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QUARTERLY STATEMENT

AS OF MARCH 31, 2015

OF THE CONDITION AND AFFAIRS OF THE

CELTIC INSURANCE COMPANY

NAIC Group Code 1295 (Current Period), 1295 (Prior Period) NAIC Company Code 80799 Employer's ID Number 06-0641618

Organized under the Laws of Illinois, State of Domicile or Port of Entry Illinois

Country of Domicile United States

Licensed as business type: Life, Accident & Health [X] Property/Casualty [ ] Hospital, Medical & Dental Service or Indemnity [ ]
Dental Service Corporation [ ] Vision Service Corporation [ ] Health Maintenance Organization [ ]
Other [ ] Is HMO Federally Qualified? Yes [ ] No [ ]

Incorporated/Organized 05/03/1949 Commenced Business 01/20/1950

Statutory Home Office 77 W. Wacker Drive, Suite 1200 (Street and Number), Chicago, IL, US 60601 (City or Town, State, Country and Zip Code)

Main Administrative Office 77 W. Wacker Drive, Suite 1200 (Street and Number) Chicago, IL, US 60601 (City or Town, State, Country and Zip Code) 800-714-4658 (Area Code) (Telephone Number)

Mail Address 77 W. Wacker Drive, Suite 1200 (Street and Number or P.O. Box), Chicago, IL, US 60601 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 77 W. Wacker Drive, Suite 1200 (Street and Number) Chicago, IL, US 60601 (City or Town, State, Country and Zip Code) 800-714-4658 (Area Code) (Telephone Number)

Internet Web Site Address www.celtic-net.com

Statutory Statement Contact Michael W. Prete (Name) 800-714-4658 (Area Code) (Telephone Number) (Extension)

info@celtic-net.com (E-Mail Address) 800-748-3340 (FAX Number)

OFFICERS

Name	Title	Name	Title
David J. Burke	Vice President Treasurer	Keith H. Williamson	Secretary
Karen E. Wegg	Vice President Administration	Tricia L. Dinkelman	Vice President

OTHER OFFICERS

K. Rone Baldwin	President	Aparna Abburi	Senior Vice President
Anand A. Shukla	Senior Vice President	Barbara Basham	Vice President
John P. Ryan	Vice President		

DIRECTORS OR TRUSTEES

Anand A. Shukla	David J. Burke	Tricia L. Dinkelman	Dale F. Schmidt

State of Illinois
ss
County of Cook

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Anand A. Shukla	David J. Burke	Karen E. Wegg
Senior Vice President	Vice President Treasurer	Vice President Administration

a. Is this an original filing? Yes [X] No [ ]

b. If no:
1. State the amendment number
2. Date filed
3. Number of pages attached

Subscribed and sworn to before me this
14 day of May, 2015

Pedro Galvan, Notary Public
12/19/15

ASSETS

	Current Statement Date			4
	1	2	3	
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1. Bonds	58,093,913	545,000	57,548,913	40,442,225
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate:				
4.1 Properties occupied by the company (less $ encumbrances)			0	0
4.2 Properties held for the production of income (less $ encumbrances)			0	0
4.3 Properties held for sale (less $ encumbrances)			0	0
5. Cash ($ 25,407,470), cash equivalents ($ 0) and short-term investments ($ 26,381,719)	51,789,189		51,789,189	84,933,755
6. Contract loans (including $ premium notes)			0	0
7. Derivatives	0		0	0
8. Other invested assets	1,091,838		1,091,838	1,051,753
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	110,974,940	545,000	110,429,940	126,427,733
13. Title plants less $ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	373,470		373,470	290,967
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	1,712,029		1,712,029	1,131,344
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including $ earned but unbilled premiums)			0	0
15.3 Accrued retrospective premiums			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	6,263,506	329,071	5,934,435	4,607,072
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts	1,160,486	1,862	1,158,624	1,174,263
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon			0	878,831
18.2 Net deferred tax asset	1,145,057	226,231	918,826	496,097
19. Guaranty funds receivable or on deposit	64,468		64,468	71,950
20. Electronic data processing equipment and software			0	0
21. Furniture and equipment, including health care delivery assets ($)			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates	3,587,042	600,000	2,987,042	81,949
24. Health care ($ 558,947) and other amounts receivable	558,947	215,418	343,529	1,439,277
25. Aggregate write-ins for other-than-invested assets	133,174	133,174	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	125,973,119	2,050,756	123,922,363	136,599,483
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	125,973,119	2,050,756	123,922,363	136,599,483
DETAILS OF WRITE-INS				
1101.			0	0
1102.			0	0
1103.			0	0
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0
2501. PREPAID ASSETS	61,813	61,813	0	0
2502. PROVIDER RECEIVABLES	71,361	71,361	0	0
2503.			0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	133,174	133,174	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less $ 1,808,729 reinsurance ceded)	25,919,970		25,919,970	19,987,567
2. Accrued medical incentive pool and bonus amounts			0	0
3. Unpaid claims adjustment expenses	432,857		432,857	0
4. Aggregate health policy reserves including the liability of $ 8,994,947 for medical loss ratio rebate per the Public Health Service Act	21,368,537		21,368,537	794,124
5. Aggregate life policy reserves	4,227,014		4,227,014	4,344,907
6. Property/casualty unearned premium reserve			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance	147,506		147,506	131,850
9. General expenses due or accrued	4,063,260		4,063,260	4,551,540
10.1 Current federal and foreign income tax payable and interest thereon (including $ on realized gains (losses))	3,779,961		3,779,961	0
10.2 Net deferred tax liability			0	0
11. Ceded reinsurance premiums payable	342,286		342,286	982
12. Amounts withheld or retained for the account of others			0	0
13. Remittances and items not allocated			0	0
14. Borrowed money (including $ current) and interest thereon $ (including $ current)			0	0
15. Amounts due to parent, subsidiaries and affiliates	4,937,054		4,937,054	32,144,139
16. Derivatives		0	0	0
17. Payable for securities	1,923,050		1,923,050	0
18. Payable for securities lending			0	0
19. Funds held under reinsurance treaties (with $ 1,365,186 authorized reinsurers, $ unauthorized reinsurers and $ certified reinsurers)	1,365,186		1,365,186	2,794,777
20. Reinsurance in unauthorized and certified ($) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans			0	0
23. Aggregate write-ins for other liabilities (including $ current)	20,675,895	0	20,675,895	42,488,938
24. Total liabilities (Lines 1 to 23)	89,182,576	0	89,182,576	107,238,824
25. Aggregate write-ins for special surplus funds	XXX	XXX	415,458	2,446,457
26. Common capital stock	XXX	XXX	2,500,000	2,500,000
27. Preferred capital stock	XXX	XXX		0
28. Gross paid in and contributed surplus	XXX	XXX	45,588,655	45,588,655
29. Surplus notes	XXX	XXX		0
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	(13,764,326)	(21,174,453)
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 $)	XXX	XXX		0
32.2 shares preferred (value included in Line 27 $)	XXX	XXX		0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	34,739,787	29,360,659
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	123,922,363	136,599,483
DETAILS OF WRITE-INS				
2301. ACA Risk Adjustment Payable	17,309,725		17,309,725	13,951,643
2302. ACA Cost Sharing Payable	223,937		223,937	27,716,437
2303. Health Insurer Fee Payable	2,652,352		2,652,352	0
2398. Summary of remaining write-ins for Line 23 from overflow page	489,881	0	489,881	820,858
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	20,675,895	0	20,675,895	42,488,938
2501. Health Insurer Fee Estimate	XXX	XXX	415,458	2,446,457
2502.	XXX	XXX		0
2503.	XXX	XXX		0
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	415,458	2,446,457
3001.	XXX	XXX		0
3002.	XXX	XXX		0
3003.	XXX	XXX		0
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months	XXX	132,790	68,105	405,699
2. Net premium income (including $ non-health premium income)	XXX	18,844,663	20,667,895	129,792,518
3. Change in unearned premium reserves and reserve for rate credits	XXX		0	0
4. Fee-for-service (net of $ medical expenses)	XXX		0	0
5. Risk revenue	XXX		0	0
6. Aggregate write-ins for other health care related revenues	XXX	0	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0	0
8. Total revenues (Lines 2 to 7)	XXX	18,844,663	20,667,895	129,792,518
Hospital and Medical:				
9. Hospital/medical benefits		(9,679,141)	13,152,340	55,775,071
10. Other professional services		3,377,203	1,016,975	11,155,516
11. Outside referrals			0	0
12. Emergency room and out-of-area		3,455,929	1,342,006	14,444,747
13. Prescription drugs		6,116,773	2,492,327	20,496,832
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts			0	0
16. Subtotal (Lines 9 to 15)	0	3,270,764	18,003,648	101,872,166
Less:				
17. Net reinsurance recoveries		2,060,106	2,675,090	4,989,042
18. Total hospital and medical (Lines 16 minus 17)	0	1,210,658	15,328,558	96,883,124
19. Non-health claims (net)			0	0
20. Claims adjustment expenses, including $ cost containment expenses		1,100,769	0	0
21. General administrative expenses		6,664,737	6,124,853	29,153,674
22. Increase in reserves for life and accident and health contracts (including $ increase in reserves for life only)			0	0
23. Total underwriting deductions (Lines 18 through 22)	0	8,976,164	21,453,411	126,036,798
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	9,868,499	(785,516)	3,755,720
25. Net investment income earned		257,928	300,936	963,946
26. Net realized capital gains (losses) less capital gains tax of $			0	0
27. Net investment gains (losses) (Lines 25 plus 26)	0	257,928	300,936	963,946
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered $) (amount charged off $ (13,886))]		(13,886)	(3,354)	(22,865)
29. Aggregate write-ins for other income or expenses	0	329,192	345,044	1,388,043
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	10,441,733	(142,890)	6,084,844
31. Federal and foreign income taxes incurred	XXX	4,540,932	42,926	1,775,038
32. Net income (loss) (Lines 30 minus 31)	XXX	5,900,801	(185,816)	4,309,806
DETAILS OF WRITE-INS				
0601.	XXX			0
0602.	XXX			0
0603.	XXX			0
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX	0	0	0
0701.	XXX			0
0702.	XXX			
0703.	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)	XXX	0	0	0
1401.				0
1402.			0	0
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	0	0	0	0
2901. Network Rental		251,624	(60,519)	803,516
2902. Annuity Income		(55,324)	172,716	(237,567)
2903. Interest Maintenance Reserve Elimination			11,910	50,757
2998. Summary of remaining write-ins for Line 29 from overflow page	0	132,892	220,937	771,337
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	329,192	345,044	1,388,043

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	CAPITAL & SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	29,360,659	43,821,671	43,821,671
34.	Net income or (loss) from Line 32	5,900,801	(185,814)	4,309,807
35.	Change in valuation basis of aggregate policy and claim reserves		0	0
36.	Change in net unrealized capital gains (losses) less capital gains tax of $	(3,195)	5,195	221,909
37.	Change in net unrealized foreign exchange capital gain or (loss)		0	0
38.	Change in net deferred income tax	628,536	2,797	615,587
39.	Change in nonadmitted assets	(1,147,015)	36,837	460,628
40.	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock		0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles		0	0
44.	Capital Changes:			
	44.1 Paid in		0	0
	44.2 Transferred from surplus (Stock Dividend)		0	0
	44.3 Transferred to surplus		0	0
45.	Surplus adjustments:			
	45.1 Paid in		0	0
	45.2 Transferred to capital (Stock Dividend)	0	0	0
	45.3 Transferred from capital		0	0
46.	Dividends to stockholders		0	(20,000,000)
47.	Aggregate write-ins for gains or (losses) in surplus	0	351,057	(68,943)
48.	Net change in capital and surplus (Lines 34 to 47)	5,379,127	210,072	(14,461,012)
49.	Capital and surplus end of reporting period (Line 33 plus 48)	34,739,786	44,031,743	29,360,659
	DETAILS OF WRITE-INS			
4701.	Change in Asset Valuation Reserve		(6,858)	(68,943)
4702.	Asset Valuation Reserve		357,915	0
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	351,057	(68,943)

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	36,893,639	20,799,520	146,130,893
2. Net investment income	241,961	564,907	1,680,117
3. Miscellaneous income	0	393,653	1,585,846
4. Total (Lines 1 to 3)	37,135,600	21,758,080	149,396,856
5. Benefit and loss related payments	29,159,011	15,085,586	65,778,073
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	26,248,638	(939,193)	9,520,206
8. Dividends paid to policyholders		0	0
9. Federal and foreign income taxes paid (recovered) net of $ tax on capital gains (losses)	(1,130,478)	(595,628)	646,399
10. Total (Lines 5 through 9)	54,277,171	13,550,765	75,944,678
11. Net cash from operations (Line 4 minus Line 10)	(17,141,571)	8,207,315	73,452,178
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	4,750,135	7,793,389	35,958,212
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	217,168
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	1,924,770	0	39,682
12.8 Total investment proceeds (Lines 12.1 to 12.7)	6,674,905	7,793,389	36,215,062
13. Cost of investments acquired (long-term only):			
13.1 Bonds	21,992,660	2,375,000	15,552,450
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	45,000	67,500	307,500
13.6 Miscellaneous applications	0	33,222	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	22,037,660	2,475,722	15,859,950
14. Net increase (or decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(15,362,755)	5,317,667	20,355,112
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0	0
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities		0	0
16.5 Dividends to stockholders	0	0	20,000,000
16.6 Other cash provided (applied)	(640,240)	90,775	54,913
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(640,240)	90,775	(19,945,087)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(33,144,566)	13,615,757	73,862,203
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	84,933,755	11,071,552	11,071,552
19.2 End of period (Line 18 plus Line 19.1)	51,789,189	24,687,309	84,933,755

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	41,556	38,523	0	2,794	0	0	0	0	0	239
2. First Quarter	46,169	43,219	0	2,711	0	0	0	0	0	239
3. Second Quarter	0	0	0	0	0	0	0	0	0	0
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	133,327	124,404		8,206						717
Total Member Ambulatory Encounters for Period:										
7. Physician	63,579	63,579								
8. Non-Physician	53,680	53,680								
9. Total	117,259	117,259	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	4,011	4,011								
11. Number of Inpatient Admissions	959	959								
12. Health Premiums Written (a)	22,221,773	19,636,115		2,585,659						
13. Life Premiums Direct	28,734									28,734
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	22,221,773	19,636,115		2,585,659						
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	(4,216,701)	(4,216,701)								
18. Amount Incurred for Provision of Health Care Services	3,270,765	3,270,765		0						

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees $

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims unpaid (Reported)						
0199999 Individually listed claims unpaid	0	0	0	0	0	0
0299999 Aggregate accounts not individually listed-uncovered						0
0399999 Aggregate accounts not individually listed-covered	3,564,592	1,395,507	1,114,743	179,127	240,271	6,494,240
0499999 Subtotals	3,564,592	1,395,507	1,114,743	179,127	240,271	6,494,240
0599999 Unreported claims and other claim reserves	XXX	XXX	XXX	XXX	XXX	19,824,939
0699999 Total amounts withheld	XXX	XXX	XXX	XXX	XXX	1,409,521
0799999 Total claims unpaid	XXX	XXX	XXX	XXX	XXX	27,728,700
0899999 Accrued medical incentive pool and bonus amounts	XXX	XXX	XXX	XXX	XXX	

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5	6
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
1. Comprehensive (hospital and medical)	(11,273,117)	7,181,742	4,320,600	21,599,310	(6,952,517)	19,987,569
2. Medicare Supplement					0	0
3. Dental only					0	0
4. Vision only					0	0
5. Federal Employees Health Benefits Plan					0	0
6. Title XVIII - Medicare					0	0
7. Title XIX - Medicaid					0	0
8. Other health					0	0
9. Health subtotal (Lines 1 to 8)	(11,273,117)	7,181,742	4,320,600	21,599,310	(6,952,517)	19,987,569
10. Health care receivables (a)		71,361		558,947	0	0
11. Other non-health					0	0
12. Medical incentive pools and bonus amounts					0	0
13. Totals (Lines 9-10+11+12)	(11,273,117)	7,110,381	4,320,600	21,040,363	(6,952,517)	19,987,569

(a) Excludes $ ..... loans or advances to providers not yet expensed.

NOTES TO FINANCIAL STATEMENTS

Q1 2015 NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies

A. The financial statements of Celtic Insurance Company (the Company) are presented on the basis of accounting practices prescribed or permitted by the Insurance Department of the State of Illinois.

The State of Illinois requires that insurance companies domiciled in the state of Illinois prepare their statutory basis financial statements in accordance with the NAIC Accounting Practices and Procedures Manual subject to any deviations prescribed or permitted by the State of Illinois Insurance Commissioner. The Illinois Department of Insurance has adopted the NAIC practices and procedures manual with no prescribed differences affecting the company.

Net Income	State of Domicile	2015	2014
(1) Illinois State Health Plan state basis (Page 4, Line 32, Columns 2 & 4)	Illinois	$ 5,900,801	$ 6,084,844
(2) State Prescribed Practices that increase/(decrease) NAIC SAP:	Illinois		
e.g., Depreciation of fixed assets			
(3) State Permitted Practices that increase/(decrease) NAIC SAP:	Illinois		
e.g., Depreciation of fixed assets, home office property			
(4) NAIC SAP (1-2-3=4)	Illinois	$ 5,900,801	$ 6,084,844
Surplus			
(5) Illinois State Health Plan state basis (Page 3, Line 33, Columns 3 & 4)	Illinois	$ 123,922,363	$ 136,559,484
(6) State Prescribed Practices that increase/(decrease) NAIC SAP:	Illinois		
e.g., Goodwill, net			
e.g., Fixed Assets, net			
(7) State Permitted Practices that increase/(decrease) NAIC SAP:	Illinois		
e.g., Home Office Property			
(8) NAIC SAP (5-6-7=8)	Illinois	$ 123,922,363	$ 136,559,484

B. Use of estimates in the preparation of the financial Statements

No Change

C. Accounting Policy

1.– 13. – No Change

2. Accounting Changes and Corrections of Errors

No change.

3. Business Combinations and Goodwill

A. – D: No change.

4. Discontinued Operations

No change.

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

No Change

B. Debt Restructuring

No Change

C. Reverse Mortgages

No Change

D. Loan-Backed Securities

1. The source used to determine prepayment assumptions for all loan-backed securities for the Company was Bloomberg's cash flows.

NOTES TO FINANCIAL STATEMENTS

2. There are no securities within the scope of this statement with a recognized other-than-temporary impairment.

3. No Change

4. All impaired securities (fair value is less than cost or amortized) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest impairment remains):

    a. The aggregate amount of unrealized losses:
        i. Less than 12 months $0
        ii. 12 months or longer $0

    b. The aggregate related fair value of securities with unrealized losses:
        i. Less than 12 months $0
        ii. 12 months or longer $0

5. For each security in an unrealized loss position, the Company assesses whether it intends to sell the security or if it is more likely than not the Company will be required to sell the security before recovery of the amortized cost basis for reasons such as liquidity, contractual or regulatory purposes. If the security meets this criterion, the decline in fair value is other-than-temporary and is recorded in earnings.

E. Repurchase Agreements and/or Securities Lending Transactions

The company does not have any repurchase agreements and/or securities lending transactions

F. Real Estate

No Change

G. Investments in Low-Income Housing Tax Credits (LIHTC)

No Change

H. Restricted Assets

No Change

I. Working Capital Finance Investments

None

J. Offsetting and Netting of Assets and Liabilities

None

K. Structured Notes

No Change

6. Joint Ventures, Partnerships and Limited Liability Companies

No change.

7. Investment Income

No change.

8. Derivative Instruments

No change

9. Income Taxes

No change.

10. Information Concerning Parent, Subsidiaries and Affiliates

A,B,C,F – Centene Management Company, LLC a wholly owned subsidiary of Centene Company, provided data, claims processing, case management, care coordination and general management services to the company. Medical and administrative expenses included $2,929,224 for such services during the period ended March 31, 2015. Nurse Response, an affiliate of the company, provided nurse triage services in the amount of $61,678 for medical expenses to the company during the period ended March 31, 2015. US Script, Inc, an affiliate of the company, provided pharmacy benefits

NOTES TO FINANCIAL STATEMENTS

management services in the amount of $5,165,825 for medical expenses to the company during the period ended March 31, 2015. Opticare Vision Insurance Co, an affiliate of the company, provided vision care services in the amount of $411,135 for medical expenses to the company during the period ended March 31, 2015. Nurtur Health, Inc, an affiliate of the company, provided wellness behavior services in the amount of $296,056 for medical expenses to the company during the period ended March 31, 2015. Cenpatico Behavior Health provided behavior and mental health services to the Company in the amount of $1,315,087 for medical services to the company during the period ended March 31, 2015.

D. – L. No Change

11. Debt

No change.

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefits Plans – None

B. B. – I. No Change

13. Capital and Surplus, Shareholder Dividend Restrictions and Quasi-Reorganizations

1. On January 15, 2015, the company sold 25% of the common stock to a nonaffiliated third party.

14. Contingencies

A,B,C,D – No Change

F –The Company has recognized an impairment charge of $13,886 related to the member premium receivable outstanding as of March 31, 2015. The $52,811 member receivable recognized as of 3/31/15 has a reasonable possibility that it will be uncollectible.

E. No Change

15. Leases

No Change.

16. Information About Financial Instruments With Off-Balance Sheet Risk And Financial Instruments With Concentrations of Credit Risk

No change.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

No Change

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

No Change.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

No Change.

20. Fair Value Measurement

A. Admitted assets measured at fair value on a recurring basis as March 31, 2015 are as follows:

	Level I	Level II	Level III	Total
Cash & Short Term Investments	$51,789,189			$51,789,189
Total Assets at Fair Value	**$51,789,189**			**$51,789,189**

B. Fair Value Disclosures Under Other Pronouncements

None

NOTES TO FINANCIAL STATEMENTS

C. Aggregate Fair Value for all Financial Statements

The following table summarizes fair value measurements by level at March 31, 2015 for all financial instruments:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level I	Level II	Level III	Not Practicable (Carrying Value
Schedule D Bonds	$57,548,913	$57,548,913	$1,913,160	$55,635,753	$0	$0
Schedule DA Bonds	$26,381,719	$26,381,719	$0	$26,381,719	$0	$0
Schedule BA Limited Partnership	$1,091,838	$1,091,838	$0	$0	$1,091,838	$0

21. Other Items

A. Extraordinary Items

None

B. Troubled Debt Restructuring: Debtors

None

C. Other Disclosures

None

D. Uncollectible Assets

None

E. Business Interruption Insurance Recoveries

None

F. State Transferable Tax Credits

None

G. Subprime Mortgage Related Risk Exposure

None

22. Events Subsequent

No change.

23. Reinsurance

No change.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. The Company estimates accrued retrospective premiums for its comprehensive individual health insurance business in accordance with the regulations put forth in Title 45 of the Code of Federal Regulations Part 153, Subpart F for the ACA Risk Corridors program and Title 45 of the Code of Federal Regulations Part 158 for the ACA MLR rebate Program.

B. The company records accrued retrospective premiums through written premium

C. The amount of net premiums written by the company at March 31, 2015 which are subject to retrospective rating features was $18.8 million, which represents 100% of the total net premiums written.

NOTES TO FINANCIAL STATEMENTS

D. Medical loss ratio rebates required pursuant to the Public Health Service Act –

	Individual	Small Group Employer	Large Group Employer	Other Categories with Rebates	Total
Prior Reporting Year					
(1) Medical Loss Ratio Rebates Incurred	$0	$0	$0	$0	$0
(2) Medical Loss Ratio Rebates Paid	0	0	0	0	0
(3) Medical Loss Ratio Rebates Unpaid	$302,000	0	0	0	$302,000
(4) Plus Reinsurance Assumed Amounts	XXX	XXX	XXX	XXX	0
(5) Less Reinsurance Ceded Amounts	XXX	XXX	XXX	XXX	0
(6) Rebates Unpaid Net of Reinsurance	XXX	XXX	XXX	XXX	$302,000
Current Reporting Year-to-Date					
(7) Medical Loss Ratio Rebates Incurred	$8,581,180	$0	$0	$0	$8,581,180
(8) Medical Loss Ratio Rebates Paid	0	0	0	0	0
(9) Medical Loss Ratio Rebates Unpaid	$8,883,180	0	0	0	$8,883,180
(10) Plus Reinsurance Assumed Amounts	XXX	XXX	XXX	XXX	0
(11) Less Reinsurance Ceded Amounts	XXX	XXX	XXX	XXX	0
(12) Rebates Unpaid Net of Reinsurance	XXX	XXX	XXX	XXX	$302,000

E. Risk-Sharing Provisions of the Affordable Care Act (ACA).

1) Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk-sharing provisions (YES/NO)?		**Yes**
2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year		
a) Permanent ACA Risk Adjustment Program		
Assets		
1) Premium adjustments receivable due to ACA Risk Adjustment	$	-
Liabilities		
2) Risk adjustment user fees payable for ACA Risk Adjustment	$	37,446
3) Premium adjustments payable due to ACA Risk Adjustment	$	17,309,725
Operations (Revenue & Expense)		
4) Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk adjustment	$	(3,358,082)
5) Reported in expenses as ACA risk adjustment user fees (incurred/paid)	$	9,869
b) Transitional ACA Reinsurance Program		
Assets		
1) Amounts recoverable for claims paid due to ACA Reinsurance	$	6,074,468
2) Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)	$	1,623,220
3) Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	$	-
Liabilities		
4) Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premiums	$	649,220
5) Ceded reinsurance premiums payable due to ACA Reinsurance	$	342,285
6) Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	$	-
Operations (Revenue & Expense)		
7) Ceded reinsurance premiums due to ACA Reinsurance	$	863,307
8) Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	$	(2,068,351)
9) ACA Reinsurance contributions - not reported as ceded premium	$	126,224
c) Temporary ACA Risk Corridors Program		
Assets		
1) Accrued retrospective premium due to ACA Risk Corridors	$	-
Liabilities		
2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors	$	11,590,050
Operations (Revenue & Expense)		
3) Effect of ACA Risk Corridors on net premium income	$	(11,590,050)
4) Effect of ACA Risk Corridors on change in reserves for rate credits	$	-

NOTES TO FINANCIAL STATEMENTS

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
					Prior Year Accrued Less Payments (Col 1-3)	Prior Year Accrued Less Payments (Col. 2-4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col. 2-4+8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a) Permanent ACA Risk Adjustment Program											
1) Premium adjustments receivable	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	A	$ -	$ -
2) Premium adjustments (payable)	$ -	$ (13,951,643)	$ -	$ -	$ -	$ (13,951,643)	$ -	$ (13,185,571)	B	$ -	$ (27,137,214)
3) Subtotal ACA Permanent Risk Adj	$ -	$ (13,951,643)	$ -	$ -	$ -	$ (13,951,643)	$ -	$ (13,185,571)		$ -	$ (27,137,214)
b) Transitional ACA Reinsurance Program											
1) Amounts recoverable for claims pa	$ 4,309,182	$ -	$ -	$ -	$ 4,309,182	$ -	$ (2,278,668)	$ -	C	$ 2,030,514	$ -
2) Amounts recoverable for claims ur	$ -	$ 467,977	$ -	$ -	$ -	$ 467,977	$ -	$ 641,803	D	$ -	$ 1,109,780
3) Amounts receivable relating to un	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	E	$ -	$ -
4) Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium	$ -	$ (238,158)	$ -	$ -	$ -	$ (238,158)	$ -	$ -	F	$ -	$ (238,158)
5) Ceded reinsurance premiums paya	$ -	$ (1,428,953)	$ -	$ -	$ -	$ (1,428,953)	$ -	$ -	G	$ -	$ (1,428,953)
6) Liability for amounts held under ur	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	H	$ -	$ -

25. Change in Incurred Losses and Loss Adjustment Expenses

Reserves as of December 31, 2014 were $19.9 million. As of March 31, 2015, $11.2 million has been paid for incurred losses and loss adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now $4.3 million as a result of re-estimation of unpaid claims and claim adjustment expenses on the Company's accident and health line of insurance. Therefore, there has been a $4.4 million favorable prior-year development since December 31, 2014 to March 31, 2015. This change is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

26. Intercompany Pooling Arrangements

No change

27. Structured Settlements

No change.

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

29. Participating Policies

No change.

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves - $783,541

2. Date of the most recent evaluation of this liability – 3/31/2015

3. Was anticipated investment income utilized in the calculation - Yes

31. Anticipated Salvage and Subrogation

No change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? ..... Yes [ ] No [X]

1.2 If yes, has the report been filed with the domiciliary state? ..... Yes [ ] No [ ]

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... Yes [ ] No [X]

2.2 If yes, date of change: .....

3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? ..... Yes [X] No [ ]

If yes, complete Schedule Y, Parts 1 and 1A.

3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? ..... Yes [X] No [ ]

3.3 If the response to 3.2 is yes, provide a brief description of those changes.

25% of Celtic Insurance Company was sold to an unaffiliated investor.....

4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes [ ] No [X]

4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? ..... Yes [ ] No [X] NA [ ]

If yes, attach an explanation.

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2014

6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2009

6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 06/22/2011

6.4 By what department or departments?

Illinois Department of Insurance.....

6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? ..... Yes [X] No [ ] NA [ ]

6.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes [X] No [ ] NA [ ]

7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? ..... Yes [ ] No [X]

7.2 If yes, give full information:

.....

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?..... Yes [ ] No [X]

8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

.....

8.3 Is the company affiliated with one or more banks, thrifts or securities firms?..... Yes [ ] No [X]

8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

GENERAL INTERROGATORIES

9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... Yes [X] No [ ]

(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

(c) Compliance with applicable governmental laws, rules and regulations;

(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

(e) Accountability for adherence to the code.

9.11 If the response to 9.1 is No, please explain:

.....

9.2 Has the code of ethics for senior managers been amended? ..... Yes [ ] No [X]

9.21 If the response to 9.2 is Yes, provide information related to amendment(s).

.....

9.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [ ] No [X]

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

.....

FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [X] No [ ]

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... $ 2,987,042

INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) ..... Yes [ ] No [X]

11.2 If yes, give full and complete information relating thereto:

.....

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: ..... $ 0

13. Amount of real estate and mortgages held in short-term investments: ..... $ 0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? ..... Yes [ ] No [X]

14.2 If yes, please complete the following:

		1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21	Bonds	$	$
14.22	Preferred Stock	$	$
14.23	Common Stock	$	$
14.24	Short-Term Investments	$	$
14.25	Mortgage Loans on Real Estate	$	$
14.26	All Other	$	$
14.27	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	$ 0	$ 0
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above	$	$

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? ..... Yes [ ] No [X]

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes [ ] No [ ]

If no, attach a description with this statement.

GENERAL INTERROGATORIES

16 For the reporting entity's security lending program, state the amount of the following as of the current statement date:

16.1	Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	$0
16.2	Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	$0
16.3	Total payable for securities lending reported on the liability page	$0

17. Excluding items in Schedule E – Part 3 – Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*? ..... Yes [X] No [ ]

17.1 For all agreements that comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, complete the following:

1 Name of Custodian(s)	2 Custodian Address
The Commerce Trust Co.	P.O. Box 419248, Kansas City, MO. 64141-6428
Brown Brothers Harriman Trust Company, N.A.	125 South Wacker Drive, Suite 2150, Chicago, IL. 60606

17.2 For all agreements that do not comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? ..... Yes [ ] No [X]

17.4 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

17.5 Identify all investment advisors, broker/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
104487	Brown Brothers Harriman & Co.	140 Broadway, New York, NY 10005
107740	Conseco Capital Management	11825 North Pennsylvania Street, Building K, Carmel, IN 46032

18.1 Have all the filing requirements of the *Purposes and Procedures Manual* of the NAIC Securities Valuation Office been followed? ..... Yes [X] No [ ]

18.2 If no, list exceptions:

.....

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

1.1 A&H loss percent	6.4 %
1.2 A&H cost containment percent	0.0 %
1.3 A&H expense percent excluding cost containment expenses	41.2 %
2.1 Do you act as a custodian for health savings accounts?	Yes [ ] No [X]
2.2 If yes, please provide the amount of custodial funds held as of the reporting date	$
2.3 Do you act as an administrator for health savings accounts?	Yes [ ] No [X]
2.4 If yes, please provide the balance of the funds administered as of the reporting date	$

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Reinsurer	8 Certified Reinsurer Rating (1 through 6)	9 Effective Date of Certified Reinsurer Rating
			NONE					

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

States, Etc.	1 Active Status	Direct Business Only 2 Accident & Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 Federal Employees Health Benefits Program Premiums	6 Life & Annuity Premiums & Other Considerations	7 Property/ Casualty Premiums	8 Total Columns 2 Through 7	9 Deposit-Type Contracts
1. Alabama AL	L	45,699				1,310		47,008	
2. Alaska AK	L	1,498						1,498	
3. Arizona AZ	L	11,018				479		11,497	
4. Arkansas AR	L	19,538,163				780		19,538,943	
5. California CA	L	21,454						21,454	
6. Colorado CO	L	3,056				63		3,119	
7. Connecticut CT	L	57,662				1,771		59,433	
8. Delaware DE	L	9,327				70		9,398	
9. Dist. Columbia DC	L					3,193		3,193	
10. Florida FL	L	1,293,187				822		1,294,009	
11. Georgia GA	L	121,586						121,586	
12. Hawaii HI	L							0	
13. Idaho ID	L							0	
14. Illinois IL	L	25,541				3,103		28,644	
15. Indiana IN	L	119,342				1,357		120,698	
16. Iowa IA	L	34,070				124		34,194	
17. Kansas KS	L	12,968						12,968	
18. Kentucky KY	L	8,323				305		8,628	
19. Louisiana LA	L	7,298						7,298	
20. Maine ME	L	7,254				118		7,372	
21. Maryland MD	L	22,472						22,472	
22. Massachusetts MA	L	10,204				1,338		11,542	
23. Michigan MI	L	7,502						7,502	
24. Minnesota MN	L	4,267						4,267	
25. Mississippi MS	L	26,335				171		26,506	
26. Missouri MO	L	20,081						20,081	
27. Montana MT	L	2,033						2,033	
28. Nebraska NE	L	56,872				(110)		56,762	
29. Nevada NV	L	19,066						19,066	
30. New Hampshire NH	L	12,341						12,341	
31. New Jersey NJ	L	308,729						308,729	
32. New Mexico NM	L	13,367				1,265		14,632	
33. New York NY	N	26,022				94		26,116	
34. North Carolina NC	L	32,848				935		33,783	
35. North Dakota ND	L	1,735						1,735	
36. Ohio OH	L	47,599				997		48,596	
37. Oklahoma OK	L	11,777				36		11,813	
38. Oregon OR	L	2,371						2,371	54
39. Pennsylvania PA	L	40,453	0					40,453	
40. Rhode Island RI	L	958						958	
41. South Carolina SC	L	59,596				1,526		61,121	
42. South Dakota SD	L	17,561				77		17,638	
43. Tennessee TN	L	14,093				1,908		16,001	
44. Texas TX	L	86,225				3,828		90,053	
45. Utah UT	L	1,962						1,962	
46. Vermont VT	L	7,629						7,629	
47. Virginia VA	L	25,581				2,239		27,820	
48. Washington WA	L	3,997						3,997	
49. West Virginia WV	L	8,625						8,625	
50. Wisconsin WI	L	4,433				574		5,007	
51. Wyoming WY	L	7,593				361		7,954	
52. American Samoa AS	N							0	
53. Guam GU	N							0	
54. Puerto Rico PR	N							0	
55. U.S. Virgin Islands VI	N							0	
56. Northern Mariana Islands MP	N							0	
57. Canada CAN	N							0	
58. Aggregate other alien OT	XXX	0	0	0	0	0	0	0	0
59. Subtotal	XXX	22,221,773	0	0	0	28,734	0	22,250,507	54
60. Reporting entity contributions for Employee Benefit Plans	XXX							0	
61. Total (Direct Business)	(a) 50	22,221,773	0	0	0	28,734	0	22,250,507	54
DETAILS OF WRITE-INS									
58001.	XXX								
58002.	XXX								
58003.	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX	0	0	0	0	0	0	0	0

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and other Alien.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART

Centene Corporation	42-1406317	DE	
Centene Management Company LLC	39-1864073	WI	
CMC Real Estate Co. LLC	20-0057283	DE	
Centene Center LLC	26-4094682	DE	
CMC Hanley, LLC	46-4234827	MO	
Cantina Laredo Clayton, LP	36-4783005	DE	
Ferguson Acquisition, LLC	47-2914561	MO	
Hanley-Forsyth, LLC	37-1766939	MO	
GPT Acquisition LLC	45-5431787	DE	
Clayton Property Investment LLC	45-4372065	DE	
Bankers Reserve Life Insurance Company of Wisconsin	39-0993433	WI	71013
Health Plan Real Estate Holding, Inc (17%)	46-2860967	MO	
CenCorp Health Solutions, Inc	22-3889471	DE	
Cenphiny Mgmt, LLC	42-1565805	DE	
NurseWise Holdings LLC	42-1565807	DE	
NurseWise LP	52-2379566	DE	
Nurse Response, Inc	20-4730372	DE	
Bridgeway Health Solutions, LLC	20-4980875	DE	
Bridgeway Health Solutions of Arizona, LLC	20-4980818	AZ	
Nurtur Health, Inc	06-1476380	DE	
Family Care & Workforce Diversity Consultants LLC d/b/a Worklife Innovations	06-1404277	CT	
Wellness By Choice, LLC	16-1686991	NY	
Cenpatico Behavioral Health, LLC	68-0461584	CA	
Cenpatico Behavioral Health of TX, Inc	74-3018565	TX	12525
CBHSP Arizona, Inc	86-0782736	AZ	
Cenpatico of California, Inc	47-2595704	CA	
Integrated Mental Health Mgmt, LLC	74-2892993	TX	
Integrated Mental Health Services	74-2785494	TX	
Cenpatico Behavioral Health of Arizona, LLC	20-1624120	AZ	14704
OptiCare Managed Vision, Inc	20-4730341	DE	
OptiCare Vision Insurance Co, Inc	36-4520004	SC	
AECC Total Vision Health Plan of Texas, Inc	75-2592153	TX	95302
OptiCare Vision Company, Inc	20-4773088	DE	
Ocucare Systems, Inc	65-0094759	FL	
Total Vision, Inc	20-4861241	DE	
Dental Health & Wellness, Inc	46-2783884	DE	
Dental Health & Wellness of Louisiana, Inc.	46-4168814	LA	
Peach State Health Plan, Inc	20-3174593	GA	12315
Health Plan Real Estate Holding, Inc (21%)	46-2860967	MO	
Buckeye Community Health Plan, Inc	32-0045282	OH	11834

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART

Health Plan Real Estate Holding, Inc (13%)	46-2860967	MO	
Absolute Total Care, Inc	20-5693998	SC	12959
Health Plan Real Estate Holding, Inc (1%)	46-2860967	MO	
Coordinated Care Corporation d/b/a Managed Health Services	39-1821211	IN	95831
Health Plan Real Estate Holding, Inc (15%)	46-2860967	MO	
Healthy Washington Holdings, Inc	46-5523218	DE	
Coordinated Care of Washington, Inc	46-2578279	WA	15352
Managed Health Services Insurance Corp	39-1678579	WI	96822
Health Plan Real Estate Holding, Inc (2%)	46-2860967	MO	
Hallmark Life Insurance Co	86-0819817	AZ	60078
Celtic Group, Inc	36-2979209	DE	
Celtic Insurance Company	06-0641618	IL	80799
Ambetter of Magnolia Inc	35-2525384	MS	
Novasys Health, Inc	27-2221367	DE	
CeltiCare Health Plan Holdings LLC	26-4278205	DE	
CeltiCare Health Plan of Massachusetts, Inc.	26-4818440	MA	13632
Superior HealthPlan, Inc	74-2770542	TX	95647
Health Plan Real Estate Holding, Inc (21%)	46-2860967	MO	
LSM Holdco, Inc.	46-2794037	DE	
Lifeshare Management Group, LLC	46-2798132	NH	
Prefontaine Merger Sub, Inc.	47-3073377	DE	
Healthy Louisiana Holdings LLC	27-0916294	DE	
Louisiana Healthcare Connections, Inc	27-1287287	LA	13970
Magnolia Health Plan Inc	20-8570212	MS	13923
CCTX Holdings, LLC	20-2074217	DE	
Centene Holdings, LLC	20-2074277	DE	
Centene Company of Texas, LP	74-2810404	TX	
US Script, Inc	77-0578529	DE	
LBB Industries, Inc	76-0511700	TX	
RX Direct, Inc	75-2612875	TX	
US Script IPA, LLC	46-2307356	NY	
IlliniCare Health Plan, Inc	27-2186150	IL	14053
Health Plan Real Estate Holding, Inc (5%)	46-2860967	MO	
Sunshine Health Holding LLC	26-0557093	FL	
Sunshine State Health Plan, Inc	20-8937577	FL	13148
Kentucky Spirit Health Plan, Inc	45-1294925	KY	14100
Healthy Missouri Holding, Inc	45-5070230	MO	
Home State Health Plan, Inc	45-2798041	MO	14218
Health Plan Real Estate Holding, Inc (5%)	46-2860967	MO	
Sunflower State Health Plan, Inc	45-3276702	KS	14345
Casenet	90-0636938	DE	

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART

LLC			
Granite State Health Plan, Inc	45-4792498	NH	14226
Centurion Group, Inc	61-1450727	DE	
Centurion LLC	90-0766502	DE	
Centurion of Virginia, LLC	47-1577742	VA	
Centurion of Vermont, LLC	47-1686283	VT	
Centurion of Pennsylvania, LLC	47-1229365	PA	
Centurion of Mississippi, LLC	47-2967381	MS	
Centurion of Tennessee, LLC	30-0752651	TN	
Massachusetts Partnership for Correctional Healthcare, LLC	61-1696004	MA	
Centurion of Idaho, LLC	46-3590120	ID	
Centurion of Michigan, LLC	46-1041008	MI	
Centurion of Minnesota, LLC	46-2717814	MN	
Centurion of Missouri, LLC	46-4102134	MO	
Centurion of West Virginia, LLC	46-4839132	WV	
MHS Travel & Charter, Inc	43-1795436	WI	
LH Acquisition	47-2516714	DE	
Health Care Enterprises, LLC	46-4855483	DE	
California Health and Wellness Plan	46-0907261	CA	
Bridgeway Advantage Solutions, Inc	46-4195563	AZ	15447
Specialty Therapeutic Care Holdings, LLC	27-3617766	DE	
Specialty Therapeutic Care, GP, LLC	73-1698807	TX	
Specialty Therapeutic Care, LP	73-1698808	TX	
AcariaHealth, Inc.	45-2780334	DE	
AcariaHealth Pharmacy #14, Inc	27-1599047	CA	
AcariaHealth Pharmacy #11, Inc	20-8192615	TX	
AcariaHealth Pharmacy #12, Inc	27-2765424	NY	
AcariaHealth Pharmacy #13, Inc	26-0226900	CA	
AcariaHealth Pharmacy, Inc	13-4262384	CA	
HomeScripts.com, LLC	27-3707698	MI	
U.S. Medical Management Holdings, Inc	27-0275614	DE	
U.S. Medical Management, LLC (20%)	38-3153946	DE	
U.S. Medical Management, LLC (48%)	38-3153946	DE	
RMED, LLC	31-1733889	FL	
IAH of Florida, LLC	47-2138680	FL	
Heritage Home Hospice, LLC	51-0581762	MI	
Rapid Respiratory Services, LLC	20-4364776	DE	
Grace Hospice of Austin, LLC	20-2827613	MI	
Seniorcorps Pensinsula, LLC	26-4435532	VA	
ComfortBrook Hospice, LLC	20-1530070	OH	

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART

R&C Healthcare, LLC	33-1179031	TX
Comfort Hospice of Texas, LLC	20-4996551	MI
A N J, LLC	20-0927034	TX
Grace Hospice of San Antonio, LLC	20-2827526	MI
Pinnacle Senior Care of Missouri, LLC	46-0861469	MI
Grace Hospice of Grand Rapids, LLC	45-0679248	MI
Country Style Health Care, LLC	03-0556422	TX
Grace Hospice of Indiana, LLC	45-0634905	MI
Phoenix Home Health Care, LLC	14-1878333	DE
Grace Hospice of Virginia, LLC	45-5080637	MI
Traditional Home Health Services, LLC	75-2635025	TX
Comfort Hospice of Missouri, LLC	45-5080567	MI
Family Nurse Care, LLC	38-2751108	MI
Grace Hospice of Colorado, LLC	45-5080675	MI
Family Nurse Care II, LLC	20-5108540	MI
Grace Hospice of Wisconsin, LLC	46-1708834	MI
Family Nurse Care of Ohio, LLC	20-3920947	MI
Hospice DME Company, LLC	46-1734288	MI
Pinnacle Senior Care of Wisconsin, LLC	46-4229858	WI
Pinnacle Home Care, LLC	76-0713516	TX
USMM Accountable Care Network, LLC	46-5730959	DE
USMM Accountable Care Partners, LLC	46-5735993	DE
USMM Accountable Care Solutions, LLC	46-5745748	DE
North Florida Health Services, Inc	59-3519060	FL
Pinnacle Sr. Care of Kalamazoo, LLC	47-1742728	MI
MHS Consulting, International, Inc	20-8630006	DE
PRIMEROSALUD, S.L.		ESP

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Name of Parent Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/ Person(s)	15 *
01295	Centene Corporation	00000	42-1406317		0001071739	New York Stock Exchange	Centene Corporation	DE	UDP	Shareholders/Board of Directors	Shareholders/Board of Directors	100.0	Shareholders/Board of Directors	0
01295	Centene Corporation	00000	39-1864073				Centene Management Company LLC	WI	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-0057283				CMC Real Estate Co. LLC	DE	NIA	Centene Management Company LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	26-4094682				Centene Center LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-4234827				CMC Hanley, LLC	MO	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	36-4783005				Cantina Laredo Clayton, LP	DE	NIA	CMC Real Estate Co. LLC	Ownership	51.0	Centene Corporation	0
01295	Centene Corporation	00000	47-2914561				Ferguson Acquisition, LLC	MO	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	37-1766939				Hanley-Forsyth, LLC	MO	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	45-5431787				GPT Acquisition LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	45-4372065				Clayton Property Investment LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	71013	39-0993433				Bankers Reserve Life Insurance Company of Wisconsin	WI	IA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	22-3889471				CenCorp Health Solutions, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	42-1565805				Cenphiny Mgmt, LLC	DE	NIA	CenCorp Health Solutions, Inc.	Ownership	1.0	Centene Corporation	0
01295	Centene Corporation	00000	42-1565807				NurseWise Holdings LLC	DE	NIA	CenCorp Health Solutions, Inc.	Ownership	99.0	Centene Corporation	0
01295	Centene Corporation	00000	52-2379566				NurseWise LP	DE	NIA	NurseWise Holdings LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-4730372				Nurse Response, Inc.	DE	NIA	NurseWise Holdings LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-4980875				Bridgeway Health Solutions, LLC	DE	NIA	CenCorp Health Solutions, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-4980818				Bridgeway Health Solutions of Arizona, LLC	AZ	NIA	Bridgeway Health Solutions, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	06-1476380				Nurtur Health, Inc.	DE	NIA	CenCorp Health Solutions, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	06-1404277				Family Care & Workforce Diversity Consultants LLC d/b/a Worklife Innovations	CT	NIA	Nurtur Health, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	16-1686991				Wellness By Choice, LLC	NY	NIA	Family Care & Workforce Diversity Consultants LLC d/b/a Worklife Innovations	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	68-0461584				Cenpatico Behavioral Health, LLC	CA	NIA	CenCorp Health Solutions, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	12525	74-3018565				Cenpatico Behavioral Health of TX, Inc.	TX	IA	Cenpatico Behavioral Health, LLC	Ownership	100.0	Centene Corporation	0

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Name of Parent Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/ Person(s)	15 *
01295	Centene Corporation	00000	86-0782736				CBHSP Arizona, Inc	AZ	NIA	Cenpatico Behavioral Health, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	47-2595704				Cenpatico of California, Inc	CA	NIA	Cenpatico Behavioral Health, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	74-2892993				Integrated Mental Health Mgmt, LLC	TX	NIA	Cenpatico Behavioral Health, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	74-2785494				Integrated Mental Health Services	TX	NIA	Cenpatico Behavioral Health, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	14704	20-1624120				Cenpatico Behavioral Health of Arizona, LLC	AZ	IA	Cenpatico Behavioral Health, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-4730341				OptiCare Managed Vision, Inc	DE	NIA	CenCorp Health Solutions, Inc	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	36-4520004				OptiCare Vision Insurance Co, Inc	SC	NIA	OptiCare Managed Vision, Inc	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	95302	75-2592153				AECC Total Vision Health Plan of Texas, Inc	TX	IA	OptiCare Managed Vision, Inc	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-4773088				OptiCare Vision Company, Inc	DE	NIA	OptiCare Managed Vision, Inc	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	65-0094759				Ocucare Systems, Inc	FL	NIA	OptiCare Managed Vision, Inc	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-4861241				Total Vision, Inc	DE	NIA	OptiCare Managed Vision, Inc	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-2783884				Dental Health & Wellness, Inc	DE	NIA	CenCorp Health Solutions, Inc	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-4168814				Dental Health & Wellness of Louisiana, Inc	LA	NIA	Dental Health & Wellness, Inc	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	12315	20-3174593				Peach State Health Plan, Inc	GA	IA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	11834	32-0045282				Buckeye Community Health Plan, Inc	OH	RE	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	12959	20-5693998				Absolute Total Care, Inc	SC	IA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	95831	39-1821211				Coordinated Care Corporation d/b/a Managed Health Services	IN	IA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-5523218				Healthy Washington Holdings, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	15352	46-2578279				Coordinated Care of Washington, Inc	WA	IA	Healthy Washington Holdings, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	96822	39-1678579				Managed Health Services Insurance Corp	WI	IA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	60078	86-0819817				Hallmark Life Insurance Co	AZ	IA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	36-2979209				Celtic Group, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	80799	06-0641618				Celtic Insurance Company	IL	IA	Celtic Group, Inc	Ownership	75.0	Centene Corporation	0
01295	Centene Corporation	00000	35-2525384				Ambetter of Magnolia, Inc	MS	IA	Celtic Insurance Company	Ownership	100.0	Centene Corporation	0

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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01295	Centene Corporation	00000	27-2221367				Novasys Health, Inc.	DE	NIA	Celtic Group, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	26-4278205				CeltiCare Health Plan Holdings LLC	DE	NIA	Celtic Group, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	13632	26-4818440				CeltiCare Health Plan of Massachusetts, Inc.	MA	IA	CeltiCare Health Plan Holdings LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	95647	74-2770542				Superior HealthPlan, Inc.	TX	IA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	27-0916294				Healthy Louisiana Holdings LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	13970	27-1287287				Louisiana Healthcare Connections, Inc.	LA	IA	Healthy Louisiana Holdings LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-2794037				LSM Holdco, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-2798132				Lifeshare Management Group, LLC	NH	NIA	LSM Holdco, Inc.	Ownership	49.0	Centene Corporation	0
01295	Centene Corporation	00000	47-3073377				Prefontaine Merger Sub, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	13923	20-8570212				Magnolia Health Plan Inc.	MS	IA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-2074217				CCTX Holdings, LLC	DE	NIA	Centene Corporation	Ownership	1.0	Centene Corporation	0
01295	Centene Corporation	00000	20-2074277				Centene Holdings, LLC	DE	NIA	Centene Corporation	Ownership	99.0	Centene Corporation	0
01295	Centene Corporation	00000	74-2810404				Centene Company of Texas, LP	TX	NIA	Centene Holdings, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	77-0578529				US Script, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	76-0511700				LBB Industries, Inc.	TX	NIA	US Script, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	75-2612875				RX Direct, Inc.	TX	NIA	US Script, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-2307356				US Script IPA, LLC	NY	NIA	US Script, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	14053	27-2186150				IlliniCare Health Plan, Inc.	IL	IA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	26-0557093				Sunshine Health Holding LLC	FL	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	13148	20-8937577				Sunshine State Health Plan, Inc.	FL	IA	Sunshine Health Holding LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	14100	45-1294925				Kentucky Spirit Health Plan, Inc.	KY	IA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	45-5070230				Healthy Missouri Holdings, Inc.	MO	NIA	Centene Corporation	Ownership	95.0	Centene Corporation	0
01295	Centene Corporation	14218	45-2798041				Home State Health Plan, Inc.	MO	IA	Healthy Missouri Holdings, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	14345	45-3276702				Sunflower State Health Plan, Inc.	KS	IA	Centene Corporation	Ownership	100.0	Centene Corporation	0

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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01295	Centene Corporation	00000	90-0636938				Casenet LLC	DE	NIA	Centene Corporation	Ownership	82.2	Centene Corporation	0
01295	Centene Corporation	14226	45-4792498				Granite State Health Plan, Inc.	NH	IA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	61-1450727				Centurion Group, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	90-0766502				Centurion LLC	DE	NIA	Centurion Group, Inc.	Ownership	51.0	Centene Corporation	0
01295	Centene Corporation	00000	47-1577742				Centurion of Virginia, LLC	VA	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	47-1686283				Centurion of Vermont, LLC	VT	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	47-1229365				Centurion of Pennsylvania, LLC	PA	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	47-2967381				Centurion of Mississippi, LLC	MS	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	30-0752651				Centurion of Tennessee, LLC	TN	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	61-1696004				Massachusetts Partnership for Correctional Healthcare, LLC	MA	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-3590120				Centurion of Idaho, LLC	ID	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-1041008				Centurion of Michigan, LLC	MI	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-2717814				Centurion of Minnesota, LLC	MN	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-4102134				Centurion of Missouri, LLC	MO	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-4839132				Centurion of West Virginia, LLC	WV	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	43-1795436				MHS Travel & Charter, Inc.	WI	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	47-2516714				LH Acquisition	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-4855483				Health Care Enterprises, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-0907261				California Health and Wellness Plan	CA	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	15447	46-4195563				Bridgeway Advantage Solutions, Inc.	AZ	IA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	27-3617766				Specialty Therapeutic Care Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	73-1698807				Specialty Therapeutic Care, GP, LLC	TX	NIA	Specialty Therapeutic Care Holdings, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	73-1698808				Specialty Therapeutic Care, LP	TX	NIA	Specialty Therapeutic Care Holdings, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	45-2780334				AcariaHealth, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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01295	Centene Corporation	00000	27-1599047				AcariaHealth Pharmacy #14, Inc.	CA	NIA	AcariaHealth, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-8192615				AcariaHealth Pharmacy #11, Inc.	TX	NIA	AcariaHealth, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	27-2765424				AcariaHealth Pharmacy #12, Inc.	NY	NIA	AcariaHealth, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	27-3707698				HomeScripts.com, LLC	MI	NIA	AcariaHealth, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	26-0226900				AcariaHealth Pharmacy #13, Inc.	CA	NIA	AcariaHealth, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	13-4262384				AcariaHealth Pharmacy, Inc.	CA	NIA	AcariaHealth, Inc.	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Home State Health Plan, Inc.	Ownership	5.0	Centene Corporation	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Absolute Total Care, Inc.	Ownership	1.0	Centene Corporation	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Peach State Health Plan, Inc.	Ownership	21.0	Centene Corporation	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Superior HealthPlan, Inc.	Ownership	21.0	Centene Corporation	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	IlliniCare Health Plan, Inc.	Ownership	5.0	Centene Corporation	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Bankers Reserve Life Insurance Company of Wisconsin	Ownership	17.0	Centene Corporation	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Managed Health Services Insurance Corp.	Ownership	2.0	Centene Corporation	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Buckeye Community Health Plan, Inc.	Ownership	13.0	Centene Corporation	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Coordinated Care Corporation d/b/a Managed Health Services	Ownership	15.0	Centene Corporation	0
01295	Centene Corporation	00000	27-0275614				U.S. Medical Management Holdings, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	38-3153946				U.S. Medical Management, LLC	DE	NIA	U.S. Medical Management Holdings, Inc.	Ownership	20.0	Centene Corporation	0
01295	Centene Corporation	00000	38-3153946				U.S. Medical Management, LLC	DE	NIA	Centene Corporation	Ownership	48.0	Centene Corporation	0
01295	Centene Corporation	00000	31-1733889				RMED, LLC	FL	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	47-2138680				IAH of Florida LLC	FL	NIA	RMED, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	51-0581762				Heritage Home Hospice, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-4364776				Rapid Respiratory Services, LLC	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-2827613				Grace Hospice of Austin, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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01295	Centene Corporation	00000	26-4435532				Seniorcorps Pensinsula, LLC	VA	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-1530070				ComfortBrook Hospice, LLC	OH	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	33-1179031				R&C Healthcare, LLC	TX	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-4996551				Comfort Hospice of Texas, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-0927034				A N J, LLC	TX	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-2827526				Grace Hospice of San Antonio, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-0861469				Pinnacle Senior Care of Missouri, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	45-0679248				Grace Hospice of Grand Rapids, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	03-0556422				Country Style Health Care, LLC	TX	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	45-0634905				Grace Hospice of Indiana, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	14-1878333				Phoenix Home Health Care, LLC	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	45-5080637				Grace Hospice of Virginia, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	75-2635025				Traditional Home Health Services, LLC	TX	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	45-5080567				Comfort Hospice of Missouri, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	38-2751108				Family Nurse Care, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	45-5080675				Grace Hospice of Colorado, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-5108540				Family Nurse Care II, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-1708834				Grace Hospice of Wisconsin, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-3920947				Family Nurse Care of Ohio, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-1734288				Hospice DME Company, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	46-4229858				Pinnacle Senior Care of Wisconsin, LLC	WI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	76-0713516				Pinnacle Home Care, LLC	TX	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	45-4165480				USMM Accountable Care Network, LLC	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	45-4157180				USMM Accountable Care Partners, LLC	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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01295	Centene Corporation	00000	45-4154905				USMM Accountable Care Solutions, LLC	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	59-3519060				North Florida Health Services, Inc	FL	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	47-1742728				Pinnacle Sr. Care of Kalamazoo, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000	20-8630006				MHS Consulting, International, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	00000					PRIMEROSALUD, S.L.	ESP	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	0

Asterisk	Explanation

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

	RESPONSE
1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	

Explanation:

Bar Code:

OVERFLOW PAGE FOR WRITE-INS

MQ003 Additional Aggregate Lines for Page 03 Line 23.
*LIAB

	1 Covered	2 Uncovered	3 Total	4 Total
2304. Unclaimed Property	385,715		385,715	400,858
2305. State Income Tax Payable	104,166		104,166	0
2306. Asset Valuation Reserve			0	420,000
2397. Summary of remaining write-ins for Line 23 from Page 03	489,881	0	489,881	820,858

MQ004 Additional Aggregate Lines for Page 04 Line 29.
*REVEX1

	1 Current Year To Date Uncovered	2 Current Year To Date Total	3 Prior Year To Date Total	4 Prior Year Ended December 31 Total
2904. Fees for deposit type contracts			0	215
2905. Comm and Exp on Reins ceded		132,892	220,937	771,122
2997. Summary of remaining write-ins for Line 29 from Page 04	0	132,892	220,937	771,337

SCHEDULE A – VERIFICATION

Real Estate

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		0
2.2 Additional investment made after acquisition		0
3. Current year change in encumbrances		0
4. Total gain (loss) on disposals		0
5. Deduct amounts received on disposals		0
6. Total foreign exchange change in book/adjusted carrying value		0
7. Deduct current year's other-than-temporary impairment recognized		0
8. Deduct current year's depreciation		0
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)	0	0
10. Deduct total nonadmitted amounts	0	0
11. Statement value at end of current period (Line 9 minus Line 10)	0	0

NONE

SCHEDULE B – VERIFICATION

Mortgage Loans

	1 Year To Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		0
2.2 Additional investment made after acquisition		0
3. Capitalized deferred interest and other		0
4. Accrual of discount		0
5. Unrealized valuation increase (decrease)		0
6. Total gain (loss) on disposals		0
7. Deduct amounts received on disposals		0
8. Deduct amortization of premium and mortgage interest points and commitment fees		0
9. Total foreign exchange change in book value/recorded investment excluding accrued interest		0
10. Deduct current year's other-than-temporary impairment recognized		0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0
12. Total valuation allowance		0
13. Subtotal (Line 11 plus Line 12)	0	0
14. Deduct total nonadmitted amounts	0	0
15. Statement value at end of current period (Line 13 minus Line 14)	0	0

NONE

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	1,051,753	620,022
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		0
2.2 Additional investment made after acquisition	45,000	307,500
3. Capitalized deferred interest and other		0
4. Accrual of discount		0
5. Unrealized valuation increase (decrease)	(4,915)	341,399
6. Total gain (loss) on disposals		0
7. Deduct amounts received on disposals		0
8. Deduct amortization of premium and depreciation		217,168
9. Total foreign exchange change in book/adjusted carrying value		0
10. Deduct current year's other-than-temporary impairment recognized		0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	1,091,838	1,051,753
12. Deduct total nonadmitted amounts	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	1,091,838	1,051,753

SCHEDULE D – VERIFICATION

Bonds and Stocks

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	41,047,225	61,975,797
2. Cost of bonds and stocks acquired	21,863,360	15,552,450
3. Accrual of discount	7,098	4,933
4. Unrealized valuation increase (decrease)		0
5. Total gain (loss) on disposals		(39,682)
6. Deduct consideration for bonds and stocks disposed of	4,750,136	35,958,212
7. Deduct amortization of premium	73,634	488,061
8. Total foreign exchange change in book/adjusted carrying value		0
9. Deduct current year's other-than-temporary impairment recognized		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	58,093,913	41,047,225
11. Deduct total nonadmitted amounts	545,000	605,000
12. Statement value at end of current period (Line 10 minus Line 11)	57,548,913	40,442,225

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	93,709,005	100,519,473	119,551,380	(654,040)	74,023,058	0	0	93,709,005
2. NAIC 2 (a)	6,976,029	1,844,051		587,495	9,407,575	0	0	6,976,029
3. NAIC 3 (a)	0				0	0	0	0
4. NAIC 4 (a)	1,205,000		160,000		1,045,000	0	0	1,205,000
5. NAIC 5 (a)	0				0	0	0	0
6. NAIC 6 (a)	0				0	0	0	0
7. Total Bonds	101,890,034	102,363,524	119,711,380	(66,545)	84,475,633	0	0	101,890,034
PREFERRED STOCK								
8. NAIC 1	0				0	0	0	0
9. NAIC 2	0				0	0	0	0
10. NAIC 3	0				0	0	0	0
11. NAIC 4	0				0	0	0	0
12. NAIC 5	0				0	0	0	0
13. NAIC 6	0				0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	101,890,034	102,363,524	119,711,380	(66,545)	84,475,633	0	0	101,890,034

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 $ ..... ; NAIC 2 $ ..... ;

NAIC 3 $ ..... ; NAIC 4 $ ..... ; NAIC 5 $ ..... ; NAIC 6 $ .....

SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999	26,381,719	XXX	26,381,728	7,174	37

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	58,342,809	2,344,366
2. Cost of short-term investments acquired	33,200,164	92,214,681
3. Accrual of discount		0
4. Unrealized valuation increase (decrease)		0
5. Total gain (loss) on disposals		0
6. Deduct consideration received on disposals	65,161,245	36,216,238
7. Deduct amortization of premium	9	0
8. Total foreign exchange change in book/adjusted carrying value		0
9. Deduct current year's other-than-temporary impairment recognized		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	26,381,719	58,342,809
11. Deduct total nonadmitted amounts		0
12. Statement value at end of current period (Line 10 minus Line 11)	26,381,719	58,342,809

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

SCHEDULE E - VERIFICATION

(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	2,500,000	0
2. Cost of cash equivalents acquired	47,300,000	93,400,000
3. Accrual of discount		0
4. Unrealized valuation increase (decrease)		0
5. Total gain (loss) on disposals		0
6. Deduct consideration received on disposals	49,800,000	90,900,000
7. Deduct amortization of premium		0
8. Total foreign exchange change in book/adjusted carrying value		0
9. Deduct current year's other than temporary impairment recognized		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	2,500,000
11. Deduct total nonadmitted amounts		0
12. Statement value at end of current period (Line 10 minus Line 11)	0	2,500,000

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

SCHEDULE BA - PART 2

Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter

1	2	Location		5	6	7	8	9	10	11	12	13
CUSIP Identification	Name or Description	3 City	4 State	Name of Vendor or General Partner	NAIC Designation	Date Originally Acquired	Type and Strategy	Actual Cost at Time of Acquisition	Additional Investment Made After Acquisition	Amount of Encumbrances	Commitment for Additional Investment	Percentage of Ownership
Joint Venture, Partnership or Limited Liability Company Interests that have the Underlying Characteristics - Common Stocks - Unaffiliated												
000000-00-0	HLM Venture Partners III, L.P.	Boston	Massachusetts	Vicent J. Fabiani		02/10/2010	1		45,000		262,500	1.500
1599999 - Joint Venture, Partnership or Limited Liability Company Interests that have the Underlying Characteristics - Common Stocks - Unaffiliated								0	45,000	0	262,500	XXX
4499999 – Subtotals - Unaffiliated								0	45,000	0	262,500	XXX
4599999 – Subtotals - Affiliated								0	0	0	0	XXX
4699999 Totals								0	45,000	0	262,500	XXX

E03

SCHEDULE BA - PART 3

Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter

1	2	Location		5	6	7	8	Change in Book/Adjusted Carrying Value						15	16	17	18	19	20
								9	10	11	12	13	14						
CUSIP Identification	Name or Description	3 City	4 State	Name of Purchaser or Nature of Disposal	Date Originally Acquired	Disposal Date	Book/ Adjusted Carrying Value Less Encumbrances Prior Year	Unrealized Valuation Increase (Decrease)	Current Year's (Depreciation) or (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Capitalized Deferred Interest and Other	Total Change in B./A.C.V. (9+10-11+12)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value Less Encumbrances on Disposal	Consideration	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Investment Income
NONE																			
4499999 – Subtotals - Unaffiliated																			
4599999 – Subtotals - Affiliated																			
4699999 Totals																			

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation or Market Indicator [a]
Bonds - U.S. Governments									
3137EA-DN-6	FREDDIE MAC .75% 1/12/18		02/13/2015	Barclay Capital		1,981,390	2,000,000	1,458	1
3137EA-DP-1	FREDDIE MAC .875% 3/7/18		02/03/2015	Morgan Stanley		996,750	1,000,000	3,573	1
0599999 - Bonds - U.S. Governments						2,978,140	3,000,000	5,031	XXX
Bonds - U.S. Special Revenue									
13034A-FJ-4	CALIFORNIA ST INFRASTRUCTURE & REG		02/23/2015	Merrill Lynch		697,403	700,000	138	1FE
160853-MR-5	CHARLOTTE MECKLENBURG NC HOSP		03/27/2015	JP Morgan Chase		100,000	100,000	1	1FE
181008-BA-0	CLARK CNTY NV POLL CONTROL REV REG		03/20/2015	Barclay Capital		490,000	490,000		1FE
20774Y-UB-1	CONNECTICUT ST HLTH & EDUCTNLF REG		03/13/2015	Barclay Capital		467,523	470,000	564	1FE
20772J-ZT-2	CONNECTICUT ST REGD N/C B/E		03/13/2015	Citigroup Global Markets		693,796	610,000		1FE
349460-4D-4	FORT WORTH TX INDEP SCH DIST REGD		03/25/2015	JP Morgan Chase		690,758	640,000		1FE
49151F-HB-9	KENTUCKY ST PROPERTY & BLDGS C REG		03/13/2015	VENDOR CODE NATL NOT IN TABLE		746,005	650,000	3,340	1FE
546415-G9-5	LOUISIANA ST REGD N/C B/E		03/13/2015	JP Morgan Chase		538,490	460,000	4,025	1FE
574192-7Y-0	MARYLAND ST REGD N/C B/E		03/12/2015	Wells Fargo		688,914	600,000	167	1FE
59447P-6S-5	MICHIGAN ST FIN AUTH REVENUE REGD		02/12/2015	JP Morgan Chase		261,666	230,000		1FE
59447P-8C-8	MICHIGAN ST FIN AUTH REVENUE REGD		03/06/2015	Merrill Lynch		1,010,000	1,010,000		1FE
64966J-B3-9	NEW YORK NY SUBSER G5 GO VR		01/22/2015	Wells Fargo		200,000	200,000	1	1FE
65829Q-BZ-6	NORTH CAROLINA ST LTD OBLIG REGD N		03/13/2015	JP Morgan Chase		206,548	180,000	2,975	1FE
709193-LQ-7	PENNSYLVANIA ST INDL DEV AUTH REGD		02/20/2015	VENDOR CODE JPMO NOT IN TABLE		230,129	210,000	1,575	1FE
70914P-WT-5	PENNSYLVANIA ST REGD N/C B/E		03/13/2015	Merrill Lynch		693,126	600,000	3,000	1FE
717883-PQ-9	PHILADELPHIA PA SCH DIST REGD N/C		03/26/2015	Merrill Lynch		379,378	330,000		1FE
79575E-AE-8	SALT VERDE FINANCIAL CORP		01/28/2015	US BANK		278,981	240,000	2,135	2FE
836753-JK-0	SOUTH BROWARD FL HOSP DIST REGD N/		03/25/2015	Wells Fargo		279,938	250,000		1FE
882723-QX-0	TEXAS ST REGD N/C B/E		03/12/2015	Wells Fargo		691,728	590,000	12,456	1FE
915137-U3-5	UNIVERSITY TX UNIV REVS VR SER B		02/24/2015	Wells Fargo		1,100,000	1,100,000	7	1FE
93974D-AR-9	WASHINGTON ST REGD N/C B/E		03/13/2015	Goldman Sachs & Co		682,045	580,000	3,786	1FE
93974D-NW-4	WASHINGTON ST REGD N/C B/E		03/30/2015	Wells Fargo		82,704	70,000	272	1FE
3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions						11,209,132	10,310,000	34,442	XXX
Bonds - Industrial and Miscellaneous (Unaffiliated)									
00507U-AN-1	ACTAVIS FUNDING SCS REGD V/R		03/03/2015	JP Morgan Chase		260,000	260,000		2FE
2027A0-HN-2	COMMONWEALTH BANK AUST REGD V/R 14		03/04/2015	JP Morgan Chase		1,140,000	1,140,000		1FE
78448M-AD-9	SMART ABS SERIES 2015-1US TRUST SE		03/10/2015	JP Morgan Chase		429,979	430,000		1FE
04364F-AB-4	ASCENTIUM EQUIPMENT REC 2015-1		02/26/2015	Credit Suisse First Bosto		519,992	520,000		1FE
13975K-AC-3	CAPITAL AUTO REC ASSET TRUST		01/23/2015	Barclay Capital		349,910	350,000		1FE
14313W-AC-6	CARMAX AUTO OWNER TRUST 2015-1 SER		02/19/2015	Merrill Lynch		359,912	360,000		1FE
200339-CG-2	COMERICA BANK REGD SER BKNT		02/24/2015	STERNE AGEE & LEACH, INC		355,733	330,000	5,060	1FE
58933Y-AS-4	MERCK & CO INC REGD		02/05/2015	JP Morgan Chase		699,867	700,000		1FE
811065-AB-7	SCRIPPS NETWORKS INTERAC		03/12/2015	Goldman Sachs & Co		749,494	740,000	6,388	2FE
81618T-AB-6	SELECT INCOME REIT		01/30/2015	JP Morgan Chase		555,576	560,000		2FE
842400-GF-4	SOUTHERN CAL EDISON		01/13/2015	JP Morgan Chase		200,000	200,000		1FE
96042A-AB-1	WESTLAKE AUTOMOBILE RECEIVABLES TR		03/04/2015	Credit Suisse First Bosto		459,977	460,000		1FE
50248W-AE-6	CAISSE CENTRALE DESJARDN		01/26/2015	JP Morgan Chase		569,949	570,000		1FE
05579H-AA-0	BNZ INTL FUNDING/LONDON REGD 144A	F	02/17/2015	Citigroup Global Markets		539,843	540,000		1FE
806213-AA-2	SCENTRE GROUP TRUST 1/2	F	01/20/2015	JP Morgan Chase		485,857	480,000	2,457	1FE
3899999 - Bonds - Industrial and Miscellaneous (Unaffiliated)						7,676,089	7,640,000	13,905	XXX
8399997 - Subtotals - Bonds - Part 3						21,863,361	20,950,000	53,378	XXX
8399999 - Subtotals - Bonds						21,863,361	20,950,000	53,378	XXX
9999999 Totals						21,863,361	XXX	53,378	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues .....

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identi-fication	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Desig-nation or Market Indicator (a)
Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions																					
15136E-AD-6	CENTENE PLAZA TDD 6.1% 3/1/15		03/01/2015	MATURITY		160,000	160,000	160,000	160,000				0		160,000			0	4,880	03/01/2015	4
160853-MR-5	CHARLOTTE MECKLENBURG NC HOSP		02/03/2015	JP Morgan Chase		100,000	100,000	100,000	100,000				0		100,000			0	3	01/15/2038	1FE
455057-TR-0	INDIANA ST FIN AUTH REV		02/03/2015	Goldman Sachs & Co		100,000	100,000	100,000	100,000				0		100,000			0	3	02/01/2037	1FE
57586E-HU-8	MASSACHUSETTS ST HEALTH AUTH REV		03/17/2015	Wells Fargo		600,000	600,000	600,000	600,000				0		600,000			0	24	07/01/2027	1FE
606901-LD-6	MISSOURI ST HEALTH & EDL FACS		02/03/2015	Wells Fargo		200,000	200,000	200,000	200,000				0		200,000			0	5	09/01/2030	1FE
64972G-EN-0	NEW YORK CITY WATER FIN AUTH VR		02/03/2015	Wells Fargo		400,000	400,000	400,000	400,000				0		400,000			0	7	06/15/2050	1FE
64966J-B3-9	NEW YORK NY SUBSER G5 GO VR		02/03/2015	Wells Fargo		300,000	300,000	300,000	100,000				0		300,000			0	4	04/01/2042	1FE
679111-TB-0	OKLAHOMA ST TPK AUTH TPK REV		02/03/2015	JP Morgan Chase		200,000	200,000	200,000	200,000				0		200,000			0	8	01/01/2028	1FE
717903-ZG-6	PHILADELPHIA PA HOSPS AND EDU		02/03/2015	JP Morgan Chase		100,000	100,000	100,000	100,000				0		100,000			0	4	02/15/2021	1FE
606901-LB-0	STATE OF MISSOURI HEALTH & EDL		02/03/2015	VENDOR CODE U.S NOT IN TABLE		100,000	100,000	100,000	100,000				0		100,000			0	3	09/01/2030	1FE
915137-U3-5	UNIVERSITY TX UNIV REVS VR SER B		03/12/2015	Wells Fargo		1,100,000	1,100,000	1,100,000					0		1,100,000			0	11	08/01/2039	1FE
3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions						3,360,000	3,360,000	3,360,000	2,060,000	0	0	0	0	0	3,360,000	0	0	0	4,952	XXX	XXX
Bonds - Industrial and Miscellaneous (Unaffiliated)																					
34528Q-AQ-7	FORD CREDIT FLOORPLAN MASTER TRUST		02/15/2015	PRINCIPAL RECEIPT		500,000	500,000	540,430	501,865		(1,865)		(1,865)		500,000			0	3,500	02/15/2017	1FE
43811A-AD-8	HONDA AUTO RECEIVABLES OWNER TRUST		02/21/2015	PRINCIPAL RECEIPT		679,460	679,460	679,396	679,469		(8)		(8)		679,460			0	1,235	12/21/2017	1FE
65476H-AD-2	NISSAN AUTO RECEIVABLES TRUST		03/15/2015	PRINCIPAL RECEIPT		85,674	85,674	87,521	85,817		(143)		(143)		85,674			0	191	09/15/2017	1FE
78392N-AA-9	SNAAC AUTO RECEIVABLES TRUST		03/15/2015	PRINCIPAL RECEIPT		35,304	35,304	35,303	35,311		(7)		(7)		35,304			0	45	07/16/2018	1FE
83172L-AC-5	SMART TRUST	F	03/14/2015	PRINCIPAL RECEIPT		89,697	89,697	89,692	89,700		(3)		(3)		89,697			0	76	03/14/2017	1FE
3899999 - Bonds - Industrial and Miscellaneous (Unaffiliated)						1,390,135	1,390,136	1,432,342	1,392,162	0	(2,026)	0	(2,026)	0	1,390,135	0	0	0	5,047	XXX	XXX
8399997 - Subtotals - Bonds - Part 4						4,750,135	4,750,136	4,792,342	3,452,162	0	(2,026)	0	(2,026)	0	4,750,135	0	0	0	9,999	XXX	XXX
8399999 - Subtotals - Bonds						4,750,135	4,750,136	4,792,342	3,452,162	0	(2,026)	0	(2,026)	0	4,750,135	0	0	0	9,999	XXX	XXX
9999999 Totals						4,750,135	XXX	4,792,342	3,452,162	0	(2,026)	0	(2,026)	0	4,750,135	0	0	0	9,999	XXX	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues .....

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					6	7	8	
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	First Month	Second Month	Third Month	*
Open Depositories								
Bank of America, Chicago, IL					2,216,181	3,692,639	2,552,343	XXX
Commerce Bank, Kansas City, MO					21,142	102,625	17,710	XXX
JP Morgan Chase, Woodberry, NY					261,823	260,300	278,548	XXX
Regions Bank, Little Rock, AR					339,910	321,897	320,739	XXX
Brown Brothers Harriman, Chicago, IL					186,465	76,225	39,574	XXX
Wells Fargo, San Francisco, CA					4,800,269	5,152,917	7,180,986	XXX
Bank of Tokyo - Mitsubishi UFJ, LTD, New York, NY			9,254		15,011,203	15,014,082	15,017,270	XXX
								XXX
0199998 Deposits in ..... depositories that do not exceed the allowable limit in any one depository (See Instructions) - Open Depositories	XXX	XXX						XXX
0199999 Total Open Depositories	XXX	XXX	9,254	0	22,836,993	24,620,685	25,407,170	XXX
0399999 Total Cash on Deposit	XXX	XXX	9,254	0	22,836,993	24,620,685	25,407,170	XXX
0499999 Cash in Company's Office	XXX	XXX	XXX	XXX	300	300	300	XXX
0599999 Total	XXX	XXX	9,254	0	22,837,293	24,620,985	25,407,470	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity Date	6 Book/Adjusted Carrying Value	7 Amount of Interest Due & Accrued	8 Amount Received During Year
NONE							
8699999 Total Cash Equivalents					0	0	0