



QUARTERLY STATEMENT

AS OF JUNE 30, 2015
OF THE CONDITION AND AFFAIRS OF THE

CELTIC INSURANCE COMPANY

NAIC Group Code	1295	1295	NAIC Company Code	80799	Employer's ID Number	06-0641618
	(Current Period)	(Prior Period)				
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			Chicago, IL, US 60601		
	(Street and Number)			(City or Town, State, Country and Zip Code)		
Main Administrative Office	77 W. Wacker Drive, Suite 1200		Chicago, IL, US 60601	800-714-4658		
	(Street and Number)		(City or Town, State, Country and Zip Code)	(Area Code) (Telephone Number)		
Mail Address	77 W. Wacker Drive, Suite 1200		Chicago, IL, US 60601			
	(Street and Number or P.O. Box)		(City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	77 W. Wacker Drive, Suite 1200		Chicago, IL, US 60601	800-714-4658		
	(Street and Number)		(City or Town, State, Country and Zip Code)	(Area Code) (Telephone Number)		
Internet Web Site Address	www.celtic-net.com					
Statutory Statement Contact	Bryan Carlin			314-445-0004		
	(Name)			(Area Code) (Telephone Number) (Extension)		
	info@celtic-net.com			314-725-4658		
	(E-Mail Address)			(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	John P. Ryan	Vice President
Barbara Basham	Vice President		

DIRECTORS OR TRUSTEES

Anand A. Shukla	David J. Burke	Tricia L. Dinkelman	Dale F. Schmidt
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State ofIllinois.....
County ofCook.....
ss

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 Senior Vice President	David J. Burke Vice President Treasurer	Karen E. Wegg 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 11 day of August, 2015		
Pedro Galvan, Notary Public 12/19/2015		

STATEMENT AS OF JUNE 30, 2015 OF THE CELTIC INSURANCE COMPANY

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	63,714,702	545,000	63,169,702	40,442,225
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks	3,000,000		3,000,000	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 (\$13,161,701), cash equivalents (\$0) and short-term investments (\$9,172,697)	22,334,398		22,334,398	84,933,755
6. Contract loans (including \$ premium notes)			0	0
7. Derivatives	0		0	0
8. Other invested assets	1,269,940		1,269,940	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)	90,319,040	545,000	89,774,040	126,427,733
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	478,761		478,761	290,967
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	1,362,157		1,362,157	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	8,357,769		8,357,769	4,607,072
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts	1,503,976	654,992	848,984	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	1,131,261	226,231	905,030	496,097
19. Guaranty funds receivable or on deposit	19,413		19,413	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	22,698,577		22,698,577	81,949
24. Health care (\$898,506) and other amounts receivable	898,506	521,312	377,194	1,439,277
25. Aggregate write-ins for other-than-invested assets	40,628	40,628	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	126,810,088	1,988,163	124,821,925	136,599,483
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	126,810,088	1,988,163	124,821,925	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	40,628	40,628	0	0
2502.			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)	40,628	40,628	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$779,151 reinsurance ceded).....	25,098,426		25,098,426	19,987,567
2. Accrued medical incentive pool and bonus amounts			0	0
3. Unpaid claims adjustment expenses	371,854		371,854	0
4. Aggregate health policy reserves including the liability of \$8,274,004 for medical loss ratio rebate per the Public Health Service Act.....	22,660,626		22,660,626	794,124
5. Aggregate life policy reserves	4,186,439		4,186,439	4,344,907
6. Property/casualty unearned premium reserve			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance	197,900		197,900	131,850
9. General expenses due or accrued	3,741,432		3,741,432	4,551,540
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))	1,987,273		1,987,273	0
10.2 Net deferred tax liability.....			0	0
11. Ceded reinsurance premiums payable	707,740		707,740	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	960,379		960,379	32,144,139
16. Derivatives.....		0	0	0
17. Payable for securities			0	0
18. Payable for securities lending			0	0
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers)	1,365,187		1,365,187	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)	26,295,658	0	26,295,658	42,488,938
24. Total liabilities (Lines 1 to 23).....	87,572,914	0	87,572,914	107,238,824
25. Aggregate write-ins for special surplus funds	XXX	XXX	1,528,506	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	0
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	(12,368,151)	(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	37,249,010	29,360,659
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	124,821,924	136,599,483
DETAILS OF WRITE-INS				
2301. ACA Risk Adjustment Payable.....	13,782,486		13,782,486	13,951,643
2302. ACA Cost Sharing Payable.....	9,121,721		9,121,721	27,716,437
2303. Health Insurer Fee Payable.....	2,548,723		2,548,723	0
2398. Summary of remaining write-ins for Line 23 from overflow page	842,728	0	842,728	820,858
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	26,295,658	0	26,295,658	42,488,938
2501. Health Insurer Fee Estimate.....	XXX	XXX	1,528,506	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	1,528,506	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	276,579	147,811	405,699
2. Net premium income (including \$ non-health premium income).....	XXX	66,851,968	55,387,036	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	66,851,968	55,387,036	129,792,518
Hospital and Medical:				
9. Hospital/medical benefits		12,655,389	23,961,584	55,775,071
10. Other professional services		7,042,291	3,970,037	11,155,516
11. Outside referrals			0	0
12. Emergency room and out-of-area		8,704,879	2,333,220	14,444,747
13. Prescription drugs		13,861,244	7,498,191	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	42,263,803	37,763,032	101,872,166
Less:				
17. Net reinsurance recoveries		4,170,409	940,012	4,989,042
18. Total hospital and medical (Lines 16 minus 17)	0	38,093,394	36,823,020	96,883,124
19. Non-health claims (net).....			0	0
20. Claims adjustment expenses, including \$ 331,237 cost containment expenses.....		2,773,320	0	0
21. General administrative expenses.....		12,934,994	13,509,598	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	53,801,708	50,332,618	126,036,798
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	13,050,260	5,054,418	3,755,720
25. Net investment income earned		536,263	583,852	963,946
26. Net realized capital gains (losses) less capital gains tax of \$		(124)	0	0
27. Net investment gains (losses) (Lines 25 plus 26)	0	536,139	583,852	963,946
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$ (47,122))]		(47,122)	673,325	(22,865)
29. Aggregate write-ins for other income or expenses	0	540,278	0	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	14,079,555	6,311,595	6,084,844
31. Federal and foreign income taxes incurred	XXX	5,750,134	1,726,897	1,775,038
32. Net income (loss) (Lines 30 minus 31)	XXX	8,329,421	4,584,698	4,309,806
DETAILS OF WRITE-INS				
0601.	XXX		0	0
0602.	XXX		0	0
0603.	XXX		0	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	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	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.....		518,263	0	803,516
2902. Annuity Income.....		(110,877)	0	(237,567)
2903. Interest Maintenance Reserve Elimination.....		132,892	0	50,757
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	771,337
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	540,278	0	1,388,043

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1	2	3
	Current Year To Date	Prior Year To Date	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	8,329,421	4,584,698	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 \$	5,322	32,481	221,909
37. Change in net unrealized foreign exchange capital gain or (loss)		0	0
38. Change in net deferred income tax	638,031	17,490	615,587
39. Change in nonadmitted assets	(1,084,422)	46,721	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		(20,000,000)	(20,000,000)
47. Aggregate write-ins for gains or (losses) in surplus	0	(19,504)	(68,943)
48. Net change in capital and surplus (Lines 34 to 47)	7,888,352	(15,338,114)	(14,461,012)
49. Capital and surplus end of reporting period (Line 33 plus 48)	37,249,011	28,483,557	29,360,659
DETAILS OF WRITE-INS			
4701. Change in Asset Valuation Reserve.....		(19,504)	(68,943)
4702.		0	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	(19,504)	(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.....	88,603,127	58,015,723	146,130,893
2. Net investment income	549,678	1,164,175	1,680,117
3. Miscellaneous income	0	769,865	1,585,846
4. Total (Lines 1 to 3)	89,152,805	59,949,763	149,396,856
5. Benefit and loss related payments	54,551,560	26,270,018	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	68,237,764	12,933,477	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).....	2,881,163	(749,670)	646,399
10. Total (Lines 5 through 9)	125,670,487	38,453,825	75,944,678
11. Net cash from operations (Line 4 minus Line 10)	(36,517,682)	21,495,938	73,452,178
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	7,874,469	34,056,302	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	(124)	0	0
12.7 Miscellaneous proceeds	0	57,637	39,682
12.8 Total investment proceeds (Lines 12.1 to 12.7)	7,874,345	34,113,939	36,215,062
13. Cost of investments acquired (long-term only):			
13.1 Bonds	30,743,155	5,875,004	15,552,450
13.2 Stocks	3,000,000	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	210,000	105,000	307,500
13.6 Miscellaneous applications	2,865	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	33,956,020	5,980,004	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)	(26,081,675)	28,133,935	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	20,000,000	20,000,000
16.6 Other cash provided (applied).....	0	18,756,493	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).....	0	(1,243,507)	(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)	(62,599,357)	48,386,366	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)	22,334,398	59,457,918	84,933,755

STATEMENT AS OF JUNE 30, 2015 OF THE CELTIC INSURANCE COMPANY

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	48,278	45,398	.0	2,641	.0	.0	.0	.0	.0	239
4. Third Quarter	.0									
5. Current Year	0									
6. Current Year Member Months	276,579	258,948		16,197						1,434
Total Member Ambulatory Encounters for Period:										
7. Physician	143,457	143,457								
8. Non-Physician	115,047	115,047								
9. Total	258,504	258,504	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	8,199	8,199								
11. Number of Inpatient Admissions	2,026	2,026								
12. Health Premiums Written (a).....	73,618,947	68,491,857		5,127,091						
13. Life Premiums Direct.....	54,748									54,748
14. Property/Casualty Premiums Written	.0									
15. Health Premiums Earned	73,605,739	68,478,648		5,127,091						
16. Property/Casualty Premiums Earned	.0									
17. Amount Paid for Provision of Health Care Services	34,414,556	34,414,556		.0						.0
18. Amount Incurred for Provision of Health Care Services	42,263,804	42,263,804		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)

[illegible]

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 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
	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		
1. Comprehensive (hospital and medical)	10,541,993	23,222,543	4,317,797	20,780,629	14,859,790	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).....	10,541,993	23,222,543	4,317,797	20,780,629	14,859,790	19,987,569
10. Health care receivables (a)		14,933		767,066	.0	.0
11. Other non-health					.0	.0
12. Medical incentive pools and bonus amounts					.0	.0
13. Totals (Lines 9-10+11+12)	10,541,993	23,207,610	4,317,797	20,013,563	14,859,790	19,987,569

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

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.

<u>Net Income</u>	<u>State of Domicile</u>	<u>2015</u>	<u>2014</u>
(1) Illinois State Health Plan state basis (Page 4, Line 32, Columns 2 & 4)	Illinois	\$ 8,329,421	\$ 4,309,807
(2) State Prescribed Practices that increase/(decrease) NAIC SAP: e.g., Depreciation of fixed assets	Illinois		
(3) State Permitted Practices that increase/(decrease) NAIC SAP: e.g., Depreciation of fixed assets, home office property	Illinois		
(4) NAIC SAP (1+2-3=4)	Illinois	\$ 8,329,421	\$ 4,309,807
<u>Surplus</u>			
(5) Illinois State Health Plan state basis (Page 3, Line 33, Columns 3 & 4)	Illinois	\$ 37,249,010	\$ 29,360,659
(6) State Prescribed Practices that increase/(decrease) NAIC SAP: e.g., Goodwill, net e.g., Fixed Assets, net	Illinois		
(7) State Permitted Practices that increase/(decrease) NAIC SAP: e.g., Home Office Property	Illinois		
(8) NAIC SAP (5-6-7=8)	Illinois	\$ 37,249,010	\$ 29,360,659

- 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

- The source used to determine prepayment assumptions for all loan-backed securities for the Company was Bloomberg’s cash flows.
- There are no securities within the scope of this statement with a recognized other-than-temporary impairment.

NOTES TO FINANCIAL STATEMENTS

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 (\$1,928)
 - ii. 12 months or longer (\$141)
 - b. The aggregate related fair value of securities with unrealized losses:
 - i. Less than 12 months \$728,197
 - ii. 12 months or longer \$279,864
 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 \$9,662,395 and \$18,110,572 for such services during the period ended June 30, 2015 & December 31, 2014. Nurse Response, an affiliate of the company, provided nurse triage services in the amount of \$128,056 and \$175,071 for medical expenses to the company during the period ended June 30, 2015 & December 31, 2014. US Script, Inc, an affiliate of the company, provided pharmacy benefits management services in the amount of \$13,862,034 and \$19,219,938 for medical expenses to the company during the period ended June 30, 2015 & December

NOTES TO FINANCIAL STATEMENTS

31, 2014. Opticare Vision Insurance Co, an affiliate of the company, provided vision care services in the amount of \$857,137 and \$2,434,185 for medical expenses to the company during the period ended June 30, 2015 & December 31, 2014. Nurtur Health, Inc, an affiliate of the company, provided wellness behavioral services in the amount of \$614,670 and \$827,335 for medical expenses to the company during the period ended June 30, 2015 & December 31, 2014. Cenpatico Behavioral Health provided behavioral and mental health services to the Company in the amount of \$2,801,736 and \$4,952,148 for medical services to the company during the period ended June 30, 2015 & December 31, 2014.

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 \$47,122 related to the member premium receivable outstanding as of June 30, 2015. The \$14,632 member receivable recognized as of 6/30/15 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. Assets Measured at Fair Value on a Recurring Basis

Assets and liabilities recorded at fair value in the statutory statement of admitted assets, liabilities and capital and surplus are categorized based upon the extent to which the fair value estimates are based upon observable or unobservable inputs.

Level inputs are as follows:

Level input	Input definition
Level I	Inputs are unadjusted, quoted prices for identical assets or liabilities in active markets at the measurement date.
Level II	Inputs other than quoted prices included in Level I that are observable for the asset or liability through corroboration with market data at the measurement date.
Level III	Unobservable inputs that reflect management’s best estimate of what market participants would use in pricing the asset or liability at the measurement date.

The following table summarizes fair value measurements by level at June 30, 2015 for assets and liabilities measured at fair value on a recurring basis.

NOTES TO FINANCIAL STATEMENTS

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Total
a. Assets at fair value				
Cash and Cash Equivalents	\$ 9,172,696	\$ -	\$ -	\$ 9,172,696
Perpetual Preferred stock				
Industrial and Misc	\$ -	\$ -	\$ -	\$ -
Parent, Subsidiaries and Affiliates	-	-	-	-
Total Perpetual Preferred Stocks	\$ -	\$ -	\$ -	\$ -
Bonds				
U.S. Governments	\$ -	\$ -	\$ -	\$ -
Industrial and Misc	\$ -	\$ -	-	-
Hybrid Securities	-	-	-	-
Parent, Subsidiaries and Affiliates	-	-	-	-
Total Bonds	\$ -	\$ -	\$ -	\$ -
Common Stock				
Industrial and Misc	\$ -	\$ -	\$ -	\$ -
Parent, Subsidiaries and Affiliates	-	-	-	-
Total Common Stocks	\$ -	\$ -	\$ -	\$ -
Derivative assets				
Interest rate contracts	\$ -	\$ -	\$ -	\$ -
Foreign exchange contracts	-	-	-	-
Credit contracts	-	-	-	-
Commodity futures contracts	-	-	-	-
Commodity forward contracts	-	-	-	-
Total Derivatives	\$ -	\$ -	\$ -	\$ -
Separate account assets	\$ -	\$ -	\$ -	\$ -
Total assets at fair value	\$ 9,172,696	\$ -	\$ -	\$ 9,172,696
b. Liabilities at fair value				
Derivative liabilities	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -

The following table summarizes fair value measurements by level at December 31, 2014 for assets and liabilities measured at fair value on a recurring basis.

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Total
a. Assets at fair value				
Cash and Cash Equivalents	\$ 84,933,755	\$ -	\$ -	\$ 84,933,755
Perpetual Preferred stock				
Industrial and Misc	\$ -	\$ -	\$ -	\$ -
Parent, Subsidiaries and Affiliates	-	-	-	-
Total Perpetual Preferred Stocks	\$ -	\$ -	\$ -	\$ -
Bonds				
U.S. Governments	\$ -	\$ -	\$ -	\$ -
Industrial and Misc	\$ -	\$ -	-	-
Hybrid Securities	-	-	-	-
Parent, Subsidiaries and Affiliates	-	-	-	-
Total Bonds	\$ -	\$ -	\$ -	\$ -
Common Stock				
Industrial and Misc	\$ -	\$ -	\$ -	\$ -
Parent, Subsidiaries and Affiliates	-	-	-	-
Total Common Stocks	\$ -	\$ -	\$ -	\$ -
Derivative assets				
Interest rate contracts	\$ -	\$ -	\$ -	\$ -
Foreign exchange contracts	-	-	-	-
Credit contracts	-	-	-	-
Commodity futures contracts	-	-	-	-
Commodity forward contracts	-	-	-	-
Total Derivatives	\$ -	\$ -	\$ -	\$ -
Separate account assets	\$ -	\$ -	\$ -	\$ -
Total assets at fair value	\$ 84,933,755	\$ -	\$ -	\$ 84,933,755
b. Liabilities at fair value				
Derivative liabilities	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -

NOTES TO FINANCIAL STATEMENTS

B. Fair Value Disclosures Under Other Pronouncements

None

C. Aggregate Fair Value for All Financial Statements

The following table summarizes fair value measurements by level at June 30, 2015 for all financial instruments:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level I	Level II	Level III	Not Practicable (Carrying Value)
Cash and short-term investments	\$ 9,172,696	9,172,696	—	9,172,696	—	—
Bonds	\$ 64,251,605	63,169,702	12,301,065	50,905,540	1,045,000	—
Other Invested Assets	\$ 1,269,940	1,269,940	—	—	1,269,940	—

The following table summarizes fair value measurements by level at December 31, 2014 for all financial instruments:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level I	Level II	Level III	Not Practicable (Carrying Value)
Cash and short-term investments	\$ 58,342,809	58,342,809	—	58,342,809	—	—
Bonds	\$ 41,882,476	40,442,225	9,382,237	30,459,988	600,000	—
Other Invested Assets	\$ 1,051,753	1,051,753	—	—	1,051,753	—

D. Aggregate Fair Value for All Financial Statements

No Change

21. Other Items

A. Extraordinary Items

None

B. Troubled Debt Restructuring: Debtors

None

C. Other Disclosures

The Illinois Department of Insurance granted Celtic Insurance Company permission to change from the Life and Accident and Health statement (blue) to the Health statement (orange) starting with the quarter ended March 31, 2015.

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

Subsequent events have been considered through 08/14/2015 for the statutory statement issued on 6/30/2015.

On July 1, 2015, the Company completed an assumption reinsurance agreement with Coordinated Care Corporation, Inc. The Company assumed the in-force insurance contracts issued to individuals through the Indiana Health Insurance Marketplace during the 2015 calendar year through June 30, 2015. The Company received \$17.1 million in cash and other assets with an aggregate value to the Company equal to the sum of one hundred percent of the estimated assumed policy liabilities, including, but not limited to, liabilities for benefits, surrenders, returns and premium refunds. The Company did not record any goodwill as a result of this transaction.

The unaudited supplemental pro forma financial information of the assumed reinsurance transactions follows:

	June 30, 2015
Pro forma net income	\$ -
Pro forma total assets	\$ 106,826,125
Pro forma total liabilities	\$ 104,624,999

NOTES TO FINANCIAL STATEMENTS

Pro forma surplus	\$ 37,249,010
-------------------	---------------

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 June 30, 2015 which are subject to retrospective rating features was \$66.9 million, which represents 100% of the total net premiums written.
- D. Medical loss ratio rebates required pursuant to the Public Health Service Act –

	1	2	3	4	5
	Individual	Small Group Employer	Large Group Employer	Other Categories with Rebates	Total
Prior Reporting Year					
(1) Medical loss ratio rebates incurred	\$ (108,000)	\$ -	\$ -	\$ -	\$ (108,000)
(2) Medical loss ratio rebates paid	\$ -	\$ -	\$ -	\$ -	\$ -
(3) Medical loss ratio rebates unpaid	\$ 302,000	\$ -	\$ -	\$ -	\$ 302,000
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	\$ -
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	\$ -
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ -
Current Reporting Year-to-Date					
(7) Medical loss ratio rebates incurred	\$ 8,274,004	\$ -	\$ -	\$ -	\$ 8,274,004
(8) Medical loss ratio rebates paid	\$ -	\$ -	\$ -	\$ -	\$ -
(9) Medical loss ratio rebates unpaid	\$ 8,576,004	\$ -	\$ -	\$ -	\$ 8,576,004
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	\$ -
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	\$ -
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ 8,576,004

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	\$ 48,067
3) Premium adjustments payable due to ACA Risk Adjustment	\$ 13,782,486
Operations (Revenue & Expense)	
4) Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk adjustment	\$ (1,407,936)
5) Reported in expenses as ACA risk adjustment user fees (incurred/paid)	\$ 20,489
b) Transitional ACA Reinsurance Program	
Assets	
1) Amounts recoverable for claims paid due to ACA Reinsurance	\$ 8,269,119
2) Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)	\$ 739,701
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	\$ 473,549
5) Ceded reinsurance premiums payable due to ACA Reinsurance	\$ 707,740
6) Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	\$ -
Operations (Revenue & Expense)	
7) Ceded reinsurance premiums due to ACA Reinsurance	\$ 683,027
8) Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	\$ 4,170,507
9) ACA Reinsurance contributions - not reported as ceded premium	\$ 235,913
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	\$ 13,649,250
Operations (Revenue & Expense)	
3) Effect of ACA Risk Corridors on net premium income	\$ (13,649,250)
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	
					Accrued Less Payments (Col 1-3)	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	\$ -	\$ (5,330,233)	B	\$ -	\$ 8,621,410
3) Subtotal ACA Permanent Risk Adjustment Program	\$ -	\$ 13,951,643	\$ -	\$ -	\$ -	\$ 13,951,643	\$ -	\$ (5,330,233)		\$ -	\$ 8,621,410
b) Transitional ACA Reinsurance Program											
1) Amounts recoverable for claims paid	\$ 4,309,182	\$ -	\$ -	\$ -	\$ 4,309,182	\$ -	\$ 2,579,028	\$ -	C	\$ 6,888,210	\$ -
2) Amounts recoverable for claims unpaid (contra liability)	\$ -	\$ 467,977	\$ -	\$ -	\$ -	\$ 467,977	\$ -	\$ (467,977)	D	\$ -	\$ -
3) Amounts receivable relating to uninsured plans	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	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 payable	\$ -	\$ 1,428,953	\$ -	\$ 1,188,180	\$ -	\$ 240,773	\$ -	\$ (240,773)	G	\$ -	\$ -
6) Liability for amounts held under uninsured plans	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	H	\$ -	\$ -
7) Subtotal ACA Transitional Reinsurance Program	\$ 4,309,182	\$ 2,135,088	\$ -	\$ 1,188,180	\$ 4,309,182	\$ 946,908	\$ 2,579,028	\$ (708,750)		\$ 6,888,210	\$ 238,158
c) Temporary ACA Risk Corridors Program											
1) Accrued retrospective premium	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	I	\$ -	\$ -
2) Reserve for rate credits or policy experience rating refunds	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 13,649,250	J	\$ -	\$ 13,649,250
3) Subtotal ACA Risk Corridors Program	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 13,649,250		\$ -	\$ 13,649,250
d. Total for ACA Risk Sharing Provisions	\$ 4,309,182	\$ 16,086,731	\$ -	\$ 1,188,180	\$ 4,309,182	\$ 14,898,551	\$ 2,579,028	\$ 7,610,267		\$ 6,888,210	\$ 22,508,818

25. Change in Incurred Losses and Loss Adjustment Expenses

Reserves as of December 31, 2014 were \$19.9 million. As of June 30, 2015, \$11.1 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 \$4.5 million favorable prior-year development since December 31, 2014 to June 30, 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

No Change

29. Participating Policies

No change.

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves - \$737,372
2. Date of the most recent evaluation of this liability – 6/30/2015
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 ☐
- 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 ☒
- 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 ☒ 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 ☐ No ☒
- 3.3

If the response to 3.2 is yes, provide a brief description of those changes.
- 4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes ☐ No ☒
- 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 ☒ 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 ☒ No ☐ NA ☐
- 6.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes ☒ 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 ☒
- 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 ☒
- 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 ☒
- 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?
(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.

Yes [X] No []

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:.....\$0

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	2
	Prior Year-End Book/Adjusted Carrying Value	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
Brown Brothers Harriman & Co.....	140 Broadway, New York, NY 10005.....
Conseco Capital Management.....	11825 North Pennsylvania Street, Building K, Carmel, IN 46032.....

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.....	57.5 %
1.2	A&H cost containment percent	0.5 %
1.3	A&H expense percent excluding cost containment expenses.....	20.9 %
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.....	\$

STATEMENT AS OF JUNE 30, 2015 OF THE CELTIC INSURANCE COMPANY

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

[illegible]

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	L100,867				2,829		103,696		
2. Alaska	AK	L2,472						2,472		
3. Arizona	AZ	L24,440				664		25,104		
4. Arkansas	AR	L68,320,340				1,560		68,321,900		
5. California	CA	L52,070						52,070		
6. Colorado	CO	L14,409				126		14,535		
7. Connecticut	CT	L112,404				2,844		115,248		
8. Delaware	DE	L21,028				256		21,284		
9. Dist. Columbia	DC	L3,932						3,932		
10. Florida	FL	L2,581,447				5,755		2,587,202		
11. Georgia	GA	L248,010				1,563		249,573		
12. Hawaii	HI	L0				0		0		
13. Idaho	ID	L0				0		0		
14. Illinois	IL	L43,315				4,983		48,298		
15. Indiana	IN	L241,767				2,932		244,699		
16. Iowa	IA	L63,106				248		63,354		
17. Kansas	KS	L23,241						23,241		
18. Kentucky	KY	L16,299				305		16,604		
19. Louisiana	LA	L12,511						12,511		
20. Maine	ME	L9,467				377		9,844		
21. Maryland	MD	L43,899				72		43,971		
22. Massachusetts	MA	L16,874				2,511		19,385		
23. Michigan	MI	L16,767						16,767		
24. Minnesota	MN	L13,305						13,305		
25. Mississippi	MS	L52,847				343		53,190		
26. Missouri	MO	L38,371						38,371		
27. Montana	MT	L6,347						6,347		
28. Nebraska	NE	L99,052				(14)		99,038		
29. Nevada	NV	L32,653						32,653		
30. New Hampshire	NH	L20,682						20,682		
31. New Jersey	NJ	L583,237						583,237		
32. New Mexico	NM	L30,709				2,777		33,486		
33. New York	NY	N52,702				283		52,985		
34. North Carolina	NC	L65,328				2,620		67,948		
35. North Dakota	ND	L3,470						3,470		
36. Ohio	OH	L94,243				2,955		97,198		
37. Oklahoma	OK	L19,953				72		20,025		
38. Oregon	OR	L4,449						4,449		54
39. Pennsylvania	PA	L83,169						83,169		
40. Rhode Island	RI	L1,934						1,934		
41. South Carolina	SC	L106,165				2,881		109,046		
42. South Dakota	SD	L29,724				154		29,878		
43. Tennessee	TN	L29,240				3,426		32,666		
44. Texas	TX	L170,860				6,253		177,113		
45. Utah	UT	L3,923						3,923		
46. Vermont	VT	L14,031						14,031		
47. Virginia	VA	L51,806				4,103		55,909		
48. Washington	WA	L6,024						6,024		
49. West Virginia	WV	L16,843						16,843		
50. Wisconsin	WI	L6,627				1,149		7,776		
51. Wyoming	WY	L12,644				721		13,365		
52. American Samoa	AS	N0						0		
53. Guam	GU	N0						0		
54. Puerto Rico	PR	N0						0		
55. U.S. Virgin Islands	VI	N0						0		
56. Northern Mariana Islands	MP	N0						0		
57. Canada	CAN	N0						0		
58. Aggregate other alien	OT	XXX0	0	0	0	0	0	0	0	0
59. Subtotal	XXX	73,619,003	0	0	0	54,748	0	73,673,751		54
60. Reporting entity contributions for Employee Benefit Plans	XXX							0		
61. Total (Direct Business)	(a)50	73,619,003	0	0	0	54,748	0	73,673,751		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

Company Organization	EIN	State	NAIC
Centene Corporation	42-1406317	DE	
Bankers Reserve Life Insurance Company of Wisconsin	39-0993433	WI	71013
Health Plan Real Estate Holding, Inc (17%)	46-2860967	MO	
Peach State Health Plan, Inc	20-3174593	GA	12315
Health Plan Real Estate Holding, Inc (21%)	46-2860967	MO	
Iowa Total Care, Inc	46-4829006	IA	15713
Buckeye Community Health Plan, Inc	32-0045282	OH	11834
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	
Physicians Choice, LLC	59-3807546	SC	
PhyTrust of South Carolina LLC	65-1206841	FL	
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
Superior HealthPlan, Inc	74-2770542	TX	95647
Health Plan Real Estate Holding, Inc (21%)	46-2860967	MO	
Healthy Louisiana Holdings LLC	27-0916294	DE	
Louisiana Healthcare Connections, Inc	27-1287287	LA	13970
Magnolia Health Plan Inc	20-8570212	MS	13923
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
Access Health Solutions LLC	56-2384404	FL	
Sunshine Consulting Services, Inc.	27-0242132	DE	
Kentucky Spirit Health Plan, Inc	45-1294925	KY	14100
Healthy Missouri Holding, Inc (95%)	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
Granite State Health Plan, Inc	45-4792498	NH	14226
Bridgeway Advantage Solutions, Inc	46-4195563	AZ	15447
California Health and Wellness Plan	46-0907261	CA	
Fidelis Secure Care of Michigan, Inc.	30-0312489	MI	
Centene Management Company LLC	39-1864073	WI	

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

15.1

	CMC Real Estate Co. LLC 20-0057283	DE	
	Centene Center LLC 26-4094682	DE	
	CMC Hanley, LLC 46-4234827	MO	
	Forhan, LLC 47-2914561	MO	
	Hanley-Forsyth, LLC 37-1766939	MO	
	GPT Acquisition LLC 45-5431787	DE	
	Clayton Property Investment LLC 45-4372065	DE	
LSM Holdco, Inc.	46-2794037	DE	
	Lifeshare Management Group, LLC 46-2798132	NH	
	Chopin Merger Sub I, Inc. Applied For	DE	
	Chopin Merger Sub II, Inc. Applied For	DE	
	Prefontaine Merger Sub, Inc. 47-3073377	DE	
CCTX Holdings, LLC	20-2074217	DE	
	Centene Company of Texas, LP (1%) 74-2810404	TX	
	Centene Holdings, LLC 20-2074277	DE	
	Centene Company of Texas, LP (99%) 74-2810404	TX	
	MHS Travel & Charter, Inc 43-1795436	WI	
LiveHealthier, Inc.	47-2516714	DE	
Envolve, Inc.	Applied For	DE	
	Centene Health Systems Group of New York 47-3454898	NY	
	Health Care Enterprises, LLC 46-4855483	DE	
	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	06-1404277	CT	
Worklife Innovations			
	Wellness By Choice, LLC 16-1686991	NY	
	Cenpatico Behavioral Health, LLC 68-0461584	CA	
	Cenpatico Behavioral Health of Texas, Inc 74-3018565	TX	12525
	Cenpatico of Louisiana, Inc. 45-2303998	LA	
	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
Cenpatico of Arizona Inc. (80%)	80-0879942	AZ	

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

15.2

	Cenpatico of Florida, Inc.	27-5349029	FL	
	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	
	OptiCare IPA of New York, Inc.	06-1635519	NY	
	Dental Health & Wellness, Inc	46-2783884	DE	
Celtic Group, Inc		36-2979209	DE	
	Celtic Insurance Company (75%)	06-0641618	IL	80799
	Ambetter of Magnolia Inc	35-2525384	MS	
	Ambetter of Peach State Inc.	36-4802632	GA	
	Novasys Health, Inc	27-2221367	DE	
	CeltiCare Health Plan Holdings LLC	26-4278205	DE	
	CeltiCare Health Plan of Massachusetts, Inc.	26-4818440	MA	13632
US Script, Inc		77-0578529	DE	
	LBB Industries, Inc	76-0511700	TX	
		75-2612875	TX	
RX Direct, Inc		46-2307356	NY	
US Script IPA, LLC		90-0636938	DE	
Casenet LLC				
	Casenet S.R.O. Foreign		Czech Rep.	
	Centurion Group, Inc	61-1450727	DE	
	Centurion LLC (51%)	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	
Indiana Partnership for Correctional Healthcare, LLC	Applied For		IN	
	Specialty Therapeutic Care Holdings, LLC	27-3617766	DE	
	Specialty Therapeutic Care, LP (99.99%)	73-1698808	TX	
	Specialty Therapeutic Care, GP, LLC	73-1698807	TX	
	Specialty Therapeutic Care, LP (0.01%)	73-1698808	TX	
Specialty Therapeutic Care West, LLC		26-2624521	TX	
	AcariaHealth Solutions, Inc.	80-0856383	DE	
	AcariaHealth, Inc.	45-2780334	DE	
	AcariaHealth Pharmacy #14, Inc	27-1599047	CA	

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

PART 1 - ORGANIZATIONAL CHART

	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
	New York Rx, Inc. 20-8235695	NY
	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
	Grace Hospice of Austin, LLC 20-2827613	MI
	ComfortBrook Hospice, LLC 20-1530070	OH
	Comfort Hospice of Texas, LLC 20-4996551	MI
	Grace Hospice of San Antonio, LLC 20-2827526	MI
	Grace Hospice of Grand Rapids, LLC 45-0679248	MI
	Grace Hospice of Indiana, LLC 45-0634905	MI
	Grace Hospice of Virginia, LLC 45-5080637	MI
	Comfort Hospice of Missouri, LLC 45-5080567	MI
	Grace Hospice of Colorado, LLC 45-5080675	MI
	Grace Hospice of Wisconsin, LLC 46-1708834	MI
	Seniorcorps Pensinsula, LLC 26-4435532	VA
	R&C Healthcare, LLC 33-1179031	TX
A N J, LLC	20-0927034	TX
	Pinnacle Senior Care of Missouri, LLC 46-0861469	MI
	Country Style Health Care, LLC 03-0556422	TX
	Phoenix Home Health Care, LLC 14-1878333	DE
	Traditional Home Health Services, LLC 75-2635025	TX
	Family Nurse Care, LLC 38-2751108	MI
	Family Nurse Care II, LLC 20-5108540	MI
	Family Nurse Care of Ohio, LLC 20-3920947	MI
	Pinnacle Senior Care of Wisconsin, LLC 46-4229858	WI
	Pinnacle Home Care, LLC 76-0713516	TX
	North Florida Health Services, Inc 59-3519060	FL
	Pinnacle Sr. Care of Kalamazoo, LLC 47-1742728	MI
	Hospice DME Company, LLC 46-1734288	MI
	Rapid Respiratory Services, LLC 20-4364776	DE
	USMM Accountable Care Network, LLC 46-5730959	DE
	USMM Accountable Care Partners, LLC 46-5735993	DE
	USMM Accountable Care Solutions, LLC 46-5745748	DE
	USMM ACO, LLC 45-4165480	MI
	USMM ACO Florida, LLC 45-4157180	MI
	USMM ACO North Texas, LLC 45-4154905	MI

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

MHS Consulting, International, Inc 20-8630006	DE
PRIMEROSALUD, S.L. Foreign	ESP
The Practice Plc Foreign	UK

STATEMENT AS OF JUNE 30, 2015 OF THE CELTIC INSURANCE COMPANY

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

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

STATEMENT AS OF JUNE 30, 2015 OF THE CELTIC INSURANCE COMPANY

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
01295.....	Centene Corporation.....	00000.....	86-0782736.....				CBHSP Arizona, Inc.....	AZ.....	NIA.....	Cenpatico Behavioral Health, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	47-2595704.....				Cenpatico of California, Inc.....	CA.....	NIA.....	Cenpatico Behavioral Health, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	74-2892993.....				Integrated Mental Health Mgmt, LLC.....	TX.....	NIA.....	Cenpatico Behavioral Health, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	74-2785494.....				Integrated Mental Health Services.....	TX.....	NIA.....	Cenpatico Behavioral Health, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	14704.....	20-1624120.....				Cenpatico Behavioral Health of Arizona, LLC.....	AZ.....	IA.....	Cenpatico Behavioral Health, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	20-4730341.....				OptiCare Managed Vision, Inc.....	DE.....	NIA.....	CenCorp Health Solutions, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	36-4520004.....				OptiCare Vision Insurance Co, Inc.....	SC.....	NIA.....	OptiCare Managed Vision, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	95302.....	75-2592153.....				AEOC Total Vision Health Plan of Texas, Inc.....	TX.....	IA.....	OptiCare Managed Vision, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	20-4773088.....				OptiCare Vision Company, Inc.....	DE.....	NIA.....	OptiCare Managed Vision, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	65-0094759.....				Ocucare Systems, Inc.....	FL.....	NIA.....	OptiCare Managed Vision, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	20-4861241.....				Total Vision, Inc.....	DE.....	NIA.....	OptiCare Managed Vision, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	46-2783884.....				Dental Health & Wellness, Inc.....	DE.....	NIA.....	CenCorp Health Solutions, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	46-4168814.....				Dental Health & Wellness of Louisiana, Inc.....	LA.....	NIA.....	Dental Health & Wellness, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	12315.....	20-3174593.....				Peach State Health Plan, Inc.....	GA.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	15713.....	46-4829006.....				Iowa Total Care, Inc.....	IA.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	11834.....	32-0045282.....				Buckeye Community Health Plan, Inc.....	OH.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	12959.....	20-5693998.....				Absolute Total Care, Inc.....	SC.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	95831.....	39-1821211.....				Coordinated Care Corporation d/b/a Managed Health Services.....	IN.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	46-5523218.....				Healthy Washington Holdings, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	15352.....	46-2578279.....				Coordinated Care of Washington, Inc.....	WA.....	IA.....	Healthy Washington Holdings, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	96822.....	39-1678579.....				Managed Health Services Insurance Corp.....	WI.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	60078.....	86-0819817.....				Hallmark Life Insurance Co.....	AZ.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	36-2979209.....				Celtic Group, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	80799.....	06-0641618.....				Celtic Insurance Company.....	IL.....	IA.....	Celtic Group, Inc.....	Ownership.....	75.0.....	Centene Corporation.....	

STATEMENT AS OF JUNE 30, 2015 OF THE CELTIC INSURANCE COMPANY

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
01295.....	Centene Corporation.....	00000.....	35-2525384.....				Ambetter of Magnolia Inc.....	MS.....	IA.....	Celtic Insurance Company.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	27-2221367.....				Novasys Health, Inc.....	DE.....	NIA.....	Celtic Group, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	26-4278205.....				CeltiCare Health Plan Holdings LLC.....	DE.....	NIA.....	Celtic Group, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	13632.....	26-4818440.....				CeltiCare Health Plan of Massachusetts, Inc.....	MA.....	IA.....	CeltiCare Health Plan Holdings LLC.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	95647.....	74-2770542.....				Superior HealthPlan, Inc.....	TX.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	27-0916294.....				Healthy Louisiana Holdings LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	13970.....	27-1287287.....				Louisiana Healthcare Connections, Inc.....	LA.....	IA.....	Healthy Louisiana Holdings LLC.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	46-2794037.....				LSM Holdco, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	46-2798132.....				Lifeshare Management Group, LLC.....	NH.....	NIA.....	LSM Holdco, Inc.....	Ownership.....	49.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	47-3073377.....				Prefontaine Merger Sub, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	13923.....	20-8570212.....				Magnolia Health Plan Inc.....	MS.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	20-2074217.....				CCTX Holdings, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	1.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	20-2074277.....				Centene Holdings, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	99.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	74-2810404.....				Centene Company of Texas, LP.....	TX.....	NIA.....	Centene Holdings, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	77-0578529.....				US Script, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	76-0511700.....				LBB Industries, Inc.....	TX.....	NIA.....	US Script, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	75-2612875.....				RX Direct, Inc.....	TX.....	NIA.....	US Script, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	46-2307356.....				US Script IPA, LLC.....	NY.....	NIA.....	US Script, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	14053.....	27-2186150.....				IlliniCare Health Plan, Inc.....	IL.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	26-0557093.....				Sunshine Health Holding LLC.....	FL.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	13148.....	20-8937577.....				Sunshine State Health Plan, Inc.....	FL.....	IA.....	Sunshine Health Holding LLC.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	14100.....	45-1294925.....				Kentucky Spirit Health Plan, Inc.....	KY.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	45-5070230.....				Healthy Missouri Holdings, Inc.....	MO.....	NIA.....	Centene Corporation.....	Ownership.....	95.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	14218.....	45-2798041.....				Home State Health Plan, Inc.....	MO.....	IA.....	Healthy Missouri Holdings, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	

STATEMENT AS OF JUNE 30, 2015 OF THE CELTIC INSURANCE COMPANY

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
01295.....	Centene Corporation.....	14345.....	45-3276702.....				Sunflower State Health Plan, Inc.....	KS.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	90-0636938.....				Casenet LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	82.2	Centene Corporation.....	
01295.....	Centene Corporation.....	14226.....	45-4792498.....				Granite State Health Plan, Inc.....	NH.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	61-1450727.....				Centurion Group, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	90-0766502.....				Centurion LLC.....	DE.....	NIA.....	Centurion Group, Inc.....	Ownership.....	51.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	47-1577742.....				Centurion of Virginia, LLC.....	VA.....	NIA.....	Centurion LLC.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	47-1686283.....				Centurion of Vermont, LLC.....	VT.....	NIA.....	Centurion LLC.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	47-1229365.....				Centurion of Pennsylvania, LLC.....	PA.....	NIA.....	Centurion LLC.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	47-2967381.....				Centurion of Mississippi, LLC.....	MS.....	NIA.....	Centurion LLC.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	30-0752651.....				Centurion of Tennessee, LLC.....	TN.....	NIA.....	Centurion LLC.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	61-1696004.....				Massachusetts Partnership for Correctional Healthcare, LLC.....	MA.....	NIA.....	Centurion LLC.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	46-3590120.....				Centurion of Idaho, LLC.....	ID.....	NIA.....	Centurion LLC.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	46-1041008.....				Centurion of Michigan, LLC.....	MI.....	NIA.....	Centurion LLC.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	46-2717814.....				Centurion of Minnesota, LLC.....	MN.....	NIA.....	Centurion LLC.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	46-4102134.....				Centurion of Missouri, LLC.....	MO.....	NIA.....	Centurion LLC.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	46-4839132.....				Centurion of West Virginia, LLC.....	WV.....	NIA.....	Centurion LLC.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	43-1795436.....				MHS Travel & Charter, Inc.....	WI.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	47-2516714.....				LH Acquisition.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	46-4855483.....				Health Care Enterprises, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	46-0907261.....				California Health and Wellness Plan.....	CA.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	15447.....	46-4195563.....				Bridgeway Advantage Solutions, Inc.....	AZ.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	27-3617766.....				Specialty Therapeutic Care Holdings, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	73-1698807.....				Specialty Therapeutic Care, GP, LLC.....	TX.....	NIA.....	Specialty Therapeutic Care Holdings, LLC.....	Ownership.....	100.0	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	73-1698808.....				Specialty Therapeutic Care, LP.....	TX.....	NIA.....	Specialty Therapeutic Care Holdings, LLC.....	Ownership.....	100.0	Centene Corporation.....	

STATEMENT AS OF JUNE 30, 2015 OF THE CELTIC INSURANCE COMPANY

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

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01295.....	Centene Corporation.....	00000.....	45-2780334.....				AcariaHealth, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	27-1599047.....	.....	.....	.....	AcariaHealth Pharmacy #14, Inc.....	CA.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	20-8192615.....	.....	.....	.....	AcariaHealth Pharmacy #11, Inc.....	TX.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	27-2765424.....	.....	.....	.....	AcariaHealth Pharmacy #12, Inc.....	NY.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	27-3707698.....	.....	.....	.....	HomeScripts.com, LLC.....	MI.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	26-0226900.....	.....	.....	.....	AcariaHealth Pharmacy #13, Inc.....	CA.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	13-4262384.....	.....	.....	.....	AcariaHealth Pharmacy, Inc.....	CA.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....	.....	.....	.....	Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Home State Health Plan, Inc.....	Ownership.....	5.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....	.....	.....	.....	Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Absolute Total Care, Inc.....	Ownership.....	1.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....	.....	.....	.....	Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Peach State Health Plan, Inc.....	Ownership.....	21.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....	.....	.....	.....	Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Superior HealthPlan, Inc.....	Ownership.....	21.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....	.....	.....	.....	Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	IlliniCare Health Plan, Inc.....	Ownership.....	5.0.....	Centene Corporation.....	.....
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.....	.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....	.....	.....	.....	Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Managed Health Services Insurance Corp.....	Ownership.....	2.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....	.....	.....	.....	Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Buckeye Community Health Plan, Inc.....	Ownership.....	13.0.....	Centene Corporation.....	.....
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.....	.....
01295.....	Centene Corporation.....	00000.....	27-0275614.....	.....	.....	.....	U.S. Medical Management Holdings, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	38-3153946.....	.....	.....	.....	U.S. Medical Management, LLC.....	DE.....	NIA.....	U.S. Medical Management Holdings, Inc.....	Ownership.....	20.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	38-3153946.....	.....	.....	.....	U.S. Medical Management, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	48.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	31-1733889.....	.....	.....	.....	RMED, LLC.....	FL.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	47-2138680.....	.....	.....	.....	IAH of Florida LLC.....	FL.....	NIA.....	RMED, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	51-0581762.....	.....	.....	.....	Heritage Home Hospice, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	20-4364776.....	.....	.....	.....	Rapid Respiratory Services, LLC.....	DE.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....

STATEMENT AS OF JUNE 30, 2015 OF THE CELTIC INSURANCE COMPANY

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

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01295.....	Centene Corporation.....	00000.....	20-2827613.....				Grace Hospice of Austin, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	
01295.....	Centene Corporation.....	00000.....	26-4435532.....	.....	.....	.....	Seniorcorps Pensinsula, LLC.....	VA.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	20-1530070.....	.....	.....	.....	ComfortBrook Hospice, LLC.....	OH.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	33-1179031.....	.....	.....	.....	R&C Healthcare, LLC.....	TX.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	20-4996551.....	.....	.....	.....	Comfort Hospice of Texas, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	20-0927034.....	.....	.....	.....	A N J, LLC.....	TX.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	20-2827526.....	.....	.....	.....	Grace Hospice of San Antonio, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	46-0861469.....	.....	.....	.....	Pinnacle Senior Care of Missouri, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	45-0679248.....	.....	.....	.....	Grace Hospice of Grand Rapids, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	03-0556422.....	.....	.....	.....	Country Style Health Care, LLC.....	TX.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	45-0634905.....	.....	.....	.....	Grace Hospice of Indiana, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	14-1878333.....	.....	.....	.....	Phoenix Home Health Care, LLC.....	DE.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	45-5080637.....	.....	.....	.....	Grace Hospice of Virginia, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	75-2635025.....	.....	.....	.....	Traditional Home Health Services, LLC.....	TX.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	45-5080567.....	.....	.....	.....	Comfort Hospice of Missouri, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	38-2751108.....	.....	.....	.....	Family Nurse Care, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	45-5080675.....	.....	.....	.....	Grace Hospice of Colorado, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	20-5108540.....	.....	.....	.....	Family Nurse Care II, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	46-1708834.....	.....	.....	.....	Grace Hospice of Wisconsin, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	20-3920947.....	.....	.....	.....	Family Nurse Care of Ohio, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	46-1734288.....	.....	.....	.....	Hospice DME Company, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	46-4229858.....	.....	.....	.....	Pinnacle Senior Care of Wisconsin, LLC.....	WI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	76-0713516.....	.....	.....	.....	Pinnacle Home Care, LLC.....	TX.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....
01295.....	Centene Corporation.....	00000.....	45-4165480.....	.....	.....	.....	USMM Accountable Care Network, LLC.....	DE.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	.....

16.6

PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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?

.....NO.....

Explanation:

1.

Bar Code:

1.



STATEMENT AS OF JUNE 30, 2015 OF THE CELTIC INSURANCE COMPANY

OVERFLOW PAGE FOR WRITE-INS

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

	1 Covered	2 Uncovered	3 Total	4 Total
2304. Outstanding Check Liability.....	335,100		335,100	400,858
2305. State Income Tax Payable.....	507,628		507,628	0
2306. Asset Valuation Reserve.....			0	420,000
2397. Summary of remaining write-ins for Line 23 from Page 03	842,728	0	842,728	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. Commission and Expense for Reins. Ceded.....			0	771,122
2997. Summary of remaining write-ins for Line 29 from Page 04	0	0	0	771,337

SCHEDULE A – VERIFICATION

Real Estate

	1	2
	Year To Date	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

SCHEDULE B – VERIFICATION

Mortgage Loans

	1	2
	Year To Date	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

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year To Date	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	210,000	307,500
3. Capitalized deferred interest and other		.0
4. Accrual of discount		.0
5. Unrealized valuation increase (decrease)	8,187	341,399
6. Total gain (loss) on disposals		.0
7. Deduct amounts received on disposals		217,168
8. Deduct amortization of premium and depreciation		.0
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)	1,269,940	1,051,753
12. Deduct total nonadmitted amounts	.0	.0
13. Statement value at end of current period (Line 11 minus Line 12)	1,269,940	1,051,753

SCHEDULE D – VERIFICATION

Bonds and Stocks

	1	2
	Year To Date	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	33,743,155	15,552,450
3. Accrual of discount	14,569	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	7,874,449	35,958,212
7. Deduct amortization of premium	215,778	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)	66,714,722	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)	66,169,722	40,442,225

STATEMENT AS OF JUNE 30, 2015 OF THE CELTIC INSURANCE COMPANY

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).....	74,023,058	37,321,356	50,435,387	(64,150)	74,023,058	60,844,877	0	93,709,005
2. NAIC 2 (a).....	9,407,575	1,775,520		(70,554)	9,407,575	11,112,541	0	6,976,029
3. NAIC 3 (a).....	0				0	0	0	0
4. NAIC 4 (a).....	1,045,000				1,045,000	1,045,000	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	84,475,633	39,096,876	50,435,387	(134,704)	84,475,633	73,002,418	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	84,475,633	39,096,876	50,435,387	(134,704)	84,475,633	73,002,418	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 \$2,257,686 ; NAIC 2 \$;

NAIC 3 \$; NAIC 4 \$; NAIC 5 \$; NAIC 6 \$

SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
9199999	9,172,697	XXX	9,172,697	10,378	

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year To Date	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	63,202,246	92,214,681
3. Accrual of discount		0
4. Unrealized valuation increase (decrease).....		0
5. Total gain (loss) on disposals	(124)	0
6. Deduct consideration received on disposals	112,372,194	36,216,238
7. Deduct amortization of premium.....	40	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).....	9,172,697	58,342,809
11. Deduct total nonadmitted amounts.....		0
12. Statement value at end of current period (Line 10 minus Line 11)	9,172,697	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	47,400,000	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	49,900,000	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

STATEMENT AS OF JUNE 30, 2015 OF THE CELTIC INSURANCE COMPANY

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	City	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, Partnership or Limited Liability Company Interests that have the Underlying Characteristics - Other - Unaffiliated												
.000000-00-0-	HLM Venture Partners III, L.P.	Boston	Massachusetts	Vicent J. Fabiani		.02/10/2010	1		165,000		97,500	
21999999 - Joint,	Partnership or Limited Liability Company Interests that have the Underlying Characteristics - Other - Unaffiliated											
								0	165,000	0	97,500	XXX
44999999 – Subtotals - Unaffiliated								0	165,000	0	97,500	XXX
45999999 – Subtotals - Affiliated								0	0	0	0	XXX
46999999 Totals								0	165,000	0	97,500	XXX

SCHEDULE BA - PART 3

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

[illegible]

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STATEMENT AS OF JUNE 30, 2015 OF THE CELTIC INSURANCE COMPANY

SCHEDULE D - PART 3

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

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator ^(a)
Bonds - U.S. Governments									
000000-00-0									
Bonds - U.S. Political Subdivisions of States, Territories and Possessions									
613340-S9-0	MONTGOMERY CNTY MD VAR IMPT B RMKT		05/15/2015	JP Morgan Chase		100,000	100,000	3	1FE
649726-CN-2	NEW YORK CITY NY MUNI WTR FINA REG		04/28/2015	JP Morgan Chase		700,000	700,000	17	1FE
2499999 - Bonds - U.S. Political Subdivisions of States, Territories and Possessions						800,000	800,000	20	XXX
Bonds - U.S. Special Revenue									
01757L-FE-1	ALLEN CNTY OH HOSP FACS REVENU REG		04/23/2015	JP Morgan Chase		740,000	740,000		1FE
603786-BF-0	MINNEAPOLIS MN REV UNIV GATEWAY		05/18/2015	Wells Fargo		700,000	700,000	35	1FE
64966L-CJ-8	NEW YORK NY REGD V/R B/E		06/02/2015	JP Morgan Chase		200,000	200,000		1FE
649716-7T-8	NEW YORK, NY CITY TRANS FIN		05/04/2015	Morgan Stanley		100,000	100,000	1	1FE
914455-MB-3	UNIV OF MICHIGAN MI REGD V/R B/E		06/18/2015	Wells Fargo		150,000	150,000	2	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						1,890,000	1,890,000	38	XXX
Bonds - Industrial and Miscellaneous (Unaffiliated)									
00507U-AM-3	ACTAVIS FUNDING SCS REGD		04/16/2015	VENDOR CODE J.P. NOT IN TABLE		294,512	290,000	738	2FE
00206R-CL-4	AT&T INC REGD		04/23/2015	JP Morgan Chase		729,628	730,000		2FE
05464P-AG-7	AXIS EQUIPMENT FINANCE RECEIVABLES		04/16/2015	Wells Fargo		189,989	190,000		1FE
05522R-CU-0	BA CREDIT CARD TRUST SER 2015-A2 C		04/22/2015	Merrill Lynch		539,935	540,000		1FE
06051G-EA-3	BANK OF AMERICA CORP 6.5%		04/30/2015	Merrill Lynch		681,171	640,000	10,862	1FE
12189P-AF-9	BURLINGTN NO SF 99-2 TR REGD SER 9		04/16/2015	Citigroup Global Markets		295,327	257,928	5,912	1FE
172967-JE-2	CITIGROUP INC REGD		05/19/2015	Morgan Stanley		412,759	410,000	3,729	1FE
46625H-JA-9	JP MORGAN CHASE & CO 3.15%		04/30/2015	Wells Fargo		1,251,317	1,220,000	12,810	1FE
49327M-2H-6	KEY BANK NA REGD		05/27/2015	Goldman Sachs & Co		299,676	300,000		1FE
61761J-VM-8	MORGAN STANLEY REGD		04/28/2015	JP Morgan Chase		744,100	740,000	5,627	1FE
780099-CG-0	ROYAL BANK OF SCOTLAND GRP PLC	F	04/30/2015	JP Morgan Chase		751,380	750,000	1,367	2FE
3899999 - Bonds - Industrial and Miscellaneous (Unaffiliated)						6,189,794	6,067,928	41,045	XXX
8399997 - Subtotals - Bonds - Part 3						8,879,794	8,757,928	41,103	XXX
8399999 - Subtotals - Bonds						8,879,794	8,757,928	41,103	XXX
9999999 Totals						8,879,794	XXX	41,103	XXX

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

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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

STATEMENT AS OF JUNE 30, 2015 OF THE CELTIC INSURANCE COMPANY

SCHEDULE E - PART 1 - CASH

[illegible]

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