



HEALTH ANNUAL STATEMENT

AS OF DECEMBER 31, 2019
OF THE CONDITION AND AFFAIRS OF THE

SilverScript Insurance Company

NAIC Group Code 0001 0001 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 []

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 615-743-6600
(Street and Number) (Area Code) (Telephone Number)
Nashville, TN, US 37228
(City or Town, State, Country and Zip Code)

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 615-743-6600
(Street and Number) (Area Code) (Telephone Number)
Nashville, TN, US 37228
(City or Town, State, Country and Zip Code)

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 Terri Ann Swanson # Controller Daniel Lee Zablocki #
Vice President and Secretary Edward Chung-I Lee #

OTHER

Kevin James Casey, Senior Investment Officer # Jeffrey James Drzazgowski, Actuary # Tracy Louise Smith, Vice President and Treasurer #

DIRECTORS OR TRUSTEES

Peter Andrew Charles # Robert Sean Healy # Tracy Louise Smith #
Terri Ann Swanson # Daniel Lee Zablocki #

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.

Terri Ann Swanson
President

Edward Chung-I Lee
Vice President and Secretary

Daniel Lee Zablocki
Controller

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

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

State of..... Rhode Island
County of..... Providence

Subscribed and sworn to before me this
24th day of January, 2020

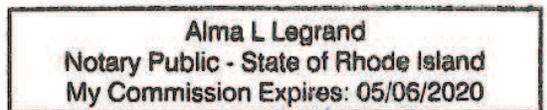
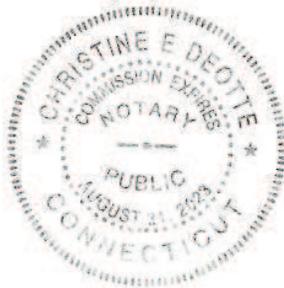
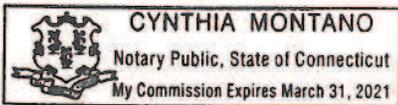
Cynthia Montano
NOTARY PUBLIC (Seal)

Subscribed and sworn to before me this
29th day of January, 2020

Christine E. Deotte
NOTARY PUBLIC (Seal)

Subscribed and sworn to before me this
7th day of February, 2020

Alma L. Legrand
NOTARY PUBLIC (Seal)



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

EXHIBIT 3A - ANALYSIS OF HEALTH CARE RECEIVABLES COLLECTED AND ACCRUED

Type of Health Care Receivable	Health Care Receivables Collected During the Year		Health Care Receivables Accrued as of December 31 of Current Year		5 Health Care Receivables in Prior Years (Columns 1 + 3)	6 Estimated Health Care Receivables Accrued as of December 31 of Prior Year
	1 On Amounts Accrued Prior to January 1 of Current Year	2 On Amounts Accrued During the Year	3 On Amounts Accrued December 31 of Prior Year	4 On Amounts Accrued During the Year		
1. Pharmaceutical rebate receivables	54,177,800	3,695,156,996		14,128,714	54,177,800	64,228,383
2. Claim overpayment receivables					0	0
3. Loans and advances to providers					0	0
4. Capitation arrangement receivables					0	0
5. Risk sharing receivables					0	0
6. Other health care receivables.....	468,090,497	541,294,177		462,643,495	468,090,497	458,801,237
7. Totals (Lines 1 through 6)	522,268,297	4,236,451,173	0	476,772,209	522,268,297	523,029,620

Note that the accrued amounts in Columns 3, 4, and 6 are the total health care receivables, not just the admitted portion.

EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1 Affiliate	2 Description	3 Amount	4 Current	5 Non-Current
NONE				
0399999 Total gross payables				

EXHIBIT 7 PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payments	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups	0	0.0		0.0		
2. Intermediaries	0	0.0		0.0		
3. All other providers	0	0.0		0.0		
4. Total capitation payments	0	0.0	0	0.0	0	0
Other Payments:						
5. Fee-for-service	0	0.0	XXX	XXX		
6. Contractual fee payments	0	0.0	XXX	XXX		
7. Bonus/withhold arrangements - fee-for-service	0	0.0	XXX	XXX		
8. Bonus/withhold arrangements - contractual fee payments	0	0.0	XXX	XXX		
9. Non-contingent salaries	0	0.0	XXX	XXX		
10. Aggregate cost arrangements	0	0.0	XXX	XXX		
11. All other payments	2,542,975,874	100.0	XXX	XXX	2,543,004,258	(28,384)
12. Total other payments	2,542,975,874	100.0	XXX	XXX	2,543,004,258	(28,384)
13. TOTAL (Line 4 plus Line 12)	2,542,975,874	100%	XXX	XXX	2,543,004,258	(28,384)

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

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

Exhibit 8 - Furniture and Equipment Owned

NONE



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF	Alabama		DURING THE YEAR					(LOCATION)	
			Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
			2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year	78,418	0	0	0	0	0	0	0	0	78,418	
2. First Quarter	76,826	0	0	0	0	0	0	0	0	76,826	
3. Second Quarter	75,971	0	0	0	0	0	0	0	0	75,971	
4. Third Quarter	75,187	0	0	0	0	0	0	0	0	75,187	
5. Current Year	74,496	0	0	0	0	0	0	0	0	74,496	
6. Current Year Member Months	910,601	0	0	0	0	0	0	0	0	910,601	
Total Member Ambulatory Encounters for Year:											
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 (b)	51,202,680	0	0	0	0	0	0	0	0	51,202,680	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	50,729,064	0	0	0	0	0	0	0	0	50,729,064	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services.....	39,470,816	0	0	0	0	0	0	0	0	39,470,816	
18. Amount Incurred for Provision of Health Care Services	40,082,168	0	0	0	0	0	0	0	0	40,082,168	

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$51,202,680

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Alaska		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	1,069	0	0	0	0	0	0	0	0	1,069		
2. First Quarter	1,018	0	0	0	0	0	0	0	0	1,018		
3. Second Quarter	995	0	0	0	0	0	0	0	0	995		
4. Third Quarter	974	0	0	0	0	0	0	0	0	974		
5. Current Year	924	0	0	0	0	0	0	0	0	924		
6. Current Year Member Months	11,928	0	0	0	0	0	0	0	0	11,928		
Total Member Ambulatory Encounters for Year:												
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 (b)	982,057	0	0	0	0	0	0	0	0	982,057		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	974,250	0	0	0	0	0	0	0	0	974,250		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	692,463	0	0	0	0	0	0	0	0	692,463		
18. Amount Incurred for Provision of Health Care Services	710,732	0	0	0	0	0	0	0	0	710,732		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$982,057

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Arizona		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	58,453	0	0	0	0	0	0	0	0	58,453		
2. First Quarter	54,823	0	0	0	0	0	0	0	0	54,823		
3. Second Quarter	53,734	0	0	0	0	0	0	0	0	53,734		
4. Third Quarter	53,865	0	0	0	0	0	0	0	0	53,865		
5. Current Year	54,205	0	0	0	0	0	0	0	0	54,205		
6. Current Year Member Months	650,781	0	0	0	0	0	0	0	0	650,781		
Total Member Ambulatory Encounters for Year:												
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 (b)	32,849,922	0	0	0	0	0	0	0	0	32,849,922		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	32,164,713	0	0	0	0	0	0	0	0	32,164,713		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	21,704,160	0	0	0	0	0	0	0	0	21,704,160		
18. Amount Incurred for Provision of Health Care Services	22,270,559	0	0	0	0	0	0	0	0	22,270,559		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$32,849,922

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Arkansas		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	102,139	0	0	0	0	0	0	0	0	102,139		
2. First Quarter	99,481	0	0	0	0	0	0	0	0	99,481		
3. Second Quarter	98,203	0	0	0	0	0	0	0	0	98,203		
4. Third Quarter	99,199	0	0	0	0	0	0	0	0	99,199		
5. Current Year	99,668	0	0	0	0	0	0	0	0	99,668		
6. Current Year Member Months	1,191,542	0	0	0	0	0	0	0	0	1,191,542		
Total Member Ambulatory Encounters for Year:												
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 (b)	59,669,707	0	0	0	0	0	0	0	0	59,669,707		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	51,320,161	0	0	0	0	0	0	0	0	51,320,161		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	40,660,018	0	0	0	0	0	0	0	0	40,660,018		
18. Amount Incurred for Provision of Health Care Services	41,755,328	0	0	0	0	0	0	0	0	41,755,328		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$59,669,707

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		California		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	521,282	0	0	0	0	0	0	0	0	521,282		
2. First Quarter	515,389	0	0	0	0	0	0	0	0	515,389		
3. Second Quarter	506,157	0	0	0	0	0	0	0	0	506,157		
4. Third Quarter	505,725	0	0	0	0	0	0	0	0	505,725		
5. Current Year	504,792	0	0	0	0	0	0	0	0	504,792		
6. Current Year Member Months	6,112,390	0	0	0	0	0	0	0	0	6,112,390		
Total Member Ambulatory Encounters for Year:												
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 (b)	369,407,671	0	0	0	0	0	0	0	0	369,407,671		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	371,265,316	0	0	0	0	0	0	0	0	371,265,316		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	292,062,370	0	0	0	0	0	0	0	0	292,062,370		
18. Amount Incurred for Provision of Health Care Services	296,695,607	0	0	0	0	0	0	0	0	296,695,607		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$369,407,671

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Colorado		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	41,702	0	0	0	0	0	0	0	0	41,702		
2. First Quarter	40,699	0	0	0	0	0	0	0	0	40,699		
3. Second Quarter	39,902	0	0	0	0	0	0	0	0	39,902		
4. Third Quarter	39,690	0	0	0	0	0	0	0	0	39,690		
5. Current Year	39,447	0	0	0	0	0	0	0	0	39,447		
6. Current Year Member Months	481,045	0	0	0	0	0	0	0	0	481,045		
Total Member Ambulatory Encounters for Year:												
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 (b)	25,477,930	0	0	0	0	0	0	0	0	25,477,930		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	25,343,457	0	0	0	0	0	0	0	0	25,343,457		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	19,638,745	0	0	0	0	0	0	0	0	19,638,745		
18. Amount Incurred for Provision of Health Care Services	19,865,697	0	0	0	0	0	0	0	0	19,865,697		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$25,477,930

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF	Connecticut		DURING THE YEAR					(LOCATION)		
			Comprehensive (Hospital & Medical)		2019					NAIC Company Code		12575
			1	2	3	4	5	6	7	8	9	10
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	53,942	0	0	0	0	0	0	0	0	53,942		
2. First Quarter	53,546	0	0	0	0	0	0	0	0	53,546		
3. Second Quarter	52,702	0	0	0	0	0	0	0	0	52,702		
4. Third Quarter	52,190	0	0	0	0	0	0	0	0	52,190		
5. Current Year	51,910	0	0	0	0	0	0	0	0	51,910		
6. Current Year Member Months	633,930	0	0	0	0	0	0	0	0	633,930		
Total Member Ambulatory Encounters for Year:												
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 (b)	40,798,937	0	0	0	0	0	0	0	0	40,798,937		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	40,741,502	0	0	0	0	0	0	0	0	40,741,502		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	33,299,372	0	0	0	0	0	0	0	0	33,299,372		
18. Amount Incurred for Provision of Health Care Services	33,767,636	0	0	0	0	0	0	0	0	33,767,636		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$40,798,937

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF	Delaware		DURING THE YEAR					(LOCATION)	
			Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
			2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year	14,427	0	0	0	0	0	0	0	0	14,427	
2. First Quarter	14,238	0	0	0	0	0	0	0	0	14,238	
3. Second Quarter	14,020	0	0	0	0	0	0	0	0	14,020	
4. Third Quarter	14,083	0	0	0	0	0	0	0	0	14,083	
5. Current Year	13,937	0	0	0	0	0	0	0	0	13,937	
6. Current Year Member Months	169,323	0	0	0	0	0	0	0	0	169,323	
Total Member Ambulatory Encounters for Year:											
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 (b)	8,723,447	0	0	0	0	0	0	0	0	8,723,447	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	9,216,633	0	0	0	0	0	0	0	0	9,216,633	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	7,550,926	0	0	0	0	0	0	0	0	7,550,926	
18. Amount Incurred for Provision of Health Care Services	7,575,669	0	0	0	0	0	0	0	0	7,575,669	

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$8,723,447

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF	District of Columbia		DURING THE YEAR					(LOCATION)	
			Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
			2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year	6,275	0	0	0	0	0	0	0	0	6,275	
2. First Quarter	6,193	0	0	0	0	0	0	0	0	6,193	
3. Second Quarter	5,904	0	0	0	0	0	0	0	0	5,904	
4. Third Quarter	5,816	0	0	0	0	0	0	0	0	5,816	
5. Current Year	5,711	0	0	0	0	0	0	0	0	5,711	
6. Current Year Member Months	71,812	0	0	0	0	0	0	0	0	71,812	
Total Member Ambulatory Encounters for Year:											
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 (b)	4,492,978	0	0	0	0	0	0	0	0	4,492,978	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	4,769,465	0	0	0	0	0	0	0	0	4,769,465	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	3,656,028	0	0	0	0	0	0	0	0	3,656,028	
18. Amount Incurred for Provision of Health Care Services	3,714,840	0	0	0	0	0	0	0	0	3,714,840	

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$4,492,978

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Florida		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	412,001	0	0	0	0	0	0	0	0	412,001		
2. First Quarter	418,774	0	0	0	0	0	0	0	0	418,774		
3. Second Quarter	408,134	0	0	0	0	0	0	0	0	408,134		
4. Third Quarter	413,819	0	0	0	0	0	0	0	0	413,819		
5. Current Year	418,615	0	0	0	0	0	0	0	0	418,615		
6. Current Year Member Months	5,003,557	0	0	0	0	0	0	0	0	5,003,557		
Total Member Ambulatory Encounters for Year:												
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 (b)	305,394,414	0	0	0	0	0	0	0	0	305,394,414		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	305,391,332	0	0	0	0	0	0	0	0	305,391,332		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	228,998,484	0	0	0	0	0	0	0	0	228,998,484		
18. Amount Incurred for Provision of Health Care Services	229,980,904	0	0	0	0	0	0	0	0	229,980,904		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$305,394,414

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Georgia		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	180,125	0	0	0	0	0	0	0	0	180,125		
2. First Quarter	179,248	0	0	0	0	0	0	0	0	179,248		
3. Second Quarter	176,401	0	0	0	0	0	0	0	0	176,401		
4. Third Quarter	175,677	0	0	0	0	0	0	0	0	175,677		
5. Current Year	175,747	0	0	0	0	0	0	0	0	175,747		
6. Current Year Member Months	2,130,077	0	0	0	0	0	0	0	0	2,130,077		
Total Member Ambulatory Encounters for Year:												
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 (b)	107,112,093	0	0	0	0	0	0	0	0	107,112,093		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	104,485,491	0	0	0	0	0	0	0	0	104,485,491		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	86,153,700	0	0	0	0	0	0	0	0	86,153,700		
18. Amount Incurred for Provision of Health Care Services	87,761,069	0	0	0	0	0	0	0	0	87,761,069		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 107,112,093

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Hawaii		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	8,371	0	0	0	0	0	0	0	0	8,371		
2. First Quarter	8,668	0	0	0	0	0	0	0	0	8,668		
3. Second Quarter	8,100	0	0	0	0	0	0	0	0	8,100		
4. Third Quarter	8,224	0	0	0	0	0	0	0	0	8,224		
5. Current Year	8,372	0	0	0	0	0	0	0	0	8,372		
6. Current Year Member Months	101,287	0	0	0	0	0	0	0	0	101,287		
Total Member Ambulatory Encounters for Year:												
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 (b)	3,763,911	0	0	0	0	0	0	0	0	3,763,911		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	4,518,553	0	0	0	0	0	0	0	0	4,518,553		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	3,624,466	0	0	0	0	0	0	0	0	3,624,466		
18. Amount Incurred for Provision of Health Care Services	3,626,632	0	0	0	0	0	0	0	0	3,626,632		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$3,763,911

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Idaho		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	22,418	0	0	0	0	0	0	0	0	22,418		
2. First Quarter	21,589	0	0	0	0	0	0	0	0	21,589		
3. Second Quarter	21,163	0	0	0	0	0	0	0	0	21,163		
4. Third Quarter	21,246	0	0	0	0	0	0	0	0	21,246		
5. Current Year	21,424	0	0	0	0	0	0	0	0	21,424		
6. Current Year Member Months	256,744	0	0	0	0	0	0	0	0	256,744		
Total Member Ambulatory Encounters for Year:												
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 (b)	14,583,553	0	0	0	0	0	0	0	0	14,583,553		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	14,543,639	0	0	0	0	0	0	0	0	14,543,639		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	11,001,516	0	0	0	0	0	0	0	0	11,001,516		
18. Amount Incurred for Provision of Health Care Services	11,068,489	0	0	0	0	0	0	0	0	11,068,489		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$14,583,553

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Illinois		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	177,890	0	0	0	0	0	0	0	0	177,890		
2. First Quarter	178,676	0	0	0	0	0	0	0	0	178,676		
3. Second Quarter	175,782	0	0	0	0	0	0	0	0	175,782		
4. Third Quarter	176,433	0	0	0	0	0	0	0	0	176,433		
5. Current Year	176,487	0	0	0	0	0	0	0	0	176,487		
6. Current Year Member Months	2,130,213	0	0	0	0	0	0	0	0	2,130,213		
Total Member Ambulatory Encounters for Year:												
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 (b)	102,206,737	0	0	0	0	0	0	0	0	102,206,737		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	102,247,016	0	0	0	0	0	0	0	0	102,247,016		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	84,507,282	0	0	0	0	0	0	0	0	84,507,282		
18. Amount Incurred for Provision of Health Care Services	84,999,998	0	0	0	0	0	0	0	0	84,999,998		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$102,206,737

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Indiana		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	114,941	0	0	0	0	0	0	0	0	114,941		
2. First Quarter	110,117	0	0	0	0	0	0	0	0	110,117		
3. Second Quarter	108,638	0	0	0	0	0	0	0	0	108,638		
4. Third Quarter	108,530	0	0	0	0	0	0	0	0	108,530		
5. Current Year	108,576	0	0	0	0	0	0	0	0	108,576		
6. Current Year Member Months	1,311,803	0	0	0	0	0	0	0	0	1,311,803		
Total Member Ambulatory Encounters for Year:												
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 (b)	75,098,386	0	0	0	0	0	0	0	0	75,098,386		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	68,581,268	0	0	0	0	0	0	0	0	68,581,268		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	62,599,467	0	0	0	0	0	0	0	0	62,599,467		
18. Amount Incurred for Provision of Health Care Services	63,377,477	0	0	0	0	0	0	0	0	63,377,477		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$75,098,386

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Iowa		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
		Individual	Group									
Total Members at end of:												
1. Prior Year	59,673	0	0	0	0	0	0	0	0	59,673		
2. First Quarter	56,341	0	0	0	0	0	0	0	0	56,341		
3. Second Quarter	55,999	0	0	0	0	0	0	0	0	55,999		
4. Third Quarter	55,712	0	0	0	0	0	0	0	0	55,712		
5. Current Year	55,300	0	0	0	0	0	0	0	0	55,300		
6. Current Year Member Months	672,536	0	0	0	0	0	0	0	0	672,536		
Total Member Ambulatory Encounters for Year:												
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 (b)	40,186,339	0	0	0	0	0	0	0	0	40,186,339		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	39,503,819	0	0	0	0	0	0	0	0	39,503,819		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	32,534,921	0	0	0	0	0	0	0	0	32,534,921		
18. Amount Incurred for Provision of Health Care Services	33,045,074	0	0	0	0	0	0	0	0	33,045,074		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$40,186,339

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Kansas		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	70,557	0	0	0	0	0	0	0	0	70,557		
2. First Quarter	62,977	0	0	0	0	0	0	0	0	62,977		
3. Second Quarter	62,272	0	0	0	0	0	0	0	0	62,272		
4. Third Quarter	62,298	0	0	0	0	0	0	0	0	62,298		
5. Current Year	61,991	0	0	0	0	0	0	0	0	61,991		
6. Current Year Member Months	750,730	0	0	0	0	0	0	0	0	750,730		
Total Member Ambulatory Encounters for Year:												
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 (b)	40,950,548	0	0	0	0	0	0	0	0	40,950,548		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	39,701,246	0	0	0	0	0	0	0	0	39,701,246		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	34,161,754	0	0	0	0	0	0	0	0	34,161,754		
18. Amount Incurred for Provision of Health Care Services	34,542,285	0	0	0	0	0	0	0	0	34,542,285		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$40,950,548

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Kentucky		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	92,571	0	0	0	0	0	0	0	0	92,571		
2. First Quarter	88,458	0	0	0	0	0	0	0	0	88,458		
3. Second Quarter	85,902	0	0	0	0	0	0	0	0	85,902		
4. Third Quarter	86,013	0	0	0	0	0	0	0	0	86,013		
5. Current Year	85,922	0	0	0	0	0	0	0	0	85,922		
6. Current Year Member Months	1,044,521	0	0	0	0	0	0	0	0	1,044,521		
Total Member Ambulatory Encounters for Year:												
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 (b)	62,637,695	0	0	0	0	0	0	0	0	62,637,695		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	57,026,193	0	0	0	0	0	0	0	0	57,026,193		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	47,591,802	0	0	0	0	0	0	0	0	47,591,802		
18. Amount Incurred for Provision of Health Care Services	48,707,879	0	0	0	0	0	0	0	0	48,707,879		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$62,637,695

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Louisiana		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	96,495	0	0	0	0	0	0	0	0	96,495		
2. First Quarter	93,698	0	0	0	0	0	0	0	0	93,698		
3. Second Quarter	91,515	0	0	0	0	0	0	0	0	91,515		
4. Third Quarter	91,044	0	0	0	0	0	0	0	0	91,044		
5. Current Year	90,581	0	0	0	0	0	0	0	0	90,581		
6. Current Year Member Months	1,107,966	0	0	0	0	0	0	0	0	1,107,966		
Total Member Ambulatory Encounters for Year:												
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 (b)	73,013,822	0	0	0	0	0	0	0	0	73,013,822		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	66,124,435	0	0	0	0	0	0	0	0	66,124,435		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	48,495,730	0	0	0	0	0	0	0	0	48,495,730		
18. Amount Incurred for Provision of Health Care Services	49,980,080	0	0	0	0	0	0	0	0	49,980,080		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$73,013,822

30.LA



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Maine		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	11,864	0	0	0	0	0	0	0	0	11,864		
2. First Quarter	11,541	0	0	0	0	0	0	0	0	11,541		
3. Second Quarter	11,457	0	0	0	0	0	0	0	0	11,457		
4. Third Quarter	11,660	0	0	0	0	0	0	0	0	11,660		
5. Current Year	11,868	0	0	0	0	0	0	0	0	11,868		
6. Current Year Member Months	139,628	0	0	0	0	0	0	0	0	139,628		
Total Member Ambulatory Encounters for Year:												
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 (b)	7,722,473	0	0	0	0	0	0	0	0	7,722,473		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	7,755,137	0	0	0	0	0	0	0	0	7,755,137		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	6,141,894	0	0	0	0	0	0	0	0	6,141,894		
18. Amount Incurred for Provision of Health Care Services	6,152,064	0	0	0	0	0	0	0	0	6,152,064		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$7,722,473

30 ME



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Maryland		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	77,601	0	0	0	0	0	0	0	0	77,601		
2. First Quarter	79,373	0	0	0	0	0	0	0	0	79,373		
3. Second Quarter	77,940	0	0	0	0	0	0	0	0	77,940		
4. Third Quarter	78,217	0	0	0	0	0	0	0	0	78,217		
5. Current Year	77,526	0	0	0	0	0	0	0	0	77,526		
6. Current Year Member Months	943,137	0	0	0	0	0	0	0	0	943,137		
Total Member Ambulatory Encounters for Year:												
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 (b)	51,262,019	0	0	0	0	0	0	0	0	51,262,019		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	54,037,816	0	0	0	0	0	0	0	0	54,037,816		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	41,835,465	0	0	0	0	0	0	0	0	41,835,465		
18. Amount Incurred for Provision of Health Care Services	41,888,514	0	0	0	0	0	0	0	0	41,888,514		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$51,262,019

30.MD



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF	Massachusetts		DURING THE YEAR					(LOCATION)	
			Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
			2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year	115,656	0	0	0	0	0	0	0	0	115,656	
2. First Quarter	115,035	0	0	0	0	0	0	0	0	115,035	
3. Second Quarter	112,826	0	0	0	0	0	0	0	0	112,826	
4. Third Quarter	112,757	0	0	0	0	0	0	0	0	112,757	
5. Current Year	111,607	0	0	0	0	0	0	0	0	111,607	
6. Current Year Member Months	1,360,489	0	0	0	0	0	0	0	0	1,360,489	
Total Member Ambulatory Encounters for Year:											
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 (b)	93,593,911	0	0	0	0	0	0	0	0	93,593,911	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	93,468,140	0	0	0	0	0	0	0	0	93,468,140	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services.....	65,296,916	0	0	0	0	0	0	0	0	65,296,916	
18. Amount Incurred for Provision of Health Care Services	66,211,425	0	0	0	0	0	0	0	0	66,211,425	

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$93,593,911

30.MA



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Michigan		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	101,091	0	0	0	0	0	0	0	0	101,091		
2. First Quarter	100,192	0	0	0	0	0	0	0	0	100,192		
3. Second Quarter	97,655	0	0	0	0	0	0	0	0	97,655		
4. Third Quarter	99,263	0	0	0	0	0	0	0	0	99,263		
5. Current Year	99,614	0	0	0	0	0	0	0	0	99,614		
6. Current Year Member Months	1,194,210	0	0	0	0	0	0	0	0	1,194,210		
Total Member Ambulatory Encounters for Year:												
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 (b)	67,479,744	0	0	0	0	0	0	0	0	67,479,744		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	72,954,187	0	0	0	0	0	0	0	0	72,954,187		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	58,957,193	0	0	0	0	0	0	0	0	58,957,193		
18. Amount Incurred for Provision of Health Care Services	59,141,524	0	0	0	0	0	0	0	0	59,141,524		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$67,479,744



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Minnesota		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	71,517	0	0	0	0	0	0	0	0	71,517		
2. First Quarter	71,698	0	0	0	0	0	0	0	0	71,698		
3. Second Quarter	71,610	0	0	0	0	0	0	0	0	71,610		
4. Third Quarter	71,640	0	0	0	0	0	0	0	0	71,640		
5. Current Year	71,107	0	0	0	0	0	0	0	0	71,107		
6. Current Year Member Months	858,531	0	0	0	0	0	0	0	0	858,531		
Total Member Ambulatory Encounters for Year:												
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 (b)	52,014,780	0	0	0	0	0	0	0	0	52,014,780		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	51,214,637	0	0	0	0	0	0	0	0	51,214,637		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	40,042,902	0	0	0	0	0	0	0	0	40,042,902		
18. Amount Incurred for Provision of Health Care Services	39,944,994	0	0	0	0	0	0	0	0	39,944,994		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$52,014,780

30 MN



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF	Mississippi		DURING THE YEAR					(LOCATION)	
			Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
			2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year	100,876	0	0	0	0	0	0	0	0	100,876	
2. First Quarter	99,395	0	0	0	0	0	0	0	0	99,395	
3. Second Quarter	98,020	0	0	0	0	0	0	0	0	98,020	
4. Third Quarter	98,026	0	0	0	0	0	0	0	0	98,026	
5. Current Year	98,073	0	0	0	0	0	0	0	0	98,073	
6. Current Year Member Months	1,183,562	0	0	0	0	0	0	0	0	1,183,562	
Total Member Ambulatory Encounters for Year:											
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 (b)	63,512,410	0	0	0	0	0	0	0	0	63,512,410	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	60,300,908	0	0	0	0	0	0	0	0	60,300,908	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	50,619,445	0	0	0	0	0	0	0	0	50,619,445	
18. Amount Incurred for Provision of Health Care Services	51,253,296	0	0	0	0	0	0	0	0	51,253,296	

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$63,512,410

30 MS



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Missouri		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	148,896	0	0	0	0	0	0	0	0	148,896		
2. First Quarter	141,946	0	0	0	0	0	0	0	0	141,946		
3. Second Quarter	138,897	0	0	0	0	0	0	0	0	138,897		
4. Third Quarter	138,983	0	0	0	0	0	0	0	0	138,983		
5. Current Year	138,608	0	0	0	0	0	0	0	0	138,608		
6. Current Year Member Months	1,683,800	0	0	0	0	0	0	0	0	1,683,800		
Total Member Ambulatory Encounters for Year:												
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 (b)	96,874,332	0	0	0	0	0	0	0	0	96,874,332		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	96,048,172	0	0	0	0	0	0	0	0	96,048,172		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	80,119,487	0	0	0	0	0	0	0	0	80,119,487		
18. Amount Incurred for Provision of Health Care Services	81,861,389	0	0	0	0	0	0	0	0	81,861,389		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$96,874,332

30.M



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Montana		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	21,427	0	0	0	0	0	0	0	0	21,427		
2. First Quarter	21,214	0	0	0	0	0	0	0	0	21,214		
3. Second Quarter	21,223	0	0	0	0	0	0	0	0	21,223		
4. Third Quarter	21,255	0	0	0	0	0	0	0	0	21,255		
5. Current Year	21,170	0	0	0	0	0	0	0	0	21,170		
6. Current Year Member Months	254,812	0	0	0	0	0	0	0	0	254,812		
Total Member Ambulatory Encounters for Year:												
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 (b)	13,693,022	0	0	0	0	0	0	0	0	13,693,022		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	13,472,318	0	0	0	0	0	0	0	0	13,472,318		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	10,697,659	0	0	0	0	0	0	0	0	10,697,659		
18. Amount Incurred for Provision of Health Care Services	10,766,612	0	0	0	0	0	0	0	0	10,766,612		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$13,693,022

30.MT



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF	Nebraska		DURING THE YEAR					(LOCATION)	
			Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
			2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year	37,693	0	0	0	0	0	0	0	0	37,693	
2. First Quarter	35,962	0	0	0	0	0	0	0	0	35,962	
3. Second Quarter	35,646	0	0	0	0	0	0	0	0	35,646	
4. Third Quarter	35,739	0	0	0	0	0	0	0	0	35,739	
5. Current Year	35,434	0	0	0	0	0	0	0	0	35,434	
6. Current Year Member Months	429,454	0	0	0	0	0	0	0	0	429,454	
Total Member Ambulatory Encounters for Year:											
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 (b)	24,122,499	0	0	0	0	0	0	0	0	24,122,499	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	23,723,158	0	0	0	0	0	0	0	0	23,723,158	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services.....	21,842,567	0	0	0	0	0	0	0	0	21,842,567	
18. Amount Incurred for Provision of Health Care Services	22,071,418	0	0	0	0	0	0	0	0	22,071,418	

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$24,122,499

30.NE



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Nevada		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	13,509	0	0	0	0	0	0	0	0	13,509		
2. First Quarter	12,904	0	0	0	0	0	0	0	0	12,904		
3. Second Quarter	12,685	0	0	0	0	0	0	0	0	12,685		
4. Third Quarter	12,745	0	0	0	0	0	0	0	0	12,745		
5. Current Year	12,753	0	0	0	0	0	0	0	0	12,753		
6. Current Year Member Months	153,678	0	0	0	0	0	0	0	0	153,678		
Total Member Ambulatory Encounters for Year:												
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 (b)	9,492,017	0	0	0	0	0	0	0	0	9,492,017		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	9,758,776	0	0	0	0	0	0	0	0	9,758,776		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	6,835,294	0	0	0	0	0	0	0	0	6,835,294		
18. Amount Incurred for Provision of Health Care Services	6,947,942	0	0	0	0	0	0	0	0	6,947,942		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$9,492,017

30 NV



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		New Hampshire		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	17,325	0	0	0	0	0	0	0	0	17,325		
2. First Quarter	17,052	0	0	0	0	0	0	0	0	17,052		
3. Second Quarter	16,664	0	0	0	0	0	0	0	0	16,664		
4. Third Quarter	16,980	0	0	0	0	0	0	0	0	16,980		
5. Current Year	17,035	0	0	0	0	0	0	0	0	17,035		
6. Current Year Member Months	204,184	0	0	0	0	0	0	0	0	204,184		
Total Member Ambulatory Encounters for Year:												
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 (b)	11,069,056	0	0	0	0	0	0	0	0	11,069,056		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	11,117,940	0	0	0	0	0	0	0	0	11,117,940		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	8,845,823	0	0	0	0	0	0	0	0	8,845,823		
18. Amount Incurred for Provision of Health Care Services	8,947,799	0	0	0	0	0	0	0	0	8,947,799		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$11,069,056

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		New Jersey		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	134,945	0	0	0	0	0	0	0	0	134,945		
2. First Quarter	130,986	0	0	0	0	0	0	0	0	130,986		
3. Second Quarter	129,743	0	0	0	0	0	0	0	0	129,743		
4. Third Quarter	129,624	0	0	0	0	0	0	0	0	129,624		
5. Current Year	129,096	0	0	0	0	0	0	0	0	129,096		
6. Current Year Member Months	1,564,696	0	0	0	0	0	0	0	0	1,564,696		
Total Member Ambulatory Encounters for Year:												
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 (b)	93,117,796	0	0	0	0	0	0	0	0	93,117,796		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	95,639,645	0	0	0	0	0	0	0	0	95,639,645		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	77,219,999	0	0	0	0	0	0	0	0	77,219,999		
18. Amount Incurred for Provision of Health Care Services	78,459,993	0	0	0	0	0	0	0	0	78,459,993		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$93,117,796

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF	New Mexico		DURING THE YEAR					(LOCATION)	
			Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
			2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year	38,520	0	0	0	0	0	0	0	0	38,520	
2. First Quarter	38,187	0	0	0	0	0	0	0	0	38,187	
3. Second Quarter	36,632	0	0	0	0	0	0	0	0	36,632	
4. Third Quarter	37,040	0	0	0	0	0	0	0	0	37,040	
5. Current Year	37,064	0	0	0	0	0	0	0	0	37,064	
6. Current Year Member Months	450,323	0	0	0	0	0	0	0	0	450,323	
Total Member Ambulatory Encounters for Year:											
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 (b)	20,901,006	0	0	0	0	0	0	0	0	20,901,006	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	19,934,742	0	0	0	0	0	0	0	0	19,934,742	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	13,867,862	0	0	0	0	0	0	0	0	13,867,862	
18. Amount Incurred for Provision of Health Care Services	14,073,459	0	0	0	0	0	0	0	0	14,073,459	

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$20,901,006

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		New York		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	248,333	0	0	0	0	0	0	0	0	248,333		
2. First Quarter	246,662	0	0	0	0	0	0	0	0	246,662		
3. Second Quarter	244,005	0	0	0	0	0	0	0	0	244,005		
4. Third Quarter	244,085	0	0	0	0	0	0	0	0	244,085		
5. Current Year	243,866	0	0	0	0	0	0	0	0	243,866		
6. Current Year Member Months	2,947,300	0	0	0	0	0	0	0	0	2,947,300		
Total Member Ambulatory Encounters for Year:												
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 (b)	206,588,075	0	0	0	0	0	0	0	0	206,588,075		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	199,121,485	0	0	0	0	0	0	0	0	199,121,485		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	151,118,343	0	0	0	0	0	0	0	0	151,118,343		
18. Amount Incurred for Provision of Health Care Services	153,734,844	0	0	0	0	0	0	0	0	153,734,844		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$206,588,075

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		North Carolina		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	179,800	0	0	0	0	0	0	0	0	179,800		
2. First Quarter	173,047	0	0	0	0	0	0	0	0	173,047		
3. Second Quarter	168,374	0	0	0	0	0	0	0	0	168,374		
4. Third Quarter	167,044	0	0	0	0	0	0	0	0	167,044		
5. Current Year	165,610	0	0	0	0	0	0	0	0	165,610		
6. Current Year Member Months	2,036,314	0	0	0	0	0	0	0	0	2,036,314		
Total Member Ambulatory Encounters for Year:												
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 (b)	113,075,327	0	0	0	0	0	0	0	0	113,075,327		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	112,646,633	0	0	0	0	0	0	0	0	112,646,633		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	92,316,476	0	0	0	0	0	0	0	0	92,316,476		
18. Amount Incurred for Provision of Health Care Services	94,653,955	0	0	0	0	0	0	0	0	94,653,955		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$113,075,327

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		North Dakota		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	21,474	0	0	0	0	0	0	0	0	21,474		
2. First Quarter	20,260	0	0	0	0	0	0	0	0	20,260		
3. Second Quarter	20,215	0	0	0	0	0	0	0	0	20,215		
4. Third Quarter	20,199	0	0	0	0	0	0	0	0	20,199		
5. Current Year	20,016	0	0	0	0	0	0	0	0	20,016		
6. Current Year Member Months	242,554	0	0	0	0	0	0	0	0	242,554		
Total Member Ambulatory Encounters for Year:												
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 (b)	13,210,850	0	0	0	0	0	0	0	0	13,210,850		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	12,993,315	0	0	0	0	0	0	0	0	12,993,315		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	11,356,361	0	0	0	0	0	0	0	0	11,356,361		
18. Amount Incurred for Provision of Health Care Services	11,466,218	0	0	0	0	0	0	0	0	11,466,218		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$13,210,850

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Ohio		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	195,618	0	0	0	0	0	0	0	0	195,618		
2. First Quarter	185,053	0	0	0	0	0	0	0	0	185,053		
3. Second Quarter	179,509	0	0	0	0	0	0	0	0	179,509		
4. Third Quarter	181,302	0	0	0	0	0	0	0	0	181,302		
5. Current Year	179,546	0	0	0	0	0	0	0	0	179,546		
6. Current Year Member Months	2,192,500	0	0	0	0	0	0	0	0	2,192,500		
Total Member Ambulatory Encounters for Year:												
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 (b)	129,032,547	0	0	0	0	0	0	0	0	129,032,547		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	120,177,004	0	0	0	0	0	0	0	0	120,177,004		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	97,103,802	0	0	0	0	0	0	0	0	97,103,802		
18. Amount Incurred for Provision of Health Care Services	98,614,953	0	0	0	0	0	0	0	0	98,614,953		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 129,032,547

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Oklahoma		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	85,205	0	0	0	0	0	0	0	0	85,205		
2. First Quarter	82,082	0	0	0	0	0	0	0	0	82,082		
3. Second Quarter	79,939	0	0	0	0	0	0	0	0	79,939		
4. Third Quarter	80,102	0	0	0	0	0	0	0	0	80,102		
5. Current Year	79,158	0	0	0	0	0	0	0	0	79,158		
6. Current Year Member Months	970,501	0	0	0	0	0	0	0	0	970,501		
Total Member Ambulatory Encounters for Year:												
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 (b)	60,704,511	0	0	0	0	0	0	0	0	60,704,511		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	55,770,836	0	0	0	0	0	0	0	0	55,770,836		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	45,175,126	0	0	0	0	0	0	0	0	45,175,126		
18. Amount Incurred for Provision of Health Care Services	46,115,901	0	0	0	0	0	0	0	0	46,115,901		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$60,704,511

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Oregon		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	39,374	0	0	0	0	0	0	0	0	39,374		
2. First Quarter	39,458	0	0	0	0	0	0	0	0	39,458		
3. Second Quarter	39,207	0	0	0	0	0	0	0	0	39,207		
4. Third Quarter	39,685	0	0	0	0	0	0	0	0	39,685		
5. Current Year	39,994	0	0	0	0	0	0	0	0	39,994		
6. Current Year Member Months	474,103	0	0	0	0	0	0	0	0	474,103		
Total Member Ambulatory Encounters for Year:												
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 (b)	26,604,655	0	0	0	0	0	0	0	0	26,604,655		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	26,592,973	0	0	0	0	0	0	0	0	26,592,973		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	18,916,761	0	0	0	0	0	0	0	0	18,916,761		
18. Amount Incurred for Provision of Health Care Services	18,977,366	0	0	0	0	0	0	0	0	18,977,366		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$26,604,655

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Pennsylvania		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	225,681	0	0	0	0	0	0	0	0	225,681		
2. First Quarter	198,766	0	0	0	0	0	0	0	0	198,766		
3. Second Quarter	196,006	0	0	0	0	0	0	0	0	196,006		
4. Third Quarter	195,180	0	0	0	0	0	0	0	0	195,180		
5. Current Year	194,501	0	0	0	0	0	0	0	0	194,501		
6. Current Year Member Months	2,360,731	0	0	0	0	0	0	0	0	2,360,731		
Total Member Ambulatory Encounters for Year:												
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 (b)	134,272,753	0	0	0	0	0	0	0	0	134,272,753		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	130,234,397	0	0	0	0	0	0	0	0	130,234,397		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	104,934,839	0	0	0	0	0	0	0	0	104,934,839		
18. Amount Incurred for Provision of Health Care Services	109,609,062	0	0	0	0	0	0	0	0	109,609,062		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$134,272,753



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF	Rhode Island		DURING THE YEAR					(LOCATION)	
			Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
			2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year	12,038	0	0	0	0	0	0	0	0	12,038	
2. First Quarter	12,007	0	0	0	0	0	0	0	0	12,007	
3. Second Quarter	11,891	0	0	0	0	0	0	0	0	11,891	
4. Third Quarter	11,889	0	0	0	0	0	0	0	0	11,889	
5. Current Year	11,904	0	0	0	0	0	0	0	0	11,904	
6. Current Year Member Months	143,409	0	0	0	0	0	0	0	0	143,409	
Total Member Ambulatory Encounters for Year:											
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 (b)	8,646,248	0	0	0	0	0	0	0	0	8,646,248	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	8,636,892	0	0	0	0	0	0	0	0	8,636,892	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services.....	6,374,986	0	0	0	0	0	0	0	0	6,374,986	
18. Amount Incurred for Provision of Health Care Services	6,484,590	0	0	0	0	0	0	0	0	6,484,590	

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$8,646,248

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		South Carolina		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	97,384	0	0	0	0	0	0	0	0	97,384		
2. First Quarter	100,069	0	0	0	0	0	0	0	0	100,069		
3. Second Quarter	98,341	0	0	0	0	0	0	0	0	98,341		
4. Third Quarter	98,556	0	0	0	0	0	0	0	0	98,556		
5. Current Year	98,719	0	0	0	0	0	0	0	0	98,719		
6. Current Year Member Months	1,190,385	0	0	0	0	0	0	0	0	1,190,385		
Total Member Ambulatory Encounters for Year:												
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 (b)	57,793,296	0	0	0	0	0	0	0	0	57,793,296		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	56,441,492	0	0	0	0	0	0	0	0	56,441,492		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	49,367,261	0	0	0	0	0	0	0	0	49,367,261		
18. Amount Incurred for Provision of Health Care Services	49,967,124	0	0	0	0	0	0	0	0	49,967,124		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$57,793,296

30.SC



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		South Dakota		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	19,069	0	0	0	0	0	0	0	0	19,069		
2. First Quarter	18,782	0	0	0	0	0	0	0	0	18,782		
3. Second Quarter	18,765	0	0	0	0	0	0	0	0	18,765		
4. Third Quarter	18,796	0	0	0	0	0	0	0	0	18,796		
5. Current Year	18,651	0	0	0	0	0	0	0	0	18,651		
6. Current Year Member Months	225,193	0	0	0	0	0	0	0	0	225,193		
Total Member Ambulatory Encounters for Year:												
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 (b)	12,848,451	0	0	0	0	0	0	0	0	12,848,451		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	12,643,349	0	0	0	0	0	0	0	0	12,643,349		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	10,757,279	0	0	0	0	0	0	0	0	10,757,279		
18. Amount Incurred for Provision of Health Care Services	10,806,312	0	0	0	0	0	0	0	0	10,806,312		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$12,848,451

30.SD



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Tennessee		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	107,738	0	0	0	0	0	0	0	0	107,738		
2. First Quarter	106,343	0	0	0	0	0	0	0	0	106,343		
3. Second Quarter	106,058	0	0	0	0	0	0	0	0	106,058		
4. Third Quarter	106,368	0	0	0	0	0	0	0	0	106,368		
5. Current Year	106,060	0	0	0	0	0	0	0	0	106,060		
6. Current Year Member Months	1,275,368	0	0	0	0	0	0	0	0	1,275,368		
Total Member Ambulatory Encounters for Year:												
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 (b)	65,996,468	0	0	0	0	0	0	0	0	65,996,468		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	65,403,129	0	0	0	0	0	0	0	0	65,403,129		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	53,692,343	0	0	0	0	0	0	0	0	53,692,343		
18. Amount Incurred for Provision of Health Care Services	54,093,796	0	0	0	0	0	0	0	0	54,093,796		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$65,996,468

30.TN



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Texas		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	279,350	0	0	0	0	0	0	0	0	279,350		
2. First Quarter	278,142	0	0	0	0	0	0	0	0	278,142		
3. Second Quarter	272,634	0	0	0	0	0	0	0	0	272,634		
4. Third Quarter	273,279	0	0	0	0	0	0	0	0	273,279		
5. Current Year	272,727	0	0	0	0	0	0	0	0	272,727		
6. Current Year Member Months	3,299,373	0	0	0	0	0	0	0	0	3,299,373		
Total Member Ambulatory Encounters for Year:												
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 (b)	154,735,903	0	0	0	0	0	0	0	0	154,735,903		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	158,985,036	0	0	0	0	0	0	0	0	158,985,036		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	136,615,731	0	0	0	0	0	0	0	0	136,615,731		
18. Amount Incurred for Provision of Health Care Services	138,471,455	0	0	0	0	0	0	0	0	138,471,455		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$154,735,903

30.TX



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Utah		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	17,138	0	0	0	0	0	0	0	0	17,138		
2. First Quarter	17,001	0	0	0	0	0	0	0	0	17,001		
3. Second Quarter	16,857	0	0	0	0	0	0	0	0	16,857		
4. Third Quarter	17,126	0	0	0	0	0	0	0	0	17,126		
5. Current Year	17,285	0	0	0	0	0	0	0	0	17,285		
6. Current Year Member Months	204,379	0	0	0	0	0	0	0	0	204,379		
Total Member Ambulatory Encounters for Year:												
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 (b)	12,035,954	0	0	0	0	0	0	0	0	12,035,954		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	12,002,817	0	0	0	0	0	0	0	0	12,002,817		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	9,596,281	0	0	0	0	0	0	0	0	9,596,281		
18. Amount Incurred for Provision of Health Care Services	9,556,923	0	0	0	0	0	0	0	0	9,556,923		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$12,035,954

30.UT



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Vermont		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	17,216	0	0	0	0	0	0	0	0	17,216		
2. First Quarter	17,095	0	0	0	0	0	0	0	0	17,095		
3. Second Quarter	16,808	0	0	0	0	0	0	0	0	16,808		
4. Third Quarter	16,666	0	0	0	0	0	0	0	0	16,666		
5. Current Year	16,562	0	0	0	0	0	0	0	0	16,562		
6. Current Year Member Months	202,196	0	0	0	0	0	0	0	0	202,196		
Total Member Ambulatory Encounters for Year:												
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 (b)	11,978,707	0	0	0	0	0	0	0	0	11,978,707		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	11,961,644	0	0	0	0	0	0	0	0	11,961,644		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	9,381,084	0	0	0	0	0	0	0	0	9,381,084		
18. Amount Incurred for Provision of Health Care Services	9,519,853	0	0	0	0	0	0	0	0	9,519,853		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$11,978,707



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Virginia		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	113,408	0	0	0	0	0	0	0	0	113,408		
2. First Quarter	112,725	0	0	0	0	0	0	0	0	112,725		
3. Second Quarter	110,755	0	0	0	0	0	0	0	0	110,755		
4. Third Quarter	111,235	0	0	0	0	0	0	0	0	111,235		
5. Current Year	111,374	0	0	0	0	0	0	0	0	111,374		
6. Current Year Member Months	1,343,485	0	0	0	0	0	0	0	0	1,343,485		
Total Member Ambulatory Encounters for Year:												
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 (b)	68,808,210	0	0	0	0	0	0	0	0	68,808,210		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	68,830,752	0	0	0	0	0	0	0	0	68,830,752		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	56,595,313	0	0	0	0	0	0	0	0	56,595,313		
18. Amount Incurred for Provision of Health Care Services	57,003,613	0	0	0	0	0	0	0	0	57,003,613		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$68,808,210

30.VA



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Washington		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	78,917	0	0	0	0	0	0	0	0	78,917		
2. First Quarter	78,573	0	0	0	0	0	0	0	0	78,573		
3. Second Quarter	77,441	0	0	0	0	0	0	0	0	77,441		
4. Third Quarter	77,338	0	0	0	0	0	0	0	0	77,338		
5. Current Year	77,346	0	0	0	0	0	0	0	0	77,346		
6. Current Year Member Months	933,488	0	0	0	0	0	0	0	0	933,488		
Total Member Ambulatory Encounters for Year:												
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 (b)	51,700,861	0	0	0	0	0	0	0	0	51,700,861		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	51,679,934	0	0	0	0	0	0	0	0	51,679,934		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	38,184,860	0	0	0	0	0	0	0	0	38,184,860		
18. Amount Incurred for Provision of Health Care Services	38,578,186	0	0	0	0	0	0	0	0	38,578,186		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$51,700,861

30.WA



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		West Virginia		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	42,297	0	0	0	0	0	0	0	0	42,297		
2. First Quarter	40,486	0	0	0	0	0	0	0	0	40,486		
3. Second Quarter	39,345	0	0	0	0	0	0	0	0	39,345		
4. Third Quarter	38,508	0	0	0	0	0	0	0	0	38,508		
5. Current Year	38,138	0	0	0	0	0	0	0	0	38,138		
6. Current Year Member Months	472,181	0	0	0	0	0	0	0	0	472,181		
Total Member Ambulatory Encounters for Year:												
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 (b)	30,046,528	0	0	0	0	0	0	0	0	30,046,528		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	29,168,204	0	0	0	0	0	0	0	0	29,168,204		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	22,128,200	0	0	0	0	0	0	0	0	22,128,200		
18. Amount Incurred for Provision of Health Care Services	22,637,978	0	0	0	0	0	0	0	0	22,637,978		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$30,046,528

30.1W



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF	Wisconsin		DURING THE YEAR					(LOCATION)	
			Comprehensive (Hospital & Medical)		4	5	6	7	NAIC Company Code		12575
			2	3					8	9	
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year	72,456	0	0	0	0	0	0	0	0	72,456	
2. First Quarter	71,897	0	0	0	0	0	0	0	0	71,897	
3. Second Quarter	71,105	0	0	0	0	0	0	0	0	71,105	
4. Third Quarter	71,021	0	0	0	0	0	0	0	0	71,021	
5. Current Year	70,919	0	0	0	0	0	0	0	0	70,919	
6. Current Year Member Months	856,796	0	0	0	0	0	0	0	0	856,796	
Total Member Ambulatory Encounters for Year:											
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 (b)	54,728,441	0	0	0	0	0	0	0	0	54,728,441	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	54,804,743	0	0	0	0	0	0	0	0	54,804,743	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services.....	42,616,127	0	0	0	0	0	0	0	0	42,616,127	
18. Amount Incurred for Provision of Health Care Services	43,158,732	0	0	0	0	0	0	0	0	43,158,732	

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$54,728,441

30.W1



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Wyoming		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	11,627	0	0	0	0	0	0	0	0	11,627		
2. First Quarter	11,800	0	0	0	0	0	0	0	0	11,800		
3. Second Quarter	11,881	0	0	0	0	0	0	0	0	11,881		
4. Third Quarter	11,964	0	0	0	0	0	0	0	0	11,964		
5. Current Year	11,878	0	0	0	0	0	0	0	0	11,878		
6. Current Year Member Months	142,504	0	0	0	0	0	0	0	0	142,504		
Total Member Ambulatory Encounters for Year:												
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 (b)	7,265,648	0	0	0	0	0	0	0	0	7,265,648		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	7,151,956	0	0	0	0	0	0	0	0	7,151,956		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	5,964,921	0	0	0	0	0	0	0	0	5,964,921		
18. Amount Incurred for Provision of Health Care Services	5,964,353	0	0	0	0	0	0	0	0	5,964,353		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$7,265,648

30.WV



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF	American Samoa		DURING THE YEAR			(LOCATION)		
			Comprehensive (Hospital & Medical)		2019			NAIC Company Code 12575		
			1 Total	2 Individual	3 Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare
Total Members at end of:										
1. Prior Year	0									
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	0									
Total Member Ambulatory Encounters for Year:										
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 (b)	0									
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	0									
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services.....	0									
18. Amount Incurred for Provision of Health Care Services	0									

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

30.SA



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Guam		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	21	0	0	0	0	0	0	0	0	21		
2. First Quarter	19	0	0	0	0	0	0	0	0	19		
3. Second Quarter	21	0	0	0	0	0	0	0	0	21		
4. Third Quarter	21	0	0	0	0	0	0	0	0	21		
5. Current Year	22	0	0	0	0	0	0	0	0	22		
6. Current Year Member Months	247	0	0	0	0	0	0	0	0	247		
Total Member Ambulatory Encounters for Year:												
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 (b)	16,748	0	0	0	0	0	0	0	0	16,748		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	16,748	0	0	0	0	0	0	0	0	16,748		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	2,275	0	0	0	0	0	0	0	0	2,275		
18. Amount Incurred for Provision of Health Care Services	2,232	0	0	0	0	0	0	0	0	2,232		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$16,748

30.GU



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Puerto Rico		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	477	0	0	0	0	0	0	0	0	477		
2. First Quarter	459	0	0	0	0	0	0	0	0	459		
3. Second Quarter	324	0	0	0	0	0	0	0	0	324		
4. Third Quarter	375	0	0	0	0	0	0	0	0	375		
5. Current Year	417	0	0	0	0	0	0	0	0	417		
6. Current Year Member Months	4,881	0	0	0	0	0	0	0	0	4,881		
Total Member Ambulatory Encounters for Year:												
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 (b)	296,461	0	0	0	0	0	0	0	0	296,461		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	296,461	0	0	0	0	0	0	0	0	296,461		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	34,963	0	0	0	0	0	0	0	0	34,963		
18. Amount Incurred for Provision of Health Care Services	38,949	0	0	0	0	0	0	0	0	38,949		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$296,461

30.PR



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF	U.S. Virgin Islands		DURING THE YEAR					(LOCATION)	
			Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
			2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year	54	0	0	0	0	0	0	0	0	54	
2. First Quarter	54	0	0	0	0	0	0	0	0	54	
3. Second Quarter	52	0	0	0	0	0	0	0	0	52	
4. Third Quarter	57	0	0	0	0	0	0	0	0	57	
5. Current Year	61	0	0	0	0	0	0	0	0	61	
6. Current Year Member Months	662	0	0	0	0	0	0	0	0	662	
Total Member Ambulatory Encounters for Year:											
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 (b)	33,093	0	0	0	0	0	0	0	0	33,093	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	33,093	0	0	0	0	0	0	0	0	33,093	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services.....	16,014	0	0	0	0	0	0	0	0	16,014	
18. Amount Incurred for Provision of Health Care Services	16,324	0	0	0	0	0	0	0	0	16,324	

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$33,093



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Northern Mariana Islands		2019							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	1	0	0	0	0	0	0	0	0	1		
2. First Quarter	5	0	0	0	0	0	0	0	0	5		
3. Second Quarter	4	0	0	0	0	0	0	0	0	4		
4. Third Quarter	4	0	0	0	0	0	0	0	0	4		
5. Current Year	3	0	0	0	0	0	0	0	0	3		
6. Current Year Member Months	42	0	0	0	0	0	0	0	0	42		
Total Member Ambulatory Encounters for Year:												
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 (b)	2,272	0	0	0	0	0	0	0	0	2,272		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	2,272	0	0	0	0	0	0	0	0	2,272		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	2	0	0	0	0	0	0	0	0	2		
18. Amount Incurred for Provision of Health Care Services	2	0	0	0	0	0	0	0	0	2		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$2,272

30.MP



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

NAIC Group Code	0001	BUSINESS IN THE STATE OF	(LOCATION)										
			Grand Total		DURING THE YEAR					2019		NAIC Company Code	12575
			1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other				
Total Members at end of:													
1. Prior Year	4,868,345	0	0	0	0	0	0	0	0	4,868,345			
2. First Quarter	4,767,029	0	0	0	0	0	0	0	0	4,767,029			
3. Second Quarter	4,682,029	0	0	0	0	0	0	0	0	4,682,029			
4. Third Quarter	4,690,454	0	0	0	0	0	0	0	0	4,690,454			
5. Current Year	4,683,817	0	0	0	0	0	0	0	0	4,683,817			
6. Current Year Member Months	56,681,882	0	0	0	0	0	0	0	0	56,681,882			
Total Member Ambulatory Encounters for Year:													
7. Physician	0	0	0	0	0	0	0	0	0	0			
8. Non-Physician	0	0	0	0	0	0	0	0	0	0			
9. Total	0	0	0	0	0	0	0	0	0	0			
10. Hospital Patient Days Incurred	0	0	0	0	0	0	0	0	0	0			
11. Number of Inpatient Admissions	0	0	0	0	0	0	0	0	0	0			
12. Health Premiums Written (b)	3,243,829,899	0	0	0	0	0	0	0	0	3,243,829,899			
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0			
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0			
15. Health Premiums Earned	3,193,668,294	0	0	0	0	0	0	0	0	3,193,668,294			
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0			
17. Amount Paid for Provision of Health Care Services	2,542,975,874	0	0	0	0	0	0	0	0	2,542,975,874			
18. Amount Incurred for Provision of Health Care Services	2,580,721,273	0	0	0	0	0	0	0	0	2,580,721,273			

(a) For health business: number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$3,243,829,899

30.GT

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

SCHEDULE S - PART 1 - SECTION 2

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Type of Business Assumed	Premiums	Unearned Premiums	Reserve Liability Other Than for Unearned Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
0399999. Total - U.S. Affiliates							0	0	0	0	0	0
0699999. Total - Non-U.S. Affiliates							0	0	0	0	0	0
0799999. Total - Affiliates							0	0	0	0	0	0
74101	13-3156923	07/01/2016	First United American Life Insurance Company	NY	QA/I	MD	559					
74101	13-3156923	07/01/2016	First United American Life Insurance Company	NY	QA/G	MD	0					
92916	73-1128555	07/01/2016	United American Insurance Company	NE	QA/I	MD	(15,883)					
92916	73-1128555	07/01/2016	United American Insurance Company	NE	QA/G	MD	0					
0899999. U.S. Non-Affiliates							(15,324)	0	0	0	0	0
1099999. Total - Non-Affiliates							(15,324)	0	0	0	0	0
1199999. Total U.S. (Sum of 0399999 and 0899999)							(15,324)	0	0	0	0	0
1299999. Total Non-U.S. (Sum of 0699999 and 0999999)							0	0	0	0	0	0
9999999 - Totals							(15,324)	0	0	0	0	0

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
NONE						
9999999 Totals - Life, Annuity and Accident and Health						

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsur- ance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11 Current Year	12 Prior Year		
63444	06-1566092	01/01/2018	Accendo Insurance Company	UT	QA/I	MD	162,491,237		453,929				
63444	06-1566092	01/01/2018	Accendo Insurance Company	UT	QA/G	MD	381,078						
0299999. General Account - Authorized U.S. Affiliates - Other							162,872,315	0	453,929	0	0	0	0
0399999. Total General Account - Authorized U.S. Affiliates							162,872,315	0	453,929	0	0	0	0
0699999. Total General Account - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0
0799999. Total General Account - Authorized Affiliates							162,872,315	0	453,929	0	0	0	0
74101	13-3156923	07/01/2016	First United American Life Insurance Company	NY	QA/I	MD	559		0				
74101	13-3156923	07/01/2016	First United American Life Insurance Company	NY	QA/G	MD	0		0				
92916	73-1128555	07/01/2016	United American Insurance Company	NE	QA/I	MD	(15,883)		0				
92916	73-1128555	07/01/2016	United American Insurance Company	NE	QA/G	MD	0		0				
0899999. General Account - Authorized U.S. Non-Affiliates							(15,324)	0	0	0	0	0	0
1099999. Total General Account - Authorized Non-Affiliates							(15,324)	0	0	0	0	0	0
1199999. Total General Account Authorized							162,856,991	0	453,929	0	0	0	0
1499999. Total General Account - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0
00000	AA-3190173	01/01/2011	CVS Caremark Indemnity, Ltd.	BMJ	QA/I	MD	487,297,545		1,361,789				
00000	AA-3190173	01/01/2011	CVS Caremark Indemnity, Ltd.	BMJ	QA/G	MD	1,184,678						
1599999. General Account - Unauthorized Non-U.S. Affiliates - Captive							488,482,223	0	1,361,789	0	0	0	0
1799999. Total General Account - Unauthorized Non-U.S. Affiliates							488,482,223	0	1,361,789	0	0	0	0
1899999. Total General Account - Unauthorized Affiliates							488,482,223	0	1,361,789	0	0	0	0
2199999. Total General Account - Unauthorized Non-Affiliates							0	0	0	0	0	0	0
2299999. Total General Account Unauthorized							488,482,223	0	1,361,789	0	0	0	0
2599999. Total General Account - Certified U.S. Affiliates							0	0	0	0	0	0	0
2899999. Total General Account - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0
2999999. Total General Account - Certified Affiliates							0	0	0	0	0	0	0
3299999. Total General Account - Certified Non-Affiliates							0	0	0	0	0	0	0
3399999. Total General Account Certified							0	0	0	0	0	0	0
3499999. Total General Account Authorized, Unauthorized and Certified							651,339,214	0	1,815,718	0	0	0	0
3799999. Total Separate Accounts - Authorized U.S. Affiliates							0	0	0	0	0	0	0
4099999. Total Separate Accounts - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0
4199999. Total Separate Accounts - Authorized Affiliates							0	0	0	0	0	0	0
4499999. Total Separate Accounts - Authorized Non-Affiliates							0	0	0	0	0	0	0
4599999. Total Separate Accounts Authorized							0	0	0	0	0	0	0
4899999. Total Separate Accounts - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0
5199999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0
5299999. Total Separate Accounts - Unauthorized Affiliates							0	0	0	0	0	0	0
5599999. Total Separate Accounts - Unauthorized Non-Affiliates							0	0	0	0	0	0	0
5699999. Total Separate Accounts Unauthorized							0	0	0	0	0	0	0
5999999. Total Separate Accounts - Certified U.S. Affiliates							0	0	0	0	0	0	0
6299999. Total Separate Accounts - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0
6399999. Total Separate Accounts - Certified Affiliates							0	0	0	0	0	0	0
6699999. Total Separate Accounts - Certified Non-Affiliates							0	0	0	0	0	0	0
6799999. Total Separate Accounts Certified							0	0	0	0	0	0	0
6899999. Total Separate Accounts Authorized, Unauthorized and Certified							0	0	0	0	0	0	0
6999999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)							162,856,991	0	453,929	0	0	0	0
7099999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)							488,482,223	0	1,361,789	0	0	0	0
9999999 - Totals							651,339,214	0	1,815,718	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

SCHEDULE S - PART 4

Reinsurance Ceded to Unauthorized Companies

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total (Cols.5+6+7)	9 Letters of Credit	10 Issuing or Confirming Bank Reference Number (a)	11 Trust Agreements	12 Funds Deposited by and Withheld from Reinsurers	13 Other	14 Miscellaneous Balances (Credit)	15 Sum of Cols. 9+11+12+13 +14 but not in Excess of Col. 8
0399999			Total General Account - Life and Annuity U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
0699999			Total General Account - Life and Annuity Non-U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
0799999			Total General Account - Life and Annuity Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
1099999			Total General Account - Life and Annuity Non-Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
1199999			Total General Account Life and Annuity	0	0	0	0	0	XXX	0	0	0	0	0
1499999			Total General Account - Accident and Health U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
00000	AA-3190173	01/01/2011	CVS Caremark Indemnity, Ltd.	1,361,789	0	(71,400,647)	(70,038,858)	0	XXX	0	0	0	0	(70,038,858)
1599999			General Account - Accident and Health Non-U.S. Affiliates - Captive	1,361,789	0	(71,400,647)	(70,038,858)	0	XXX	0	0	0	0	(70,038,858)
1799999			Total General Account - Accident and Health Non-U.S. Affiliates	1,361,789	0	(71,400,647)	(70,038,858)	0	XXX	0	0	0	0	(70,038,858)
1899999			Total General Account - Accident and Health Affiliates	1,361,789	0	(71,400,647)	(70,038,858)	0	XXX	0	0	0	0	(70,038,858)
2199999			Total General Account - Accident and Health Non-Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
2299999			Total General Account Accident and Health	1,361,789	0	(71,400,647)	(70,038,858)	0	XXX	0	0	0	0	(70,038,858)
2399999			Total General Account	1,361,789	0	(71,400,647)	(70,038,858)	0	XXX	0	0	0	0	(70,038,858)
2699999			Total Separate Accounts - U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
2999999			Total Separate Accounts - Non-U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
3099999			Total Separate Accounts - Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
3399999			Total Separate Accounts - Non-Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
3499999			Total Separate Accounts	0	0	0	0	0	XXX	0	0	0	0	0
3599999			Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2699999 and 3199999)	0	0	0	0	0	XXX	0	0	0	0	0
3699999			Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2999999 and 3299999)	1,361,789	0	(71,400,647)	(70,038,858)	0	XXX	0	0	0	0	(70,038,858)
9999999			Totals	1,361,789	0	(71,400,647)	(70,038,858)	0	XXX	0	0	0	0	(70,038,858)

(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
NONE				

Schedule S - Part 5

NONE

Schedule S - Part 5 - Bank Footnote

NONE

SCHEDULE S - PART 6

Five Year Exhibit of Reinsurance Ceded Business (\$000 Omitted)

	1 2019	2 2018	3 2017	4 2016	5 2015
A. OPERATIONS ITEMS					
1. Premiums	651,339	669,068	657,768	739,335	584,953
2. Title XVIII - Medicare	0	0	0	0	0
3. Title XIX - Medicaid	0	0	0	0	0
4. Commissions and reinsurance expense allowance	85,660	104,941	85,984	119,484	71,218
5. Total hospital and medical expenses	509,493	551,656	564,907	507,553	425,424
B. BALANCE SHEET ITEMS					
6. Premiums receivable	6,909	6,291	6,776	4,075	3,223
7. Claims payable	0	3,515	3,189	10,904	3,635
8. Reinsurance recoverable on paid losses	0	0	0	3,631	1,702
9. Experience rating refunds due or unpaid	1,816	8,731	8,731	58,311	40,471
10. Commissions and reinsurance expense allowances due					
11. Unauthorized reinsurance offset					49,258
12. Offset for reinsurance with Certified Reinsurers					
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
13. Funds deposited by and withheld from (F)	0	0	0	0	49,258
14. Letters of credit (L)	0	0	0	0	0
15. Trust agreements (T)	0	0	0	0	0
16. Other (O)	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17. Multiple Beneficiary Trust				0	
18. Funds deposited by and withheld from (F)				0	
19. Letters of credit (L)				0	
20. Trust agreements (T)				0	
21. Other (O)				0	

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	385,639,907		385,639,907
2. Accident and health premiums due and unpaid (Line 15)	27,634,058	6,908,514	34,542,572
3. Amounts recoverable from reinsurers (Line 16.1)	0		0
4. Net credit for ceded reinsurance	XXX	(93,385,144)	(93,385,144)
5. All other admitted assets (Balance)	2,462,030,644	95,354,442	2,557,385,086
6. Total assets (Line 28)	2,875,304,609	8,877,812	2,884,182,421
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1)	0		0
8. Accrued medical incentive pool and bonus payments (Line 2)	0		0
9. Premiums received in advance (Line 8)	30,522,142	7,062,094	37,584,236
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19 first inset amount plus second inset amount)	0		0
11. Reinsurance in unauthorized companies (Line 20 minus inset amount)	0		0
12. Reinsurance with Certified Reinsurers (Line 20 inset amount)	0		0
13. Funds held under reinsurance treaties with Certified Reinsurers (Line 19 third inset amount)	0		0
14. All other liabilities (Balance)	1,716,552,919	1,815,718	1,718,368,637
15. Total liabilities (Line 24)	1,747,075,061	8,877,812	1,755,952,873
16. Total capital and surplus (Line 33)	1,128,229,548	XXX	1,128,229,548
17. Total liabilities, capital and surplus (Line 34)	2,875,304,609	8,877,812	2,884,182,421
NET CREDIT FOR CEDED REINSURANCE			
18. Claims unpaid	0		
19. Accrued medical incentive pool	0		
20. Premiums received in advance	7,062,094		
21. Reinsurance recoverable on paid losses	0		
22. Other ceded reinsurance recoverables	(95,354,442)		
23. Total ceded reinsurance recoverables	(88,292,348)		
24. Premiums receivable	6,908,514		
25. Funds held under reinsurance treaties with authorized and unauthorized reinsurers	0		
26. Unauthorized reinsurance	0		
27. Reinsurance with Certified Reinsurers	0		
28. Funds held under reinsurance treaties with Certified Reinsurers	0		
29. Other ceded reinsurance payables/offsets	(1,815,718)		
30. Total ceded reinsurance payables/offsets	5,092,796		
31. Total net credit for ceded reinsurance	(93,385,144)		

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

Allocated by States and Territories

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2019 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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
.0001	CVS HEALTH GROUP		05-0494040		0000064803	NYSE	CVS Health Corporation	DE	UIP	Board of Directors	Board of Directors	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	63444	06-1566092				Accendo Insurance Company	UT	IA	Part D Holding Company, L.L.C.	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	12575	20-2833904				SilverScript Insurance Company	TN	RE	Part D Holding Company, L.L.C.	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	05-0340626				CVS Pharmacy, Inc	RI	UIP	CVS Health Corporation	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	20-8404182				Caremark, Rx, L.L.C.	DE	UIP	CVS Pharmacy, Inc	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	61-1715010				Part D Holding Company, L.L.C.	DE	LOP	Caremark, Rx, L.L.C.	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	33-1113587				CVS Caremark Part D Services, L.L.C.	DE	NIA	Caremark, Rx, L.L.C.	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	87-0548860				RxAmerica, L.L.C.	DE	NIA	Caremark, Rx, L.L.C.	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	11-2580136				Caremark Ulysses Holding Corporation	NY	NIA	Caremark, Rx, L.L.C.	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	87-0804047				MemberHealth L.L.C.	DE	NIA	Caremark Ulysses Holding Corporation	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	05-0500188				CVS Caremark Indemnity, Ltd.	BMJ	IA	CVS Foreign, Inc.	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	27-1298765				UAC Holding, Inc		NIA	Caremark Ulysses Holding Corporation	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	05-0497953				CVS Foreign, Inc.	NY	NIA	CVS Health Corporation	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	23-2229683	3060706	0001122304		Aetna Inc.	PA	UIP	CVS Pharmacy, Inc	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	30-0123754	0	0		Aetna Health Holdings, LLC	DE	LOP	Aetna Inc.	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	95-3402799	0	0		Aetna Health of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	95935	23-2442048	0	0		Aetna Health Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	95088	59-2411584	0	0		Aetna Health Inc.	FL	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	95094	58-1649568	0	0		Aetna Health Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	95517	01-0504252	0	0		Aetna Health Inc.	ME	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	95756	23-2861565	0	0		Aetna Health of Michigan Inc.	MI	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	95287	52-1270921	0	0		Aetna Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	95234	22-2663623	0	0		Aetna Health Inc.	NY	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	14408	45-2634734	0	0		Aetna Better Health Inc.	NY	IA	Aetna Health Inc. (NY)	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	95490	76-0189680	0	0		Aetna Health Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	95040	74-1844335	0	0		Aetna Better Health of Texas Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	12328	20-2207534	0	0		Aetna Better Health Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	06-1160812	0	0		Aetna Dental of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.11183	22-2990909	0	0		Aetna Dental Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	95910	06-1177531	0	0		Aetna Dental Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	30-0123760	0	0		Aetna Rx Home Delivery, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	13-3670795	0	0		Aetna Health Management, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	22-3187443	0	0		Aetna Ireland Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	57-1209768	0	0		Aetna Specialty Pharmacy, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	20-1274723	0	0		Cofinity, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	23-2671370	0	0		@Credentials Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000		0	0		Aetna Services (Thailand) Limited	THA	NIA	Health Care Management Co. Ltd.	Ownership	100.000	CVS Health Corporation	.N	.19
.0001	CVS HEALTH GROUP	.13735	27-0563973	0	0		Aetna Better Health Inc.		IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.13174	26-2867560	0	0		Aetna Better Health Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	47-5178095	0	0		Aetna Better Health of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.14043	27-2512072	0	0		Aetna Better Health Inc.	IL	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.15805	47-3850677	0	0		Aetna Health of Ohio Inc.	OH	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.15616	80-0629718	0	0		Aetna Better Health, Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	80-0671703	0	0		Aetna Florida Inc.	FL	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.14229	25-2764938	0	0		Aetna Better Health Inc.	OH	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.15611	46-3203088	0	0		Aetna Better Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.15919	81-1143850	0	0		Aetna Better Health of Oklahoma Inc.	OK	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	04-2708160	0	0		Aetna Student Health Agency Inc.	MA	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	73-1702453	0	0		Delaware Physicians Care, Incorporated	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	01-0826783	0	0		Schaller Anderson Medical Administrators, Incorporated	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	86-0842559	0	0		Aetna Medicaid Administrators LLC	AZ	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	45-2944270	0	0		iTriage, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0
.0001	CVS HEALTH GROUP	.00000	16-1471176	0	0		Prodigy Health Group, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	.N	.0

ANNUAL STATEMENT FOR THE YEAR 2019 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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
0001	CVS HEALTH GROUP	00000	45-4901541	0	0		Aetna ACO Holdings, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	0.200	CVS Health Corporation	Y	3
0001	CVS HEALTH GROUP	00000	45-5527797	0	0		Innovation Health Holdings, LLC	DE	NIA	Aetna ACO Holdings, Inc.	Ownership	50.000	CVS Health Corporation	N	6
0001	CVS HEALTH GROUP	15097	46-0674828	0	0		Innovation Health Insurance Company	VA	IA	Innovation Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	15098	46-0682197	0	0		Innovation Health Plan, Inc.	VA	IA	Innovation Health Insurance Company	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	81-3789357	0	0		Texas Health + Aetna Health Insurance Holding Company LLC	TX	NIA	Aetna ACO Holdings, Inc.	Ownership	50.000	CVS Health Corporation	N	9
0001	CVS HEALTH GROUP	16121	81-4749336	0	0		Texas Health + Aetna Health Insurance Company	TX	IA	Texas Health + Aetna Health Insurance Holding Company LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	16132	47-5548221	0	0		Texas Health + Aetna Health Plan Inc.	TX	IA	Company	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	95109	23-2169745	0	0		Aetna Health Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	45-4901541	0	0		Aetna ACO Holdings, Inc.	DE	NIA	Aetna Health Inc. (PA)	Ownership	39.500	CVS Health Corporation	Y	3
0001	CVS HEALTH GROUP	00000	20-0438576	0	0		Niagara Re, Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	52-2200070	0	0		Performax, Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	87-0632355	0	0		Scrip World, LLC	UT	NIA	Prodigy Health Group, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	27-1760756	0	0		Precision Benefit Services, Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	31-1368946	0	0		American Health Holding, Inc.	OH	NIA	Prodigy Health Group, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	16-1264154	0	0		Meritain Health, Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	86-0537707	0	0		Adminco, Inc.	AZ	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	86-0527428	0	0		Administrative Enterprises, Inc.	AZ	NIA	Meritain Health, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	16-1684061	0	0		U.S. Healthcare Holdings, LLC	OH	NIA	Meritain Health, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	34-1670299	0	0		Prime Net, Inc.	OH	NIA	Meritain Health, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	34-1348032	0	0		Professional Risk Management, Inc.	OH	NIA	Meritain Health, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	68500	62-1181209	0	0		Continental Life Insurance Company of Brentwood, Tennessee	TN	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	12321	20-2901054	0	0		American Continental Insurance Company	TN	IA	Continental Life Insurance Company of Brentwood, Tennessee	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	60054	06-6033492	0	0		Aetna Life Insurance Company	CT	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	45-4901541	0	0		Aetna ACO Holdings, Inc.	DE	NIA	Aetna Life Insurance Company	Ownership	60.300	CVS Health Corporation	Y	3
0001	CVS HEALTH GROUP	00000	06-1270755	0	0		AHP Holdings, Inc.	CT	NIA	Aetna Life Insurance Company	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	36153	06-1286276	0	0		Aetna Insurance Company of Connecticut	CT	IA	AHP Holdings, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	06-1028469	0	0		AE Fourteen, Incorporated	CT	NIA	AHP Holdings, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	06-1373153	0	0		Aetna Life Assignment Company	CT	NIA	AHP Holdings, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	20-3678339	0	0		PE Holdings, LLC	CT	NIA	Aetna Life Insurance Company	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	06-1423207	0	0		Aetna Resources L.L.C.	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	20-3180700	0	0		Canal Place, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	20-3180700	0	0		Aetna Ventures, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	0001552250	0	0001552250		Aetna Multi-Strategy 1099 Fund, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	79.250	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	41-2035961	0	0		Aetna Financial Holdings, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	26-2030792	0	0		Aetna Asset Advisors, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	23-2354500	0	0		U.S. Healthcare Properties, Inc.	PA	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	38-3704481	0	0		Aetna Capital Management, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	11-3667142	0	0001314522		Aetna Partners Diversified Fund, LLC	DE	NIA	Aetna Capital Management, LLC	Ownership	100.000	CVS Health Corporation	N	1
0001	CVS HEALTH GROUP	00000	20-0446676	0	0		Aetna Workers' Comp Access, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	20-0446713	0	0		Aetna Behavioral Health, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	23-2670015	0	0		Managed Care Coordinators, Inc.	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	59-3269144	0	0		Horizon Behavioral Services, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	61-1193498	0	0		Employee Assistance Services, LLC	KY	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	33-0052273	0	0		Health and Human Resource Center, Inc.	CA	IA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	75-2420973	0	0		Resources for Living, LLC	TX	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	36-3681261	0	0		The Vasquez Group Inc.	IL	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	22-3178125	0	0		Work and Family Benefits, Inc.	NJ	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	27-1773021	0	0		Aetna Card Solutions, LLC	CT	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	20-5216478	0	0		PayFlex Holdings, Inc.	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0

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ANNUAL STATEMENT FOR THE YEAR 2019 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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
0001	CVS HEALTH GROUP	00000	91-1774434	0	0		PayFlex Systems USA, Inc.	NE	NIA	PayFlex Holdings, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	78700	06-0876836	0	0		Aetna Health and Life Insurance Company	CT	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	72052	23-2710210	0	0		Aetna Health Insurance Company	PA	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	84450	57-0805126	0	0		Aetna Health Insurance Company of New York	NY	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	06-1571642	0	0		Aetna International Inc.	CT	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	98-0211470	0	0		Aetna Life & Casualty (Bermuda) Ltd.	BMU	IA	Aetna International Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Aetna Insurance (Singapore) PTE. LTD.	SGP	IA	Aetna International Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Aetna Global Benefits (Bermuda) Limited	BMU	NIA	Aetna International Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Goodhealth Worldwide (Global) Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Aetna Global Benefits (Europe) Limited	GBR	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Goodhealth Worldwide (Asia) Limited	HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Aetna Global Benefits Limited	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		PT. Aetna Global Benefits Indonesia	IDN	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	80.000	CVS Health Corporation	N	4
0001	CVS HEALTH GROUP	00000		0	0		Aetna Global Benefits (Middle East) LLC	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	49.000	CVS Health Corporation	N	5
0001	CVS HEALTH GROUP	00000		0	0		Aetna Global Benefits (Asia Pacific) Limited	HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Spinnaker Topco Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Spinnaker Bidco Limited	GBR	NIA	Spinnaker Topco Limited	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Aetna Holdco (UK) Limited	GBR	NIA	Spinnaker Bidco Limited	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		PT Aetna Management Consulting	IDN	NIA	Aetna International Inc.	Ownership	77.000	CVS Health Corporation	N	13
0001	CVS HEALTH GROUP	00000		0	0		Aetna Global Benefits (UK) Limited	GBR	NIA	Aetna Holdco (UK) Limited	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Aetna Insurance Company Limited	GBR	IA	Aetna Holdco (UK) Limited	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Indian Health Organisation Private Limited	IND	NIA	Aetna Global Benefits (Asia Pacific) Limited	Ownership	0.020	CVS Health Corporation	N	2
0001	CVS HEALTH GROUP	00000		0	0		Aetna Health Insurance Company of Europe DAC	IRL	IA	Aetna International Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Aetna (Shanghai) Enterprise Services Co. Ltd.	CHN	NIA	Aetna International Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Aetna (Beijing) Enterprise Management Services Co., Ltd.	CHN	NIA	Aetna (Shanghai) Enterprise Services Co. Ltd.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Aetna Global Benefits (Singapore) PTE. LTD.	SGP	NIA	Aetna International Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Indian Health Organisation Private Limited	IND	NIA	Aetna Global Benefits (Singapore) PTE, LTD.	Ownership	99.980	CVS Health Corporation	N	2
0001	CVS HEALTH GROUP	00000	22-2578985	0	0		AUSHC Holdings, Inc.	NIA	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Aetna Global Holdings Limited	GBR	NIA	Aetna International Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Aetna Korea Ltd.	KOR	NIA	Aetna Global Holdings Limited	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Aetna Insurance (Hong Kong) Limited	HKG	NIA	Aetna Global Holdings Limited	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	06-1182176	0	0		PHPSNE Parent Corporation	NIA	NIA	AUSHC Holdings, Inc.	Ownership	55.000	CVS Health Corporation	N	7
0001	CVS HEALTH GROUP	00000	52-2182411	0	0		Active Health Management, Inc.	NIA	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	47-0970432	0	0		Health Data & Management Solutions, Inc.	NIA	NIA	Active Health Management, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	23-2604867	0	0		Aetna Integrated Informatics, Inc.	PA	NIA	Active Health Management, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	13980	27-2192415	0	0		Health Re, Inc.	VT	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	81-0579372	0	0		Phoenix Data Solutions LLC	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	46-2469464	0	0		Healthagen LLC	CT	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	51-0029326	0	0		ASI Wings, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Echo Merger Sub, Inc.	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000		0	0		Aetna Corporate Services, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	81973	75-1296086	0	0		Coventry Health and Life Insurance Company	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	15761	47-3279217	0	0		Aetna Better Health of Kentucky Insurance Company	KY	IA	Coventry Health and Life Insurance Company	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	52-1801446	0	0		Group Dental Service, Inc.	MD	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	95846	52-2056201	0	0		Group Dental Service of Maryland, Inc.	MD	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	81-4345344	0	0		Aetna Network Services LLC	CT	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	95241	42-1244752	0	0		Aetna Health of Iowa Inc.	IA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0

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

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0001	CVS HEALTH GROUP	95925	42-1308659	0	0		Coventry Health Care of Nebraska, Inc.	NE	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	47-2049117	0	0		Aetna Risk Assurance Company of Connecticut Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	95173	74-2381406	0	0		Aetna Health Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	11102	23-2366731	0	0		HealthAssurance Pennsylvania, Inc.	PA	RE	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	47-0854096	0	0		Coventry Prescription Management Services, Inc.	NV	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	16148	81-3564875	0	0		Aetna Better Health of Nevada Inc.	NV	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	96555	54-1576305	0	0		Coventry Health Care of Virginia, Inc.	VA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	01-0646056	0	0		Coventry Transplant Network, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	96377	43-1372307	0	0		Coventry Health Care of Missouri, Inc.	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	95318	43-1702094	0	0		Aetna Better Health of Missouri LLC	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	95408	55-0712129	0	0		Coventry Health Care of West Virginia, Inc.	WV	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	62-1411933	0	0		Coventry HealthCare Management Corporation	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	15827	47-4352768	0	0		Aetna HealthAssurance Pennsylvania, Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	95489	48-0840330	0	0		Coventry Health Care of Kansas, Inc.	KS	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	16072	81-3370401	0	0		Aetna Better Health of Kansas Inc.	KS	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	12193	20-1052897	0	0		Aetna Better Health of Michigan Inc.	MI	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	95407	87-0345631	0	0		Aetna Health of Utah Inc.	UT	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	20-4416606	0	0		Aetna Better Health Inc.	TN	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	74160	37-1241037	0	0		Coventry Health Care of Illinois, Inc.	IL	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	20-8070994	0	0		Coventry Health Care National Accounts, Inc.	IL	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	20-5185442	0	0		Coventry Health Care National Network, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	26-1293772	0	0		Coventry Consumer Advantage, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	20-8376354	0	0		Coventry Health Care Workers Compensation, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	20-4096903	0	0		First Script Network Service, Inc.	NV	NIA	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	06-1095987	0	0		MetraComp, Inc.	CT	NIA	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	74-2879984	0	0		Medical Examinations of New York, P.C.	NY	NIA	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.000	CVS Health Corporation	N	8
0001	CVS HEALTH GROUP	00000	62-1266888	0	0		FOCUS Healthcare Management, Inc.	TN	NIA	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	87-0443226	0	0		Coventry Rehabilitation Services, Inc.	DE	NIA	Inc.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	20-1736437	0	0		First Health Group Corp.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	90328	38-2242132	0	0		First Health Life & Health Insurance Company	TX	IA	First Health Group Corp.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	52-1320522	0	0		Claims Administration Corp.	MD	NIA	First Health Group Corp.	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	20-1130063	0	0		Florida Health Plan Administrators, LLC	FL	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	95114	65-0986441	0	0		Aetna Better Health of Florida Inc.	FL	IA	Florida Health Plan Administrators, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	95266	65-0453436	0	0		Coventry Health Plan of Florida, Inc.	FL	IA	Florida Health Plan Administrators, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	59-3750548	0	0		Carefree Insurance Services, Inc.	FL	NIA	Florida Health Plan Administrators, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	36-4391310	0	0		bswift LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	00000	0	0		Virtual Home Healthcare L.L.C.	ARE	NIA	Aetna Global Holdings Limited	Ownership	49.000	CVS Health Corporation	N	17
0001	CVS HEALTH GROUP	00000	26-1582982	0	0		MHNet Specialty Services, LLC	MD	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	37-1448790	0	0		Mental Health Network of New York IPA, Inc.	NY	NIA	MHNet Specialty Services, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	12509	20-2516317	0	0		MHNet Life and Health Insurance Company	LA	IA	MHNet Specialty Services, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	72-1106596	0	0		Mental Health Associates, Inc.	LA	NIA	MHNet Specialty Services, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	00000	20-4276336	0	0		MHNet of Florida, Inc.	FL	IA	MHNet Specialty Services, LLC	Ownership	100.000	CVS Health Corporation	N	0
0001	CVS HEALTH GROUP	16242	81-5030233	0	0		Aetna Better Health of Washington, Inc.	WA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N	0

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SCHEDULE Y

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Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
..0001	CVS HEALTH GROUP	..00000	81-5212760	0	0		Banner Health and Aetna Health Insurance Holding Company LLC	..DE	..NIA	Aetna ACO Holdings, Inc.	Ownership	..51.000	CVS Health Corporation	..N	..10
..0001	CVS HEALTH GROUP	..16058	81-5281115	0	0		Banner Health and Aetna Health Insurance Company	..AZ	..IA	Banner Health and Aetna Health Insurance Holding Company LLC	Ownership	..100.000	CVS Health Corporation	..N	..0
..0001	CVS HEALTH GROUP	..16059	81-5290023	0	0		Banner Health and Aetna Health Plan Inc.	..AZ	..IA	Banner Health and Aetna Health Insurance Company	Ownership	..100.000	CVS Health Corporation	..N	..0
..0001	CVS HEALTH GROUP	..00000	81-5112888	0	0		Allina Health and Aetna Health Insurance Holding Company LLC	..DE	..NIA	Aetna ACO Holdings, Inc.	Ownership	..50.000	CVS Health Corporation	..N	..11
..0001	CVS HEALTH GROUP	..16194	82-2091197	0	0		Allina Health and Aetna Insurance Company Sutter Health and Aetna Insurance Holding Company LLC	..MN	..IA	Allina Health and Aetna Health Insurance Holding Company LLC	Ownership	..100.000	CVS Health Corporation	..N	..0
..0001	CVS HEALTH GROUP	..00000	82-2171057	0	0		Sutter Health and Aetna Administrative Services LLC	..DE	..NIA	Aetna ACO Holdings, Inc.	Ownership	..50.000	CVS Health Corporation	..N	..12
..0001	CVS HEALTH GROUP	..00000	82-2560624	0	0		Sutter Health and Aetna Insurance Holding Company LLC	..DE	..NIA	Sutter Health and Aetna Insurance Holding Company LLC	Ownership	..100.000	CVS Health Corporation	..N	..0
..0001	CVS HEALTH GROUP	..00000	81-5290023	0	0		Sutter Health and Aetna Insurance Company	..CA	..NIA	Sutter Health and Aetna Insurance Holding Company LLC	Ownership	..100.000	CVS Health Corporation	..N	..0
..0001	CVS HEALTH GROUP	..00000		0	0		Aetna Holdings (Thailand) Limited	..THA	..NIA	Aetna Global Holdings Limited	Ownership	..49.000	CVS Health Corporation	..N	..14
..0001	CVS HEALTH GROUP	..00000		0	0		Aetna Health Insurance (Thailand) Public Company Limited	..THA	..NIA	Aetna Global Holdings Limited	Ownership	..25.000	CVS Health Corporation	..N	..15
..0001	CVS HEALTH GROUP	..00000		0	0		Aetna Health Insurance (Thailand) Public Company Limited	..THA	..NIA	Minor Health Enterprise Co, Ltd.	Ownership	..46.000	CVS Health Corporation	..N	..15
..0001	CVS HEALTH GROUP	..00000		0	0		Aetna Health Insurance (Thailand) Public Company Limited	..THA	..NIA	Health Care Management Co. Ltd.	Ownership	..28.000	CVS Health Corporation	..N	..15
..0001	CVS HEALTH GROUP	..00000		0	0		Health Care Management Co. Ltd.	..THA	..NIA	Aetna Global Holdings Limited	Ownership	..49.000	CVS Health Corporation	..N	..18
..0001	CVS HEALTH GROUP	..00000		0	0		Minor Health Enterprise Co, Ltd.	..THA	..NIA	Aetna Global Holdings Limited	Ownership	..25.000	CVS Health Corporation	..N	..16
..0001	CVS HEALTH GROUP	..00000		0	0		Minor Health Enterprise Co, Ltd.	..THA	..NIA	Aetna Holdings (Thailand) Limited	Ownership	..75.000	CVS Health Corporation	..N	..16
..0001	CVS HEALTH GROUP	..00000		0	0		Health Care Management Co. Ltd.	..THA	..NIA	Aetna Holdings (Thailand) Limited	Ownership	..51.000	CVS Health Corporation	..N	..18
..0001	CVS HEALTH GROUP	..00000		0	0		Aetna Global Benefits (Bahamas) Limited	..BHS	..NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	..100.000	CVS Health Corporation	..N	..0
..0001	CVS HEALTH GROUP	..00000		0	0		Aetna Pharmacy Management Services LLC	..NIA	..NIA	Aetna Health Holdings, LLC	Ownership	..100.000	CVS Health Corporation	..N	..0
..0001	CVS HEALTH GROUP	..00000	82-3333789	0	0		Aetna Better Health of North Carolina Inc.	..IA	..IA	Aetna Health Holdings, LLC	Ownership	..100.000	CVS Health Corporation	..N	..0

Asterisk	Explanation
1	Aetna Life Insurance Company own substantially all of the non-managing membership interests of Aetna Partners Diversified Fund LLC.
2	Indian Health Organisation Private Limited is 0.019857% owned by Aetna Global Benefits (Asia Pacific) and 99.980143% owned by Aetna Global Benefits (Singapore) PTE. LTD.
3	Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).
4	PT. Aetna Global Benefits Indonesia is also 20% owned by Suhatsyah Rivai, Aetna's Nominee.
5	Aetna Global Benefits (Middle East) LLC is also 51% owned by Euro Gulf LLC, Aetna's Nominee.
6	Innovation Health Holdings LLC. Is also 50% owned by Inova Health System Foundation.
7	PHPSNE Parent Corporation is 55% owned by AUSHC Holdings, Inc. The remaining 45% is owned by thirteen different hospitals (non-affiliates) which are shareholders with varying degrees of ownership.
8	Medical Examinations of New York, P.C. is 100% owned through Aetna's nominees.
9	Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.
10	Banner Health and Aetna Health Insurance Holding Company LLC is also 49% owned by Banner Health.
11	Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.
12	Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.
13	PT Aetna Management Consulting is also 23% owned by PT Asuransi Central Asia.
14	Aetna Holdings (Thailand) Limited is also 51% owned by Mr. Paiboon Sutantivorakoon plus Aetna Global Benefits (Bermuda) Limited owns 1 share
15	Aetna Health Insurance (Thailand) Public Company Limited is also owned by Aetna Global Benefits (Bermuda) Limited (1 share), Mr. Sansanapongpherchar (1 share), Mr. Jitphasong Itsaraphakded (1 share); Mrs. Suphee Wattana (1 share); and Mr. Buncha Tamphragom (1 share)
16	Minor Health Enterprise Co, Ltd is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited.
17	Virtual Home Health Care L.L.C. is also 51% owned by CBD Commercial Brokers LLC, Aetna's Nominee.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

Asterisk	Explanation
18	Health Care Management Co. Ltd. is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited.
19	Aetna Services (Thailand) Limited is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited and (1 share) owned by Aetna Global Holdings Limited.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	52-2182411	Active Health Management, Inc.	.0	.0	.0	.0	119,981,756	.0		.0	119,981,756	.0
		Aetna Behavioral Health, LLC	.0	.0	.0	.0	(205,083)	.0		.0	(205,083)	.0
12328	20-2207534	Aetna Better Health Inc. (GA)	.0	5,000,000	.0	.0	(16,721)	.0		.0	4,983,279	.0
13174	26-2867560	Aetna Better Health, Inc. (a Connecticut Corporation)	.0	.0	.0	.0	(10,546)	.0		.0	(10,546)	.0
13735	27-0563973	Aetna Better Health, Inc (PA)	(37,500,000)	.0	.0	.0	(73,066,573)	.0		.0	(110,566,573)	.0
	95-3402799	Aetna Better Health of California Inc.	.0	5,000,000	.0	.0	(9,873,167)	.0		.0	(4,873,167)	.0
15805	47-3850677	Aetna Health of Ohio, Inc.	.0	2,000,000	.0	.0	(7,902)	.0		.0	1,992,098	.0
16072	81-3370401	Aetna Better Health of Kansas Inc	.0	135,000,000	.0	.0	(63,704,744)	.0		.0	71,295,256	.0
15761	47-3279217	Aetna Better Health of Kentucky Insurance Company	.0	.0	(4,924,775)	.0	(79,067,106)	.0		.0	(83,991,881)	.0
12193	20-1052897	Aetna Better Health of Michigan Inc.	(12,500,000)	.0	.0	.0	(30,104,643)	.0		.0	(42,604,643)	.0
95318	43-1702094	Aetna Better Health of Missouri LLC	(4,376,163)	(15,623,837)	.0	.0	735,652	.0		.0	(19,264,348)	.0
16148	81-3564875	Aetna Better Health of Nevada	.0	.0	.0	.0	(464,965)	.0		.0	(464,965)	.0
15919	81-1143850	Aetna Better Health of Oklahoma Inc	.0	.0	.0	.0	(13,204)	.0		.0	(13,204)	.0
95040	74-1844335	Aetna Better Health of Texas Inc.	(16,500,000)	10,000,000	.0	.0	(27,653,228)	.0		.0	(34,153,228)	.0
16242	81-5030233	Aetna Better Health of Washington Inc.	.0	.0	.0	.0	(18,543)	.0		.0	(18,543)	.0
	80-0671703	Aetna Better Health Inc. (FL)	.0	.0	.0	.0	.0	.0		.0	.0	.0
15616	80-0629718	Aetna Better Health, Inc. (a Louisiana corporation)	.0	.0	.0	.0	(40,234,378)	.0		.0	(40,234,378)	.0
14043	27-2512072	Aetna Better Health Inc. (IL)	(4,500,000)	.0	.0	.0	(28,543,072)	.0		.0	(33,043,072)	.0
15611	46-3203088	Aetna Better Health, Inc (NJ)	.0	.0	.0	.0	(40,118,711)	.0		.0	(40,118,711)	.0
14408	45-2634734	Aetna Better Health Inc. (a New York corporation)	.0	.0	.0	.0	(39,092,533)	.0		.0	(39,092,533)	.0
14229	45-2764938	Aetna Better Health Inc. (an Ohio corporation)	(96,000,000)	.0	.0	.0	(72,272,806)	.0		.0	(168,272,806)	.0
		Aetna Better Health, Inc. (TN)	.0	.0	.0	.0	(16,878)	.0		.0	(16,878)	.0
11183	22-2990909	Aetna Dental Inc. (NJ)	.0	.0	.0	.0	(1,319,808)	.0		.0	(1,319,808)	.0
95910	06-1177531	Aetna Dental Inc. (TX)	(3,000,000)	.0	.0	.0	(6,060,809)	(53,957)		.0	(9,114,766)	.0
	06-1160812	Aetna Dental of California Inc.	(3,000,000)	.0	.0	.0	(2,131,998)	.0		.0	(5,131,998)	.0
78700	06-0876836	Aetna Health and Life Insurance Company	.0	.0	26,358,529	.0	(574,584)	.0		.0	25,783,945	.0
	30-0123754	Aetna Health Holdings, LLC	804,376,163	(251,376,163)	.0	.0	.0	.0		.0	553,000,000	.0
95935	23-2442048	Aetna Health Inc. (CT)	.0	.0	.0	.0	(7,015,981)	.0		.0	(7,015,981)	.0
95088	59-2411584	Aetna Health Inc. (FL)	(40,000,000)	.0	.0	.0	(110,178,614)	.0		.0	(150,178,614)	.0
95094	58-1649568	Aetna Health Inc - Georgia	.0	.0	.0	.0	(11,409,112)	.0		.0	(11,409,112)	.0
95241	42-1244752	Aetna Health Inc. (Iowa)	.0	.0	.0	.0	(1,003,943)	.0		.0	(1,003,943)	.0
95517	01-0504252	Aetna Health Inc. (ME)	(5,000,000)	.0	.0	.0	(4,972,809)	.0		.0	(9,972,809)	.0
95756	23-2861565	Aetna Health Inc. (MI)	.0	.0	.0	.0	(5,357)	.0		.0	(5,357)	.0
95287	52-1270921	Aetna Health Inc. (NJ)	(17,000,000)	.0	.0	.0	(37,729,165)	.0		.0	(54,729,165)	.0
95234	22-2663623	Aetna Health Inc. (a New York corporation)	.0	.0	.0	.0	(15,814,501)	.0		.0	(140,814,501)	.0
95109	23-2169745	Aetna Health Inc. (PA)	(125,000,000)	.0	.0	.0	(211,203,824)	(4,433,310)		.0	(319,303,816)	12,688,059
95935	23-2442048	Aetna Health Inc. (a Connecticut corporation)	.0	.0	.0	.0	(6,659,689)	.0		.0	(6,659,689)	.0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
95490	76-0189680	Aetna Health Inc. (TX)	0	20,000,000	0	0	(10,357,047)	(1,713,440)		0	7,929,513	0
95173	74-2381406	Aetna Health Inc. (LA)	0	0	0	0	(4,121,245)	0		0	(4,121,245)	0
95109	23-2169745	Aetna Health Insurance Company (PA)	0	25,000,000	0	0	(312,556)	116,102		0	24,803,546	0
84450	57-0805126	Aetna Health Insurance Company of New York	0	0	0	0	(29,803)	0		0	(29,803)	0
	13-3670795	Aetna Health Management, LLC	0	0	0	0	(2,366,782,840)	0		0	(2,366,782,840)	0
	95-3402799	Aetna Health of California Inc.	(70,000,000)	0	0	0	(87,734,428)	0		0	(157,734,428)	0
15827	47-4352768	Aetna HealthAssurance Pennsylvania Inc.	0	0	0	0	(15,928,492)	0		0	(15,928,492)	0
	23-2229683	Aetna Inc.	1,638,728,729	(50,000,000)	0	0	(592,739)	0		0	1,588,135,990	0
		Aetna Insurance (Singapore) Pte, Ltd	0	0	0	0	0	0		0	0	0
36153	06-1286276	Aetna Insurance Company of Connecticut	0	0	0	0	(69,414)	0		0	(69,414)	0
		Aetna International, Inc.	0	0	0	0	(749,446)	0		0	(749,446)	0
		Aetna Life & Casualty (Bermuda) Ltd	0	0	0	0	(679,467)	0		0	(679,467)	0
60054	06-6033492	Aetna Life Insurance Company	(1,415,000,000)	1,711,959	(940,593)	0	268,624,521	(286,741,153)		0	(1,432,345,266)	1,365,680,573
	86-0842559	Aetna Medicaid Administrators, LLC	0	0	0	0	304,574,534	0		0	304,574,534	0
		AETNA MULTI STRATEGY FUND, LLC	0	0	0	0	0	0		0	0	0
		AETNA PARTNERS DIVERSIFIED FUND (CAYMAN), LIMITED	0	0	0	0	0	0		0	0	0
	81-0579372	Aetna Partners Diversified Fund, LLC	(33,739,668)	0	940,593	0	0	0		0	(32,799,075)	0
		Aetna Resources LLC	0	0	0	0	2,463,333,910	0		0	2,463,333,910	0
	30-0123760	Aetna RX Home Delivery, LLC	0	0	0	0	0	0		0	0	0
	20-3180700	Aetna Ventures, LLC	10,939	(1,711,959)	0	0	0	0		0	(1,701,020)	0
	57-1209768	Aetna Specialty Pharmacy, LLC	0	0	0	0	0	0		0	0	0
		Allina Health and Aetna Insurance Holding Company LLC	0	(23,200,000)	0	0	0	0		0	(23,200,000)	0
16194	82-2091197	Allina Health and Aetna Insurance Company	0	23,200,000	0	0	(2,784,575)	0		0	20,415,425	0
95407	87-0345631	Aetna Health of Utah, Inc.	(3,500,000)	0	0	0	(10,379,664)	0		0	(13,879,664)	0
12321	20-2901054	American Continental Insurance Company	0	5,000,000	0	0	(83,221,167)	0		0	(78,221,167)	0
		American Health Holding, Inc.	0	0	0	0	218,000	0		0	218,000	0
		Banner Health and Aetna Health Insurance Holding Company LLC	0	0	0	0	0	0		0	0	0
16059	81-5290023	Banner Health & Aetna Health Plan, Inc	0	0	0	0	(1,792,127)	1,079,334		0	(712,793)	(6,934,336)
16058	81-5281115	Banner Health & Aetna Health Insurance Co.	0	0	0	0	(45,436,703)	10,790,397		0	(34,646,306)	(25,032,589)
		bswift, LLC	0	0	0	0	33,518,295	0		0	33,518,295	0
74160	37-1241037	Coventry Health Care of Illinois, Inc.	(6,500,000)	0	0	0	(44,191,964)	0		0	(50,691,964)	0
96377	43-1372307	Coventry Health Care of Missouri, Inc.	(30,000,000)	0	0	0	(71,051,131)	0		0	(101,051,131)	0
81973	75-1296086	Coventry Health & Life Insurance Company	(200,000,000)	0	(12,114,853)	0	(145,721,655)	0		0	(357,836,508)	0
68500	62-1181209	Continental Life Insurance Company of Brentwood Tennessee	0	20,000,000	0	0	(151,043,617)	0		0	(131,043,617)	0
95114	65-0986441	Aetna Better Health of Florida Inc	0	18,000,000	0	0	(69,377,768)	0		0	(51,377,768)	0
95925	42-1308659	Coventry Health Care of Nebraska, Inc.	0	0	2,995,704	0	(29,976)	0		0	2,965,728	0
96555	54-1576305	Coventry Health Care of Virginia, Inc.	0	90,000,000	(2,995,704)	0	(137,753,701)	0		0	(50,749,405)	0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
95408	55-0712129	Coventry Health Care of West Virginia, Inc.	0	0	0	0	(35,333,789)	0		0	(35,333,789)	0
95266	65-0453436	Coventry Health Plan of Florida, Inc.	0	0	0	0	(76,690)	0		0	(76,690)	0
	62-1411933	Coventry HealthCare Management Corporation	0	0	0	0	(2,951)	0		0	(2,951)	0
95489	48-0840330	Coventry Health Care of Kansas, Inc.	0	0	0	0	216,648	0		0	216,648	0
	47-0854096	Coventry Prescription Mgmt Services, Inc	0	0	0	0	0	0		0	0	0
		First Health Group Corp	0	26,900,000	0	0	0	0		0	26,900,000	0
90328	38-2242132	First Health Life & Health Ins Co.	0	(26,900,000)	0	0	534,639,608	0		0	507,739,608	0
		Florida Health Plan Administrator, LLC	0	(18,000,000)	0	0	0	0		0	(18,000,000)	0
95846	52-2056201	Group Dental Services of Maryland, Inc.	0	0	0	0	(796,206)	0		0	(796,206)	0
	33-0052273	Health and Human Resources Center, Inc.	(4,000,000)	0	0	0	441,619	0		0	(3,558,381)	0
13980	27-2192415	Health Re, Inc.	(190,000,000)	0	0	0	(34,025,080)	249,192,055		0	25,166,975	(1,262,284,801)
		Healthagen LLC	0	0	0	0	0	0		0	0	0
11102	23-2366731	HealthAssurance Pennsylvania, Inc.	(31,000,000)	0	0	0	(56,766,154)	0		0	(87,766,154)	0
15097	46-0674828	Innovation Health Insurance Company	0	0	0	0	(19,857,649)	0		0	(19,857,649)	(20,399,367)
15098	46-0682197	Innovation Health Plan, Inc	0	0	0	0	(2,895,046)	3,291,832		0	396,786	(3,538,782)
	26-1582982	MHNet Specialty Services, LLC	0	0	0	0	34,456,740	0		0	34,456,740	0
		PayFlex Systems USA, Inc.	0	0	0	0	25,769,535	0		0	25,769,535	0
		Schaller Anderson of Arizona, L.L.C.	0	0	0	0	387,411,824	0		0	387,411,824	0
		Texas Health + Aetna Health Insurance Holding Company LLC	0	0	0	0	0	0		0	0	0
16132	47-5548221	Texas Health & Aetna Health Plan, Inc	0	0	0	0	(1,324,472)	1,713,440		0	388,968	(2,214,941)
16121	81-4749336	Texas Health & Aetna Health Insurance Co.	0	0	0	0	(4,836,255)	26,758,700		0	21,922,445	(57,963,816)
16558	82-3333789	Aetna Better Health of North Carolina, Inc.	0	0	0	0	(2,264)	0		0	(2,264)	0
		Claims Administration Corp.	0	0	0	0	(24,054,289)	0		0	(24,054,289)	0
	05-0494040	CVS Health Corporation	0	0	0	0	176,687,957	0		0	176,687,957	0
00000	06-1270755	AHP Holdings, Inc.	0	0	0	0	66,768	0		0	66,768	0
12575	20-2833904	SilverScript Insurance Co.	0	0	(652,219)	0	(431,194,877)	(46,883,375)		0	(478,730,471)	93,385,144
00000	33-1113587	CVS Caremark Part D Services, LLC	0	0	0	0	431,194,877	0		0	431,194,877	0
00000	05-0500188	CVS Caremark Indemnity, Ltd.	0	0	0	0	0	35,162,603		0	35,162,603	(70,038,858)
00000	20-8404182	Caremark Rx., L.L.C.	0	0	0	0	0	0		0	0	0
63444	06-1566092	Accendo Insurance Company	0	0	0	0	0	11,720,772		0	11,720,772	(23,346,286)
9999999	Control Totals		0	0	0	0	0	0	XXX	0	0	0

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	Responses
MARCH FILING	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	WAIVED
2. Will an actuarial opinion be filed by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?.....	YES
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?.....	YES
APRIL FILING	
5. Will Management's Discussion and Analysis be filed by April 1?	YES
6. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
7. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
JUNE FILING	
8. Will an audited financial report be filed by June 1?	YES
9. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
AUGUST FILING	
10. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	YES

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

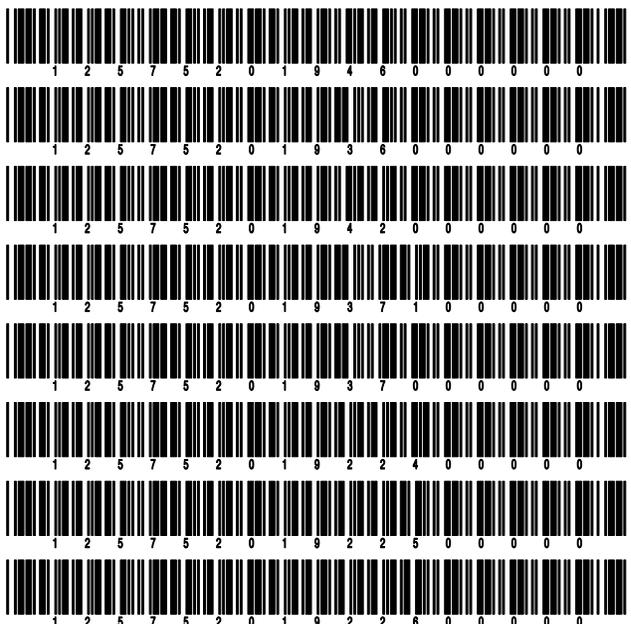
MARCH FILING	
11. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
12. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?	SEE EXPLANATION
13. Will Schedule SIS (Stockholder Information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

Explanations:

- 11. No life business written
- 12.
- 13.
- 14.
- 15.
- 16.
- 17.
- 18.
- 19.
- 20.
- 21. No life business written
- 23.

Bar Codes:

- 1. Supplemental Compensation Exhibit [Document Identifier 460]
- 11. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]
- 13. SIS Stockholder Information Supplement [Document Identifier 420]
- 14. Participating Opinion for Exhibit 5 [Document Identifier 371]
- 15. Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370]
- 17. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
- 18. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
- 19. Relief from the Requirements for Audit Committees [Document Identifier 226]



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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



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





SUPPLEMENT FOR THE YEAR 2019 OF THE SilverScript Insurance Company
MEDICARE PART D COVERAGE SUPPLEMENT
 (Net of Reinsurance)

NAIC Group Code 0001

(To Be Filed by March 1)

NAIC Company Code 12575

	Individual Coverage		Group Coverage		5 Total Cash
	1 Insured	2 Uninsured	3 Insured	4 Uninsured	
1. Premiums Collected					
1.1 Standard Coverage					
1.11 With Reinsurance Coverage	2,521,793,633	XXX		XXX	2,521,793,633
1.12 Without Reinsurance Coverage		XXX	6,567,863	XXX	6,567,863
1.13 Risk-Corridor Payment Adjustments	34,400,173	XXX		XXX	34,400,173
1.2 Supplemental Benefits	40,838,168	XXX		XXX	40,838,168
2. Premiums Due and Uncollected-change					
2.1 Standard Coverage					
2.11 With Reinsurance Coverage	15,126,486	XXX		XXX	XXX
2.12 Without Reinsurance Coverage		XXX	(414,529)	XXX	XXX
2.2 Supplemental Benefits	218,972	XXX		XXX	XXX
3. Unearned Premium and Advance Premium-change					
3.1 Standard Coverage					
3.11 With Reinsurance Coverage	1,618,822	XXX		XXX	XXX
3.12 Without Reinsurance Coverage		XXX	3,871	XXX	XXX
3.2 Supplemental Benefits		XXX		XXX	XXX
4. Risk-Corridor Payment Adjustments-change					
4.1 Receivable	(35,996,601)	XXX		XXX	XXX
4.2 Payable	(2,931,987)	XXX		XXX	XXX
5. Earned Premiums					
5.1 Standard Coverage					
5.11 With Reinsurance Coverage	2,535,301,297	XXX	0	XXX	XXX
5.12 Without Reinsurance Coverage	0	XXX	6,149,463	XXX	XXX
5.13 Risk-Corridor Payment Adjustments	(4,528,415)	XXX	0	XXX	XXX
5.2 Supplemental Benefits	41,057,140	XXX	0	XXX	XXX
6. Total Premiums	2,571,830,022	XXX	6,149,463	XXX	2,603,599,837
7. Claims Paid					
7.1 Standard Coverage					
7.11 With Reinsurance Coverage	1,984,370,887	XXX		XXX	1,984,370,887
7.12 Without Reinsurance Coverage		XXX	2,452,203	XXX	2,452,203
7.2 Supplemental Benefits	54,893,858	XXX		XXX	54,893,858
8. Claim Reserves and Liabilities-change					
8.1 Standard Coverage					
8.11 With Reinsurance Coverage	(7,282,329)	XXX		XXX	XXX
8.12 Without Reinsurance Coverage		XXX	(8,067)	XXX	XXX
8.2 Supplemental Benefits	(199,943)	XXX		XXX	XXX
9. Health Care Receivables-change					
9.1 Standard Coverage					
9.11 With Reinsurance Coverage	(36,383,709)	XXX		XXX	XXX
9.12 Without Reinsurance Coverage		XXX	(34,038)	XXX	XXX
9.2 Supplemental Benefits	(588,183)	XXX		XXX	XXX
10. Claims Incurred					
10.1 Standard Coverage					
10.11 With Reinsurance Coverage	2,013,472,267	XXX	0	XXX	XXX
10.12 Without Reinsurance Coverage	0	XXX	2,478,174	XXX	XXX
10.2 Supplemental Benefits	55,282,098	XXX	0	XXX	XXX
11. Total Claims	2,068,754,365	XXX	2,478,174	XXX	2,041,716,948
12. Reinsurance Coverage and Low Income Cost Sharing					
12.1 Claims Paid - Net of Reimbursements Applied	XXX	(57,137,138)	XXX	602,814,893	545,677,755
12.2 Reimbursements Received but Not Applied-change	XXX		XXX		0
12.3 Reimbursements Receivable-change	XXX	(57,137,138)	XXX	(602,814,893)	XXX
12.4 Health Care Receivables-change	XXX		XXX		XXX
13. Aggregate Policy Reserves-change					XXX
14. Expenses Paid	335,084,714	XXX	801,216	XXX	335,885,930
15. Expenses Incurred	336,557,249	XXX	804,737	XXX	XXX
16. Underwriting Gain/Loss	166,518,408	XXX	2,866,552	XXX	XXX
17. Cash Flow Results	XXX	XXX	XXX	XXX	(319,680,796)

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