

### EXHIBIT 3: NARRATIVE SUMMARY

Company Name: Aetna Health Inc. (NY)  
 NAIC Code: 95234  
 SERFF Tracking #: AETN-127950989

Aetna Health, Inc. is submitting rate increases for its Large Group HMO market segment for the state of New York.

The following is a summary of the proposed rate increases for policyholders' existing benefit plans, to be effective on the policyholder's next anniversary occurring on or after the effective dates shown:

Effective Date	Proposed Rate Increases	Policyholders	Members
07/01/2012	10.9%	26	19,759
10/01/2012	10.9%	27	961
01/01/2013	10.9%	110	6,987
04/01/2013	10.9%	18	220

The total number of policyholders affected by the proposed rate adjustment is 181 as of September 2011.

The requested rates for Aetna's Large Group HMO plans are directly related to medical claim trend due to changes in unit costs and utilization. Trends were based on a review of large group data over the period May 2009 – September 2011. The table below reflects our cost trends:

Utilization trend	Unit Cost Trend	Total Trend
7.3%	4.6%	12.2%

Utilization represents the number of services per member per year and includes a 0.3% adjustment for leap year in 2012. Increase in Unit Cost represents the change in dollar amount per claim. Increases in Unit Cost reflect changes in our contracted rates and prescription drug costs as well as the price escalation due to usage of more intensive services or expensive technologies. For this rate filing, we have used 12.2% as the projected change in medical cost.

Our pricing projection and the resulting rate increases assume that 85% of premium is used for medical care. The remaining 15% is used for administrative costs, profit, and taxes. Administrative costs include (but are not limited to) customer service, processing and paying claims, medical management programs, maintaining our provider networks, and complying with State and Federal regulations. New York state law requires that at least 82% of premium must be used to pay medical member costs.

Aetna takes our commitment to our customers seriously. We have taken a number of steps to try to keep our products as affordable as possible, such as:

- Developing innovative new relationships with health care providers that compensate them for the quality of care they provide, and not the quantity.
- Creating medical management programs which address potential health issues for members earlier, improving health outcomes and reducing the need for high-cost health care services.

We are also dedicated to increasing transparency within the health care system, as well as helping our members best utilize the plans that they have. Members can also access Aetna Navigator, our secure member website, which allows members to research their specific plan benefits, health care providers in a given area, and in some locations, the cost of certain health care services. Additionally, Aetna's Plan for Your Health website aims to educate all consumers—not just Aetna members—on how to take advantage of their health care benefits.