

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2011**

OF THE **Aetna Health Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION ION / 2. DIVISION **CONSOLIDATED**

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)			4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	185,443	118,677	4,557	0	0	49,396	0	0	12,813	0
2. MEMBER MONTHS.....	556,854	355,704	13,696	0	0	149,535	0	0	37,919	0
3. Direct Premium Income.....	186,854,569	127,831,737	13,702,987	0	0	42,648,386	0	XXXXXXXX	2,671,459	0
4. Net Premium Income.....	186,854,569	127,831,737	13,702,987	0	0	42,648,386	0	0	2,671,459	0
5. Change in unearned premium reserve and reserve for rate credits.....	(1,320,939)	(822,557)	0	0	0	(498,382)	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	185,533,630	127,009,180	13,702,987	0	0	42,150,004	0	0	2,671,459	0
11. Hospital & Medical Benefits.....	146,059,966	101,222,821	10,328,626	0	0	32,231,377	0	0	2,277,142	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	146,059,966	101,222,821	10,328,626	0	0	32,231,377	0	0	2,277,142	0
14. Claims Adjustment Expenses.....	3,119,717	2,257,358	184,637	0	0	637,772	0	0	39,950	0
15. General Administrative Expenses.....	21,748,761	16,880,557	930,257	0	0	3,701,747	0	0	236,200	0
16. Increase in Reserves for A&H contracts.....	175,438	175,438	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	171,103,882	120,536,174	11,443,520	0	0	36,570,896	0	0	2,553,292	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	14,429,748	6,473,006	2,259,467	0	0	5,579,108	0	0	118,167	0
19. Net Investments Gains / (Losses).....	2,073,205	1,419,237	153,120	0	0	470,996	0	0	29,852	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	16,502,953	7,892,243	2,412,587	0	0	6,050,104	0	0	148,019	0
22. Federal and foreign income taxes incurred.....	4,205,586	2,011,246	614,820	0	0	1,541,799	0	0	37,721	0
23. NET INCOME/(LOSS) (L21 less L22).....	12,297,367	5,880,997	1,797,767	0	0	4,508,305	0	0	110,298	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		4,239	(Examples of non-taxable enrollees are State of Texas enrollees and Federal employees.)			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		12,787				0				

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2011**

OF THE **Aetna Health Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION ION / 2. DIVISION **CONSOLIDATED**

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)			4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	185,443	118,677	4,557	0	0	49,396	0	0	12,813	0
2. MEMBER MONTHS.....	556,854	355,704	13,696	0	0	149,535	0	0	37,919	0
3. Direct Premium Income.....	186,854,569	127,831,737	13,702,987	0	0	42,648,386	0	XXXXXXXX	2,671,459	0
4. Net Premium Income.....	186,854,569	127,831,737	13,702,987	0	0	42,648,386	0	0	2,671,459	0
5. Change in unearned premium reserve and reserve for rate credits.....	(1,320,939)	(822,557)	0	0	0	(498,382)	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	185,533,630	127,009,180	13,702,987	0	0	42,150,004	0	0	2,671,459	0
11. Hospital & Medical Benefits.....	146,059,966	101,222,821	10,328,626	0	0	32,231,377	0	0	2,277,142	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	146,059,966	101,222,821	10,328,626	0	0	32,231,377	0	0	2,277,142	0
14. Claims Adjustment Expenses.....	3,119,717	2,257,358	184,637	0	0	637,772	0	0	39,950	0
15. General Administrative Expenses.....	21,748,761	16,880,557	930,257	0	0	3,701,747	0	0	236,200	0
16. Increase in Reserves for A&H contracts.....	175,438	175,438	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	171,103,882	120,536,174	11,443,520	0	0	36,570,896	0	0	2,553,292	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	14,429,748	6,473,006	2,259,467	0	0	5,579,108	0	0	118,167	0
19. Net Investments Gains / (Losses).....	2,073,205	1,419,237	153,120	0	0	470,996	0	0	29,852	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	16,502,953	7,892,243	2,412,587	0	0	6,050,104	0	0	148,019	0
22. Federal and foreign income taxes incurred.....	4,205,586	2,011,246	614,820	0	0	1,541,799	0	0	37,721	0
23. NET INCOME/(LOSS) (L21 less L22).....	12,297,367	5,880,997	1,797,767	0	0	4,508,305	0	0	110,298	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		4,239	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		12,787	of Texas enrollees and Federal employees.)			0				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **MARCH 31, 2011**

OF THE **Aetna Health Inc.**

REPORT FOR DIVISION: **Houston**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	58,926	35	57,377	0	0	0	0	1,514	0	0
2. First Quarter	56,861	33	55,563	0	0	0	0	1,265	0	0
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	170,966	102	167,062	0	0	0	0	3,802	0	0
Total Member Ambulatory Encounters for Year:										
7. Physician	266,439	156	256,793	0	0	0	0	9,490	0	0
8. Non-Physician	31,990	20	31,264	0	0	0	0	706	0	0
9. Total	298,429	176	288,057	0	0	0	0	10,196	0	0
10. Hospital Patient Days Incurred	4,057	6	3,394	0	0	0	0	657	0	0
11. Number of Inpatient Admissions	911	2	809	0	0	0	0	100	0	0
12. Health Premiums Written	65,793,529	112,419	61,812,588	0	0	0	0	3,868,522	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	65,373,437	112,419	61,392,496	0	0	0	0	3,868,522	0	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	51,186,174	223,569	47,535,903	0	0	0	0	3,426,702	0	0
18. Amount Incurred for Provision of Health Care Services	52,045,726	282,028	48,358,765	0	0	0	0	3,404,933	0	0

TEXAS HMO SUPPLEMENT

OF THE **Aetna Health Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Houston
(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter **X**

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)			4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	56,861	55,596	1,265	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	170,966	167,164	3,802	0	0	0	0	0	0	0
3. Direct Premium Income.....	65,793,529	61,925,007	3,868,522	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	65,793,529	61,925,007	3,868,522	0	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(420,092)	(420,092)	0	0	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	65,373,437	61,504,915	3,868,522	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	52,045,726	48,640,793	3,404,933	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	52,045,726	48,640,793	3,404,933	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	1,145,265	1,093,140	52,125	0	0	0	0	0	0	0
15. General Administrative Expenses.....	8,437,128	8,174,505	262,623	0	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	175,438	175,438	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	61,803,557	58,083,876	3,719,681	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	3,569,880	3,421,039	148,841	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	730,501	687,273	43,228	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	4,300,381	4,108,312	192,069	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	1,095,902	1,046,955	48,947	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	3,204,479	3,061,357	143,122	0	0	0	0	0	0	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

TEXAS HMO SUPPLEMENT

OF THE **Aetna Health Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Houston
(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date **X**

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)			4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	56,861	55,596	1,265	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	170,966	167,164	3,802	0	0	0	0	0	0	0
3. Direct Premium Income.....	65,793,529	61,925,007	3,868,522	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	65,793,529	61,925,007	3,868,522	0	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(420,092)	(420,092)	0	0	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	65,373,437	61,504,915	3,868,522	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	52,045,726	48,640,793	3,404,933	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	52,045,726	48,640,793	3,404,933	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	1,145,265	1,093,140	52,125	0	0	0	0	0	0	0
15. General Administrative Expenses.....	8,437,128	8,174,505	262,623	0	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	175,438	175,438	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	61,803,557	58,083,876	3,719,681	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	3,569,880	3,421,039	148,841	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	730,501	687,273	43,228	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	4,300,381	4,108,312	192,069	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	1,095,902	1,046,955	48,947	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	3,204,479	3,061,357	143,122	0	0	0	0	0	0	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **MARCH 31, 2011**

OF THE **Aetna Health Inc.**

REPORT FOR DIVISION: **San Antonio**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	48,784	9	19,938	0	0	0	3,245	2,353	23,239	0
2. First Quarter	47,442	9	19,202	0	0	0	2,841	1,516	23,874	0
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	142,498	27	57,226	0	0	0	8,553	4,590	72,102	0
Total Member Ambulatory Encounters for Year:										
7. Physician	142,034	22	49,245	0	0	0	9,615	8,550	74,602	0
8. Non-Physician	19,475	2	5,406	0	0	0	1,910	1,082	11,075	0
9. Total	161,509	24	54,651	0	0	0	11,525	9,632	85,677	0
10. Hospital Patient Days Incurred	4,024	0	609	0	0	0	207	632	2,576	0
11. Number of Inpatient Admissions	1,256	0	165	0	0	0	59	113	919	0
12. Health Premiums Written	41,375,887	13,812	12,327,240	0	0	0	4,314,927	4,785,687	19,934,221	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	41,050,459	13,812	12,253,347	0	0	0	4,314,621	4,785,687	19,682,992	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	33,406,000	8,807	11,434,929	0	0	0	4,352,473	4,248,487	13,361,304	0
18. Amount Incurred for Provision of Health Care Services	32,027,887	6,704	11,986,743	0	0	0	4,005,882	3,501,973	12,526,585	0

TEXAS HMO SUPPLEMENT

OF THE **Aetna Health Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

San Antonio

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter **X**

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)			4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	47,442	15,394	1,516	0	0	23,874	0	0	6,658	0
2. MEMBER MONTHS.....	142,498	46,187	4,590	0	0	72,102	0	0	19,619	0
3. Direct Premium Income.....	41,375,887	15,392,015	4,785,687	0	0	19,934,221	0	XXXXXXXX	1,263,964	0
4. Net Premium Income.....	41,375,887	15,392,015	4,785,687	0	0	19,934,221	0	0	1,263,964	0
5. Change in unearned premium reserve and reserve for rate credits.....	(325,428)	(74,199)	0	0	0	(251,229)	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	41,050,459	15,317,816	4,785,687	0	0	19,682,992	0	0	1,263,964	0
11. Hospital & Medical Benefits.....	32,027,887	15,018,489	3,501,973	0	0	12,526,585	0	0	980,840	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	32,027,887	15,018,489	3,501,973	0	0	12,526,585	0	0	980,840	0
14. Claims Adjustment Expenses.....	653,454	272,246	64,483	0	0	297,823	0	0	18,902	0
15. General Administrative Expenses.....	4,201,128	2,035,863	324,887	0	0	1,728,623	0	0	111,755	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	36,882,469	17,326,598	3,891,343	0	0	14,553,031	0	0	1,111,497	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	4,167,990	(2,008,782)	894,344	0	0	5,129,961	0	0	152,467	0
19. Net Investments Gains / (Losses).....	458,709	171,165	53,477	0	0	219,943	0	0	14,124	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	4,626,699	(1,837,617)	947,821	0	0	5,349,904	0	0	166,591	0
22. Federal and foreign income taxes incurred.....	1,179,061	(468,295)	241,541	0	0	1,363,361	0	0	42,454	0
23. NET INCOME/(LOSS) (L21 less L22).....	3,447,638	(1,369,322)	706,280	0	0	3,986,543	0	0	124,137	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		2,841	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		8,553	of Texas enrollees and Federal employees.)			0				

TEXAS HMO SUPPLEMENT

OF THE **Aetna Health Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

San Antonio
 (Location)

**EXHIBIT II (Filed Annually and Quarterly)
 ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date **X**

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)			4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	47,442	15,394	1,516	0	0	23,874	0	0	6,658	0
2. MEMBER MONTHS.....	142,498	46,187	4,590	0	0	72,102	0	0	19,619	0
3. Direct Premium Income.....	41,375,887	15,392,015	4,785,687	0	0	19,934,221	0	XXXXXXXX	1,263,964	0
4. Net Premium Income.....	41,375,887	15,392,015	4,785,687	0	0	19,934,221	0	0	1,263,964	0
5. Change in unearned premium reserve and reserve for rate credits.....	(325,428)	(74,199)	0	0	0	(251,229)	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	41,050,459	15,317,816	4,785,687	0	0	19,682,992	0	0	1,263,964	0
11. Hospital & Medical Benefits.....	32,027,887	15,018,489	3,501,973	0	0	12,526,585	0	0	980,840	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	32,027,887	15,018,489	3,501,973	0	0	12,526,585	0	0	980,840	0
14. Claims Adjustment Expenses.....	653,454	272,246	64,483	0	0	297,823	0	0	18,902	0
15. General Administrative Expenses.....	4,201,128	2,035,863	324,887	0	0	1,728,623	0	0	111,755	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	36,882,469	17,326,598	3,891,343	0	0	14,553,031	0	0	1,111,497	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	4,167,990	(2,008,782)	894,344	0	0	5,129,961	0	0	152,467	0
19. Net Investments Gains / (Losses).....	458,709	171,165	53,477	0	0	219,943	0	0	14,124	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	4,626,699	(1,837,617)	947,821	0	0	5,349,904	0	0	166,591	0
22. Federal and foreign income taxes incurred.....	1,179,061	(468,295)	241,541	0	0	1,363,361	0	0	42,454	0
23. NET INCOME/(LOSS) (L21 less L22).....	3,447,638	(1,369,322)	706,280	0	0	3,986,543	0	0	124,137	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		2,841	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		8,553	of Texas enrollees and Federal employees.)			0				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **MARCH 31, 2011**

OF THE **Aetna Health Inc.**

REPORT FOR DIVISION: **Austin**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	11,622	7	9,940	0	0	0	1,614	61	0	0
2. First Quarter	10,307	7	8,831	0	0	0	1,398	71	0	0
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	30,612	21	26,162	0	0	0	4,234	195	0	0
Total Member Ambulatory Encounters for Year:										
7. Physician	30,211	20	25,189	0	0	0	4,722	280	0	0
8. Non-Physician	4,996	3	4,115	0	0	0	838	40	0	0
9. Total	35,207	23	29,304	0	0	0	5,560	320	0	0
10. Hospital Patient Days Incurred	565	0	420	0	0	0	141	4	0	0
11. Number of Inpatient Admissions	144	0	111	0	0	0	32	1	0	0
12. Health Premiums Written	11,121,725	17,087	8,691,333	0	0	0	2,308,288	105,017	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	11,064,861	17,087	8,634,632	0	0	0	2,308,125	105,017	0	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	8,531,369	2,220	6,064,676	0	0	0	2,403,135	61,338	0	0
18. Amount Incurred for Provision of Health Care Services	8,797,583	1,802	6,283,828	0	0	0	2,491,115	20,838	0	0

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2011**

TEXAS HMO SUPPLEMENT

OF THE **Aetna Health Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Austin

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter **X**

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)			4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	10,307	10,236	71	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	30,612	30,417	195	0	0	0	0	0	0	0
3. Direct Premium Income.....	11,121,725	11,016,708	105,017	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	11,121,725	11,016,708	105,017	0	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(56,864)	(56,864)	0	0	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	11,064,861	10,959,844	105,017	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	8,797,583	8,776,745	20,838	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	8,797,583	8,776,745	20,838	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	196,206	194,791	1,415	0	0	0	0	0	0	0
15. General Administrative Expenses.....	1,463,782	1,456,653	7,129	0	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	10,457,571	10,428,189	29,382	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	607,290	531,655	75,635	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	123,642	122,469	1,173	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	730,932	654,124	76,808	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	186,270	166,696	19,574	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	544,662	487,428	57,234	0	0	0	0	0	0	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		1,398	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		4,234	of Texas enrollees and Federal employees.)			0				

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2011**

TEXAS HMO SUPPLEMENT

OF THE **Aetna Health Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Austin

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date **X**

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)			4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	10,307	10,236	71	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	30,612	30,417	195	0	0	0	0	0	0	0
3. Direct Premium Income.....	11,121,725	11,016,708	105,017	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	11,121,725	11,016,708	105,017	0	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(56,864)	(56,864)	0	0	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	11,064,861	10,959,844	105,017	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	8,797,583	8,776,745	20,838	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	8,797,583	8,776,745	20,838	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	196,206	194,791	1,415	0	0	0	0	0	0	0
15. General Administrative Expenses.....	1,463,782	1,456,653	7,129	0	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	10,457,571	10,428,189	29,382	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	607,290	531,655	75,635	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	123,642	122,469	1,173	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	730,932	654,124	76,808	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	186,270	166,696	19,574	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	544,662	487,428	57,234	0	0	0	0	0	0	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		1,398	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		4,234	of Texas enrollees and Federal employees.)			0				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **MARCH 31, 2011**

OF THE **Aetna Health Inc.**

REPORT FOR DIVISION: **Corpus Christi**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	280	0	277	0	0	0	0	3	0	0
2. First Quarter	388	0	387	0	0	0	0	1	0	0
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	1,175	0	1,172	0	0	0	0	3	0	0
Total Member Ambulatory Encounters for Year:										
7. Physician	812	0	808	0	0	0	0	4	0	0
8. Non-Physician	126	0	126	0	0	0	0	0	0	0
9. Total	938	0	934	0	0	0	0	4	0	0
10. Hospital Patient Days Incurred	33	0	33	0	0	0	0	0	0	0
11. Number of Inpatient Admissions	8	0	8	0	0	0	0	0	0	0
12. Health Premiums Written	430,990	0	424,135	0	0	0	0	6,855	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	428,102	0	421,247	0	0	0	0	6,855	0	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	310,506	0	314,541	0	0	0	0	(4,035)	0	0
18. Amount Incurred for Provision of Health Care Services	362,192	0	368,144	0	0	0	0	(5,952)	0	0

TEXAS HMO SUPPLEMENT

OF THE **Aetna Health Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Corpus Christi
 (Location)

**EXHIBIT II (Filed Annually and Quarterly)
 ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter **X**

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)			4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	388	387	1	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	1,175	1,172	3	0	0	0	0	0	0	0
3. Direct Premium Income.....	430,990	424,135	6,855	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	430,990	424,135	6,855	0	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(2,888)	(2,888)	0	0	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	428,102	421,247	6,855	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	362,192	368,144	(5,952)	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	362,192	368,144	(5,952)	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	7,579	7,487	92	0	0	0	0	0	0	0
15. General Administrative Expenses.....	56,453	55,987	466	0	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	426,224	431,618	(5,394)	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	1,878	(10,371)	12,249	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	4,784	4,708	76	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	6,662	(5,663)	12,325	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	1,698	(1,443)	3,141	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	4,964	(4,220)	9,184	0	0	0	0	0	0	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

TEXAS HMO SUPPLEMENT

OF THE **Aetna Health Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Corpus Christi
 (Location)

**EXHIBIT II (Filed Annually and Quarterly)
 ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date **X**

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)			4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	388	387	1	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	1,175	1,172	3	0	0	0	0	0	0	0
3. Direct Premium Income.....	430,990	424,135	6,855	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	430,990	424,135	6,855	0	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(2,888)	(2,888)	0	0	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	428,102	421,247	6,855	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	362,192	368,144	(5,952)	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	362,192	368,144	(5,952)	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	7,579	7,487	92	0	0	0	0	0	0	0
15. General Administrative Expenses.....	56,453	55,987	466	0	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	426,224	431,618	(5,394)	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	1,878	(10,371)	12,249	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	4,784	4,708	76	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	6,662	(5,663)	12,325	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	1,698	(1,443)	3,141	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	4,964	(4,220)	9,184	0	0	0	0	0	0	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **MARCH 31, 2011**

OF THE **Aetna Health Inc.**

REPORT FOR DIVISION: **EI Paso**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	7,088	1	7,086	0	0	0	0	1	0	0
2. First Quarter	6,436	0	6,435	0	0	0	0	1	0	0
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	19,858	0	19,855	0	0	0	0	3	0	0
Total Member Ambulatory Encounters for Year:										
7. Physician	13,433	0	13,428	0	0	0	0	5	0	0
8. Non-Physician	1,316	0	1,316	0	0	0	0	0	0	0
9. Total	14,749	0	14,744	0	0	0	0	5	0	0
10. Hospital Patient Days Incurred	321	0	321	0	0	0	0	0	0	0
11. Number of Inpatient Admissions	91	0	91	0	0	0	0	0	0	0
12. Health Premiums Written	5,746,676	0	5,739,866	0	0	0	0	6,810	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	5,703,160	0	5,696,350	0	0	0	0	6,810	0	0
Property/Casualty 16. Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	4,160,329	0	4,161,592	0	0	0	0	(1,263)	0	0
18. Amount Incurred for Provision of Health Care Services	3,911,104	0	3,912,742	0	0	0	0	(1,638)	0	0

TEXAS HMO SUPPLEMENT

OF THE **Aetna Health Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

El Paso

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter **X**

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)			4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	6,436	6,435	1	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	19,858	19,855	3	0	0	0	0	0	0	0
3. Direct Premium Income.....	5,746,676	5,739,866	6,810	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	5,746,676	5,739,866	6,810	0	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(43,516)	(43,516)	0	0	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	5,703,160	5,696,350	6,810	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	3,911,104	3,912,742	(1,638)	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	3,911,104	3,912,742	(1,638)	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	101,334	101,242	92	0	0	0	0	0	0	0
15. General Administrative Expenses.....	757,554	757,092	462	0	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	4,769,992	4,771,076	(1,084)	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	933,168	925,274	7,894	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	63,729	63,653	76	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	996,897	988,927	7,970	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	254,048	252,017	2,031	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	742,849	736,910	5,939	0	0	0	0	0	0	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

TEXAS HMO SUPPLEMENT

OF THE **Aetna Health Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

El Paso

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date **X**

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)			4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	6,436	6,435	1	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	19,858	19,855	3	0	0	0	0	0	0	0
3. Direct Premium Income.....	5,746,676	5,739,866	6,810	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	5,746,676	5,739,866	6,810	0	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(43,516)	(43,516)	0	0	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	5,703,160	5,696,350	6,810	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	3,911,104	3,912,742	(1,638)	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	3,911,104	3,912,742	(1,638)	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	101,334	101,242	92	0	0	0	0	0	0	0
15. General Administrative Expenses.....	757,554	757,092	462	0	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	4,769,992	4,771,076	(1,084)	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	933,168	925,274	7,894	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	63,729	63,653	76	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	996,897	988,927	7,970	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	254,048	252,017	2,031	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	742,849	736,910	5,939	0	0	0	0	0	0	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **MARCH 31, 2011**

OF THE **Aetna Health Inc.**

REPORT FOR DIVISION: **Dallas**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	63,189	13	35,314	0	0	0	0	1,965	25,897	0
2. First Quarter	64,009	13	36,771	0	0	0	0	1,703	25,522	0
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	191,745	38	109,171	0	0	0	0	5,103	77,433	0
Total Member Ambulatory Encounters for Year:										
7. Physician	243,492	53	150,532	0	0	0	0	8,085	84,822	0
8. Non-Physician	37,313	7	20,733	0	0	0	0	808	15,765	0
9. Total	280,805	60	171,265	0	0	0	0	8,893	100,587	0
10. Hospital Patient Days Incurred	7,066	6	1,753	0	0	0	0	590	4,717	0
11. Number of Inpatient Admissions	2,088	2	429	0	0	0	0	113	1,544	0
12. Health Premiums Written	62,385,762	39,990	34,701,511	0	0	0	0	4,930,096	22,714,165	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	61,913,611	39,990	34,476,513	0	0	0	0	4,930,096	22,467,012	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	51,588,275	44,950	27,598,940	0	0	0	0	3,584,902	20,359,483	0
18. Amount Incurred for Provision of Health Care Services	48,915,474	37,642	25,764,568	0	0	0	0	3,408,472	19,704,792	0

TEXAS HMO SUPPLEMENT

OF THE **Aetna Health Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Dallas

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter **X**

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)			4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	64,009	30,629	1,703	0	0	25,522	0	0	6,155	0
2. MEMBER MONTHS.....	191,745	90,909	5,103	0	0	77,433	0	0	18,300	0
3. Direct Premium Income.....	62,385,762	33,334,006	4,930,096	0	0	22,714,165	0	XXXXXXXX	1,407,495	0
4. Net Premium Income.....	62,385,762	33,334,006	4,930,096	0	0	22,714,165	0	0	1,407,495	0
5. Change in unearned premium reserve and reserve for rate credits.....	(472,151)	(224,998)	0	0	0	(247,153)	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	61,913,611	33,109,008	4,930,096	0	0	22,467,012	0	0	1,407,495	0
11. Hospital & Medical Benefits.....	48,915,474	24,505,908	3,408,472	0	0	19,704,792	0	0	1,296,302	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	48,915,474	24,505,908	3,408,472	0	0	19,704,792	0	0	1,296,302	0
14. Claims Adjustment Expenses.....	1,015,879	588,452	66,430	0	0	339,949	0	0	21,048	0
15. General Administrative Expenses.....	6,832,716	4,400,457	334,690	0	0	1,973,124	0	0	124,445	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	56,764,069	29,494,817	3,809,592	0	0	22,017,865	0	0	1,441,795	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	5,149,542	3,614,191	1,120,504	0	0	449,147	0	0	(34,300)	0
19. Net Investments Gains / (Losses).....	691,840	369,969	55,090	0	0	251,053	0	0	15,728	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	5,841,382	3,984,160	1,175,594	0	0	700,200	0	0	(18,572)	0
22. Federal and foreign income taxes incurred.....	1,488,607	1,015,316	299,586	0	0	178,438	0	0	(4,733)	0
23. NET INCOME/(LOSS) (L21 less L22).....	4,352,775	2,968,844	876,008	0	0	521,762	0	0	(13,839)	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

TEXAS HMO SUPPLEMENT

OF THE **Aetna Health Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Dallas

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date **X**

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)			4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	64,009	30,629	1,703	0	0	25,522	0	0	6,155	0
2. MEMBER MONTHS.....	191,745	90,909	5,103	0	0	77,433	0	0	18,300	0
3. Direct Premium Income.....	62,385,762	33,334,006	4,930,096	0	0	22,714,165	0	XXXXXXXX	1,407,495	0
4. Net Premium Income.....	62,385,762	33,334,006	4,930,096	0	0	22,714,165	0	0	1,407,495	0
5. Change in unearned premium reserve and reserve for rate credits.....	(472,151)	(224,998)	0	0	0	(247,153)	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	61,913,611	33,109,008	4,930,096	0	0	22,467,012	0	0	1,407,495	0
11. Hospital & Medical Benefits.....	48,915,474	24,505,908	3,408,472	0	0	19,704,792	0	0	1,296,302	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	48,915,474	24,505,908	3,408,472	0	0	19,704,792	0	0	1,296,302	0
14. Claims Adjustment Expenses.....	1,015,879	588,452	66,430	0	0	339,949	0	0	21,048	0
15. General Administrative Expenses.....	6,832,716	4,400,457	334,690	0	0	1,973,124	0	0	124,445	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	56,764,069	29,494,817	3,809,592	0	0	22,017,865	0	0	1,441,795	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	5,149,542	3,614,191	1,120,504	0	0	449,147	0	0	(34,300)	0
19. Net Investments Gains / (Losses).....	691,840	369,969	55,090	0	0	251,053	0	0	15,728	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	5,841,382	3,984,160	1,175,594	0	0	700,200	0	0	(18,572)	0
22. Federal and foreign income taxes incurred.....	1,488,607	1,015,316	299,586	0	0	178,438	0	0	(4,733)	0
23. NET INCOME/(LOSS) (L21 less L22).....	4,352,775	2,968,844	876,008	0	0	521,762	0	0	(13,839)	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				