

**Department of Managed Health Care/Department of Insurance  
Medical Loss Ratio Reporting Form  
Dental Coverage**

<b>1. MLR Reporting Year</b>	<b>2017</b>
<b>2. Enter DMHC Health Plan ID. Insurers may leave this field blank</b>	<b>0</b>
<b>3. Legal Name</b>	<b>Aetna Life Insurance Company</b>
<b>4. DBA</b>	<b>0</b>
<b>5. Federal Tax Exempt Status? Please enter Yes or No</b>	<b>NO</b>

**Cell Key:**

**Blank cells require input from Health plan or Health insurer**

Version 4.22.15

Revised Version 5.26.15

Revised Version 4.15.16 corrected dates for Cycle Year  
(CY)2015-2016 on TABs Parts 1, 2 and 4.

Revised Version 5.10.17 12/31 and 3/31 Columns years to be  
auto populated on TABs Parts 1 and 2.

Health Plan ID  
 0  
 Legal Name  
 Aetna Life Insurance Company  
 dBA  
 0  
 MLR Reporting Year  
 2017

Federal Tax Exempt  
 NO

# Part 1

		Health Insurance Coverage							
		DHMO Products							
		Individual		Small Group		Large Group		Individual	
		Total as of 12/31/2017	Total as of 3/31/2018	Total as of 12/31/2017	Total as of 3/31/2018	Total as of 12/31/2017	Total as of 3/31/2018	Total as of 12/31/2017	Total as of 3/31/2018
		1	2	3	4	5	6	7	8
<b>Part 1</b> <b>NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.</b>									
1.	Premium								
	1.1 Total direct premium earned	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2.	Claims								
	2.1 Total incurred claims (MLR Form Part 2, Line 2.11)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3.	Federal and State Taxes and Licensing or Regulatory Fees								
	3.1 Federal taxes and assessments incurred by the reporting health plan or health insurer during the MLR reporting year								
	3.1 a Federal income taxes deductible from premium in MLR calculations								
	3.1 b Other Federal Taxes (other than income tax) and assessments deductible from premium								
	3.2 State insurance, premium and other taxes incurred by the reporting health plan or health insurer during the MLR reporting year (deductible from premium in MLR calculation)								
	3.2 a State income, excise, business, and other taxes								
	3.2 b State premium taxes								
	3.2 c Community benefit expenditures								
	3.3 Regulatory authority licenses and fees								
	3.4 Total Federal and State Taxes and fees to be excluded from premium	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4.	Non-Claims Costs								
	4.1 Direct sales salaries and benefits								
	4.2 Agents and brokers fees and commissions								
	4.3 Other taxes								
	4.3a Taxes and assessments (exclude amounts reported in Section 3 or Line 10)								
	4.3b Fines and penalties of regulatory authorities (exclude amounts reported in Line 3.3)								
	4.4 Other general and administrative expenses								
	4.5 Total non-claims costs	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5.	Other Indicators or information								
	5.1 Number of covered lives								
	5.2 Member months								
	5.3 Number of life-years								
		Grand Total as of 12/31/2017 for ALL markets in col. 1-12.							
6.	Net investment income and other gain / (loss)								
7.	Other Federal income taxes (exclude taxes on Line 3.1a and 3.1b)								

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Department of Managed Health Care/Department of Insurance  
 Medical Loss Ratio Reporting Form: Dental Coverage  
 Part 1 - Summary of Data

Health Plan ID  
 0  
 Legal Name  
 Aetna Life Insurance Company  
 dBA  
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 MLR Reporting Year  
 2017

Part 1 NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.		Health Insurance Coverage			
		DPPO & Indemnity Products			
		Small Group		Large Group	
		Total as of 12/31/2017	Total as of 3/31/2018	Total as of 12/31/2017	Total as of 3/31/2018
		9	10	11	12
1.	Premium				
1.1	Total direct premium earned	\$ 7,829,242	\$ 7,829,242	\$ 148,755,597	\$ 148,755,597
2.	Claims				
2.1	Total incurred claims (MLR Form Part 2, Line 2.11)	\$ 6,088,394	\$ 4,564,794	\$ 125,100,171	\$ 93,794,261
3.	Federal and State Taxes and Licensing or Regulatory Fees				
3.1	Federal taxes and assessments incurred by the reporting health plan or health insurer during the MLR reporting year				
3.1 a	Federal income taxes deductible from premium in MLR calculations	\$ 170,322	\$ 703,582	\$ (61,130)	\$ 10,895,938
3.1 b	Other Federal Taxes (other than income tax) and assessments deductible from premium	\$ 100	\$ 100	\$ 1,907	\$ 1,907
3.2	State insurance, premium and other taxes incurred by the reporting health plan or health insurer during the MLR reporting year (deductible from premium in MLR calculation)				
3.2 a	State income, excise, business, and other taxes	\$ 14,547	\$ 14,547	\$ 276,391	\$ 276,391
3.2 b	State premium taxes	\$ 108,948	\$ 108,948	\$ 2,070,012	\$ 2,070,012
3.2 c	Community benefit expenditures				
3.3	Regulatory authority licenses and fees	\$ 215	\$ 215	\$ 4,094	\$ 4,094
3.4	Total Federal and State Taxes and fees to be excluded from premium	\$ 294,132	\$ 827,392	\$ 2,291,274	\$ 13,248,342
4.	Non-Claims Costs				
4.1	Direct sales salaries and benefits	\$ 55,706	\$ 55,706	\$ 1,058,418	\$ 1,058,418
4.2	Agents and brokers fees and commissions	\$ 422,449	\$ 422,449	\$ 8,026,524	\$ 8,026,524
4.3	Other taxes				
4.3a	Taxes and assessments (exclude amounts reported in Section 3 or Line 10)	\$ 21,036	\$ 21,036	\$ 399,684	\$ 399,684
4.3b	Fines and penalties of regulatory authorities (exclude amounts reported in Line 3.3)				
4.4	Other general and administrative expenses	\$ 631,213	\$ 631,213	\$ 11,993,055	\$ 11,993,055
4.5	Total non-claims costs	\$ 1,130,404	\$ 1,130,404	\$ 21,477,681	\$ 21,477,681
5.	Other Indicators or information				
5.1	Number of covered lives	17,409	17,409	305,434	305,434
5.2	Member months	236,208	236,208	3,655,490	3,655,490
5.3	Number of life-years	19,684	19,684	304,624	304,624
6.	Net investment income and other gain / (loss)				
7.	Other Federal income taxes (exclude taxes on Line 3.1a and 3.1b)				

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Health Plan ID  
 0  
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 MLR Reporting Year  
 2017

# Part 2

		Health Insurance Coverage						Health Insurance		
		DHMO Products						DPPO & Indemnity		
		Individual		Small Group		Large Group		Individual		Small
		Total as of 12/31/2017	Total as of 3/31/2018	Total as of 12/31/2017	Total as of 3/31/2018	Total as of 12/31/2017	Total as of 3/31/2018	Total as of 12/31/2017	Total as of 12/31/2017	
		1	2	3	4	5	6	7	8	9
<b>Part 2</b> <b>NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.</b>										
1.	Premium:									
	1.1 Direct premium written									\$ 7,838,444
	1.2 Unearned premium prior year									\$ 426
	1.3 Unearned premium MLR Reporting year									\$ 446
	1.4 Premium balances written off									\$ 9,182
2.	Claims:									
	2.1 Claims Paid									
	2.1a Claims paid during the MLR reporting year regardless of incurred date									\$ 5,640,308
	2.1b Claims incurred only during the MLR reporting year, paid through 3/31 of the following year									
	2.2 Direct claim liability									
	2.2a Liability as of 12/31 of MLR reporting year for all claims regardless of incurred date									\$ 446,416
	2.2b Liability for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year									
	2.3 Direct claim liability prior year									
	2.4 Direct claim reserves									
	2.4a Reserves as of 12/31 of MLR reporting year for all claims regardless of incurred date									
	2.4b Reserves for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year									
	2.5 Direct claim reserves prior year									
	2.6 Experience rating refunds (rate credits) paid									
	2.6a Experience rating refunds, with all incurred dates, paid in the MLR reporting year									
	2.6b Experience rating refunds associated with premium earned only in the reporting year and paid through 3/31 of the following year									
	2.7 Reserve for experience rating refunds (rate credits)									
	2.7a Reserved in MLR reporting year regardless of incurred date									\$ 1,404
	2.7b Reserves specific to the MLR reporting year through 3/31 of the following year									
	2.8 Reserve for experience rating refunds (rate credits) prior year									\$ (266)
	2.9 Incurred dental incentive pool and bonuses									
	2.9a Paid dental incentive pools and bonuses MLR Reporting year									
	2.9b Accrued dental incentive pools and bonuses MLR Reporting year									
	2.9c Accrued dental incentive pools and bonuses prior year									
2.10	Contingent benefit and lawsuit reserves									
2.11	Total incurred claims	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,088,394

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Department of Managed Health Care/Department of Insurance  
 Medical Loss Ratio Reporting Form: Dental Coverage  
 Part 2 - Premium and Claims

Health Plan ID  
 0  
 Legal Name  
 Aetna Life Insurance Company  
 dBA  
 0  
 MLR Reporting Year  
 2017

		Dental Coverage		
		Individual Products		
		Group	Large Group	
		Total as of 3/31/2018	Total as of 12/31/2017	Total as of 3/31/2018
		10	11	12
<b>Part 2</b>				
<b>NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.</b>				
1.	Premium:			
1.1	Direct premium written	\$ 7,838,444	\$ 148,930,431	\$ 148,930,431
1.2	Unearned premium prior year	\$ 426	\$ 8,101	\$ 8,101
1.3	Unearned premium MLR Reporting year	\$ 446	\$ 8,482	\$ 8,482
1.4	Premium balances written off	\$ 9,182	\$ 174,453	\$ 174,453
2.	Claims:			
2.1	Claims Paid		\$ 115,893,199	
2.1a	Claims paid during the MLR reporting year regardless of incurred date		\$ 115,893,199	
2.1b	Claims incurred only during the MLR reporting year, paid through 3/31 of the following year	\$ 4,487,476		\$ 92,205,593
2.2	Direct claim liability			
2.2a	Liability as of 12/31 of MLR reporting year for all claims regardless of incurred date		\$ 9,172,660	
2.2b	Liability for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year	\$ 77,063		\$ 1,583,437
2.3	Direct claim liability prior year			
2.4	Direct claim reserves			
2.4a	Reserves as of 12/31 of MLR reporting year for all claims regardless of incurred date			
2.4b	Reserves for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year			
2.5	Direct claim reserves prior year			
2.6	Experience rating refunds (rate credits) paid			
2.6a	Experience rating refunds, with all incurred dates, paid in the MLR reporting year			
2.6b	Experience rating refunds associated with premium earned only in the reporting year and paid through 3/31 of the following year			
2.7	Reserve for experience rating refunds (rate credits)			
2.7a	Reserved in MLR reporting year regardless of incurred date		\$ 28,839	
2.7b	Reserves specific to the MLR reporting year through 3/31 of the following year	\$ 255		\$ 5,231
2.8	Reserve for experience rating refunds (rate credits) prior year		\$ (5,473)	
2.9	Incurred dental incentive pool and bonuses			
2.9a	Paid dental incentive pools and bonuses MLR Reporting year			
2.9b	Accrued dental incentive pools and bonuses MLR Reporting year			
2.9c	Accrued dental incentive pools and bonuses prior year			
2.10	Contingent benefit and lawsuit reserves			
2.11	Total incurred claims	\$ 4,564,794	\$ 125,100,171	\$ 93,794,261

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## Part 3

Description of Expense Element (by Type)	NEW	Detailed Description of Expense Allocation Methods
<b>1. Incurred Claims</b>	<b>2</b>	<b>3</b>
Including paid claims, claim liabilities, experience rating refunds, reserves for experience rating refunds, dental incentive pools and bonuses.		The overall allocation of incurred claims (which includes lines 2.1 through 2.11) is based on a two part method: (1) paid claims are directly assigned to each plan and market (MLR pool) and (2) the reserves that complete the paid claims into incurred claims, as well as other provider liabilities, were
<b>2. Federal and State Taxes and Licensing or Regulatory Fees</b>		
<b>2.a Federal taxes and assessments</b> comprised of federal income taxes (FIT) and the Affordable Care Act section 9010 fee. Line 3.1 includes Federal taxes and assessments allocated to health insurance coverage reported under section 2718 of the PHS Act. The only federal taxes excluded from line 3.1 are FIT on investment income and capital gains as required by regulation (45 CFR Section 158, Preamble ii C.8.)		Federal Income Taxes: The FIT included on line 3.1 is computed by applying the statutory income tax rate to the pretax income derived from the Dental coverage. Pretax income or loss is derived from California dental premiums less California dental claims and other allocated expenses. Expenses that are applicable to the dental coverage are allocated based upon a direct written premium ratio.  The Affordable Care Act section 9010 Fee: The ACA section 9010 fee included on line 3.1b equals the correct year fee accrued on the Annual Statement allocated based upon a premium ratio that excludes premiums from insurance coverage not subject to the ACA section 9010 fee.
<b>2.b State insurance, premium and other taxes</b> State insurance, premium and other taxes included on line 3.2.c comprised of premium taxes, payroll taxes, property taxes, franchise taxes, and other taxes and includes all State taxes allocated to health insurance coverage reported under section 2718 of the PHS Act. The only state taxes excluded from line 3.2 are certain sales taxes as required by regulation (45 CFR Section 158.162(b)(2)(iii)).		State Property, Franchise and Other Taxes: State payroll, property, franchise and other taxes included in line 3.2a are allocated to each market in each State based on a direct written premium ratio.  State Premium Taxes: Premium taxes included in line 3.2b are allocated to each health insurance
<b>2.c Community benefit expenditures</b>		Where applicable, expenses were allocated to state and market (MLR pools) based upon a direct written premium ratio.
<b>2.d Regulatory authority licenses and fees</b> Regulatory authority licenses and fees included on line 3.3 is comprised of state regulatory licenses and fees allocated to health insurance coverage reported under section 2718 of the PHS Act.		Where applicable, expenses were allocated to state and market (MLR pools) based upon a direct written premium ratio.
<b>3. Non-Claims costs</b>		
<b>3.a Direct sales salaries and benefits</b> Regulatory authority licenses and fees included on line 3.3 is comprised of state regulatory licenses and fees allocated to health insurance coverage reported under section 2718 of the PHS Act.		Regulatory authority licenses and fees included in line 3.3 are allocated to each market in each state based on a direct written premium ratio.
<b>3.b Agents and brokers fees and commissions</b> Including expense incurred by the issuer payable to a licensed agent, broker, or producer who is not an employee of the issuer in relation to the sale and solicitation of policies for the company.		Agent and broker fees and commissions are allocated to legal entity consistent with SSAP 70 and allocation methodologies used historically for other financial reporting purposes. Expenses are then directly assigned to each state and allocated to each market based upon percentage of fees and
<b>3.c Other taxes</b>		
<b>3.d Other general and administrative expenses</b>		Other general and administrative expenses are allocated to legal entity consistent with SSAP 70 and allocation methodologies used historically for other financial reporting purposes. Expenses are then allocated to each state and market (MLR pool) based upon a direct written premium ratio.

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Department of Managed Health Care/Department of Insurance  
 Medical Loss Ratio Reporting Form: Dental Coverage  
 Part 4 - MLR Calculation

Health Plan ID  
 0  
 Legal Name  
 Aetna Life Insurance Company  
 dBA  
 0  
 MLR Reporting Year  
 2017

# Part 4

Part 4		Health Insurance Coverage						
		Individual				DHMO Products		
						Small Group		
NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.		PY2	PY1	CY	Total	PY2	PY1	CY
		1	2	3	4	5	6	7
1.	Medical Loss Ratio Numerator							
1.1	Adjusted incurred claims as reported on MLR Form for prior year(s)			\$ -	\$ -			\$ -
1.2	Adjusted incurred claims as of 3/31 of the year following the MLR reporting year (Part 1 Line 2.1)							
1.3	MLR numerator (Line 1.2)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2.	Medical Loss Ratio Denominator							
2.1	Premium earned (Part 1 Line 1.1)			\$ -	\$ -			\$ -
2.2	Federal and State taxes and licensing or regulatory fees ( Part 1 Line 3.4)			\$ -	\$ -			\$ -
2.3	MLR Denominator (Line 2.1 - Line 2.2)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3.	3.1 Life-years (Part 1 Line 5.3)			0	0			0
4.	MLR Calculation (for Health plans or health insurers with at least 1,000 life years in the Total column of Line 3.1)							
4.1	MLR							Not Required to Calculate

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Department of Managed Health Care/Department of Insurance  
 Medical Loss Ratio Reporting Form: Dental Coverage  
 Part 4 - MLR Calculation

Health Plan ID  
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 MLR Reporting Year  
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		Large Group					Inc	
		Total	PY2	PY1	CY	Total	PY2	PY1
		8	9	10	11	12	13	14
<b>Part 4</b>								
<b>NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.</b>								
1.	Medical Loss Ratio Numerator							
1.1	Adjusted incurred claims as reported on MLR Form for prior year(s)							
1.2	Adjusted incurred claims as of 3/31 of the year following the MLR reporting year (Part 1 Line 2.1)	\$ -			\$ -	\$ -		
1.3	MLR numerator (Line 1.2)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2.	Medical Loss Ratio Denominator							
2.1	Premium earned (Part 1 Line 1.1)	\$ -			\$ -	\$ -		
2.2	Federal and State taxes and licensing or regulatory fees ( Part 1 Line 3.4)	\$ -			\$ -	\$ -		
2.3	MLR Denominator (Line 2.1 - Line 2.2)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3.	3.1 Life-years (Part 1 Line 5.3)	0			0	0		
4.	MLR Calculation (for Health plans or health insurers with at least 1,000 life years in the Total column of Line 3.1)							
4.1	MLR	Not Required to Calculate			Not Required to Calculate			

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Department of Managed Health Care/Department of Insurance  
 Medical Loss Ratio Reporting Form: Dental Coverage  
 Part 4 - MLR Calculation

Health Plan ID  
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		Health Insurance Coverage						
		DPP0 & Indemnity Products						
		Individual	Small Group					
		CY	Total	PY2	PY1	CY	Total	PY2
		15	16	17	18	19	20	21
<b>Part 4</b>								
<b>NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.</b>								
1.	Medical Loss Ratio Numerator							
1.1	Adjusted incurred claims as reported on MLR Form for prior year(s)							
1.2	Adjusted incurred claims as of 3/31 of the year following the MLR reporting year (Part 1 Line 2.1)	\$ -	\$ -	\$ 7,132,006	\$ 7,754,486	\$ 4,564,794	\$ 19,451,286	\$ 106,877,162
1.3	MLR numerator (Line 1.2)	\$ -	\$ -	\$ 7,132,006	\$ 7,754,486	\$ 4,564,794	\$ 19,451,286	\$ 106,877,162
2.	Medical Loss Ratio Denominator							
2.1	Premium earned (Part 1 Line 1.1)	\$ -	\$ -	\$ 11,854,144	\$ 11,746,507	\$ 7,829,242	\$ 31,429,893	\$ 118,137,589
2.2	Federal and State taxes and licensing or regulatory fees ( Part 1 Line 3.4)	\$ -	\$ -	\$ 1,406,944	\$ 1,238,057	\$ 827,392	\$ 3,472,393	\$ 1,256,877
2.3	MLR Denominator (Line 2.1 - Line 2.2)	\$ -	\$ -	\$ 10,447,200	\$ 10,508,450	\$ 7,001,850	\$ 27,957,500	\$ 116,880,712
3.	3.1 Life-years (Part 1 Line 5.3)	0	0			19,684	19,684	
4.	MLR Calculation (for Health plans or health insurers with at least 1,000 life years in the Total column of Line 3.1)							
4.1	MLR			Not Required to Calculate				69.6%

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Department of Managed Health Care/Department of Insurance  
 Medical Loss Ratio Reporting Form: Dental Coverage  
 Part 4 - MLR Calculation

Health Plan ID  
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 2017

Part 4			
<b>NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.</b>			
	PY1	CY	Total
	22	23	24
<b>Large Group</b>			
1. Medical Loss Ratio Numerator			
1.1 Adjusted incurred claims as reported on MLR Form for prior year(s)			
1.2 Adjusted incurred claims as of 3/31 of the year following the MLR reporting year (Part 1 Line 2.1)	\$ 130,249,319	\$ 93,794,261	\$ 330,920,742
1.3 MLR numerator (Line 1.2)	\$ 130,249,319	\$ 93,794,261	\$ 330,920,742
2. Medical Loss Ratio Denominator			
2.1 Premium earned (Part 1 Line 1.1)	\$ 135,084,823	\$ 148,755,597	\$ 401,978,009
2.2 Federal and State taxes and licensing or regulatory fees ( Part 1 Line 3.4)	\$ (336,991)	\$ 13,248,342	\$ 14,168,228
2.3 MLR Denominator (Line 2.1 - Line 2.2)	\$ 135,421,814	\$ 135,507,255	\$ 387,809,781
3. 3.1 Life-years (Part 1 Line 5.3)		304,624	304,624
4. MLR Calculation (for Health plans or health insurers with at least 1,000 life years in the Total column of Line 3.1)			
4.1 MLR			85.3%

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Department of Managed Health Care/Department of Insurance  
 Medical Loss Ratio Reporting Form: Dental Coverage  
 Part 5 - Additional Responses

Health Plan ID  
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# Part 5

	Tax Rate
<b>1. If a health plan or health insurer uses the highest premium tax rate in the State, the health plan or health insurer must report applicabe highest State health premium tax</b>	
<b>2. If the health plan or health insurer included deferred experience for prior year and excluded deferred experience for current year, provide the total direct written premium and total incurred claims for the deferred experience by market.</b>	
Deferred experience for prior year	
Deferred experience for current year	
<b>3. If the health plan or health insurer novated any business in the MLR reporting year effective during the reporting year provide the name of the entity to whom the business was sold or transferred and the date of the sale or transfer.</b>	
Name of Entity to whom business was sold or transferred	Effective date of sale or transfer

- Cell Keys:
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**Department of Managed Health Care  
Medical Loss Ratio Reporting Form: Dental Coverage  
Attestation**

**Health Plan ID**

0

**Legal Name**

Aetna Life Insurance Company

**dBA**

0

**MLR Reporting Year**

2017

## Attestation

*Attestation Statement*

The officers of this reporting Health plan being duly sworn, each attest that he/she is the described officer of the reporting Health plan, and that this MLR Reporting Form, the Company/Health plan Associations, and any supplemental submission that the Health plan includes are full and true statements of all the elements included therein for the MLR reporting year stated above, and that the MLR Reporting Form has been completed in accordance with the Department of Managed Health Care's guidance and reporting instructions, according to the best of his/her information, knowledge and belief. Furthermore, the scope of this attestation by the described officer includes any related electronic filings and postings for the MLR reporting year stated above and which are required by Department of Managed Health Care.

Chief Executive Officer/President

Chief Financial Officer