



# HEALTH QUARTERLY STATEMENT

AS OF MARCH 31, 2018

OF THE CONDITION AND AFFAIRS OF THE

## SilverScript Insurance Company

NAIC Group Code 4667 4667 NAIC Company Code 12575 Employer's ID Number 20-2833904  
(Current) (Prior)

Organized under the Laws of Tennessee, State of Domicile or Port of Entry TN

Country of Domicile United States of America

Licensed as business type: Life, Accident & Health

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

Incorporated/Organized 05/11/2005 Commenced Business 01/01/2006

Statutory Home Office 445 Great Circle Road, Nashville, TN, US 37228  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 445 Great Circle Road  
(Street and Number)  
Nashville, TN, US 37228, 615-743-6600  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 445 Great Circle Road, Nashville, TN, US 37228  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 445 Great Circle Road  
(Street and Number)  
Nashville, TN, US 37228, 615-743-6600  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.silverscript.com

Statutory Statement Contact Xiaoqi Glenn Wang, 401-770-9669  
(Name) (Area Code) (Telephone Number)  
Xiaoqi.Wang@CVSCaremark.com, 401-733-0136  
(E-mail Address) (FAX Number)

### OFFICERS

President Todd Dean Meek Secretary Michele Wugalter Buchanan  
Treasurer Daniel Lee Zablocki Actuary Rebecca Conway Justice

### OTHER

### DIRECTORS OR TRUSTEES

Harold Neil Lund Todd Dean Meek Marsha Carolyn Moore  
Mary Kristina Meyer David Scott Azzolina

State of \_\_\_\_\_ SS:  
County of \_\_\_\_\_

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

Todd Dean Meek  
President

Michele Wugalter Buchanan  
Secretary

Daniel Lee Zablocki  
Treasurer

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

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

## STATEMENT AS OF MARCH 31, 2018 OF THE SilverScript Insurance Company

**ASSETS**

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	2,830,093	500,452	2,329,641	2,329,724
2. Stocks:				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....			0	0
3. Mortgage loans on real estate:				
3.1 First liens .....			0	0
3.2 Other than first liens.....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances) .....			0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....			0	0
4.3 Properties held for sale (less \$ encumbrances) .....			0	0
5. Cash (\$ .....56,679,673 ), cash equivalents (\$ .....1,449,720,401 ) and short-term investments (\$ .....0 ) .....	1,506,400,074		1,506,400,074	157,463,945
6. Contract loans (including \$ ..... premium notes) .....			0	0
7. Derivatives .....			0	0
8. Other invested assets .....			0	0
9. Receivables for securities .....			0	0
10. Securities lending reinvested collateral assets .....			0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	1,509,230,167	500,452	1,508,729,715	159,793,669
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	1,394,738	41,866	1,352,872	265,677
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	32,305,116	24,329,599	7,975,517	27,103,840
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....			0	0
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ .....393,402,941 ) .....	393,402,941		393,402,941	3,698,136
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....			0	0
16.2 Funds held by or deposited with reinsured companies .....	166,454,711		166,454,711	127,992,947
16.3 Other amounts receivable under reinsurance contracts .....			0	0
17. Amounts receivable relating to uninsured plans .....	836,583,209	40,748	836,542,461	1,025,540,071
18.1 Current federal and foreign income tax recoverable and interest thereon .....			0	0
18.2 Net deferred tax asset .....	27,642,156	2,716,044	24,926,112	24,926,112
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....			0	0
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....	352,305,181		352,305,181	207,606,664
24. Health care (\$ .....473,458,263 ) and other amounts receivable .....	473,458,263		473,458,263	498,464,936
25. Aggregate write-ins for other than invested assets .....	49,625,691	49,625,691	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	3,842,402,173	77,254,400	3,765,147,773	2,075,392,052
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27)	3,842,402,173	77,254,400	3,765,147,773	2,075,392,052
<b>DETAILS OF WRITE-INS</b>				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Prepaid Expenses .....	49,625,691	49,625,691	0	0
2502. ....				
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	49,625,691	49,625,691	0	0

**LIABILITIES, CAPITAL AND SURPLUS**

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ 3,315,813 reinsurance ceded)	4,977,717		4,977,717	4,960,450
2. Accrued medical incentive pool and bonus amounts	100,000		100,000	710,346
3. Unpaid claims adjustment expenses			0	0
4. Aggregate health policy reserves, including the liability of \$ for medical loss ratio rebate per the Public Health Service Act	33,077,964		33,077,964	34,277,266
5. Aggregate life policy reserves			0	0
6. Property/casualty unearned premium reserve			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance	206,807,285		206,807,285	18,344,169
9. General expenses due or accrued	64,984,911		64,984,911	7,209,211
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))	65,264,209		65,264,209	82,012,440
10.2 Net deferred tax liability			0	0
11. Ceded reinsurance premiums payable	25,688,233		25,688,233	62,884,527
12. Amounts withheld or retained for the account of others			0	0
13. Remittances and items not allocated			0	0
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current)			0	0
15. Amounts due to parent, subsidiaries and affiliates			0	0
16. Derivatives			0	0
17. Payable for securities			0	0
18. Payable for securities lending			0	0
19. Funds held under reinsurance treaties (with \$ 26,896,645 authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers)	26,896,645		26,896,645	27,317,370
20. Reinsurance in unauthorized and certified (\$ ) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans	2,543,962,988		2,543,962,988	872,091,016
23. Aggregate write-ins for other liabilities (including \$ current)	0	0	0	0
24. Total liabilities (Lines 1 to 23)	2,971,759,952	0	2,971,759,952	1,109,806,795
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	60,000,000
26. Common capital stock	XXX	XXX	2,750,000	2,750,000
27. Preferred capital stock	XXX	XXX		
28. Gross paid in and contributed surplus	XXX	XXX	124,750,000	124,750,000
29. Surplus notes	XXX	XXX		
30. Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	665,887,821	778,085,257
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 \$ )	XXX	XXX		
32.2 shares preferred (value included in Line 27 \$ )	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	793,387,821	965,585,257
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	3,765,147,773	2,075,392,052
<b>DETAILS OF WRITE-INS</b>				
2301.				
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	0	0	0	0
2501. Section 9010 Special Surplus	XXX	XXX		60,000,000
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	60,000,000
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

**STATEMENT OF REVENUE AND EXPENSES**

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months .....	XXX	14,531,714	13,594,856	54,092,424
2. Net premium income ( including \$ ..... non-health premium income).....	XXX	659,515,976	703,324,125	2,633,698,155
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	390,904,108	337,652,367	229,328,608
4. Fee-for-service (net of \$ ..... medical expenses).....	XXX			
5. Risk revenue .....	XXX			
6. Aggregate write-ins for other health care related revenues .....	XXX	6,821,436	4,303,512	17,273,278
7. Aggregate write-ins for other non-health revenues .....	XXX	0	0	0
8. Total revenues (Lines 2 to 7) .....	XXX	1,057,241,520	1,045,280,004	2,880,300,041
<b>Hospital and Medical:</b>				
9. Hospital/medical benefits .....				
10. Other professional services .....				
11. Outside referrals .....				
12. Emergency room and out-of-area .....				
13. Prescription drugs .....		1,329,432,810	1,301,265,549	2,814,618,657
14. Aggregate write-ins for other hospital and medical .....	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts .....		73,879	0	146,417
16. Subtotal (Lines 9 to 15) .....	0	1,329,506,689	1,301,265,549	2,814,765,074
<b>Less:</b>				
17. Net reinsurance recoveries .....		263,274,307	258,841,538	561,702,579
18. Total hospital and medical (Lines 16 minus 17) .....	0	1,066,232,382	1,042,424,011	2,253,062,495
19. Non-health claims (net) .....				
20. Claims adjustment expenses, including \$ .....6,504,499 cost containment expenses .....		20,315,278	23,863,450	93,058,728
21. General administrative expenses .....		111,957,941	32,380,425	239,168,857
22. Increase in reserves for life and accident and health contracts (including \$ ..... increase in reserves for life only) .....				0
23. Total underwriting deductions (Lines 18 through 22).....	0	1,198,505,601	1,098,667,886	2,585,290,080
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	XXX	(141,264,081)	(53,387,882)	295,009,961
25. Net investment income earned .....		2,066,149	928,768	5,177,847
26. Net realized capital gains (losses) less capital gains tax of \$ .....				(192,048)
27. Net investment gains (losses) (Lines 25 plus 26) .....	0	2,066,149	928,768	4,985,799
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ .....45,307 ) (amount charged off \$ .....(600,848) )].....		(555,541)	(720,496)	(3,732,443)
29. Aggregate write-ins for other income or expenses .....	0	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) .....	XXX	(139,753,473)	(53,179,610)	296,263,317
31. Federal and foreign income taxes incurred .....	XXX	(16,748,230)	(18,612,864)	82,012,441
32. Net income (loss) (Lines 30 minus 31) .....	XXX	(123,005,243)	(34,566,746)	214,250,876
<b>DETAILS OF WRITE-INS</b>				
0601. Enhanced Medication Therapy Management (eMTM) revenue from CMS .....	XXX	6,821,436	4,303,512	17,273,278
0602. ....	XXX			
0603. ....	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page .....	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above) .....	XXX	6,821,436	4,303,512	17,273,278
0701. ~ .....	XXX			0
0702. ....	XXX			
0703. ....	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page .....	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above) .....	XXX	0	0	0
1401. ~ .....				0
1402. ~ .....				0
1403. ....				
1498. Summary of remaining write-ins for Line 14 from overflow page .....	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) .....	0	0	0	0
2901. CMS Penalty .....				0
2902. ~ .....				0
2903. ....				
2998. Summary of remaining write-ins for Line 29 from overflow page .....	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above) .....	0	0	0	0

**STATEMENT OF REVENUE AND EXPENSES (Continued)**

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
<b>CAPITAL AND SURPLUS ACCOUNT</b>			
33. Capital and surplus prior reporting year.....	965,585,257	799,162,780	799,162,780
34. Net income or (loss) from Line 32.....	(123,005,243)	(34,566,746)	214,250,876
35. Change in valuation basis of aggregate policy and claim reserves.....			
36. Change in net unrealized capital gains (losses) less capital gains tax of \$.....			
37. Change in net unrealized foreign exchange capital gain or (loss).....			
38. Change in net deferred income tax.....			(34,209,170)
39. Change in nonadmitted assets.....	(49,192,194)	(39,962,117)	(13,619,229)
40. Change in unauthorized and certified reinsurance.....	0	0	0
41. Change in treasury stock.....	0	0	0
42. Change in surplus notes.....	0	0	0
43. Cumulative effect of changes in accounting principles.....			
44. Capital Changes:			
44.1 Paid in.....	0	0	0
44.2 Transferred from surplus (Stock Dividend).....	0	0	0
44.3 Transferred to surplus.....			
45. Surplus adjustments:			
45.1 Paid in.....	0	0	0
45.2 Transferred to capital (Stock Dividend).....			
45.3 Transferred from capital.....			
46. Dividends to stockholders.....			
47. Aggregate write-ins for gains or (losses) in surplus.....	1	0	0
48. Net change in capital & surplus (Lines 34 to 47).....	(172,197,436)	(74,528,863)	166,422,477
49. Capital and surplus end of reporting period (Line 33 plus 48)	793,387,821	724,633,917	965,585,257
<b>DETAILS OF WRITE-INS</b>			
4701. Rounding.....	1		0
4702. ....			
4703. ....			
4798. Summary of remaining write-ins for Line 47 from overflow page.....	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	1	0	0

## STATEMENT AS OF MARCH 31, 2018 OF THE SilverScript Insurance Company

**CASH FLOW**

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance .....	866,822,746	915,752,964	2,613,587,072
2. Net investment income .....	978,957	1,052,161	5,216,795
3. Miscellaneous income .....	6,821,436	4,303,512	17,273,278
4. Total (Lines 1 to 3) .....	874,623,139	921,108,637	2,636,077,145
5. Benefit and loss related payments .....	1,041,818,788	1,924,753,223	2,465,128,123
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			
7. Commissions, expenses paid and aggregate write-ins for deductions .....	(1,516,131,778)	(1,124,887,998)	1,201,816,775
8. Dividends paid to policyholders .....			
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	0	0	121,129,146
10. Total (Lines 5 through 9) .....	(474,312,990)	799,865,225	3,788,074,044
11. Net cash from operations (Line 4 minus Line 10) .....	1,348,936,129	121,243,412	(1,151,996,899)
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	0	0	640,000
12.2 Stocks .....	0	0	0
12.3 Mortgage loans .....	0	0	0
12.4 Real estate .....	0	0	0
12.5 Other invested assets .....	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	0	0	0
12.7 Miscellaneous proceeds .....	0	2,904,320	2,904,320
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	0	2,904,320	3,544,320
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	0	499,063	2,319,025
13.2 Stocks .....	0	0	0
13.3 Mortgage loans .....	0	0	0
13.4 Real estate .....	0	0	0
13.5 Other invested assets .....	0	0	0
13.6 Miscellaneous applications .....	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	0	499,063	2,319,025
14. Net increase (or decrease) in contract loans and premium notes .....	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) .....	0	2,405,257	1,225,295
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes .....	0	0	0
16.2 Capital and paid in surplus, less treasury stock .....	0	0	0
16.3 Borrowed funds .....	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	0	0	0
16.5 Dividends to stockholders .....	0	0	0
16.6 Other cash provided (applied) .....	0	0	0
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) .....	0	0	0
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	1,348,936,129	123,648,669	(1,150,771,604)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year .....	157,463,945	1,308,235,549	1,308,235,549
19.2 End of period (Line 18 plus Line 19.1) .....	1,506,400,074	1,431,884,218	157,463,945

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

STATEMENT AS OF MARCH 31, 2018 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
<b>Total Members at end of:</b>										
1. Prior Year .....	4,519,889	0	0	0	0	0	0	0	0	4,519,889
2. First Quarter .....	4,848,387									4,848,387
3. Second Quarter .....	0									
4. Third Quarter .....	0									
5. Current Year	0									
6. Current Year Member Months	14,531,714									14,531,714
<b>Total Member Ambulatory Encounters for Period:</b>										
7. Physician .....	0									
8. Non-Physician .....	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (a) .....	825,071,067									825,071,067
13. Life Premiums Direct .....	0									
14. Property/Casualty Premiums Written .....	0									
15. Health Premiums Earned .....	1,313,180,131									1,313,180,131
16. Property/Casualty Premiums Earned .....	0									
17. Amount Paid for Provision of Health Care Services.....	1,298,715,027									1,298,715,027
18. Amount Incurred for Provision of Health Care Services	1,329,506,689									1,329,506,689

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....825,071,067



## UNDERWRITING AND INVESTMENT EXHIBIT

### ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) .....					0	0
2. Medicare Supplement .....					0	0
3. Dental Only .....					0	0
4. Vision Only .....					0	0
5. Federal Employees Health Benefits Plan .....					0	0
6. Title XVIII - Medicare .....					0	0
7. Title XIX - Medicaid .....					0	0
8. Other health .....	(354,396,608)	1,395,531,173	4,122,802	854,915	(350,273,806)	4,960,451
9. Health subtotal (Lines 1 to 8) .....	(354,396,608)	1,395,531,173	4,122,802	854,915	(350,273,806)	4,960,451
10. Healthcare receivables (a) .....	144,209,398	329,248,866			144,209,398	498,464,936
11. Other non-health .....					0	0
12. Medical incentive pools and bonus amounts .....	684,225		100,000		784,225	710,346
13. Totals (Lines 9-10+11+12)	(497,921,781)	1,066,282,307	4,222,802	854,915	(493,698,979)	(492,794,139)

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

## Notes to Financial Statements

### 1. Summary of Significant Accounting Policies and Going Concern

#### A. Accounting Practices

SilverScript Insurance Company (the "Company"), a Tennessee domiciled insurance company, is a wholly owned subsidiary of Part D Holding Company, L.L.C. (the "Parent"), and a wholly owned indirect subsidiary of CVS Health Corporation (the "Ultimate Parent"). The financial statements of the Company are presented on the basis of accounting practices prescribed or permitted by the Tennessee Department of Commerce and Insurance (the "Department").

The Department recognizes only statutory accounting practices prescribed or permitted by the State of Tennessee for determining and reporting the financial condition and results of operations of an insurance company and for determining its solvency under Tennessee Insurance Law. The National Association of Insurance Commissioners' ("NAIC") *Accounting Practices and Procedures Manual* has been adopted as a component of prescribed or permitted practices by the State of Tennessee.

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

<u>NET INCOME:</u>	<u>SSAP#</u>	<u>F/S Page</u>	<u>F/S Line#</u>	<u>Three months Ending March 31, 2018</u>	<u>Year Ending December 31, 2017</u>
(1) SilverScript State Basis (Page 4, Line 32, Column 2 & 4)				\$ (123,005,243)	\$ 214,250,876
(2) State Prescribed Practices that increase (decrease) NAIC SAP					
(3) State Permitted Practices that increase (decrease) NAIC SAP					
(4) NAIC SAP (1-2- 3=4)				\$ (123,005,243)	\$ 214,250,876
<u>SURPLUS:</u>				<u>March 31, 2018</u>	<u>December 31, 2017</u>
(5) SilverScript State Basis (Page 3, Line 33, Column 3 & 4)				\$ 793,387,821	\$ 965,585,257
(6) State Prescribed Practices that increase (decrease) NAIC SAP					
(7) State Permitted Practices that increase (decrease) NAIC SAP	4	2-Assets	1	(500,452)	(500,372)
(8) NAIC SAP (5-6- 7=8)				\$ 793,888,273	\$ 966,085,629

The Company owns a U.S Treasury bond with the U.S. territory of Puerto Rico. Based on Tennessee Code Ann. §56-1-405, the Company is required to non-admit special deposits held for the benefit of a specific state's policyholders to the extent that the deposit exceeds liabilities associated with that state's policyholders. Accordingly, the Company non-admitted its special deposit with Puerto Rico of \$500 thousand for the period ending both March 31, 2018 and December 31, 2017.

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

The preparation of financial statements in conformity with the *Quarterly Statement Instructions* and Statutory Accounting Principles requires management to make estimates and assumptions that affect amounts reported on the financial statements and accompanying notes. Such estimates and assumptions could change in the future as more information becomes known, which could impact the amounts reported and disclosed herein. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period.

#### C. Accounting Policy

The Company has adopted accounting policies with respect to particular accounts or transactions which could materially affect its assets, liabilities, capital and surplus or results of operations as follows:

## Notes to Financial Statements

### 1. Summary of Significant Accounting Policies and Going Concern (continued)

- (1) Short-term investments include bonds with an original purchase maturity date of less than one year but greater than three months are stated at amortized cost using the straight-line method of amortization on premiums or discounts. Cash Equivalents include money market holdings that are stated at fair value, and bonds with an original purchase maturity date of less than three months are stated at amortized cost using the straight-line method of amortization on premiums or discounts and are classified as cash equivalents.
- (2) Bonds with an original purchase maturity date greater than one year are stated at amortized cost using the straight-line method of amortization on premiums or discounts. None of the Company's bonds became impaired during the three months ending March 31, 2018. The Company recognized a capital loss of \$192 thousand as a result of the impairment of the Puerto Rico bond during the year ending December 31, 2017.
- (3) As of March 31, 2018 and 2017, the Company had 10.0 million shares, (\$1 par), of Class A common capital stock authorized, and 2.75 million of such shares issued and outstanding.
- (4) Preferred Stocks: None
- (5) Mortgage Loans: None
- (6) Loan-backed Securities: None
- (7) Investment in Subsidiaries, Controlled and Affiliated Companies: None
- (8) Joint Ventures, Partnerships, and Limited Liability Companies: None
- (9) Derivatives: None
- (10) The Company does not utilize anticipated investment income as a factor in determining premium deficiencies.
- (11) The Company has recorded estimates of incurred but not reported claims for claims paid by external entities and subsequently billed to the Company such as claims paid by state pharmaceutical assistance programs and for paper claims. Incurred but not reported claims are estimated based on historical experience.
- (12) The Company has not modified its capitalization policy from the prior period.
- (13) Amounts recorded in the Company's financial statements for pharmaceutical rebates are determined based on the amounts CVS Caremark Part D Services, L.L.C. ("Part D Services"), an affiliates of the Parent Company, expects to collect from various pharmaceutical manufacturers.

D. Going Concern: Not Applicable

### 2. Accounting Changes and Corrections of Errors

Accounting Changes: There were no changes during 1st quarter of 2018. Due to the revisions in SSAP No. 2R – *Cash, Cash Equivalents, Drafts, and Short-Term Investments*, starting with 2017 annual statement reporting, all money market mutual funds were reported as cash equivalents on Schedule E, Part 2.

Corrections of Errors: None

### 3. Business Combinations and Goodwill

- A. Statutory Purchase Method: None
- B. Statutory Merger: None
- C. Assumption Reinsurance: None
- D. Impairment Loss: None

### 4. Discontinued Operations

None

### 5. Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans: None
- B. Debt Restructuring: None
- C. Reverse Mortgages: None
- D. Loan Backed Securities: None
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions: None
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing: None
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing: None
- H. Repurchase Agreements Transactions Accounted for as a Sale: None

## Notes to Financial Statements

### 5. Investments (continued)

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale: None

J. Real Estate: None

K. Low-Income Housing Tax Credits ("LIHTC"): None

L. Restricted Assets:

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	1 Total Gross (Admitted & Nonadmitted) Restricted from Current Year	2 Total Gross (Admitted & Nonadmitted) Restricted from Prior Year	3 Increase/(Decrease) (1 minus 2)	4 Total Current Year Nonadmitted Restricted	5 Total Current Year Admitted Restricted (1 minus 4)	6 Gross (Admitted & Nonadmitted) Restricted to Total Assets	7 Admitted Restricted to Total Admitted Assets
a. Subject to contractual obligation for which liability is not shown	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0.000 %	0.000 %
b. Collateral held under security lending agreements	0	0	0	0	0	0.000	0.000
c. Subject to repurchase agreements	0	0	0	0	0	0.000	0.000
d. Subject to reverse repurchase agreements	0	0	0	0	0	0.000	0.000
e. Subject to dollar repurchase agreements	0	0	0	0	0	0.000	0.000
f. Subject to dollar reverse repurchase agreements	0	0	0	0	0	0.000	0.000
g. Placed under option contracts	0	0	0	0	0	0.000	0.000
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	0	0	0	0	0	0.000	0.000
i. FHLB capital stock	0	0	0	0	0	0.000	0.000
j. On deposit with states	3,434,703	3,436,023	(1,320)	0	3,434,703	0.089	0.091
k. On deposit with other regulatory bodies	500,452	500,372	80	500,452	0	0.013	0.000
l. Pledged collateral to FHLB (including assets backing funding agreements)	0	0	0	0	0	0.000	0.000
m. Pledged as collateral not captured in other categories	0	0	0	0	0	0.000	0.000
n. Other restricted assets	0	0	0	0	0	0.000	0.000
o. Total Restricted Assets	\$ 3,935,155	\$ 3,936,395	\$ (1,240)	\$ 500,452	\$ 3,434,703	0.102%	0.091%

(2) Detail of Assets Pledged as Collateral Not Captured in Other categories: None

(3) Detail of Other Restricted Assets: None

(4) Collateral received and reflected as assets within the reporting entity's financial statements: None

M. Working Capital Finance Investments: None

N. Offsetting and Netting of Assets and Liabilities: None

O. Structured Notes: None

P. 5\* Securities: None

Q. Short Sales: None

R. Prepayment Penalty and Acceleration Fees: None

## Notes to Financial Statements

### 6. Joint Ventures, Partnerships and Limited Liability Companies

- A. The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10% of its admitted assets.
- B. The Company did not recognize any impairment write-down for its investments in Joint Ventures, Partnerships and Limited Liability Companies during the statement periods.

### 7. Investment Income

- A. Due and accrued income was excluded from surplus on the following basis:  
All investment income due and accrued with amounts over 90 days past due are excluded from surplus.
- B. The total amount excluded was: None

### 8. Derivative Instruments

None

### 9. Income Taxes

No material changes

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

- A., B., C. During the three months ending March 31, 2018 and the year ending December 31, 2017, the Company did not have any material transfer of assets to affiliates.
- D. The Company reported a receivable of \$352.3 million and \$207.6 million from affiliates on line 23 of page 2 as of March 31, 2018 and December 31, 2017, respectively.
- E. The Company does not have any guarantees or undertakings for the benefit of an affiliate, which result in a material contingent exposure of the Company's or any related party's assets or liabilities.
- F. The following is a description of management and service contracts and cost sharing agreements involving the Company and any related party:

In general, the Company relies on its Parent Company and other affiliates under common control of the Ultimate Parent for all support and operations functions. For specific owner/affiliate relationships, refer to the Legal Entities Organizational Chart contained in Schedule Y.

Except for amounts due to PDPs, all claims paid and incurred are based on amounts billed by the Parent Company and its affiliates for pharmacy claims filled by pharmacies in the Parent Company's pharmacy network or claims submitted to the Parent Company for pharmacy claims paid by state agencies.

Additionally, all pharmaceutical rebates are received or are recorded as a receivable from Part D Services, which contracts with pharmaceutical manufacturers for such rebates.

As of March 31, 2018, the Company reported a net receivable from the Parent Company and its affiliates of \$258.3 million. As of December 31, 2017, the Company reported a net receivable from the Parent Company and its affiliates of \$57.5 million.

The following is a summary of the financial statement presentation of amounts due from and to the Company's Parent and affiliates.

<b>Assets, Liabilities, Capital and Surplus</b>	<b><u>March 31, 2018</u></b>	<b><u>December 31, 2017</u></b>
<i>Taxes payable (lines 9 &amp; 10.1)</i>	\$ 68,363,059	\$ 87,189,823
<i>Ceded reinsurance premiums payable (line 11)</i>	25,688,233	62,884,527
<i>Amounts due (from) to parent, subsidiaries and affiliates (line 23)</i>	(352,305,181)	(207,606,664)
	<u>\$ (258,253,889)</u>	<u>\$ (57,532,314)</u>

*Amounts due (from) and to parent, subsidiaries and affiliates* is primarily comprised of amounts due for uninsured pharmacy claims processed, management fees from Part D Services and intercompany funding. As of March 31, 2018, the Company reported a receivable from affiliates of \$352.3 million, primarily as a result of prefunding of claims activity from Part D Services. The prefunding amount was released with the claims payments in April 2018. *Ceded reinsurance premiums payable* is related to the Company's reinsurance agreement with CVS Caremark Indemnity, Ltd. and Accendo Insurance Company (Accendo). Both are affiliates of the Company.

## Notes to Financial Statement

### 10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties (continued)

The Company pays Part D Services a management fee for sales, accounting, tax, legal, information technology, compliance, claims processing and other administrative functions under a management services agreement that has been filed with the Department. The management fee is assessed on a per-member, per-month ("pmpm") and a per claim basis.

In addition, related to the Company's reinsurance agreement with CVS Caremark Indemnity, Ltd. and Accendo, the Company recognizes a reduction of expenses related to ceded expenses.

The following is a summary of the financial statement presentation of management fees incurred from Part D Services and reinsurance expenses ceded to the CVS Caremark Indemnity, Ltd.:

<b>Statement of Revenue and Expenses</b>	<b><u>March 31, 2018</u></b>		<b><u>March 31, 2017</u></b>	
Management fee				
<i>Claims adjustment expenses(line 20)</i>	\$	33,263,366	\$	51,950,652
<i>General and administrative expenses (line 21)</i>		80,036,228		52,082,859
Total management fee	\$	<u>113,299,594</u>	\$	<u>104,033,511</u>
Reinsurance expenses ceded				
<i>Claims adjustment expenses(line 20)</i>	\$	5,689,423	\$	17,877,891
<i>General and administrative expenses (line 21)</i>		31,151,493		24,080,555
Total reinsurance expenses ceded	\$	<u>36,840,916</u>	\$	<u>41,958,446</u>

Payment terms require the Company to settle with Part D Services all invoiced amounts for claims and service fees thirty days in arrears after the Company receives an invoice. The settlement of rebates happens within ninety days of the beginning of the calendar quarter following receipt of such rebates by Part D Services.

The Company has a written tax-sharing agreement with the Ultimate Parent, and its allocation of the Ultimate Parent's federal and state income and premium taxes is based on the Company's federal and state tax liability determined as if the Company were filing its own separate tax return each year. The Company's tax sharing agreement with the Ultimate Parent provides that the Ultimate Parent will pay the Company for its net operating losses to the extent that such net operating loss is utilized in the reduction of the consolidated federal income tax liability.

As of March 31, 2018 and December 31, 2017, the Company owed the Ultimate Parent \$65.3 million and \$82.0 million, respectively, for federal income taxes, which is reported as *current federal and foreign income tax payable* in the Statement of Liabilities, Capital and Surplus. As of March 31, 2018 and December 31, 2017, the Company owed the Ultimate Parent \$3.1 million and \$5.2 million, for state taxes, which is reported as *general expenses due or accrued* in the Statement of Liabilities, Capital and Surplus. Intercompany tax balances are settled annually.

- G. All outstanding shares of the Company are owned by the Parent Company.
- H. The Company does not own shares of stock of its Parent Company.
- M. The Company does not hold any interest in another company or limited partnership.
- J. The Company did not recognize any impairment write-down for its investments in Subsidiary, Controlled or Affiliated Companies during the statement period.
- K. The Company does not have any investments in a foreign insurance subsidiary.
- L. The Company did not have any investments in a downstream non-insurance holding company.
- M. The Company does not have any subsidiary, controlled and affiliated (SCA) investments.
- N. The Company does not have any investments in insurance SCA's.

### 11. Debt

None

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

No change.

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

- (1) As of March 31, 2018 and December 31, 2017, the Company had 10.0 million shares, (\$1 par); of Class A *common capital stock* authorized and 2.75 million of such shares issued and outstanding.
- (2) The Company has no preferred stock outstanding.

**Notes to Financial Statement****13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations (continued)**

- (3) Without prior approval of the domiciliary commissioner, dividends to shareholders are limited by the laws of Tennessee and are based on the restrictions relating to statutory surplus.
- (4) No dividends were paid by the Company during the three months ending March 31, 2018 and year ending December 31, 2017.
- (5) The portion of the Company's profits that may be paid as ordinary dividends are limited by the laws of Tennessee. Tennessee law states that ordinary dividends must follow Tennessee Code Ann. § 56-11-105(e) and Tennessee Code Ann. § 56-11-106(b) for extraordinary dividends. Ordinary dividends from the previous twelve months are limited to the greater of ten percent of surplus or the net gain from operations.
- The amount of ordinary dividends that may be paid out during any given period is subject to certain restrictions as specified by state statute.
- (6) The Company is subject to certain Risk-Based Capital ("RBC") requirements as specified by the NAIC. Under those requirements, the amount of capital and surplus maintained by a life/health insurance company is to be determined based on the various risk factors related to it. As of March 31, 2018 and December 31, 2017, there were no restrictions placed on the unassigned funds (surplus).
- (7) The Company has no mutual reciprocals or any similarly organized entities.
- (8) The Company does not hold any stock of the Ultimate Parent, including stock of affiliated entities for special purposes.
- (9) The Company had a special surplus of \$0 million and \$60.0 million as of March 31, 2018 and December 31, 2017, respectively. The balance reported as special surplus funds is due to health plan fees incurred under Section 9010 of the Affordable Care Act ("ACA"). There was no special surplus for the period ending March 31, 2018 due to Section 4003 of H.R. 195, Division D – *Suspension of Certain Health-Related Taxes*, which was signed into law on January 22, 2018. Section 4003 suspends the health plan fees for calendar year 2019. Per SSAP No. 106: *Affordable Care Act Section 9010 Assessment*, no segregation of special surplus is needed for the net written premium in 2018 data year.
- (10) As of March 31, 2018 and December 31, 2017, the Company had no unrealized gains or losses.
- (11) The Company did not issue any surplus debenture of similar obligations.
- (12) The Company did not experience an impact of any restatement due to prior quasi-reorganization.
- (13) Not applicable.

**14. Liabilities, Contingencies and Assessments**

- A. Contingent Commitments: None
- B. Assessments: None
- C. Gain Contingencies: None
- D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits: None
- E. Joint and Several Liabilities: None
- F. All Other Contingencies:
- a. Bad debt write-offs, net of recoveries, totaled \$0.6 million and \$3.7 million as of March 31, 2018 and December 31, 2017, respectively. These balances were previously reported as non-admitted assets.

**15. Leases**

- A. Lessee Operating Lease: None
- B. Lessor Leases: None

**16. Information about Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk**

None

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

- A. Transfers of Receivables Reported as Sales: None
- B. Transfer and Servicing of Financial Assets: None
- C. Wash Sales: None

## Notes to Financial Statement

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

A. ASO Plans: None

B. ASC Plans

The Company has several Administrative Services Contracts (“ASC”) with Self-Funded Employer Group Waiver Plans (“SF EGWPs”).

For the three months ending March 31, 2018 and 2017, the gain from operations from ASC uninsured plans is as follows:

#### March 31, 2018

	<u>ASC Uninsured Plans</u>	<u>Uninsured Portion of Partially Insured Plans</u>	<u>Total ASC</u>
a. Gross reimbursement for medical costs incurred	\$ 954,784,233	\$ -	\$ 954,784,233
b. Gross administrative fees accrued	26,699,294	-	26,699,294
c. Other income or expense (including interest paid to or received from plans)	-	-	-
d. Gross expenses incurred (claims and administrative)	<u>(980,849,580)</u>	<u>-</u>	<u>(980,849,580)</u>
e. Total Net Operations	<u>\$ 633,947</u>	<u>\$ -</u>	<u>\$ 633,947</u>

#### March 31, 2017

	<u>ASC Uninsured Plans</u>	<u>Uninsured Portion of Partially Insured Plans</u>	<u>Total ASC</u>
a. Gross reimbursement for medical costs incurred	\$ 757,900,425	\$ -	\$ 757,900,425
b. Gross administrative fees accrued	21,192,792	-	21,192,792
c. Other income or expense (including interest paid to or received from plans)	-	-	-
d. Gross expenses incurred (claims and administrative)	<u>(778,444,235)</u>	<u>-</u>	<u>(778,444,235)</u>
e. Total Net Operations	<u>\$ 648,982</u>	<u>\$ -</u>	<u>\$ 648,982</u>

C. Medicare and other Similarly Structured Cost Based Reimbursement Contract:

(1) Revenue and prescription drug amounts for the three months ending March 31, 2018 and 2017, exclude \$2,331.1 million and \$2,127.4 million, respectively, in subsidies from the Centers for Medicare and Medicaid Services (“CMS”) for catastrophic reinsurance subsidies, low income cost sharing subsidies (“LICS”) and the coverage gap discount program (“CGDP”) pursuant to the Company’s contracts with CMS.

(2) As of March 31, 2018 and December 31, 2017, the admitted *amounts receivable relating to uninsured plans* includes the following:

	<u>03/31/2018</u>	<u>12/31/2017</u>
CMS settlement-2017	\$ 122,935,775	\$ 8,250,410
First United American & United American CMS settlement	26,896,645	27,317,370
Coverage gap discount receivable	170,042,424	305,651,934
Unbilled group receivable	219,460,227	119,476,797
Rx Rebate Receivable for uninsured plan	297,018,928	564,681,452
Billed group receivable	188,462	162,108
Total amounts receivable related to uninsured plans	<u>\$ 836,542,461</u>	<u>\$ 1,025,540,071</u>

Settlement amounts due to or from CMS for a plan year for LICS and drugs covered by the catastrophic reinsurance feature are typically settled in the fourth quarter of the following year. These settlements are related to LICS and drugs covered by the catastrophic reinsurance feature. As of March 31, 2018, the Company recorded a CMS settlement receivable of \$122.9 million for the plan year 2017. The Company has also recorded a receivable from CMS for \$26.9 million for the settlements due to First United American and United American as part of the reinsurance agreement effective July 1, 2016. There is an offsetting payable in the reinsurance payable line of the balance sheet.

Coverage gap discount receivable represents amounts invoiced or to be invoiced by CMS to pharmaceutical manufacturers on the Company’s behalf. Fluctuations in this balance are

## Notes to Financial Statement

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

due to timing of when CMS invoices the pharmaceutical manufacturers and when collections are received by the Company.

Unbilled group receivables represents the last week of claims for the month that are billed to the respective groups the first week of the following month.

As of March 31, 2018, there was an Rx rebate receivable of \$297.0 million related to uninsured plans, which include SF EGWPs and CMS' catastrophic reinsurance program.

As of March 31, 2018 and December 31, 2017, *amounts payable relating to uninsured plans* includes the following:

	<u>03/31/2018</u>	<u>12/31/2017</u>
CMS settlement - 2018	1,772,725,220	-
Reopener payables	49,081,549	49,361,410
SF EGWP client payables	667,208,395	767,781,783
Coverage gap discount payable	54,947,824	54,947,823
Total amounts payable related to uninsured plans	\$ 2,543,962,988	\$ 872,091,016

As of March 31, 2018 the company has a CMS settlement payable of \$1,772.7 million for the plan year 2018. The payable position was primarily a result of prepayment received in March for April's subsidies due to the first of April on a weekend.

Reopener payables represent accruals for prior plan year's that are due back to CMS, and are the result of retro-activity that happens after the initial settlement with CMS. Reopeners are settled with CMS according to CMS time table which is approximately 5 years after the initial settlement with CMS.

SF EGWP client payables represent the amounts due back to SF EGWP clients for LICS and reinsurance subsidies the Company will collect from CMS on their behalf. The Company expects to collect the LICS and reinsurance subsidies in the fourth quarter of the following plan year and the Company will settle the payable to SF EGWPs at that time. The balance also includes the rebates collected from pharmaceutical manufacturers on the client's behalf.

Coverage gap discount payable represents the amounts due back to CMS after invoices have been send to pharmaceutical manufacturers.

- (3) As of March 31, 2018 and December 31, 2017, there were no allowances or reserves for adjustment of recorded revenues.
- (4) The Company has made no adjustment to revenue resulting from audits of receivables related to revenues recorded in the prior period.

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

None

### 20. Fair Value Measurements

SSAP 100, *Fair Value Measurements*, defines fair value, establishes a framework for measuring fair value under accounting principles generally accepted in the United States, and enhances disclosures about fair value measurements. SSAP 100 provides guidance on how to measure fair value when required under existing accounting standards.

The statement establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value into three broad levels ("Level 1, 2 and 3").

Level 1 inputs are observable inputs that reflect quoted prices for identical assets or liabilities in active markets the Company has the ability to access at the measurement date. Level 2 inputs are observable inputs, other than quoted prices included in Level 1, for the asset or liability. Level 3 inputs are unobservable inputs reflecting the Company's estimates of the assumptions that market participants would use in pricing the asset or liability (including assumptions about risk).

The hierarchy requires the use of market observable information when available for assessing fair value. As the fair value of the Company's U.S. Treasury securities are based on unadjusted market prices, they are classified within Level 1.

The following methods and assumptions were used by the Company in estimating the "fair value" disclosures for financial instruments in the accompanying financial statements and notes thereto:

*Cash, cash equivalents and short-term investments:* The carrying amounts reported in the accompany balance sheets for these financial instruments approximate their fair values.

*Investment Securities:* Fair values for bonds are based on the price that would be received to sell an asset or would be paid to transfer a liability in an orderly transaction between market participants at the measurement date.

## Notes to Financial Statement

### 20. Fair Value Measurements (continued)

The Company utilizes the three-level valuation hierarchy for the recognition and disclosure of fair value measurements. The categorization of assets and liabilities within this hierarchy is based upon the lowest level of input that is significant to the measurement of fair value. The three levels of the hierarchy consist of the following.

- *Level 1* - Inputs to the valuation methodology are unadjusted quoted prices in active markets for identical assets or liabilities that the Company has the ability to access at the measurement date.
- *Level 2* - Inputs to the valuation methodology are quoted prices for similar assets and liabilities in active markets, quoted prices in markets that are not active or inputs that are observable for the asset or liability, either directly or indirectly, for substantially the full term of the instrument.
- *Level 3* - Inputs to the valuation methodology are unobservable inputs based upon management's best estimate of inputs market participants could use in pricing the asset or liability at the measurement date, including assumptions about risk.

A.

(1) Fair Value Measurements at Reporting Date:

#### March 31, 2018

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Total
Assets at fair value				
Cash	\$ 56,679,673	\$ -	\$ -	\$ 56,679,673
Cash equivalents and Short-Term Investments	1,449,720,401	-	-	1,449,720,401
Total Assets at fair value	\$ 1,506,400,074	\$ -	\$ -	\$ 1,506,400,074

#### December 31, 2017

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Total
Assets at fair value				
Cash	\$ (4,822,051)	\$ -	\$ -	\$ (4,822,051)
Cash equivalents and Short-Term Investments	162,285,996	-	-	162,285,996
Total Assets at fair value	\$ 157,463,945	\$ -	\$ -	\$ 157,463,945

There have been no transfers between Level 1 and Level 2 of the Fair Value Hierarchy in the current reporting period.

- (2) Fair Value Measurement (Level 3) of the Fair Value Hierarchy: Not Applicable
- (3) Fair Value Measurement (Level 3) Transfers: Not Applicable
- (4) Inputs for Valuation of Fair Value of Level 2 and Level 3 Investments: Bank valuation provided in monthly statements is utilized to estimate fair market value.
- (5) Fair Value of Derivative Assets and Liabilities: Not Applicable

B. Other Accounting Pronouncements: Not Applicable

C. Aggregate fair value for all financial instruments at reporting date:

**Notes to Financial Statement****20. Fair Value Measurements (continued)****March 31, 2018**

<u>Type of Financial Instrument</u>	<u>Aggregate Fair Value</u>	<u>Admitted Assets</u>	<u>(Level 1)</u>	<u>(Level 2)</u>	<u>(Level 3)</u>	<u>Not Practicable (Carrying Value)</u>
Bonds	\$ 2,794,124	\$ 2,329,641	\$ 2,794,124	\$ -	\$ -	\$ -
Cash	\$ 56,679,673	\$ 56,679,673	\$ 56,679,673	\$ -	\$ -	\$ -
Cash equivalents and Short-Term	\$ 1,449,720,401	\$ 1,449,720,401	\$ 1,449,720,401	\$ -	\$ -	\$ -

**December 31, 2017**

<u>Type of Financial Instrument</u>	<u>Aggregate Fair Value</u>	<u>Admitted Assets</u>	<u>(Level 1)</u>	<u>(Level 2)</u>	<u>(Level 3)</u>	<u>Not Practicable (Carrying Value)</u>
Bonds	\$ 2,805,678	\$ 2,329,724	\$ 2,805,678	\$ -	\$ -	\$ -
Cash	\$ (4,822,051)	\$ (4,822,051)	\$ (4,822,051)	\$ -	\$ -	\$ -
Cash equivalents and Short-Term	\$ 162,285,996	\$ 162,285,996	\$ 162,285,996	\$ -	\$ -	\$ -

**D. Not Practicable to Estimate Fair Value**

As of March 31, 2018 and December 31, 2017, the Company did not own any financial instruments that were not practicable to estimate fair value.

Money market funds in active markets are classified within Level 1 as fair values are based on quoted market prices.

As of March 31, 2018, bonds and cash equivalents with an admitted asset value of \$2.3 million and \$1.2 million, respectively, were on deposit with state insurance and other departments to satisfy regulatory requirements.

As of December 31, 2017, bonds and cash equivalents with an admitted asset value of \$2.3 million and \$1.2 million, respectively, were on deposit with state insurance and other departments to satisfy regulatory requirements.

Management regularly reviews the value of the Company's investments. If the value of any investment falls below its cost basis, the decline is analyzed to determine whether it is an other-than-temporary decline in value. To make this determination for each security, the following is considered:

- The length of time and the extent to which the fair value has been below cost;
- The financial condition and near-term prospects of the issuer of the security, including any specific events that may affect its operations or earnings potential; and
- Management's intent and ability to hold the security long enough for it to recover its value.

Based on that analysis, management makes a judgment as to whether the loss is other-than-temporary. If the loss is other-than-temporary, an impairment charge is recorded within net realized investment gains (losses) in the statements of operations in the period the determination is made. For the three months ending March 31, 2018, the management determined that none of the Company's investments had an other-than temporary decline in value. For the year ending December 31, 2017, the Company recognized a capital loss of \$192 thousand as a result of the impairment of the Puerto Rico bond.

**21. Other Items**

- A. Unusual or Infrequent Items: As of March 31, 2018, the Company recorded \$206.8 million of premium received in advance in the balance sheet, compared to \$18.3 million as of December 31, 2017. The fluctuation happened after the monthly payment from CMS in the amount of \$1.3 billion for April 2018 was received on March 31, 2018, due to the first of April falling on a weekend. The prepayment includes the funding for the premiums for Direct and Low Income Premium Subsidies, and other claims related subsidies.
- B. Troubled Debt Restructuring - Debtors: None
- C. Other Disclosures: None
- D. Business Interruption Insurance Recoveries: None
- E. State Transferable and Non-transferable Tax Credits: None
- F. Subprime-Mortgage-Related Risk Exposure: None
- G. Retained Assets: None
- H. Insurance Linked Securities (ILS) Contracts: None

STATEMENT AS OF MARCH 31, 2018 OF THE SilverScript Insurance Company  
**Notes to Financial Statement**

**22. Events Subsequent**

The Company has assessed and concluded that there were no other material subsequent events, through May 11, 2018, the date which the financial statements were available to be issued.

**23. Reinsurance**

A. Ceded Reinsurance Report

The Company purchased the Medicare Part D business (CMS contracts S5755 and S5580) from First United American and its affiliate United American on July 1, 2016. As of July 1, the parties separately entered into a novation agreement, pursuant to which SilverScript assumed responsibility as the sponsor of the individual Medicare PDPs of First United American and United American.

The individual PDPs continued in force without an interruption in benefits or services. For the remainder of the 2016 PDP plan year only, First United American and United American assumed as reinsurer, pursuant to the Reinsurance Agreement, and continued to operate the PDP business. The Reinsurance Agreement provides that First United American and United American shall assume one hundred percent (100%) of the 2016 PDP Plan liabilities on an indemnity reinsurance basis.

The Company has a quota share reinsurance agreement with an affiliate of the Parent Company, CVS Caremark Indemnity, Ltd., a Bermuda domiciled insurer. Under the terms of this agreement, the Company cedes a percentage of the Company's share of the risk associated with individual and group premiums, claims and administrative expenses. This agreement was amended in 2017. The percentage risk ceded decreased from 20% to 15%, effective January 1, 2018. The original agreement was approved by the Department on August 15, 2011, and was retroactive to January 1, 2011.

The Company also has a quota share reinsurance agreement with another affiliate of the Parent Company, Accendo Insurance Company, a Utah domiciled insurer. Under the terms of this agreement, the Company cedes 5% of the Company's share of the risk associated with individual and group premiums, claims and administrative expenses. This agreement was effective January 1, 2018.

The following is a financial summary of the ceded amounts and related expenses under this agreement:

	<u>Three months ending</u> <u>March 31, 2018</u>		<u>Year ending</u> <u>December 31, 2017</u>	
<b>Statement of Revenue and Expense:</b>				
Premiums and other revenue	\$	264,465,406	\$	710,992,642
Benefits		(263,274,307)		(561,702,579)
Commissions expense		(37,041,419)		(85,983,837)
Interest expense		200,504		572,615
Total revenue and expense ceded	<u>\$</u>	<u>(35,649,816)</u>	<u>\$</u>	<u>63,878,841</u>
<b>Balance Sheet:</b>				
Claims unpaid	\$	812,813	\$	686,413
Aggregate health policy reserves		(1,303,063)		-
Accrued retrospective premiums		(97,316,673)		(1,414,766)
Premiums received in advance		51,685,656		4,102,600
Premiums receivable		(1,993,879)		(6,775,960)
Accrued incentive pool		25,000		25,000
Rebates Receivable		(118,364,565)		(124,616,234)
Total ceded balance sheet Items	<u>\$</u>	<u>(166,454,711)</u>	<u>\$</u>	<u>(127,992,947)</u>
<b>Unsettled Prior Year Balance</b>	<b>\$</b>	<b>61,338,049</b>	<b>\$</b>	<b>(994,314)</b>
Funds held by or deposited with reinsured companies	\$	215,737,951	\$	707,477,131
Funds held under reinsurance treaties with unauthorized reinsurers		(356,504,429)		(772,585,551)
Amount due to CVS Caremark Indemnity, Ltd.	<u>\$</u>	<u>(140,766,478)</u>	<u>\$</u>	<u>(65,108,420)</u>

B. Uncollectible Reinsurance: None

C. Commutation of Ceded Reinsurance:

The Company did not commute any ceded reinsurance nor did it enter into or engage in any agreement that reinsures policies or contracts that were in-force or had existing reserves as of the effective date of such agreements.

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation: None

STATEMENT AS OF MARCH 31, 2018 OF THE SilverScript Insurance Company  
**Notes to Financial Statement**

**24. Retrospectively Rated Contracts & Contracts Subject to Redetermination**

- A. The Company's Medicare Part D contract with CMS contains a risk corridor feature. Due to the risk corridor feature, the Company's business is accounted for as a retrospectively rated contract. The Company estimates retrospective premium adjustments using a mathematical approach based on the Company's underwriting experience. As of March 31, 2018 and December 31, 2017 accrued retroactive premium adjustments were reported as an *aggregate health policy reserves* in the amount of \$33.0 million and \$34.3 million, respectively, and as *accrued retrospective premiums and contracts subject to redetermination* of \$393.4 million and \$3.7 million, respectively.
- B. The Company records the risk corridor adjustment as an adjustment to earned premiums.
- C. The amount of net direct premiums written by the Company during the three months ending March 31, 2018 and 2017 that was subject to the retrospective rating feature was \$814.0 million and \$861.2 million, respectively, which represented 98%, and 98%, respectively, of the total premiums written, excluding risk corridor adjustment.
- D. Medical loss ratio rebates required pursuant to the Public Health Service Act: There was no MLR recorded during the first three months of 2018 and the year ending December 31, 2017.
- E. Risk Sharing Provisions of the ACA: The Company only offers health insurance coverage under Medicare Part D and is not a qualified health plan under the definition of the ACA.

**25. Change in Incurred Claims and Claim Adjustment Expenses**

- A. The following table provides a reconciliation of the beginning and ending balances of claims unpaid, accruals for medical incentive pool and bonus, and health care receivables as follows:

	<b>Three months Ending March 31, 2018</b>	<b>Year Ending December 31, 2017</b>
<b>Balances as of January 1:</b>		
Reserves for unpaid claims	\$ 4,960,450	\$ 10,108,215
Health Care Receivable	(498,464,936)	(291,393,137)
Reserve for incentive pools	710,346	556,410
	<u>\$ (492,794,140)</u>	<u>\$ (280,728,512)</u>
<b>Incurred related to:</b>		
Current year	\$ 1,067,137,221	\$ 2,313,855,430
Prior year	(904,839)	(60,792,935)
	<u>\$ 1,066,232,382</u>	<u>\$ 2,253,062,495</u>
<b>Paid (received) related to:</b>		
Current year	\$ 1,395,531,171	\$ 2,809,474,715
Prior year	(353,712,383)	(344,346,592)
	<u>\$ 1,041,818,788</u>	<u>\$ 2,465,128,123</u>
<b>Balances as of March 31, 2018 and December 31, 2017:</b>		
Reserves for unpaid claims	\$ 4,977,717	\$ 4,960,450
Health Care Receivable	(473,458,263)	(498,464,936)
Reserve for incentive pools	100,000	710,346
	<u>\$ (468,380,546)</u>	<u>\$ (492,794,140)</u>

Changes in prior year reserves are generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding claims. It is at least reasonably possible that a further change in the incurred but not reported claims could occur within one year from the date of these financial statements and that such a change in these estimates could be material to the financial statements.

During the first three months of 2018 and the year 2017, the Company experienced \$0.9 million and \$60.8 million, respectively, of favorable prior year claims development, all of which related to retrospectively rated policies. This favorable development occurred due primarily to favorable pharmaceutical rebates related to the prior year credits to the Company by Part D Services. In addition, there were changes in the valuation of settlement amounts with CMS and favorable claim run out activity related to prior year.

- B. There were no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses, including reasons for the change and the effects on the financial statements for the most recent reporting period presented.

**26. Intercompany Pooling Arrangements**

None

**Notes to Financial Statement****27. Structured Settlements**

None

**28. Health Care Receivables**

The following is a summary of the Company's *Health Care and Other Amounts Receivable* as of March 31, 2018 and December 31, 2017, respectively. The amounts are presented gross of non-admitted receivable but net of reinsurance ceded:

	<u>03/31/2018</u>	<u>12/31/2017</u>
Pharmaceutical Rebates Receivable	\$ 129,960,336	\$ 281,956,969
Performance Network Rebate Receivable	343,497,927	216,507,967
<b>Total Health Care and Other Amounts Receivable</b>	<b>\$ 473,458,263</b>	<b>\$ 498,464,936</b>

**A. Pharmaceutical Rebates Receivables:**

The Company has contracted with Part D Services for pharmaceutical rebates. Amounts recorded in the Company's financial statements are determined based on the amounts the Part D Services has collected or expects to collect as invoiced or otherwise confirmed by Part D Services. The Company reported a health care receivable of \$130.0 million and \$282.0 million as of March 31, 2018 and December 31, 2017, respectively. All rebates are determined to be received within 90 days after Part D Services receives the payments from manufactures. The pharmaceutical rebates receivables reported below are gross of reinsurance ceded.

Quarter	Estimated Pharmacy Rebates Pertaining to Current Quarter Scripts Filled and as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
03/31/2018	\$ 1,754,618,121	\$ 1,754,618,121	\$ 1,295,148,773	\$ -	\$ -
12/31/2017	1,513,146,853	1,513,776,160	1,513,776,160	-	-
9/30/2017	1,468,927,054	1,465,790,878	1,465,790,878	-	-
6/30/2017	1,499,381,807	1,498,482,306	1,498,482,306	-	-
3/31/2017	1,418,953,584	1,461,995,525	1,461,995,525	-	-
12/31/2016	1,512,431,283	1,514,893,293	1,514,893,293	-	-
9/30/2016	1,559,780,406	1,561,947,635	1,480,019,006	-	81,928,629
6/30/2016	1,523,948,498	1,536,203,584	1,536,203,584	-	-
3/31/2016	1,396,246,218	1,482,300,009	1,482,300,009	-	-
12/31/2015	1,350,151,915	1,377,509,198	1,377,509,198	-	-
9/30/2015	1,301,148,795	1,326,843,155	1,326,843,155	-	-
6/30/2015	1,240,858,947	1,252,476,487	1,252,476,487	-	-

**B. Risk Sharing Receivables:**

None

**Other Healthcare Receivables:**

CVS Part D Services, the Company's pharmacy benefit manager, has a pharmacy network that includes a retrospective performance network rebate (PNR). The PNR is performance based upon whether the participating pharmacies have met certain pre-established criteria in the contract. The PNR is calculated by multiplying the applicable claims with a variable network rate based on the actual performance. The PNR agreements for both 2018 and 2017 have three performance measurement periods (measurement period), ending April 30, August 31, and December 31, respectively. The PNR receivables fit the category of Other Health Care Receivables per SSAP No. 84 *Health Care and Government Insured Plan Receivables*.

**29. Participating Policies**

None

**30. Premium Deficiency Reserves**

None

**31. Anticipated Salvage and Subrogation**

None

**GENERAL INTERROGATORIES****PART 1 - COMMON INTERROGATORIES****GENERAL**

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? ..... Yes [ ] No [ X ]
- 1.2 If yes, has the report been filed with the domiciliary state? ..... Yes [ ] No [ ]
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... Yes [ ] No [ X ]
- 2.2 If yes, date of change: .....
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? ..... Yes [ X ] No [ ]  
If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? ..... Yes [ ] No [ X ]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.
- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? ..... Yes [ X ] No [ ]
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. .... 0000064803
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes [ ] No [ X ]
- 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.
- | 1<br>Name of Entity | 2<br>NAIC Company Code | 3<br>State of Domicile |
|---------------------|------------------------|------------------------|
|                     |                        |                        |
5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? ..... Yes [ ] No [ X ] N/A [ ]  
If yes, attach an explanation.
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. .... 12/31/2013
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. .... 12/31/2013
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). .... 06/17/2015
- 6.4 By what department or departments?  
State of Tennessee, Department of Commerce & Insurance
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? ..... Yes [ ] No [ ] N/A [ X ]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes [ X ] No [ ] N/A [ ]
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? ..... Yes [ ] No [ X ]
- 7.2 If yes, give full information:
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? ..... Yes [ ] No [ X ]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? ..... Yes [ ] No [ X ]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

## GENERAL INTERROGATORIES

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... 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.
- 9.11 If the response to 9.1 is No, please explain:
- 9.2 Has the code of ethics for senior managers been amended? ..... Yes  No
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes  No
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

### FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes  No
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... \$ .....0

### INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) ..... Yes  No
- 11.2 If yes, give full and complete information relating thereto:
12. Amount of real estate and mortgages held in other invested assets in Schedule BA: ..... \$ .....0
13. Amount of real estate and mortgages held in short-term investments: ..... \$ .....0
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? ..... Yes  No
- 14.2 If yes, please complete the following:
- |   | 1<br>Prior Year-End<br>Book/Adjusted<br>Carrying Value | 2<br>Current Quarter<br>Book/Adjusted<br>Carrying Value |
|---|--|---|
| 14.21 Bonds .....   | \$ .....0  | \$ .....  |
| 14.22 Preferred Stock .....   | \$ .....0  | \$ .....  |
| 14.23 Common Stock .....  | \$ .....0  | \$ .....  |
| 14.24 Short-Term Investments .....  | \$ .....0  | \$ .....  |
| 14.25 Mortgage Loans on Real Estate .....   | \$ .....0  | \$ .....  |
| 14.26 All Other .....   | \$ .....0  | \$ .....  |
| 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) ..... | \$ .....0  | \$ .....0   |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above .....                       | \$ .....   | \$ .....  |
- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? ..... Yes  No
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes  No   
 If no, attach a description with this statement.

STATEMENT AS OF MARCH 31, 2018 OF THE SilverScript Insurance Company  
**GENERAL INTERROGATORIES**

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 .....\$ .....0
- 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 .....\$ .....0
- 16.3 Total payable for securities lending reported on the liability page .....\$ .....0

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

1 Name of Custodian(s)	2 Custodian Address
Bank of America, N.A. ....	2000 Clayton Rd. 5th floor, Concord, CA 94520 .....
Bank of America, N.A. ....	200 N College Street, Charlotte, NC 28255 .....
Regions Bank .....	400 West Capitol, Little Rock, AR 72201 .....
Wells Fargo .....	1021 E. Cary Steet, Richmond, VA 23219 .....
US Bank .....	225 Water Street, Ste. 700, Jacksonville, FL 32202 .....
Xerox State & Local Solutions, Inc. ....	100 Hancock Street, 10th Floor, Quincy, MA 02171 .....

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

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

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

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

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

1 Name of Firm or Individual	2 Affiliation

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

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed

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

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

# GENERAL INTERROGATORIES

## PART 2 - HEALTH

1. Operating Percentages:
- 1.1 A&H loss percent .....102.1 %
  - 1.2 A&H cost containment percent .....0.6 %
  - 1.3 A&H expense percent excluding cost containment expenses .....12.0 %
- 2.1 Do you act as a custodian for health savings accounts? ..... Yes [ ] No [ X ]
- 2.2 If yes, please provide the amount of custodial funds held as of the reporting date .....\$.....
- 2.3 Do you act as an administrator for health savings accounts? ..... Yes [ ] No [ X ]
- 2.4 If yes, please provide the balance of the funds administered as of the reporting date .....\$.....
3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? ..... Yes [ X ] No [ ]
- 3.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? ..... Yes [ ] No [ ]



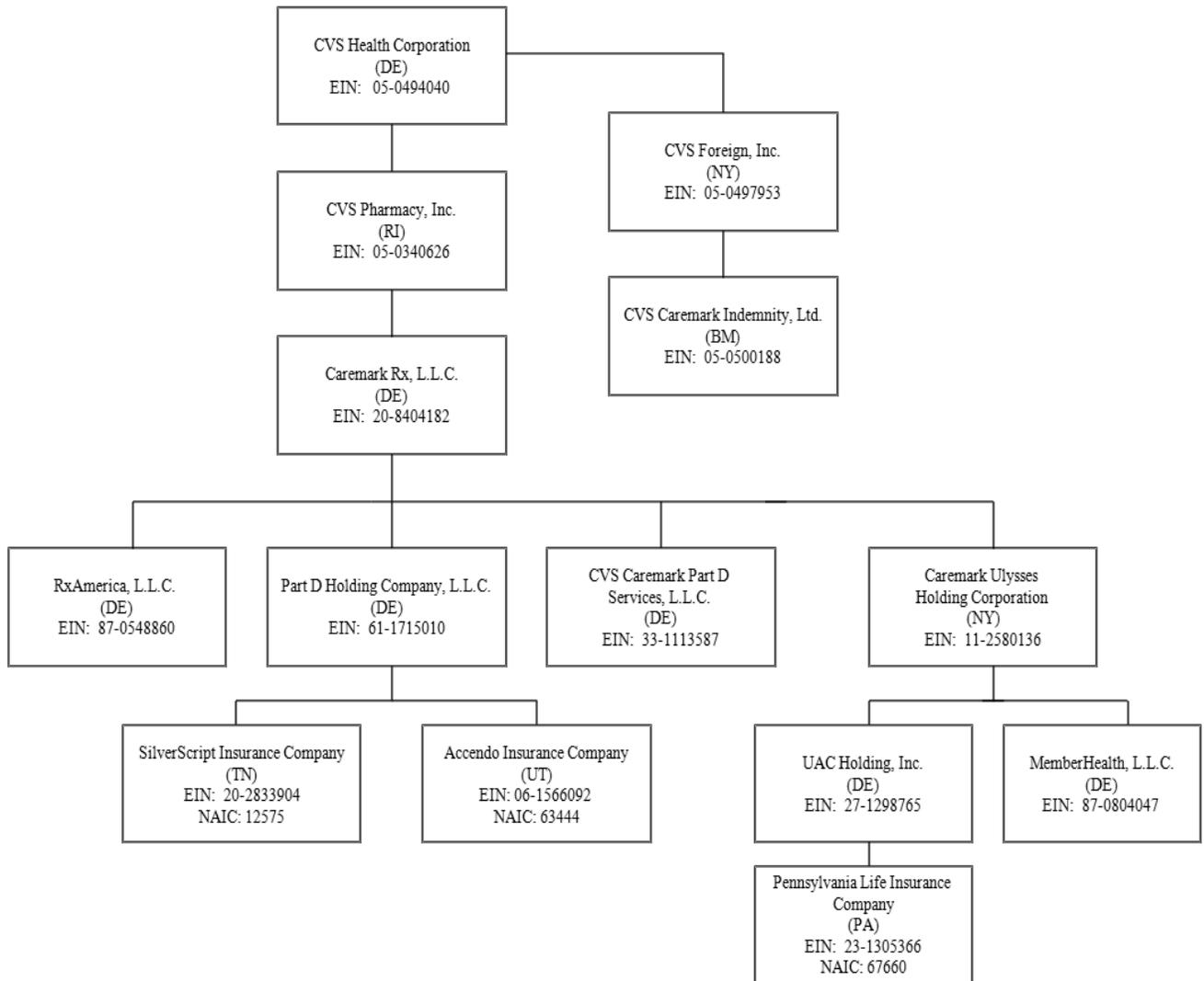
**SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS**

Current Year to Date - Allocated by States and Territories

States, etc.	1 Active Status (a)	Direct Business Only							9 Deposit-Type Contracts	
		2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 Federal Employees Health Benefits Program Premiums	6 Life and Annuity Premiums & Other Considerations	7 Property/Casualty Premiums	8 Total Columns 2 Through 7		
1. Alabama AL	L	13,357,609						13,357,609		
2. Alaska AK	L	303,705						303,705		
3. Arizona AZ	L	8,639,335						8,639,335		
4. Arkansas AR	L	10,604,297						10,604,297		
5. California CA	L	91,652,438						91,652,438		
6. Colorado CO	L	6,511,465						6,511,465		
7. Connecticut CT	L	10,772,394						10,772,394		
8. Delaware DE	L	2,554,672						2,554,672		
9. District of Columbia DC	L	1,418,740						1,418,740		
10. Florida FL	L	77,501,913						77,501,913		
11. Georgia GA	L	25,222,119						25,222,119		
12. Hawaii HI	L	1,589,504						1,589,504		
13. Idaho ID	L	3,953,165						3,953,165		
14. Illinois IL	L	25,688,563						25,688,563		
15. Indiana IN	L	16,996,468						16,996,468		
16. Iowa IA	L	10,656,177						10,656,177		
17. Kansas KS	L	9,880,915						9,880,915		
18. Kentucky KY	L	14,728,844						14,728,844		
19. Louisiana LA	L	15,047,557						15,047,557		
20. Maine ME	L	1,992,295						1,992,295		
21. Maryland MD	L	14,613,574						14,613,574		
22. Massachusetts MA	L	25,075,502						25,075,502		
23. Michigan MI	L	21,295,457						21,295,457		
24. Minnesota MN	L	12,384,425						12,384,425		
25. Mississippi MS	L	14,413,049						14,413,049		
26. Missouri MO	L	24,760,544						24,760,544		
27. Montana MT	L	3,371,744						3,371,744		
28. Nebraska NE	L	6,199,829						6,199,829		
29. Nevada NV	L	2,899,733						2,899,733		
30. New Hampshire NH	L	3,039,445						3,039,445		
31. New Jersey NJ	L	27,826,787						27,826,787		
32. New Mexico NM	L	4,666,297						4,666,297		
33. New York NY	L	45,584,536						45,584,536		
34. North Carolina NC	L	31,956,251						31,956,251		
35. North Dakota ND	L	3,330,838						3,330,838		
36. Ohio OH	L	31,225,487						31,225,487		
37. Oklahoma OK	L	13,813,683						13,813,683		
38. Oregon OR	L	6,831,343						6,831,343		
39. Pennsylvania PA	L	39,978,349						39,978,349		
40. Rhode Island RI	L	2,357,971						2,357,971		
41. South Carolina SC	L	14,023,218						14,023,218		
42. South Dakota SD	L	3,118,518						3,118,518		
43. Tennessee TN	L	16,483,762						16,483,762		
44. Texas TX	L	42,510,713						42,510,713		
45. Utah UT	L	3,055,687						3,055,687		
46. Vermont VT	L	3,148,883						3,148,883		
47. Virginia VA	L	18,583,153						18,583,153		
48. Washington WA	L	14,218,842						14,218,842		
49. West Virginia WV	L	7,957,710						7,957,710		
50. Wisconsin WI	L	15,459,758						15,459,758		
51. Wyoming WY	L	1,712,425						1,712,425		
52. American Samoa AS	N							0		
53. Guam GU	L	3,390						3,390		
54. Puerto Rico PR	L	86,758						86,758		
55. U.S. Virgin Islands VI	L	11,204						11,204		
56. Northern Mariana Islands MP	L	27						27		
57. Canada CAN	N							0		
58. Aggregate Other Aliens OT	XXX	0	0	0	0	0	0	0	0	
59. Subtotal	XXX	825,071,067	0	0	0	0	0	825,071,067	0	
60. Reporting Entity Contributions for Employee Benefit Plans	XXX							0		
61. Totals (Direct Business)	XXX	825,071,067	0	0	0	0	0	825,071,067	0	
DETAILS OF WRITE-INS										
58001.	XXX									
58002.	XXX									
58003.	XXX									
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0	
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0	

(a) Active Status Counts:  
 L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG.....55      R - Registered - Non-domiciled RRGs.....0  
 E - Eligible - Reporting entities eligible or approved to write surplus lines in the state.....0      Q - Qualified - Qualified or accredited reinsurer.....0  
 N - None of the above - Not allowed to write business in the state.....2

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART**



This organizational chart reflects the insurance entity reporting system and identifies the relationship between the ultimate parent and all member insurers. The ultimate controlling company is a Fortune 7 company with numerous subsidiaries, the majority of which do not interact with the insurance entities.

STATEMENT AS OF MARCH 31, 2018 OF THE SilverScript Insurance Company

**SCHEDULE Y**

**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Per-centage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
4667	CVS HEALTH GRP	00000	05-0494040		0000064803	NYSE	CVS Health Corporation	DE	UIP	Board of Directors	Board of Directors	100.000	CVS Health Corporation	N	
4667	CVS HEALTH GRP	63444	06-1566092				Accendo Insurance Company	UT	IA	CVS Health Corporation	Management	100.000	CVS Health Corporation	N	
4667	CVS HEALTH GRP	12575	20-2833904				SilverScript Insurance Company	TN	IA	CVS Health Corporation	Management	100.000	CVS Health Corporation	N	
4667	CVS HEALTH GRP	67660	23-1305366				Pennsylvania Life Insurance Co.	PA	IA	CVS Health Corporation	Management	100.000	CVS Health Corporation	N	
4667	CVS HEALTH GRP	00000	05-0340626				CVS Pharmacy, Inc	RI	NIA	CVS Health Corporation	Management	100.000	CVS Health Corporation	N	
4667	CVS HEALTH GRP	00000	20-8404182				Caremark, Rx, L.L.C.	DE	NIA	CVS Health Corporation	Management	100.000	CVS Health Corporation	N	
4667	CVS HEALTH GRP	00000	61-1715010				Part D Holding Company, L.L.C.	DE	UDP	CVS Health Corporation	Management	100.000	CVS Health Corporation	N	
4667	CVS HEALTH GRP	00000	33-1113587				CVS Caremark Part D Services, L.L.C.	DE	NIA	CVS Health Corporation	Management	100.000	CVS Health Corporation	N	
4667	CVS HEALTH GRP	00000	87-0548860				RxAmerica, L.L.C.	DE	NIA	CVS Health Corporation	Management	100.000	CVS Health Corporation	N	
4667	CVS HEALTH GRP	00000	11-2580136				Caremark Ulysses Holding Corporation	NY	NIA	CVS Health Corporation	Management	100.000	CVS Health Corporation	N	
4667	CVS HEALTH GRP	00000	87-0804047				MemberHealth L.L.C.	DE	NIA	CVS Health Corporation	Management	100.000	CVS Health Corporation	N	
4667	CVS HEALTH GRP	00000	05-0500188				CVS Caremark Indemnity, Ltd.	BMJ	IA	CVS Health Corporation	Management	100.000	CVS Health Corporation	N	
4667	CVS HEALTH GRP	00000	27-1298765				UAC Holding, Inc	DE	NIA	CVS Health Corporation	Management	100.000	CVS Health Corporation	N	
4667	CVS HEALTH GRP	00000	05-0497953				CVS Foreign, Inc	NY	NIA	CVS Health Corporation	Management	100.000	CVS Health Corporation	N	

Asterisk	Explanation
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## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	Response
1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement? .....	YES

Explanation:

Bar Code:

**OVERFLOW PAGE FOR WRITE-INS**

**NONE**

STATEMENT AS OF MARCH 31, 2018 OF THE SilverScript Insurance Company

**SCHEDULE A - VERIFICATION**

Real Estate

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

**NONE**

**SCHEDULE B - VERIFICATION**

Mortgage Loans

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

**NONE**

**SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

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

**NONE**

**SCHEDULE D - VERIFICATION**

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	2,830,096	1,264,989
2. Cost of bonds and stocks acquired .....		2,319,025
3. Accrual of discount .....	189	78,902
4. Unrealized valuation increase (decrease) .....		0
5. Total gain (loss) on disposals .....		0
6. Deduct consideration for bonds and stocks disposed of .....		640,000
7. Deduct amortization of premium .....	192	772
8. Total foreign exchange change in book/adjusted carrying value .....		0
9. Deduct current year's other than temporary impairment recognized .....		192,048
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees .....		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) .....	2,830,093	2,830,096
12. Deduct total nonadmitted amounts .....	500,452	500,372
13. Statement value at end of current period (Line 11 minus Line 12) .....	2,329,641	2,329,724

STATEMENT AS OF MARCH 31, 2018 OF THE SilverScript Insurance Company

**SCHEDULE D - PART 1B**

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. NAIC 1 (a) .....	2,830,096			(3)	2,830,093			2,830,096
2. NAIC 2 (a) .....	0				0			0
3. NAIC 3 (a) .....	0				0			0
4. NAIC 4 (a) .....	0				0			0
5. NAIC 5 (a) .....	0				0			0
6. NAIC 6 (a) .....	0				0			0
7. Total Bonds	2,830,096	0	0	(3)	2,830,093	0	0	2,830,096
<b>PREFERRED STOCK</b>								
8. NAIC 1 .....	0				0			
9. NAIC 2 .....	0				0			
10. NAIC 3 .....	0				0			
11. NAIC 4 .....	0				0			
12. NAIC 5 .....	0				0			
13. NAIC 6 .....	0				0			
14. Total Preferred Stock .....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	2,830,096	0	0	(3)	2,830,093	0	0	2,830,096

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$ ..... ; NAIC 2 \$ ..... ; NAIC 3 \$ ..... NAIC 4 \$ ..... ; NAIC 5 \$ ..... ; NAIC 6 \$ .....

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**SCHEDULE DA - PART 1**

Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Cost	Interest Collected Year-to-Date	Paid for Accrued Interest Year-to-Date
9199999 Totals					

**NONE**

**SCHEDULE DA - VERIFICATION**

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	0	1,313,917,291
2. Cost of short-term investments acquired .....		4,836,807,503
3. Accrual of discount .....		623
4. Unrealized valuation increase (decrease) .....		0
5. Total gain (loss) on disposals .....		0
6. Deduct consideration received on disposals .....		6,150,725,417
7. Deduct amortization of premium .....		0
8. Total foreign exchange change in book/adjusted carrying value .....		0
9. Deduct current year's other than temporary impairment recognized .....		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	0	0
11. Deduct total nonadmitted amounts .....		0
12. Statement value at end of current period (Line 10 minus Line 11)	0	0

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 - PART 2 - VERIFICATION**

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	162,285,996	0
2. Cost of cash equivalents acquired .....	1,865,517,173	2,164,967,677
3. Accrual of discount .....		0
4. Unrealized valuation increase (decrease) .....		0
5. Total gain (loss) on disposals .....		0
6. Deduct consideration received on disposals .....	578,082,768	2,002,681,681
7. Deduct amortization of premium .....		0
8. Total foreign exchange change in book/adjusted carrying value .....		0
9. Deduct current year's other than temporary impairment recognized .....		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	1,449,720,401	162,285,996
11. Deduct total nonadmitted amounts .....		0
12. Statement value at end of current period (Line 10 minus Line 11)	1,449,720,401	162,285,996

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

**NONE**

Schedule A - Part 3 - Real Estate Disposed

**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 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**

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

**NONE**

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

**NONE**

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

**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 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

**N O N E**

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

**N O N E**







SUPPLEMENT FOR THE QUARTER ENDING MARCH 31, 2018 OF THE SilverScript Insurance Company

## MEDICARE PART D COVERAGE SUPPLEMENT

(Net of Reinsurance)

NAIC Group Code 4667

NAIC Company Code 12575

	Individual Coverage		Group Coverage		5 Total Cash
	1 Insured	2 Uninsured	3 Insured	4 Uninsured	
1. Premiums Collected .....	868,791,403	XXX	4,852,779	XXX	873,644,182
2. Earned Premiums .....	1,051,398,457	XXX	5,843,063	XXX	XXX
3. Claims Paid .....	1,035,127,032	XXX	6,691,756	XXX	1,041,818,788
4. Claims Incurred .....	1,059,497,727	XXX	6,734,656	XXX	XXX
5. Reinsurance Coverage and Low Income Cost Sharing - Claims Paid Net of Reimbursements Applied (a) .....	XXX	(1,746,357,053)	XXX	88,597,059	(1,657,759,994)
6. Aggregate Policy Reserves - Change .....		XXX		XXX	XXX
7. Expenses Paid .....	123,318,510	XXX	685,333	XXX	124,003,843
8. Expenses Incurred .....	131,542,184	XXX	731,035	XXX	XXX
9. Underwriting Gain or Loss .....	(139,641,454)	XXX	(1,622,628)	XXX	XXX
10. Cash Flow Result .....	XXX	XXX	XXX	XXX	1,365,581,545

(a) Uninsured Receivable/Payable with CMS at End of Quarter: \$ .....122,935,776 due from CMS or \$ .....1,876,754,593 due to CMS