The following is a summary of certain 2008 projected financial information and metrics provided by Aetna on April 24, 2008. This information is provided for reference only, and has not been updated. You should consider the information to speak only as of its date of original publication. Aetna does not assume any responsibility to update the information to reflect subsequent events. Please also refer to the Cautionary Statement below for additional information regarding important risk factors that may affect the forward looking and other information in this document.

You should read this information in conjunction with Aetna's earnings press release issued April 24, 2008 and should review the replay of the related investor call in full, since the press release provides further discussion of the Company's results, and the investor call provides important context for the forward looking information.

	Aetna Inc. **2008 Guidance** **as of 4/24/2008** **(Full year unless otherwise noted)**
Aetna Inc.	
Operating Earnings (1)	$4.00 per share 2Q 2008 $0.93 per share
Operating Expense Ratio (2)	≈ 50 bps improvement
Pretax Operating Margin (3)	Lower than 2007
Weighted-Average Diluted Shares	Less than 505 million
Health Care Segment	
Medical Membership	Growth of 850k - 900k
Revenue (4)	Health care revenue growth of at least 15%
Commercial Medical Benefit Ratio (5)	Less than 80% 2Q 2008 Less than 80.5%
Total Medical Benefit Ratio (5)	Less than 81.5%
Premium Yield	In line with medical cost trend
Medical Cost Trend	7.5% +/- 50 bps

Note: The symbol "≈" means "approximately".

Footnotes

(1) Projected full year 2008 operating earnings per share exclude after tax realized capital losses of $38.0 million reported by the Company in the three months ended March 31, 2008. Projected operating earnings per share also exclude any future net realized capital gains or losses and other items, if any, from net income. The Company is not able to project the amount of future net realized capital gains or losses and therefore cannot reconcile projected operating earnings to projected net income or to a projected change in net income in any period. Although the excluded items may recur, management believes that operating earnings and operating earnings per share provide a more useful comparison of the Company's underlying business performance from period to period. Net realized capital gains and losses arise from various types of transactions, primarily in the course of managing a portfolio of assets that support the payment of liabilities. However, these transactions do not directly relate to the underwriting or servicing of products for customers and are not directly related to the core performance of the Company's business operations. In addition, management uses operating earnings to assess business performance and to make decisions regarding the Company's operations and allocation of resources among the Company's businesses.

(2) The operating expense ratio is calculated by dividing operating expenses by total revenue excluding net realized capital gains or losses. The Company cannot reconcile the projected operating expense ratio to a comparable GAAP measure, because it cannot project net realized capital gains or losses.

(3) Pretax operating margin is calculated by dividing pretax operating earnings, excluding net realized capital gains or losses, interest expense and amortization of other acquired intangible assets by total revenue excluding net realized capital gains or losses. The Company cannot reconcile the projected pretax operating margin to a comparable GAAP measure, because it cannot project net realized capital gains or losses.

(4) Projected full year 2008 revenue in the Health Care segment excludes net realized capital losses (pre-tax) of $21.5 million reported by the Company for the three months ended March 31, 2008. Projected revenue also excludes any future net realized capital gains or losses (pre-tax), which are included in reported GAAP revenue. The Company cannot reconcile projected revenue to GAAP revenue, because it cannot project net realized capital gains or losses.

(5) Commercial Medical Benefit Ratio includes all medical, dental, and other health care products except Medicare and Medicaid. Total Medical Benefit Ratio includes all health care products.

ADDITIONAL INFORMATION; CAUTIONARY STATEMENT -- Certain information in this document is forward looking, including our projections as to operating earnings, operating expense ratio, pretax operating margin, weighted-average diluted shares, medical membership, health care revenue, commercial medical benefit ratio, total medical benefit ratio, premium yield and medical cost trend. Forward-looking information is based on management's estimates, assumptions and projections, and is subject to significant uncertainties and other factors, many of which are beyond Aetna's control. Important risk factors could cause actual future results and other future events to differ materially from those currently estimated by management, including failure to achieve desired rate increases and/or profitable membership growth due to significant competition, reputational issues or other factors in key geographic markets where membership is concentrated; unanticipated increases in medical costs (including increased medical utilization, increased pharmacy costs, increases resulting from unfavorable changes in contracting or re-contracting with providers, changes in membership mix to lower-premium or higher-cost products or membership-adverse selection; as well as changes in medical cost estimates due to the necessary extensive judgment that is used in the medical cost estimation process, the considerable variability inherent in such estimates, and the sensitivity of such estimates to changes in medical claims payment patterns and changes in medical cost trends); and the ability to reduce administrative expenses while maintaining targeted levels of service and operating performance. Other important risk factors include, but are not limited to: the ability to improve relations with providers while taking actions to reduce medical costs; the ability to successfully integrate our businesses (including acquired businesses) and implement multiple strategic and operational initiatives simultaneously; reduced levels of investment income from low interest rates; adverse government regulation (including legislative proposals eliminating or reducing ERISA pre-emption of state laws that would increase potential litigation exposure, legislative proposals that would limit our ability to price for the risk we assume and/or reflect reasonable costs or profits in our pricing, and other proposals, such as patients' rights legislation, that would increase potential litigation exposure or mandate coverage of certain health benefits); adverse pricing or funding actions by government payors; changes in size, product mix or medical cost experience of membership in key markets; our ability to integrate, simplify, and enhance our existing information technology systems and platforms to keep pace with changing customer and regulatory needs; the outcome of various litigation and regulatory matters, including litigation and ongoing reviews of business practices by various regulatory authorities (including the current industry-wide investigation by the New York Attorney General into certain payment practices with respect to out-of-network providers); and increases in medical costs or Group Insurance claims resulting from any acts of terrorism, epidemics or other extreme events. For more discussion of important risk factors that may materially affect Aetna, please see the risk factors contained in Aetna's 2007 Annual Report on Form 10-K, on file with the Securities and Exchange Commission (the "SEC"). You also should read Aetna's Quarterly Report on Form 10-Q for the quarter ended March 31, 2008 when filed with the SEC for a discussion of Aetna's historical results of operations and financial condition.

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