Building a Healthier World

2016 Corporate Social Responsibility Report

Covering the 2015 Reporting Year
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Aetna’s Corporate Social Responsibility Statement

As a health care company, we believe nothing is more important than helping people stay healthy. Aetna’s business strategy includes promoting sustainable practices nationally and internationally in furtherance of the health of our members, employees and communities in which we operate.

We are committed to limiting our own environmental impact by reducing our energy consumption, conserving environmental resources and adopting a sustainable approach to the management and maintenance of all real estate and business processes wherever possible. We also are committed to addressing the waste that accounts for one-third of all health care costs and threatens the long-term sustainability of our health care system. To that end, we will continue to work with health care professionals to further the development and availability of quality-focused, accountable care.

Using a collaborative, multifaceted approach, we are helping to develop a healthier population with a broader sense of responsibility toward the use of health care resources and with a shared sense of commitment to nurturing a healthy environment.
Aetna’s values – integrity, excellence, inspiration and caring – continue to serve as a touchstone for each of us, guiding our work and sustaining our commitment to improving health for everyone.

From the Chairman

Drawing on our unique talents and resources, Aetna is committed to building a healthier world, community by community. We are pursuing this vital work with a spirit of diligence, creativity and partnership. As a health care company that interacts directly with consumers, employers, governments and the medical community, we have a highly comprehensive view of health. We understand the human, systemic, financial and social aspects that affect the number of healthy days each person experiences. We also feel a strong sense of responsibility to advance ideas that can deliver meaningful improvements to people’s health around the world.

The breadth of our work is captured in this report, but only as a snapshot in time. Aetna’s efforts to strengthen communities extend to our company’s founding 163 years ago, when we began providing families with a measure of financial security through insurance. Aetna’s values – integrity, excellence, inspiration and caring – continue to serve as a touchstone for each of us, guiding our work and sustaining our commitment to improving health for everyone.

Exercising our values begins with how we engage, develop and reward our employees. Last year, we increased Aetna’s minimum base wage to $16 per hour and introduced a new program that lowers out-of-pocket health care expenses for qualifying employees. These programs have already demonstrated increased employee engagement and decreased turnover. Other innovations in employee wellness, particularly our mindfulness and yoga programs, have yielded real results, demonstrating the value of a holistic view of health, one that extends beyond clinical care.

We constantly innovate to simplify the health care experience and ensure that our members can access high-quality care. Aetna is also a leader in adopting value-based care models, enabling us to reward health care providers based on the quality of care delivered—not the quantity of care received.

Combining philanthropy, community engagement and policy leadership is one of our key strategies to improve health for both individuals and communities. This April, the Aetna Foundation launched the Healthiest Cities & Counties Challenge with major national partners, including the American Public Health Association and the National Association of Counties. This Challenge focuses on improving the social determinants of health. These are factors such as education, transportation and environment that deeply impact health. We believe supporting a more holistic view of health will help generate new ideas and solutions, reducing the need for more costly and disruptive clinical care.

We are proud that, in 2015, Aetna became a Fortune® 50 company. This milestone, while based on revenues, reinforces the idea that companies can do well by doing good. For Aetna and its employees, this philosophy has been, and always will be, at the core of who we are.
About Aetna
About Aetna

We are committed to building a healthier world. Aetna is a leading diversified health care benefits company, that provides information and resources to nearly 47 million people so they can make better informed decisions about their health care. Working closely with health care providers, Aetna strives to help transform the health care system in ways that simplify the health care experience and help people lead healthier lives.

As approximately 50,000 Aetna employees work to engage our health plan members, we also advance new approaches and technologies that can help people access the right care, at the right time, with greater ease.

To provide access to high-quality health care, Aetna offers its customers a range of traditional, voluntary and consumer-directed health insurance products and related services. Among these offerings are medical, pharmacy, dental, behavioral health, group life and disability plans. Our suite of offerings also includes Medicaid health care management services, medical management capabilities, workers’ compensation administrative services, and health information technology products and services.

At the end of 2015, our commercial business was providing health benefits for more than 19 million of our 23.5 million medical members. Our company also offers self-insured product options, particularly for large and midsized businesses, and plans for individuals and small businesses in the new health insurance marketplaces or exchanges, as well as private exchanges.

Aetna also offers Medicare Advantage plans, Medicare prescription drug plans and Medicaid products. We’re proud that, based on the Medicare star rating program, we have a higher percentage of members in four-star or greater plans than do any of our national peers.

Finding better ways

We complement our continuing business innovation with efforts to help transform the health care system in ways that advance our vision of a healthier world. We collaborate with a range of other health care organizations to improve quality, value and the patient experience through advanced technology, new business models and integrated care delivery models.

We also are committed to helping communities stay healthy through corporate philanthropy. At the core of this work is the Aetna Foundation, which is dedicated to promoting wellness, health and access to high-quality health care for everyone.

Since 1980, Aetna and the Aetna Foundation have awarded nearly $480 million in grants and awards.
**Our Values**

Our commitment to creating healthier communities springs from our company’s values – a set of clear, unifying beliefs that reflect who we are and what our stakeholders can expect from us.

Our values: **Integrity, Excellence, Caring, Inspiration**.

- **Integrity** – We do the right thing for the right reason.
- **Excellence** – We strive to deliver the highest quality and value possible through simple, easy and relevant solutions.
- **Caring** – We listen to and respect our customers and each other so we can act with insight, understanding and compassion.
- **Inspiration** – We inspire each other to explore ideas that can make the world a better place.

We created our core values together, as one company with approximately 50,000 individual voices, and with guidance from our customers. Our values guide our thoughts and actions every day, inspire innovation in our products and services, and drive our commitment to excellence in all we do.

- Mark T. Bertolini, Aetna Chairman and CEO
Corporate Social Responsibility
Our Corporate Social Responsibility Mission

As Aetna pursues its goal of building healthier communities, we view social responsibility as a critical driver of success and an integral part of how we conduct our business.

One example of this integrated approach to corporate responsibility is our social compact with employees, which was launched in January 2015. This initiative increased our U.S. minimum base wage to $16 per hour, an 11 percent increase on average, and benefited about 5,700 employees.

Increasing the financial security of employees helps us attract and retain strong talent.

We also believe that a happier, healthier and more productive workforce is better able to provide differentiating value to our plan members and, by extension, contribute to building healthier communities across the nation.

Healthiest Cities & Counties Challenge

In 2015, the Aetna Foundation began work on the launch of a collaboration with the American Public Health Association (APHA) and the National Association of Counties (NACo) to create the Healthiest Cities & Counties Challenge. The Challenge is designed to help our cities, counties and tribal communities create an environment that fosters productive, happy and healthy human beings.

Through the Challenge, we are engaging communities around the country to talk about holistic health, not just physical health, such as how urban farms, bicycle lanes and similar initiatives can positively impact a community. At the core of this Challenge is the belief that critical keys to improving people’s health are found at the local level and they involve numerous social determinants of health.
“A healthy individual is productive, a productive individual is economically viable, and an economically viable person is happy – if you think of that as the definition of health, and you do that person by person, community by community then by improving living conditions, access to healthy foods, education and job opportunities, we can help build a healthier world.”
- Mark T. Bertolini, Aetna Chairman and CEO

The goal of the Challenge is to recognize and catalyze cities and counties most able to show measurable change in health and wellness over several years.

The Challenge is focused on addressing the social determinants of health under five broad domains: Healthy Behaviors, Built Environment, Environmental Exposure, Community Safety, and Social and Economic Factors. The focus is on the most pressing public health issues facing communities today, as identified by key national public health experts. Considerable research was conducted by our partners and Advisory Council members to determine major public health issues and priorities. Research was presented, discussed and distilled by a panel of experts and priorities were identified.

The selection of these domains was based on recommendations from Aetna Foundation and CEOs for Cities, an organization that will help manage the Challenge, and metrics identified by the Robert Wood Johnson Foundation, AARP Livability Index and the Leading Health Indicators from Healthy People 2020, a comprehensive set of 10-year, national goals and objectives for improving the health of all Americans. Together with APHA and NACo, the Aetna Foundation aligned the data under the five broad domains which align with national community health priorities and also encompass what communities have the ability to impact through collective focus and application of resources.

The five broad domains and metrics for each are in the chart below:

<table>
<thead>
<tr>
<th>Domain</th>
<th>Metric</th>
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<tbody>
<tr>
<td>Healthy Behaviors</td>
<td>Tobacco use</td>
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<tr>
<td></td>
<td>Nutrition</td>
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<td></td>
<td>Physical activity</td>
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<td>Community Safety</td>
<td>Community violence</td>
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<tr>
<td>Built Environment</td>
<td>Food quality</td>
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<td></td>
<td>Walkability, bike ability and transit use</td>
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<td>Social/Economic Factors</td>
<td>Housing affordability</td>
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<td></td>
<td>Educational attainment</td>
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<td>Living wage</td>
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<td>Environmental Exposures</td>
<td>Children exposed to secondhand smoke in the home</td>
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<td></td>
<td>Air quality</td>
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<td></td>
<td>Water quality</td>
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</tbody>
</table>

The Challenge will award $1.5 million in prizes to cities and counties that build cross-sector teams to address health issues of critical importance to their communities.

These cross-sector teams will develop practical, evidence-based strategies to improve measurable social and health outcomes and promote health and wellness, equity and social interaction – community by community, block by block.

The Challenge launched during the National Public Health Week in April 2016.

Find out more about the [Healthiest Cities & Counties Challenge](#).
Materiality and Reporting

Aetna’s Corporate Social Responsibility Statement, adopted in 2014, encapsulates our commitment to ethically and responsibly pursuing a collaborative, multifaceted approach to developing a healthier population. Part of this effort is to promote sustainable practices in our workplaces and in the communities in which we operate.

Our Corporate Social Responsibility Council provides strategic guidance on fulfilling our social responsibility objectives and closely reviews our progress. The Council, which meets quarterly, is composed of members with varied areas of expertise from across the enterprise, including Real Estate Services, Aetna Foundation, Diversity, Compliance, Community Relations and Urban Marketing, Procurement, Government Relations, Consumer Business, Human Resources and Enterprise Communications.

Council members employ a risk management process that takes into account business and reputational risk, financial implications and regulatory factors arising from social responsibility issues. Issues such as sustainability or climate change that are identified as potentially having a significant impact on the company are brought before the Council. The Council facilitates the flow of environmental and social risk and opportunity information to the Executive Committee.

Aetna’s Executive Vice President of Corporate Affairs oversees the Council and Aetna’s sustainability practices, public policy positions and reporting against Corporate Social Responsibility (CSR) goals.

Aetna’s 2014 CSR report was the first to be issued in accordance with Global Reporting Initiative (GRI) G4 guidelines. This 2015 CSR report is also in accordance with the GRI G4 guidelines.

We conducted a materiality assessment to define the content of this report. It included a review of internal and external information sources for input on prioritization. We also interviewed executives from across the company. In 2015 we added a review of Aetna plan member appeals and service center call data to further inform our assessment.
Each topic was scored on a consistent scale. Ratings were averaged separately for internal and external perspectives, with extra weight given to key inputs. The Council reviewed and validated the results. The eight most important issues to both our business and to external stakeholders are listed below. Our report focuses on these issues but covers additional dimensions of social responsibility that also are important to Aetna.

The eight most important issues for 2015 continue to be:

- Improved outcomes
- Access to coverage
- Plan performance/customer satisfaction
- Pricing transparency and plan literacy
- Customer privacy
- Community development
- Employee diversity and inclusion
- Employee development

We believe these issues continue to be top priorities for both our business and external stakeholders.

For most of these issues, the impact is primarily outside of our organization, affecting our customers and members. The exceptions are those issues related to employee diversity and inclusion and employee development, which affect our employees.
Our Community
Our Community

Aetna Foundation

As Aetna works to build a healthier world, the Aetna Foundation applies energy and resources in creative and innovative ways to improve health in communities where we live, work and play. As a complement to the health care solutions Aetna delivers to its customers, the Aetna Foundation helps broaden our impact through philanthropic programs that aim to improve the health of large populations of people nationally and to target serious health issues.

The Aetna Foundation works at two levels. At one level, we forge partnerships with national and select international organizations, funding their pioneering efforts to improve health among large groups of people. At another level, we give grants to local nonprofits across the U.S., with an eye toward cultivating innovations that may ultimately inspire healthier lifestyles across communities.

In 2015, our employees, retirees and directors contributed more than $7.4 million and more than 430,000 volunteer hours to nonprofit organizations in communities where we live and work. The Aetna Foundation amplified this generosity with matching grants, bringing the total economic impact to these communities to more than $20 million. Having awarded nearly $480 million in grants and sponsorships since 1980, Aetna and the Aetna Foundation have established a long track record for helping to build healthier communities through philanthropy.

Respected organizations have recognized Aetna for its positive community impact.

In 2015, Aetna was recognized for the fourth year in a row as one of America’s most community-minded companies in The Civic 50, an annual initiative that recognizes companies for their commitment to improving the quality of life in communities where they do business. Honorees were identified through a survey conducted by Points of Light, the world’s largest organization focused on volunteer service, and Bloomberg LP.

Drawing on a proud legacy of community support, the Aetna Foundation today is dedicated to improving health in local communities and large populations alike. We pursue this work through community-based and national programs, dynamic partnerships and proven models that can help people accelerate progress everywhere.

At the heart of Aetna Foundation’s mission is a drive to help people achieve better health.

We collaborate with local, national and select international organizations to spark innovative ideas and programs for improving health. A common theme across our programs is to help improve health among those with limited access to quality care and to the tools and knowledge that can make healthier lifestyles more achievable.
GoLocal: Cultivating Healthier Communities

In underserved communities, poor nutrition and low levels of physical activity are especially challenging. This is one reason why the Aetna Foundation has chosen to make multi-year, significant grants to improve healthy eating and active-living in these communities. The over-arching grants program is called GoLocal: Cultivating Healthy Communities.

One aspect of GoLocal is Local Roots, a grants program that funds the creation and expansion of community gardens, urban farms and farmers markets. These local initiatives increase access to fresh foods, create opportunities for nutrition education and promote active lifestyles in local neighborhoods. Local Roots is helping to address this significant need to increase the availability and affordability of healthy foods at the local level.

Enabling children to adopt more healthful eating habits at an early age is another important priority. This is why we've seen recent rapid growth of the edible education movement, involving countless kitchen, garden and healthy meals programs in schools across the country. At the same time, to make this type of initiative work over the long term, educators and school food service staff need support in the form of professional training, curricular resources and skills development. This is why we proudly provided Edible School Yard with a significant grant to increase healthy eating and edible education programming in schools by supporting the delivery and development of high-quality professional development training for leading educators from around the country.

Another aspect of GoLocal is Healthy Eating and Active Living (HEAL), a program that encourages healthier lifestyles by emphasizing better nutrition and greater physical activity in underserved communities. In addition to making healthy foods easier to find and afford, HEAL allows people of all ages to come together through neighborhood solutions.

In 2015, the Aetna Foundation’s GoLocal: Cultivating Healthy Communities grant program awarded more than $3 million in grants and sponsorships.

Through programs such as Local Roots and HEAL, the Aetna Foundation is helping to build a healthier world, community by community.

The list of GoLocal grants awarded for 2015 is available on the Aetna Foundation website.
Community Relations and Urban Marketing

Aetna cares deeply about the health of the people in our communities. Our Community Relations and Urban Marketing (CRUM) team champions local efforts to improve the lives of others, forms long-term partnerships and ensures that Aetna’s invested dollars achieve the greatest impact. The CRUM staff actively connects with the people we serve and supports the communities where our customers and their families live and work.

One hundred percent of Aetna offices nationally have initiatives or programs that involve some level of engagement with the local community, primarily through volunteer opportunities. In 2015, nearly 30,000 Aetna employees participated in employee engagement initiatives. Employees also donated more than 430,000 volunteer hours to nonprofit organizations.

CRUM activates grassroots strategies to meet changing needs in the marketplace. In 2015, over 600 initiatives directly or indirectly supported millions of consumers in strategic locations through community-related activities.

Many of these initiatives focused on making a deeper connection with our multicultural, non-English speaking members by providing language support in over 200 languages. We act as a catalyst for change with our strong community presence. We support community events, work with community leaders and organizations, help employers manage their changing workforce, and work with health industry brokers and providers to support their business objectives.

Examples of our community involvement include:

- We proudly support Special Olympics. At the 2015 Summer Games of the Special Olympics of Georgia, more than 200 Aetna employees and their families volunteered to support the 5,000 participating athletes, partners and coaches. We also sponsored and participated in the Unified Relay Across America, which included separate torch relays that began in Miami, Washington, D.C. and Augusta, ME. In testament to the Olympic spirit, more than 10,000 torchbearers ran across the U.S. on three routes, converging on Los Angeles to deliver the torch, the Flame of Hope, to kick off the Special Olympics World Summer Games.

- A free shuttle service – Fresh Express – brought Hartford’s Asylum Hill residents and Aetna employees to the fresh, local food offered at the Billings Forge Farmers Market. The service brings together residents and helps improve their health with better nutrition. A Double Value Coupon Program also allows low-income residents to receive twice the benefit.

- Aetna sponsored Komen Race for the Cure events in Boston, Chicago and Hartford, among many such events we supported to raise awareness and funds to fight breast cancer. Over 700 employees registered as runners, walkers or volunteers and raised nearly $14,000 to help combat breast cancer. We also sponsored the Publix Ft. Lauderdale AIA Marathon, which included a half-marathon, Kids Fun Run, 5K and Komen “Run for the Pink” 6K. The Southeast Florida event drew more than 6,000 participants from more than 40 states and 12 countries.

- For the eighth consecutive year, Aetna was a premier sponsor of the Marine Corps Marathon and 10K run in Washington, D.C. The event is the fourth-largest marathon in the nation and the eighth largest in the world. More than 30,000 runners participated in the two races, including 160 runners on the Aetna team. Team Aetna challenged participants to “Marine up” at a fitness challenge. Crowds gathered to cheer on the Marines and gear up for their own challenge.

- We continue our work with the Sphinx Organization, a Detroit-based group that transforms lives through the power of diversity in the arts. At the heart of our support is the group’s prize-winning string ensemble, the Sphinx Virtuosi, whose 18 members serve as Aetna-trained wellness ambassadors in cities all along their national Virtuosi tour. The national tour culminates with a sold-out, widely acclaimed performance at Carnegie Hall. These talented young people demonstrate how we can creatively spread the wellness message through supporting the arts.

- We were proud to participate in the St. Louis “Community Health Day,” which included a prostate cancer awareness walk/run. The event shone a light on health care disparities, while strengthening our relationship with event sponsor 100 Black Men, and with members of Aetna’s St. Louis African American Employee Resource Group, who volunteered.

- For the third year, Pittsburgh-area employees and their families supported Operation Backpack in their efforts to help abused and neglected children in Western Pennsylvania. The program provides backpacks filled with essential items, as well as items to comfort children who have been removed from their homes, and who have moved from foster home to foster home, on average, seven times per year. Our employees have supported the program by donating 501 backpacks stuffed with items like blankets, toothbrushes, notebooks, crayons and more.
Inequities in Health Care Access and Quality

Inequities in health care access and quality affect communities and individuals across the nation. Working with national partners, we strive to reduce inequities in health treatment and outcomes through research, experimentation and education. Also, we are seeking to cultivate a more diverse generation of medical professionals so they will be equipped to reduce the massive toll that chronic diseases take on underserved communities nationwide.


Working with an innovative New Jersey group, we are helping to build a database that links health and health care data to various other data – such as housing, education, transportation, employment and law enforcement – to better understand social determinants of health and drive greater collaboration across sectors. The Coalition has been working with administrative partners to gather information about the most complex clients who receive services and benefits from various agencies across Camden. Already, data sharing has revealed correlations between health data and social data. Hospital over-utilization, for example, has been linked to housing instability, substance abuse, mental health status and involvement in the criminal justice system.

School-Based Health Alliance: Mapping Social Determinants for Child and Adolescent Health Services

With our help, this Washington D.C.-based organization is creating a digital tool for stakeholders who are working to improve the health of children and adolescents. The “Mapping Social Determinants for Child and Adolescent Health Services” tool will use Geographic Information Systems technology to identify and characterize medically underserved areas, and use data to determine where to expand access to health services. Using the tool, a stakeholder will be able to select a region of interest and view counties that are underperforming relative to the national average across such variables as health, education, demographic and health insurance coverage.

Hispanic Federation: Youth Health Explorers-Urban Farming

With our support, the Hispanic Federation launched a 12-month, community-based, culturally relevant pilot initiative to train Latino youth ages 16 to 21 as community “health mappers.” Through this program, participants will learn about the social determinants of health and the urban farming and agriculture movement, take part in field trips to farmers markets and urban farms, and get trained in community health mapping methodologies and techniques. The program aims to increase students’ knowledge of healthy eating and lifestyles and urban and local farming, and enhance their leadership and presentation skills. Additionally, the information they collect will help to create Community Health Environment Scan Survey (CHESS)-generated resource maps and descriptions of social determinants of health – both assets and barriers – in targeted Latino low-income communities.

Trustees of Dartmouth College: Healthy Eating and Active Living for Native Americans

Dartmouth’s Center for Health Equity worked with Native American communities in Minnesota and Maine to identify barriers and facilitators to active living and healthy eating. Using photovoice, a method which asks community members to represent their perspectives through photography, Geisel medical students trained individuals to photograph aspects of their community and daily life that affect their wellness. The project aims to enhance understanding of wellness in both communities, and to develop culturally appropriate methods to improve active living and healthy eating or maintain existing successful models. To date, it is clear that both communities have benefited from the work and have experienced a great sense of empowerment and pride in the positive cultural aspects that naturally promote health and wellness.
Mindfulness

Studies have indicated that mindfulness, and associated activities such as yoga and meditation, can enhance people's physical and mental health. In 2015, the Aetna Foundation began efforts to extend the healthy benefits of mindfulness to vulnerable populations. We have begun to work with several exciting partners in this effort:

- **Mindfulness First** – We’re working with a Phoenix-based organization that is implementing Arizona’s First Mindful School: David Crockett Elementary School. This program will enable delivery of mindfulness programming to every classroom (K-6th grades) and to all teachers and staff, reaching 400 students – including many homeless and refugee children.

- **Our Whole Lives** – We’ve provided Boston Medical Center with a $125,000 grant to evaluate a web-based, holistic mobile health (mHealth) tool, Our Whole Lives (OWL), which helps patients self-manage their chronic pain in home and community settings. Accessed via computer, tablet or smartphone, OWL provides guidance on yoga, meditation, self-massage and mindfulness as well as a means to communicate with clinicians.

- **Hawn Foundation’s MindUP™** – Mindfulness can bring extensive benefits to young people, in the classroom and beyond. A $270,000 Aetna Foundation grant to The Hawn Foundation brought MindUP™ – a research-based training program for educators and children – to 25 schools in four school districts in Miami Dade County, Florida; Hartford, Connecticut; Baltimore, Maryland; and Houston, Texas. Through the program, students learn to self-regulate behavior and engage in the focused concentration required for academic success. The program reached an estimated 2,000 faculty and support personnel and more than 20,000 students.
Innovation

The Aetna Foundation views innovation – from novel concepts to emerging technologies – as a catalyst to pursue breakthroughs in improving health in low-income communities and within minority populations. The Aetna Foundation works with national partners to hasten innovation and engage people where they live. Through a creative funding program, we challenge potential grantees to harness technology to reverse negative health trends.

Fair Food Network: Mobile App Development to Benefit Urban Farmers and Low-Income Consumers

Fair Food Network in Michigan is testing a smartphone app designed to increase healthy food access for underserved communities while also creating new markets for urban farmers. The app uses mobile payment technology to process food assistance benefits more simply and affordably at farmers markets. So far, vendor and customer enthusiasm for the system has been high. Vendor use of this electronic payment system has helped individuals and families obtain fresh fruits and vegetables in new places where before there had been no support for payment using the Supplemental Nutrition Assistance Program.

National REACH Coalition (NRC)

For more than a decade, the NRC and its 50-state network of community-based organizations have joined with health departments, universities and local groups to take on health disparities. With Aetna Foundation support, the NRC created the Health Equity Leadership & Exchange Network (HELEN), a web resource that aims to bolster the exchange of health equity-related ideas. HELEN seeks to identify, analyze and track all laws, policies and programs that impact health equity. The system helps participants refine ideas and advance proposals through government institutions at every level. Since its launch in September 2014, HELEN has engaged 1,300 health equity leaders and champions in every U.S. state and territory and is often sought out to provide analysis, educational briefings and forums on pressing policy issues impacting health equity. The White House and U.S. Department of Health and Human Services reached out to HELEN to compile a report and include policy proposals for the Obama administration in its final year, and that can help guide the next administration’s approach to addressing health care inequities as well.
Population Health
Enhancing Population Health

At Aetna, we pursue an integrated and comprehensive strategy to advancing wellness and disease prevention that is designed to reach large populations of people where they live and work. We take into account the health care needs of entire populations regardless of where their health may fall on the wellness spectrum.

Our goal is to help them make the right connections to the right resources so they can enjoy their best health. By pursuing this goal, we are living up to our values by innovating to make the world a better, healthier place. Aetna’s influence extends beyond our own membership, and we recognize our responsibility to harness that influence to improve community health.

Through the Aetna Foundation, we reach out to support organizations that are working on the front lines in our communities, neighborhoods and schools, to build a healthier world.

Our programs help people stop smoking, start exercising, eat better, reduce stress and be mindful at work and at home. Aetna has long offered programs that integrate behavioral health and medical care, recognizing the value that broader approaches can bring to delivering better health care outcomes. We’ve been engaging people directly through personalized programs such as metabolic syndrome testing, aiming to encourage lifestyle changes. We work with employers to put such innovative programs in place. For more than a decade, Aetna also has collected data, conducted studies and designed programs to help eliminate racial and ethnic disparities in health care. Through our work we’ve provided access, education and information that have helped to improve health care treatment and outcomes in areas such as women’s health, cultural competency, diabetes, depression and cardiovascular health.

Aetna and the Aetna Foundation work with partners and support efforts to improve the health of large populations of people. Among our goals is to explore the potential of personal technology to enhance health, bring together experts to rethink health policies, and help to shape universal models that can effect positive change.

The digital health programs the Aetna Foundation funds are designed to deliver meaningful results for vulnerable and minority communities. This is why all the organizations that the Aetna Foundation supports must meet strong evidence-based criteria. Among these criteria are: sustainable projects that can demonstrate scalability; projects that have the potential for positive societal impact; digital health programs that use available evidence such as population health data or health care data; and digital health support built on a strong foundation of behavioral or applicable theory and grounded in research.

Beyond technology, we know that positive health habits formed at an early age can set a young life on a more healthful and productive trajectory. This is one reason why we’ve partnered with the Connecticut Children’s Medical Center and others to advance a new, holistic approach (involving five Protective Factors, ranging from parental resilience to social and emotional competence of children) to help vulnerable children develop in healthier ways. The project involves creating tools, such as surveys and databases, to apply the Protective Factors Framework in program design and evaluation, and will provide training and assistance to members of the Help Me Grow® national affiliate network as they apply the Framework in their regions. Aetna Foundation funding is helping to create an interactive data tool that maps affiliates’ progress in addressing protective factors, while delivering real-time data analytics to help affiliates continually improve quality.

Aetna’s tradition of building healthier communities has come to life through a steady vision, strong partnerships and an unyielding commitment to results. - Dr. Garth Graham, President, Aetna Foundation
Mindfulness as Strategy

As a health care company, Aetna continually explores new ways to help make our communities healthier. An example of this spirit of innovation is our mindfulness-based wellness programs, which have been shown to reduce stress and improve health and productivity among participants. Since 2011 more than 13,000 Aetna employees have participated in a mindfulness-based wellness program. More than 20 employer customers have embraced Aetna’s mindfulness-based wellness programs to cultivate better health among their workforces.

Aetna’s well-established leadership in promoting better health and wellness led to an exciting 2014 collaboration that promotes mindfulness programs to reduce stress and improve health. This collaboration between the Aetna Foundation and The Hawn Foundation – called Mindful Works – focused on scaling up The Hawn Foundation’s evidence-based program, MindUP™, for educators and children. The program encompasses tools and strategies based on social and emotional learning, neuroscience, mindfulness and positive psychology.

Our collaboration includes a research component that aims to illuminate resulting improvements to workforce productivity, engagement and satisfaction. Research shows that highly stressed individuals are at increased risk for health conditions such as diabetes, depression, anxiety and obesity. Through mind-body stress-reduction programs with our own employees, we have shown that mindfulness-based programs can reduce stress and improve people’s health.

Among Aetna’s 50,000 employees, more than one-quarter have participated in at least one class, with participants on average reporting:

- 28 percent reduction in their stress levels
- 20 percent improvement in sleep quality
- 19 percent reduction in pain

Participants also become more effective on the job, gaining an average of 62 minutes per week of productivity each.
Supporting Veterans

As our business changes in the years ahead, Aetna needs a diverse and highly skilled workforce that can adapt and thrive – and we believe that our nation’s service members and veterans represent a great source of such talent and resiliency.

These men and women bring to the workplace many specialized talents, global experience and an abundance of critical transferable skills. Veterans are:

- Trained team builders and leaders.
- Able to adapt and act quickly in changing situations.
- Results oriented – they have a strong work ethic, thrive under pressure, and exhibit high levels of resiliency and focus despite challenges.
- Thrive with diversity and bring global perspectives to the workplace.
- Skilled in technology.

Building on a tradition of commitment to veterans, we are stepping up our efforts to attract veterans to join our company and are helping our hiring managers understand the talents that veterans possess.

We are a proud member of the 100,000 Jobs Mission, a coalition of more than 170 private sector companies committed to hiring U.S. military veterans and military spouses. When it was formed in 2011, the coalition envisioned collective hiring of at least 100,000 military members leaving active duty service and other veterans by the end of 2020. After surpassing that goal in 2013, a new target was set at 200,000 – doubling the original plan.

Since 2000, Aetna and the Aetna Foundation have donated more than $1.3 million to organizations that support the military and veterans’ causes, including:

Rolling Thunder® Charities Inc.: 2015 marks the seventh consecutive year Aetna has been a major sponsor of the Rolling Thunder ride which benefits Rolling Thunder® Charities Inc. Rolling Thunder is an annual event held the Sunday of Memorial Day weekend to recognize the sacrifices that have been made for America by veterans, including prisoners of war and those still missing in action. Aetna has contributed over $230,000 in sponsorship funding.

Marine Corps Marathon: Aetna was the premier sponsor of the 10-kilometer race event for the 2015 Marine Corps Marathon festivities and again sponsored the 2016 marathon held in October. Aetna has awarded over $300,000 in support of this annual event since 2007.

Swords to Plowshares: In 2015, an Aetna Foundation grant supported the Women Veterans Professional Network (WVPN), a multi-faceted effort which serves women veterans in the San Francisco Bay Area who are seeking employment and career-related development information, services and networking opportunities. There are approximately 60,000 women veterans living in the Bay Area, and as women make up 20 percent of new recruits, this population continues to grow. Historically, women veterans are hard to reach: they neither identify as veterans nor seek out veteran-specific services. Many women veterans seeking employment and other services also overlook their veteran-specific barriers and supportive service needs. WVPN offers culturally competent and gender-specific outreach and services, including peer-based networking, mentorship and support. Our funding is helping Swords to Plowshares implement vital programming that is part of an integrated network of support services.

In 2015, Aetna ranked No. 1 as the most Veteran-Friendly employer in the Veteran Recruiting Virtual Career Fairs.

See more at: http://www.aetnastory.com/awards.html
Public Policy Leadership

We are committed to helping to transform health care. We need a better, more sustainable approach to the delivery of health care in order to build a healthier world.

With our nation continuing to waste more than $800 billion in health care spending annually, we still have a long way to go to improve health care quality and cost. Our values demand that we engage with legislators, community leaders and others to innovate and develop solutions that help us achieve a healthier world.

We approach system change comprehensively, working with legislators, regulators and public policy leaders to advance an agenda focused on health care quality, affordability, access, and sustainability. We also develop private-sector solutions that are changing the health care experience.

We are committed to helping to build a consumer-centric health care system that helps keep people well and gives the best care possible to those who are chronically ill.

According to the CDC, Americans over the age of 18 reported an average of 3.6 physically unhealthy days per month in 2009. This equates to more than 10 billion physically unhealthy days per year. If we could reduce the number of unhealthy days by just 1 percent, this would be an additional 100 million healthy days per year.

We need a better care delivery system – a new model that pays for quality over quantity.

We must continue to develop value-based care to transform the health care system. We partner with providers on innovative payment models, such as Accountable Care Organizations (ACOs), and work to promote high quality, value-based care. To further this goal, Aetna has committed to achieving 75 percent of medical claim payments in value-based arrangements by 2020.

We are working to reduce the complexity in health care and create a sustainable approach that improves the health care experience and helps drive consumer engagement.

We will continue to work with public policy leaders and legislators on both sides of the aisle to address these issues and make our goals a reality. We are interested in dialogue that can help move our nation forward toward a better health care system.

The issues include:

- Continue to identify solutions to provide access to quality affordable health care coverage for all Americans.
- Strengthen and promote quality, competition and sustainability for beneficiaries in government-funded programs.
- Enhance affordability and flexibility for individual and employer business.
- Influence federal and state budget and fiscal matters, including reform of entitlement programs and tax policy.
- Promote value-based payment models and sector innovations, such as accountable care and health care information technology.
Value-based Care

The long-term viability of our health care system will be threatened if we merely increase access to health care, without also addressing affordability and quality.

Fortunately, public and private-sector innovations such as value-based care models can help to address the system’s deep-rooted problems around inefficiency, waste and quality. Aetna views value-based care models, such as accountable care, as critical strategies for taking on one of the fundamental flaws in American health care – the payment system. Accountable care organizations reward health care providers for helping people get and stay healthy, thus shifting the payment system from a focus on quantity of services provided to quality of services provided. Doctors are rewarded financially for improving the patient experience and health outcomes, and reducing unnecessary care. Thus, they can focus their activities on improving their patients’ health while also lowering cost.

At year-end 2015, Aetna had approximately 1,000 value-based care agreements encompassing nearly 6.2 million medical members, including 77 accountable care collaborations. The result is promising. Our accountable care collaboration with Banner Health Network resulted in significant quality improvements: consumers covered by the plan had higher cancer screening rates, better blood sugar management in diabetics, and fewer avoidable hospital admissions.

Engaging Consumers for a Better System

We believe that the most powerful advocates for a better health care system are consumers themselves. This is why Aetna has advanced initiatives to reduce complexity in health care to improve the health care experience and help deepen consumer engagement. Consumers in the new retail environment of health care are demanding greater value, transparency and convenience.

Technology will be a great enabler of this new vision for health care. By harnessing data, we can achieve greater transparency regarding factors such as outcomes and costs for specific procedures performed at specific facilities. This clarity will enable better insights and decisions for everyone involved in health care, patients in particular.

Aetna’s technology solutions now enable consumers to find doctors, make appointments, estimate treatment costs in advance, track wellness and proactively address health risks. Our Healthagen products comprise a wide range of population health management solutions and health information technology capabilities. Learn more about Healthagen solutions.

Next Phase for Health Care Reform

In addition to bringing needed innovations to the marketplace, Aetna also continues to build on its enduring relationships with legislators and regulators so we can collectively enact meaningful health care legislation and workable regulations.

Since 2010’s Affordable Care Act, we have been helping our customers navigate the new law and implement it effectively. We also assist regulators and legislators with understanding how the myriad of regulations that flow from the law affect consumers so that appropriate revisions might be considered.
Our People
A Community of Aetna People

Diversity and Inclusion

We view diversity and inclusion as strong contributors to a competitive advantage for Aetna, which ultimately results in better outcomes for everyone. Diversity is rooted in our values and encompasses our experiences, backgrounds, perceptions and beliefs – the things that make us unique.

Workforce diversity gives us deeper insights into those we serve, which helps us create new and better ways to improve and sustain their health. Through inclusion, we gain the benefits of diverse viewpoints and broader perspectives, which drives innovation. As part of our priority emphasis on both diversity and inclusion we take steps to:

- Build a diverse, nimble, agile workforce by focusing on recruitment, development, mobility and retention of Aetna people across the company.
- Create an inclusive environment that encourages people to bring their full selves to work, to realize their personal potential and help the company achieve its potential.
- Administer Aetna-wide and department-specific learning.

We also integrate diversity and inclusion education into all levels of the organization and specifically design the curriculum to enhance cultural understanding among our sales, health care management and customer service colleagues.

We cultivate an inclusive mindset in our company in part by integrating diversity and inclusion principles into business processes and practices. This has helped us to broaden our world view by attracting, developing and advancing professionals from every segment of society. Our employment of people across the globe – including the United Kingdom, Ireland, Asia and the Middle East – provides us valuable insights into the unique cultures, communities and environments where our members and customers live and work.

Aetna strives to attract, engage and retain high-performing people who are passionate about improving the health care system. This focus on talent encompasses traditionally under-represented groups such as women; people of color; veterans; individuals with disabilities; and lesbian, gay, bisexual, and transgender (LGBT) people. We also strive to meet the needs of a multigenerational workforce.

We seek to actively engage each employee in understanding the important roles of diversity and inclusion in the workplace and the marketplace, and strive to integrate this mindset into work done every day.

Driven from the Top

At Aetna, accountability for diversity and inclusion starts at the top.

- Aetna Chairman and CEO Mark Bertolini is the Executive Sponsor for the advancement of women at Aetna.
- One-half of the directors on the company’s board are women or from a diverse background, as of December 31, 2015.
- The first woman president in the company’s 163-year history, Karen S. Lynch, was appointed on January 1, 2015.

We have made diversity and inclusion part of a key business metric. Incentive compensation of our senior leadership is tied to the results of this metric.
Workplace diversity programs

Aetna engages men and women alike as champions and drivers of change. Our work in advancing workplace diversity is focused and strategic.

Advancement of women

Women comprise 75 percent of Aetna’s workforce globally and represent 33 percent of executives. This means that we have an opportunity to take advantage of women’s insights as we create innovative products and services for a competitive consumer marketplace. Our Women’s Leadership Alliance (WLA) was launched in 2012 to help create ways to accelerate women’s advancement into senior management and executive roles, while creating a culture of visibility, advocacy and accountability for talent development. At the recent WLA Conference, Aetna Chairman and CEO Mark Bertolini addressed more than 200 company leaders on what it takes to drive performance with a focus on accountability and trust to achieve our vision. Aetna President Karen Lynch, inspired by the women in her life, delivered a compelling message on the power of our mission and purpose in building healthier “holistic” lives for women.

At Aetna, our Advancement of Women strategy is integral to our business strategy. In 2015, we co-sponsored a research study, “The Power of the Purse: Engaging Women Decision Makers for Healthy Outcomes”, in concert with leading companies, such as Johnson & Johnson, PwC, Pfizer and others. The study found that 94 percent of women make health care decisions for themselves. What’s more, 94 percent of working mothers make health care decisions for others. The study authors concluded that women are the “Chief Medical Officers” of the home. These findings can play a role in uncovering women’s unmet needs as patients, caregivers and decision makers.
The programs and initiatives below are part of our Advancement of Women strategy:

- **Aetna Advocating Real Change (AARC):** This group of more than 25 leaders is committed to talent development and to building an Aetna-wide culture of advocacy. Representing all business areas and with a leadership span of over 23,000 employees, group members are meeting with top talent to increase engagement, growth, mobility and retention.

- **Strategies for Success Leadership Program:** This year-long program, conducted in partnership with Aetna’s Enterprise Talent Development unit and Hewlett Consulting Partners, is aimed at high-potential women. Corporate leaders, business school faculty and thought leaders present modules directed at building business acumen and addressing the challenges leaders face in advancing corporate careers and integrating life demands. The 2015 class included more than 50 high-performing, high-potential women nominated from across Aetna.

- **Strategies for Success Sponsorship Program:** This program aims to help Aetna develop a pipeline of diverse top talent and build a culture of advocacy for the future. It focuses on all executives, with the goal of helping them more effectively sponsor women and people of color.

- **Mentoring and Sponsorship:** Sponsors are advocates in powerful positions who use their influence to intentionally boost their protégés advancement. Mentors provide advice, feedback and counsel. Both sponsor/protégé relationships and mentor/mentee relationships play a role in shaping career strategies and advancement. Aetna is committed to creating a culture of advocacy by promoting both of these supportive relationships.

Aetna also is highly involved with external partners that are committed to the advancement of women:

- During the third biennial Women’s Forum of New York Corporate Champion Breakfast in November 2015, Aetna was one of several companies saluted for having greater than 20 percent of our Board of Directors composed of women. Karen Lynch was present to acknowledge this recognition, accompanied by several Aetna board members.

- The National Association of Female Executives (NAFE) named Aetna as one of the Top 50 Companies for Executive Women in 2015 making it the 16th time Aetna has been included in the NAFE top companies ranking. The annual list recognizes major employers committed to hiring, retaining and promoting executive women. To be recognized, an employer must have a minimum of two women on its board of directors as well as at least 1,000 employees in the U.S.

- Aetna sponsored several high-potential executive women to attend the Fortune Most Powerful Women Next Gen Summit, where they gathered with executives, entrepreneurs and innovators in business, along with leaders in government, philanthropy, education and the arts for stimulating discussions related to women in leadership.

Through the power of inclusive leadership, Aetna will continue to evolve as a leader in advancing women in the workplace and in the marketplace.

“At Aetna, Diversity & Inclusion is about connecting talent to our business. By accessing a larger talent pool and a deeper knowledge bank, we gain a strategic competitive advantage. To further our vision and collective purpose, we continuously seek to attract, retain and develop high-performing, collaborative professionals to contribute to achieving our vision.”

– Grace Figueredo, Chief Diversity Officer, Aetna
Composition of workforce

Our workforce is increasingly diverse, reflecting the tapestry of American society and the customers we serve every day. By valuing and promoting diversity, Aetna people build greater understanding of customer preferences and issues, which serves everyone well.

As of December 29, 2015:
• 75 percent of Aetna employees were women
• 32 percent of Aetna employees were people of color
• 9 percent of Aetna employees were under 30 years old; 54 percent were 30-49; and 36 percent reported being 50 or more years old
• 5.8 percent of Aetna employees self-identified as gay, lesbian, bisexual or transgender
• 2.3 percent of Aetna employees self-identified as veterans

As of December 31, 2015, Aetna’s Board of Directors included:
• 33 percent women
• 16 percent People of Color
• All age 50 or older

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GENDER

<table>
<thead>
<tr>
<th>Gender</th>
<th>Count</th>
<th>% of Total</th>
</tr>
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<tbody>
<tr>
<td>Men</td>
<td>12,017</td>
<td>24%</td>
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<tr>
<td>Women</td>
<td>37,640</td>
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<td>723</td>
<td>1%</td>
</tr>
<tr>
<td>Grand Total</td>
<td>50,380</td>
<td>100%</td>
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</table>

AGE BREAKDOWN

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<tr>
<th>Age Band</th>
<th>Count</th>
<th>% of Total</th>
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<tbody>
<tr>
<td>&lt;30</td>
<td>4,283</td>
<td>9%</td>
</tr>
<tr>
<td>30-49</td>
<td>27,270</td>
<td>54%</td>
</tr>
<tr>
<td>50+</td>
<td>18,107</td>
<td>36%</td>
</tr>
<tr>
<td>“-“</td>
<td>720</td>
<td>1%</td>
</tr>
<tr>
<td>Grand Total</td>
<td>50,380</td>
<td>100%</td>
</tr>
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</table>

PEOPLE OF COLOR (POC)

<table>
<thead>
<tr>
<th>Employees</th>
<th>Count</th>
<th>% of Total</th>
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<tbody>
<tr>
<td>People of Color</td>
<td>16,141</td>
<td>32%</td>
</tr>
<tr>
<td>Non PoC</td>
<td>33,479</td>
<td>66%</td>
</tr>
<tr>
<td>Not Available</td>
<td>760</td>
<td>2%</td>
</tr>
<tr>
<td>Grand Total</td>
<td>50,380</td>
<td>100%</td>
</tr>
</tbody>
</table>

GENERATION (years of birth)

<table>
<thead>
<tr>
<th>Generation</th>
<th>Count</th>
<th>% of Total</th>
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<tbody>
<tr>
<td>Traditionalist 1925-1945</td>
<td>170</td>
<td>0%</td>
</tr>
<tr>
<td>Boomers 1946-1963</td>
<td>14,957</td>
<td>30%</td>
</tr>
<tr>
<td>Generation X 1964-1978</td>
<td>22,490</td>
<td>45%</td>
</tr>
<tr>
<td>Generation Y 1979-1994</td>
<td>11,992</td>
<td>24%</td>
</tr>
<tr>
<td>Generation Z 1995-2007</td>
<td>51</td>
<td>0%</td>
</tr>
<tr>
<td>Grand Total</td>
<td>720</td>
<td>1%</td>
</tr>
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</table>

RACE

<table>
<thead>
<tr>
<th>Race</th>
<th>Count</th>
<th>Aetna POC</th>
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</thead>
<tbody>
<tr>
<td>Black/African American</td>
<td>8,606</td>
<td>53%</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>4,645</td>
<td>29%</td>
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<tr>
<td>Asiana</td>
<td>2,298</td>
<td>14%</td>
</tr>
<tr>
<td>Two or more races</td>
<td>304</td>
<td>2%</td>
</tr>
<tr>
<td>American Indian/Alaskan Native</td>
<td>198</td>
<td>1%</td>
</tr>
<tr>
<td>Native Hawaiian/Pac Islander</td>
<td>90</td>
<td>1%</td>
</tr>
<tr>
<td>Grand Total</td>
<td>16,141</td>
<td>100%</td>
</tr>
</tbody>
</table>

Chart numbers as of December 29, 2015.
“-“ indicates information is not available * Includes all employees; domestic and non-US
** Excludes temporary employees
### Aetna Employee Turnover

<table>
<thead>
<tr>
<th>Cohort</th>
<th>Turnover Rates</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2013</td>
</tr>
<tr>
<td><strong>Includes year of birth for generation</strong></td>
<td></td>
</tr>
<tr>
<td>All Aetna</td>
<td>13.8</td>
</tr>
<tr>
<td>Women</td>
<td>13.5</td>
</tr>
<tr>
<td>Men</td>
<td>14.9</td>
</tr>
<tr>
<td>Boomers 1946-1963</td>
<td>12.8</td>
</tr>
<tr>
<td>Gen X 1964-1978</td>
<td>11.5</td>
</tr>
<tr>
<td>Gen Y 1979-1994</td>
<td>20.4</td>
</tr>
<tr>
<td>Mid America</td>
<td>15.5</td>
</tr>
<tr>
<td>Northeast</td>
<td>10.8</td>
</tr>
<tr>
<td>Southeast</td>
<td>14.2</td>
</tr>
<tr>
<td>West</td>
<td>16.8</td>
</tr>
</tbody>
</table>

Turnover rates not displayed for the Traditionalist generation (born between 1925 - 1945) and Gen Z (born after 1994)

### Veteran and Workforce Data

<table>
<thead>
<tr>
<th>Data as of 9/29/2015</th>
<th>Workforce Data</th>
<th>External Hiring Data Year to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effective Date</td>
<td>Total Regular Workforce</td>
<td>Veterans</td>
</tr>
<tr>
<td>01/28/2015</td>
<td>48,842</td>
<td>953</td>
</tr>
<tr>
<td>02/25/2015</td>
<td>48,996</td>
<td>995</td>
</tr>
<tr>
<td>03/27/2015</td>
<td>48,981</td>
<td>1,004</td>
</tr>
<tr>
<td>04/28/2015</td>
<td>49,316</td>
<td>1,029</td>
</tr>
<tr>
<td>05/27/2015</td>
<td>49,269</td>
<td>1,039</td>
</tr>
<tr>
<td>06/26/2015</td>
<td>49,708</td>
<td>1,084</td>
</tr>
<tr>
<td>07/29/2015</td>
<td>50,023</td>
<td>1,112</td>
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<tr>
<td>08/27/2015</td>
<td>49,874</td>
<td>1,119</td>
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<td>09/29/2015</td>
<td>49,844</td>
<td>1,119</td>
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<tr>
<td>10/28/2015</td>
<td>49,851</td>
<td>1,126</td>
</tr>
<tr>
<td>11/24/2015</td>
<td>49,846</td>
<td>1,146</td>
</tr>
<tr>
<td>12/23/2015</td>
<td>49,628</td>
<td>1,139</td>
</tr>
</tbody>
</table>
Aetna is proud to have been widely recognized for our diversity and inclusion accomplishments. We have received awards from numerous organizations, including the Human Rights Campaign Foundation, DiversityInc, the National Association for Female Executives and many others (see the representative recognitions listed below).

- Aetna received a perfect score of 100 percent on the 2015 Corporate Equality Index (CEI), related to lesbian, gay, bisexual and transgender (LGBT) workplace equality. Aetna is proud to have achieved a perfect score every year since the creation of the index 14 years ago—the only company in its industry to have done so.
- The Human Rights Campaign Best Places to Work for lesbian, gay, bisexual and transgender (LGBT) employees – each year since created in 2002
- National Association of Female Executives 2014 NAFE Top 50 Companies for Executive Women and member of the NAFE Top Companies Hall of Fame for 15 years as a Best Company for Multicultural Women
Commitment to equal opportunity

“Aetna’s evolution as a leader in diversity and inclusion reflects the varied needs of consumers in the changing health marketplace. By harnessing the diversity of our employees through inclusion, we consistently seek to create better, more inventive solutions that meet the unique health care needs of different consumers. The challenge we face to continually increase the value we offer to our customers requires creativity and insight that only a diverse workforce operating in an inclusive culture can deliver.”

- Mark T. Bertolini, Aetna Chairman and CEO

Aetna’s Equal Employment Opportunity and Affirmative Action policy intends to assure that applicants and employees are treated fairly and have equal opportunities in all aspects of employment regardless of personal characteristics or status. The policy covers and complies with state and local laws that prohibit discrimination or harassment.

The policy spells out employee responsibilities, including a requirement that employees report any incidents of discrimination, harassment or retaliation. A process for reporting violations is part of the policy, including the availability of a confidential hotline to report concerns anonymously.

Aetna is committed to investigating any violations of the company’s equal opportunity policy and taking appropriate corrective actions. Complaints and investigations are kept strictly confidential to the maximum extent possible. Employees are expected to cooperate fully with any investigation. The policy also prohibits any and all forms of retaliation, harassment, intimidation, threats, coercion or discrimination resulting from a complaint. In 2015, we had two additional Office of Civil Rights (OCR) complaints as compared to 2014.
Employee Development

Aetna's workforce must be agile in this time of unprecedented health care change, when our nation is focused on rising health care costs, care delivery issues and new national health care solutions. In response to these challenges, Aetna has created Learning & Performance teams to help employees acquire and sharpen the skills and capabilities necessary for business success.

Our training and talent development model comprises the Talent Development and Aetna University corporate centers of excellence, a centralized shared-services training and development learning group, and decentralized training teams that align to business units. Aetna’s learning management system, the Aetna Learning Center (ALC), serves as the hub for all self-directed learning, including resources from strategic vendors and learning events. ALC courses help our employees gain job-related training and guidance for career development. In the last year, employees and affiliates completed 1,176,687 hours of learning courses through ALC.

<table>
<thead>
<tr>
<th>Course Type</th>
<th>Duration in hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conference/Seminar</td>
<td>35,520.00</td>
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<tr>
<td>Instructor Led Training - ILT</td>
<td>1,763,380.62</td>
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<tr>
<td>Instructor Led Training - Vendor</td>
<td>2,764.50</td>
</tr>
<tr>
<td>Live Webinar</td>
<td>1,543.75</td>
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<tr>
<td>Recorded Webinar</td>
<td>107.75</td>
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<tr>
<td>Required Reading</td>
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<tr>
<td>Technology Based Training - TBT</td>
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<tr>
<td>Technology Based Training - Vendor</td>
<td>1,172.50</td>
</tr>
<tr>
<td>Training - Self Study</td>
<td>740.25</td>
</tr>
<tr>
<td>Video</td>
<td>113.83</td>
</tr>
<tr>
<td><strong>Grand Total:</strong></td>
<td><strong>3,178,307.93</strong></td>
</tr>
</tbody>
</table>
Employee engagement

Our employee development activities emphasize experiential learning, and Aetna’s commitment to creating effective and innovative learning resources helps us exceed business goals through an engaged and capable workforce.

2015 Employee Survey: Company Overview

At Aetna our voices count.
Building a healthier world® starts with us.

We’re more engaged.*

<table>
<thead>
<tr>
<th>Total Engagement/2015</th>
<th>76%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Engagement/2014</td>
<td>68%</td>
</tr>
<tr>
<td>Industry Norm</td>
<td>71%</td>
</tr>
</tbody>
</table>

*Top 3 Drivers of Engagement

1. I have a promising future with Aetna.
   - 2015: 65%
   - 2014: 57%

2. I feel like a valued employee at Aetna.
   - 2015: 69%
   - 2014: 62%

3. I believe Aetna has a promising future.
   - 2015: 85%
   - 2014: 78%

We’re on the front lines, creating not only a different future for this company, but for our industry and our nation. We have to be much more accountable to our customers, and we’ll have to work together very differently to make that happen.

– Mark Bertolini on achieving Vision 2020

We value diversity and are more inclusive.

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<th>Aetna Culture Index</th>
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<td>2014: 71%</td>
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<td>2015: 76%</td>
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Key Culture Priorities

1. Open and Honest Two-Way Communication
2. Effective Decision Making
3. Accountability for Results

Our managers continue to evolve and excel.

2014 Manager Effectiveness: 78%

2015 Manager Effectiveness: 80%
“We’re on the front lines, creating not only a different future for this company, but for our industry and our nation. We have to be much more accountable to our customers, and we’ll have to work together very differently to make that happen.”

- Mark T. Bertolini, Aetna Chairman and CEO

We have created learning courses to educate leaders on a “70/20/10” model that builds talent by balancing learning experiences with formal and informal learning.

Through Aetna’s integrated Talent Management approach, we provide practical tools – the Talent Profile and Development Plan – via our integrated Learning Management Systems (LMS) to help employees manage their professional development.

Aetna is striving to become a consumer-oriented company whose mission is to build a healthier world. Our comprehensive talent development approach lets Aetna’s learning professionals influence the company’s strategic direction at all levels of the company.

We use scorecards to help align individual and organizational goals. Business and leadership scorecards support the company’s strategic goals, each business unit’s operating goals, and each employee’s performance goals. Business objectives are shared through an enterprise-wide scorecard, segment or business unit scorecard and individual employee scorecards. In 2015, 49,688 scorecards were created at Aetna to align and track our progress.

As part of this process, individual development plans and talent profiles are created, refreshed and reviewed with managers to make sure that development plans align with business goals and career paths. In 2015, 38,947 development plans were completed across the company, along with 37,137 talent profiles.
Employee development strategy

Aetna encourages and supports employee development. Development, for individuals and the organization as a whole, is ongoing and linked directly to business strategy and performance.

Career navigation

Employees drive their own professional growth and development, but managers are responsible for supporting and encouraging employee development and career growth. This accountability is captured in the Talent Development competency category on all leadership performance scorecards.

Aetna has developed educational events and resources to help employees learn how to navigate their careers effectively. Offered to all employees, DevelopU is a series of learning events that provides best-in-class information, tools, and resources to help people develop and enhance their careers. In 2015, the company hosted three waves of the DevelopU series, which resulted in 15,000 learning experiences for Aetna employees.

Mentoring

Our employees have the benefit of formal mentoring programs at both the business and enterprise levels. Aetna uses mentoring strategically as a primary means of workforce development. One-to-one and group mentoring relationships boost development, facilitate knowledge-sharing and drive two-way learning. Mentoring relationships can be face-to-face or virtual. There are now more than 900 mentor/mentee relationships at Aetna.

Mentoring at Aetna comprises five phases: goal setting, initiating, cultivating, separation and redefinition. Each mentoring pair completes training to build their knowledge of how to engage in a productive mentoring relationship. They are given a list of curriculum and development resources as well, which has resulted in clearer development goals and greater satisfaction with the overall mentoring relationship.

Employee development tools

- **The Aetna Learning Center** is Aetna’s learning management system, home to a wide range of learning resources directed toward development of specific skills, as well as overall career enhancement.

- **Competency Development Guides** – provide employees with learning opportunities aligned by organizational competency.

- **Talent Development Catalog** – a singular reference with a list of all employee development programs, tools and resources (published biannually).

- **Skillsoft** – self-directed eLearning courses (available through the Learning Center) help employees develop business professional skills in areas such as project management, Six Sigma, leadership development, personal effectiveness and much more.

- **Aetna Connect** – our internal social media platform provides easy access to tools and resources, and a venue for sharing information, posing questions and engaging in real-time dialogue. Through this platform, employees can access Aetna’s talent management team and subject matter experts at any time. In 2015, there were between 2,000 and 4,750 Aetna Connect users each day.
Organizational Competencies

Aetna has developed a set of core competencies that give employees greater clarity about how to lead by example, drive outstanding results, assess and manage talent, and plan their personal career growth. Using the competencies, employees are able to create meaningful job and career development plans. Aetna’s leaders are encouraged to use the competencies in their own development plans. The competencies also are used to measure employees’ leadership performance.

As a health care leader, Aetna’s corporate responsibility focus starts with meeting people where they are and equipping them with the tools and resources to live happier, healthier lives. Our organizational values and mission guide our CSR work to promote health and wellness community by community.

- Dr. MaryLynn Ostrowski, Executive Director, Aetna Foundation

Aetna’s organizational competencies are:

- **Adaptability**: Quickly and effectively adapts to the changing demands of the environment
- **Collaboration**: Actively works with others to achieve goals and create value
- **Communicating for Impact**: Effectively conveys and presents information in a clear, transparent manner
- **Decision-making**: Effectively reaches conclusions and makes decisions
- **Driving for Results**: Holds self and others accountable for achieving best outcomes
- **External Focus**: Seeks external factors to inform consumer-focused approaches
- **Inclusiveness**: Embraces global mindset and diversity of ideas, perspectives and backgrounds
- **Leading Change**: Inspires innovative solutions in a manner that engages others
- **Strategic Thinking**: Develops a competitive vision that aligns with consumer needs
- **Talent Development**: Identifies and develops diverse talent to maximize performance and achieve individual and organizational goals

Leadership Development

Aetna is truly among the leaders in corporate social responsibility. It is clear through our organizational values and mission to build a healthier world that CSR is part of how we do business.

Leading for Success

Our manager effectiveness and talent management curriculum, called Leading for Success, was launched in 2015 to facilitate growth and development of Aetna’s leaders and to enhance their ability to manage team talent. In 2015, 1,200 employees completed Leading for Success, which is currently being expanded.

Aetna University

We established Aetna University to develop leaders at every level of the organization. Core programs focus on four career levels: new leaders, developing leaders, experienced leaders and senior leaders. We offer other programs designed to develop specific skills, such as leading a profit and loss center, understanding the health care ecosystem and deepening business acumen, among others.
Our Suppliers
Our Suppliers

At Aetna, we consider our strategic suppliers to be a key part of our success. We expect them to reflect our clear commitment to corporate social responsibility principles and sustainability practices.

As Aetna develops enterprise goals and initiatives around sustainability, our goal is to hold our strategic supplier partners to the same standards through the Supplier Sustainability Assessment. The Supplier Sustainability Assessment, last launched in 2014, is being re-designed so that the content remains current to Aetna’s goals.

The assessment is designed to evaluate the progress of our suppliers in key areas such as environmental and social policies. Where we find that suppliers fall short of our expectations, our goal is to work with them to establish programs and procedures that will enable them to improve in key areas. We will use an online tool to help facilitate the assessment process and the creation of resulting action plans.

Supplier Diversity

Consistent with our company’s pursuit of diversity goals, Aetna strives to provide traditionally underutilized (TUU) suppliers with the maximum practicable opportunity to take part in our many procurement opportunities. Strong supplier diversity helps us to understand and serve multicultural constituents more effectively. It lets us purchase a broader range of high-quality products and services, and it heightens our ability to serve the many communities in which we live and work.

We forge business relationships with certified minority, women, LGBT (lesbian, gay, bisexual, transgender) and small-business suppliers. To join our Supplier Diversity Program, businesses must be certified as:

- Minority owned
- Woman owned
- Lesbian, gay, bisexual or transgender owned
- Veteran owned
- Disability owned
- A small business enterprise

Aetna accepts certification from these third-party organizations:

- National Minority Supplier Development Council®
- Women’s Business Enterprise National Council
- National Gay & Lesbian Chamber of Commerce
- U.S. Department of Veterans Affairs
- U.S. Business Leadership Network
- U.S. Small Business Administration
- Approved state, city, or local government municipalities, on a case-by-case basis
Pursuing key priorities and enhancing relationships

Aetna’s Supplier Diversity program has two major objectives. The first is to increase First Tier dollars procured directly with TUU suppliers. Each year, we establish both enterprise and business area supplier diversity targets that are directly tied to the company’s overall performance scorecard. Performance is tracked and shared with key business area leaders and the company’s Executive Committee.

To be successful, we believe that our support of TUU suppliers must be mirrored by that of the companies with which we do business. This is why our program’s second objective is to develop Second Tier purchasing partnerships. Aetna requires our prime suppliers to meet Second Tier targets in support of both our supplier diversity strategy and business needs.

As an enterprise, we strive to demonstrate year-over-year growth in our supplier diversity expenditures:

- In 2015, Aetna’s first- and second-tier spend with certified minority owned; women owned; lesbian, gay, bisexual, transgender owned; disability owned; veteran owned; and registered small businesses totaled $263 million.
- In 2015, our target was 10 percent. Our result was 10.57 percent.

We are further strengthening our ability to be inclusive in our sourcing activities by proactively engaging traditionally TUU suppliers. In 2015, we took part in TUU-focused meetings, conferences and other events involving a range of leading organizations, including: Greater New England Minority Supplier Development Council; Women Presidents Education Organization; Women’s Business Enterprise National Council; National Gay and Lesbian Chamber of Commerce; National Minority Supplier Development Council and others.

2015 supplier diversity awards & recognition

Aetna’s supplier diversity efforts and leadership were recognized by several leading organizations.

- Aetna was named 2015 National Supplier of the Year by the Greater New England Minority Supplier Development Council
- Aetna was named 2015 Women’s Enterprise USA Corporation of the Year
- Minority Business News USA recognized Aetna among its 2015 Corporate 101: America’s Most Admired Corporations for Supplier Diversity for demonstrated commitment to growing and developing minority-owned enterprises
- Aetna Procurement Director Rose Hatcher received these 2015 recognitions:
  - Women's Enterprise USA Top 100 Leaders in Corporate Supplier Diversity
  - Minority Business News USA Champions
  - Champion of Diversity for DiversityPlus Magazine
  - Greater New England Minority Supplier Development Council Shining Star Award for providing exceptional contributions to the Council
Our Products & Services
Our Products & Services

Health Outcomes Matter

Aetna is committed to building a healthier world – and nothing is more essential to that mission than improving the health outcomes of the people we serve. Driven by our core values, we put people at the center of everything we do, striving always to view the world from their perspective. This means that, across our organization, Aetna people work together to help our members have more healthy days.

Healthy days: a foundation for healthier communities and a healthier world.

Our comprehensive approach to improving health outcomes encompasses access to many preventive services without cost, and achieving high marks for product and service quality. Yet, to help sustain this path of improvement, we work equally hard to help transform our health care system – helping to shift its focus away from volume and toward outcomes and value.

We work actively with providers to build value-based models of care. We believe that such models deliver more healthy days for people and lower overall costs – today and tomorrow. A focus on value also can help address persistent cost and quality problems in the health care system, which will make the system more sustainable. With the value-based health care model, doctors and hospitals are paid for helping to keep people healthy, and for improving the health of those who have chronic conditions – in ways that are evidence-based and cost-effective.

Value-based care often involves concepts such as:

- **Patient-centered medical homes** – where a primary care doctor leads a clinical team that oversees each patient’s care in a practice.
- **Accountable Care Organizations (ACOs)** – alliances of doctors, hospitals and other health care providers that deliver and coordinate patient care.
- **Joint ventures** – alliances between insurers and health systems that aim to improve people’s access to quality care that is better coordinated and lower cost.
Value-based Care – A Team Effort

In an ACO, a primary care doctor, supported by a care team, works with patients to help keep them healthy or improve their health, in contrast to engaging them in treatments when they are sick or injured. In value-based care arrangements, Aetna and providers pursue the same goals:

- Improving care quality and patient satisfaction
- Improving the health of patient populations
- Reducing costs

In 2015, the percentage of Aetna’s medical claims dollars that came from value-based care arrangements rose by more than a third, according to Aetna’s internal data. We are striving to move the needle even further by setting an important goal: 75 percent of Aetna claim dollars will come from value-based care by 2020.

Part of this momentum can be attributed to the 2013 launch of our Healthagen business unit. The Healthagen organization supports providers, payers, employers and consumers with health and technology services. It also helps providers adopt strategies for navigating the changing health care landscape. Healthagen models help providers and purchasers evolve toward better care quality and reduced costs while also providing patients with the tools to become active members of their own care team.

At year-end 2015, nearly 6.2 million Aetna medical members were receiving care from doctors, hospitals and others in value-based care arrangements.

ACOs are expanding our value-based network

More than 250 active ACO negotiations covering 60% of U.S. population

Key

- **Contracted ACOs**
- **Primary Care Medical Homes (PCMH)**
- **Medicare Collaborations**
- **ACOs in Negotiation**
- **Other Aetna Value-based contracts** (Institutes of Excellence and Quality, Hospital/Specialty P4P, Bundled Payments, Aetna Performance Network, Aexcel & Savings Plus)
ACOs have produced strong improvements in performance:

- Increased generic prescribing for the most common types of drugs by 10 percent for all ACOs
- Decreased the impactable surgical admission rate by 14 percent for all ACOs
- Reduced overall medical costs versus expected costs for a given location by 8.1 percent for all ACOs and 13.2 percent for ACOs with 5,000 or more members

Better Health Through Information

We bring together previously dispersed and disconnected health care system information to help health care professionals and patients make informed decisions that can deliver better health outcomes.

Our work makes it possible to put meaningful health care information into action faster, which can help members access the right care at the right time and enjoy more healthy days. Aetna’s solutions and capabilities provide greater efficiency, speed and effectiveness of care for members.

Drawing on the potential of these connections, we are helping to address health issues while lowering total effective costs through solutions such as:

- **Evidence-based applications and clinical decision-support tools** – which detect potential gaps in care and help to eliminate redundancy and waste. In 2015, more than 30 million “Care Considerations” or clinical alerts were shared with physicians and patients, reducing medical errors and improving care quality.

- **The iTriage app** – which gives consumers access to more personalized and efficient health care information. This free mobile app lets consumers get medical answers, find care options and maintain their health information securely. With iTriage, users can use their smartphones to research their symptoms, find a medical provider that best serves their needs and book an appointment. It’s no wonder that this app has surpassed 15 million downloads.

Aetna’s spirit of innovation doesn’t end there. We were the first to create a joint venture arrangement with a health system when we established Innovation Health Plans, a health plan jointly owned with Inova Health Systems. The joint venture aligned two marquee organizations to provide more affordable, quality health care to Northern Virginia employers and residents: Aetna provides health benefits administration and care management capabilities while Inova handles health care delivery. Innovation Health Plans launched new products in 2014, and since then has grown to serve 190,000 members in the region.
Navigating the maternity journey

Women who are pregnant or planning to start a family want to ensure that their babies are born healthy. Yet, they often encounter diverse opinions and conflicting information about the right ways to go about preparing for maternity and childbirth. Aetna has stepped forward with an innovative program that gives prospective moms practical resources and proactive guidance so they can take confident steps toward having a healthy baby.

Aetna’s Beginning Right Maternity Management Program, which plan sponsors can select, provides:

- Educational Materials: Enrolled pregnant women receive materials that inform them about prenatal care, signs of preterm labor, what to expect before and after delivery, newborn care and more.
- Risk Assessment: Enrollees complete a pregnancy risk survey, which helps to determine whether they face pregnancy risks and, if so, how high those risks might be.
- Proactive Advice: If a woman has identified risk factors or health conditions that could affect the pregnancy, Aetna nurses are able to help by offering guidance on lowering risk and other support.
- Smoking Cessation: Ceasing to smoke may lower the risk of a baby’s preterm birth, low birth weight and other health risks. “Smoke-free Moms-to-Be” is a program that helps pregnant women become nicotine-free, offered to members who indicate on the Pregnancy Risk Survey that they smoke.
- Post-partum Outreach: All enrollees get information on post-partum matters (including post-partum depression and guidelines for preventing Sudden Infant Death Syndrome); moms with higher risk may receive phone calls to guide them to resources, remind them to schedule physician visits and collect information on their childbirth experience.

Toward improving infant safety

Aetna collaborates with the March of Dimes, The Leapfrog Group and others on infant safety programs that encourage women, doctors and hospitals to wait until at least 39 weeks of pregnancy before pursuing electively scheduled deliveries. Deliveries scheduled before 39 weeks remain common in some locations, even though experts agree that such deliveries should be limited to cases where there is a medical reason to do so.

Aetna is:

- **Informing** our pregnant members about the health benefits of full-term pregnancies.
- **Encouraging** hospitals to avoid scheduled deliveries before 39 weeks when they are not medically necessary for mother or baby.
- **Sharing** information with members about which hospitals have programs for avoiding early electively scheduled deliveries.
Care Management – For Every Facet of Health

At Aetna, care management is defined as caring for people at every stage of health. For those who are healthy, we help them prevent disease; for those managing health conditions, we help them care for themselves more effectively; and for those who are sick, we help them get the right care.

Care management also involves inspiring members to care about their health and nurturing their commitment to their own well-being. Aetna nurses and doctors act as part of a member’s broader care team. Working with health care providers, our clinicians draw on their extensive clinical and health plan expertise to help guide members physically, emotionally and financially through both health crises and ongoing care.

Three pillars support care management at Aetna:

- **Strong Foundation** - our fundamental strengths in case management that have demonstrated results
- **Personalized Care** - our ability to create an individual care plan for each member, at all stages of health
- **Smarter Health Care** - our use of vast information resources and assets to personalize care

The Aetna Care Management program comprises several components of wellness that work together to help our members receive quality care, no matter where they are in their health journey.

- We help patients and families take on some of life’s toughest issues – major emergencies and trauma.
- We identify at-risk members and help them navigate through their health journey. Our clinicians help them achieve better health through best-in-class care management, including case management and disease management programs for chronic heart failure, diabetes, and other diseases.
- We have an integrated behavioral health-medical approach to ensure that plan members get assistance with the critical emotional and stress-related dimensions of dealing with difficult diseases.
- We have nurse case managers working within offices of some health care providers who support Aetna’s Medicare Advantage members. This collaboration has demonstrated improvement in care and lower costs for these members.
- Our Compassionate Care Program helps patients gain access to hospice care earlier, while they continue to receive curative treatment. Our specially trained nurse case managers often help members address concerns that may be difficult to share, easing their journey while also reducing unnecessary emergency room visits and hospitalizations.
- Underpinning these professional programs is Aetna’s comprehensive suite of easy-to-use tools and resources, which members and their families can employ to take greater control of their health.
Case management – member-centered assistance

Aetna’s case managers help members access the right level of care, which can help drive better health outcomes, increase member satisfaction and lower overall health care costs.

Often, when a member gets a new diagnosis for a certain condition or disease, he or she can benefit significantly from guidance by a trusted source. An Aetna case manager can help by illuminating the tools, resources and options available for the most efficient use of health plan benefits. By applying our clinical knowledge and comprehensive assessment tools, we can build individualized plans for moving forward.

Case management involves identifying and evaluating an individual’s potential needs, gaps in care, and readiness to change by applying our clinical knowledge and our comprehensive assessment tools.

Based on an assessment of the member’s needs, the case manager builds an individualized case management plan.

The case management process often begins when Aetna, using predictive modeling and claims data, identifies a member who might benefit from the service. This identification process finds members who underuse or overuse the care delivery system – either of which may result in avoidable, costly health events. A nurse would proactively contact the member to see if there are any gaps in care and whether the member knows how best to receive care under his or her health plan. If appropriate, the case manager would also work with the member’s doctors to close these gaps and help make care more efficient and effective.

Case management nurses also help members who are in difficult circumstances – in the hospital, needing a transplant or other complex care, or perhaps facing difficult end-of-life needs. In such instances, we use a “whole patient” approach, creating an individual case management plan and monitoring the member’s progress.

An Aetna case manager might also assist with managing ongoing conditions, and coordinating care – to ensure that the member gets the right care from the right provider at the right time. The nurse might connect the member with resources for achieving a healthier lifestyle, such as weight management and smoking cessation.
Integrating behavioral health into the medical equation

Long-term illnesses such as diabetes and heart disease can be complicated and costly to treat – especially if they also involve behavioral health factors. When behavioral health issues go undetected and untreated, they can interfere with a person’s overall health as well as their ability to follow a treatment plan. Such detection can be very important: Researchers estimate that 50 – 80 percent of all medical illnesses reported to physicians have a strong emotional or stress-related component.  

This is why Aetna offers integration of medical and behavioral care for our members. Clinical teams across Aetna have been trained to assess and identify mild to moderate behavioral health issues that often develop alongside medical conditions, such as stress, loss of a loved one, anxiety and depression. Our clinicians speak with members using motivational interviewing techniques, which helps to uncover information that members would not necessarily think was relevant or important to share.

With such issues recognized early on, we can help the member’s care team develop a more comprehensive plan for care, one that addresses both the member’s underlying behavioral health issues and his or her medical condition. This plan might include referring members to a behavioral health care professional, as needed, based on their health benefits and insurance plan.

Our integrated approach has already delivered significant results. Addressing members’ total medical and behavioral health has resulted in a 44 percent increase in behavioral health screenings, and a 50 percent increase in identifying members with both a behavioral health and medical condition.

Behavioral health – new condition management program

Many behavioral health conditions don’t fit neatly into single categories and can overlap each other. This is one reason why Aetna Behavioral Health plans to launch a new Condition Management program in January 2016. This comprehensive program follows an evidence-based, bio-psychosocial model that aims to engage our members and their families who are struggling with acute, costly and chronic behavioral health conditions.

Those experiencing a behavioral health condition face a unique set of challenges. They may have difficulty coping with everyday life activities, and put significant stress on their family and support systems. They often find it hard to navigate through the complex treatment and service delivery process. Also, they may suffer from motivation issues due to the condition, its stigma and the difficult work needed to succeed at treatment.

Aetna believes that these members and their families need active support to overcome these challenges. This is why our new Condition Management program offers:

- Early identification of potential issues through sophisticated analytics
- Direct engagement through intensive outreach strategies
- Health advocacy for members to coordinate and work through co-existing medical and behavioral health conditions
- A unified approach that can help members access the right treatment, services and resources

The program identifies and engages Aetna members who are diagnosed with high-risk acute and chronic behavioral health conditions. Members enrolled in the program get support to help keep them involved and taking the steps necessary for successful treatment. They also receive support with achieving changes in behavior that can improve their overall functioning and wellness.

We understand that one health condition can affect the successful treatment of another. This is why Condition Management promotes collaboration among everyone involved in the member’s medical and behavioral health care, including providers, the member’s family and support system, and other Aetna clinical programs.

Compassionate care

The Aetna Compassionate Care Program helps members and their families through trying times, such as when they are facing the advanced stages of an illness. Our nurse case managers understand the physical, emotional, spiritual and cultural needs of individuals dealing with a critical illness. They are available by phone to offer support and information and are skilled in talking about concerns and difficult questions.

Aetna nurses help families arrange for care and manage benefits (including Hospice coordination) and find the resources they need. They also can help doctors and other caregivers manage pain and symptoms. Through our nurses and our dedicated Aetna Compassionate Care website, families can access advanced care planning information and tools to help guide them as they make tough decisions.

Prevention is critical

Aetna’s Innovation Labs team harnesses data to try to predict the risk of metabolic syndrome, a group of health conditions that can increase a person’s likelihood of developing heart disease, stroke and diabetes. As an outgrowth of this work, the Labs conducted a pilot program with Newtopia, a precision health company that uses genetic testing and behavioral science to create personalized disease prevention plans.

The pilot involved volunteers from among Aetna’s own employees, who went through targeted genetic testing, and assessments of lifestyle and personality. Drawing on the test results, participants were given personalized wellness programs, which featured real-time, online coaching for nutrition, exercise and behavior management. Participants took part in the program through such channels as a mobile lifestyle tracking system, social health networking, gaming and wearable devices. The results were profound: participants lost weight, reduced their waist sizes and were highly engaged in the program. Based on this success, Aetna began offering the Newtopia program to its largest customers and their employees.

Breast cancer

Aetna launched a pilot program – Aetna CarePal – in 2014 to help support women diagnosed with breast cancer. The program connects Aetna members who are recently diagnosed with breast cancer with Aetna members who have overcome breast cancer, who share their knowledge, insights and support by drawing on their personal experiences and struggles.

As part of the program, Aetna also reaches out to women who are newly diagnosed with breast cancer, as well as women who are in remission. The program is entirely voluntary, with participants sharing only the information they wish to discuss. Each participant is carefully matched with another based on a variety of considerations, including their responses to questions, medical information and social factors. Discussion topics might include treatment and side effects, body image and appearance issues, or how the diagnosis impacts other people in the woman’s life.

The Aetna CarePal program is one component of our efforts to help members with cancer. Our nurse case managers help people navigate the health care system during their treatment, collaborating with health care providers to encourage evidence-based oncology treatment.

The Affordable Care Act requires non-grandfathered plans to provide coverage for certain “preventive care” without cost sharing for services provided in network. Aetna has developed a list of covered preventive services and covers them without cost sharing in all insured plans. We also are committed to providing coverage for women’s health services in compliance with the Affordable Care Act. This includes instances where we already provide coverage that goes above and beyond what is required under existing guidelines.
Avoiding medical errors

It’s a disturbing fact: Twice as many people die from medical mistakes and errors than from breast cancer. We’re trying to make health care safer. For example, our pharmacists, nurses, psychologists, psychiatrists and specialists collaborate to help people avoid unnecessary access to habit-forming medications. Our efforts include:

• Suboxone Case Review program – through which we improved opioid abstinence rates by 30 percent, reduced inpatient hospital admissions by 35 percent, and decreased total paid medical costs by 40 percent.

• Analyzing trends to identify areas for improvement – in one recent program, our clinical teams helped to reduce opioid prescriptions by 14 percent among 4.3 million members.

• Monitoring our members’ claims – to help them avoid mistakes and errors. We step in thousands of times a year to alert patients, doctors and health care facilities of potential safety issues.

Each year, our Rx Check program faxes or mails more than 100,000 letters to medical providers for drug-to-drug interactions. Meanwhile, Aetna’s ActiveHealth Management organization sends tens of millions of “Care Considerations” (alerts warning of missed opportunities for best practice medicine or potentially dangerous drug interactions) to providers and patients.
Access to Coverage

Beyond the changes advanced by the Affordable Care Act in 2010, our nation needs to take additional steps to address our health care quality and affordability challenges. For most Americans, the biggest obstacle to gaining health care coverage is affordability. This is why Aetna continues to pursue a comprehensive strategy to help people have access to affordable, quality health care.

We must continue to evolve the health care delivery system toward value-based care that is more affordable, convenient and of a higher quality.

One key to helping to expand health care coverage is continuing our work in advancing accountable care. We are forging more collaborative relationships with health care providers, and creating private exchanges where consumers can enjoy the kind of choice and access they value.

We also strive to use our insights and innovations to give people better tools that make health care easier to understand, find and manage. Aetna continues to work within our local communities, as well, to help individuals and families find resources to get and stay healthy for a lifetime.

Our consumer strategy includes the following objectives:

- Our consumer team will establish optimization and innovation across the consumer value chain. The team also will bring transparency to enterprise-wide consumer-facing initiatives.
- We will continue to develop a deep understanding of what our customers truly value, how they wish to access health care solutions and how they respond to our marketing efforts.
- Product distribution and product adoption will develop and execute new models for promoting consumer engagement across all of our products, promoting membership growth, as well as medical and administrative cost savings.

Powerfully engaging consumers

Personal health record

At Aetna, we aim to give members the right information to make sound decisions about their health. This is why we offer plan sponsors a powerful, secure online tool that plan members can use, in concert with their health care providers, to optimize their health. It’s called the Personal Health Record.

With a Personal Health Record (PHR), members can become better informed, organized and engaged as they manage their health. A PHR gathers together detailed, claims-driven information from across the health care spectrum, including physician office visits, lab work, diagnostic work and prescriptions. It combines this information with data the user enters into the PHR, such as family history, over-the-counter medications used, or allergies, to provide a comprehensive view of the member.

Using our patented CareEngine® technology, we constantly evaluate this data to identify any conflicts or gaps in care, as well as other ways to improve the member’s health. Based on this evaluation, the CareEngine generates member-specific health alerts and reminders that appear in the member’s online PHR record. The member can access this comprehensive health profile anytime, and print and share information with physicians as needed.

Member health engagement plan

For plan sponsors that elect this option, Aetna also offers an enhancement to the PHR which offers members additional tools for identifying and acting upon health improvement opportunities, and measuring their progress along the way.

The Member Health Engagement Plan (MHEP) gives members an enhanced view of the Personal Health Record. To help them track their progress as they complete recommended health activities, they will see a progress bar on their Activities and Alerts screen. This can both mark their achievements and motivate them toward greater accomplishments.

Plan sponsors also can harness the MHEP to further motivate members by offering incentives for pursuing healthy objectives. Depending on the employer’s Aetna health plan, these rewards might include a health fund contribution, an incentive credit or a gift certificate.
Consumer-directed health plans

Retirees and federal employees

Aetna recently expanded its presence in the Federal Employees Health Benefit Program (FEHBP) with two new options: a new Aetna Direct plan designed for federal retirees, and the Innovation Health joint venture with Inova Health Systems. These innovations, added to our existing array of plans, are helping the Office of Personnel Management provide federal employees, retirees and their families with high quality coverage options.

**Aetna Direct** – can help to significantly lower out-of-pocket costs for federal retirees who have primary coverage through Medicare Parts A and B. The plan's premiums are significantly lower than the FEHBP average.

**Innovation Health Plan** – aligns Aetna and Inova Health System to provide access to more affordable, quality health care to Northern Virginia. All five of Inova’s hospitals have been consistently recognized by U.S. News & World Report as either a Best National Hospital or Best Regional Hospital.

Public exchanges

Every state has a public exchange available to its residents. Public exchanges give people additional access and more opportunity to buy insurance, but the success of this new online shopping experience hinges on affordability and simplicity.

In 2015, Aetna participated on public exchanges in 17 states with about 87 percent of our exchange membership receiving subsidies.

Private exchanges

Aetna’s Private Exchange team develops and implements single- and multi-carrier proprietary private exchange solutions for Aetna’s Individual, Small Group, Middle Market, and National Account segments as well as our retiree products.

Private exchanges are created by private-sector companies, such as a health insurance company, a brokerage or consulting firm. Private exchanges can sell to both individuals and employer groups, like public exchanges. However, private exchanges are not part of the Affordable Care Act and do not make subsidies available the way public exchanges do.

Private exchanges may be an attractive solution for employers seeking to keep the cost of offering health benefits manageable. Employers can provide employees with a certain amount of money and then direct them to a private exchange. There, the employees can shop for a health plan and other benefits, such as dental, based on the options the employer has selected.

Our exchange solutions seek to empower consumers by:

- Simplifying the enrollment process
- Giving consumers increased choice to accommodate their needs
- Educating decision makers to optimize their health care purchasing decisions
- Engaging consumers in a year-round experience to increase satisfaction, lower costs and promote more positive health outcomes

We are acknowledged innovators in this area. In 2014, we helped to expand the capabilities of one of the nation’s first private health exchanges for large employers. HR Policy Association, which represents the chief human resource officers of more than 350 of the nation’s largest private-sector employers, chose Aetna to create the next generation of its Retiree Health Access (RHA) program. RHA now gives employers greater flexibility and an integrated platform, while providing retirees with an enhanced experience through consumer-centric technology, tools and resources.
Plan Performance and Customer Satisfaction

Quality improvement strategy

As part of our efforts to improve health care service, quality and safety, we measure our performance and that of others. To make health care better, we work with groups of doctors and other health professionals. We base our clinical activities and programs on proven guidelines. We also help members and their doctors make decisions more confidently by providing them with information and tools.

Program goals

- Meet our members’ health care access needs
- Measure, monitor and improve the clinical care our members get
- Address racial and ethnic disparities in health care
- Make sure we obey all the rules, whether they come from customers, federal and state regulators, or accrediting groups
- Make sure providers in our networks meet our standards

Program scope

- Providing our members with clear information
- Reviewing the health care services we cover and how care is coordinated
- Encouraging providers to communicate with one another
- Monitoring the effectiveness of our programs
- Studying the accessibility of our network providers
- Monitoring the overuse and underuse of services for our Medicare members
- Performing credentialing and re-credentialing activities
- Assessing member and provider satisfaction

Program outcomes

We collected data on a set of clinical measures called the Healthcare Effectiveness Data and Information Set (HEDIS®). We shared the results with the National Committee for Quality Assurance (NCQA) Quality Compass®. ** The NCQA makes the results public. Each year, Aetna uses the results to set new goals and seek to improve selected measures. As a result, performance has improved on many measures and many areas we perform better than the national average.

* HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).
**Quality Compass is a registered trademark of NCQA.

Medicare Stars

Aetna once again achieved high Medicare Star Quality Ratings for its Medicare Advantage plans in 2015. The Medicare Star Rating System, developed by the Centers for Medicare & Medicaid Services (CMS), ranks the quality and performance of Medicare plans to help beneficiaries and their families compare plans in their regions.

During 2015, Aetna had the highest percentage of members enrolled in plans rated 4.5 overall stars and the highest percentage of members enrolled in plans rated 4.0 overall stars among publicly traded companies (including those with over 250,000 Medicare Advantage enrollees). Aetna has increased the number of members enrolled in plans with a star rating of 4.0 or higher to 87 percent, representing an eight-percentage point increase from a year ago. In addition, several of Aetna’s Medicare Advantage plans have higher star ratings this year.

CMS’s Medicare Star Ratings are calculated using a scale of one to five stars (five is best), and may change from year to year, depending on a plan’s performance. Medicare health plans are rated on how well they perform on five categories: members staying healthy; managing chronic conditions of members; member experience with the health plan; member complaints; and health plan customer service.

Privacy breaches

Aetna has a comprehensive Incident Response Plan. We follow a rigorous process to immediately halt any ongoing breach we identify and to mitigate the impact to our customers. This includes notifying members as required under HIPAA and other applicable state and federal laws, reporting to the Department of Health and Human Services and applicable state regulators, and taking other steps such as offering free credit monitoring when a member’s financial information is exposed. We also address the root cause of a breach to strengthen controls, where necessary, to prevent a reoccurrence.

While Aetna has experienced unauthorized disclosures of personal information, the vast majority of breaches have impacted one or just a few individuals. In 2015, Aetna experienced no additional breaches impacting more than 50 individuals.

Through 2015, Aetna has not faced regulatory fines related to privacy breaches nor has Aetna made any settlements related to the HIPAA Privacy and Security Rules, including HITECH.
Digital Care
Digital Care Gets Personal

In health care, data is plentiful and tools such as personal health assessments, wellness programs and fitness trackers are everywhere. Unfortunately, these resources often are not integrated, so they’re not effective in helping people make the right decision at the right time.

In our work over many years, we’ve discovered digital engagement is most effective when integrated with traditional means of engagement with health care professionals, such as a phone discussion with a care management nurse. Certain innovations, such as Aetna MyPulse, may lead the way to digital interactions that are more human, by putting resources into the hands of people who need them, with the data as an enabling factor.

When care managers work with people in meaningful, goal-oriented ways, they become catalysts for health care transformation. Much like quarterbacks, they work with high-risk patients to help make the right calls at the right time. Patients who interact regularly with care managers can more ably manage their conditions and mitigate complications that could otherwise lead to an emergency or hospitalization.

Still, the reality is that people lead their lives between now-and-then doctor visits and phone calls. They have unique goals and distractions. Ultimately, they want to quarterback their own care, just as for their lives in general.

What would happen if the expertise of a care manager were connected with a consumer’s personal efforts to manage his or her own health? At Aetna, we are making it happen.
Cynthia’s Story

We have a name for this connection: Aetna MyPulse℠. Aetna MyPulse brings together health data, online tools and live nurse support to help improve health care results and reduce costs.

Here’s how it works: Imagine Cynthia, a 52-year-old single mother with type 2 diabetes. She’s often under stress, balancing a hectic work schedule and caregiving duties. She hasn’t always been keeping up with her medications. She enrolled in an online stress management program with good intentions, but only interacts with it occasionally, when she steps back to take time to focus on her wellbeing.

Bridging the gap

One day, Cynthia feels dizzy and goes to the ER. Once she is discharged, her claim and clinical data are sent directly to the Aetna Care Management platform as well as to her Personal Health Record. An alert is also sent to Sara, an Aetna nurse.

Aetna MyPulse connects Sara’s nurse dashboard to Cynthia’s online program activities and health information, so Sara can immediately discern that managing stress is a concern for Cynthia. Sara also can see that, although Cynthia’s activity suggests that she’d like to better manage her stress and her health, other factors in life often get in the way.

Thanks to the Aetna MyPulse background, when Sara calls Cynthia she already has a grasp of Cynthia’s priorities and how she aims to manage her stress and her diabetes. Working together, they set new priorities, including Cynthia’s resumption of the online stress management program. Over time, Sara checks on Cynthia’s progress and sends tips and reminders to her health dashboard. Sara suggests that visiting with a provider digitally in the future might present an alternative to going back to the ER. With Sara’s help and support, Cynthia feels more empowered to take steps that will help get her on the right track.

Improving member health engagement

In 2015, we expanded our ability to engage members in managing their health by implementing technology from RedBrick Health. Through this advanced technology, we can offer an online suite of programs that provides both chronic condition and wellness support.

This enhancement reflects our evolving eHealth care management strategy, which includes offering members personalized “bite size” virtual support that drives greater engagement. Members can take the Compass™ health assessment, available online in English and in Spanish, which offers a highly engaging experience and tailored communications that encourage them to take online programs that best meet their needs.

This technology also helps our health coaches and clinicians better support member health care needs by making it easier to monitor participant activity and refer them to appropriate support programs.
Member Diversity
Member Diversity

Aetna was one of the first health plans to collect race and ethnicity information from its members – nearly six million Aetna members have voluntarily provided the information to us. This has helped us understand the best opportunities in our membership for creating specific, culturally appropriate programs.

The following initiatives illustrate our commitment to reducing racial and ethnic disparities in health care.

Aetna’s Provider-Focused Diabetes Pilot

Aetna created a provider-focused program for African-American and Hispanic diabetic members in a large provider practice in the Dallas area. The program included the addition of a bilingual diabetic educator and culturally appropriate patient education materials. The pilot’s success was determined by improving levels of diabetic control and health outcomes of the participants.

Beginning Right® Maternity Program

The Beginning Right® Maternity Program aims to decrease the risk of premature delivery. This initiative provides at-risk mothers with education and preterm labor identification services early in pregnancy.


Results have shown that African-American women enrolled in the preterm labor program were more likely to have full-term babies than women not enrolled in the program.

Breast Health Ethnic Disparity Initiative (BHEDI)

Aetna’s Breast Health Ethnic Disparity Initiative reaches out to African-American and Hispanic women age 42 and over who have not had a mammogram in accordance with American Cancer Society guidelines. To identify these members for outreach, Aetna combines medical claims data with self-reported race and ethnicity data. Through letters or outreach calls, we provide culturally sensitive information to address individual risk factors and barriers to receiving this screening.

Care Considerations Alerts

Care Considerations are clinical alerts sent to physicians and members based on respected sources of evidence-based medicine that identify care gaps, medical errors and quality issues. Aetna continually evaluates the medical literature to reveal care considerations appropriate for targeted at-risk populations. Examples of Care Considerations for racial and ethnic minorities include:

- Clinical reminders for sickle cell disease in African-American members
- Medication therapy reminders for chronic heart failure in African-American members
- Screening reminders for Asian members with hepatitis B who have a high risk for liver cancer

Cultural Competency Training

Aetna offers a cultural competency training course to health care providers. This online, evidence-based, case-based learning program is called Quality Interactions - a Patient Based Approach to Cross Culture Care. The training aims to deepen the Aetna clinical community’s understanding of health care disparities among racial and ethnic groups, while also providing ongoing education on cultural competency in health care to improve patient outcomes.

This interactive program uses common clinical and cross-cultural scenarios to build a framework of knowledge and skills for delivering quality care to diverse patient populations. Physicians and nurses who complete the courses can earn continuing medical education (CME) credits and continuing education units (CEU) accredited by Tufts University School of Medicine. The program is mandatory for all Aetna clinicians.
Emergency Room (ER) Utilization in Minority Asthmatic Populations

Aetna has engaged in a pilot to address ER utilization by members of minority populations who have asthma. While complications from asthma can be life threatening or fatal, proper treatment can mitigate these complications and improve quality of life for those with asthma. In addition, proper treatment decreases the waste that leads to excess health care costs. This initiative uses a combination of culturally appropriate strategies, including:

- Home-based environmental assessment
- Member educational materials
- Telephonic nurse outreach
- Physician engagement

The pilot’s success will be determined by members’ health outcomes, including improved medication compliance. The pilot aims to increase the use of members’ asthma controller medications, as well as to increase member visits to their primary care physician and/or asthma specialist. Additionally, the pilot seeks to reduce avoidable asthma-related ER visits and in-patient hospital admissions.

Hypertension in African Americans Study

Aetna conducted a randomized control study in 2007 that examined the effectiveness of a hypertension disease management program in attaining and maintaining clinically acceptable blood pressure measurements among hypertensive African-American members. The study was conducted in collaboration with Morehouse School of Medicine (MSM) and Health & Technology Vector, Inc., and was partially funded by Sanofi-Aventis.

The study found that the Culturally Competent Disease Management Program (CCDMP) was effective in increasing the percentage of members with clinically acceptable blood pressure. The study was published in April 2010 in the peer-reviewed medical journal, Population Health Management.
Looking Forward – Healthagen

Aetna has a vision for building a healthier world. Underpinning this vision is a focus on the individual, to provide access to quality care at an affordable cost. This confluence of quality and affordability is at the heart of our Healthagen solutions. We manage risk, integrate information, collaborate with providers on effective models of care, and develop quality and cost-effective clinical products and services for customers.

Here are some key focus areas that are important to Aetna’s vision:
Our Environmental Performance
Our Environmental Performance

Our Approach

As a leading health care company, Aetna is not a significant producer of greenhouse emissions. But we recognize and welcome our responsibility to limit our impact on the environment in which we live and work.

To help promote and protect a safe, clean environment that contributes to the health and well-being of our coworkers and neighbors, we monitor and measure our environmental impact and have implemented a number of initiatives to help reduce these impacts. It’s what we believe all responsible companies should do.

Aetna maintains operations at 170 facilities across the United States. As a health care and related benefits company focused on building a healthier world, we work hard to reduce our carbon footprint and maintain the health of the communities where we operate.

Sustainability strategies and green initiatives are a priority at Aetna-owned facilities, such as those at our campuses in Hartford, Windsor and Middletown, Connecticut, and Blue Bell, Pennsylvania. Aetna also has made sustainability commitments at select leased properties. Aetna currently monitors and reports on the greatest environmental impacts at five owned locations and 87 field sites.

Newmark Grubb Knight Frank Global Commercial Real Estate (Newmark Grubb Knight Frank) serves as the property management company for all Aetna facilities. Newmark Grubb Knight Frank is working with Aetna to implement sustainability practices and improve the entire portfolio’s environmental performance. At select leased property locations, Aetna and Newmark Grubb Knight Frank are developing a Real Estate Services Leased Portfolio Sustainability program to address factors influencing environmental sustainability performance. Aetna is determined to enhance the social and environmental well-being of the communities we serve.

As a result, we have specific green building initiatives that are designed to reduce potential environmental impacts by minimizing waste, reducing emissions, lowering water consumption, optimizing energy performance and improving the office environment.

These steps are designed to improve the health and safety of our employees and the communities in which we operate. They also earmark Aetna as a participant in the global effort to reduce greenhouse gas emissions and mitigate climate change.
2015 Environmental Goals

In 2015, Aetna monitored sustainability initiatives against high level goals using environmental performance metrics for our existing portfolio of facilities. These include reductions in carbon dioxide (CO2) emissions through telecommuting, the use of renewable energy sources, energy savings through building commissioning, and waste reduction and diversion through managing supplier relationships and recycling. Aetna is in the process of implementing specific goals and targets.

Transportation
Reduce pollution through:

- Alternative public transportation
- Alternative fuel vehicles, carpooling and telecommuting
- Encouraging bicycle use and providing changing rooms

Water conservation
Conserve water by:

- Identifying high water-consuming fixtures and installing low water-consuming replacements

Building performance
Maintain building performance by implementing retro-commissioning programs:

- Monitoring to ensure building systems are installed, calibrated, and operating as intended
- Regularly inspecting and testing systems and equipment, and repair and upgrade those that are found to be out of specification

Energy use
Optimize energy usage by:

- Upgrading HVAC, lighting and related control systems, as necessary

Renewable energy

- Evaluate renewable energy opportunities on- and off-site
- Employ renewable energy sources where feasible

Source reduction/recycling

- Understand and identify opportunities to reduce source and waste stream materials
- Storage and collection of recyclables
- Toxic material source reduction
- Monitor occupant recycling
Aetna promotes a Sustainability Management and Green Strategy with a comprehensive approach to providing for responsible, reliable and cost effective sustainability at Aetna properties. The information below presents Aetna initiatives and associated 2015 environmental impacts.

### Land usage

**Site & building exteriors**
- Encourage lowest environmental impact practices and preserve ecological integrity through management of planting, pest control, landscape waste, irrigation, snow removal, building cleaning, paint and sealants use

**Transportation**
- Reduce pollution through alternate public transportation
- Reduce pollution through bicycle use and changing rooms
- Reduce pollution through alternate fuel vehicles, carpooling, and telecommuting

**Water efficiency**
- 17,289,122 gallons of reduced H₂O usage at the five owned properties in the period of 2010 to 2015

**Building fixture efficiency**
- Identify high water-consuming fixtures and recommend alternative replacements (i.e., water closets, urinals, shower heads, faucets)

**Irrigation water**
- Understand, identify and recommend landscaping practices that limit or eliminate the use of potable water for irrigation

### Energy & environment

**19 LEED & 24 Energy Star Facilities**

- 2,329,445 kWh of renewable electricity produced by Aetna's Photovoltaic arrays between 2010 and 2015
- 1,637 metric tons CO₂ saved
- 300,523 barrels crude oil saved
- 50,246 metric tons CO₂ saved

### Materials & goods

- 2,199 tons recycled paper, OCC, plastic, glass and metal, equivalent to 49,743 trees saved

### Source reduction & waste management

- Have a waste management policy and plan - understand and identify opportunities to reduce source and waste stream materials

### Storage & collection of recyclables

- Toxic material source reduction (i.e., mercury, PCBs, etc.)
- Monitor occupant recycling

### Project waste management

- Develop a project waste management policy and management plan
- Redirect recyclable recovered resources to be reused away from landfills

### Optimize energy performance

- Monitor and adjust or upgrade HVAC systems and controls to optimize energy efficiency

### Renewable energy

- Evaluate renewable energy opportunities (on and off-site)
- Use renewable energy sources, where feasible

### Ozone protection

- Refrigerant management program in place for all handling and transportation

### Optimize use of alternate materials

- Reduce environmental impacts of materials acquired for use in buildings

### Optimize use of indoor air quality (IAQ) materials

- Reduce the impacts of the IAQ impacts of materials acquired for use in buildings
- Reduce the impacts of the IAQ impacts of cleaning products, disposable paper, and trash bags
Transportation

Telecommuting represents an opportunity for Aetna to decrease greenhouse gas emissions, and increase flexibility and work/life balance for our employees. Aetna’s telework program is reducing carbon emissions by encouraging employees to telecommute.

Aetna introduced the telework program in 2007, offering many employees the opportunity to work from home via remote desktop access.

In 2015, more than 21,468 Aetna employees participated in the program, avoiding about 137 million miles of driving, and saving more than 5.7 million gallons of gasoline and 50,000 metric tons of carbon dioxide emissions.

Additionally, Aetna encourages the use of alternate fuel vehicles, providing access to electric vehicle charging stations at two corporate campus locations. In 2012, Aetna installed three plug-in electric power (PEP) stations at the Hartford campus for employees and a fourth station for a security vehicle, as well as two PEP stations at the Blue Bell campus.

Building fixture efficiency

Potable water is essential to a healthy life, but less than one percent of Earth’s finite resource is available for human use. This makes water protection and conservation essential to assure access to clean water for all.

Additionally, water delivery and heating require large amounts of energy. For example, letting a faucet run for five minutes uses the same amount of energy as leaving a 60-watt lightbulb on for 22 hours. Strategies for reducing water and energy usage include installing low-flow water closets, showerheads, urinals and faucets with sensors. Aetna focuses water efficiency practices on internal and external building fixtures to reduce overall water consumption in both owned and leased properties.

In 2006, Aetna launched a multiyear construction project to upgrade the water fixtures at the Hartford campus. Since program launch, the Hartford campus has reduced overall water consumption from 9,400 gallons per employee per year to an all-time low of 4,000 gallons per employee per year in 2015.
Building commissioning

Building commissioning ensures all building systems are functioning at peak performance based on the needs and operations of the facility. If systems or materials fail to perform at their peak levels, employee comfort may be negatively impacted. System failures also require more intensive use of water and energy resources.

Retro-commissioning is applied to existing buildings to restore them to optimal performance. Installation checks, operational checks conducted by trained maintenance professionals, updating operations and maintenance manuals, updating training materials, ongoing system monitoring and system upgrades are all strategies to maintain building commissioning. We are committed to ensuring that our properties operate at peak performance.

Aetna has invested in upgrading HVAC systems at several facilities. At the Hartford campus, the installation of a plate and frame heat exchanger and the operation of airside economizers allow for the free cooling of the building during the winter months. The free cooling utilizes cooling towers to make chilled water which is used in the voice/data and other rooms that house IT equipment. All air handling systems at the Hartford campus utilize an outside air economizer to cool the entire complex during normal business hours during the winter. Additionally, both of our data centers in Middletown and Windsor, CT utilize free cooling to cool the entire data center at full load during the winter months.

In 2015, Aetna completed the retro-commissioning project for its home office in Hartford, CT. The retro-commissioning project helps to ensure that all HVAC systems operate at peak performance. The program has resulted in a 12.5 percent reduction in electrical consumption and a 10 percent reduction in natural gas consumption as compared to the baseline year of 2012. This is equivalent to a total of 2,597 metric tons of CO₂ saved.

Aetna also completed a retro-commissioning project at its data centers in Middletown, CT and Windsor, CT. The program centered on optimizing the computer room air conditioning units (CRACs). Preliminary results have shown that the energy used by these units has been reduced by approximately 50 percent. This equates to an estimated annual savings of 924,376 kWh in Middletown and 636,015 kWh in Windsor. This amounts to an annual savings 1,560,391 kWh or a reduction of 1,076 metric tons of CO₂.

Optimize energy performance

Proper office lighting, comfortable room temperatures and the powering of a myriad of electronic appliances are necessary processes of daily building functioning, though they require a lot of energy. Heating and lighting systems are ideal target areas to achieve energy reduction.

Aetna understands it has a responsibility to reduce the local and regional electrical load in the communities where we have facilities. By optimizing energy performance, Aetna aims to reduce energy demand, benefitting local communities and the environment.

Aetna has reduced energy consumption across its five owned campuses through various energy-saving techniques, including replacing old wooden windows with energy efficient windows, upgrading lighting to higher efficiency bulbs and ballasts, and installing Energy Star-rated devices and automatic shut-off switches.

Since initiating these strategies in 2009, Aetna has saved over 12.1 million kWh from 2010 consumption levels, a 14.8 percent energy reduction over five years.

- From 2010 through 2013, a 30.2 percent reduction was seen across 92 of the Aetna-leased properties managed by Newmark Grubb Knight Frank.
- In 2014, additional facilities were added to the field portfolio, and between 2014 and 2015 there has been a 3.4 percent reduction in the revised field portfolio’s electrical consumption.
Since the 2010 baseline, Aetna has reduced its usage by 13.3 million kWh of electricity.

Combined, Aetna’s facilities have reduced electricity consumption by 25.4 million kWh between 2010 and 2015.

This reduction is equivalent to a savings of 17,851 metric tons of CO₂ emissions. Additionally, Aetna has established a Green Data Center Program, allowing our data centers in Middletown and Windsor to operate 20 percent more efficiently. The Green Data Center Program centers on reducing energy consumption through the use of various IT and building management strategies. IT strategies include, but are not limited to, the use of “virtualized” servers and high-density computer environments featuring close-coupled cooling systems. Building management strategies include increasing discharge water temperatures in line with ASHRAE guidelines. From 2010 to 2015, these strategies reduced energy consumption by over 4.4 million kWh. These reductions occurred while business requests for data storage and systems capacity increased significantly.

Aetna also has earned Leadership in Energy & Environmental Design (LEED) certifications at various owned-property locations. Currently, Aetna occupies 19 LEED-certified buildings across both its owned- and leased-properties portfolio. All Aetna-owned facilities, including the Hartford campus, the two data centers and the two Blue Bell facilities, are utilizing the U.S. EPA’s Energy Star Portfolio Manager Program. The program allows Aetna to monitor ongoing building energy consumption. Aetna also has leased 33 Energy Star-labeled facilities across the country.

**Owned portfolio grid electricity usage, 2007-2015:**

<table>
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<tr>
<th>Year</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
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<tr>
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<td>81,410,268</td>
<td>77,501,506</td>
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**Leased portfolio grid electricity usage, 2007-2015:**

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<td>26,562,527</td>
<td>55,590,526</td>
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</tr>
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</table>
Renewable energy

Renewable energy comprised 13 percent of the U.S. energy portfolio in 2013. The federal government and many state governments have enacted policies and a variety of tax credits to incentivize the use of renewable energy. Additionally, many states have enacted Renewable Portfolio Standards (RPS), which require electricity providers to acquire or generate a certain percentage of the power supply they offer from renewable sources. Currently, an RPS typically has 2020 as an implementation deadline.

Aetna recognizes the importance of decreasing its reliance on fossil fuels in order to reduce the total U.S. greenhouse gas (GHG) emissions. We understand that GHG emissions decrease the air quality of the communities where our employees and customers live. Consequently, we have adopted goals to decrease our impact on neighboring environments.

In January 2010, Aetna installed a 975-panel solar array consisting of 240 south-facing solar panels and 735 rooftop solar panels, which supply renewable energy to the Atrium Building in Hartford. The system was designed to have baseline production of 241,700 kWh of renewable energy in year one.

In April 2013, Aetna installed a 975-panel solar array at the Windsor Data Center. The system was designed to have baseline production of 281,820 kWh of renewable energy in year one.

In October 2015, Aetna installed a 1,056-panel solar array at the Middletown Data Center. The system is designed to have baseline production of 389,869 kWh of renewable energy in year one.

In the period between 2010 and 2015, the combined output of the solar arrays has provided 2,329,443 kWh of electricity from a clean, renewable energy source - the sun. This is equivalent to 1,606 metric tons of CO2 emissions savings.

**Hartford, Windsor and Middletown solar array electricity production by year in kWh:**

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<tr>
<th>Windsor:</th>
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<th>2014</th>
<th>2015</th>
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<tbody>
<tr>
<td></td>
<td>204,896</td>
<td>281,680</td>
<td>279,696</td>
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<table>
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<tr>
<th>Middletown:</th>
<th>2015</th>
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<tbody>
<tr>
<td></td>
<td>66,277</td>
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</tbody>
</table>
Source reduction and waste management

Waste reduction is a global issue and a growing concern. In 1960, Americans generated 2.7 pounds of municipal solid waste (MSW) per day. By 2012, Americans increased their daily MSW generation by more than 160 percent, to 4.4 pounds per day. This accounted for producing 251 million tons of U.S. MSW. Some studies estimate that global MSW generation could double by 2025 to approximately 2.2 billion tons per year.

Aetna recognizes that, as an industry leader, it must play a role in generating less waste.

Waste reduction strategies exist for MSW, as well as hazardous and electronic waste. We are committed to the proper handling and management of these materials to protect public health.

By communicating and collaborating with our suppliers, we ensure thorough consideration of the choice, design and production of products used. This approach helps to reduce the amount of waste generated.

Aetna has focused on reducing the total volume of waste generated while diverting the waste it does generate from landfills. Across the Aetna-owned portfolio, we have implemented initiatives to recycle paper, cardboard, glass and plastic bottles. Aetna has been recycling fluorescent bulbs since 1994.

Aetna also participates in a program to recycle confidential shredded paper across all sites. In 2015, this material totaled 1,891 tons.

Since 2009, the Hartford, CT and Blue Bell, PA campuses have recycled 2,186 tons of material. This is equivalent to a savings of 8,028 metric tons of CO₂ emissions.
Greenhouse gas emissions

While Aetna does not manufacture physical products and is not a significant producer of greenhouse gases, we view our emissions as important because of the potential damage to the environment from carbon emissions.

Aetna believes that reducing our emissions and carbon footprint are part of a responsible, comprehensive approach to helping the communities where we live and work be healthier. Our customers expect those they do business with to do their best to curb their emissions, and we expect our key suppliers to do the same.

Aetna is an early signatory to the Business Roundtable’s “Climate RESOLVE” initiative to manage greenhouse gas emissions. Our management approach to emissions includes the tracking and reporting of our greenhouse gas emissions.

Our gross global emissions for 2015 decreased compared with the previous year. A contributing factor was the transition of additional Aetna employees to telecommuting status, which lessens emissions related to commuting to Aetna work locations.

Our emissions for 2015 are as follows:

Emissions Methodology

<table>
<thead>
<tr>
<th>Scope</th>
<th>Base year</th>
<th>Emissions (metric tons CO₂e)</th>
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</thead>
<tbody>
<tr>
<td>Scope 1</td>
<td>January 1 - December 31, 2007</td>
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<td>Scope 2</td>
<td>January 1 - December 31, 2007</td>
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</tr>
</tbody>
</table>

Methodology


Gases included in calculation and associated global warming potential

<table>
<thead>
<tr>
<th>Gas</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>CH₄</td>
<td>IPCC Fourth Assessment Report (AR4 - 100 year)</td>
</tr>
<tr>
<td>N₂O</td>
<td>IPCC Fourth Assessment Report (AR4 - 100 year)</td>
</tr>
</tbody>
</table>

Emissions factors applied and their origin

<table>
<thead>
<tr>
<th>Fuel/Material/Energy</th>
<th>Emission Factor</th>
<th>Unit</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diesel/Gas oil</td>
<td>23.1</td>
<td>lb CO₂ per gallon</td>
<td>U.S. EPA, UNIT CONVERSIONS</td>
</tr>
<tr>
<td>Natural gas</td>
<td>120</td>
<td>lb CO₂ per 1000 ft³</td>
<td>U.S. EPA, UNIT CONVERSIONS</td>
</tr>
<tr>
<td>Motor gasoline</td>
<td>19.4</td>
<td>lb CO₂ per gallon</td>
<td>U.S. EPA, UNIT CONVERSIONS</td>
</tr>
</tbody>
</table>
Emissions data:
January 1 - December 31, 2015

**Boundary used for Scope 1 and 2 greenhouse gas inventory**
Financial control

**Gross global Scope 1 emissions figures in metric tons CO₂e**
6,660

**Gross global Scope 2 emissions figures in metric tons CO₂e**
62,291

**Estimated level of uncertainty of the total gross global Scope 1 and 2 emissions figures**

<table>
<thead>
<tr>
<th>Scope</th>
<th>Uncertainty range</th>
<th>Main sources of uncertainty</th>
<th>Expanded explanation of uncertainty in data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scope 1</td>
<td>Less than or equal to 2%</td>
<td>Data gaps</td>
<td>Aetna leases properties that include electrical usage (Scope 1) in its lease rate. These locations are not separately metered for Aetna’s electrical usage but instead Aetna usage is a prorated share of the total. At these sites, Aetna’s prorated share has been estimated.</td>
</tr>
<tr>
<td>Scope 2</td>
<td>More than 2% but less than or equal to 5%</td>
<td>Data gaps Assumptions Extrapolation</td>
<td>Aetna leases properties that include electrical usage (Scope 1) in its lease rate. These locations are not separately metered for Aetna’s electrical usage but instead Aetna usage is a prorated share of the total. At these sites, Aetna’s prorated share has been estimated.</td>
</tr>
</tbody>
</table>

**Scope 1 emissions breakdown**

**Total gross global Scope 1 emissions by facility**

<table>
<thead>
<tr>
<th>Facility</th>
<th>Scope 1 emissions (metric tons CO₂e)</th>
<th>Latitude</th>
<th>Longitude</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hartford</td>
<td>4,930</td>
<td>41.767955</td>
<td>-72.68959</td>
</tr>
<tr>
<td>Middletown</td>
<td>376</td>
<td>41.594629</td>
<td>-72.721282</td>
</tr>
<tr>
<td>Windsor</td>
<td>225</td>
<td>41.86749</td>
<td>-72.679864</td>
</tr>
<tr>
<td>1425 Blue Bell</td>
<td>75</td>
<td>40.147655</td>
<td>-75.28627</td>
</tr>
<tr>
<td>980 Blue Bell</td>
<td>43</td>
<td>40.147651</td>
<td>-75.28909</td>
</tr>
</tbody>
</table>
Scope 2 emissions breakdown

Total gross global Scope 2 emissions by activity

<table>
<thead>
<tr>
<th>Activity</th>
<th>Scope 2 emissions (metric tons CO₂e)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Offices</td>
<td>49,257</td>
</tr>
<tr>
<td>Data Centers</td>
<td>25,023</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>840</td>
</tr>
</tbody>
</table>

Scope 3 emissions

Gross global Scope 3 emissions figures in metric tons CO₂e
68,476*

<table>
<thead>
<tr>
<th>Sources of Scope 3 emissions</th>
<th>metric tons CO₂e</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business travel</td>
<td>25,523</td>
</tr>
<tr>
<td>Employee commuting</td>
<td>50,246</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>75,769</strong></td>
</tr>
</tbody>
</table>

Engagement with suppliers and customers

During the Request for Proposal (RFP) stage, existing and potential customers frequently request information on GHG emissions and climate change aspects as well as other CSR issues. Aetna provides information to customers for evaluation. Additionally, Aetna Procurement requests information from suppliers about their sustainability efforts for potential scoring and comparison to others. See Our Suppliers page 39 for more details.

*Business travel and employee commuting only

About this Report

Scope of report

Aetna’s 2015 CSR Report is our second report developed in accordance with Global Reporting Initiative (GRI) guidelines. It covers the 2015 calendar year, from January 1, 2015 through December 31, 2015.

Reporting boundaries

The report covers activities and impacts under Aetna Inc.’s operations within United States, unless otherwise stated. Environmental performance data is based on our owned properties only, since data from leased properties are subject to negotiation with property owners and are difficult to collect in a meaningful, consistent form. All of the locations from which we do business outside the United States are leased. Aetna owns only 13 of its 152 U.S. locations. Data is collected from all owned locations, except as noted in the chart below.

Aetna owned locations - 2015

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City</th>
<th>State</th>
<th>Aetna Interest</th>
<th>Ee Numbers</th>
<th>Electrical Use</th>
<th>Water Use</th>
<th>Natural Gas Use</th>
<th>Fuel Use</th>
<th>Solid Waste</th>
</tr>
</thead>
<tbody>
<tr>
<td>10260 Meanley Rd.</td>
<td>San Diego</td>
<td>CA</td>
<td>OWN</td>
<td>103</td>
<td>x</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>750 Riverpoint Dr.</td>
<td>W. Sacramento</td>
<td>CA</td>
<td>OWN</td>
<td>198</td>
<td>x</td>
<td>x</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>151 Farmington Ave.</td>
<td>Hartford</td>
<td>CT</td>
<td>OWN</td>
<td>14</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>570 Pigeon Hill Rd</td>
<td>Windsor</td>
<td>CT</td>
<td>OWN</td>
<td>9</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>930 Middle St.</td>
<td>Middletown</td>
<td>CT</td>
<td>OWN</td>
<td>129</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>3200 Highland</td>
<td>Downers Grove</td>
<td>IL</td>
<td>OWN</td>
<td>322</td>
<td>x</td>
<td>x</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2222 Ewing Rd.</td>
<td>Moon Township</td>
<td>PA</td>
<td>OWN</td>
<td>401</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1425 Union Meeting Dr.</td>
<td>Blue Bell</td>
<td>PA</td>
<td>OWN</td>
<td>639</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>980 Jolly Rd.</td>
<td>Blue Bell</td>
<td>PA</td>
<td>OWN</td>
<td>592</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>14955 Heathrow Forrest Pkwy.</td>
<td>Houston</td>
<td>TX</td>
<td>OWN</td>
<td>404</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9881 Mayland Dr.</td>
<td>Richmond</td>
<td>VA</td>
<td>OWN</td>
<td>96</td>
<td>x</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Subtotal 2,907

Aetna formerly owned during 2015 (since sold)

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City</th>
<th>State</th>
<th>Aetna Interest</th>
<th>Ee Numbers</th>
<th>Electrical Use</th>
<th>Water Use</th>
<th>Natural Gas Use</th>
<th>Fuel Use</th>
<th>Solid Waste</th>
</tr>
</thead>
<tbody>
<tr>
<td>3535 E. Valencia Rd.</td>
<td>Tucson</td>
<td>AZ</td>
<td>OWN</td>
<td>521</td>
<td></td>
<td>x</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Subtotal 521

Grand Total 3,428

As used in this report, the terms “Aetna,” “we,” “our” and similar terms are used for convenience to refer to Aetna Inc. and its subsidiaries.
Stakeholder engagement

Our second comprehensive CSR report is another important step in our sustainability journey. By publicly reporting our sustainability performance, we can start a dialogue with our stakeholders on sustainability issues. By engaging with stakeholders and gaining a better understanding their concerns, we can improve our business performance and have a greater positive impact on society.

For this report, we engaged our CSR Council to inform our CSR materiality assessment and reporting strategy. We considered the perspectives of our employees, customers, communities, investors and governments. We selected this group for our initial CSR stakeholder engagement, which was undertaken as part of the report preparation process, because of their insight into all aspects of Aetna’s business. The CSR council validated the sustainability materiality assessment results and suggested additional topics for CSR reporting. Going forward, we plan to expand and formalize our stakeholder engagement activities.

We welcome your feedback and thoughts on this report and our sustainability program. Please contact us at corporatesocialresponsibility@aetna.com.

Associations and coalitions

We report all dues and special assessments paid to state and federal trade associations and coalitions operating under 501(c)(6) of the Internal Revenue code. We list the name of each organization that receives dues or special assessments of more than $50,000 in a calendar year. We also indicate the portion of such dues considered nondeductible as lobbying and political expenses under applicable tax law.

The full list of such organizations can be viewed on page 5 of our 2015 Political Action Committee report on Aetna.com.

Governance and ethics

Our reputation for excellence and integrity is one of our most valuable assets. We have earned this reputation by delivering quality products and services, and by adhering to the highest standards of business conduct. Our board of directors and company management believe that sound corporate governance principles help ensure that our standards of excellence, integrity, inspiration and caring are applied to all aspects of our operations.

We have embraced the principles behind the Sarbanes-Oxley Act of 2002, as well as the governance rules for companies listed on the New York Stock Exchange. We also have implemented governance changes in compliance with the requirements of the Wall Street Reform and Consumer Protection Act (the “Dodd-Frank Act”). These principles and requirements are reflected in the structure and composition of our board of directors, our committee charters and our corporate governance policies. They are reinforced through Aetna’s Code of Conduct, which applies to every employee and director, and they inform how we engage with all of our stakeholders.
Aetna requires all employees and key suppliers to revisit and annually document their familiarity with the Code of Conduct. The importance of the Code of Conduct is underscored in Aetna Chairman and CEO Mark Bertolini’s message to employees:

We believe that our corporate governance policies, principles and practices are good for our business, our industry, the competitive marketplace and for all of those who place their trust in us.

We maintain a publicly accessible website that contains information about our corporate governance policies and practices. The site can be accessed from About Us/Investor Information on Aetna.com.
<table>
<thead>
<tr>
<th>Disclosure</th>
<th>Description</th>
<th>Cross reference or answer</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strategy and Analysis</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>G4-1</td>
<td>Chairman’s statement</td>
<td>Chairman’s letter, p. 4</td>
</tr>
<tr>
<td><strong>Organizational Profile</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>G4-3</td>
<td>Name of the organization</td>
<td>Aetna Inc.</td>
</tr>
<tr>
<td>G4-4</td>
<td>Primary brands, products, and services</td>
<td>About Aetna, p. 6, <a href="#">Aetna Facts, Aetna Subsidiaries</a>, 2015 Form 10-K</td>
</tr>
<tr>
<td>G4-5</td>
<td>Location of the organization’s headquarters</td>
<td>Hartford, Connecticut, United States</td>
</tr>
<tr>
<td>G4-6</td>
<td>Countries with significant operations</td>
<td>Aetna has significant operations in the United States, and has a presence in:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Europe: Great Britain, Ireland</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Middle East &amp; Africa: Kuwait, Qatar, UAE, South Africa</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Asia: China, Hong Kong, Japan, India, Indonesia, Thailand, Singapore, Vietnam</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Oceania: New Zealand</td>
</tr>
<tr>
<td>G4-7</td>
<td>Nature of ownership and legal form</td>
<td>2015 Form 10-K</td>
</tr>
<tr>
<td>G4-8</td>
<td>Markets served</td>
<td>About Aetna, p. 6, 2015 Form 10-K</td>
</tr>
<tr>
<td>G4-9</td>
<td>Scale of the organization</td>
<td>2015 Form 10-K</td>
</tr>
<tr>
<td>G4-10</td>
<td>Employees and workforce information</td>
<td>Composition of workforce, p. 30</td>
</tr>
<tr>
<td>G4-11</td>
<td>Collective bargaining agreements</td>
<td>Aetna is non-union in all of our locations.</td>
</tr>
<tr>
<td>G4-12</td>
<td>Supply chain description</td>
<td>Our suppliers, p. 39</td>
</tr>
<tr>
<td>G4-13</td>
<td>Significant changes during the reporting period</td>
<td>2015 Form 10-K</td>
</tr>
<tr>
<td>G4-14</td>
<td>Report whether and how the precautionary approach must be</td>
<td>The precautionary approach is not applicable to our company or industry.</td>
</tr>
<tr>
<td></td>
<td>addressed by the organization</td>
<td></td>
</tr>
<tr>
<td>G4-15</td>
<td>List externally developed economic, environmental and social</td>
<td>We are a member of the Center for Higher Ambition Leadership and a signatory to the</td>
</tr>
<tr>
<td></td>
<td>charters, principles, or other initiatives to which the</td>
<td>Business Roundtable’s Climate RESOLVE initiative.</td>
</tr>
<tr>
<td></td>
<td>organization subscribes or which it endorses</td>
<td></td>
</tr>
<tr>
<td>G4-16</td>
<td>List memberships in associations and national or international</td>
<td><a href="#">Political Contributions and Related Activity Report 2015</a></td>
</tr>
<tr>
<td></td>
<td>advocacy organizations</td>
<td></td>
</tr>
<tr>
<td><strong>Identified Material Aspects and Boundaries</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>G4-17</td>
<td>Entities included in the organization’s consolidated financial</td>
<td>2015 Form 10-K, About this report, p. 74</td>
</tr>
<tr>
<td></td>
<td>statements and if the entities are included in this report</td>
<td></td>
</tr>
<tr>
<td>Disclosure</td>
<td>Description</td>
<td>Cross reference or answer</td>
</tr>
<tr>
<td>------------</td>
<td>-------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>G4-18</td>
<td>Process for defining report content</td>
<td>About this report, p. 74</td>
</tr>
<tr>
<td>G4-19</td>
<td>List material Aspects identified in the process for defining report content</td>
<td>Materiality and reporting, p. 11</td>
</tr>
<tr>
<td>G4-20</td>
<td>For each material Aspect, report the Aspect Boundary within the organization</td>
<td>Materiality and reporting, p. 11</td>
</tr>
<tr>
<td>G4-21</td>
<td>For each material Aspect, report the Aspect Boundary outside the organization</td>
<td>Materiality and reporting, p. 11</td>
</tr>
<tr>
<td>G4-22</td>
<td>Report the effect of any restatements of information provided in previous reports, and the reasons for such restatements</td>
<td>None</td>
</tr>
<tr>
<td>G4-23</td>
<td>Report significant changes from previous reporting periods in the Scope and Aspect Boundaries</td>
<td>None</td>
</tr>
</tbody>
</table>

**Stakeholder engagement**

| G4-24 | List of stakeholder groups | Stakeholder engagement, p. 75 |
| G4-25 | Basis for identification and selection of stakeholders with whom to engage | Stakeholder engagement, p. 75 |
| G4-26 | Approach to stakeholder engagement | Stakeholder engagement, p. 75 |
| G4-27 | Key topics and concerns raised through stakeholder engagement | Stakeholder engagement, p. 75 |

**Report profile**

| G4-28 | Reporting period for information provided | About this report, p. 74 |
| G4-29 | Date of most recent previous report, if any | About this report, p. 74 |
| G4-30 | Reporting cycle | About this report, p. 74 |
| G4-31 | Contact point for questions regarding the report or its contents | About this report, p. 75 |
| G4-32 | GRI Content Index | p. 77-79 |
| G4-33 | Policy and current practice with regard to seeking external assurance for the report | Aetna did not seek external assurance for data contained in this report. |

**Governance**

| G4-34 | Governance structure | 2015 Form 10-K, Materiality and reporting, p. 11 |

**Ethics and Integrity**

| G4-56 | Values, principles, standards and norms of behavior such as codes of conduct and codes of ethics | About this report, p. 75 |

**Economic**

**Indirect Economic Impacts**

<p>| G4-EC8 | Significant indirect economic impacts, including the extent of the impacts | Aetna Foundation, p. 13-19 |</p>
<table>
<thead>
<tr>
<th>Disclosure</th>
<th>Description</th>
<th>Cross reference or answer</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Environmental</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Emissions</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>G4-EN15</td>
<td>Scope 1 GHG emissions</td>
<td>Greenhouse gas emissions, p. 72</td>
</tr>
<tr>
<td>G4-EN16</td>
<td>Scope 2 GHG emissions</td>
<td>Greenhouse gas emissions, p. 73</td>
</tr>
<tr>
<td>G4-EN17</td>
<td>Scope 3 GHG emissions</td>
<td>Greenhouse gas emissions, p. 73</td>
</tr>
<tr>
<td><strong>Social</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Labor and decent work</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Employment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>G4-LA1</td>
<td>Number and rates of new hires and turnover</td>
<td>Composition of workforce, p. 31</td>
</tr>
<tr>
<td><strong>Diversity and Equal Opportunity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>G4-LA12</td>
<td>Diversity of board of directors and workforce</td>
<td>Composition of workforce, p. 30</td>
</tr>
<tr>
<td><strong>Human rights</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-discrimination</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G4-HR3</td>
<td>Total number of incidents of reported discrimination and description of corrective action taken</td>
<td>Incidents of discrimination, p. 33</td>
</tr>
<tr>
<td><strong>Society</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local communities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G4-SO1</td>
<td>Percentage of operations with community development programs</td>
<td>Community Relations and Urban Marketing, p. 16</td>
</tr>
<tr>
<td><strong>Product responsibility</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Product and service labeling</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>G4-PR5</td>
<td>Results of surveys measuring customer satisfaction</td>
<td>Plan performance and customer satisfaction, p. 54</td>
</tr>
<tr>
<td><strong>Customer privacy</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>G4-PR8</td>
<td>Total number of substantiated complaints regarding breaches of customer privacy and loss of customer data</td>
<td>Privacy breaches, p. 54</td>
</tr>
</tbody>
</table>
Aetna’s Corporate Social Responsibility Statement

As a health care company, we believe nothing is more important than helping people stay healthy. Aetna’s business strategy includes promoting sustainable practices nationally and internationally in furtherance of the health of our members, employees and communities in which we operate.

We are committed to limiting our own environmental impact by reducing our energy consumption, conserving environmental resources, and adopting a sustainable approach to the management and maintenance of all real estate and business processes wherever possible. We also are committed to addressing the waste that accounts for one third of all health care costs and threatens the long term sustainability of our health care system. To that end, we will continue to work with health care professionals to further the development and availability of quality focused, accountable care.

Using a collaborative, multifaceted approach, we are helping to develop a healthier population with a broader sense of responsibility toward the use of health care resources and with a shared sense of commitment to nurturing a healthy environment.