk Assurance Company of Connecticut	0	0	0	0	151,017,522	70,429,222	0	0	221,446,744	0
0	57-1209768	Aetna Shanghai Enterprises Services Co. Ltd	0	0	0	0	3,127	0	0	0	3,127	0
0	04-2708160	Aetna Specialty Pharmacy, LLC	0	0	0	0	31,708,301	0	0	0	31,708,301	0
0	20-3180700	Aetna Student Health Agency, Inc.	(29,509)	3,448,770	0	0	36,184,410	0	0	0	36,184,410	0
12321	20-2901054	Aetna Ventures, LLC	0	7,000,000	0	0	(114,558,698)	0	0	0	(107,558,698)	0
0	06-1423207	American Continental Insurance Company	0	0	0	0	218,000	0	0	0	218,000	0
0	36-4391310	Azalea Malt, LLC	0	0	3,695,432	0	0	0	0	0	3,695,432	0
66500	62-181209	bswift, LLC	0	(7,000,000)	0	0	(268,425)	0	0	0	(268,425)	0
81973	75-1296086	Continental Life Insurance Company of Brentwood Tennessee	0	(3,250,000)	0	0	(84,937,745)	0	0	0	(81,937,745)	0
96460	65-0986441	Covenity Health & Life Insurance Company	0	0	0	0	(84,937,745)	1,325,477	0	0	(86,612,007)	(8,486,308)
74160	37-1241037	Covenity Health Care of Delaware, Inc	0	81,000,000	0	0	(29,894,987)	0	0	0	(29,894,987)	0
95489	48-0840330	Covenity Health Care of Florida, Inc	0	5,000,000	0	0	(366,750,599)	0	0	0	(366,750,599)	0
96377	42-1308659	Covenity Health Care of Illinois, Inc	0	0	0	0	(88,468,930)	0	0	0	(88,468,930)	0
95925	43-1372307	Covenity Health Care of Kansas, Inc	(45,000,000)	0	0	0	(171,502,490)	0	0	0	(216,502,490)	0
95321	20-0229117	Covenity Health Care of Missouri, Inc	0	15,000,000	0	0	(96,538,731)	(2,954,753)	0	0	(99,493,484)	0
95555	54-1576305	Covenity Health Care of Nebraska, Inc	(15,000,000)	70,000,000	0	0	(100,919,801)	2,137,359	0	0	(98,782,442)	2,957,642
95408	55-0712129	Covenity Health Care of the Carolinas, Inc	(15,000,000)	0	0	0	(219,327,708)	0	0	0	(199,327,708)	0
95266	65-0453436	Covenity Health Care of Virginia, Inc	0	0	0	0	(127,100,482)	(550,402)	0	0	(127,650,884)	466,200
0	47-0854096	Covenity Health Care of West Virginia, Inc	0	0	0	0	(43,389,004)	0	0	0	(43,389,004)	0
90328	38-2242132	Covenity Health Plan of Florida, Inc	0	0	0	0	(58,959,640)	0	0	0	(58,959,640)	0
95646	52-1601446	Covenity HealthCare Management Corporation	0	0	0	0	(6,813,186)	0	0	0	(6,813,186)	0
0	47-0854096	Covenity Prescription Mgmt Services, Inc	0	0	0	0	(176,464,299)	0	(114,699)	0	(176,648,998)	0
0	52-2056201	First Health Life & Health Ins Co.	0	0	0	0	(2,638,123)	0	0	0	(2,638,123)	0
0	52-1601446	Group Dental Services of Maryland, Inc	0	0	0	0	4,202,501	0	0	0	4,202,501	0
13980	33-0052273	Health Re, Inc	(1,100,000)	0	0	0	(1,800,950)	0	0	0	(2,900,950)	0
0	46-2469464	HealthAmerica Pennsylvania Inc	(245,000,000)	0	0	0	(66,733,621)	257,691,506	0	0	(875,280,105)	0
95060	25-1284318	HealthAssurance Pennsylvania Inc	(30,000,000)	0	0	0	8,767,256	0	0	0	(21,232,744)	0
11102	23-2366731	HealthAssurance Pennsylvania, Inc	(19,500,000)	0	0	0	(263,688,924)	0	0	0	(283,188,924)	0

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**
SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred under Reinsurance Agreements	10 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken (Liability)
0	45-5527797	Horizon Behavioral Services LLC	1,100,000	0	0	0	0	0	0	1,100,000	0
0	46-0674828	Innovation Health Holdings, LLC	0	(12,600,000)	0	0	1,370,350	0	0	(11,229,650)	0
15097	46-0674828	Innovation Health Insurance Company	0	11,400,000	0	0	(45,485,504)	10,939,599	0	(23,145,905)	(98,240)
15098	46-0682197	Innovation Health Plan, Inc.	0	1,200,000	0	0	(10,463,392)	558,658	0	(8,704,534)	(51,925)
0	45-2944270	iTriage, LLC	0	0	0	0	11,136,524	0	0	11,136,524	0
0		Medicity, Inc.	0	0	0	0	200,000	0	0	200,000	0
0	72-1106596	Mental Health Associates, Inc.	0	0	0	0	2,958,199	0	0	2,958,199	0
12509	20-2516317	MHNet Life and Health Insurance Company	0	0	0	0	235,212	0	0	235,212	0
0	20-4276336	MHNet of Florida, Inc.	0	0	0	0	(26,199)	0	0	(26,199)	0
0	26-1582982	MHNet Specialty Services, LLC	0	0	0	0	113,733,641	0	0	113,733,641	0
0		PayFlex Systems USA, Inc.	0	0	0	0	34,588,727	0	0	34,588,727	0
0	9999999	Control Totals	0	0	0	0	0	0	0	0	0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING

Responses

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

APRIL FILING

- | | |
|--|------------|
| 5. Will the Management's Discussion and Analysis be filed by April 1? | <u>YES</u> |
| 6. Will the Supplemental Investment Risk Interrogatories be filed by April 1? | <u>YES</u> |
| 7. Will the Accident and Health Policy Experience Exhibit be filed by April 1? | <u>YES</u> |

JUNE FILING

- | | |
|--|---------------|
| 8. Will an audited financial report be filed by June 1? | <u>WAIVED</u> |
| 9. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? | <u>WAIVED</u> |

AUGUST FILING

- | | |
|--|---------------|
| 10. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1? | <u>WAIVED</u> |
|--|---------------|

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.

MARCH FILING

- | | |
|--|-----------|
| 11. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? | <u>NO</u> |
| 12. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC? | <u>NO</u> |
| 13. Will the Supplemental Property/Casualty data due March 1 be filed with the state of domicile and the NAIC? | <u>NO</u> |
| 14. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? | <u>NO</u> |
| 15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1? | <u>NO</u> |
| 16. Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Supplement be filed with the state of domicile and electronically with the NAIC by March 1? | <u>NO</u> |
| 17. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? | <u>NO</u> |
| 18. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partners be filed electronically with the NAIC by March 1? | <u>NO</u> |
| 19. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? | <u>NO</u> |
| 20. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1? | <u>NO</u> |

APRIL FILING

- | | |
|--|-----------|
| 21. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? | <u>NO</u> |
| 22. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC? | <u>NO</u> |
| 23. Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC? | <u>NO</u> |
| 24. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? | <u>NO</u> |
| 25. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? | <u>NO</u> |

AUGUST FILING

- | | |
|--|-----------|
| 26. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? | <u>NO</u> |
|--|-----------|

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

EXPLANATIONS:

BAR CODE:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11. The data for this supplement is not required to be filed.
- 12. The data for this supplement is not required to be filed.
- 13. The data for this supplement is not required to be filed.
- 14. The data for this supplement is not required to be filed.
- 15. The data for this supplement is not required to be filed.
- 16. The data for this supplement is not required to be filed.
- 17. The data for this supplement is not required to be filed.
- 18. The data for this supplement is not required to be filed.
- 19. The data for this supplement is not required to be filed.
- 20. The data for this supplement is not required to be filed.
- 21. The data for this supplement is not required to be filed.
- 22. The data for this supplement is not required to be filed.
- 23. The data for this supplement is not required to be filed.
- 24. The data for this supplement is not required to be filed.
- 25. The data for this supplement is not required to be filed.
- 26. The data for this supplement is not required to be filed.

• 1 3 1 7 4 2 0 1 5 2 2 0 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 2 2 1 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 2 2 2 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 3 6 0 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 2 0 5 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 2 0 7 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 4 2 0 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 3 7 1 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 3 7 0 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 3 6 5 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 2 2 4 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 2 2 5 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 2 2 6 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 3 0 6 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 2 1 1 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 2 1 3 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 2 1 6 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 2 1 7 0 0 0 0 0 •
• 1 3 1 7 4 2 0 1 5 2 3 9 0 0 0 0 0 •

**Overflow Page
NONE**

**Overflow Page
NONE**

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1 Amount	2 Percentage	3 Amount	4 Securities Lending Reinvested Collateral Amount	5 Total (Col. 3 + 4) Amount	6 Percentage
1. Bonds:						
1.1 U.S. treasury securities.....	499,442	16.5	499,442	0	499,442	16.5
1.2 U.S. government agency obligations (excluding mortgage-backed securities):						
1.21 Issued by U.S. government agencies.....	0	0.0	0	0	0	0.0
1.22 Issued by U.S. government sponsored agencies.....	0	0.0	0	0	0	0.0
1.3 Non-U.S. government (including Canada, excluding mortgage-backed securities).....	499,902	16.5	499,902	0	499,902	16.5
1.4 Securities issued by states, territories and possessions and political subdivisions in the U.S.:						
1.41 States, territories and possessions general obligations.....	0	0.0	0	0	0	0.0
1.42 Political subdivisions of states, territories and possessions and political subdivisions general obligations.....	0	0.0	0	0	0	0.0
1.43 Revenue and assessment obligations.....	0	0.0	0	0	0	0.0
1.44 Industrial development and similar obligations.....	0	0.0	0	0	0	0.0
1.5 Mortgage-backed securities (includes residential and commercial MBS):						
1.51 Pass-through securities:						
1.511 Issued or guaranteed by GNMA.....	0	0.0	0	0	0	0.0
1.512 Issued or guaranteed by FNMA and FHLMC.....	0	0.0	0	0	0	0.0
1.513 All other.....	0	0.0	0	0	0	0.0
1.52 CMOs and REMICs:						
1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA.....	0	0.0	0	0	0	0.0
1.522 Issued by non-U.S. Government issuers and collateralized by mortgage-based securities issued or guaranteed by agencies shown in Line 1.521.....	0	0.0	0	0	0	0.0
1.523 All other.....	0	0.0	0	0	0	0.0
2. Other debt and other fixed income securities (excluding short-term):						
2.1 Unaffiliated domestic securities (includes credit tenant loans and hybrid securities).....	499,857	16.5	499,857	0	499,857	16.5
2.2 Unaffiliated non-U.S. securities (including Canada).....	0	0.0	0	0	0	0.0
2.3 Affiliated securities.....	0	0.0	0	0	0	0.0
3. Equity interests:						
3.1 Investments in mutual funds.....	0	0.0	0	0	0	0.0
3.2 Preferred stocks:						
3.21 Affiliated.....	0	0.0	0	0	0	0.0
3.22 Unaffiliated.....	0	0.0	0	0	0	0.0
3.3 Publicly traded equity securities (excluding preferred stocks):						
3.31 Affiliated.....	0	0.0	0	0	0	0.0
3.32 Unaffiliated.....	0	0.0	0	0	0	0.0
3.4 Other equity securities:						
3.41 Affiliated.....	0	0.0	0	0	0	0.0
3.42 Unaffiliated.....	0	0.0	0	0	0	0.0
3.5 Other equity interests including tangible personal property under lease:						
3.51 Affiliated.....	0	0.0	0	0	0	0.0
3.52 Unaffiliated.....	0	0.0	0	0	0	0.0
4. Mortgage loans:						
4.1 Construction and land development.....	0	0.0	0	0	0	0.0
4.2 Agricultural.....	0	0.0	0	0	0	0.0
4.3 Single family residential properties.....	0	0.0	0	0	0	0.0
4.4 Multifamily residential properties.....	0	0.0	0	0	0	0.0
4.5 Commercial loans.....	0	0.0	0	0	0	0.0
4.6 Mezzanine real estate loans.....	0	0.0	0	0	0	0.0
5. Real estate investments:						
5.1 Property occupied by company.....	0	0.0	0	0	0	0.0
5.2 Property held for production of income (including \$.....0 of property acquired in satisfaction of debt).....	0	0.0	0	0	0	0.0
5.3 Property held for sale (including \$.....0 property acquired in satisfaction of debt).....	0	0.0	0	0	0	0.0
6. Contract loans.....	0	0.0	0	0	0	0.0
7. Derivatives.....	0	0.0	0	0	0	0.0
8. Receivables for securities.....	0	0.0	0	0	0	0.0
9. Securities lending (Line 10, Asset Page reinvested collateral).....	0	0.0	0	XXX	XXX	XXX
10. Cash, cash equivalents and short-term investments.....	1,529,601	50.5	1,529,601	0	1,529,601	50.5
11. Other invested assets.....	0	0.0	0	0	0	0.0
12. Total invested assets.....	3,028,802	100.0	3,028,802	0	3,028,802	100.0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE A - VERIFICATION BETWEEN YEARS
Real Estate

1. Book/adjusted carrying value, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition (Part 2, Column 6).....	0	
2.2 Additional investment made after acquisition (Part 2, Column 9).....	0	0
3. Current year change in encumbrances:		
3.1 Totals, Part 1, Column 13.....	0	
3.2 Totals, Part 3, Column 11.....	0	0
4. Total gain (loss) on disposals, Part 3, Column 18.....		0
5. Deduct amounts received on disposals, Part 3, Column 15.....		0
6. Total foreign exchange change in book/adjusted carrying value:	NONE	
6.1 Totals, Part 1, Column 15.....		0
6.2 Totals, Part 3, Column 13.....		0
7. Deduct current year's other-than-temporary impairment recognized:		
7.1 Totals, Part 1, Column 12.....	0	
7.2 Totals, Part 3, Column 10.....	0	0
8. Deduct current year's depreciation:		
8.1 Totals, Part 1, Column 11.....	0	
8.2 Totals, Part 3, Column 9.....	0	0
9. Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8).....		0
10. Deduct total nonadmitted amounts.....		0
11. Statement value at end of current period (Line 9 minus Line 10).....		0

SCHEDULE B - VERIFICATION BETWEEN YEARS
Mortgage Loans

1. Book value/recorded investment excluding accrued interest, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition (Part 2, Column 7).....	0	
2.2 Additional investment made after acquisition (Part 2, Column 8).....	0	0
3. Capitalized deferred interest and other:		
3.1 Totals, Part 1, Column 12.....	0	
3.2 Totals, Part 3, Column 11.....	0	0
4. Accrual of discount.....		0
5. Unrealized valuation increase (decrease):		
5.1 Totals, Part 1, Column 9.....	0	
5.2 Totals, Part 3, Column 8.....	0	0
6. Total gain (loss) on disposals, Part 3, Column 18.....	NONE	0
7. Deduct amounts received on disposals, Part 3, Column 15.....		0
8. Deduct amortization of premium and mortgage interest points and commitment fees.....		0
9. Total foreign exchange change in book value/recorded investment excluding accrued interest:		
9.1 Totals, Part 1, Column 13.....	0	
9.2 Totals, Part 3, Column 13.....	0	0
10. Deduct current year's other-than-temporary impairment recognized:		
10.1 Totals, Part 1, Column 11.....	0	
10.2 Totals, Part 3, Column 10.....	0	0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....		0
12. Total valuation allowance.....		0
13. Subtotal (Line 11 plus Line 12).....		0
14. Deduct total nonadmitted amounts.....		0
15. Statement value at end of current period (Line 13 minus Line 14).....		0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

1. Book/adjusted carrying value, December 31 of prior year.....		0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition (Part 2, Column 8).....	0	
2.2 Additional investment made after acquisition (Part 2, Column 9).....	0	0
3. Capitalized deferred interest and other:		
3.1 Totals, Part 1, Column 16.....	0	
3.2 Totals, Part 3, Column 12.....	0	0
4. Accrual of discount.....		0
5. Unrealized valuation increase (decrease):		
5.1 Totals, Part 1, Column 13.....	0	
5.2 Totals, Part 3, Column 9.....	0	0
6. Total gain (loss) on disposals, Part 3, Column 19.....		0
7. Deduct amounts received on disposals, Part 3, Column 16.....		0
8. Deduct amortization of premium and depreciation.....		0
9. Total foreign exchange change in book/adjusted carrying value:		
9.1 Totals, Part 1, Column 17.....	0	
9.2 Totals, Part 3, Column 14.....	0	0
10. Deduct current year's other-than-temporary impairment recognized:		
10.1 Totals, Part 1, Column 15.....	0	
10.2 Totals, Part 3, Column 11.....	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7+8+9-10).....		0
12. Deduct total nonadmitted amounts.....		0
13. Statement value at end of current period (Line 11 minus Line 12).....		0

NONE

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

1. Book/adjusted carrying value, December 31 of prior year.....		1,497,571
2. Cost of bonds and stocks acquired, Part 3, Column 7.....		0
3. Accrual of discount.....		1,630
4. Unrealized valuation increase (decrease):		
4.1 Part 1, Column 12.....	0	
4.2 Part 2, Section 1, Column 15.....	0	
4.3 Part 2, Section 2, Column 13.....	0	
4.4 Part 4, Column 11.....	0	0
5. Total gain (loss) on disposals, Part 4, Column 19.....		0
6. Deduct consideration for bonds and stocks disposed of, Part 4, Column 7.....		0
7. Deduct amortization of premium.....		0
8. Total foreign exchange change in book/adjusted carrying value:		
8.1 Part 1, Column 15.....	0	
8.2 Part 2, Section 1, Column 19.....	0	
8.3 Part 2, Section 2, Column 16.....	0	
8.4 Part 4, Column 15.....	0	0
9. Deduct current year's other-than-temporary impairment recognized:		
9.1 Part 1, Column 14.....	0	
9.2 Part 2, Section 1, Column 17.....	0	
9.3 Part 2, Section 2, Column 14.....	0	
9.4 Part 4, Column 13.....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....		1,499,201
11. Deduct total nonadmitted amounts.....		0
12. Statement value at end of current period (Line 10 minus Line 11).....		1,499,201

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE D - SUMMARY BY COUNTRY

Long-Term Bonds and Stocks OWNED December 31 of Current Year

Description		1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS Governments (Including all obligations guaranteed by governments)	1. United States.....	499,442	499,649	495,781	500,000
	2. Canada.....	0	0	0	0
	3. Other Countries.....	499,902	506,272	499,380	500,000
	4. Totals.....	999,344	1,005,921	995,161	1,000,000
U.S. States, Territories and Possessions (Direct and guaranteed)	5. Totals.....	0	0	0	0
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	6. Totals.....	0	0	0	0
U.S. Special Revenue and Special Assessment Obligations and All Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions	7. Totals.....	0	0	0	0
Industrial and Miscellaneous and Hybrid Securities (Unaffiliated)	8. United States.....	499,857	534,468	499,760	500,000
	9. Canada.....	0	0	0	0
	10. Other Countries.....	0	0	0	0
	11. Totals.....	499,857	534,468	499,760	500,000
Parent, Subsidiaries and Affiliates	12. Totals.....	0	0	0	0
	13. Total Bonds.....	1,499,201	1,540,389	1,494,921	1,500,000
PREFERRED STOCKS Industrial and Miscellaneous (Unaffiliated)	14. United States.....	0	0	0	
	15. Canada.....	0	0	0	
	16. Other Countries.....	0	0	0	
	17. Totals.....	0	0	0	
Parent, Subsidiaries and Affiliates	18. Totals.....	0	0	0	
	19. Total Preferred Stocks.....	0	0	0	
COMMON STOCKS Industrial and Miscellaneous (Unaffiliated)	20. United States.....	0	0	0	
	21. Canada.....	0	0	0	
	22. Other Countries.....	0	0	0	
	23. Totals.....	0	0	0	
Parent, Subsidiaries and Affiliates	24. Totals.....	0	0	0	
	25. Total Common Stocks.....	0	0	0	
	26. Total Stocks.....	0	0	0	
	27. Total Bonds and Stocks.....	1,499,201	1,540,389	1,494,921	

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 9.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
1. U.S. Governments											
1.1 NAIC 1	500,560	0	0	0	0	500,560	18.8	498,956	19.1	500,560	0
1.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
1.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
1.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
1.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
1.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
1.7 Totals	500,560	0	0	0	0	500,560	18.8	498,956	19.1	500,560	0
2. All Other Governments											
2.1 NAIC 1	499,902	0	0	0	0	499,902	18.8	499,794	19.1	499,902	0
2.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
2.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
2.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
2.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
2.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
2.7 Totals	499,902	0	0	0	0	499,902	18.8	499,794	19.1	499,902	0
3. U.S. States, Territories and Possessions, etc., Guaranteed											
3.1 NAIC 1	0	0	0	0	0	0	0.0	0	0.0	0	0
3.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
3.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
3.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
3.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
3.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
3.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed											
4.1 NAIC 1	0	0	0	0	0	0	0.0	0	0.0	0	0
4.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
4.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
4.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
4.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
4.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
4.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed											
5.1 NAIC 1	0	0	0	0	0	0	0.0	0	0.0	0	0
5.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
5.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
5.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
5.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
5.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
5.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 9.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
6. Industrial and Miscellaneous (unaffiliated)											
6.1 NAIC 1	1,159,571	0	0	0	0	1,159,571	43.6	1,13,578	42.6	1,159,571	0
6.2 NAIC 2	0	499,857	0	0	0	499,857	18.8	499,833	19.1	499,857	0
6.3 NAIC 3	0	0	0	0	0	0	0	0	0	0	0
6.4 NAIC 4	0	0	0	0	0	0	0	0	0	0	0
6.5 NAIC 5	0	0	0	0	0	0	0	0	0	0	0
6.6 NAIC 6	0	0	0	0	0	0	0	0	0	0	0
6.7 Totals	1,159,571	499,857	0	0	0	1,659,428	62.4	1,613,411	61.8	1,659,428	0
7. Hybrid Securities											
7.1 NAIC 1	0	0	0	0	0	0	0	0	0	0	0
7.2 NAIC 2	0	0	0	0	0	0	0	0	0	0	0
7.3 NAIC 3	0	0	0	0	0	0	0	0	0	0	0
7.4 NAIC 4	0	0	0	0	0	0	0	0	0	0	0
7.5 NAIC 5	0	0	0	0	0	0	0	0	0	0	0
7.6 NAIC 6	0	0	0	0	0	0	0	0	0	0	0
7.7 Totals	0	0	0	0	0	0	0	0	0	0	0
8. Parent, Subsidiaries and Affiliates											
8.1 NAIC 1	0	0	0	0	0	0	0	0	0	0	0
8.2 NAIC 2	0	0	0	0	0	0	0	0	0	0	0
8.3 NAIC 3	0	0	0	0	0	0	0	0	0	0	0
8.4 NAIC 4	0	0	0	0	0	0	0	0	0	0	0
8.5 NAIC 5	0	0	0	0	0	0	0	0	0	0	0
8.6 NAIC 6	0	0	0	0	0	0	0	0	0	0	0
8.7 Totals	0	0	0	0	0	0	0	0	0	0	0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 9.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
9. Total Bonds Current Year											
9.1 NAIC 1	(d) 2,160,033	499,857	0	0	0	2,160,033	81.2	XXX	XXX	2,160,033	0
9.2 NAIC 2	(e) 0	499,857	0	0	0	499,857	18.8	XXX	XXX	499,857	0
9.3 NAIC 3	(d) 0	0	0	0	0	0	0.0	XXX	0.0	0	0
9.4 NAIC 4	(d) 0	0	0	0	0	0	0.0	XXX	0.0	0	0
9.5 NAIC 5	(d) 0	0	0	0	0	0	0.0	XXX	0.0	0	0
9.6 NAIC 6	(d) 0	0	0	0	0	0	0.0	XXX	0.0	0	0
9.7 Totals	2,160,033	499,857	0	0	0	2,659,890	100.0	XXX	XXX	2,659,890	0
9.8 Line 9.7 as a % of Col. 6	81.2	18.8	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
10. Total Bonds Prior Year											
10.1 NAIC 1	1,114,590	997,738	499,833	0	0	XXX	XXX	2,112,328	80.9	998,750	1,113,578
10.2 NAIC 2	0	0	499,833	0	0	XXX	XXX	499,833	19.1	499,833	0
10.3 NAIC 3	0	0	0	0	0	0	0.0	XXX	0.0	0	0
10.4 NAIC 4	0	0	0	0	0	0	0.0	XXX	0.0	0	0
10.5 NAIC 5	0	0	0	0	0	0	0.0	XXX	0.0	0	0
10.6 NAIC 6	0	0	0	0	0	0	0.0	XXX	0.0	0	0
10.7 Totals	1,114,590	997,738	499,833	0	0	XXX	XXX	2,612,161	100.0	1,498,583	1,113,578
10.8 Line 10.7 as a % of Col. 8	42.7	38.2	19.1	0.0	0.0	XXX	XXX	100.0	XXX	57.4	42.6
11. Total Publicly Traded Bonds											
11.1 NAIC 1	2,160,033	499,857	0	0	0	2,160,033	81.2	998,750	38.2	2,160,033	XXX
11.2 NAIC 2	0	499,857	0	0	0	499,857	18.8	499,833	19.1	499,857	XXX
11.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.7 Totals	2,160,033	499,857	0	0	0	2,659,890	100.0	1,498,583	57.4	2,659,890	XXX
11.8 Line 11.7 as a % of Col. 6	81.2	18.8	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
11.9 Line 11.7 as a % of Line 9.7, Col. 6, Section 9	81.2	18.8	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
12. Total Privately Placed Bonds											
12.1 NAIC 1	0	0	0	0	0	0	0.0	1,113,578	42.6	XXX	0
12.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.7 Totals	0	0	0	0	0	0	0.0	1,113,578	42.6	XXX	0
12.8 Line 12.7 as a % of Col. 6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	113.578	42.6	XXX	0.0
12.9 Line 12.7 as a % of Line 9.7, Col. 6, Section 9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	113.578	42.6	XXX	0.0

(a) Includes \$.....0 freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.
(b) Includes \$.....0 current year, \$.....0 prior year of bonds with Z designations and \$.....0 current year, \$.....0 prior year of bonds with Z' designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z'" means the SVO could not evaluate the obligation because valuation procedures for the security class are under regulatory review.
(c) Includes \$.....0 current year, \$.....0 prior year of bonds with 5' designations and \$.....0 current year, \$.....0 prior year of bonds with 5" designations. "5'" means the NAIC designation was assigned by the SVO in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "5'" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.
(d) Includes the following amount of non-rated 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.

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Type and Subtype of Issues

	1	2	3	4	5	6	7	8	9	10	11
	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	Total Current Year	Column 6 as a % of Line 9.5	Total from Column 6 Prior Year	% from Col. 7 Prior Year	Publicly Traded	Total Privately Placed
1. U.S. Governments											
1.1 Issuer Obligations	500,560	0	0	0	0	500,560	18.8	498,956	19.1	500,560	0
1.2 Residential Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
1.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
1.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0	0	0	0	0
1.5 Totals	500,560	0	0	0	0	500,560	18.8	498,956	19.1	500,560	0
2. All Other Governments											
2.1 Issuer Obligations	499,902	0	0	0	0	499,902	18.8	499,794	19.1	499,902	0
2.2 Residential Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
2.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
2.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0	0	0	0	0
2.5 Totals	499,902	0	0	0	0	499,902	18.8	499,794	19.1	499,902	0
3. U.S. States, Territories and Possessions, Guaranteed											
3.1 Issuer Obligations	0	0	0	0	0	0	0	0	0	0	0
3.2 Residential Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
3.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
3.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0	0	0	0	0
3.5 Totals	0	0	0	0	0	0	0	0	0	0	0
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed											
4.1 Issuer Obligations	0	0	0	0	0	0	0	0	0	0	0
4.2 Residential Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
4.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
4.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0	0	0	0	0
4.5 Totals	0	0	0	0	0	0	0	0	0	0	0
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed											
5.1 Issuer Obligations	0	0	0	0	0	0	0	0	0	0	0
5.2 Residential Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
5.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
5.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0	0	0	0	0
5.5 Totals	0	0	0	0	0	0	0	0	0	0	0
6. Industrial and Miscellaneous (unaffiliated)											
6.1 Issuer Obligations	1,159,571	499,857	0	0	0	1,659,428	62.4	1,613,411	61.8	1,659,428	0
6.2 Residential Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
6.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
6.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0	0	0	0	0
6.5 Totals	1,159,571	499,857	0	0	0	1,659,428	62.4	1,613,411	61.8	1,659,428	0
7. Hybrid Securities											
7.1 Issuer Obligations	0	0	0	0	0	0	0	0	0	0	0
7.2 Residential Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
7.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
7.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0	0	0	0	0
7.5 Totals	0	0	0	0	0	0	0	0	0	0	0
8. Parent, Subsidiaries and Affiliates											
8.1 Issuer Obligations	0	0	0	0	0	0	0	0	0	0	0
8.2 Residential Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
8.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0	0	0	0	0
8.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0	0	0	0	0
8.5 Totals	0	0	0	0	0	0	0	0	0	0	0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 9.5	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
9. Total Bonds Current Year											
9.1 Issuer Obligations.....	2,160,033	499,857	0	0	0	2,659,890	100.0	XXX	XXX	2,659,890	0
9.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	0	0.0	XXX	XXX	0	0
9.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	0	0.0	XXX	XXX	0	0
9.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	0	0.0	XXX	XXX	0	0
9.5 Totals.....	2,160,033	499,857	0	0	0	2,659,890	100.0	XXX	XXX	2,659,890	0
9.6 Line 9.5 as a % of Col. 6.....	81.2	18.8	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
10. Total Bonds Prior Year											
10.1 Issuer Obligations.....	1,114,590	997,738	499,833	0	0	XXX	XXX	2,612,161	100.0	1,498,583	1,113,578
10.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	XXX	XXX	0	0.0	0	0
10.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	XXX	XXX	0	0.0	0	0
10.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	XXX	XXX	0	0.0	0	0
10.5 Totals.....	1,114,590	997,738	499,833	0	0	XXX	XXX	2,612,161	100.0	1,498,583	1,113,578
10.6 Line 10.5 as a % of Col. 8.....	42.7	38.2	19.1	0.0	0.0	XXX	XXX	100.0	XXX	57.4	42.6
11. Total Publicly Traded Bonds											
11.1 Issuer Obligations.....	2,160,033	499,857	0	0	0	2,659,890	100.0	1,498,583	57.4	2,659,890	XXX
11.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.5 Totals.....	2,160,033	499,857	0	0	0	2,659,890	100.0	1,498,583	57.4	2,659,890	XXX
11.6 Line 11.5 as a % of Col. 6.....	81.2	18.8	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
11.7 Line 11.5 as a % of Line 9.5, Col. 6, Section 9.....	81.2	18.8	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
12. Total Privately Placed Bonds											
12.1 Issuer Obligations.....	0	0	0	0	0	0	0.0	1,113,578	42.6	XXX	0
12.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.5 Totals.....	0	0	0	0	0	0	0.0	1,113,578	42.6	XXX	0
12.6 Line 12.5 as a % of Col. 6.....	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
12.7 Line 12.5 as a % of Line 9.5, Col. 6, Section 9.....	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE DA - VERIFICATION BETWEEN YEARS

Short-Term Investments

	1 Total	2 Bonds	3 Mortgage Loans	4 Other Short-term Investment Assets (a)	5 Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, December 31 of prior year.....	1,012	1,012	0	0	0
2. Cost of short-term investments acquired.....	44,686	44,686	0	0	0
3. Accrual of discount.....	0	0	0	0	0
4. Unrealized valuation increase (decrease).....	0	0	0	0	0
5. Total gain (loss) on disposals.....	0	0	0	0	0
6. Deduct consideration received on disposals.....	44,560	44,560	0	0	0
7. Deduct amortization of premium.....	0	0	0	0	0
8. Total foreign exchange change in book/adjusted carrying value.....	0	0	0	0	0
9. Deduct current year's other-than-temporary impairment recognized.....	0	0	0	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	1,118	1,118	0	0	0
11. Deduct total nonadmitted amounts.....	0	0	0	0	0
12. Statement value at end of current period (Line 10 minus Line 11).....	1,118	1,118	0	0	0

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment.....

Sch. DB - Pt. A - Verification
NONE

Sch. DB - Pt. B - Verification
NONE

Sch. DB - Pt. C - Sn. 1
NONE

Sch. DB - Pt. C - Sn. 2
NONE

Sch. DB - Verification
NONE

SCHEDULE E - VERIFICATION BETWEEN YEARS

Cash Equivalents

	1 Total	2 Bonds	3 Other (a)
1. Book/adjusted carrying value, December 31 of prior year.....	1,113,578	1,113,578	0
2. Cost of cash equivalents acquired.....	21,698,893	21,698,893	0
3. Accrual of discount.....	6,100	6,100	0
4. Unrealized valuation increase (decrease).....	0	0	0
5. Total gain (loss) on disposals.....	0	0	0
6. Deduct consideration received on disposals.....	21,659,000	21,659,000	0
7. Deduct amortization of premium.....	0	0	0
8. Total foreign exchange change in book/adjusted carrying value.....	0	0	0
9. Deduct current year's other-than-temporary impairment recognized.....	0	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	1,159,571	1,159,571	0
11. Deduct total nonadmitted amounts.....	0	0	0
12. Statement value at end of current period (Line 10 minus Line 11).....	1,159,571	1,159,571	0

(a) Indicate the category of such investments, for example, joint ventures, transportation equipment:.....

**Sch. A - Pt. 1
NONE**

**Sch. A - Pt. 2
NONE**

**Sch. A - Pt. 3
NONE**

**Sch. B - Pt. 1
NONE**

**Sch. B - Pt. 2
NONE**

**Sch. B - Pt. 3
NONE**

**Sch. BA - Pt. 1
NONE**

**Sch. BA - Pt. 2
NONE**

**Sch. BA - Pt. 3
NONE**

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE D - PART 1

Showing all Long-Term BONDS Owned December 31 of Current Year

1 CUSIP Identification	2 Description	3 Codes			6 NAIC Designation	7 Actual Cost	8 Rate Used to Obtain Fair Value	9 Fair Value	10 Par Value	11 Change in Book/Adjusted Carrying Value				15 Total Foreign Exchange in B/A C.V.	16 Rate of	17 Effective Rate of	18 When Paid	19 Admitted Amount Due & Accrued	20 Amount Rec. During Year	21 Acquired	22 Stated Contractual Maturity Date
		3	4	5						12 Unrealized Valuation Increase (Decrease)	13 Current Year's (Amortization)/ Accretion	14 Current Year's Other-Than- Temporary Impairment Recognized									
U.S. Government - Issuer Obligations																					
912828 VC 1	U.S. TREASURY NOTE/BOND					495,781	99,530	499,649	500,000	499,442	0	1,497	0	0	0.750	0.552	MIN	162	1,250	07/18/2013	05/15/2016
069999 AB 9	U.S. Government - Issuer Obligations					495,781	XXX	499,649	500,000	499,442	0	1,497	0	0	XXX	XXX	XXX	162	1,250	XXX	XXX
069999 Total - U.S. Government						495,781	XXX	499,649	500,000	499,442	0	1,497	0	0	XXX	XXX	XXX	162	1,250	XXX	XXX
All Other Governments - Issuer Obligations																					
308517 AB 9	KOREA FINANCE CORP - SR UNSECURED					499,380	101,754	506,272	500,000	499,902	0	109	0	0	3.750	3.273	MS	4,559	16,249	09/15/2010	09/20/2016
069999 AB 9	U.S. Government - Issuer Obligations					499,380	XXX	506,272	500,000	499,902	0	109	0	0	XXX	XXX	XXX	4,559	16,249	XXX	XXX
109999 Total - All Other Governments						499,380	XXX	506,272	500,000	499,902	0	109	0	0	XXX	XXX	XXX	4,559	16,249	XXX	XXX
Industrial & Miscellaneous (Unaffiliated) - Issuer Obligations																					
031182 BB 5	JAMVEA INC SR UNSECURED					499,760	105,844	534,468	500,000	499,857	0	24	0	0	4.500	4.506	MS	6,625	27,500	03/09/2010	03/15/2020
329999 Industrial & Miscellaneous (Unaffiliated) - Issuer Obligations						499,760	XXX	534,468	500,000	499,857	0	24	0	0	XXX	XXX	XXX	6,625	27,500	XXX	XXX
329999 Total - Industrial & Miscellaneous (Unaffiliated)						499,760	XXX	534,468	500,000	499,857	0	24	0	0	XXX	XXX	XXX	6,625	27,500	XXX	XXX
Total																					
779999 Total - Issuer Obligations						1,494,921	XXX	1,540,389	1,500,000	1,499,201	0	1,630	0	0	XXX	XXX	XXX	11,346	39,999	XXX	XXX
839999 Grand Total - Bonds						1,494,921	XXX	1,540,389	1,500,000	1,499,201	0	1,630	0	0	XXX	XXX	XXX	11,346	39,999	XXX	XXX

Sch. D - Pt. 2 - Sn. 1
NONE

Sch. D - Pt. 2 - Sn. 2
NONE

Sch. D - Pt. 3
NONE

Sch. D - Pt. 4
NONE

Sch. D - Pt. 5
NONE

Sch. D - Pt. 6 - Sn. 1
NONE

Sch. D - Pt. 6 - Sn. 2
NONE

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE DA - PART 1

Showing all SHORT-TERM INVESTMENTS Owned December 31 of Current Year

1 CUSIP Identification	2 Description	3 Codes		5 Date Acquired	6 Name of Vendor	7 Maturity Date	8 Book/Adjusted Carrying Value	9 Unrealized Valuation Increase (Decrease)	10 Current Year's (Amortization) / Accretion	11 Current Year's Temporary Impairment Recognized	12 Total Foreign Exchange Change in B./A.C.V.	13 Par Value	14 Actual Cost	Interest					21 Paid for Accrued Interest			
		15 Amount Due and Accrued as of 31 of Current Year on Bond Not in Default	16 Nonamortized Due and Accrued											17 Rate of	18 Effective Rate of	19 When Paid	20 Amount Received During Year					
Emergit Money Market Mutual Funds																						
6093AN 50 0	FEDERATED INVESTORS INC TREASURY OBLIGAT			12/02/2015	Venous	XXX	1,118	0	0	0	0	XXX	1,118	0	0.000	0.014	XXX	XXX	0	0	0	0
8895989	Total - Emergit Money Market Mutual Funds						1,118	0	0	0	0	XXX	1,118	0	XXX	XXX	XXX	XXX	0	0	0	0
9195939	Total - Short-Term Investments						1,118	0	0	0	0	XXX	1,118	0	XXX	XXX	XXX	XXX	0	0	0	0

**Sch. DB - Pt. A - Sn. 1
NONE**

**Sch. DB - Pt. A - Sn. 2
NONE**

**Sch. DB - Pt. B - Sn. 1
NONE**

**Sch. DB - Pt. B - Sn. 2
NONE**

**Sch. DB - Pt. D - Sn. 1
NONE**

**Sch. DB-Pt. D-Sn. 2
NONE**

**Sch. DL - Pt. 1
NONE**

**Sch. DL - Pt. 2
NONE**

Statement as of December 31, 2015 of the **Aetna Better Health Inc. (a Connecticut corporation)**
SCHEDULE E - PART 1 - CASH

1	2	3	4	5	6	7
Depository	Code	Rate of Interest	Amount of Interest Received During Year	Amount of Interest Accrued December 31 of Current Year	Balance	
Open Depositories						
Bank of America..... Charlotte, NC.....		0.000	0	0	368,912	XXX
0199999 Total - Open Depositories.....	XXX	XXX	0	0	368,912	XXX
0399999 Total Cash on Deposit.....	XXX	XXX	0	0	368,912	XXX
0599999 Total Cash.....	XXX	XXX	0	0	368,912	XXX

TOTALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR

1. January.....	361,140	4. April.....	360,126	7. July.....	381,015	10. October.....	373,094
2. February.....	362,074	5. May.....	366,740	8. August.....	382,661	11. November.....	373,501
3. March.....	362,176	6. June.....	379,115	9. September.....	371,288	12. December.....	368,912

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned December 31 of Current Year

1	2	3	4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
Bonds, Industrials and Miscellaneous (Unaffiliated) - Issuer Obligations							
NEXTERA ENERGY CAP HUDOS CP 4 (7)		12/22/2015	0.700	01/22/2016	1,159,571	0	0
3295999 - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations					1,159,571	0	0
3859999 - Total - Industrial and Miscellaneous (Unaffiliated)					1,159,571	0	0
Total Bonds							
7199999 - Subtotals - Issuer Obligations					1,159,571	0	0
8399999 - Subtotals - Bonds					1,159,571	0	0
8899999 - Total - Cash Equivalents					1,159,571	0	0

Statement as of December 31, 2015 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE E - PART 3 - SPECIAL DEPOSITS

	1	2	Deposits for the Benefit of All Policyholders		All Other Special Deposits	
			3	4	5	6
States, Etc.	Type of Deposit	Purpose of Deposit	Book/Adjusting Carrying Value	Fair Value	Book/Adjusting Carrying Value	Fair Value
1. Alabama.....	AL		0	0	0	0
2. Alaska.....	AK		0	0	0	0
3. Arizona.....	AZ		0	0	0	0
4. Arkansas.....	AR		0	0	0	0
5. California.....	CA		0	0	0	0
6. Colorado.....	CO		0	0	0	0
7. Connecticut.....	CT	RSD by INS CODE 38A-193	499,442	499,649	0	0
8. Delaware.....	DE		0	0	0	0
9. District of Columbia.....	DC		0	0	0	0
10. Florida.....	FL		0	0	0	0
11. Georgia.....	GA		0	0	0	0
12. Hawaii.....	HI		0	0	0	0
13. Idaho.....	ID		0	0	0	0
14. Illinois.....	IL		0	0	0	0
15. Indiana.....	IN		0	0	0	0
16. Iowa.....	IA		0	0	0	0
17. Kansas.....	KS		0	0	0	0
18. Kentucky.....	KY		0	0	0	0
19. Louisiana.....	LA		0	0	0	0
20. Maine.....	ME		0	0	0	0
21. Maryland.....	MD		0	0	0	0
22. Massachusetts.....	MA		0	0	0	0
23. Michigan.....	MI		0	0	0	0
24. Minnesota.....	MN		0	0	0	0
25. Mississippi.....	MS		0	0	0	0
26. Missouri.....	MO		0	0	0	0
27. Montana.....	MT		0	0	0	0
28. Nebraska.....	NE		0	0	0	0
29. Nevada.....	NV		0	0	0	0
30. New Hampshire.....	NH		0	0	0	0
31. New Jersey.....	NJ		0	0	0	0
32. New Mexico.....	NM		0	0	0	0
33. New York.....	NY		0	0	0	0
34. North Carolina.....	NC		0	0	0	0
35. North Dakota.....	ND		0	0	0	0
36. Ohio.....	OH		0	0	0	0
37. Oklahoma.....	OK		0	0	0	0
38. Oregon.....	OR		0	0	0	0
39. Pennsylvania.....	PA		0	0	0	0
40. Rhode Island.....	RI		0	0	0	0
41. South Carolina.....	SC		0	0	0	0
42. South Dakota.....	SD		0	0	0	0
43. Tennessee.....	TN		0	0	0	0
44. Texas.....	TX		0	0	0	0
45. Utah.....	UT		0	0	0	0
46. Vermont.....	VT		0	0	0	0
47. Virginia.....	VA		0	0	0	0
48. Washington.....	WA		0	0	0	0
49. West Virginia.....	WV		0	0	0	0
50. Wisconsin.....	WI		0	0	0	0
51. Wyoming.....	WY		0	0	0	0
52. American Samoa.....	AS		0	0	0	0
53. Guam.....	GU		0	0	0	0
54. Puerto Rico.....	PR		0	0	0	0
55. US Virgin Islands.....	VI		0	0	0	0
56. Northern Mariana Islands.....	MP		0	0	0	0
57. Canada.....	CAN		0	0	0	0
58. Aggregate Alien and Other.....	XXX	XXX	0	0	0	0
59. Total.....	XXX	XXX	499,442	499,649	0	0
DETAILS OF WRITE-INS						
5801.....			0	0	0	0
5802.....			0	0	0	0
5803.....			0	0	0	0
5898. Summary of remaining write-ins for line 58 from overflow page.....	XXX	XXX	0	0	0	0
5899. Total (Lines 5801 thru 5803+5898) (Line 58 above).....	XXX	XXX	0	0	0	0

**2015 ALPHABETICAL INDEX
HEALTH ANNUAL STATEMENT BLANK**

Analysis of Operations By Lines of Business	7	Schedule D – Part 6 – Section 2	E16
Assets	2	Schedule D – Summary By Country	SI04
Cash Flow	6	Schedule D – Verification Between Years	SI03
Exhibit 1 – Enrollment By Product Type for Health Business Only	17	Schedule DA – Part 1	E17
Exhibit 2 – Accident and Health Premiums Due and Unpaid	18	Schedule DA – Verification Between Years	SI10
Exhibit 3 – Health Care Receivables	19	Schedule DB – Part A – Section 1	E18
Exhibit 3A – Health Care Receivables Collected and Accrued	20	Schedule DB – Part A – Section 2	E19
Exhibit 4 – Claims Unpaid and Incentive Pool, Withhold and Bonus	21	Schedule DB – Part A – Verification Between Years	SI11
Exhibit 5 – Amounts Due From Parent, Subsidiaries and Affiliates	22	Schedule DB – Part B – Section 1	E20
Exhibit 6 – Amounts Due To Parent, Subsidiaries and Affiliates	23	Schedule DB – Part B – Section 2	E21
Exhibit 7 – Part 1 – Summary of Transactions With Providers	24	Schedule DB – Part B – Verification Between Years	SI11
Exhibit 7 – Part 2 – Summary of Transactions With Intermediaries	24	Schedule DB – Part C – Section 1	SI12
Exhibit 8 – Furniture, Equipment and Supplies Owned	25	Schedule DB – Part C – Section 2	SI13
Exhibit of Capital Gains (Losses)	15	Schedule DB – Part D – Section 1	E22
Exhibit of Net Investment Income	15	Schedule DB – Part D – Section 2	E23
Exhibit of Nonadmitted Assets	16	Schedule DB – Verification	SI14
Exhibit of Premiums, Enrollment and Utilization (State Page)	30	Schedule DL – Part 1	E24
Five-Year Historical Data	29	Schedule DL – Part 2	E25
General Interrogatories	27	Schedule E – Part 1 – Cash	E26
Jurat Page	1	Schedule E – Part 2 – Cash Equivalents	E27
Liabilities, Capital and Surplus	3	Schedule E – Part 3 – Special Deposits	E28
Notes To Financial Statements	26	Schedule E – Verification Between Years	SI15
Overflow Page For Write-ins	44	Schedule S – Part 1 – Section 2	31
Schedule A – Part 1	E01	Schedule S – Part 2	32
Schedule A – Part 2	E02	Schedule S – Part 3 – Section 2	33
Schedule A – Part 3	E03	Schedule S – Part 4	34
Schedule A – Verification Between Years	SI02	Schedule S – Part 5	35
Schedule B – Part 1	E04	Schedule S – Part 6	36
Schedule B – Part 2	E05	Schedule S – Part 7	37
Schedule B – Part 3	E06	Schedule T – Part 2 – Interstate Compact	38
Schedule B – Verification Between Years	SI02	Schedule T – Premiums and Other Considerations	39
Schedule BA – Part 1	E07	Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group	40
Schedule BA – Part 2	E08	Schedule Y – Part 1A – Detail of Insurance Holding Company System	41
Schedule BA – Part 3	E09	Schedule Y – Part 2 – Summary of Insurer's Transactions With Any Affiliates	42
Schedule BA – Verification Between Years	SI03	Statement of Revenue and Expenses	4
Schedule D – Part 1	E10	Summary Investment Schedule	SI01
Schedule D – Part 1A – Section 1	SI05	Supplemental Exhibits and Schedules Interrogatories	43
Schedule D – Part 1A – Section 2	SI08	Underwriting and Investment Exhibit – Part 1	8
Schedule D – Part 2 – Section 1	E11	Underwriting and Investment Exhibit – Part 2	9
Schedule D – Part 2 – Section 2	E12	Underwriting and Investment Exhibit – Part 2A	10
Schedule D – Part 3	E13	Underwriting and Investment Exhibit – Part 2B	11
Schedule D – Part 4	E14	Underwriting and Investment Exhibit – Part 2C	12
Schedule D – Part 5	E15	Underwriting and Investment Exhibit – Part 2D	13
Schedule D – Part 6 – Section 1	E16	Underwriting and Investment Exhibit – Part 3	14



HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDING DECEMBER 31, 2014
OF THE CONDITION AND AFFAIRS OF

Aetna Better Health Inc. (a Connecticut corporation)

NAIC Group Code 0001 0001 NAIC Company Code 13174 Employer's ID Number 26-2867560
 (Current Period) (Prior Period)

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

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

Incorporated/Organized **June 25, 2008** Commenced Business **August 1, 2008**

Statutory Home Office **151 Farmington Avenue** **Hartford** **CT** ... **US** ... **06156**
 (Street and Number) (City, State, Country, and Zip Code)

Main Administrative Office **980 Jolly Road**
 (Street and Number)
 **Blue Bell** **PA** ... **US** ... **19422-1904** **800-872-3862**
 (City, State, Country, and Zip Code) (Area Code) (Telephone Number)

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

Primary Location of Books and Records **151 Farmington Avenue**
 (Street and Number)
 **Hartford** **CT** ... **US** ... **06156** **800-872-3862**
 (City, State, Country, and Zip Code) (Area Code) (Telephone Number)

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

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

OFFICERS

Pamela Sue Sedmak, President
Robert Mark Kessler, Secretary
Dawn Marie Schoen, Principal Financial Officer and Controller #

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

DIRECTORS OR TRUSTEES

Debra Jean Bacon #

Mary Louise Osborne

Pamela Sue Sedmak

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

(Signature)
Pamela Sue Sedmak
 President

(Signature)
Robert Mark Kessler
 Secretary

(Signature)
Dawn Marie Schoen
 Principal Financial Officer and Controller #

State of..... **Arizona**
 County of..... **Maricopa**
 Subscribed and sworn to before me this
04 day of **February** 2015

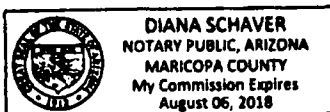
 NOTARY PUBLIC (Seal)

State of..... **Connecticut**
 County of..... **Hartford**
 Subscribed and sworn to before me this
28 day of **January** 2015

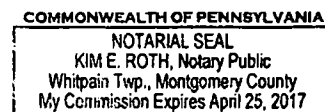
 NOTARY PUBLIC (Seal)

State of..... **Pennsylvania**
 County of..... **Montgomery**
 Subscribed and sworn to before me this
23 day of **February** 2015

 NOTARY PUBLIC (Seal)



Charlene Mancini
 NOTARY PUBLIC
 State of Connecticut
 My Commission Expires 4/30/2018



- 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

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D).....	1,497,571	0	1,497,571	1,505,019
2. Stocks (Schedule D):				
2.1 Preferred stocks.....	0	0	0	0
2.2 Common stocks.....	0	0	0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	0	0	0	0
4.2 Properties held for the production of income (less \$.....0 encumbrances).....	0	0	0	0
4.3 Properties held for sale (less \$.....0 encumbrances).....	0	0	0	0
5. Cash (\$.....900,913, Schedule E-Part 1), cash equivalents (\$.....1,113,578, Schedule E-Part 2) and short-term investments (\$.....1,012, Schedule DA).....	2,015,503	0	2,015,503	1,531,337
6. Contract loans (including \$.....0 premium notes).....	0	0	0	0
7. Derivatives (Schedule DB).....	0	0	0	0
8. Other invested assets (Schedule BA).....	0	0	0	0
9. Receivables for securities.....	0	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL).....	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).....	3,513,074	0	3,513,074	3,036,356
13. Title plants less \$.....0 charged off (for Title insurers only).....	0	0	0	0
14. Investment income due and accrued.....	11,346	0	11,346	11,396
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	0	0	0	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	0	0	0	0
15.3 Accrued retrospective premiums.....	0	0	0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	0	0	0	0
16.2 Funds held by or deposited with reinsured companies.....	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts.....	0	0	0	0
17. Amounts receivable relating to uninsured plans.....	0	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon.....	13,929	0	13,929	0
18.2 Net deferred tax asset.....	0	0	0	0
19. Guaranty funds receivable or on deposit.....	0	0	0	0
20. Electronic data processing equipment and software.....	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$.....0).....	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates.....	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates.....	0	0	0	386
24. Health care (\$.....0) and other amounts receivable.....	0	0	0	0
25. Aggregate write-ins for other than invested assets.....	0	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	3,538,349	0	3,538,349	3,048,138
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0	0
28. TOTALS (Lines 26 and 27).....	3,538,349	0	3,538,349	3,048,138

DETAILS OF WRITE-INS

1101.....	0	0	0	0
1102.....	0	0	0	0
1103.....	0	0	0	0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501.....	0	0	0	0
2502.....	0	0	0	0
2503.....	0	0	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	0	0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$.....0 reinsurance ceded).....	15,942	.0	15,942	8,723
2. Accrued medical incentive pool and bonus amounts.....	.0	.0	.0	.0
3. Unpaid claims adjustment expenses.....	.0	.0	.0	.0
4. Aggregate health policy reserves, including the liability of \$.....0 for medical loss ratio rebate per the Public Health Service Act.....	.0	.0	.0	.0
5. Aggregate life policy reserves.....	.0	.0	.0	.0
6. Property/casualty unearned premium reserve.....	.0	.0	.0	.0
7. Aggregate health claim reserves.....	.0	.0	.0	.0
8. Premiums received in advance.....	.0	.0	.0	.0
9. General expenses due or accrued.....	238	.0	238	207
10.1 Current federal and foreign income tax payable and interest thereon (including \$.....0 on realized capital gains (losses)).....	.0	.0	.0	126,577
10.2 Net deferred tax liability.....	878	.0	878	17,009
11. Ceded reinsurance premiums payable.....	.0	.0	.0	.0
12. Amounts withheld or retained for the account of others.....	.0	.0	.0	.0
13. Remittances and items not allocated.....	.0	.0	.0	.0
14. Borrowed money (including \$.....0 current) and interest thereon \$.....0 (including \$.....0 current).....	.0	.0	.0	.0
15. Amounts due to parent, subsidiaries and affiliates.....	543,234	.0	543,234	.0
16. Derivatives.....	.0	.0	.0	.0
17. Payable for securities.....	.0	.0	.0	.0
18. Payable for securities lending.....	.0	.0	.0	.0
19. Funds held under reinsurance treaties with (\$.....0 authorized reinsurers, \$.....0 unauthorized and \$.....0 certified reinsurers).....	.0	.0	.0	.0
20. Reinsurance in unauthorized and certified (\$.....0) companies.....	.0	.0	.0	.0
21. Net adjustments in assets and liabilities due to foreign exchange rates.....	.0	.0	.0	.0
22. Liability for amounts held under uninsured plans.....	.0	.0	.0	.0
23. Aggregate write-ins for other liabilities (including \$.....0 current).....	.0	.0	.0	.0
24. Total liabilities (Lines 1 to 23).....	560,292	.0	560,292	152,516
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	.0	.0
26. Common capital stock.....	XXX	XXX	10	10
27. Preferred capital stock.....	XXX	XXX	.0	.0
28. Gross paid in and contributed surplus.....	XXX	XXX	2,309,990	2,309,990
29. Surplus notes.....	XXX	XXX	.0	.0
30. Aggregate write-ins for other than special surplus funds.....	XXX	XXX	.0	.0
31. Unassigned funds (surplus).....	XXX	XXX	668,057	585,622
32. Less treasury stock at cost:				
32.1 .....0.000 shares common (value included in Line 26 \$.....0).....	XXX	XXX	.0	.0
32.2 .....0.000 shares preferred (value included in Line 27 \$.....0).....	XXX	XXX	.0	.0
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	2,978,057	2,895,622
34. Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	3,538,349	3,048,138

DETAILS OF WRITE-INS

2301. ....	.0	.0	.0	.0
2302. ....	.0	.0	.0	.0
2303. ....	.0	.0	.0	.0
2398. Summary of remaining write-ins for Line 23 from overflow page.....	.0	.0	.0	.0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above).....	.0	.0	.0	.0
2501.	XXX	XXX	.0	.0
2502.	XXX	XXX	.0	.0
2503.	XXX	XXX	.0	.0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	XXX	XXX	.0	.0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	XXX	XXX	.0	.0
3001.	XXX	XXX	.0	.0
3002.	XXX	XXX	.0	.0
3003.	XXX	XXX	.0	.0
3098. Summary of remaining write-ins for Line 30 from overflow page.....	XXX	XXX	.0	.0
3099. Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above).....	XXX	XXX	.0	.0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member months.....	XXX	.0	.0
2. Net premium income (including \$.....0 non-health premium income).....	XXX	.0	.0
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	.0	.0
4. Fee-for-service (net of \$.....0 medical expenses).....	XXX	.0	.0
5. Risk revenue.....	XXX	.0	.0
6. Aggregate write-ins for other health care related revenues.....	XXX	.0	.0
7. Aggregate write-ins for other non-health revenues.....	XXX	.0	.0
8. Total revenues (Lines 2 to 7).....	XXX	.0	.0
Hospital and Medical:			
9. Hospital/medical benefits.....	.0	(81,254)	(706,230)
10. Other professional services.....	.0	.0	.0
11. Outside referrals.....	.0	.0	.0
12. Emergency room and out-of-area.....	.0	.0	(53,258)
13. Prescription drugs.....	.0	.0	824
14. Aggregate write-ins for other hospital and medical.....	.0	.0	.0
15. Incentive pool, withhold adjustments and bonus amounts.....	.0	.0	.0
16. Subtotal (Lines 9 to 15).....	.0	(81,254)	(758,664)
Less:			
17. Net reinsurance recoveries.....	.0	.0	.0
18. Total hospital and medical (Lines 16 minus 17).....	.0	(81,254)	(758,664)
19. Non-health claims (net).....	.0	.0	.0
20. Claims adjustment expenses, including \$.....0 cost containment expenses.....	.0	.0	.0
21. General administrative expenses.....	.0	31	(6,476)
22. Increase in reserves for life and accident and health contracts including \$.....0 increase in reserves for life only).....	.0	.0	.0
23. Total underwriting deductions (Lines 18 through 22).....	.0	(81,223)	(765,140)
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX	81,223	765,140
25. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	.0	45,079	162,817
26. Net realized capital gains or (losses) less capital gains tax of \$.....16,862.....	.0	(16,562)	147,322
27. Net investment gains or (losses) (Lines 25 plus 26).....	.0	28,517	310,139
28. Net gain or (loss) from agents' or premium balances charged off ((amount recovered \$.....0) (amount charged off \$.....0)).....	.0	.0	.0
29. Aggregate write-ins for other income or expenses.....	.0	.0	.0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29).....	XXX	109,740	1,075,279
31. Federal and foreign income taxes incurred.....	XXX	43,657	308,799
32. Net income (loss) (Lines 30 minus 31).....	XXX	66,083	766,480

DETAILS OF WRITE-INS

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

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

STATEMENT OF REVENUE AND EXPENSES (Continued)

CAPITAL AND SURPLUS ACCOUNT	1	2
	Current Year	Prior Year
33. Capital and surplus prior reporting period.....	2,895,622	17,520,897
34. Net income or (loss) from Line 32.....	66,083	766,480
35. Change in valuation basis of aggregate policy and claim reserves.....	.0	.0
36. Change in net unrealized capital gains and (losses) less capital gains tax of \$.....0.....	.0	.0
37. Change in net unrealized foreign exchange capital gain or (loss).....	.0	.0
38. Change in net deferred income tax.....	16,131	(197,154)
39. Change in nonadmitted assets.....	221	505,399
40. Change in unauthorized and certified reinsurance.....	.0	.0
41. Change in treasury stock.....	.0	.0
42. Change in surplus notes.....	.0	.0
43. Cumulative effect of changes in accounting principles.....	.0	.0
44. Capital changes:		
44.1 Paid in.....	.0	.0
44.2 Transferred from surplus (Stock Dividend).....	.0	.0
44.3 Transferred to surplus.....	.0	.0
45. Surplus adjustments:		
45.1 Paid in.....	.0	(15,300,000)
45.2 Transferred to capital (Stock Dividend).....	.0	.0
45.3 Transferred from capital.....	.0	.0
46. Dividends to stockholders.....	.0	(400,000)
47. Aggregate write-ins for gains or (losses) in surplus.....	.0	.0
48. Net change in capital and surplus (Lines 34 to 47).....	82,435	(14,625,275)
49. Capital and surplus end of reporting period (Line 33 plus 48).....	2,978,057	2,895,622

DETAILS OF WRITE-INS

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

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

CASH FLOW

	1 Current Year	2 Prior Year
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....	.0	4,605,300
2. Net investment income.....	43,532	195,188
3. Miscellaneous income.....	221	505,399
4. Total (Lines 1 through 3).....	43,753	5,305,887
5. Benefit and loss related payments.....	(88,473)	1,412,850
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	.0	.0
7. Commissions, expenses paid and aggregate write-ins for deductions.....	.0	1,443
8. Dividends paid to policyholders.....	.0	.0
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	201,025	(340,800)
10. Total (Lines 5 through 9).....	112,552	1,073,493
11. Net cash from operations (Line 4 minus Line 10).....	(68,799)	4,232,394
CASH FROM INVESTMENTS		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	9,345	10,621,204
12.2 Stocks.....	.0	.0
12.3 Mortgage loans.....	.0	.0
12.4 Real estate.....	.0	.0
12.5 Other invested assets.....	.0	.0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....	.0	.9
12.7 Miscellaneous proceeds.....	.0	.0
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	9,345	10,621,213
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	.0	1,995,078
13.2 Stocks.....	.0	.0
13.3 Mortgage loans.....	.0	.0
13.4 Real estate.....	.0	.0
13.5 Other invested assets.....	.0	.0
13.6 Miscellaneous applications.....	.0	.0
13.7 Total investments acquired (Lines 13.1 to 13.6).....	.0	1,995,078
14. Net increase (decrease) in contract loans and premium notes.....	.0	.0
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	9,345	8,626,135
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....	.0	.0
16.2 Capital and paid in surplus, less treasury stock.....	.0	(15,300,000)
16.3 Borrowed funds.....	.0	.0
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....	.0	.0
16.5 Dividends to stockholders.....	.0	400,000
16.6 Other cash provided (applied).....	543,620	(35,477)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	543,620	(15,735,477)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	484,166	(2,876,948)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	1,531,337	4,408,285
19.2 End of year (Line 18 plus Line 19.1).....	2,015,503	1,531,337
Note: Supplemental disclosures of cash flow information for non-cash transactions:		
20.0001.....	.0	.0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital and Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plans	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Net premium income.....	0	0	0	0	0	0	0	0	0	0
2. Change in unearned premium reserves and reserve for rate credit.....	0	0	0	0	0	0	0	0	0	0
3. Fee-for-service (net of \$.....0 medical expenses).....	0	0	0	0	0	0	0	0	0	0
4. Risk revenue.....	0	0	0	0	0	0	0	0	0	0
5. Aggregate write-ins for other health care related revenues.....	0	0	0	0	0	0	0	0	0	0
6. Aggregate write-ins for other non-health care related revenues.....	0	0	0	0	0	0	0	0	0	0
7. Total revenues (Lines 1 to 6).....	0	0	0	0	0	0	0	0	0	0
8. Hospital/medical benefits.....	(81,254)	(1,912)	0	0	0	0	0	(79,342)	0	0
9. Other professional services.....	0	0	0	0	0	0	0	0	0	0
10. Outside referrals.....	0	0	0	0	0	0	0	0	0	0
11. Emergency room and out-of-area.....	0	0	0	0	0	0	0	0	0	0
12. Prescription drugs.....	0	0	0	0	0	0	0	0	0	0
13. Aggregate write-ins for other hospital and medical.....	0	0	0	0	0	0	0	0	0	0
14. Incentive pool, withhold adjustments and bonus amounts.....	0	0	0	0	0	0	0	0	0	0
15. Subtotal (Lines 8 to 14).....	(81,254)	(1,912)	0	0	0	0	0	(79,342)	0	0
16. Net reinsurance recoveries.....	0	0	0	0	0	0	0	0	0	0
17. Total hospital and medical (Lines 15 minus 16).....	(81,254)	(1,912)	0	0	0	0	0	(79,342)	0	0
18. Non-health claims (net).....	0	0	0	0	0	0	0	0	0	0
19. Claims adjustment expenses including \$.....0 cost containment expenses.....	0	0	0	0	0	0	0	0	0	0
20. General administrative expenses.....	31	0	0	0	0	0	0	31	0	0
21. Increase in reserves for accident and health contracts.....	0	0	0	0	0	0	0	0	0	0
22. Increase in reserve for life contracts.....	0	0	0	0	0	0	0	0	0	0
23. Total underwriting deductions (Lines 17 to 22).....	(81,223)	(1,912)	0	0	0	0	0	(79,311)	0	0
24. Net underwriting gain or (loss) (Line 7 minus Line 23).....	81,223	1,912	0	0	0	0	0	79,311	0	0

DETAILS OF WRITE-INS

0601.....	0	0	0	0	0	0	0	0	0	0
0502.....	0	0	0	0	0	0	0	0	0	0
0503.....	0	0	0	0	0	0	0	0	0	0
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0	0	0	0	0	0	0	0
0599. Total (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0	0	0	0	0	0	0	0	0
0601.....	0	0	0	0	0	0	0	0	0	0
0602.....	0	0	0	0	0	0	0	0	0	0
0603.....	0	0	0	0	0	0	0	0	0	0
0698. Summary of remaining write-ins for Line 6 from overflow page.....	0	0	0	0	0	0	0	0	0	0
0699. Total (Lines 0601 thru 0603 plus 0698) (Line 6 above).....	0	0	0	0	0	0	0	0	0	0
1301.....	0	0	0	0	0	0	0	0	0	0
1302.....	0	0	0	0	0	0	0	0	0	0
1303.....	0	0	0	0	0	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398) (Line 13 above).....	0	0	0	0	0	0	0	0	0	0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Ceded	4 Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical).....	0	0	0	0
2. Medicare supplement.....	0	0	0	0
3. Dental only.....	0	0	0	0
4. Vision only.....	0	0	0	0
5. Federal employees health benefits plan.....	0	0	0	0
6. Title XVII - Medicare.....	0	0	0	0
7. Title XIX - Medicaid.....	0	0	0	0
8. Other health.....	0	0	0	0
9. Health subtotal (Lines 1 through 8).....	0	0	0	0
10. Life.....	0	0	0	0
11. Property/casualty.....	0	0	0	0
12. Totals (Lines 9 to 11).....	0	0	0	0

NONE

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT
PART 2 - CLAIMS INCURRED DURING THE YEAR

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital and Medical)	Medicare Supplement	Denial Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Payments during the year:										
1.1 Direct.....	(88,473)	(1,912)	0	0	0	0	0	(86,561)	0	0
1.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
1.4 Net.....	(88,473)	(1,912)	0	0	0	0	0	(86,561)	0	0
2. Paid medical incentive pools and bonuses.....	0	0	0	0	0	0	0	0	0	0
3. Claim liability December 31, current year from Part 2A:										
3.1 Direct.....	15,942	0	0	0	0	0	0	15,942	0	0
3.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
3.4 Net.....	15,942	0	0	0	0	0	0	15,942	0	0
4. Claim reserve December 31, current year from Part 2D:										
4.1 Direct.....	0	0	0	0	0	0	0	0	0	0
4.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
4.4 Net.....	0	0	0	0	0	0	0	0	0	0
5. Accrued medical incentive pools and bonuses, current year.....	0	0	0	0	0	0	0	0	0	0
6. Net healthcare receivables (a).....	0	0	0	0	0	0	0	0	0	0
7. Amounts recoverable from reinsurers December 31, current year.....	0	0	0	0	0	0	0	0	0	0
8. Claim liability December 31, prior year from Part 2A:										
8.1 Direct.....	8,723	0	0	0	0	0	0	8,723	0	0
8.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
8.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
8.4 Net.....	8,723	0	0	0	0	0	0	8,723	0	0
9. Claim reserve December 31, prior year from Part 2D:										
9.1 Direct.....	0	0	0	0	0	0	0	0	0	0
9.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
9.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
9.4 Net.....	0	0	0	0	0	0	0	0	0	0
10. Accrued medical incentive pools and bonuses, prior year.....	0	0	0	0	0	0	0	0	0	0
11. Amounts recoverable from reinsurers December 31, prior year.....	0	0	0	0	0	0	0	0	0	0
12. Incurred benefits:										
12.1 Direct.....	(81,254)	(1,912)	0	0	0	0	0	(79,342)	0	0
12.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
12.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
12.4 Net.....	(81,254)	(1,912)	0	0	0	0	0	(79,342)	0	0
13. Incurred medical incentive pools and bonuses.....	0	0	0	0	0	0	0	0	0	0
(a) Excludes \$.....	0	0	0	0	0	0	0	0	0	0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Medical and Hospital)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Reported in process of adjustment:										
1.1 Direct.....	0	0	0	0	0	0	0	0	0	0
1.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
1.4 Net.....	0	0	0	0	0	0	0	0	0	0
2. Incurred but unreported:										
2.1 Direct.....	15,942	0	0	0	0	0	0	15,942	0	0
2.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
2.4 Net.....	15,942	0	0	0	0	0	0	15,942	0	0
3. Amounts withheld from paid claims and capitations:										
3.1 Direct.....	0	0	0	0	0	0	0	0	0	0
3.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
3.4 Net.....	0	0	0	0	0	0	0	0	0	0
4. Totals:										
4.1 Direct.....	15,942	0	0	0	0	0	0	15,942	0	0
4.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
4.4 Net.....	15,942	0	0	0	0	0	0	15,942	0	0

**Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT**

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid During the Year				Claim Reserve and Claim Liability December 31 of Current Year		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 December 31 of Prior Year	4 On Claims Incurred During the Year	5 On Claims Incurred During the Year	6 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical).....	(1,912)	0	0	0	0	(1,912)	0	
2. Medicare supplement.....	0	0	0	0	0	0	0	
3. Dental only.....	0	0	0	0	0	0	0	
4. Vision only.....	0	0	0	0	0	0	0	
5. Federal employees health benefits plan.....	0	0	0	0	0	0	0	
6. Title XVIII - Medicare.....	0	0	0	0	0	0	0	
7. Title XIX - Medicaid.....	(86,561)	0	15,942	0	0	(70,619)	8,723	
8. Other health.....	0	0	0	0	0	0	0	
9. Health subtotal (Lines 1 to 8).....	(88,473)	0	15,942	0	0	(72,531)	8,723	
10. Healthcare receivables (a).....	0	0	0	0	0	0	0	
11. Other non-health.....	0	0	0	0	0	0	0	
12. Medical incentive pools and bonus amounts.....	0	0	0	0	0	0	0	
13. Totals (Lines 9 - 10 + 11 + 12).....	(88,473)	0	15,942	0	0	(72,531)	8,723	

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

**Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
 UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS
 (000 Omitted)**

SECTION A - PAID HEALTH CLAIMS - GRAND TOTAL

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2010	2 2011	3 2012	4 2013	5 2014
1. Prior.....	21,987	22,611	22,611	22,581	22,581
2. 2010.....	178,662	202,988	203,482	203,452	203,452
3. 2011.....	XXX	189,817	212,388	213,871	213,783
4. 2012.....	XXX	XXX	0	0	0
5. 2013.....	XXX	XXX	XXX	0	0
6. 2014.....	XXX	XXX	XXX	XXX	0

SECTION B - INCURRED HEALTH CLAIMS - GRAND TOTAL

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2010	2 2011	3 2012	4 2013	5 2014
1. Prior.....	799	751	751	750	22,581
2. 2010.....	206,496	204,886	203,656	203,452	203,452
3. 2011.....	XXX	217,211	214,404	213,880	213,799
4. 2012.....	XXX	XXX	0	0	0
5. 2013.....	XXX	XXX	XXX	0	0
6. 2014.....	XXX	XXX	XXX	XXX	0

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - GRAND TOTAL

Years in Which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claim Payments	3 Claim Adjustment Expense Payments	4 Percent (Col. 3/2)	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 Percent (Col. 5/1)	7 Claims Unpaid	8 Unpaid Claim Adjustment Expense	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5 + 7 + 8)	10 Percent (Col. 9/1)
1. 2010.....	229,382	203,452	4,182	2.1	207,634	90.5	0	0	207,634	90.5
2. 2011.....	244,066	213,783	5,425	2.5	219,208	89.8	16	0	219,224	89.8
3. 2012.....	(673)	0	0	0.0	0	0.0	0	0	0	0.0
4. 2013.....	0	0	0	0.0	0	0.0	0	0	0	0.0
5. 2014.....	0	0	0	0.0	0	0.0	0	0	0	0.0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT
PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS
(000 Omitted)

SECTION A - PAID HEALTH CLAIMS - HOSPITAL AND MEDICAL

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2010	2 2011	3 2012	4 2013	5 2014
1. Prior.....	751	751	751	750	750
2. 2010.....	4,518	5,017	5,030	5,028	5,028
3. 2011.....	XXX	5,356	4,523	4,518	4,516
4. 2012.....	XXX	XXX	.0	.0	.0
5. 2013.....	XXX	XXX	XXX	.0	.0
6. 2014.....	XXX	XXX	XXX	XXX	.0

SECTION B - INCURRED HEALTH CLAIMS - HOSPITAL AND MEDICAL

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2010	2 2011	3 2012	4 2013	5 2014
1. Prior.....	751	751	751	750	750
2. 2010.....	799	5,044	5,030	5,028	5,028
3. 2011.....	5,133	5,787	4,540	4,518	4,516
4. 2012.....	XXX	XXX	.0	.0	.0
5. 2013.....	XXX	XXX	XXX	.0	.0
6. 2014.....	XXX	XXX	XXX	XXX	.0

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - HOSPITAL AND MEDICAL

Years in Which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claim Payments	Claim Adjustment Expense Payments	Percent (Col. 3/2)	Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	Percent (Col. 5/1)	Claims Unpaid	Unpaid Claim Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5 + 7 + 8)	Percent (Col. 9/1)
1. 2010.....	7,637	5,028	107	2.1	5,135	67.2	.0	.0	5,135	67.2
2. 2011.....	3,637	4,516	159	3.5	4,675	128.5	.0	.0	4,675	128.5
3. 2012.....	1,669	.0	.0	0.0	.0	0.0	.0	.0	.0	0.0
4. 2013.....	.0	.0	.0	0.0	.0	0.0	.0	.0	.0	0.0
5. 2014.....	.0	.0	.0	0.0	.0	0.0	.0	.0	.0	0.0

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Medicare Supp.
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Medicare Supp.
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Medicare Supp.
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Dental
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Dental
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Dental
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Vision
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Vision
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Vision
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Fed Emp Health
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Fed Emp Health
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Fed Emp Health
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Medicare
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Medicare
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Medicare
NONE**

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT
PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS
(000 Omitted)

SECTION A - PAID HEALTH CLAIMS - TITLE XIX - MEDICAID

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2010	2 2011	3 2012	4 2013	5 2014
1. Prior.....	21,236	21,660	21,860	21,831	21,831
2. 2010.....	174,144	197,971	198,424	198,424	198,424
3. 2011.....	XXX	184,461	207,875	209,353	209,267
4. 2012.....	XXX	XXX	0	0	0
5. 2013.....	XXX	XXX	XXX	0	0
6. 2014.....	XXX	XXX	XXX	XXX	0

SECTION B - INCURRED HEALTH CLAIMS - TITLE XIX - MEDICAID

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2010	2 2011	3 2012	4 2013	5 2014
1. Prior.....	0	0	0	0	21,831
2. 2010.....	201,363	199,642	198,626	198,424	198,424
3. 2011.....	XXX	211,424	209,664	209,362	209,263
4. 2012.....	XXX	XXX	0	0	0
5. 2013.....	XXX	XXX	XXX	0	0
6. 2014.....	XXX	XXX	XXX	XXX	0

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - TITLE XIX - MEDICAID

Years in Which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claim Payments	3 Claim Adjustment Expense Payments	4 Percent (Col. 3/2)	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 Percent (Col. 5/1)	7 Claims Unpaid	8 Unpaid Claim Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5 + 7 + 8)	10 Percent (Col. 9/1)
1. 2010.....	221,755	198,424	4,075	2.1	202,499	91.3	0	0	202,499	91.3
2. 2011.....	240,429	209,267	5,266	2.5	214,533	89.2	16	0	214,549	89.2
3. 2012.....	(2,342)	0	0	0.0	0	0.0	0	0	0	0.0
4. 2013.....	0	0	0	0.0	0	0.0	0	0	0	0.0
5. 2014.....	0	0	0	0.0	0	0.0	0	0	0	0.0

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Other
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Other
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Other
NONE**

**U & I Ex.-Pt.2D
NONE**

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
1. Rent (\$.....0 for occupancy of own building).....	0	0	0	0	0
2. Salaries, wages and other benefits.....	0	0	0	0	0
3. Commissions (less \$.....0 ceded plus \$.....0 assumed).....	0	0	0	0	0
4. Legal fees and expenses.....	0	0	0	0	0
5. Certifications and accreditation fees.....	0	0	0	0	0
6. Auditing, actuarial and other consulting services.....	0	0	0	0	0
7. Traveling expenses.....	0	0	0	0	0
8. Marketing and advertising.....	0	0	0	0	0
9. Postage, express and telephone.....	0	0	0	0	0
10. Printing and office supplies.....	0	0	0	0	0
11. Occupancy, depreciation and amortization.....	0	0	0	0	0
12. Equipment.....	0	0	0	0	0
13. Cost or depreciation of EDP equipment and software.....	0	0	0	0	0
14. Outsourced services including EDP, claims, and other services.....	0	0	0	0	0
15. Boards, bureaus and association fees.....	0	0	0	0	0
16. Insurance, except on real estate.....	0	0	0	0	0
17. Collection and bank service charges.....	0	0	0	0	0
18. Group service and administration fees.....	0	0	0	0	0
19. Reimbursements by uninsured plans.....	0	0	0	0	0
20. Reimbursements from fiscal intermediaries.....	0	0	0	0	0
21. Real estate expenses.....	0	0	0	0	0
22. Real estate taxes.....	0	0	0	0	0
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes.....	0	0	0	0	0
23.2 State premium taxes.....	0	0	0	0	0
23.3 Regulatory authority licenses and fees.....	0	0	31	0	31
23.4 Payroll taxes.....	0	0	0	0	0
23.5 Other (excluding federal income and real estate taxes).....	0	0	0	0	0
24. Investment expenses not included elsewhere.....	0	0	0	0	0
25. Aggregate write-ins for expenses.....	0	0	0	0	0
26. Total expenses incurred (Lines 1 to 25).....	0	0	31	0	(a) 31
27. Less expenses unpaid December 31, current year.....	0	0	238	0	238
28. Add expenses unpaid December 31, prior year.....	0	0	207	0	207
29. Amounts receivable relating to uninsured plans, prior year.....	0	0	0	0	0
30. Amounts receivable relating to uninsured plans, current year.....	0	0	0	0	0
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30).....	0	0	0	0	0

DETAILS OF WRITE-INS

2501.....	0	0	0	0	0
2502.....	0	0	0	0	0
2503.....	0	0	0	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0	0
2599. TOTALS (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	0	0	0

(a) Includes management fees of \$.....0 to affiliates and \$.....0 to non-affiliates.

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. government bonds.....	(a).....2,740	.....2,740
1.1 Bonds exempt from U.S. tax.....	(a).....0	.....0
1.2 Other bonds (unaffiliated).....	(a).....39,106	.....39,056
1.3 Bonds of affiliates.....	(a).....0	.....0
2.1 Preferred stocks (unaffiliated).....	(b).....0	.....0
2.11 Preferred stocks of affiliates.....	(b).....0	.....0
2.2 Common stocks (unaffiliated).....	(b).....0	.....0
2.21 Common stocks of affiliates.....	.....0	.....0
3. Mortgage loans.....	(c).....0	.....0
4. Real estate.....	(d).....0	.....0
5. Contract loans.....	.....0	.....0
6. Cash, cash equivalents and short-term investments.....	(e).....3,283	.....3,283
7. Derivative instruments.....	(f).....0	.....0
8. Other invested assets.....	.....0	.....0
9. Aggregate write-ins for investment income.....	.....0	.....0
10. Total gross investment income.....	.....45,129	.....45,079
11. Investment expenses.....		(g).....0
12. Investment taxes, licenses and fees, excluding federal income taxes.....		(g).....0
13. Interest expense.....		(h).....0
14. Depreciation on real estate and other invested assets.....		(i).....0
15. Aggregate write-ins for deductions from investment income.....		.....0
16. Total deductions (Lines 11 through 15).....		.....0
17. Net investment income (Line 10 minus Line 16).....		.....45,079

DETAILS OF WRITE-INS

0901. ....	.....0	.....0
0902. ....	.....0	.....0
0903. ....	.....0	.....0
0998. Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.....0	.....0
1501. ....	.....0	.....0
1502. ....	.....0	.....0
1503. ....	.....0	.....0
1598. Summary of remaining write-ins for Line 15 from overflow page.....	.....0	.....0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15 above).....	.....0	.....0

- (a) Includes \$.....1,619 accrual of discount less \$.....22 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (b) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.
- (c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (d) Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.
- (e) Includes \$.....3,282 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (f) Includes \$.....0 accrual of discount less \$.....0 amortization of premium.
- (g) Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to Segregated and Separate Accounts.
- (h) Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.
- (i) Includes \$.....0 depreciation on real estate and \$.....0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. government bonds.....	.....0	.....0	.....0	.....0	.....0
1.1 Bonds exempt from U.S. tax.....	.....0	.....0	.....0	.....0	.....0
1.2 Other bonds (unaffiliated).....	.....300	.....0	.....300	.....0	.....0
1.3 Bonds of affiliates.....	.....0	.....0	.....0	.....0	.....0
2.1 Preferred stocks (unaffiliated).....	.....0	.....0	.....0	.....0	.....0
2.11 Preferred stocks of affiliates.....	.....0	.....0	.....0	.....0	.....0
2.2 Common stocks (unaffiliated).....	.....0	.....0	.....0	.....0	.....0
2.21 Common stocks of affiliates.....	.....0	.....0	.....0	.....0	.....0
3. Mortgage loans.....	.....0	.....0	.....0	.....0	.....0
4. Real estate.....	.....0	.....0	.....0	.....0	.....0
5. Contract loans.....	.....0	.....0	.....0	.....0	.....0
6. Cash, cash equivalents and short-term investments.....	.....0	.....0	.....0	.....0	.....0
7. Derivative instruments.....	.....0	.....0	.....0	.....0	.....0
8. Other invested assets.....	.....0	.....0	.....0	.....0	.....0
9. Aggregate write-ins for capital gains (losses).....	.....0	.....0	.....0	.....0	.....0
10. Total capital gains (losses).....	.....300	.....0	.....300	.....0	.....0

DETAILS OF WRITE-INS

0901. ....	.....0	.....0	.....0	.....0	.....0
0902. ....	.....0	.....0	.....0	.....0	.....0
0903. ....	.....0	.....0	.....0	.....0	.....0
0998. Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0	.....0	.....0	.....0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.....0	.....0	.....0	.....0	.....0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....	0	0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks.....	0	0	0
2.2 Common stocks.....	0	0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....	0	0	0
3.2 Other than first liens.....	0	0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....	0	0	0
4.2 Properties held for the production of income.....	0	0	0
4.3 Properties held for sale.....	0	0	0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....	0	0	0
6. Contract loans.....	0	0	0
7. Derivatives (Schedule DB).....	0	0	0
8. Other invested assets (Schedule BA).....	0	0	0
9. Receivables for securities.....	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL).....	0	0	0
11. Aggregate write-ins for invested assets.....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	0	0	0
13. Title plants (for Title insurers only).....	0	0	0
14. Investment income due and accrued.....	0	0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....	0	0	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....	0	0	0
15.3 Accrued retrospective premiums.....	0	0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers.....	0	0	0
16.2 Funds held by or deposited with reinsured companies.....	0	0	0
16.3 Other amounts receivable under reinsurance contracts.....	0	0	0
17. Amounts receivable relating to uninsured plans.....	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon.....	0	0	0
18.2 Net deferred tax asset.....	0	0	0
19. Guaranty funds receivable or on deposit.....	0	0	0
20. Electronic data processing equipment and software.....	0	0	0
21. Furniture and equipment, including health care delivery assets.....	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates.....	0	0	0
23. Receivables from parent, subsidiaries and affiliates.....	0	0	0
24. Health care and other amounts receivable.....	0	221	221
25. Aggregate write-ins for other than invested assets.....	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	0	221	221
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0
28. TOTALS (Lines 26 and 27).....	0	221	221

DETAILS OF WRITE-INS

1101.....	0	0	0
1102.....	0	0	0
1103.....	0	0	0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0
2501.....	0	0	0
2502.....	0	0	0
2503.....	0	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	0

Ex. 1
NONE

Ex. 2
NONE

Ex. 3
NONE

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

EXHIBIT 3A - ANALYSIS OF HEALTH CARE RECEIVABLES COLLECTED AND ACCRUED

Type of Health Care Receivable	Health Care Receivables Collected During the Year		Health Care Receivables Accrued as of December 31 of Current Year		5 Health Care Receivables in Prior Years (Columns 1 + 3)	6 Estimated Health Care Receivables Accrued as of December 31 of Prior Year
	1 On Amounts Accrued Prior to January 1 of Current Year	2 On Amounts Accrued During the Year	3 On Amounts Accrued December 31 of Prior Year	4 On Amounts Accrued During the Year		
1. Pharmaceutical rebate receivables.....	0	0	0	0	0	0
2. Claim overpayment receivables.....	.221	0	0	0	.221	.221
3. Loans and advances to providers.....	0	0	0	0	0	0
4. Capitation arrangement receivables.....	0	0	0	0	0	0
5. Risk sharing receivables.....	0	0	0	0	0	0
6. Other health care receivables.....	0	0	0	0	0	0
7. Totals (Lines 1 through 6).....	.221	0	0	0	.221	.221

Note that the accrued amounts in Columns 3, 4, and 6 are the total health care receivables, not just the admitted portion.

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

	Aging Analysis of Unpaid Claims						
	1	2	3	4	5	6	7
	Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Unpaid (Reported)							
0599999. Unreported claim and other claim reserves							15,942
0799999. Total claims unpaid							15,942

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1	2	3	4	5	6	7	8
Name of Affiliate	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Current	Non-Current

NONE

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1	2	3	4	5
Affiliate	Description	Amount	Current	Non-Current
Amounts Due To Parent, Subsidiaries and Affiliates				
0199999	Schaller Anderson, LLC	543,234	543,234	0
0399999	Total gross payables	543,234	543,234	0
	See Notes to Financial Statements			

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

EXHIBIT 7 - PART 1 - SUMMARY OF TRANSACTIONS WITH PROVIDERS

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payment	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups.....	0	0.0	0	0.0	0	0
2. Intermediaries.....	0	0.0	0	0.0	0	0
3. All other providers.....	0	0.0	0	0.0	0	0
4. Total capitation payments.....	0	0.0	0	0.0	0	0
Other Payments:						
5. Fee-for-service.....	0	0.0	XXX	XXX	0	0
6. Contractual fee payments.....	(88,473)	100.0	XXX	XXX	0	(88,473)
7. Bonus/withhold arrangements - fee-for-service.....	0	0.0	XXX	XXX	0	0
8. Bonus/withhold arrangements - contractual fee payments.....	0	0.0	XXX	XXX	0	0
9. Non-contingent salaries.....	0	0.0	XXX	XXX	0	0
10. Aggregate cost arrangements.....	0	0.0	XXX	XXX	0	0
11. All other payments.....	0	0.0	XXX	XXX	0	0
12. Total other payments.....	(88,473)	100.0	XXX	XXX	0	(88,473)
13. Total (Line 4 plus Line 12).....	(88,473)	100.0	XXX	XXX	0	(88,473)

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

1 NAIC Code	2 Name of Intermediary	3 Capitation Paid	4 Average Monthly Capitation	5 Intermediary's Total Adjusted Capital	6 Intermediary's Authorized Control Level RBC
	NONE				

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
EXHIBIT 8 - FURNITURE, EQUIPMENT AND SUPPLIES OWNED

Description	1 Cost	2 Improvements	3 Accumulated Depreciation	4 Book Value Less Encumbrances	5 Assets Not Admitted	6 Net Admitted Assets
1. Administrative furniture and equipment.....	.....0	NONE	.....0	.....0	.....0	.....0
2. Medical furniture, equipment and fixtures.....	.....0	NONE	.....0	.....0	.....0	.....0
3. Pharmaceuticals and surgical supplies.....	.....0	.....0	.....0	.....0	.....0	.....0
4. Durable medical equipment.....	.....0	.....0	.....0	.....0	.....0	.....0
5. Other property and equipment.....	.....0	.....0	.....0	.....0	.....0	.....0
6. Total.....	.....0	.....0	.....0	.....0	.....0	.....0

NOTES TO FINANCIAL STATEMENTS

1. Summary of significant accounting policies**A. Accounting practices**

The accompanying statutory financial statements of Aetna Better Health Inc. (a Connecticut corporation) (the "Company"), indirectly a wholly-owned subsidiary of Aetna Inc. ("Aetna"), have been prepared in conformity with accounting practices prescribed or permitted by the State of Connecticut Insurance Department ("Connecticut Department") ("Connecticut Accounting Practices"). The Connecticut Department recognizes only statutory accounting practices prescribed or permitted by the State of Connecticut 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 capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Connecticut for the years ending December 31, 2014 and 2013 is as follows:

	State of Domicile	December 31, 2014	December 31, 2013
Net income (derived using Connecticut Accounting Practices)	CT	\$66,083	\$766,480
State of Connecticut Prescribed Practices: None	CT	-	-
State of Connecticut Permitted Practices: None	CT	-	-
Net income (derived using NAIC SAP)		\$66,083	\$766,480
Capital and surplus (derived using Connecticut Accounting Practices)	CT	\$2,978,057	\$2,895,622
State of Connecticut Prescribed Practices: None	CT	-	-
State of Connecticut Permitted Practices: None	CT	-	-
Capital and surplus (derived using NAIC SAP)		\$2,978,057	\$2,895,622

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

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

C. Accounting policies

The Company applies the following significant accounting policies:

(1) Cash, cash equivalents and short-term investments

Cash, cash equivalents and short-term investments, consisting primarily of money market instruments and other debt issues with an original maturity of up to one year, are carried at amortized cost. Short-term investments consist primarily of investments purchased with an original maturity date of greater than three months but less than one year. Cash equivalents consist of highly liquid instruments, which mature within three months from the date of purchase. The carrying amount of cash, cash equivalents and short-term investments approximates fair value.

(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 December 31, 2014 and 2013. Bonds include all investments whose maturity is greater than one year when purchased.

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, an 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.

For loan-backed and structured securities, 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.

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 our expectations and the risk that facts and circumstances factored into our 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.

- (3) The Company did not own any common stock at December 31, 2014 or 2013.
- (4) The Company did not own any preferred stock at December 31, 2014 or 2013.
- (5) The Company did not have any mortgage loans at December 31, 2014 or 2013.
- (6) Securities lending

The Company engages in securities lending by lending certain securities from its investment portfolio to other institutions for short periods of time. Borrowers must post cash collateral in the amount of 102% to 105% of the fair value of a loaned security. The fair value of the loaned securities is monitored on a daily basis, with additional collateral obtained or refunded as the fair value of the loaned securities fluctuates. The collateral is retained and invested by a lending agent according to the Company's guidelines to generate additional investment income for the Company. Pursuant to Statements of Statutory Accounting Principles ("SSAP") No. 103 - *Accounting for Transfers and Servicing of Financial Assets and Extinguishments of Liabilities* ("SSAP No. 103"), collateral required under the Company's securities lending program is carried on the Company's balance sheet as both a receivable and payable. Also pursuant to SSAP No. 103, if the collateral received from a counterparty is less than 100 percent at the reporting date, the difference between the actual collateral and 100 percent is nonadmitted. Collateral value is measured and compared to the loaned securities in aggregate by counterparty. The Company did not have any loaned securities at December 31, 2014 or 2013.

- (7) The Company did not have any investments in any subsidiaries or affiliated companies at December 31, 2014 or 2013.
- (8) The Company did not have any investments in any joint ventures, partnerships and limited liability companies at December 31, 2014 or 2013.
- (9) The Company did not have any derivatives at December 31, 2014 or 2013.

(10) Aggregate health policy reserves and related expenses

Premium deficiency reserves ("PDR") are recognized when it is probable that the expected future hospital and medical costs, including maintenance costs, will exceed anticipated future premiums and reinsurance recoveries on existing contracts. Where allowed, anticipated investment income is considered in the calculation of any PDR. For purposes of calculating a PDR, contracts are grouped in manner consistent with the method of acquiring, servicing and measuring the profitability of such contracts. The Company had no PDR at December 31, 2014 or 2013.

Unearned premium reserves ("UEP") are recognized for premiums that are recorded by the Company that have not been earned as of the statement date. The Company had no UEP at December 31, 2014 or 2013.

(11) Hospital and medical costs and claims adjustment expenses and related reserves

Hospital and medical costs consist principally of fee-for-service medical claims and capitation costs. Claims unpaid include the Company's estimate of payments to be made on claims reported but not yet paid and for health care services rendered to enrollees but not yet reported to the Company as of the Statutory Statements of Assets and Liabilities, Capital and Surplus date. Such estimates are developed using actuarial principles and assumptions, which consider, among other things, historical and projected claim submission and processing patterns, medical cost trends, historical utilization of health care services, claim inventory levels, changes in membership and product mix, seasonality and other relevant factors. The Company reflects changes in estimates in hospital and medical costs in the Statutory Statements of Revenue and Expenses in the period they are determined. Capitation costs, which are recorded in hospital and medical expenses in the Statutory Statements of Revenue and Expenses, represent contractual monthly fees paid to participating physicians and other medical providers for providing medical care, regardless of the medical services provided to the enrollee.

The Company uses the triangulation method to estimate reserves for claims incurred but not reported. The method of triangulation makes estimates of completion factors that are then applied to the total paid claims (net of coordination of benefits) to date for each incurral month. This provides an estimate of the total projected incurred claims and total amount outstanding or claims incurred but not reported (claims unpaid). For the most current dates of service where there is insufficient paid claim data to rely solely on the triangulation method, the Company examines cost and utilization trends as well as environmental factors, plan changes, provider contracts, changes in membership and/or benefits, and historical seasonal patterns to estimate the reserve required for these months.

Claims adjustment expenses, which include cost containment expenses, represent the costs incurred related to the claim settlement process such as costs to record, process and adjust claims. These expenses are included in the Company's management agreement with an affiliate described in Note 10.

(12) The Company did not modify its capitalization policy from the prior period.

(13) The Company did not have any pharmaceutical rebate receivables at December 31, 2014 or 2013.

(14) Premiums and amounts due and unpaid

Premium revenue for prepaid health care products is recognized as income in the month in which enrollees are entitled to health care services. The Company had no premium in 2014 or 2013.

(15) Investment income due and accrued

Accrued investment income consists primarily of interest. Interest is recognized on an accrual basis and dividends are recorded as earned on the ex-dividend date. Due and accrued income is not recorded on: (a) bonds in default; and (b) bonds delinquent more than 90 days or where collection of interest is improbable. At December 31, 2014 and 2013, the Company did not have any nonadmitted investment income due and accrued.

(16) Covered and uncovered expenses and related liabilities

Covered expenses and related liabilities represent costs for health care expenses for which a member is not responsible in the event of the insolvency of the Company. Uncovered expenses and related liabilities represent costs to the Company for health care services that are the obligation of the Company and for which a member may also be liable in the event of the Company's insolvency.

(17) Federal income taxes

The Company is included in the consolidated federal income tax return of its parent company, Aetna, and Aetna's other wholly-owned subsidiaries pursuant to the terms of a tax sharing agreement. In accordance with a written tax sharing agreement with an affiliate, the Company's current federal income tax provisions are generally computed as if the Company were filing a separate federal income tax return;

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

current income tax benefits, including those resulting from net operating losses, are recognized to the extent realized in the consolidated return. Pursuant to this agreement, the Company has the enforceable right to recoup federal income taxes paid in prior years in the event of future net losses, which it may incur, or to recoup its net losses carried forward as an offset to future net income subject to federal income taxes.

Income taxes are accounted for under the asset and liability method. Deferred income tax assets ("DTAs") and liabilities ("DTLs") represent the expected future tax consequences of temporary differences generated by statutory accounting as defined in SSAP No. 101, *Income Taxes – A Replacement of SSAP No. 10R and SSAP No. 10* ("SSAP No. 101"). DTAs and DTLs are measured using enacted tax rates expected to apply to taxable income in the years in which those temporary differences are expected to be recovered or settled. DTAs and DTLs are computed by means of identifying temporary differences which are measured using a balance sheet approach whereby statutory and tax basis balance sheets are compared. Current income tax recoverables include all current income taxes, including interest, reasonably expected to be recovered in a subsequent accounting period.

Pursuant to SSAP No. 101, gross DTAs are first reduced by a statutory valuation allowance adjustment to an amount that is more likely than not to be realized ("adjusted gross DTAs"). Adjusted gross DTAs are then admitted in an amount equal to the sum of paragraphs a. b. and c. below:

- a. Federal income taxes paid in prior years that can be recovered through loss carrybacks for existing temporary differences that reverse during a timeframe corresponding with Internal Revenue Service ("IRS") tax loss carryback provisions.
- b. The amount of adjusted gross DTAs, after the application of paragraph a. above, expected to be realized within the applicable period and that is no greater than the applicable percentage as determined using the applicable Realization Threshold Limitation Table. The applicable period refers to the number of years in which the DTA will reverse in the Company's tax return and the applicable percentage refers to the percentage of the Company's statutory capital and surplus as required to be shown on the statutory balance sheet adjusted to exclude any net DTAs, electronic data processing equipment and operating system software and any net positive goodwill ("Stat Cap ExDTA").

The Realization Threshold Limitation Tables allow DTAs to be admitted based upon either realization within 3 years and 15% percent of Stat Cap ExDTA, 1 year and 10% of Stat Cap ExDTA, or no DTA admitted pursuant to this paragraph b. In general, the Realization Threshold Limitation Tables allow the Company to admit more DTAs if total DTAs as reported by the Company are a smaller percentage of statutory capital and surplus.

- c. The amount of gross DTAs, after the application of paragraphs a. and b. above that can be offset against existing gross DTLs. In applying this offset, the Company considers the character (i.e. ordinary versus capital) of the DTAs and DTLs such that offsetting would be permitted in the tax return under existing enacted federal income tax laws and regulations and the reversal patterns of temporary differences.

Changes in DTAs and DTLs are recognized as a separate component of gains and losses in surplus ("Change in net deferred income tax") except to the extent allocated to changes in unrealized gains and losses. Changes in DTAs and DTLs allocated to unrealized gains and losses are netted against the related changes in unrealized gains and losses and are reported as "Change in net unrealized capital gains (losses)", also a separate component of gains and losses in surplus.

2. Accounting changes and corrections of errors

The Company did not have any accounting changes or corrections of errors in the years ending December 31, 2014 and 2013.

3. Business combinations and goodwill

The Company was not a part of any business combinations that involved the statutory purchase method, a statutory merger, an assumption reinsurance, or an impairment loss in the years ending December 31, 2014 and 2013.

4. Discontinued operations

The Company ceased operations effective December 31, 2011. The Company's contract with the State of Connecticut, Department of Social Services expired on December 31, 2011 and was not renewed.

5. Investments

- A. The Company did not have any mortgage loans, including Mezzanine Real Estate Loans, at December 31, 2014 or 2013.
- B. The Company did not have any debt restructuring in the years ending December 31, 2014 and 2013.

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

- C. The Company did not have any reverse mortgages at December 31, 2014 or 2013.
- D. Loan-Backed Securities
- (1) Prepayment assumptions for single class and multi-class mortgage backed/asset backed securities were obtained from industry market sources.
 - (2) The Company had no OTTI losses during 2014 on loan-backed and structured securities in which the Company had the (1) intent to sell, (2) did not have the intent and ability to retain for a period of time sufficient to recover the amortized cost basis or (3) present value of cash flows expected to be collected is less than the amortized cost basis of the securities in accordance with SSAP No. 43R, *Loan-Backed and Structured Securities*.
 - (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 December 31, 2014.
 - (4) The Company had no unrealized loss position on loan-backed and structured securities held by the Company at December 31, 2014.
- E. Repurchase Agreements and/or Securities Lending Transactions
- (1) The Company did not have any repurchase agreements or loaned securities transactions at December 31, 2014.
 - (2) The Company did not pledge any of its assets as collateral, which are classified as securities pledged to creditors as of December 31, 2014.
 - (3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or repledge as of December 31, 2014.
 - (4) The Company did not have securities lending transactions administered by an affiliated agent which is "one line" reported at December 31, 2014.
 - (5) The Company did not have any repurchase agreements, loaned securities or dollar repurchase agreements at December 31, 2014.
 - (6) The Company has not accepted collateral that is not permitted by contract or custom to sell or repledge as of December 31, 2014.
 - (7) The Company did not have any collateral for transactions that extend beyond one year from the reporting date.
- F. The Company did not have any real estate at December 31, 2014 or 2013.
- G. The Company did not have any low-income housing tax credits at December 31, 2014.

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**

H. Restricted Assets

(1) Restricted assets (including pledged):

Restricted Asset Category	1	2	3	4	5	6
	Total gross restricted from current year	Total gross restricted from prior year	Increase (decrease) (1 minus 2)	Total current year admitted restricted	Percentage gross restricted to total assets	Percentage admitted restricted to total admitted assets
a. Subject to contractual obligation for which liability is not shown	-	-	-	-	-	-
b. Collateral held under security lending agreements	-	-	-	-	-	-
c. Subject to repurchase agreements	-	-	-	-	-	-
d. Subject to reverse repurchase agreements	-	-	-	-	-	-
e. Subject to dollar repurchase agreements	-	-	-	-	-	-
f. Subject to dollar reverse repurchase agreements	-	-	-	-	-	-
g. Placed under option contracts	-	-	-	-	-	-
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	-	-	-	-	-	-
i. FHLB capital stock	-	-	-	-	-	-
j. On deposit with states	\$497,944	\$496,454	\$1,490	\$497,944	14.073%	14.073%
k. On deposit with other regulatory bodies	-	-	-	-	-	-
l. Pledged as collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	-
m. Pledged as collateral not captured in other categories	-	-	-	-	-	-
n. Other restricted assets	-	-	-	-	-	-
o. Total restricted assets	\$497,944	\$496,454	\$1,490	\$497,944	14.073%	14.073%

(2) The Company did not have any assets pledged as collateral not captured in other categories at December 31, 2014.

(3) The Company did not have any other restricted assets at December 31, 2014.

I. The Company did not have any working capital finance investments at December 31, 2014.

J. The Company did not have any offsetting and netting of financial assets as of December 31, 2014.

K. The Company did not have any structured notes at December 31, 2014.

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**

6. Joint ventures, partnerships, and limited liability companies

- A. The Company did not have any joint ventures, partnerships, or limited liability companies that exceeded 10% of its admitted assets at December 31, 2014 or 2013.
- B. The Company does not have any impaired investments in joint ventures, partnerships, or limited liability companies at December 31, 2014 or 2013.

7. Investment income

- A. and B.

There was no investment income due and accrued excluded from surplus at December 31, 2014 or 2013.

8. Derivative instruments

The Company did not have any derivative instruments at December 31, 2014 or 2013.

9. Income taxes

- A.

1. The components of the net DTAs recognized in the Company's Statutory Statements of Assets, Liabilities, Surplus and Other Funds are as follows:

	December 31, 2014		
	Ordinary	Capital	Total
(a) Gross DTAs	\$49	-	\$49
(b) Statutory valuation allowance adjustment	-	-	-
(c) Adjusted gross DTAs	49	-	49
(d) DTAs nonadmitted	-	-	-
(e) Subtotal net admitted DTAs	49	-	49
(f) DTLs	-	\$(927)	(927)
(g) Net admitted DTAs/(DTLs)	\$49	\$(927)	\$(878)

	December 31, 2013		
	Ordinary	Capital	Total
(a) Gross DTAs	\$110	-	\$110
(b) Statutory valuation allowance adjustment	-	-	-
(c) Adjusted gross DTAs	110	-	110
(d) DTAs nonadmitted	-	-	-
(e) Subtotal net admitted DTAs	110	-	110
(f) DTLs	-	\$(17,119)	(17,119)
(g) Net admitted DTAs/(DTLs)	\$110	\$(17,119)	\$(17,009)

	Change		
	Ordinary	Capital	Total
(a) Gross DTAs	\$(61)	-	\$(61)
(b) Statutory valuation allowance adjustment	-	-	-
(c) Adjusted gross DTAs	(61)	-	(61)
(d) DTAs nonadmitted	-	-	-
(e) Subtotal net admitted DTAs	(61)	-	(61)
(f) DTLs	-	16,192	16,192
(g) Net admitted DTAs/(DTLs)	\$(61)	\$16,192	\$16,131

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**

2. The amount of admitted gross DTAs admitted under each component of SSAP No. 101:

	December 31, 2014		
	Ordinary	Capital	Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$49	-	\$49
(b) Adjusted gross DTAs expected to be realized (excluding the amount of DTAs) after application of the threshold limitations (the lesser of 2(b)1 and 2(b)2 below)	-	-	-
1. Adjusted gross DTAs expected to realized following the balance sheet date	-	-	-
2. Adjusted gross DTAs allowed per limitation threshold	XXX	XXX	446,840
(c) Adjusted gross DTAs (excluding the amount of DTAs from 2(a) and 2(b) above) offset by gross DTLs	-	-	-
(d) DTAs admitted as the result of application of SSAP No. 101	\$49	-	\$49

	December 31, 2013		
	Ordinary	Capital	Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$110	-	\$110
(b) Adjusted gross DTAs expected to be realized (excluding the amount of DTAs) after application of the threshold limitations (the lesser of 2(b)1 and 2(b)2 below)	-	-	-
1. Adjusted gross DTAs expected to realized following the balance sheet date	-	-	-
2. Adjusted gross DTAs allowed per limitation threshold	XXX	XXX	434,343
(c) Adjusted gross DTAs (excluding the amount of DTAs from 2(a) and 2(b) above) offset by gross DTLs	-	-	-
(d) DTAs admitted as the result of application of SSAP No. 101	\$110	-	\$110

	Change		
	Ordinary	Capital	Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$(61)	-	\$(61)
(b) Adjusted gross DTAs expected to be realized (excluding the amount of DTAs) after application of the threshold limitations (the lesser of 2(b)1 and 2(b)2 below)	-	-	-
1. Adjusted gross DTAs expected to realized following the balance sheet date	-	-	-
2. Adjusted gross DTAs allowed per limitation threshold	XXX	XXX	12,497
(c) Adjusted gross DTAs (excluding the amount of DTAs from 2(a) and 2(b) above) offset by gross DTLs	-	-	-
(d) DTAs admitted as the result of application of SSAP No. 101	\$(61)	-	\$(61)

- 3.

	2014	2013
(a) Ratio percentage used to determine recovery period and threshold limitation amount	26,458%	27,499%
(b) Amount of adjusted capital and surplus used to determine recovery period threshold limitation in 2(b)2 above	\$2,978,935	\$2,895,622

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**

4. The impact of tax planning strategies is as follows:

	December 31, 2014		
	Ordinary	Capital	Total
(a) Determination of adjusted gross DTAs and net admitted DTAs, by tax character as a percentage			
1. Adjusted gross DTAs amount from Note 9A1(c)	\$49	-	\$49
2. Percentage of adjusted DTAs by tax character attributable to the impact of tax planning strategies	0%	0%	0%
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$49	-	\$49
4. Percentage of net admitted adjusted DTAs by tax character admitted because of the impact of tax planning strategies	0%	0%	0%

	December 31, 2013		
	Ordinary	Capital	Total
(a) Determination of adjusted gross DTAs and net admitted DTAs, by tax character as a percentage			
1. Adjusted gross DTAs amount from Note 9A1(c)	\$110	-	\$110
2. Percentage of adjusted DTAs by tax character attributable to the impact of tax planning strategies	0%	0%	0%
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$110	-	\$110
4. Percentage of net admitted adjusted DTAs by tax character admitted because of the impact of tax planning strategies	0%	0%	0%

	Change		
	Ordinary	Capital	Total
(a) Determination of adjusted gross DTAs and net admitted DTAs, by tax character as a percentage			
1. Adjusted gross DTAs amount from Note 9A1(c)	\$(61)	-	\$(61)
2. Percentage of adjusted DTAs by tax character attributable to the impact of tax planning strategies	0%	0%	0%
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$(61)	-	\$(61)
4. Percentage of net admitted adjusted DTAs by tax character admitted because of the impact of tax planning strategies	0%	0%	0%

(b) Does the Company's tax-planning strategies include the use of reinsurance? Yes No

B. There are no DTLs that were not recognized at December 31, 2014 or 2013.

C. Current income taxes incurred consist of the following major components:

	December 31,		Change
	2014	2013	
1. Current income tax			
(a) Federal	\$43,657	\$308,799	\$(265,142)
(b) Foreign	-	-	-
(c) Subtotal	43,657	308,799	(265,142)
(d) Federal income tax on net capital gains	16,862	75,705	(58,843)
(f) Other	-	-	-
(g) Federal and foreign income taxes incurred	\$60,519	\$384,504	\$(323,985)

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**

	December 31,		Change
	2014	2013	
2. DTAs:			
(a) Ordinary			
Claims unpaid	\$49	\$33	\$16
Provider advances - nonadmitted	-	77	(77)
Total ordinary DTAs	49	110	(61)
(b) Statutory valuation allowance adjustment	-	-	-
(c) Nonadmitted ordinary DTAs	-	-	-
(d) Admitted ordinary DTAs	49	110	(61)
(e) Capital			
Investments - impairments	-	-	-
Total admitted capital DTAs	-	-	-
(f) Statutory valuation allowance adjustment	-	-	-
(g) Nonadmitted capital DTAs	-	-	-
(h) Admitted capital DTAs	-	-	-
(i) Admitted DTAs	49	110	(61)
3. DTLs:			
(a) Ordinary			
Ordinary DTLs	-	-	-
(b) Capital			
Bonds	-	362	(362)
Investments - deferred	927	16,757	(15,830)
Capital DTLs	927	17,119	(16,192)
(c) Total DTLs	927	17,119	(16,192)
4. Net admitted DTAs	\$(878)	\$(17,009)	\$16,131

The change in net deferred income taxes is comprised of the following:

(in thousands)	December 31,		Change
	2014	2013	
Gross DTAs	\$49	\$110	\$(61)
Less: Gross DTLs	(927)	(17,119)	16,192
Net DTAs	\$(878)	\$(17,009)	16,131
Less: Tax effect of unrealized gains (losses)			-
Change in net deferred income tax			\$16,131

The valuation allowance adjustment to gross DTAs was \$0 for both December 31, 2014 and 2013.

- D. The provision for federal income taxes is different from that which would be obtained by applying the statutory federal income tax rate to income before income taxes. The items causing this difference were as follows:

	December 31, 2014	Effective tax rate	December 31, 2013	Effective tax rate
Provision computed at statutory rate	\$44,311	35.0%	\$402,844	35.0%
Change in nonadmitted assets	77	0.1%	176,890	15.4%
Prior year return to provision adjustment	-	0.0%	1,924	0.1%
Total	\$44,388	35.1%	\$581,658	50.5%
Federal and foreign income tax expense incurred	\$60,519	47.8%	\$384,504	33.4%
Change in net deferred income taxes	(16,131)	(12.7)%	197,154	17.1%
Total statutory income taxes	\$44,388	35.1%	\$581,658	50.5%

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

The transfer pricing adjustment allows taxpayers to apply different methods to price current period intercompany services at arm's length prices as compared to what would be charged to an unrelated entity, which results in a permanent deduction for tax reporting purposes.

E.

1. At December 31, 2014, the Company had no net capital loss or net operating loss carryforwards for tax purposes.
2. The amount of federal income taxes incurred that are available for recoupment in the event of future net losses is \$60,519 and \$382,580 for the years ended December 31, 2014 and 2013, respectively.
3. The Company did not report any deposits as admitted assets under Internal Revenue Code Section 6603 at December 31, 2014 and 2013.

F.

1. At December 31, 2014, the Company's Federal Income Tax Return was consolidated with the following entities:

Aetna Inc. - Parent Company	Coventry Health Care of Delaware, Inc.
@ Credentials Inc.	Coventry Health Care of Florida, Inc.
Active Health Management Inc.	Coventry Health Care of Georgia, Inc.
Adminco, Inc.	Coventry Health Care of Illinois, Inc.
Administrative Enterprises, Inc.	Coventry Health Care of Iowa, Inc.
AE Fourteen Incorporated	Coventry Health Care of Kansas, Inc.
Aetna ACO Holdings, Inc.	Coventry Health Care of Louisiana, Inc.
Aetna Better Health Inc. (Connecticut)	Coventry Health Care of Missouri, Inc.
Aetna Better Health Inc. (Florida)	Coventry Health Care of Nebraska, Inc.
Aetna Better Health Inc. (Georgia)	Coventry Health Care of Pennsylvania, Inc.
Aetna Better Health Inc. (Illinois)	Coventry Health Care of Texas, Inc.
Aetna Better Health Inc. (New Jersey)	Coventry Health Care of the Carolinas, Inc.
Aetna Better Health Inc. (New York)	Coventry Health Care of Virginia, Inc.
Aetna Better Health Inc. (Ohio)	Coventry Health Care of West Virginia, Inc.
Aetna Better Health Inc. (Pennsylvania)	Coventry Health Care Workers' Compensation, Inc.
Aetna Better Health Inc. (Tennessee)	Coventry Health Care, Inc.
Aetna Better Health of Michigan Inc.	Coventry Health Plan of Florida, Inc.
Aetna Better Health of Texas Inc.	Coventry HealthCare Management Corporation
Aetna Better Health, Inc. (Louisiana)	Coventry Management Services, Inc.
Aetna Dental Inc. (New Jersey)	Coventry Prescription Management Services, Inc.
Aetna Dental Inc. (Texas)	Coventry Rehabilitation Services, Inc.
Aetna Dental of California Inc.	Coventry Summit Health Plan, Inc.
Aetna Health and Life Insurance Company	Coventry Transplant Network, Inc.
Aetna Health Finance, Inc.	Delaware Physicians Care, Incorporated
Aetna Health Inc. (Connecticut)	First Health Group Corp.
Aetna Health Inc. (Florida)	First Health Life and Health Insurance Company
Aetna Health Inc. (Georgia)	First Script Network Services, Inc.
Aetna Health Inc. (Maine)	Florida Health Plan Administrators, LLC
Aetna Health Inc. (Michigan)	FOCUS Healthcare Management, Inc.
Aetna Health Inc. (New Jersey)	Group Dental Service of Maryland, Inc.
Aetna Health Inc. (New York)	Group Dental Service, Inc.
Aetna Health Inc. (Pennsylvania)	Health and Human Resource Center, Inc.
Aetna Health Inc. (Texas)	Health Data & Management Solutions, Inc.
Aetna Health Insurance Company	Health Re, Incorporated
Aetna Health Insurance Company of New York	HealthAmerica Pennsylvania, Inc.
Aetna Health of California, Inc.	HealthAssurance Financial Services, Inc.
Aetna Health of Utah Inc.	HealthAssurance Pennsylvania, Inc.
Aetna Insurance Company of Connecticut	HealthCare USA of Missouri, LLC
Aetna Integrated Informatics, Inc.	Jaguar Merger Subsidiary, Inc.
Aetna International Inc.	Luettgens Limited
Aetna Ireland Inc.	Managed Care Coordinators, Inc.
Aetna Life & Casualty (Bermuda) Ltd.	Medicity Inc.
Aetna Life Assignment Company	Mental Health Associates, Inc.
Aetna Life Insurance Company	Mental Health Network of New York IPA, Inc.
Aetna Risk Assurance Company of Connecticut, Inc.	Meritain Health, Inc.
Aetna Risk Indemnity Company Limited	MetraComp, Inc.
Aetna Student Health Agency Inc.	MHNet Life and Health Insurance Co.
AHP Holdings, Inc.	MHNet of Florida, Inc.
Allviant Corporation	Niagara Re, Inc.
American Health Holding, Inc.	PayFlex Holdings, Inc.
AUSHC Holdings, Inc.	PayFlex Systems USA, Inc.
Broadspire National Services, Inc.	Performax, Inc.
bSwift, LLC	Precision Benefit Services, Inc.
Cambridge Life Insurance Company	Prime Net, Inc.

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

Carefree Insurance Services, Inc.	Prodigy Health Group, Inc.
CHC Casualty Risk Retention Group, Inc.	Professional Risk Management, Inc.
Chickering Claims Administrators, Inc.	Resources for Living, LLC
Claims Administration Corporation	Schaller Anderson Medical Administrators, Incorporated
Cofinity, Inc.	Strategic Resource Company
Corporate Benefit Strategies, Inc.	The Vasquez Group Inc.
Coventry Consumer Advantage, Inc.	U.S. Health Care Properties, Inc.
Coventry Financial Management Services, Inc.	WellPath of South Carolina, Inc.
Coventry Health and Life Insurance Company	Work and Family Benefits, Inc.
Coventry Health Care National Accounts, Inc.	
Coventry Health Care National Network, Inc.	

2. As explained in Note 1, the Company participates in a tax sharing agreement with its parent and affiliates.
- G. The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

10. Information concerning Parent, subsidiaries, affiliates, and other related parties

A. B. and C.

The Company did not pay any dividends in 2014. The Company paid \$5,000,000 as an extraordinary dividend to its parent on August 28, 2013, of which \$4,600,000 constituted a return of capital. The Company paid \$10,700,000 as an extraordinary dividend to its parent on March 28, 2013, all of which constituted a return of capital. The Connecticut Department approved these distributions on August 15, and March 25, 2013, respectively. The Company did not receive any capital contributions in 2014 or 2013.

- D. Amounts due to and due from affiliates shown in the accompanying Statutory Statements of Assets, Liabilities, Capital and Surplus include the Company's net receipts and disbursements processed by affiliates and transactions related to its administrative services agreement with Aetna Medicaid Administrators LLC (formerly Schaller Anderson, LLC) ("AMA"), indirectly a wholly-owned subsidiary of Aetna.

At December 31, 2014 and 2013, the Company reported \$(542,234) and \$386 as amounts due (to) from AMA related to this agreement.

The terms of settlement require that these amounts be settled within 45 days after the end of the calendar quarter.

- E. At December 31, 2014, the Company did not have any guarantees or undertakings with its affiliates or parent company.
- F. As of and for the years ending December 31, 2014 and 2013, the Company had the following significant transactions with affiliates:

The Company and AMA are parties to an administrative services agreement, under which AMA provides certain administrative services, including accounting and processing of premiums and claims. Under this agreement, the Company remits 9% of its earned premium revenue, as applicable, to AMA as a fee. The Company did not incur fees in 2014 or 2013. This agreement also provides for interest on all intercompany balances. There was no interest earned (incurred) on amounts due from/(to) affiliates in 2014 and 2013.

The Company has an insolvency agreement with Aetna Life Insurance Company ("ALIC"), a wholly-owned subsidiary of Aetna. This agreement provides that in the event that the Company ceases operations or becomes insolvent, ALIC will continue to pay benefits for any members confined as inpatients on the date of insolvency until their discharge or expiration of benefits pursuant to Connecticut General Statute 38a-193(d). This agreement also provides that ALIC will continue benefits for any member until the end of the contract period for which premium has been paid, but for no longer than thirty-one days. ALIC will also make available to members, for a period of thirty-one days, replacement insurance policies.

The Company has coverage for certain litigation exposures (\$10,000,000 per claim and in the aggregate including defense costs) through an affiliated captive insurance company.

As explained in Note 1, the Company participates in a tax sharing agreement with Aetna and Aetna's other subsidiaries. All Federal income tax receivables/payables were due from/due to Aetna.

- G. All outstanding shares of the Company are owned by Aetna Health Holdings, LLC, whose ultimate parent is Aetna.
- H. At December 31, 2014, the Company did not hold any investments in any affiliate and did not own shares of any upstream intermediate of Aetna.
- I. At December 31, 2014, the Company did not hold any investments in any subsidiary, controlled or affiliated ("SCA") entity.

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

- J. At December 31, 2014, the Company did not hold any investments in any impaired SCA entity.
- K. At December 31, 2014, the Company did not hold any investments in any foreign insurance subsidiaries.
- L. At December 31, 2014, the Company did not hold any investments in a downstream noninsurance holding company.

11. Debt

- A. The Company did not have any items related to debt, including capital notes at December 31, 2014.
- B. The Company did not have any Federal Home Loan Bank agreements at December 31, 2014.

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 December 31, 2014 or 2013.

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

- (1) The Company had 20,000 shares of common stock authorized with a par value of \$.01, with 1,000 shares issued and outstanding at December 31, 2014 and 2013.

- (2) The Company did not have any preferred stock authorized or outstanding at December 31, 2014 or 2013.

(3) Dividend restrictions

Pursuant to State of Connecticut statute, the Company may not make any extraordinary dividend or any other extraordinary distribution until the Connecticut Department has approved such payment or until thirty days after the Connecticut Department has received notice from the Company of the declaration thereof within which period it has not disapproved such payment, whichever is sooner. An extraordinary dividend or distribution is any dividend or distribution of cash or other property, whose fair market value together with that of other dividends or distributions made within the preceding twelve months, exceeds the greater of (1) ten percent of the Company's surplus with respect to policyholders as of the thirty-first of December last preceding, or (2) the Company's net income, not including realized capital gains, for the twelve month period ending the thirty-first day of December last preceding. Ordinary dividends are ultimately limited to earned surplus.

- (4) The Company did not pay any dividends in 2014. The Company paid \$5,000,000 as an extraordinary dividend to its parent on August 28, 2013, of which \$4,600,000 constituted a return of capital. The Company paid \$10,700,000 as an extraordinary dividend to its parent on March 28, 2013, all of which constituted a return of capital. The Connecticut Department approved these distributions on August 15, and March 25, 2013, respectively.

- (5) At December 31, 2014, there was approximately \$0.7 million of the Company's profits that may be paid as ordinary dividends to its shareholder without prior approval from the Connecticut Department.

- (6) There were no restrictions placed on the Company's surplus, including for whom the surplus was being held at December 31, 2014 or 2013, except as noted in Note 21.

- (7) Not applicable to the Company.

- (8) The Company did not hold any stock for any special purposes at December 31, 2014 or 2013.

- (9) There were no changes in the balances of any special surplus funds from the prior period.

- (10) At December 31, 2014, there was no portion of unassigned funds (surplus) that was represented or reduced by unrealized gains and (losses).

- (11) The Company has not issued any surplus notes or debentures or similar obligations at December 31, 2014 or 2013.

- (12) The Company did not participate in any quasi-reorganizations during the statement year.

- (13) The Company did not participate in any quasi-reorganizations in the past 10 years.

14. Contingencies

- A. The Company did not have any contingent commitments at December 31, 2014 or 2013.

- B. The Company did not have any contingent assessments at December 31, 2014 or 2013.

- C. The Company did not have any gain contingencies at December 31, 2014 or 2013.

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**

- D. The Company did not have any claims related extra contractual obligation and bad faith losses stemming from lawsuits at December 31, 2014 or 2013.
- E. The Company did not have any joint and several liability arrangements at December 31, 2014 or 2013.
- F. Various liabilities arise in the normal course of the Company's business and have been recorded. In the opinion of management, any ultimate contingent losses will not have a material adverse effect on the Company's future results of operations and financial position. The Company, to the best of its knowledge, has no assets that it considers impaired that are not already recorded in the Company's books.

15. Leases

The Company did not have any material lease obligations at December 31, 2014 or 2013.

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

The Company did not have any financial instruments with off-balance sheet risk or financial instruments with concentrations of credit risk at December 31, 2014 or 2013.

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

A. Transfers of receivables reported as sales

- (1) The Company did not have any transfers of receivables as sales for the years ending December 31, 2014 and 2013.

B. Transfer and servicing of financial assets

- (1) The Company's policy for requiring collateral or other security for security lending transactions as required in SSAP No. 103 is discussed in Note 1. The Company did not have any loaned securities at December 31, 2014 or 2013.

(2) and (3)

The Company did not have any servicing assets or liabilities at December 31, 2014 or 2013.

- (4) The Company did not have any securitized financial assets at December 31, 2014 or 2013.
- (5) The Company did not have any transfers of financial assets at December 31, 2014 or 2013.
- (6) The Company did not have any transfers of receivables with recourse at December 31, 2014 or 2013.
- (7) The Company did not have any repurchase or reverse repurchase agreements at December 31, 2014 or 2013.

C. Wash sales

- (1) The Company did not have any wash sales for the years ending December 31, 2014 or 2013.

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

- A. The Company did not serve as an Administrative Services Only for uninsured accident and health plans or the uninsured portion of partially insured plans for the period ended December 31, 2014.
- B. The Company did not serve as an Administrative Services Contract plan administrator for uninsured accident and health plans or the uninsured portion of partially insured plans for the period ended December 31, 2014.
- C. The Company did not have any Medicare or other similarly structured cost based reimbursement contracts for the period ended December 31, 2014.

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

The Company did not have any material direct premiums written through/produced by managing general agents or third party administrators for the years ended December 31, 2014 and 2013.

20. Fair value measurements

A. and B.

The Company had no material assets or liabilities measured and reported at fair value at December 31, 2014 or 2013.

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**

C. Certain of the Company's financial instruments are measured at fair value in our balance sheets. The fair values of these instruments are based on valuations that include inputs that can be classified within one of three levels of a hierarchy established by U.S. generally accepted accounting principles. The following are the levels of the hierarchy and a brief description of the type of valuation information ("inputs") that qualifies a financial asset or liability for each level:

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

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

The carrying values and estimated fair values of the Company's financial instruments at December 31, 2014 and 2013 were as follows:

December 31, 2014

(in thousands)	Aggregate fair value	Admitted assets	Level 1	Level 2	Level 3	Not practicable (carrying value)
Bonds, short-term investments and cash equivalents	\$2,674,931	\$2,612,161	\$498,946	\$2,175,985	-	-
Total	\$2,674,931	\$2,612,161	\$498,946	\$2,175,985	-	-

December 31, 2013

(in thousands)	Aggregate fair value	Admitted assets	Level 1	Level 2	Level 3	Not practicable (carrying value)
Bonds, short-term investments and cash equivalents	\$2,625,754	\$2,566,732	\$496,914	\$2,128,840	-	-
Total	\$2,625,754	\$2,566,732	\$496,914	\$2,128,840	-	-

The valuation methods and assumptions used by the Company in estimating the fair value of debt securities are discussed in Note 1.

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 2014 or 2013.

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.

21. Other items

A. Extraordinary items

The Company did not have any extraordinary items for the years ended December 31, 2014 and 2013.

B. Troubled debt restructuring: debtors

The Company did not have any troubled debt restructuring in the years ended December 31, 2014 and 2013.

C. Other disclosures and unusual items

(1) Minimum capital and surplus

Pursuant to the laws of Connecticut, the Company is required to maintain a capital and surplus at an amount that is equal to the greater of \$3,000,000, 2% of prior year statutory premium revenue on the first \$150,000,000 plus 1% on premium revenue in excess of \$150,000,000 or two months of its cost of uncovered expenditures. At December 31, 2014 and 2013, the Company's capital and surplus exceeded all such requirements.

The NAIC and the State of Connecticut adopted risk-based capital ("RBC") standards for health organizations, including HMOs, that are designed to identify weakly capitalized companies by comparing each company's adjusted capital and surplus to its required capital and surplus (the "RBC Ratio"). The RBC Ratio is designed to reflect the risk profile of the company. Within certain ratio ranges, regulators have increasing authority to take action as the RBC Ratio decreases. There are four levels of regulatory action, ranging from requiring insurers to submit a comprehensive plan to the state insurance commissioner to requiring the state insurance commissioner to place the insurer under regulatory control. At December 31, 2014 and 2013, the Company had capital and surplus that exceeded the highest threshold specified by the RBC rules.

(2) Contract with the State of Connecticut, Department of Social Services

The contract between the Company and the State of Connecticut, Department of Social Services was effective July 1, 2008 and terminated December 31, 2011. The contract provided for capitation rates for the first contract year (July 1, 2008 through June 30, 2009) as well as a process to set rates for the second contract year (July 1, 2009 through June 30, 2010). The Department of Social Services' Best and Final Offer, which was incorporated into the contract, provided that if the Department of Social Services' rate adjustment for the second contract year was not acceptable to the Company, the contract could be terminated without penalty. The Company successfully negotiated mutually agreed upon rates through December 31, 2011 for all lines of business.

The Company insured Medicaid and the Children's Health Insurance Program ("CHIP") membership through its contract with the State of Connecticut Department of Social Services. This contract expired on December 31, 2011 and was not renewed.

(3) Health Care Reform

The Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010 (collectively, "Health Care Reform"), enacted in March 2010, has changed and will continue to make broad-based changes to the U.S. health care system which could significantly affect the U.S. economy and which the Company expects will continue to significantly impact the Company's business operations and financial results, including the Company's pricing, medical benefit ratios and the geographies in which the Company's products are available. Health Care Reform presents the Company with new business opportunities, but also with new financial and regulatory challenges. Since its enactment in 2010, key components of Health Care Reform have been phased in, including health insurance exchanges ("Public Exchanges"), required minimum medical loss ratios ("MLRs") in commercial and Medicare products, the individual coverage mandate, guaranteed issue, rating limits in the individual and small group markets, significant new industry-wide fees, assessments and taxes, enhanced premium rate review and disclosure processes, reduced Medicare Advantage payment rates to insurers, and linking Medicare Advantage payments to a plan's Centers for Medicare & Medicaid Services ("CMS") quality performance ratings or "star ratings." The effects of these changes are reflected in the Company's financial results.

While key components of Health Care Reform will continue to be phased in through 2018, the most significant changes occurred in 2014. The Company is dedicating and will continue to be required to dedicate material resources and incur material expenses during 2015 to implement and comply with Health Care Reform as well as state level health care reform. While the federal government has issued a number of regulations implementing Health Care Reform, certain significant parts of Health Care Reform, including aspects of Public Exchanges, Medicaid expansion, enforcement related reporting for the individual and employer mandates, reinsurance, risk corridor, risk adjustment and the implementation of Medicare Advantage and Part D minimum MLRs, require further guidance and clarification at the federal level and/or in the form of regulations and actions by state legislatures to implement the law. The federal government also has announced significant changes to and/or delays in effective dates of various aspects of Health Care Reform, and it is likely that further changes will be made at the federal and/or state level based on implementation experience. As a result, key aspects and impacts of Health Care Reform will not be known for several years, and given the inherent difficulty of foreseeing how individuals

and businesses will respond to the choices afforded them by Health Care Reform, the Company cannot predict the full effect Health Care Reform will have on the Company. It is reasonably possible that Health Care Reform, in the aggregate, could have a material adverse effect on the Company's business operations and financial results.

Federal budget negotiations, ongoing regulatory changes to Health Care Reform (such as the November 2013 action permitting renewal through 2014 of individual and small group insurance policies that do not comply with Health Care Reform and the March 2014 action permitting such renewal through 2017), pending efforts in the U.S. Congress to amend or restrict funding for various aspects of Health Care Reform and litigation challenging aspects of the law continue to create uncertainty about the ultimate impact of Health Care Reform. An example of this uncertainty is the litigation pending before the U.S. Supreme Court concerning whether the IRS may make tax credits available as a form of subsidy to individuals who purchase health insurance through Public Exchanges established by the federal government ("Federal Exchanges"). The Company will continue to enroll and insure members through the Federal Exchanges pending the resolution of this and other pending cases. If the payment of subsidies with respect to members who enroll through the Federal Exchanges ultimately is invalidated, it could result in a significant reduction in Aetna's Public Exchange membership because almost all of Aetna's Public Exchange membership is through Federal Exchanges, and most of those members benefit from a tax subsidy.

The availability of funding for Health Care Reform's risk corridor program is a second example of this uncertainty. In May 2014, CMS published a final rule on Public Exchanges. The final rule provides that payments to health plans under the risk corridor program required by Health Care Reform will no longer be limited to the aggregate amount of the risk corridor collections received by HHS over the duration of the risk corridor program. However, it is possible that payments to health plans under the risk corridor program will require additional appropriation legislation to be passed by the U.S. Congress. Additionally, in December 2014, the Consolidated and Further Continuing Appropriations Act was enacted, which among other things, prohibits HHS's use of certain funds to pay HHS's potential obligation under Health Care Reform's risk corridor program. As a result, the Company did not record any receivable under Health Care Reform's risk corridor program at December 31, 2014.

In addition, the federal and state governments continue to enact and seriously consider many other broad-based legislative and regulatory proposals that have impacted or could materially impact various aspects of the health care system. The Company cannot predict whether pending or future federal or state legislation or court proceedings, including future U.S. Congressional appropriations and the proceedings relating to tax credits for Federal Exchange members described above, will change various aspects of the health care system or Health Care Reform or the impact those changes will have on the Company's business operations or financial results, but the effects could be materially adverse.

In addition, certain provisions of Health Care Reform tie Medicare Advantage plans' premiums to the achievement of favorable CMS quality performance measures ("star ratings"). In 2013 and 2014, Medicare Advantage plans with an overall star rating of three or more stars (out of five stars) are eligible for a quality bonus in their basic premium rates. Beginning in 2015, only Medicare Advantage plans with an overall star rating of four or more stars will be eligible for a quality bonus. As a result, the Company's Medicare Advantage plans' operating results in 2015 and going forward are likely to be significantly determined by their star ratings.

(4) Medicaid

Medicaid and dual eligible products are regulated by CMS and state Medicaid agencies, which have the right to audit our performance to determine compliance with CMS contracts and regulations. Medicaid products, dual eligible products and Children's Health Insurance Program ("CHIP") contracts also are subject to federal and state regulations and oversight by state Medicaid agencies regarding the services the Company provides to Medicaid enrollees, payment for those services, network requirements (including mandatory inclusion of specified high-cost providers), and other aspects of these programs, and by external review organizations which audit Medicaid plans on behalf of the state Medicaid agencies. The laws, regulations and contractual requirements applicable to the Company and other participants in Medicaid and dual eligible programs, including requirements that the Company submit encounter data to the applicable state agency, are extensive, complex and subject to change. The Company has invested significant resources to comply with these standards, and the Company's Medicaid and dual eligible program compliance efforts will continue to require significant resources. CMS and/or state Medicaid agencies may fine the Company, withhold payments, seek premium refunds, terminate existing contracts, elect not to award new contracts or renew existing contracts, require the Company to include specific high cost providers in its networks, prohibit the Company from continuing to market and/or enroll members in or refuse to auto assign members to one or more Medicaid or dual eligible products, exclude the Company from participating in one or more Medicaid or dual eligible programs and/or institute other sanctions against the Company if the Company fails to comply with CMS or state regulations or contractual requirements.

- D. The Company did not have any business interruption insurance recoveries for the years ending December 31, 2014 or 2013.

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

- E. The Company did not have any transferable and non-transferable state tax credits for the years ending December 31, 2014 or 2013.
- F. The Company did not have any subprime mortgage related risk exposures at December 31, 2014 or 2013.
- G. The Company did not have any retained assets at December 31, 2014 or 2013.
- H. The Company did not have any joint and several liability arrangements at December 31, 2014 or 2013.

22. Events subsequent

Type I - Recognized subsequent events

Subsequent events have been considered through February 25, 2015 for the statutory statement issued on March 1, 2015.

The Company had no known reportable recognized subsequent events.

Type II - Nonrecognized subsequent events

Subsequent events have been considered through February 25, 2015 for the statutory statement issued on March 1, 2015.

The Company had no known reportable nonrecognized subsequent events.

23. Reinsurance

The Company did not have any reinsurance recoverables in dispute, reinsurance assumed, uncollectible reinsurance, commutation of ceded reinsurance, or retroactive reinsurance at December 31, 2014 or 2013.

24. Retrospectively rated contracts and contracts subject to redetermination

The Company did not have any retrospectively rated contracts or contracts subject to redetermination in 2014 or 2013.

25. Change in incurred claims and claims adjustment expense

The following table shows the components of the change in claims unpaid, unpaid claims adjustment expense and aggregate health claim reserves for the years ending December 31, 2014 and 2013.

(in thousands)	2014	2013
Balance, January 1	\$9	\$2,187
Health care receivable	-	-
Balance, January 1, net of health care receivable	9	2,187
Incurred related to:		
Current year	-	-
Prior years	(81)	(758)
Total incurred	(81)	(758)
Paid related to:		
Current year	-	-
Prior years	(88)	1,420
Total paid	(88)	1,420
Balance, December 31, net of health care receivable	16	9
Health care receivable	-	-
Balance, December 31	\$16	\$9

In 2014, reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years increased by \$81 thousand from \$9 thousand in 2013 to \$(73) thousand in 2014. In 2013, reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years decreased by \$0.8 million from \$2.2 million in 2012 to \$1.4 million in 2013. Historical health care cost trend rates are not necessarily representative of current trends. The Company considers historical trend rates together with knowledge of recent events that may impact current trends when developing estimates of current trend rates. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

Net coordination of benefits are implicit in the claims incurred but not reported calculation and could not be specifically identified.

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**

26. Intercompany pooling arrangements

The Company did not have any intercompany pooling arrangements at December 31, 2014 or 2013.

27. Structured settlements

Not applicable to health entities.

28. Health care receivables

A. Pharmaceutical rebate receivables

The Company did not have any pharmaceutical rebate receivables at December 31, 2014 or 2013.

B. Risk sharing receivables

The Company did not have any admitted risk sharing receivables at December 31, 2014 or 2013.

29. Participating policies

The Company did not have any participating policies at December 31, 2014 or 2013.

30. Premium deficiency reserves

December 31, 2014

1. Liability carried for premium deficiency reserves	\$0
2. Date of the most recent evaluation of this liability	12/31/2014
3. Was anticipated investment income utilized in the calculation?	Yes

31. Anticipated salvage and subrogation

See discussion of hospital and medical costs and claims adjustment expenses and related reserves in Note 1.

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES - GENERAL

- 1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
 if yes, complete Schedule Y, Parts 1, 1A and 2.
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [X] No [] N/A []
- 1.3 State regulating? Connecticut
- 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: N/A
- 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2010
- 3.2 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. 12/31/2010
- 3.3 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). 04/05/2012
- 3.4 By what department or departments?
State of Connecticut Insurance Department
- 3.5 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]
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] N/A [X]
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
- 4.11 sales of new business? Yes [] No [X]
- 4.12 renewals? Yes [] No [X]
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
- 4.21 sales of new business? Yes [] No [X]
- 4.22 renewals? Yes [] No [X]
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 5.2 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 Co. Code | 3
State of Domicile |
|---------------------|--------------------|------------------------|
| N/A | | |
- 6.1 Has the 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]
- 6.2 If yes, give full information:
N/A
- 7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]
- 7.2 If yes,
- 7.21 State the percentage of foreign control0.000 %
- 7.22 State the nationality(ies) of the foreign person(s) or entity(ies); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(ies) (e.g., individual, corporation, government, manager or attorney-in-fact)
- | 1
Nationality | 2
Type of Entity |
|------------------|---------------------|
| N/A | |
- 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.
N/A
- 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 the names and locations (city and state of the main office) of any affiliates regulated by a federal financial 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 |
|---------------------|-----------------------------|----------|----------|-----------|----------|
| N/A | | | | | |
9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
N/A; The Company has received an exemption from filing the audited financial statements.
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [] No [X]
- 10.2 If the response to 10.1 is yes, provide information related to this exemption:
N/A
- 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 17A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]
- 10.4 If the response to 10.3 is yes, provide information related to this exemption:
N/A

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES - GENERAL

- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes No N/A
 10.6 If the answer to 10.5 is no or n/a, please explain.
N/A

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
William R. Jones, Valuation Actuary, 151 Farmington Avenue, RE2R; Hartford, CT 06156

- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes No
 12.11 Name of real estate holding company
N/A

- 12.12 Number of parcels involved 0
 12.13 Total book/adjusted carrying value \$ 0
 12.2 If yes, provide explanation.
N/A

FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

- 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
N/A

- 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes No
 13.3 Have there been any changes made to any of the trust indentures during the year? Yes No

- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes No N/A

- 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes No
 a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 c. Compliance with applicable governmental laws, rules and regulations;
 d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 e. Accountability for adherence to the code.

- 14.11 If the response to 14.1 is no, please explain:
N/A

- 14.2 Has the code of ethics for senior managers been amended? Yes No

- 14.21 If the response to 14.2 is yes, provide information related to amendment(s).
The Code of Conduct was amended effective September 2014. The key substantive changes include:
Clarification that intimidation against anyone who reports a concern is prohibited;
The specific listing of fraud, waste and abuse as matters that should be reported to the appropriate personnel to more closely align the Code of Conduct with CMS requirements;
Additional examples in the Conflicts of Interests and Business Expenses sections to reflect questions frequently asked by employees since 2011; and
Additional information on the limitations on the personal political and lobbying activities to which Aetna employees and their family members are subject.

- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes No

- 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).
N/A

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes No

- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount
0	N/A		0

PART 1 - COMMON INTERROGATORIES - BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinate committee thereof? Yes No
 17. Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors and all subordinate committees thereof? Yes No
 18. Has the reporting entity an established procedure for disclosure to its Board of Directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? Yes No

PART 1 - COMMON INTERROGATORIES - FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes No
 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
 20.11 To directors or other officers \$ 0
 20.12 To stockholders not officers \$ 0
 20.13 Trustees, supreme or grand (Fraternal only) \$ 0
 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
 20.21 To directors or other officers \$ 0
 20.22 To stockholders not officers \$ 0
 20.23 Trustees, supreme or grand (Fraternal only) \$ 0
 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes No
 21.2 If yes, state the amount thereof at December 31 of the current year:
 21.21 Rented from others \$ 0
 21.22 Borrowed from others \$ 0
 21.23 Leased from others \$ 0
 21.24 Other \$ 0

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**

PART 1 - COMMON INTERROGATORIES - FINANCIAL

- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [] No [X]
- 22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment \$.....0
- 22.22 Amount paid as expenses \$.....0
- 22.23 Other amounts paid \$.....0
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount. \$.....0

PART 1 - COMMON INTERROGATORIES - INVESTMENT

- 24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 24.03)? Yes [X] No []
- 24.02 If no, give full and complete information relating thereto.
N/A

24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet (an alternative is to reference Note 17 where this information is also provided).
See Notes to Financial Statement - Note 17, Sale, transfer and servicing of financial assets and extinguishments of liabilities

- 24.04 Does the company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? Yes [X] No [] N/A []
- 24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. \$.....0
- 24.06 If answer to 24.04 is no, report amount of collateral for other programs. \$.....0

- 24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [X] No [] N/A []
- 24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [X] No [] N/A []

- 24.09 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? Yes [X] No [] N/A []

- 24.10 For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:
- 24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$.....0
- 24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$.....0
- 24.103 Total payable for securities lending reported on the liability page. \$.....0

- 25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03) Yes [X] No []

- 25.2 If yes, state the amount thereof at December 31 of the current year:
- 25.21 Subject to repurchase agreements \$.....0
- 25.22 Subject to reverse repurchase agreements \$.....0
- 25.23 Subject to dollar repurchase agreements \$.....0
- 25.24 Subject to reverse dollar repurchase agreements \$.....0
- 25.25 Placed under option agreements \$.....0
- 25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$.....0
- 25.27 FHLB Capital Stock \$.....0
- 25.28 On deposit with states \$.....497,944
- 25.29 On deposit with other regulatory bodies \$.....0
- 25.30 Pledged as collateral - excluding collateral pledged to an FHLB \$.....0
- 25.31 Pledged as collateral to FHLB - including assets backing funding agreements \$.....0
- 25.32 Other \$.....0

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
N/A		0

- 26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]
- 26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement. Yes [] No [] N/A [X]
- N/A

- 27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]
- 27.2 If yes, state the amount thereof at December 31 of the current year: \$.....0

28. 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 []

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

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

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

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

- 28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? Yes [] No [X]
- 28.04 If yes, give full and complete information relating thereto:

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

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

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

- 29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D-Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])? Yes [] No [X]

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
PART 1 - COMMON INTERROGATORIES - INVESTMENT

29.2 If yes, complete the following schedule:

1	2	3
CUSIP #	Name of Mutual Fund	Book/Adjusted Carrying Value
	N/A	0
29.2999. TOTAL		0

29.3 For each mutual fund listed in the table above, complete the following schedule:

1	2	3	4
Name of Mutual Fund (from the above table)	Name of Significant Holding of the Mutual Fund	Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to Holding	Date of Valuation
	N/A	0	

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds.....	2,612,161	2,674,931	62,770
30.2 Preferred stocks.....	0	0	0
30.3 Totals.....	2,612,161	2,674,931	62,770

30.4 Describe the sources or methods utilized in determining the fair values:
Fair value of long term bonds and preferred stocks are determined based on quoted market prices when available, fair values using valuation methodologies based on available and observable market information or by using matrix pricing. If quoted market prices are not available, we determine fair value using broker quoted or an internal analysis of each investment's financial performance and cash flow projections. Short term investments are carried at amortized cost which approximates fair value. The carrying value of cash equivalents approximates fair value.

- 31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [X] No []
- 31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [X] No []
- 31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D.
N/A
- 32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? Yes [X] No []
- 32.2 If no, list exceptions:
N/A

PART 1 - COMMON INTERROGATORIES - OTHER

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$.....0

33.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1	2
Name	Amount Paid
N/A	0

34.1 Amount of payments for legal expenses, if any? \$.....0

34.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1	2
Name	Amount Paid
N/A	0

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$.....0

35.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1	2
Name	Amount Paid
N/A	0

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

- 1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes No
- 1.2 If yes, indicate premium earned on U.S. business only \$.....0
- 1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$.....0
- 1.31 Reason for excluding

- 1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. \$.....0
- 1.5 Indicate total incurred claims on all Medicare Supplement insurance. \$.....0
- 1.6 Individual policies:
 - Most current three years:
 - 1.61 Total premium earned \$.....0
 - 1.62 Total incurred claims \$.....0
 - 1.63 Number of covered lives0
 - All years prior to most current three years:
 - 1.64 Total premium earned \$.....0
 - 1.65 Total incurred claims \$.....0
 - 1.66 Number of covered lives0
- 1.7 Group policies:
 - Most current three years:
 - 1.71 Total premium earned \$.....0
 - 1.72 Total incurred claims \$.....0
 - 1.73 Number of covered lives0
 - All years prior to most current three years:
 - 1.74 Total premium earned \$.....0
 - 1.75 Total incurred claims \$.....0
 - 1.76 Number of covered lives0

2. Health test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator.....	0	0
2.2 Premium Denominator.....	0	0
2.3 Premium Ratio (2.1/2.2).....	0.0	0.0
2.4 Reserve Numerator.....	15,942	8,723
2.5 Reserve Denominator.....	15,942	8,723
2.6 Reserve Ratio (2.4/2.5).....	100.0	100.0

- 3.1 Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, and if the earnings of the reporting entity permits? Yes No
- 3.2 If yes, give particulars:
N/A

- 4.1 Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency? Yes No
- 4.2 If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered? Yes No
- 5.1 Does the reporting entity have stop-loss reinsurance? Yes No
- 5.2 If no, explain:
The Company does not have stop loss reinsurance.

- 5.3 Maximum retained risk (see instructions):
 - 5.31 Comprehensive medical \$.....0
 - 5.32 Medical only \$.....0
 - 5.33 Medicare supplement \$.....0
 - 5.34 Dental and vision \$.....0
 - 5.35 Other limited benefit plan \$.....0
 - 5.36 Other \$.....0

6. Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:
The Company does not currently sell to or insure members in Connecticut.

- 7.1 Does the reporting entity set up its claim liability for provider services on a service date basis? Yes No
- 7.2 If no, give details:
N/A

- 8. Provide the following information regarding participating providers:
 - 8.1 Number of providers at start of reporting year0
 - 8.2 Number of providers at end of reporting year0

- 9.1 Does the reporting entity have business subject to premium rate guarantees? Yes No
- 9.2 If yes, direct premium earned:
 - 9.21 Business with rate guarantees between 15-36 months \$.....0
 - 9.22 Business with rate guarantees over 36 months \$.....0

- 10.1 Does the reporting entity have Incentive Pool, Withhold or Bonus arrangements in its provider contracts? Yes No
- 10.2 If yes:
 - 10.21 Maximum amount payable bonuses \$.....0
 - 10.22 Amount actually paid for year bonuses \$.....0
 - 10.23 Maximum amount payable withholds \$.....0
 - 10.24 Amount actually paid for year withholds \$.....0

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

- 11.1. Is the reporting entity organized as:
- 11.12 A Medical Group/Staff Model, Yes [] No [X]
- 11.13 An Individual Practice Association (IPA), or Yes [] No [X]
- 11.14 A Mixed Model (combination of above)? Yes [] No [X]
- 11.2. Is the reporting entity subject to Minimum Net Worth Requirements? Yes [X] No []
- 11.3. If yes, show the name of the state requiring such net worth. Connecticut
- 11.4. If yes, show the amount required. \$.....1,000,000
- 11.5. Is this amount included as part of a contingency reserve in stockholder's equity? Yes [] No [X]
- 11.6. If the amount is calculated, show the calculation:
See Notes to Financial Statement - Note 21, Other Items, C., Other Disclosures.

12. List service areas in which reporting entity is licensed to operate:

1 Name of Service Area
Fairfield, Hartford, Litchfield, Middlesex, New Haven, New London, Tolland, Windham

- 13.1. Do you act as a custodian for health savings account? Yes [] No [X]
- 13.2. If yes, please provide the amount of custodial funds held as of the reporting date. \$.....0
- 13.3. Do you act as an administrator for health savings accounts? Yes [] No [X]
- 13.4. If yes, please provide the balance of the funds administered as of the reporting date. \$.....0
- 14.1. Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? Yes [] No [] N/A [X]

- 14.2. If the answer to 14.1 is yes, please provide the following:

1 Company Name	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other
N/A	0		0	0	0	0

15. Provide the following for Individual Ordinary Life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):

- 15.1 Direct written premium..... \$.....0
- 15.2 Total incurred claims..... \$.....0
- 15.3 Number of covered lives..... 0

*Ordinary Life Insurance Includes:
Term (whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary guarantee)
Universal Life (with or without secondary guarantee)
Variable Universal Life (with or without secondary guarantee)

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
FIVE-YEAR HISTORICAL DATA

	1 2014	2 2013	3 2012	4 2011	5 2010
Balance Sheet Items (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28).....	3,538,349	3,048,138	19,744,351	65,005,396	64,410,351
2. Total liabilities (Page 3, Line 24).....	560,292	152,516	2,223,454	30,317,188	31,661,510
3. Statutory surplus.....	1,000,000	1,000,000	1,000,000	17,540,828	16,709,502
4. Total capital and surplus (Page 3, Line 33).....	2,978,057	2,895,622	17,520,897	34,688,208	32,748,841
Income Statement Items (Page 4)					
5. Total revenues (Line 8).....	0	0	(673,035)	244,066,368	229,392,257
6. Total medical and hospital expenses (Line 18).....	(81,254)	(758,664)	(4,036,540)	213,187,895	202,909,417
7. Claims adjustment expenses (Line 20).....	0	0	0	5,530,919	4,063,022
8. Total administrative expenses (Line 21).....	31	(6,476)	(555,082)	16,567,782	16,690,014
9. Net underwriting gain (loss) (Line 24).....	81,223	765,140	3,918,587	8,779,772	5,729,804
10. Net investment gain (loss) (Line 27).....	28,517	310,139	522,873	592,932	1,742,067
11. Total other income (Lines 28 plus 29).....	0	0	0	0	0
12. Net income or (loss) (Line 32).....	66,083	766,480	4,019,564	7,278,143	4,276,007
Cash Flow (Page 6)					
13. Net cash from operations (Line 11).....	(68,799)	4,232,394	10,017,572	2,272,889	(14,355,335)
Risk-Based Capital Analysis					
14. Total adjusted capital.....	2,978,057	2,895,622	17,520,897	34,688,208	32,748,841
15. Authorized control level risk-based capital.....	11,259	10,530	25,286	8,770,414	8,354,751
Enrollment (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7).....	0	0	0	104,227	102,339
17. Total member months (Column 6, Line 7).....	0	0	0	1,267,341	1,213,034
Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3, and 5) x 100 .0					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5).....	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Line 18 plus Line 19).....	0.0	0.0	599.8	87.3	88.5
20. Cost containment expenses.....	0.0	0.0	0.0	1.8	1.3
21. Other claims adjustment expenses.....	0.0	0.0	0.0	0.5	0.5
22. Total underwriting deductions (Line 23).....	0.0	0.0	682.2	96.4	97.5
23. Total underwriting gain (loss) (Line 24).....	0.0	0.0	(582.2)	3.6	2.5
Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 13 Col. 5).....	(72,531)	1,421,573	25,254,957	26,847,441	25,022,390
25. Estimated liability of unpaid claims - [prior year (Line 13, Col. 6)]	8,723	2,180,237	29,291,497	30,869,770	28,608,980
Investments in Parent, Subsidiaries and Affiliates					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1).....	0	0	0	0	0
27. Affiliated preferred stocks (Sch. D. Summary, Line 18, Col. 1).....	0	0	0	0	0
28. Affiliated common stocks (Sch. D. Summary, Line 24, Col. 1).....	0	0	0	0	0
29. Affiliated short-term investments (subtotal included in Sch. DA, Verification, Column 5, Line 10).....	0	0	0	0	0
30. Affiliated mortgage loans on real estate.....	0	0	0	0	0
31. All other affiliated.....	0	0	0	0	0
32. Total of above Lines 26 to 31.....	0	0	0	0	0
33. Total investment in parent included in Lines 26 to 31 above.....	0	0	0	0	0

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes [] No []

If no, please explain:

N/A

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION.....Aetna Better Health Inc. (a Connecticut corporation) 2. Grand Total

BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR

NAIC Group Code.....0001

(Location)

NAIC Company Code....13174

	1		2		3		4	5	6	7	8	9	10
	Total	Individual	Comprehensive (Hospital & Medical)	Group	Medicare Supplement	Vision Only								Dental Only	Federal Employers Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:													
1. Prior year.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. First quarter.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Second quarter.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Third quarter.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Current year.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Current year member months.....	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Member Ambulatory Encounters for Year:													
7. Physician.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Non-physician.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Totals.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital patient days incurred.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. Number of inpatient admissions.....	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Health premiums written (b).....	0	0	0	0	0	0	0	0	0	0	0	0	0
13. Life premiums direct.....	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Property/casualty premiums written.....	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Health premiums earned.....	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Property/casualty premiums earned.....	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount paid for provision of health care services.....	(86,473)	(1,912)	(1,912)	0	0	0	0	0	0	0	0	0	(86,561)
18. Amount incurred for provision of health care services.....	(81,254)	(1,912)	(1,912)	0	0	0	0	0	0	0	0	0	(79,342)

(a) For health business: number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$.....0

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION.....Aetna Better Health Inc. (a Connecticut corporation) 2. Connecticut

BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR

NAIC Group Code.....0001

(Location)

NAIC Company Code.....13174

	1		2		3		4	5	6	7	8	9	10
	Total	Individual	Comprehensive (Hospital & Medical)	Group	Medicare Supplement	Vision Only								Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:													
1. Prior year.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. First quarter.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Second quarter.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Third quarter.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Current year.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Current year member months.....	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Member Ambulatory Encounters for Year:													
7. Physician.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Non-physician.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Totals.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital patient days incurred.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. Number of inpatient admissions.....	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Health premiums written (b).....	0	0	0	0	0	0	0	0	0	0	0	0	0
13. Life premiums direct.....	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Property/casualty premiums written.....	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Health premiums earned.....	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Property/casualty premiums earned.....	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount paid for provision of health care services.....	(88,473)	(1,912)	(1,912)	0	0	0	0	0	0	0	0	0	(86,561)
18. Amount incurred for provision of health care services.....	(81,254)	(1,912)	(1,912)	0	0	0	0	0	0	0	0	0	(79,342)

(a) For health business: number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$.....0

Sch. S-Pt. 1-Sn. 2
NONE

Sch. S-Pt. 2
NONE

Sch. S-Pt. 3-Sn. 2
NONE

Sch. S-Pt. 4
NONE

Sch. S-Pt. 5
NONE

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**

SCHEDULE S - PART 6

Five-Year Exhibit of Reinsurance Ceded Business
(000 Omitted)

	1 2014	2 2013	3 2012	4 2011	5 2010
A. OPERATIONS ITEMS					
1. Premiums.....	0	0	0	12	20
2. Title XVIII - Medicare.....	0	0	0	0	0
3. Title XIX - Medicaid.....	0	0	0	263	378
4. Commissions and reinsurance expense allowance.....	0	0	0	0	0
5. Total hospital and medical expenses.....	0	0	0	197	242
B. BALANCE SHEET ITEMS					
6. Premiums receivable.....	0	0	0	0	0
7. Claims payable.....	0	0	0	0	0
8. Reinsurance recoverable on paid losses.....	0	0	0	0	300
9. Experience rating refunds due or unpaid.....	0	0	0	0	0
10. Commissions and reinsurance expense allowances due.....	0	0	0	0	0
11. Unauthorized reinsurance offset.....	0	0	0	0	0
12. Offset for reinsurance with certified reinsurers.....	0	0	0	XXX	XXX
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
13. Funds deposited by and withheld from (F).....	0	0	0	0	0
14. Letters of credit (L).....	0	0	0	0	0
15. Trust agreements (T).....	0	0	0	0	0
16. Other (O).....	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17. Multiple beneficiary trust.....	0	0	0	XXX	XXX
18. Funds deposited by and withheld from (F).....	0	0	0	XXX	XXX
19. Letters of credit (L).....	0	0	0	XXX	XXX
20. Trust agreements (T).....	0	0	0	XXX	XXX
21. Other (O).....	0	0	0	XXX	XXX

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	3,513,074	0	3,513,074
2. Accident and health premiums due and unpaid (Line 15).....	0	0	0
3. Amounts recoverable from reinsurers (Line 16.1).....	0	0	0
4. Net credit for ceded reinsurance.....	XXX	0	0
5. All other admitted assets (balance).....	25,275	0	25,275
6. Totals assets (Line 28).....	3,538,349	0	3,538,349
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1).....	15,942	0	15,942
8. Accrued medical incentive pool and bonus payments (Line 2).....	0	0	0
9. Premiums received in advance (Line 8).....	0	0	0
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19, first inset amount plus second inset amount).....	0	0	0
11. Reinsurance in unauthorized companies (Line 20 minus inset amount).....	0	0	0
12. Reinsurance with certified reinsurers (Line 20 inset amount).....	0	0	0
13. Funds held under reinsurance treaties with certified reinsurers (Line 19 third inset amount).....	0	0	0
14. All other liabilities (balance).....	544,350	0	544,350
15. Total liabilities (Line 24).....	560,292	0	560,292
16. Total capital and surplus (Line 33).....	2,978,057	XXX	2,978,057
17. Total liabilities, capital and surplus (Line 34).....	3,538,349	0	3,538,349
NET CREDIT FOR CEDED REINSURANCE			
18. Claims unpaid.....	0		
19. Accrued medical incentive pool.....	0		
20. Premiums received in advance.....	0		
21. Reinsurance recoverable on paid losses.....	0		
22. Other ceded reinsurance recoverables.....	0		
23. Total ceded reinsurance recoverables.....	0		
24. Premiums receivable.....	0		
25. Funds held under reinsurance treaties with authorized and unauthorized reinsurers.....	0		
26. Unauthorized reinsurance.....	0		
27. Reinsurance with certified reinsurers.....	0		
28. Funds held under reinsurance treaties with certified reinsurers.....	0		
29. Other ceded reinsurance payables/offsets.....	0		
30. Total ceded reinsurance payables/offsets.....	0		
31. Total net credit for ceded reinsurance.....	0		

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

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

DETAILS OF WRITE-INS

58001.....	0	0	0	0	0	0	0	0	0
58002.....	0	0	0	0	0	0	0	0	0
58003.....	0	0	0	0	0	0	0	0	0
58998. Summary of remaining write-ins for line 58.....	0	0	0	0	0	0	0	0	0
58999. Total (Lines 58001 thru 58003 + 58998).....	0	0	0	0	0	0	0	0	0

(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer;
(E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.
Explanation of basis of allocation by states, premiums by state, etc.
All premiums are written within the State of CT

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

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

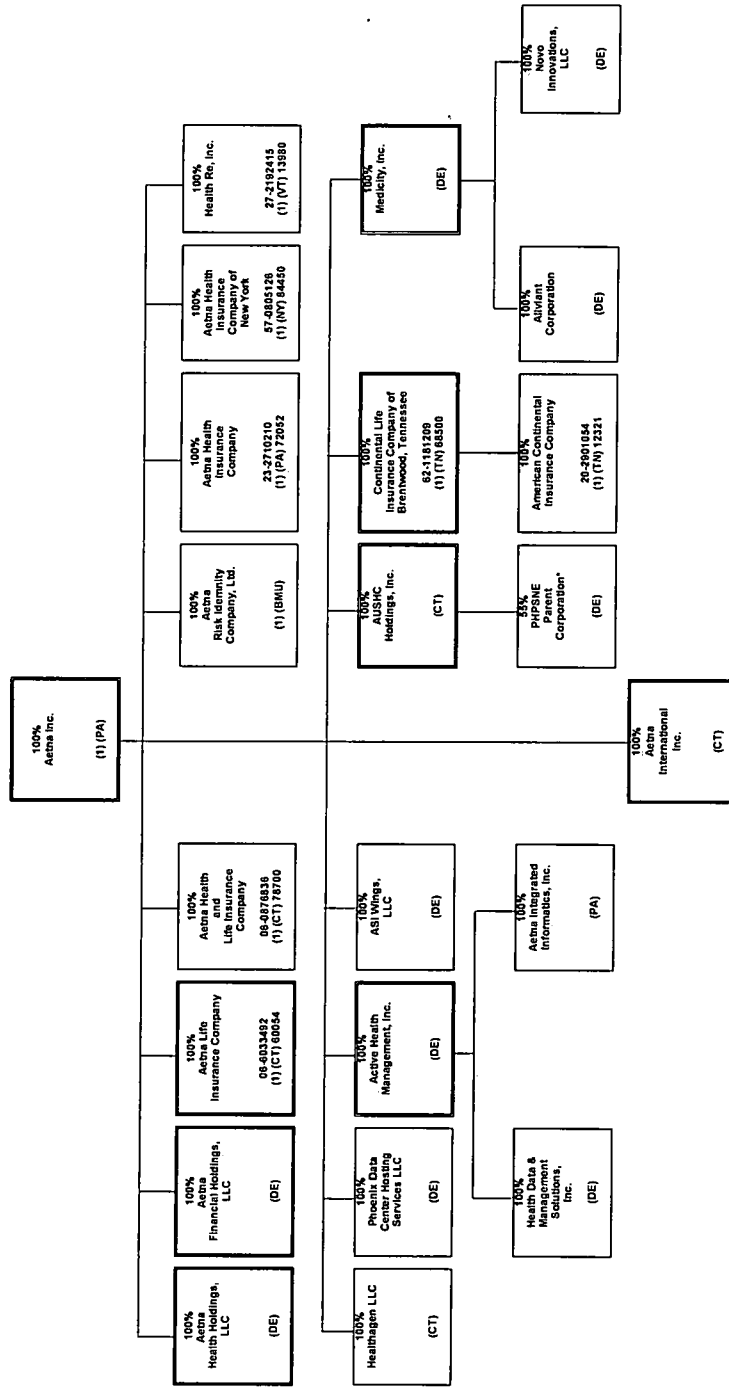
Allocated by States and Territories

States, Etc.		Direct Business Only					Totals
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	
1. Alabama.....AL	0	0	0	0	0	0	
2. Alaska.....AK	0	0	0	0	0	0	
3. Arizona.....AZ	0	0	0	0	0	0	
4. Arkansas.....AR	0	0	0	0	0	0	
5. California.....CA	0	0	0	0	0	0	
6. Colorado.....CO	0	0	0	0	0	0	
7. Connecticut.....CT	0	0	0	0	0	0	
8. Delaware.....DE	0	0	0	0	0	0	
9. District of Columbia.....DC	0	0	0	0	0	0	
10. Florida.....FL	0	0	0	0	0	0	
11. Georgia.....GA	0	0	0	0	0	0	
12. Hawaii.....HI	0	0	0	0	0	0	
13. Idaho.....ID	0	0	0	0	0	0	
14. Illinois.....IL	0	0	0	0	0	0	
15. Indiana.....IN	0	0	0	0	0	0	
16. Iowa.....IA	0	0	0	0	0	0	
17. Kansas.....KS	0	0	0	0	0	0	
18. Kentucky.....KY	0	0	0	0	0	0	
19. Louisiana.....LA	0	0	0	0	0	0	
20. Maine.....ME	0	0	0	0	0	0	
21. Maryland.....MD	0	0	0	0	0	0	
22. Massachusetts.....MA	0	0	0	0	0	0	
23. Michigan.....MI	0	0	0	0	0	0	
24. Minnesota.....MN	0	0	0	0	0	0	
25. Mississippi.....MS	0	0	0	0	0	0	
26. Missouri.....MO	0	0	0	0	0	0	
27. Montana.....MT	0	0	0	0	0	0	
28. Nebraska.....NE	0	0	0	0	0	0	
29. Nevada.....NV	0	0	0	0	0	0	
30. New Hampshire.....NH	0	0	0	0	0	0	
31. New Jersey.....NJ	0	0	0	0	0	0	
32. New Mexico.....NM	0	0	0	0	0	0	
33. New York.....NY	0	0	0	0	0	0	
34. North Carolina.....NC	0	0	0	0	0	0	
35. North Dakota.....ND	0	0	0	0	0	0	
36. Ohio.....OH	0	0	0	0	0	0	
37. Oklahoma.....OK	0	0	0	0	0	0	
38. Oregon.....OR	0	0	0	0	0	0	
39. Pennsylvania.....PA	0	0	0	0	0	0	
40. Rhode Island.....RI	0	0	0	0	0	0	
41. South Carolina.....SC	0	0	0	0	0	0	
42. South Dakota.....SD	0	0	0	0	0	0	
43. Tennessee.....TN	0	0	0	0	0	0	
44. Texas.....TX	0	0	0	0	0	0	
45. Utah.....UT	0	0	0	0	0	0	
46. Vermont.....VT	0	0	0	0	0	0	
47. Virginia.....VA	0	0	0	0	0	0	
48. Washington.....WA	0	0	0	0	0	0	
49. West Virginia.....WV	0	0	0	0	0	0	
50. Wisconsin.....WI	0	0	0	0	0	0	
51. Wyoming.....WY	0	0	0	0	0	0	
52. American Samoa.....AS	0	0	0	0	0	0	
53. Guam.....GU	0	0	0	0	0	0	
54. Puerto Rico.....PR	0	0	0	0	0	0	
55. US Virgin Islands.....VI	0	0	0	0	0	0	
56. Northern Mariana Islands.....MP	0	0	0	0	0	0	
57. Canada.....CAN	0	0	0	0	0	0	
58. Aggregate Other Alien.....OT	0	0	0	0	0	0	
59. Totals.....	0	0	0	0	0	0	

NONE

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**

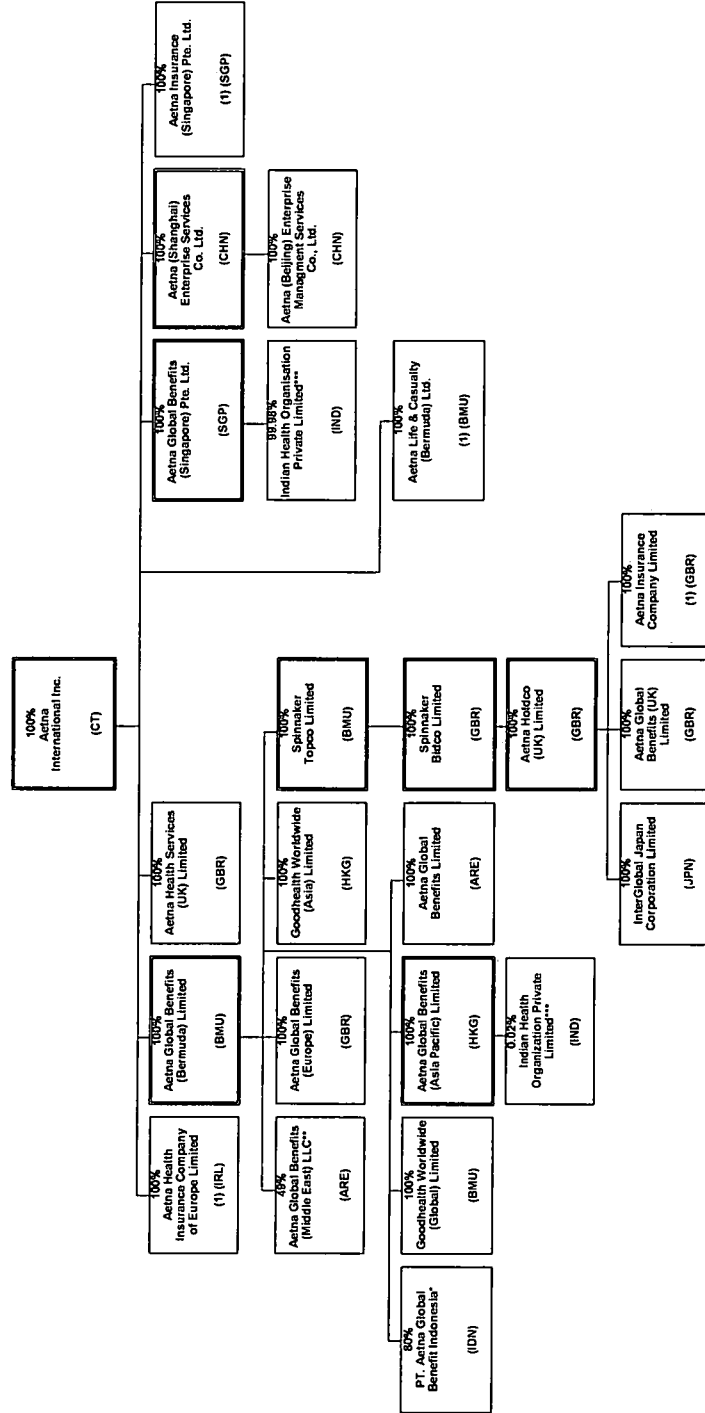
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



(1) Insurers/HMO's
 Percentages are rounded to the nearest whole percent and based on ownership of voting rights.
 *Insured by Aetna Inc. as a subsidiary of Aetna Inc. as shown on the same page.
 Bold borders indicate entity has subsidiaries shown on a separate page.
 *55% is owned by AUSHC Holdings, Inc. and 45% is owned by third parties.

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

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

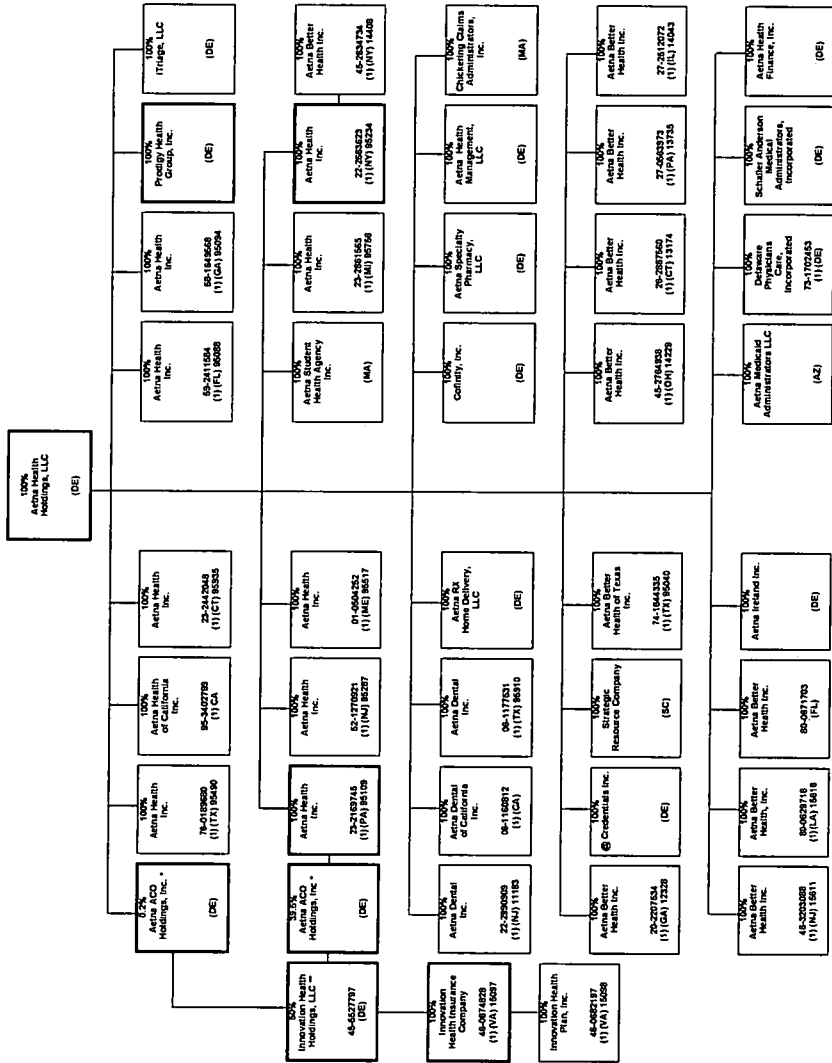


**Aetna Global Benefits (Bermuda) Limited owns 89% and 26% is owned by Sunlighter River, Aetna's Nominee.
 ** Aetna Global Benefits (Bermuda) Limited owns 49% and 51% is owned by Sunlighter River, Aetna's Nominee.
 *** Aetna Global Benefits (Asia Pacific) Limited owns 0.018577% of Indian Health Organisation Private Limited and Aetna Global Benefits (Singapore) Pte. Ltd. owns 99.980143%.

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

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

PART 1 - ORGANIZATIONAL CHART

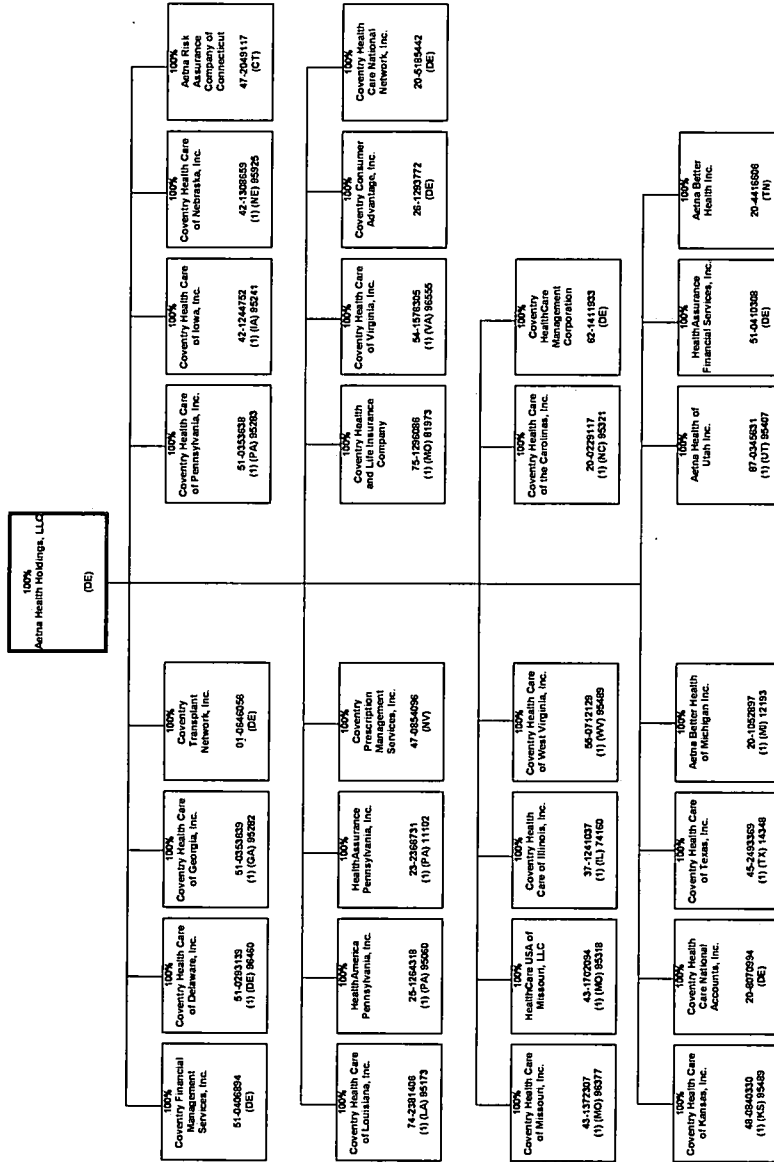


* Aetna Life Insurance Company owns 80% of Aetna Health, Inc. (CA), Aetna Health, Inc. (GA), Aetna Health, Inc. (IL), Aetna Health, Inc. (MI), Aetna Health, Inc. (MN), Aetna Health, Inc. (NJ), Aetna Health, Inc. (NY), Aetna Health, Inc. (NC), Aetna Health, Inc. (ND), Aetna Health, Inc. (OH), Aetna Health, Inc. (OK), Aetna Health, Inc. (OR), Aetna Health, Inc. (PA), Aetna Health, Inc. (SC), Aetna Health, Inc. (SD), Aetna Health, Inc. (TN), Aetna Health, Inc. (TX), Aetna Health, Inc. (UT), Aetna Health, Inc. (VA), Aetna Health, Inc. (WA), Aetna Health, Inc. (WI), and Aetna Health, Inc. (WY).
 ** Innovation Health Holdings, LLC is 60% owned by Aetna ACO Holdings, Inc. and 40% owned by Aetna Health System Corporation, an unaffiliated company.

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**

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

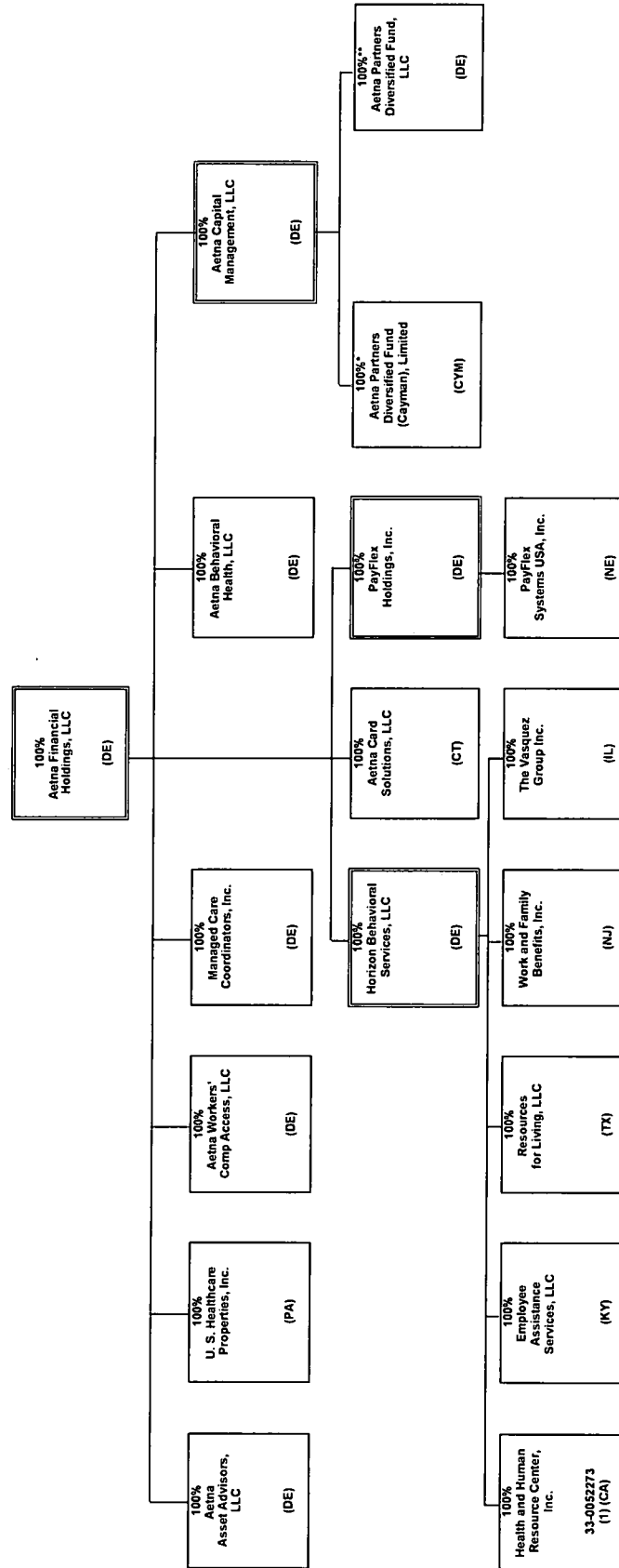
PART 1 - ORGANIZATIONAL CHART



Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

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

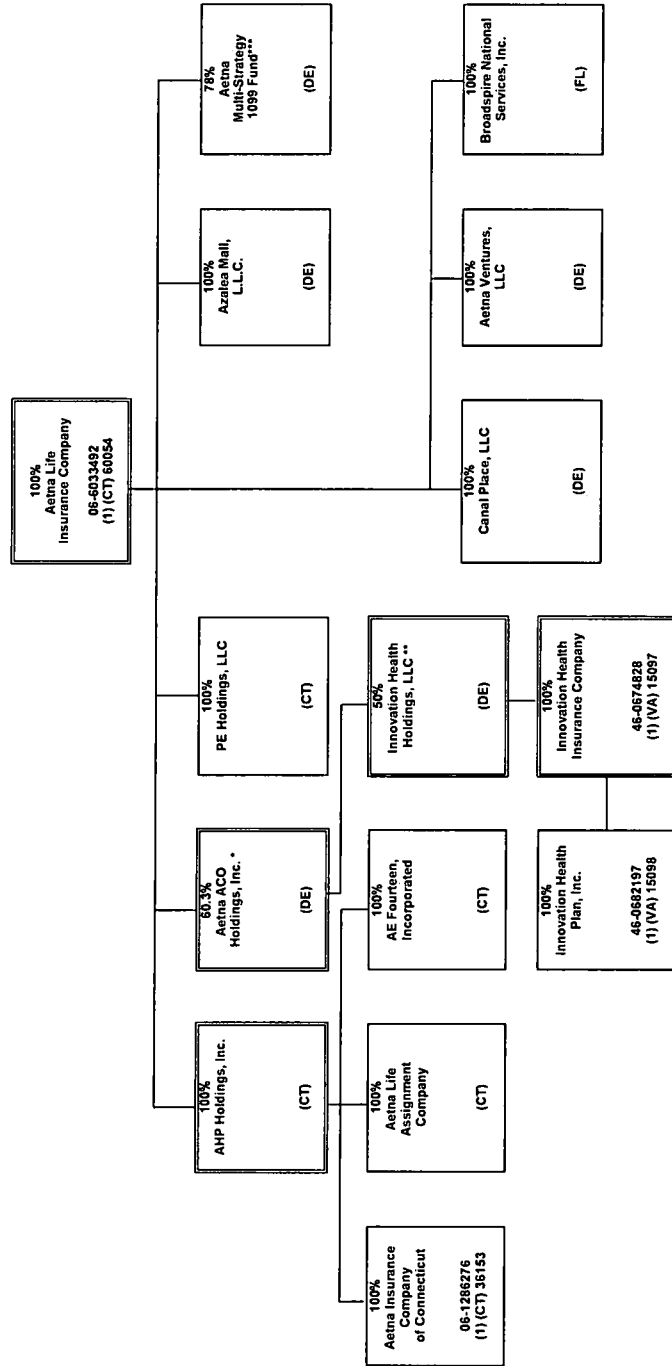
PART 1 - ORGANIZATIONAL CHART



* Aetna Life Insurance Company owns the Class C participating shares of Aetna Partners Diversified Fund (Cayman), Limited.
 ** Aetna Life Insurance Company and Aetna Health and Life Insurance Company own substantially all of the non-managing member interests of Aetna Partners Diversified Fund, LLC.

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

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

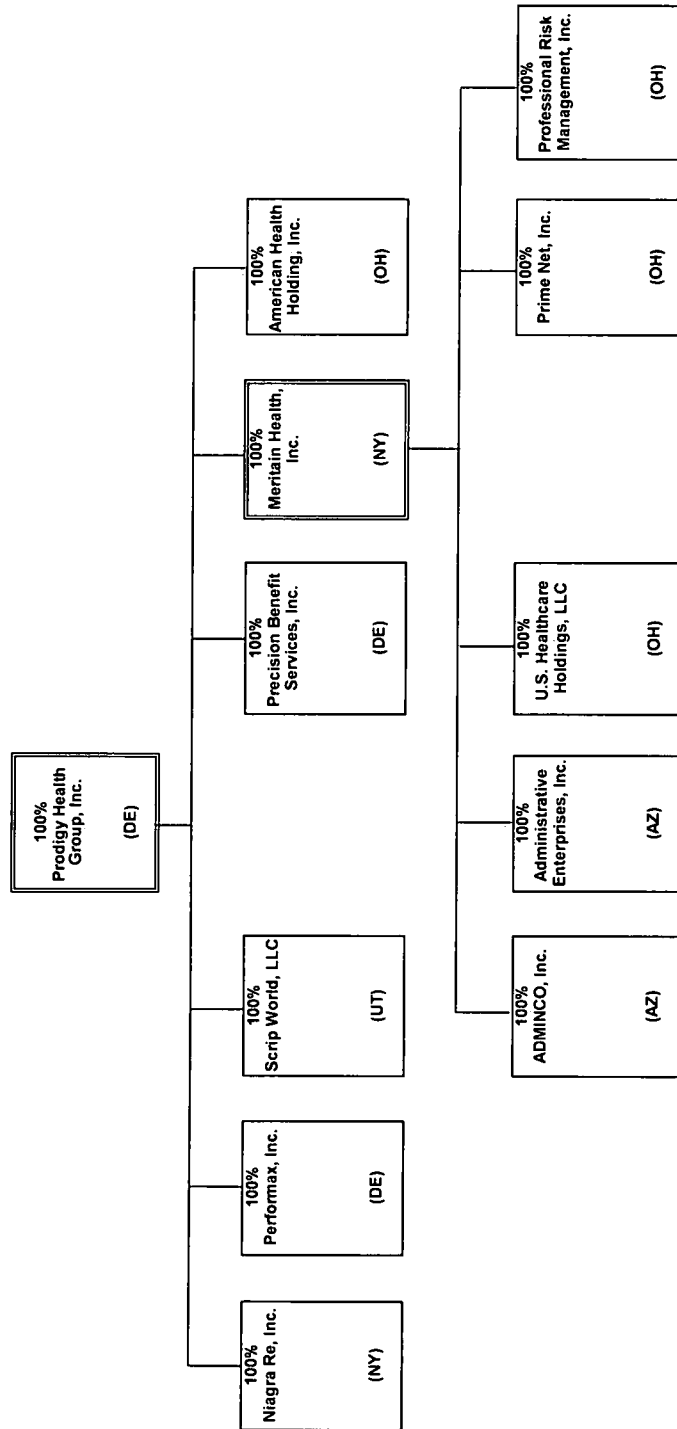


* Aetna Life Insurance Company owns 302 shares, Aetna Health Inc. (PA) owns 199 shares and Aetna Health Holdings, LLC owns 1 share.
 ** Innovation Health Holdings, LLC is 50% owned by Aetna ACO Holdings, Inc. and 50% owned by Inova Health System Foundation, an unaffiliated company.
 ***78% is invested and owned by Aetna Life Insurance Company and 22% is invested and owned by external accredited investors.

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

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

PART 1 - ORGANIZATIONAL CHART



Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
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
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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Management, Board, Agency-in-Fact, Influence, Other)	Ownership Percentage	Ultimate Controlling Entity(ies)/Person(s)	
0001	AETNA INC	00000	23-2229883	3060706	1122304	N	Aetna Inc.	PA	UIP	Aetna Inc.	Ownership	0.000	Aetna Inc.	0
0001	AETNA INC	00000	30-0123754	0	0		Aetna Health Holdings, LLC	DE	UDP	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	00000	45-4901541	0	0		Aetna ACO Holdings, Inc.	DE	NIA	Aetna ACO Holdings, Inc.	Ownership	0.200	Aetna Inc.	4
0001	AETNA INC	00000	45-5527797	0	0		Innovation Health Holdings, LLC	DE	NIA	Innovation Health Holdings, LLC	Ownership	50.000	Aetna Inc.	7
0001	AETNA INC	15097	46-0674828	0	0		Innovation Health Insurance Company	VA	IA	Innovation Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	15098	46-0682197	0	0		Innovation Health Plan, Inc.	VA	IA	Innovation Health Insurance Company	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	00000	95-3402799	0	0		Aetna Health of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	95935	23-2442048	0	0		Aetna Health Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	95088	58-2411584	0	0		Aetna Health Inc.	FL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	95094	58-1649568	0	0		Aetna Health Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	95517	01-0504252	0	0		Aetna Health Inc.	ME	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	95756	23-2861965	0	0		Aetna Health Inc.	MI	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	95287	52-1270921	0	0		Aetna Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	95234	22-2653623	0	0		Aetna Health Inc.	NY	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	14408	45-2634734	0	0		Aetna Better Health Inc.	NY	IA	Aetna Health Inc. (NY)	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	95109	23-2169745	0	0		Aetna Health Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	00000	45-4901541	0	0		Aetna ACO Holdings, Inc.	DE	NIA	Aetna Health Inc. (PA)	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	95490	76-0189860	0	0		Aetna Health Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	39.500	Aetna Inc.	4
0001	AETNA INC	95040	74-1844335	0	0		Aetna Better Health of Texas Inc.	TX	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	12328	20-2207534	0	0		Aetna Better Health Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	00000	06-1160812	0	0		Aetna Denial Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	11183	22-2990909	0	0		Aetna Denial Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	95910	06-1177531	0	0		Aetna Denial Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	00000	30-0123760	0	0		Aetna Rx Home Delivery, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	00000	13-3670795	0	0		Aetna Health Management, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	00000	22-3187443	0	0		Aetna Ireland Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	00000	04-3134551	0	0		Chickering Claims Administrators, Inc.	MA	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	00000	57-1209768	0	0		Aetna Specialty Pharmacy, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	00000	20-1274723	0	0		Colinly, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	00000	23-2671370	0	0		@Credentiaals Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	00000	57-0640544	0	0		Strategic Resource Company	SC	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	13735	27-0563973	0	0		Aetna Better Health Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	13174	26-2867560	0	0		Aetna Better Health Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	14043	27-2512072	0	0		Aetna Better Health Inc.	IL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	15616	80-0629718	0	0		Aetna Better Health Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC	00000	80-0671703	0	0		Aetna Better Health Inc.	FL	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
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
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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	
0001	AETNA INC.	14229	25-2764938	0	0		Aetna Better Health Inc.	OH	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	15611	46-3203098	0	0		Aetna Better Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	04-2708160	0	0		Aetna Student Health Agency Inc.	MA	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	73-1702453	0	0		Delaware Physicians Care, Incorporated	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	01-0826783	0	0		Schaller Anderson Medical Administrators, Incorporated	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	46-4325463	0	0		Aetna Health Finance, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	86-0842559	0	0		Aetna Medicaid Administrators LLC	AZ	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	45-2944270	0	0		Triage, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	16-1471176	0	0		Prodigy Health Group, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-0438576	0	0		Niagara Re, Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	52-2200070	0	0		Performax, Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	27-0632355	0	0		Scip World, LLC	UT	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	27-1760756	0	0		Precision Benefit Services, Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	31-1368946	0	0		American Health Holding, Inc.	OH	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	16-1264154	0	0		Mentian Health, Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	86-0537707	0	0		ADMINCO, Inc.	AZ	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	86-0527428	0	0		Administrative Enterprises, Inc.	AZ	NIA	Mentian Health, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	16-1684061	0	0		U.S. Healthcare Holdings, LLC	OH	NIA	Mentian Health, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	34-1670299	0	0		Prime Net, Inc.	OH	NIA	Mentian Health, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	34-1348032	0	0		Professional Risk Management, Inc.	OH	NIA	Mentian Health, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	68500	62-1181209	0	0		Continental Life Insurance Company of Brentwood, Tennessee	TN	IA	Continental Life Insurance Company of Brentwood, Tennessee	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	12321	20-2901054	0	0		American Continental Insurance Company	TN	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	60054	06-6030492	0	0		Aetna Life Insurance Company	CT	NIA	Aetna Inc.	Ownership	60.300	Aetna Inc.	0
0001	AETNA INC.	00000	45-4901541	0	0		Aetna ACO Holdings, Inc.	DE	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	06-1270755	0	0		AHP Holdings, Inc.	CT	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	4
0001	AETNA INC.	36153	06-1266276	0	0		Aetna Insurance Company of Connecticut	CT	IA	AHP Holdings, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	06-1028469	0	0		Aetna Life Assignment Company	CT	NIA	AHP Holdings, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	06-1373153	0	0		AE Fourteen, Incorporated	CT	NIA	AHP Holdings, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-3678539	0	0		PE Holdings, LLC	CT	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	06-1423207	0	0		Azalea Mall, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-3180700	0	0		Canal Place, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	59-2108747	0	0		Aetna Ventures, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	41-2005861	0	0		Broadspire National Services, Inc.	FL	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	26-2030792	0	0		Aetna Multi-Strategy 1089 Fund	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	9
0001	AETNA INC.	00000	26-2030792	0	0		Aetna Financial Holdings, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	23-2354500	0	0		Aetna Asset Advisors, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		U.S. Healthcare Properties, Inc.	PA	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
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
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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Management, Influence, Other)	If Control is Provided Percentage	Ultimate Controlling Entity(ies)/Person(s)	
0001	AETNA INC.	00000	38-3704481	0	0		Aetna Capital Management, LLC	DE	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	11-3667142	0	131452		Aetna Partners Diversified Fund, LLC	DE	N/A	Aetna Capital Management, LLC	Ownership	100.000	Aetna Inc.	1
0001	AETNA INC.	00000		0	1460020		Aetna Partners Diversified Fund (Cayman), Limited	CYM	N/A	Aetna Capital Management, LLC	Ownership	100.000	Aetna Inc.	2
0001	AETNA INC.	00000	20-0446676	0	0		Aetna Workers' Comp Access, LLC	DE	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-0446713	0	0		Aetna Behavioral Health, LLC	DE	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	23-2670015	0	0		Managed Care Coordinators, Inc.	DE	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	59-3269144	0	0		Horizon Behavioral Services, LLC	DE	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	61-1193498	0	0		Employee Assistance Services, LLC	DE	N/A	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	33-005273	0	0		Health and Human Resource Center, Inc.	CA	IA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	75-2420973	0	0		Resources for Living, LLC	TX	N/A	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	35-3681261	0	0		The Vasquez Group Inc.	IL	N/A	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	22-3178125	0	0		Work and Family Benefits, Inc.	NJ	N/A	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	27-1773021	0	0		Aetna Card Solutions, LLC	CT	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-5216478	0	0		PayFlex Holdings, Inc.	DE	N/A	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	91-1774434	0	0		PayFlex Systems USA, Inc.	NE	N/A	PayFlex Holdings, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	76700	06-0876636	0	0		Aetna Health and Life Insurance Company	CT	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	72052	23-2710210	0	0		Aetna Health Insurance Company	PA	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	84450	57-0805126	0	0		Aetna Health Insurance Company of New York	NY	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	95-1571642	0	0		Aetna Risk Indemnity Company, LTD	BMU	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	99-0211470	0	0		Aetna International Inc.	CT	N/A	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Life & Casualty (Bermuda) Ltd	BMU	IA	Aetna International Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Health Services (UK) Limited	GBR	N/A	Aetna International Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Insurance (Singapore) Pte. Ltd	SGP	N/A	Aetna International Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Bermuda) Limited	BMU	N/A	Aetna International Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Goodhealth Worldwide (Global) Limited	BGR	N/A	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Goodhealth Worldwide (Asia) Limited	HKG	N/A	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Global Benefits Limited	ARE	N/A	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		PT. Aetna Global Benefits Indonesia	IDN	N/A	Aetna Global Benefits (Bermuda) Limited	Ownership	80.000	Aetna Inc.	5
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Middle East) LLC	ARE	N/A	Aetna Global Benefits (Bermuda) Limited	Ownership	49.000	Aetna Inc.	6
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Asia Pacific) Limited	HKG	N/A	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Spinmaker Topco Limited	BMU	N/A	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Spinmaker Bicoo Limited	GBR	N/A	Spinmaker Topco Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Hddco (UK) Limited	GBR	N/A	Spinmaker Bicoo Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		InterGlobal Japan Corporation Limited	JPN	N/A	Aetna Hddco (UK) Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (UK) Limited	GBR	N/A	Aetna Hddco (UK) Limited	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	10000		0	0		Aetna Insurance Company Limited	GBR	IA	Aetna Hddco (UK) Limited	Ownership	100.000	Aetna Inc.	0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
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
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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Management, Board, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	
0001	AETNA INC.	00000		0	0		Indian Health Organisation Private Limited	IND	N/A	Aetna Global Benefits (Asia Pacific) Limited	Ownership	0.020	Aetna Inc.	3
0001	AETNA INC.	00000		0	0		Aetna Health Insurance Company of Europe Limited	IRL	IA	Aetna International Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna (Shanghai) Enterprise Services Co. Ltd.	CHN	N/A	Aetna International Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna (Beijing) Enterprise Management Services Co. Ltd.	CHN	N/A	Aetna (Shanghai) Enterprise Services Co. Ltd.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Singapore) PTE. LTD	SGP	N/A	Aetna International Inc.	Ownership	99.980	Aetna Inc.	3
0001	AETNA INC.	00000	22-2578985	0	0		Indian Health Organisation Private Limited	IND	N/A	Aetna Global Benefits (Singapore) PTE. LTD	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	06-1182176	0	0		AUSHC Holdings, Inc.	CT	N/A	Aetna Inc.	Ownership	55.000	Aetna Inc.	8
0001	AETNA INC.	00000	52-2182411	0	0		PHPSNE Parent Corporation	DE	N/A	AUSHC Holdings, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	47-0970432	0	0		Active Health Management, Inc.	DE	N/A	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	23-2604667	0	0		Health Data & Management Solutions, Inc.	DE	N/A	Active Health Management, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	13980	27-2192415	0	0		Aetna Integrated Informatics, Inc.	PA	N/A	Active Health Management, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	81-0579372	0	0		Health Re, Inc.	VT	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	46-2469464	0	0		Phoenix Data Center Hosting Services, LLC	DE	N/A	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	51-0079328	0	0		Healthagen LLC	CT	N/A	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	33-0807547	0	0		ASI Wings, L.L.C.	DE	N/A	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	27-1170966	0	0		Medicity, Inc.	DE	N/A	Aetna Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	75-1296086	0	0		Novo Innovations, LLC	DE	N/A	Medicity Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	81973	75-1296086	0	0		Alviant Corporation	DE	N/A	Medicity Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	51-0406894	0	0		Coventry Health and Life Insurance Company	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	51-0293139	0	0		Coventry Financial Management Services, Inc.	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	96460	51-0293139	0	0		Coventry Health Care of Delaware, Inc.	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95282	51-0353639	0	0		Coventry Health Care of Georgia, Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	52-1801446	0	0		Group Dental Service, Inc.	MD	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95846	52-2056201	0	0		Group Dental Service of Maryland, Inc.	MD	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95283	51-0353639	0	0		Coventry Health Care of Pennsylvania, Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95241	42-1244752	0	0		Coventry Health Care of Iowa, Inc.	IA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95925	42-1306559	0	0		Coventry Health Care of Nebraska, Inc.	NE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	47-2049117	0	0		Aetna Risk Assurance Company of Connecticut Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95173	74-2381406	0	0		Coventry Health Care of Louisiana, Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95060	25-1264318	0	0		HealthAmerica Pennsylvania, Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	11102	23-2366731	0	0		HealthAssurance Pennsylvania, Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	47-0854096	0	0		Coventry Prescription Management Services, Inc.	NV	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	96555	54-1576305	0	0		Coventry Health Care of Virginia, Inc.	VA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	01-0646266	0	0		Coventry Transplant Network, Inc.	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	96377	43-1372307	0	0		Coventry Health Care of Missouri, Inc.	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95318	43-1702064	0	0		HealthCare USA of Missouri, LLC	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95408	55-0712129	0	0		Coventry Health Care of West Virginia, Inc.	WV	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
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
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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Management, Board, Attestation, Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	
0001	AETNA INC.	95321	20-0229117	0	0	0	Coventry Health Care of the Carolinas, Inc.	NC	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	62-1411933	0	0	0	Coventry Health Care Management Corporation	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	14348	45-2493369	0	0	0	Coventry Health Care of Texas, Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95489	48-0840330	0	0	0	Coventry Health Care of Kansas, Inc.	KS	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	12193	20-1052897	0	0	0	Aetna Better Health of Michigan Inc.	MI	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95407	87-0345831	0	0	0	Aetna Health of Utah Inc.	UT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	51-0410308	0	0	0	Health-Assurance Financial Services, Inc.	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-4416606	0	0	0	Aetna Better Health Inc.	TN	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	74160	37-1241037	0	0	0	Coventry Health Care of Illinois, Inc.	IL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-8070994	0	0	0	Coventry Health Care National Accounts, Inc.	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-5185442	0	0	0	Coventry Health Care National Network, Inc.	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	26-1293772	0	0	0	Coventry Consumer Advantage, Inc.	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-8376354	0	0	0	Coventry Health Care Workers' Compensation, Inc.	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-0896903	0	0	0	First Scrip Network Services, Inc.	NV	N/A	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	06-1095987	0	0	0	MeiraComp, Inc.	CT	N/A	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	74-2879984	0	0	0	Medical Examinations of New York, P.C.	NY	N/A	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	62-1266688	0	0	0	FOCUS Healthcare Management, Inc.	TN	N/A	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	87-0443226	0	0	0	Coventry Rehabilitation Services, Inc.	DE	N/A	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	90328	38-2242132	0	0	0	First Health Group Corp.	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	52-1320522	0	0	0	First Health Life & Health Insurance Company	TX	IA	First Health Group Corp	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	81000	75-1431313	0	0	0	Claims Administration Corp.	MD	N/A	First Health Group Corp	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-1130063	0	0	0	Cambridge Life Insurance Company	MO	IA	First Health Group Corp	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	65-0966441	0	0	0	Florida Health Plan Administrators, LLC	FL	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	95266	65-0453436	0	0	0	Coventry Health Care of Florida, Inc.	FL	IA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	59-3750548	0	0	0	Coventry Health Plan of Florida, Inc.	FL	IA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	36-4391310	0	0	0	Carefree Insurance Services, Inc.	FL	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	38-3348145	0	0	0	SSW LLC	DE	N/A	SSW LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	26-1582982	0	0	0	Corporate Benefit Strategies, Inc.	DE	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	37-1448790	0	0	0	MHNet Specialty Services, LLC	MD	N/A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	12509	20-2516317	0	0	0	Mental Health Network of New York IPA, Inc.	NY	N/A	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	72-1106596	0	0	0	MHNet Life and Health Insurance Company	TX	IA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-4276336	0	0	0	Mental Health Associates, Inc.	LA	N/A	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	0
0001	AETNA INC.	00000	20-4276336	0	0	0	MHNet of Florida, Inc.	FL	N/A	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	0

Asterisk Explanation

1 Aetna Life Insurance Company and Aetna Health and Life Insurance Company own substantially all of the non-managing membership interests.

2 Aetna Life Insurance Company owns the Class C participating shares.

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**
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
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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	
3	Aetna Global Benefits (Asia Pacific) Limited						Aetna Global Benefits (Singapore) Pte. Ltd. owns 99.980143%.							
4	Aetna ACO Holdings, Inc.						Aetna Health Inc. (PA) (39%) and Aetna Health Holdings, LLC (1%).							
5	Aetna Global Benefits (Bermuda) Limited						Aetna's Nominee.							
6	Aetna ACO Holdings, Inc.						Aetna's Nominee.							
7	Aetna ACO Holdings, Inc.						Aetna's Nominee.							
8	Aetna ACO Holdings, Inc.						Aetna's Nominee.							
9	Aetna ACO Holdings, Inc.						Aetna's Nominee.							

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Underwritings for the Benefit of any Affiliates	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)	
00000	23-2229663	Aetna Inc.	864,019,477	(65,419,477)	0	0	881,177,798	0	0	0	1,679,777,798	0
72052	23-2710210	Aetna Health Insurance Company	0	0	0	1,000	(7,879,685)	9,492,441	0	0	1,813,756	(27,850)
78700	06-0876836	Aetna Health and Life Insurance Company	(34,860,429)	0	(3,437,903)	0	(19,993,087)	71,701,866	0	0	13,610,447	(1,815,649,341)
84450	97-0805126	Aetna Health Insurance Company of New York	0	0	0	0	(181,971)	0	0	0	(181,971)	0
00000	98-0166872	Aetna Risk Indemnity Company, LTD	0	0	0	0	0	13,091,025	0	0	13,091,025	(60,336,076)
00000	00-0000000	Aetna Life & Casualty Bermuda (Bermuda) Ltd	0	0	0	0	(5,944,512)	0	0	0	(5,944,512)	0
00000	00-0000000	Aetna Behavioral Health, LLC	0	0	0	0	(627,969)	0	0	0	(627,969)	0
00000	38-3704481	Aetna Capital Management, LLC	0	0	0	0	2,389,946	0	0	0	2,389,946	0
00000	81-0579372	Aetna Partners Diversified Fund (Cayman), Limited	(43,371,021)	0	13,800,824	0	0	0	0	0	(29,570,197)	0
00000	00-0000000	Aetna Partners Diversified Fund, LLC	(15,408,208)	0	5,214,153	0	0	0	0	0	(10,194,055)	0
60054	06-6033492	Aetna Life Insurance Company	(481,926,683)	1,384,356	(17,499,671)	1,000	(709,532,472)	(339,605,637)	0	0	(1,547,599,107)	2,619,844,554
36153	06-1286276	Aetna Insurance Company of Connecticut	0	0	0	0	114,934	(13,091,025)	0	0	(12,976,091)	0
00000	00-0000000	Canal Place, LLC	(625,000)	0	0	0	0	0	0	0	(625,000)	0
00000	45-2944270	Triage, LLC	0	0	0	0	4,501,326	0	0	0	4,501,326	0
00000	46-2469464	Healthagen LLC	(3,419,477)	0	0	0	2,311,679	0	0	0	(1,107,798)	0
00000	86-0842559	Aetna Medicaid Administrators LLC	0	0	0	0	164,806,150	0	0	0	164,806,150	0
00000	06-1571642	Aetna International, Inc.	0	0	0	0	1,409,523	0	0	0	1,409,523	0
00000	73-1702435	Delaware Physicians Care, Incorporated	0	0	0	0	0	0	0	0	0	0
13174	26-2867560	Aetna Better Health, Inc. (a Connecticut Corporation)	0	0	0	0	(8,143,800)	0	0	0	(8,143,800)	0
00000	20-3180700	Aetna Ventures, LLC	(29,509)	0	0	(1,000)	(60,519)	0	0	0	(61,519)	0
00000	30-0123754	Aetna Health Holdings, LLC	371,400,000	2,055,121	0	0	0	0	0	0	78,400,000	0
00000	20-3678339	PE Holdings, LLC	0	(293,000,000)	(143,011)	0	0	0	0	0	0	0
00000	95-3402799	Aetna Health of California Inc.	(52,000,000)	0	0	(1,000)	(256,392,726)	0	0	0	(308,393,726)	0
13735	27-0563973	Aetna Better Health Inc (PA)	0	66,000,000	0	0	(53,942,775)	0	0	0	12,157,225	0
95935	23-2442048	Aetna Health Inc. (CT)	0	25,000,000	0	0	(22,559,965)	0	0	0	2,440,035	0
95088	59-2411584	Aetna Health Inc. (FL)	(45,000,000)	0	0	0	(147,719,485)	0	0	0	(192,719,485)	0
95094	58-1649568	Aetna Health Inc. (GA)	(5,000,000)	0	0	0	(32,029,638)	0	0	0	(37,829,638)	0
00000	75-3270039	Aetna Health Insurance Company of Europe Limited	0	0	0	0	(3,838,986)	0	0	0	(3,838,986)	0
95756	23-2861965	Aetna Health Inc. (MI)	(2,300,000)	0	0	0	(1,337)	0	0	0	(2,301,337)	0
95287	52-1270921	Aetna Health Inc. (NJ)	0	10,000,000	0	0	(144,454,079)	(9,286,434)	0	0	(143,740,513)	27,850
95234	22-2663623	Aetna Health Inc. (NY)	(84,300,000)	(13,000,000)	0	0	(45,999,800)	0	0	0	(142,899,800)	0
00000	00-0000000	Aetna Shanghai Enterprises Services Co. Ltd	0	0	0	0	3,253	0	0	0	3,253	0
00000	00-0000000	Aetna Insurance (Singapore) Pte. Ltd	0	0	0	0	(542,012)	0	0	0	(542,012)	0
95109	23-169745	Aetna Health Inc. (PA)	(1,000,000)	0	0	0	(391,344,938)	(3,405,200)	0	0	(694,750,139)	1,605,549
95490	76-0189680	Aetna Health Inc. (TX)	0	0	0	0	(3,548,640)	0	0	0	(7,897,006)	0
00000	33-0652273	Health and Human Resources Center, Inc	0	0	0	0	0	0	0	0	1,000,000	0
00000	59-3269144	Horizon Behavioral Services LLC	1,000,000	0	0	0	(10,630,475)	0	0	0	(10,630,475)	0
95517	01-0504252	Aetna Health Inc. (ME)	0	0	0	0	(9,898,272)	0	0	0	(17,898,272)	0
00000	06-1160812	Aetna Dental of California Inc.	(6,000,000)	0	0	0	(1,961,065)	0	0	0	(1,961,065)	0
11183	22-2990909	Aetna Dental Inc. (NJ)	0	0	0	0	0	0	0	0	0	0
95910	06-1177531	Aetna Dental Inc. (TX)	(7,400,000)	0	0	0	(9,133,762)	(49,035)	0	0	(16,582,797)	0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries and Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements		Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
00000	13-3670795	Aetna Health Management, LLC	0	0	0	0	2,576,684,131	0	78,163	0	2,576,762,294	0
13980	27-2192415	Health Re, Inc.	(280,000,000)	0	0	0	(70,297,658)	266,986,189	0	(83,311,468)	(81,604,840)	0
00000	30-0123760	Aetna RX Home Delivery, LLC	0	0	0	0	267,689,478	0	0	0	267,689,478	0
13238	20-2207534	Aetna Better Health Inc. (GA)	0	0	0	0	(17,332)	0	0	0	(17,332)	0
00000	04-3134551	Chickering Claims Administrators, Inc.	0	0	0	0	41,607,355	0	0	0	41,607,355	0
14043	27-2512072	Aetna Better Health Inc. (IL)	0	40,000,000	0	0	(59,744,486)	0	0	0	(19,744,486)	0
14408	45-2634734	Aetna Better Health Inc. (a New York corporation)	0	13,000,000	0	0	(13,043,478)	0	0	0	(43,478)	0
14279	62-2764938	Aetna Better Health Inc. (an Ohio corporation)	0	65,000,000	0	0	(20,541,725)	0	0	0	44,458,275	0
68500	62-1181209	Continental Life Insurance Company of Brentwood Tennessee	0	18,000,000	0	0	(72,103,417)	0	0	0	(54,103,417)	0
12321	20-2901054	American Continental Insurance Company	0	4,000,000	0	0	(109,846,645)	0	0	0	(65,846,645)	0
00000	00-0000000	Aetna Multi Strategy 1099 Fund	(4,379,150)	0	2,065,608	0	2,815,381	0	0	0	501,839	0
00000	52-2182411	Active Health Management, Inc.	0	0	0	0	106,685,306	0	0	0	106,685,306	0
00000	06-1423207	Azalea Mall, LLC	0	0	0	0	0	0	0	0	0	0
00000	04-2708160	Aetna Student Health Agency Inc.	0	0	0	0	36,080,005	0	0	0	36,080,005	0
00000	57-1209768	Aetna Specialty Pharmacy, LLC	0	0	0	0	31,873,147	0	0	0	31,873,147	0
00000	45-5527797	Innovation Health Holdings, LLC	0	(27,000,000)	0	0	1,259,688	0	0	0	(25,740,302)	(2,580,373)
15097	46-0674828	Innovation Health Insurance Company	0	23,500,000	0	0	(26,769,963)	917,562	0	0	(5,352,401)	(1,605,549)
15088	46-0682197	Innovation Health Plan, Inc.	0	4,500,000	0	0	(4,954,447)	3,248,278	0	0	2,793,781	0
00000	00-0000000	ACO Holdings	0	10,000,000	0	0	0	0	0	0	10,000,000	(8,337,333)
81973	75-1296086	Coverity Health & Life Insurance Company	(40,000,000)	0	0	0	(618,348,883)	7,313,903	0	0	(651,034,980)	0
00000	51-0406894	Coverity Financial Mgmt Services, Inc.	0	0	0	0	12,080,925	0	0	0	12,080,925	0
96460	51-0293139	Coverity Health Care of Delaware, Inc.	(7,600,000)	0	0	0	(45,542,463)	(375,717)	0	0	(53,518,180)	0
95282	51-0353639	Coverity Health Care of Georgia, Inc.	0	0	0	0	(149,732,025)	1,079,946	0	0	(148,652,079)	0
00000	52-1801446	Group Dental Services, Inc.	1,049,000	0	0	0	617,955	0	0	0	1,666,955	0
95283	51-0353638	Coverity Health Care of Pennsylvania, Inc.	0	0	0	0	839	0	0	0	839	0
95241	42-1244752	Coverity Health Care of Iowa, Inc.	0	10,000,000	0	0	(46,200,292)	(672,118)	0	0	(36,872,410)	2,097,130
95925	42-1308659	Coverity Health Care of Nebraska, Inc.	0	0	0	0	(62,269,225)	(3,014,776)	0	0	(65,314,001)	0
95173	74-2381406	Coverity Health Care of Louisiana, Inc.	(5,000,000)	0	0	0	(75,993,724)	(1,033,953)	0	0	(82,027,677)	0
95060	25-1284318	HealthAmerica Pennsylvania Inc.	(30,000,000)	35,000,000	0	0	(128,759,114)	(771,010)	0	0	(94,530,124)	0
11102	23-2366731	HealthAssurance Pennsylvania, Inc.	0	0	0	0	(239,444,414)	918,627	0	0	(268,525,787)	0
96555	47-0854096	Coverity Prescription Management Services, Inc.	0	0	0	0	757,094,619	0	0	0	757,094,619	864,827
96377	43-1372307	Coverity Health Care of Virginia, Inc.	0	20,000,000	0	0	(102,446,170)	(1,066,483)	0	0	(83,512,653)	0
95318	43-1702094	HealthCare USA of Missouri, Inc.	(6,000,000)	0	0	0	(87,580,821)	(407,247)	0	0	(93,988,068)	5,050,296
95408	55-0712129	Coverity Health Care of West Virginia, Inc.	(17,000,000)	0	0	0	(110,247,462)	(132,566)	0	0	(130,380,048)	0
95321	20-0229117	Coverity Health Care of the Carolinas, Inc.	0	12,000,000	0	0	(45,967,917)	535,448	0	0	(62,432,469)	14,035
14346	45-2493369	Coverity Health Care of Texas, Inc.	0	0	0	0	(179,250,663)	126,404	0	0	(167,124,279)	0
95489	48-0840330	Coverity Health Care of Kansas, Inc.	(30,000,000)	0	0	0	(1,438,860)	(47,534)	0	0	(1,486,394)	0
00000	26-1582982	MHNat Specialty Services, LLC	0	0	0	0	(133,143,204)	(1,357,429)	0	0	(164,500,633)	0
12193	20-1052897	Aetna Better Health of Michigan	(4,100,000)	0	0	0	141,402,882	0	0	0	141,402,882	311,045
95407	87-0345631	Aetna Health of Utah, Inc.	0	0	0	0	(128,278,144)	(450,703)	0	0	(26,466,793)	0
00000	51-0410308	HealthAssurance Financial Services, Inc.	0	0	0	0	11,224,984	(26,278)	0	0	11,224,984	0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
74160	37-1241037	Coventry Health Care of Illinois, Inc.	(7,700,000)	0	0	0	(50,933,483)	324,810	0	0	(66,368,673)	0
00000	20-8376354	CHC Workers' Compensation, Inc.	0	0	0	0	391,485	0	0	0	391,485	0
90328	36-2242132	First Health Life & Health Ins Co.	0	0	0	0	(115,996,154)	56,165	0	0	(115,937,989)	0
81000	75-1431313	Cambridge Life Insurance Co.	0	0	0	0	(1,995,070)	(1,000,975)	0	(78,163)	(3,074,208)	0
95114	65-0886441	Coventry Health Care of Florida, Inc.	0	0	0	0	(266,552,936)	(494)	0	0	(266,553,430)	0
95266	65-0453436	Coventry Health Plan of Florida, Inc.	0	0	0	0	(76,176,973)	0	0	0	(76,176,973)	0
10771	20-1976986	Coventry Summit Healthplan, Inc.	0	0	0	0	(1,094,093)	0	0	0	(1,094,093)	0
95846	32-2056201	Group Dental Services of Maryland, Inc.	(1,049,000)	0	0	0	0	0	0	0	(1,049,000)	0
12509	20-2516317	MHNet Life and Health Insurance Company	0	0	0	0	813,621	0	0	0	813,621	0
9999999	Control Totals		0	0	0	0	(0)	0	XXX	0	(0)	0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

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

APRIL FILING	
5. Will the Management's Discussion and Analysis be filed by April 1?	<u>YES</u>
6. Will the Supplemental Investment Risk Interrogatories be filed by April 1?	<u>YES</u>
7. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	<u>YES</u>

JUNE FILING	
8. Will an audited financial report be filed by June 1?	<u>WAIVED</u>
9. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	<u>WAIVED</u>

AUGUST FILING	
10. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	<u>WAIVED</u>

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.

MARCH FILING	
11. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	<u>NO</u>
12. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?	<u>NO</u>
13. Will the Supplemental Property/Casualty data due March 1 be filed with the state of domicile and the NAIC?	<u>NO</u>
14. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	<u>NO</u>
15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?	<u>NO</u>
16. Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Supplement be filed with the state of domicile and electronically with the NAIC by March 1?	<u>NO</u>
17. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	<u>NO</u>
18. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partners be filed electronically with the NAIC by March 1?	<u>SEE EXPLANATION</u>
19. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	<u>SEE EXPLANATION</u>
20. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	<u>SEE EXPLANATION</u>

APRIL FILING	
21. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	<u>NO</u>
22. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?	<u>NO</u>
23. Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC?	<u>NO</u>
24. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	<u>NO</u>
25. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	<u>NO</u>

AUGUST FILING	
26. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	<u>NO</u>

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

EXPLANATIONS:

BAR CODE:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.
- 13.
- 14.
- 15.
- 16.
- 17.
18. Not Applicable
19. Not Applicable
20. Not Applicable
- 21.
- 22.
- 23.
- 24.
- 25.
- 26.

	• 1 3 1 7 4 2 0 1 4 2 2 0 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 2 2 1 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 2 2 2 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 3 6 0 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 2 0 5 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 2 0 7 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 4 2 0 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 3 7 1 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 3 7 0 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 3 6 5 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 2 2 4 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 2 2 5 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 2 2 6 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 3 0 6 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 2 1 1 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 2 1 3 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 2 1 6 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 2 1 7 0 0 0 0 •
	• 1 3 1 7 4 2 0 1 4 2 3 9 0 0 0 0 •

**Overflow Page
NONE**

**Overflow Page
NONE**

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1	2	3	4	5	6
	Amount	Percentage	Amount	Securities Lending Reinvested Collateral Amount	Total (Col. 3 + 4) Amount	Percentage
1. Bonds:						
1.1 U.S. treasury securities.....	497,944	14.2	497,944	0	497,944	14.2
1.2 U.S. government agency obligations (excluding mortgage-backed securities):						
1.21 Issued by U.S. government agencies.....	0	0.0	0	0	0	0.0
1.22 Issued by U.S. government sponsored agencies.....	0	0.0	0	0	0	0.0
1.3 Non-U.S. government (including Canada, excluding mortgage-backed securities).....	499,794	14.2	499,794	0	499,794	14.2
1.4 Securities issued by states, territories and possessions and political subdivisions in the U.S.:						
1.41 States, territories and possessions general obligations.....	0	0.0	0	0	0	0.0
1.42 Political subdivisions of states, territories and possessions and political subdivisions general obligations.....	0	0.0	0	0	0	0.0
1.43 Revenue and assessment obligations.....	0	0.0	0	0	0	0.0
1.44 Industrial development and similar obligations.....	0	0.0	0	0	0	0.0
1.5 Mortgage-backed securities (includes residential and commercial MBS):						
1.51 Pass-through securities:						
1.511 Issued or guaranteed by GNMA.....	0	0.0	0	0	0	0.0
1.512 Issued or guaranteed by FNMA and FHLMC.....	0	0.0	0	0	0	0.0
1.513 All other.....	0	0.0	0	0	0	0.0
1.52 CMOs and REMICs:						
1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA.....	0	0.0	0	0	0	0.0
1.522 Issued by non-U.S. Government issuers and collateralized by mortgage-based securities issued or guaranteed by agencies shown in Line 1.521.....	0	0.0	0	0	0	0.0
1.523 All other.....	0	0.0	0	0	0	0.0
2. Other debt and other fixed income securities (excluding short-term):						
2.1 Unaffiliated domestic securities (includes credit tenant loans and hybrid securities).....	499,833	14.2	499,833	0	499,833	14.2
2.2 Unaffiliated non-U.S. securities (including Canada).....	0	0.0	0	0	0	0.0
2.3 Affiliated securities.....	0	0.0	0	0	0	0.0
3. Equity interests:						
3.1 Investments in mutual funds.....	0	0.0	0	0	0	0.0
3.2 Preferred stocks:						
3.21 Affiliated.....	0	0.0	0	0	0	0.0
3.22 Unaffiliated.....	0	0.0	0	0	0	0.0
3.3 Publicly traded equity securities (excluding preferred stocks):						
3.31 Affiliated.....	0	0.0	0	0	0	0.0
3.32 Unaffiliated.....	0	0.0	0	0	0	0.0
3.4 Other equity securities:						
3.41 Affiliated.....	0	0.0	0	0	0	0.0
3.42 Unaffiliated.....	0	0.0	0	0	0	0.0
3.5 Other equity interests including tangible personal property under lease:						
3.51 Affiliated.....	0	0.0	0	0	0	0.0
3.52 Unaffiliated.....	0	0.0	0	0	0	0.0
4. Mortgage loans:						
4.1 Construction and land development.....	0	0.0	0	0	0	0.0
4.2 Agricultural.....	0	0.0	0	0	0	0.0
4.3 Single family residential properties.....	0	0.0	0	0	0	0.0
4.4 Multifamily residential properties.....	0	0.0	0	0	0	0.0
4.5 Commercial loans.....	0	0.0	0	0	0	0.0
4.6 Mezzanine real estate loans.....	0	0.0	0	0	0	0.0
5. Real estate investments:						
5.1 Property occupied by company.....	0	0.0	0	0	0	0.0
5.2 Property held for production of income (including \$.....0 of property acquired in satisfaction of debt).....	0	0.0	0	0	0	0.0
5.3 Property held for sale (including \$.....0 property acquired in satisfaction of debt).....	0	0.0	0	0	0	0.0
6. Contract loans.....	0	0.0	0	0	0	0.0
7. Derivatives.....	0	0.0	0	0	0	0.0
8. Receivables for securities.....	0	0.0	0	0	0	0.0
9. Securities lending (Line 10, Asset Page reinvested collateral).....	0	0.0	0	XXX	XXX	XXX
10. Cash, cash equivalents and short-term investments.....	2,015,503	57.4	2,015,503	0	2,015,503	57.4
11. Other invested assets.....	0	0.0	0	0	0	0.0
12. Total invested assets.....	3,513,074	100.0	3,513,074	0	3,513,074	100.0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE A - VERIFICATION BETWEEN YEARS

Real Estate

1. Book/adjusted carrying value, December 31 of prior year.....		0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition (Part 2, Column 6).....	0	
2.2 Additional investment made after acquisition (Part 2, Column 9).....	0	0
3. Current year change in encumbrances:		
3.1 Totals, Part 1, Column 13.....	0	
3.2 Totals, Part 3, Column 11.....	0	0
4. Total gain (loss) on disposals, Part 3, Column 18.....		0
5. Deduct amounts received on disposals, Part 3, Column 15.....	NONE	0
6. Total foreign exchange change in book/adjusted carrying value:		
6.1 Totals, Part 1, Column 15.....	0	
6.2 Totals, Part 3, Column 13.....	0	0
7. Deduct current year's other-than-temporary impairment recognized:		
7.1 Totals, Part 1, Column 12.....	0	
7.2 Totals, Part 3, Column 10.....	0	0
8. Deduct current year's depreciation:		
8.1 Totals, Part 1, Column 11.....	0	
8.2 Totals, Part 3, Column 9.....	0	0
9. Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8).....		0
10. Deduct total nonadmitted amounts.....		0
11. Statement value at end of current period (Line 9 minus Line 10).....		0

SCHEDULE B - VERIFICATION BETWEEN YEARS

Mortgage Loans

1. Book value/recorded investment excluding accrued interest, December 31 of prior year.....		0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition (Part 2, Column 7).....	0	
2.2 Additional investment made after acquisition (Part 2, Column 8).....	0	0
3. Capitalized deferred interest and other:		
3.1 Totals, Part 1, Column 12.....	0	
3.2 Totals, Part 3, Column 11.....	0	0
4. Accrual of discount.....		0
5. Unrealized valuation increase (decrease):		
5.1 Totals, Part 1, Column 9.....	0	
5.2 Totals, Part 3, Column 8.....	0	0
6. Total gain (loss) on disposals, Part 3, Column 18.....	NONE	0
7. Deduct amounts received on disposals, Part 3, Column 15.....		0
8. Deduct amortization of premium and mortgage interest points and commitment fees.....		0
9. Total foreign exchange change in book value/recorded investment excluding accrued interest:		
9.1 Totals, Part 1, Column 13.....	0	
9.2 Totals, Part 3, Column 13.....	0	0
10. Deduct current year's other-than-temporary impairment recognized:		
10.1 Totals, Part 1, Column 11.....	0	
10.2 Totals, Part 3, Column 10.....	0	0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....		0
12. Total valuation allowance.....		0
13. Subtotal (Line 11 plus Line 12).....		0
14. Deduct total nonadmitted amounts.....		0
15. Statement value at end of current period (Line 13 minus Line 14).....		0

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

1. Book/adjusted carrying value, December 31 of prior year.....		0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition (Part 2, Column 8).....	0	
2.2 Additional investment made after acquisition (Part 2, Column 9).....	0	0
3. Capitalized deferred interest and other:		
3.1 Totals, Part 1, Column 16.....	0	
3.2 Totals, Part 3, Column 12.....	0	0
4. Accrual of discount.....		0
5. Unrealized valuation increase (decrease):		
5.1 Totals, Part 1, Column 13.....	0	
5.2 Totals, Part 3, Column 9.....	0	0
6. Total gain (loss) on disposals, Part 3, Column 19.....		0
7. Deduct amounts received on disposals, Part 3, Column 16.....		0
8. Deduct amortization of premium and depreciation.....		0
9. Total foreign exchange change in book/adjusted carrying value:		
9.1 Totals, Part 1, Column 17.....	0	
9.2 Totals, Part 3, Column 14.....	0	0
10. Deduct current year's other-than-temporary impairment recognized:		
10.1 Totals, Part 1, Column 15.....	0	
10.2 Totals, Part 3, Column 11.....	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....		0
12. Deduct total nonadmitted amounts.....		0
13. Statement value at end of current period (Line 11 minus Line 12).....		0

NONE

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

1. Book/adjusted carrying value, December 31 of prior year.....		1,505,019
2. Cost of bonds and stocks acquired, Part 3, Column 7.....		0
3. Accrual of discount.....		1,619
4. Unrealized valuation increase (decrease):		
4.1 Part 1, Column 12.....	0	
4.2 Part 2, Section 1, Column 15.....	0	
4.3 Part 2, Section 2, Column 13.....	0	
4.4 Part 4, Column 11.....	0	0
5. Total gain (loss) on disposals, Part 4, Column 19.....		300
6. Deduct consideration for bonds and stocks disposed of, Part 4, Column 7.....		9,345
7. Deduct amortization of premium.....		22
8. Total foreign exchange change in book/adjusted carrying value:		
8.1 Part 1, Column 15.....	0	
8.2 Part 2, Section 1, Column 19.....	0	
8.3 Part 2, Section 2, Column 16.....	0	
8.4 Part 4, Column 15.....	0	0
9. Deduct current year's other-than-temporary impairment recognized:		
9.1 Part 1, Column 14.....	0	
9.2 Part 2, Section 1, Column 17.....	0	
9.3 Part 2, Section 2, Column 14.....	0	
9.4 Part 4, Column 13.....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....		1,497,571
11. Deduct total nonadmitted amounts.....		0
12. Statement value at end of current period (Line 10 minus Line 11).....		1,497,571

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE D - SUMMARY BY COUNTRY

Long-Term Bonds and Stocks OWNED December 31 of Current Year

Description	1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS				
Governments (Including all obligations guaranteed by governments)	1. United States.....497,944	.....498,946	.....495,781	.....500,000
	2. Canada.....0	.....0	.....0	.....0
	3. Other Countries.....499,794	.....515,305	.....499,380	.....500,000
	4. Totals.....997,738	.....1,014,251	.....995,161	.....1,000,000
U.S. States, Territories and Possessions (Direct and guaranteed)	5. Totals.....0	.....0	.....0	.....0
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	6. Totals.....0	.....0	.....0	.....0
U.S. Special Revenue and Special Assessment Obligations and All Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions	7. Totals.....0	.....0	.....0	.....0
Industrial and Miscellaneous and Hybrid Securities (Unaffiliated)	8. United States.....499,833	.....546,090	.....499,760	.....500,000
	9. Canada.....0	.....0	.....0	.....0
	10. Other Countries.....0	.....0	.....0	.....0
	11. Totals.....499,833	.....546,090	.....499,760	.....500,000
Parent, Subsidiaries and Affiliates	12. Totals.....0	.....0	.....0	.....0
	13. Total Bonds.....1,497,571	.....1,560,341	.....1,494,921	.....1,500,000
PREFERRED STOCKS				
Industrial and Miscellaneous (Unaffiliated)	14. United States.....0	.....0	.....0	
	15. Canada.....0	.....0	.....0	
	16. Other Countries.....0	.....0	.....0	
	17. Totals.....0	.....0	.....0	
Parent, Subsidiaries and Affiliates	18. Totals.....0	.....0	.....0	
	19. Total Preferred Stocks.....0	.....0	.....0	
COMMON STOCKS				
Industrial and Miscellaneous (Unaffiliated)	20. United States.....0	.....0	.....0	
	21. Canada.....0	.....0	.....0	
	22. Other Countries.....0	.....0	.....0	
	23. Totals.....0	.....0	.....0	
Parent, Subsidiaries and Affiliates	24. Totals.....0	.....0	.....0	
	25. Total Common Stocks.....0	.....0	.....0	
	26. Total Stocks.....0	.....0	.....0	
	27. Total Bonds and Stocks.....1,497,571	.....1,560,341	.....1,494,921	

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 9.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
1. U.S. Governments											
1.1 NAIC 1	1,012	497,944	0	0	0	498,956	19.1	504,310	19.6	498,956	0
1.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
1.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
1.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
1.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
1.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
1.7 Totals	1,012	497,944	0	0	0	498,956	19.1	504,310	19.6	498,956	0
2. All Other Governments											
2.1 NAIC 1	0	499,794	0	0	0	499,794	19.1	499,688	19.5	499,794	0
2.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
2.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
2.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
2.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
2.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
2.7 Totals	0	499,794	0	0	0	499,794	19.1	499,688	19.5	499,794	0
3. U.S. States, Territories and Possessions, etc., Guaranteed											
3.1 NAIC 1	0	0	0	0	0	0	0.0	0	0.0	0	0
3.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
3.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
3.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
3.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
3.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
3.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed											
4.1 NAIC 1	0	0	0	0	0	0	0.0	0	0.0	0	0
4.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
4.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
4.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
4.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
4.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
4.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed											
5.1 NAIC 1	0	0	0	0	0	0	0.0	0	0.0	0	0
5.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
5.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
5.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
5.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
5.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
5.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 9.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
6. Industrial and Miscellaneous (unaffiliated)											
6.1 NAIC 1	1,113,578	0	0	0	0	1,113,578	42.6	1,062,924	41.4	0	1,113,578
6.2 NAIC 2	0	0	499,833	0	0	499,833	19.1	499,809	19.5	499,833	0
6.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
6.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
6.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
6.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
6.7 Totals	1,113,578	0	499,833	0	0	1,613,411	61.8	1,562,733	60.9	499,833	1,113,578
7. Hybrid Securities											
7.1 NAIC 1	0	0	0	0	0	0	0.0	0	0.0	0	0
7.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
7.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
7.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
7.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
7.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
7.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
8. Parent, Subsidiaries and Affiliates											
8.1 NAIC 1	0	0	0	0	0	0	0.0	0	0.0	0	0
8.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
8.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
8.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
8.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
8.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 9.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
9. Total Bonds Current Year											
9.1 NAIC 1	(c) 1,114,590	997,738	499,833	0	0	2,112,328	80.9	XXX	XXX	998,750	1,113,578
9.2 NAIC 2	(d) 0	0	499,833	0	0	499,833	19.1	XXX	XXX	499,833	0
9.3 NAIC 3	(c) 0	0	0	0	0	0	0.0	XXX	XXX	0	0
9.4 NAIC 4	(c) 0	0	0	0	0	0	0.0	XXX	XXX	0	0
9.5 NAIC 5	(c) 0	0	0	0	0	0	0.0	XXX	XXX	0	0
9.6 NAIC 6	(d) 0	0	0	0	0	0	0.0	XXX	XXX	0	0
9.7 Totals	1,114,590	997,738	499,833	0	0	2,612,161	100.0	XXX	XXX	1,498,583	1,113,578
9.8 Line 9.7 as a % of Col. 6	42.7	38.2	19.1	0.0	0.0	100.0	XXX	XXX	XXX	57.4	42.6
10. Total Bonds Prior Year											
10.1 NAIC 1	1,061,712	1,005,210	499,809	0	0	XXX	XXX	2,066,922	80.5	1,013,066	1,053,856
10.2 NAIC 2	0	0	499,809	0	0	XXX	XXX	499,809	19.5	499,809	0
10.3 NAIC 3	0	0	0	0	0	XXX	XXX	0	0.0	0	0
10.4 NAIC 4	0	0	0	0	0	XXX	XXX	0	0.0	0	0
10.5 NAIC 5	0	0	0	0	0	XXX	XXX	0	0.0	0	0
10.6 NAIC 6	0	0	0	0	0	XXX	XXX	0	0.0	0	0
10.7 Totals	1,061,712	1,005,210	499,809	0	0	XXX	XXX	2,566,731	100.0	1,512,875	1,053,856
10.8 Line 10.7 as a % of Col. 8	41.4	39.2	19.5	0.0	0.0	100.0	XXX	100.0	XXX	58.9	41.1
11. Total Publicly Traded Bonds											
11.1 NAIC 1	1,012	997,738	499,833	0	0	998,750	38.2	1,013,066	39.5	998,750	XXX
11.2 NAIC 2	0	0	499,833	0	0	499,833	19.1	499,809	19.5	499,833	XXX
11.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.7 Totals	1,012	997,738	499,833	0	0	1,498,583	57.4	1,512,875	58.9	1,498,583	XXX
11.8 Line 11.7 as a % of Col. 6	0.1	66.6	33.4	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
11.9 Line 11.7 as a % of Line 9.7, Col. 6, Section 9	0.0	38.2	19.1	0.0	0.0	57.4	XXX	XXX	XXX	57.4	XXX
12. Total Privately Placed Bonds											
12.1 NAIC 1	1,113,578	0	0	0	0	1,113,578	42.6	1,053,856	41.1	XXX	1,113,578
12.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.7 Totals	1,113,578	0	0	0	0	1,113,578	42.6	1,053,856	41.1	XXX	1,113,578
12.8 Line 12.7 as a % of Col. 6	100.0	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	100.0
12.9 Line 12.7 as a % of Line 9.7, Col. 6, Section 9	42.6	0.0	0.0	0.0	0.0	42.6	XXX	XXX	XXX	42.6	42.6

(a) Includes \$ 1,113,578 freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.
(b) Includes \$ 0 current year, \$ 0 prior year of bonds with Z designations and \$ 0 current year, \$ 0 prior year of bonds with Z* designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z*" means the SVO could not evaluate the obligation because valuation procedures for the security class are under regulatory review.
(c) Includes \$ 0 current year, \$ 0 prior year of bonds with 5* designations and \$ 0 current year, \$ 0 prior year of bonds with 6* designations. "5*" means the NAIC designation was assigned by the SVO in reliance on the issuer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.
(d) Includes the following amount of non-rated 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.

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 9.5	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
1. U.S. Governments											
1.1 Issuer Obligations.....	1,012	497,944	0	0	0	498,956	19.1	504,310	19.6	498,956	0
1.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
1.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
1.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	0	0	0	0	0	0
1.5 Totals.....	1,012	497,944	0	0	0	498,956	19.1	504,310	19.6	498,956	0
2. All Other Governments											
2.1 Issuer Obligations.....	0	499,794	0	0	0	499,794	19.1	499,688	19.5	499,794	0
2.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
2.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
2.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	0	0	0	0	0	0
2.5 Totals.....	0	499,794	0	0	0	499,794	19.1	499,688	19.5	499,794	0
3. U.S. States, Territories and Possessions, Guaranteed											
3.1 Issuer Obligations.....	0	0	0	0	0	0	0	0	0	0	0
3.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
3.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
3.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	0	0	0	0	0	0
3.5 Totals.....	0	0	0	0	0	0	0	0	0	0	0
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed											
4.1 Issuer Obligations.....	0	0	0	0	0	0	0	0	0	0	0
4.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
4.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
4.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	0	0	0	0	0	0
4.5 Totals.....	0	0	0	0	0	0	0	0	0	0	0
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed											
5.1 Issuer Obligations.....	0	0	0	0	0	0	0	0	0	0	0
5.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
5.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
5.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	0	0	0	0	0	0
5.5 Totals.....	0	0	0	0	0	0	0	0	0	0	0
6. Industrial and Miscellaneous (unaffiliated)											
6.1 Issuer Obligations.....	1,113,578	0	499,833	0	0	1,613,411	61.8	1,562,733	60.9	499,833	1,113,578
6.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
6.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
6.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	0	0	0	0	0	0
6.5 Totals.....	1,113,578	0	499,833	0	0	1,613,411	61.8	1,562,733	60.9	499,833	1,113,578
7. Hybrid Securities											
7.1 Issuer Obligations.....	0	0	0	0	0	0	0	0	0	0	0
7.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
7.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
7.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	0	0	0	0	0	0
7.5 Totals.....	0	0	0	0	0	0	0	0	0	0	0
8. Parent, Subsidiaries and Affiliates											
8.1 Issuer Obligations.....	0	0	0	0	0	0	0	0	0	0	0
8.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
8.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	0	0	0	0	0	0
8.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	0	0	0	0	0	0
8.5 Totals.....	0	0	0	0	0	0	0	0	0	0	0

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**
SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 9.5	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
9. Total Bonds Current Year											
9.1 Issuer Obligations.....	1,114,590	997,738	499,833	0	0	2,612,161	100.0	XXX	XXX	1,498,583	1,113,578
9.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	0	0.0	XXX	XXX	0	0
9.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	0	0.0	XXX	XXX	0	0
9.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	0	0.0	XXX	XXX	0	0
9.5 Totals.....	1,114,590	997,738	499,833	0	0	2,612,161	100.0	XXX	XXX	1,498,583	1,113,578
9.6 Line 9.5 as a % of Col. 6.....	42.7	38.2	19.1	0.0	0.0	100.0	XXX	XXX	XXX	57.4	42.6
10. Total Bonds Prior Year											
10.1 Issuer Obligations.....	1,061,712	1,005,210	499,809	0	0	XXX	XXX	2,566,731	100.0	1,512,875	1,053,856
10.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	XXX	XXX	0	0.0	0	0
10.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	XXX	XXX	0	0.0	0	0
10.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	XXX	XXX	0	0.0	0	0
10.5 Totals.....	1,061,712	1,005,210	499,809	0	0	XXX	XXX	2,566,731	100.0	1,512,875	1,053,856
10.6 Line 10.5 as a % of Col. 8.....	41.4	39.2	19.5	0.0	0.0	XXX	XXX	100.0	XXX	58.9	41.1
11. Total Publicly Traded Bonds											
11.1 Issuer Obligations.....	1,012	997,738	499,833	0	0	1,498,583	57.4	1,512,875	58.9	1,498,583	XXX
11.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.5 Totals.....	1,012	997,738	499,833	0	0	1,498,583	57.4	1,512,875	58.9	1,498,583	XXX
11.6 Line 11.5 as a % of Col. 6.....	0.1	66.6	33.4	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
11.7 Line 11.5 as a % of Line 9.5, Col. 6, Section 9.....	0.0	38.2	19.1	0.0	0.0	57.4	XXX	XXX	XXX	57.4	XXX
12. Total Privately Placed Bonds											
12.1 Issuer Obligations.....	1,113,578	0	0	0	0	1,113,578	42.6	1,053,856	41.1	XXX	1,113,578
12.2 Residential Mortgage-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.3 Commercial Mortgage-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.4 Other Loan-Backed and Structured Securities.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.5 Totals.....	1,113,578	0	0	0	0	1,113,578	42.6	1,053,856	41.1	XXX	1,113,578
12.6 Line 12.5 as a % of Col. 6.....	100.0	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	XXX	100.0
12.7 Line 12.5 as a % of Line 9.5, Col. 6, Section 9.....	42.6	0.0	0.0	0.0	0.0	42.6	XXX	XXX	XXX	XXX	42.6

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE DA - VERIFICATION BETWEEN YEARS

Short-Term Investments

	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets (B)	Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, December 31 of prior year.....	7,856	7,856	0	0	0
2. Cost of short-term investments acquired.....	72,990	72,990	0	0	0
3. Accrual of discount.....	0	0	0	0	0
4. Unrealized valuation increase (decrease).....	0	0	0	0	0
5. Total gain (loss) on disposals.....	0	0	0	0	0
6. Deduct consideration received on disposals.....	79,834	79,834	0	0	0
7. Deduct amortization of premium.....	0	0	0	0	0
8. Total foreign exchange change in book/adjusted carrying value.....	0	0	0	0	0
9. Deduct current year's other-than-temporary impairment recognized.....	0	0	0	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6+7+8+9).....	1,012	1,012	0	0	0
11. Deduct total nonadmitted amounts.....	0	0	0	0	0
12. Statement value at end of current period (Line 10 minus Line 11).....	1,012	1,012	0	0	0

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment.....

Sch. DB-Pt. A-Verification
NONE

Sch. DB-Pt. B-Verification
NONE

Sch. DB-Pt. C-Sn. 1
NONE

Sch. DB-Pt. C-Sn. 2
NONE

Sch. DB-Verification
NONE

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE E - VERIFICATION BETWEEN YEARS

Cash Equivalents

	1 Total	2 Bonds	3 Other (a)
1. Book/adjusted carrying value, December 31 of prior year.....	1,053,856	1,053,856	0
2. Cost of cash equivalents acquired.....	28,225,440	28,225,440	0
3. Accrual of discount.....	3,282	3,282	0
4. Unrealized valuation increase (decrease).....	0	0	0
5. Total gain (loss) on disposals.....	0	0	0
6. Deduct consideration received on disposals.....	28,169,000	28,169,000	0
7. Deduct amortization of premium.....	0	0	0
8. Total foreign exchange change in book/adjusted carrying value.....	0	0	0
9. Deduct current year's other-than-temporary impairment recognized.....	0	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	1,113,578	1,113,578	0
11. Deduct total nonadmitted amounts.....	0	0	0
12. Statement value at end of current period (Line 10 minus Line 11).....	1,113,578	1,113,578	0

(a) Indicate the category of such investments, for example, joint ventures, transportation equipment.....

**Sch. A-Pt. 1
NONE**

**Sch. A-Pt. 2
NONE**

**Sch. A-Pt. 3
NONE**

**Sch. B-Pt. 1
NONE**

**Sch. B-Pt. 2
NONE**

**Sch. B-Pt. 3
NONE**

**Sch. BA-Pt. 1
NONE**

**Sch. BA-Pt. 2
NONE**

**Sch. BA-Pt. 3
NONE**

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE D - PART 1

Showing all Long-Term BONDS Owned December 31 of Current Year

1 CUSIP Identification	2 Description	3 Codes			6 NAC Designation	7 Actual Cost	8 Rate Used to Obtain Fair Value	9 Fair Value		10 Par Value	11 Change in Bond/Adjusted Carrying Value					15 Total Foreign Exchange Change in B/A C.V.	16 Rate of Effective Rate of	17 When Paid	18 Amortized Amount/ Dua & Accrued	19 Amount Rec. During Year	20 Agreed	21 Dates	22 Saved Contractual Maturity Date
		4	5	6				12	13		14												
U.S. Government - Issuer Obligations																							
817828 VC 1	U.S. TREASURY NOTE/BOND					495,781	97.789	498,948	500,000	497,944	0	1,490	0	0	0.750	0.552	14N	162	1,250	07/18/2013	05/15/2016		
0199999	U.S. Government - Issuer Obligations					495,781	XXX	498,948	500,000	497,944	0	1,490	0	0	XXX	XXX	XXX	162	1,250	XXX	XXX	XXX	
0599999	Total - U.S. Government					495,781	XXX	498,948	500,000	497,944	0	1,490	0	0	XXX	XXX	XXX	162	1,250	XXX	XXX	XXX	
All Other Governments - Issuer Obligations																							
500651 AB 9	KOREA FINANCE CORP SR UNSECURED					499,380	103.061	515,305	500,000	499,794	0	106	0	0	3.750	3.273	1MS	4,559	16,250	09/15/2010	09/20/2015		
0699999	All Other Governments - Issuer Obligations					499,380	XXX	515,305	500,000	499,794	0	106	0	0	XXX	XXX	XXX	4,559	16,250	XXX	XXX	XXX	
1099999	Total - All Other Governments					499,380	XXX	515,305	500,000	499,794	0	106	0	0	XXX	XXX	XXX	4,559	16,250	XXX	XXX	XXX	
Industrial & Miscellaneous (Unaffiliated) - Issuer Obligations																							
031162 BB 5	JANGEN INC SR UNSECURED					499,750	109.218	546,090	500,000	499,833	0	21	0	0	4.500	4.506	1MS	6,625	27,500	03/09/2010	03/15/2020		
3799999	Industrial & Miscellaneous (Unaffiliated) - Issuer Obligations					499,750	XXX	546,090	500,000	499,833	0	21	0	0	XXX	XXX	XXX	6,625	27,500	XXX	XXX	XXX	
3899999	Total - Industrial & Miscellaneous (Unaffiliated)					499,750	XXX	546,090	500,000	499,833	0	21	0	0	XXX	XXX	XXX	6,625	27,500	XXX	XXX	XXX	
Totals						1,494,921	XXX	1,560,341	1,500,000	1,497,571	0	1,619	0	0	XXX	XXX	XXX	11,346	40,000	XXX	XXX	XXX	
8399999	Grand Total - Bonds					1,494,921	XXX	1,560,341	1,500,000	1,497,571	0	1,619	0	0	XXX	XXX	XXX	11,346	40,000	XXX	XXX	XXX	

Sch. D-Pt. 2-Sn. 1
NONE

Sch. D-Pt. 2-Sn. 2
NONE

Sch. D-Pt. 3
NONE

Statement as of December 31, 2014 of the **Aetna Better Health Inc. (a Connecticut corporation)**
SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED of During Current Year

1 CUSIP Identification	2 Description	3 F O B D B	4 Disposal Date	5 Name of Purchaser	6 Number of Shares or Stock	7 Consideration	8 Per Value	9 Actual Cost	10 Prior Year Book/Adjusted Carrying Value	11 Changes in Book/Adjusted Carrying Value					15 Total Foreign Exchange Change in B/A C.V.	16 Book/Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain/(Loss) on Disposal	18 Realized Gain/(Loss) on Disposal	19 Total Gain/(Loss) on Disposal	20 Bond Interest (Stock Dividends Received) During Year	21 Stock Contractual Maturity Date
										12 Current Year's (Amortization / Accrual)	13 Current Year's Other Than Temporary Impairment Recognized	14 Total Change in B/A C.V. (11-12-13)	15 Total Foreign Exchange Change in B/A C.V.								
172817 FD 8	CITIGROUP INC SR UNSECURED		06/19/2014	Corporate Actions		9,345	9,000	9,219	9,068	0	(2)	0	(2)	0	9,045	0	300	300	249	06/19/2015	
3999999	Total - Bonds - Industrial and Miscellaneous					9,345	9,000	9,219	9,068	0	(2)	0	(2)	0	9,045	0	300	300	249	XXX	
8399997	Total - Bonds - Part 4					9,345	9,000	9,219	9,068	0	(2)	0	(2)	0	9,045	0	300	300	249	XXX	
8399999	Total - Bonds					9,345	9,000	9,219	9,068	0	(2)	0	(2)	0	9,045	0	300	300	249	XXX	
9999999	Total - Bonds, Preferred and Common Stocks					9,345	XXX	9,219	9,068	0	(2)	0	(2)	0	9,045	0	300	300	249	XXX	

**Sch. D-Pt. 5
NONE**

**Sch. D-Pt. 6-Sn. 1
NONE**

**Sch. D-Pt. 6-Sn. 2
NONE**

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE DA - PART 1

Showing all SHORT-TERM INVESTMENTS Owned December 31 of Current Year

1 CUSIP Identification	2 Description	3 Code	4 F o r e i g n	5 Date Acquired	6 Name of Vendor	7 Maturity Date	8 Book/Adjusted Carrying Value	9 Unrealized Valuation Increase (Decrease)	10 Current Year's (Amortization) / Accretion	11 Current Year's Other Than Temporary Impairment Recognized	12 Total Foreign Exchange Change in B./A.C.V.	13 Par Value	14 Actual Cost	Interest			21 Paid for Accrued Interest			
														15 Amount Due and Accrued as of December 31 of Current Year on Bond Not in Default	16 Nonaccrued Due and Accrued	17 Rate of		18 Effective Rate of	19 When Paid	20 Amount Received During Year
66234N 50 0	FEDERATED INVESTORS INC TREASURY OBLIGAT			12/29/2014	Various	...	1,012	0	0	0	0	0	0	0	0.000	0.010		0	0	
889599	Treat - Emerg Money Market Mutual Funds					...	1,012	0	0	0	0	XXX	1,012	0	XXX	XXX	XXX	XXX	0	0
915999	Treat - Short Term Investments					...	1,012	0	0	0	0	XXX	1,012	0	XXX	XXX	XXX	XXX	0	0

**Sch. DB-Pt. A-Sn. 1
NONE**

**Sch. DB-Pt. A-Sn. 2
NONE**

**Sch. DB-Pt. B-Sn. 1
NONE**

**Sch. DB-Pt. B-Sn. 2
NONE**

**Sch. DB-Pt. D-Sn. 1
NONE**

**Sch. DB-Pt. D-Sn. 2
NONE**

**Sch. DL-Pt. 1
NONE**

**Sch. DL-Pt. 2
NONE**

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE E - PART 1 - CASH

1	2	3	4	5	6	7
Depository	Code	Rate of Interest	Amount of Interest Received During Year	Amount of Interest Accrued December 31 of Current Year	Balance	*
Open Depositories						
Bank of America..... Charlotte, NC.....		0.000	0	0	900,913	XXX
0199999 Total - Open Depositories.....	XXX	XXX	0	0	900,913	XXX
0399999 Total Cash on Deposit.....	XXX	XXX	0	0	900,913	XXX
0599999 Total Cash.....	XXX	XXX	0	0	900,913	XXX

TOTALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR

1. January.....	516,720	4. April.....	445,102	7. July.....	505,682	10. October.....	484,045
2. February.....	519,696	5. May.....	449,967	8. August.....	506,121	11. November.....	1,027,961
3. March.....	528,963	6. June.....	504,957	9. September.....	482,411	12. December.....	900,913

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)
SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned December 31 of Current Year

1	2	3	4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations							
ONEOK PARTNERS LP CP #12 14A		12/29/2014	0.650	01/22/2015	1,113,578	0	0
3295999 Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations					1,113,578	0	0
3988699 Total - Industrial and Miscellaneous (Unaffiliated)					1,113,578	0	0
Total Bonds							
7799999 Subtotal - Issuer Obligations					1,113,578	0	0
8399999 Subtotal - Bonds					1,113,578	0	0
8699999 Total - Cash Equivalents					1,113,578	0	0

Statement as of December 31, 2014 of the Aetna Better Health Inc. (a Connecticut corporation)

SCHEDULE E - PART 3 - SPECIAL DEPOSITS

States, Etc.	1 Type of Deposit	2 Purpose of Deposit	Deposits for the		All Other Special Deposits	
			Benefit of All Policyholders		5	
			3 Book/Adjusting Carrying Value	4 Fair Value	5 Book/Adjusting Carrying Value	6 Fair Value
1. Alabama.....	AL		0	0	0	0
2. Alaska.....	AK		0	0	0	0
3. Arizona.....	AZ		0	0	0	0
4. Arkansas.....	AR		0	0	0	0
5. California.....	CA		0	0	0	0
6. Colorado.....	CO		0	0	0	0
7. Connecticut.....	CT	RSD by INS CODE 38A-193	497,944	498,946	0	0
8. Delaware.....	DE		0	0	0	0
9. District of Columbia.....	DC		0	0	0	0
10. Florida.....	FL		0	0	0	0
11. Georgia.....	GA		0	0	0	0
12. Hawaii.....	HI		0	0	0	0
13. Idaho.....	ID		0	0	0	0
14. Illinois.....	IL		0	0	0	0
15. Indiana.....	IN		0	0	0	0
16. Iowa.....	IA		0	0	0	0
17. Kansas.....	KS		0	0	0	0
18. Kentucky.....	KY		0	0	0	0
19. Louisiana.....	LA		0	0	0	0
20. Maine.....	ME		0	0	0	0
21. Maryland.....	MD		0	0	0	0
22. Massachusetts.....	MA		0	0	0	0
23. Michigan.....	MI		0	0	0	0
24. Minnesota.....	MN		0	0	0	0
25. Mississippi.....	MS		0	0	0	0
26. Missouri.....	MO		0	0	0	0
27. Montana.....	MT		0	0	0	0
28. Nebraska.....	NE		0	0	0	0
29. Nevada.....	NV		0	0	0	0
30. New Hampshire.....	NH		0	0	0	0
31. New Jersey.....	NJ		0	0	0	0
32. New Mexico.....	NM		0	0	0	0
33. New York.....	NY		0	0	0	0
34. North Carolina.....	NC		0	0	0	0
35. North Dakota.....	ND		0	0	0	0
36. Ohio.....	OH		0	0	0	0
37. Oklahoma.....	OK		0	0	0	0
38. Oregon.....	OR		0	0	0	0
39. Pennsylvania.....	PA		0	0	0	0
40. Rhode Island.....	RI		0	0	0	0
41. South Carolina.....	SC		0	0	0	0
42. South Dakota.....	SD		0	0	0	0
43. Tennessee.....	TN		0	0	0	0
44. Texas.....	TX		0	0	0	0
45. Utah.....	UT		0	0	0	0
46. Vermont.....	VT		0	0	0	0
47. Virginia.....	VA		0	0	0	0
48. Washington.....	WA		0	0	0	0
49. West Virginia.....	WV		0	0	0	0
50. Wisconsin.....	WI		0	0	0	0
51. Wyoming.....	WY		0	0	0	0
52. American Samoa.....	AS		0	0	0	0
53. Guam.....	GU		0	0	0	0
54. Puerto Rico.....	PR		0	0	0	0
55. US Virgin Islands.....	VI		0	0	0	0
56. Northern Mariana Islands.....	MP		0	0	0	0
57. Canada.....	CAN		0	0	0	0
58. Aggregate Alien and Other.....	XXX	XXX	0	0	0	0
59. Total.....	XXX	XXX	497,944	498,946	0	0

DETAILS OF WRITE-INS						
5801.....			0	0	0	0
5802.....			0	0	0	0
5803.....			0	0	0	0
5896. Summary of remaining write-ins for line 58 from overflow page.....	XXX	XXX	0	0	0	0
5899. Total (Lines 5801 thru 5803 + 5896) (Line 58 above).....	XXX	XXX	0	0	0	0

**2014 ALPHABETICAL INDEX
HEALTH ANNUAL STATEMENT BLANK**

Analysis of Operations By Lines of Business	7	Schedule D – Part 6 – Section 2	E16
Assets	2	Schedule D – Summary By Country	SI04
Cash Flow	6	Schedule D – Verification Between Years	SI03
Exhibit 1 – Enrollment By Product Type for Health Business Only	17	Schedule DA – Part 1	E17
Exhibit 2 – Accident and Health Premiums Due and Unpaid	18	Schedule DA – Verification Between Years	SI10
Exhibit 3 – Health Care Receivables	19	Schedule DB – Part A – Section 1	E18
Exhibit 3A – Health Care Receivables Collected and Accrued	20	Schedule DB – Part A – Section 2	E19
Exhibit 4 – Claims Unpaid and Incentive Pool, Withhold and Bonus	21	Schedule DB – Part A – Verification Between Years	SI11
Exhibit 5 – Amounts Due From Parent, Subsidiaries and Affiliates	22	Schedule DB – Part B – Section 1	E20
Exhibit 6 – Amounts Due To Parent, Subsidiaries and Affiliates	23	Schedule DB – Part B – Section 2	E21
Exhibit 7 – Part 1 – Summary of Transactions With Providers	24	Schedule DB – Part B – Verification Between Years	SI11
Exhibit 7 – Part 2 – Summary of Transactions With Intermediaries	24	Schedule DB – Part C – Section 1	SI12
Exhibit 8 – Furniture, Equipment and Supplies Owned	25	Schedule DB – Part C – Section 2	SI13
Exhibit of Capital Gains (Losses)	15	Schedule DB – Part D – Section 1	E22
Exhibit of Net Investment Income	15	Schedule DB – Part D – Section 2	E23
Exhibit of Nonadmitted Assets	16	Schedule DB – Verification	SI14
Exhibit of Premiums, Enrollment and Utilization (State Page)	30	Schedule DL – Part 1	E24
Five-Year Historical Data	29	Schedule DL – Part 2	E25
General Interrogatories	27	Schedule E – Part 1 – Cash	E26
Jurat Page	1	Schedule E – Part 2 – Cash Equivalents	E27
Liabilities, Capital and Surplus	3	Schedule E – Part 3 – Special Deposits	E28
Notes To Financial Statements	26	Schedule E – Verification Between Years	SI15
Overflow Page For Write-ins	44	Schedule S – Part 1 – Section 2	31
Schedule A – Part 1	E01	Schedule S – Part 2	32
Schedule A – Part 2	E02	Schedule S – Part 3 – Section 2	33
Schedule A – Part 3	E03	Schedule S – Part 4	34
Schedule A – Verification Between Years	SI02	Schedule S – Part 5	35
Schedule B – Part 1	E04	Schedule S – Part 6	36
Schedule B – Part 2	E05	Schedule S – Part 7	37
Schedule B – Part 3	E06	Schedule T – Part 2 – Interstate Compact	38
Schedule B – Verification Between Years	SI02	Schedule T – Premiums and Other Considerations	39
Schedule BA – Part 1	E07	Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group	40
Schedule BA – Part 2	E08	Schedule Y – Part 1A – Detail of Insurance Holding Company System	41
Schedule BA – Part 3	E09	Schedule Y – Part 2 – Summary of Insurer's Transactions With Any Affiliates	42
Schedule BA – Verification Between Years	SI03	Statement of Revenue and Expenses	4
Schedule D – Part 1	E10	Summary Investment Schedule	SI01
Schedule D – Part 1A – Section 1	SI05	Supplemental Exhibits and Schedules Interrogatories	43
Schedule D – Part 1A – Section 2	SI08	Underwriting and Investment Exhibit – Part 1	8
Schedule D – Part 2 – Section 1	E11	Underwriting and Investment Exhibit – Part 2	9
Schedule D – Part 2 – Section 2	E12	Underwriting and Investment Exhibit – Part 2A	10
Schedule D – Part 3	E13	Underwriting and Investment Exhibit – Part 2B	11
Schedule D – Part 4	E14	Underwriting and Investment Exhibit – Part 2C	12
Schedule D – Part 5	E15	Underwriting and Investment Exhibit – Part 2D	13
Schedule D – Part 6 – Section 1	E16	Underwriting and Investment Exhibit – Part 3	14