

COVENTRY HEALTH CARE INC  
Form 425  
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Filed by Aetna Inc.  
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and deemed filed pursuant to Rule 14a-12  
of the Securities Exchange Act of 1934

Subject Company: Coventry Health Care, Inc.  
(Commission File No.: 1-16477)

Mark Bertolini video message to Aetna employees

[on screen graphic: Mark Bertolini comments on Coventry acquisition]

I want to take a few minutes today to talk about our plans to acquire Coventry Health Care.

Competing in the marketplace of the future requires an expanded footprint and a broader portfolio of products and services. Our approach is to build strength across multiple businesses. The acquisition of Coventry complements this strategy in a few important areas.

[on screen graphic: New membership in Government and Commercial businesses]

Coventry currently has nearly 4 million medical members and 1.5 million Medicare Part D members.

[on screen graphic: Presence in important local geographies]

Coventry will enhance our presence in important local geographies – particularly in the Mid-Atlantic and Midwest.

[on screen graphic: Strong local hospital and physician relationships]

Coventry has strong local hospital and physician relationships and a presence in geographies that can help us grow. These connections can help us improve our network and introduce our new Accountable Care Solutions model. We also expect to create additional marketing opportunities for our provider solutions technology suite, including Medicity, iNexx and ActiveHealth.

[on screen graphic: Affordable products]

We want a broader range of affordable products to compete successfully in the new world of consumer exchanges in 2014 and beyond. Coventry has the kind of low cost structure and affordable products we want to add to our portfolio.

[on screen graphic: Complementary strengths]

Coventry will increase our presence in Government business. On a combined basis today, Government business would represent over 30% of Aetna's revenue, up from 23% currently.

[on screen graphic: Successful lower cost model]

Acquiring Coventry will provide additional opportunities to find administrative cost savings, as well as network and medical management savings. These cost "synergies" will enable us to offer our customers more affordable products and services.

[on screen graphic: Expertise to help transform the health care industry]

Coventry is strong in smaller market segments where the individual is more involved in purchasing and paying for their health coverage. In the future, we think this expertise will be especially useful for competing on health exchanges. We also believe we can learn from Coventry's general experience and expertise in offering lower cost plans in competitive, consumer centric markets.

[on screen graphic: A great fit with our diversification strategy]

By diversifying, we create more flexibility to adapt to new opportunities, remain competitive, and help transform the health care industry. We hope to have Coventry join the Aetna family in the middle of 2013.

I want to thank the many individuals who have been working on this acquisition. I look forward to your leadership in developing an integration plan that will put our collective strengths to work for our customers, employees and shareholders. Thank you.

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#### Important Information For Investors And Stockholders

This communication does not constitute an offer to sell or the solicitation of an offer to buy any securities or a solicitation of any vote or approval. Aetna Inc. ("Aetna") will file with the Securities and Exchange Commission ("SEC") a registration statement on Form S-4 containing a proxy statement/prospectus and Coventry Health Care, Inc. ("Coventry") will file with the SEC a proxy statement/prospectus, and each of Aetna and Coventry will file other documents with respect to the proposed acquisition of Coventry and a definitive proxy statement/prospectus will be mailed to stockholders of Coventry. **INVESTORS AND SECURITY HOLDERS OF COVENTRY ARE URGED TO READ THE PROXY STATEMENT/PROSPECTUS AND OTHER DOCUMENTS THAT WILL BE FILED WITH THE SEC CAREFULLY AND IN THEIR ENTIRETY WHEN THEY BECOME AVAILABLE BECAUSE THEY WILL CONTAIN IMPORTANT INFORMATION.** Investors and security holders will be able to obtain free copies of the registration statement and the proxy statement/prospectus (when available) and other documents filed

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and congressional elections, and the possibility of additional litigation challenging aspects of the law continue to create additional uncertainty about the ultimate impact of health care reform. As a result, many of the impacts of health care reform will not be known for the next several years. Other important risk factors include: adverse and less predictable economic conditions in the U.S. and abroad (including unanticipated levels of, or increases in the rate of, unemployment); adverse changes in health care reform and/or other federal or state government policies or regulations as a result of health care reform or otherwise (including legislative, judicial or regulatory measures that would affect Aetna's business model, restrict funding for or amend various aspects of health care reform, limit Aetna's ability to price for the risk it assumes and/or reflect reasonable costs or profits in its pricing, such as mandated minimum medical benefit ratios, eliminate or reduce ERISA pre-emption of state laws (increasing Aetna's potential litigation exposure) or mandate coverage of certain health benefits); Aetna's ability to differentiate its products and solutions from those offered by its competitors, and demonstrate that its products lead to access to better quality of care by its members; unanticipated increases in medical costs (including increased intensity or medical utilization as a result of flu, increased COBRA participation rates or otherwise; changes in membership mix to higher cost or lower-premium products or membership-adverse selection; 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; increases resulting from unfavorable changes in contracting or re-contracting with providers, and increased pharmacy costs); failure to achieve and/or delays in achieving desired rate increases and/or profitable membership growth due to regulatory review or other regulatory restrictions, the difficult economy and/or significant competition, especially in key geographic areas where membership is concentrated, including

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successful protests of business awarded to us; adverse changes in size, product mix or medical cost experience of membership; Aetna's ability to diversify its sources of revenue and earnings; adverse program, pricing or funding actions by federal or state government payors, including curtailment or elimination of the Centers for Medicare & Medicaid Services' star rating bonus payments; the ability to reduce administrative expenses while maintaining targeted levels of service and operating performance; the ability to successfully implement Aetna's agreement with CVS Caremark Corporation on a timely basis and in a cost-efficient manner and to achieve projected operating efficiencies for the agreement; Aetna's ability to integrate, simplify, and enhance its existing information technology systems and platforms to keep pace with changing customer and regulatory needs; the success of Aetna's health information technology initiatives; Aetna's ability to successfully integrate its businesses (including Medicity, Prodigy Health Group, PayFlex, and Genworth Financial Inc.'s Medicare Supplement business and other businesses Aetna may acquire in the future, including Coventry) and implement multiple strategic and operational initiatives simultaneously; managing executive succession and key talent retention, recruitment and development; the outcome of various litigation and regulatory matters, including guaranty fund assessments and litigation concerning, and ongoing reviews by various regulatory authorities of, certain of Aetna's payment practices with respect to out-of-network providers and/or life insurance policies; reputational issues arising from its social media activities, data security breaches, other cybersecurity risks or other causes; the ability to develop and maintain relations with providers while taking actions to reduce medical costs and/or expand the services Aetna offers; Aetna's ability to maintain its relationships with third party brokers, consultants and agents who sell Aetna's products; increases in medical costs or Group Insurance claims resulting from any epidemics, acts of terrorism or other extreme events; and a downgrade in Aetna's financial ratings. For more discussion of important risk factors that may materially affect Aetna, please see the risk factors contained in Aetna's Annual Report and Aetna's Quarterly Report on Form 10-Q for the quarter ended March 31, 2012 (Aetna's "First Quarter 10-Q") and Aetna's Second Quarter 10-Q (together with Aetna's First Quarter 10-Q, Aetna's "Quarterly Reports"), each on file with the SEC. You also should read Aetna's Annual Report and Aetna's Quarterly Reports for a discussion of Aetna's historical results of operations and financial condition.

No assurances can be given that any of the events anticipated by the forward-looking statements will transpire or occur, or if any of them do occur, what impact they will have on the results of operations, financial condition or cash flows of Aetna or Coventry. Neither Aetna nor Coventry assumes any duty to update or revise forward-looking statements, whether as a result of new information, future events or otherwise, as of any future date.

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