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# QUARTERLY STATEMENT

**AS OF MARCH 31, 2020**

OF THE CONDITION AND AFFAIRS OF THE

## QualChoice Life and Health Insurance Company, Inc.

| NAIC Group Code | 01295 (Current Period) | 01295 (Prior Period) | NAIC Company Code | 70998 | Employer's ID Number | 71-0386640 |
|---|---|---|---|---|---|---|

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

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 10/17/1992 Commenced Business 04/25/1965

Statutory Home Office 1 Allied Drive Suite 2520 (Street and Number), Little Rock, AR, US 72202 (City or Town, State, Country and Zip Code)

Main Administrative Office 7700 Forsyth Blvd (Street and Number) Saint Louis, MO, US 63105 (City or Town, State, Country and Zip Code) 314-725-4477 (Area Code) (Telephone Number)

Mail Address 7700 Forsyth Blvd (Street and Number or P.O. Box), Saint Louis, MO, US 63105 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 7700 Forsyth Blvd (Street and Number) Saint Louis, MO, US 63105 (City or Town, State, Country and Zip Code) 314-725-4477 (Area Code) (Telephone Number)

Internet Web Site Address www.qualchoice.com

Statutory Statement Contact Craig Alles (Name) 314-519-1232 (Area Code) (Telephone Number) (Extension)

craig.l.alles@centene.com (E-Mail Address) 314-725-4658 (FAX Number)

## OFFICERS

| Name | Title | Name | Title |
|---|---|---|---|
| John P. Ryan # | President | Thomas P. Wise # | Vice President |
| Jeffrey A. Schwaneke # | Treasurer | Tricia L. Dinkelman # | Vice President of Tax |

## OTHER OFFICERS

| | | | |
|---|---|---|---|
| Keith H. Williamson # | Secretary | | |
| | | | |

## DIRECTORS OR TRUSTEES

| | | | |
|---|---|---|---|
| Thomas P. Wise # | Jeffrey A. Schwaneke # | Keith H. Williamson # | John P. Ryan # |

State of .....

County of ..... 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.

| John P. Ryan | Thomas P. Wise | Jeffrey A. Schwaneke |
|---|---|---|
| President | Vice President | Treasurer |

Subscribed and sworn to before me this
_____ day of _____, _____

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

# ASSETS

| | Current Statement Date | | | 4 |
|---|---|---|---|---|
| | 1 | 2 | 3 | |
| | Assets | Nonadmitted Assets | Net Admitted Assets (Cols. 1 - 2) | December 31 Prior Year Net Admitted Assets |
| 1. Bonds | 3,277,897 | | 3,277,897 | 3,280,903 |
| 2. Stocks: | | | | |
| 2.1 Preferred stocks | | | 0 | 0 |
| 2.2 Common stocks | | | 0 | 0 |
| 3. Mortgage loans on real estate: | | | | |
| 3.1 First liens | | | 0 | 0 |
| 3.2 Other than first liens | | | 0 | 0 |
| 4. Real estate: | | | | |
| 4.1 Properties occupied by the company (less $ encumbrances) | | | 0 | 0 |
| 4.2 Properties held for the production of income (less $ encumbrances) | | | 0 | 0 |
| 4.3 Properties held for sale (less $ encumbrances) | | | 0 | 0 |
| 5. Cash ($ 9,265,924 ), cash equivalents ($ 56,681,648 ) and short-term investments ($ 0 ) | 65,947,572 | | 65,947,572 | 31,160,311 |
| 6. Contract loans (including $ premium notes) | | | 0 | 0 |
| 7. Derivatives | 0 | | 0 | 0 |
| 8. Other invested assets | 0 | | 0 | 0 |
| 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) | 69,225,469 | 0 | 69,225,469 | 34,441,214 |
| 13. Title plants less $ charged off (for Title insurers only) | | | 0 | 0 |
| 14. Investment income due and accrued | 84,307 | | 84,307 | 53,337 |
| 15. Premiums and considerations: | | | | |
| 15.1 Uncollected premiums and agents' balances in the course of collection | 936,951 | | 936,951 | 824,261 |
| 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including $ earned but unbilled premiums) | 0 | | 0 | 0 |
| 15.3 Accrued retrospective premiums ($ 1,971,499 ) and contracts subject to redetermination ($ ) | 1,971,499 | | 1,971,499 | 0 |
| 16. Reinsurance: | | | | |
| 16.1 Amounts recoverable from reinsurers | | | 0 | 211,351 |
| 16.2 Funds held by or deposited with reinsured companies | | | 0 | 0 |
| 16.3 Other amounts receivable under reinsurance contracts | | | 0 | 0 |
| 17. Amounts receivable relating to uninsured plans | | | 0 | 0 |
| 18.1 Current federal and foreign income tax recoverable and interest thereon | | | 0 | 2,637,454 |
| 18.2 Net deferred tax asset | | | 0 | 0 |
| 19. Guaranty funds receivable or on deposit | | | 0 | 0 |
| 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 | 1,724,336 | | 1,724,336 | 20,200,110 |
| 24. Health care ($ 1,888,527 ) and other amounts receivable | 3,596,965 | 1,708,438 | 1,888,527 | 1,659,751 |
| 25. Aggregate write-ins for other-than-invested assets | 17,105,082 | 77,340 | 17,027,742 | 11,801,706 |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) | 94,644,609 | 1,785,778 | 92,858,831 | 71,829,184 |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | 0 | 0 |
| 28. Total (Lines 26 and 27) | 94,644,609 | 1,785,778 | 92,858,831 | 71,829,184 |
| **DETAILS OF WRITE-INS** | | | | |
| 1101. | | | 0 | 0 |
| 1102. | | | | |
| 1103. | | | | |
| 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. Insurance Charter | 75,000 | 75,000 | 0 | 0 |
| 2502. CSR Cost Sharing Receivable | 16,996,480 | | 16,996,480 | 11,524,816 |
| 2503. State Income Tax Recoverable | 31,050 | | 31,050 | 276,890 |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | 2,552 | 2,340 | 212 | 0 |
| 2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) | 17,105,082 | 77,340 | 17,027,742 | 11,801,706 |

# LIABILITIES, CAPITAL AND SURPLUS

| | Current Period | | | Prior Year |
|---|---|---|---|---|
| | 1<br>Covered | 2<br>Uncovered | 3<br>Total | 4<br>Total |
| 1. Claims unpaid (less $ ..... reinsurance ceded) | 25,865,043 | | 25,865,043 | 17,368,301 |
| 2. Accrued medical incentive pool and bonus amounts | 307,391 | | 307,391 | 0 |
| 3. Unpaid claims adjustment expenses | 345,221 | | 345,221 | 370,186 |
| 4. Aggregate health policy reserves including the liability of $ ..... for medical loss ratio rebate per the Public Health Service Act | 19,692,731 | | 19,692,731 | 24,326,046 |
| 5. Aggregate life policy reserves | | | 0 | 0 |
| 6. Property/casualty unearned premium reserve | | | 0 | 0 |
| 7. Aggregate health claim reserves | | | 0 | 0 |
| 8. Premiums received in advance | 78,670 | | 78,670 | 0 |
| 9. General expenses due or accrued | 1,851,668 | | 1,851,668 | 1,656,777 |
| 10.1 Current federal and foreign income tax payable and interest thereon (including $ ..... on realized gains (losses)) | 1,287,081 | | 1,287,081 | 0 |
| 10.2 Net deferred tax liability | | | 0 | 0 |
| 11. Ceded reinsurance premiums payable | | | 0 | 0 |
| 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 | 13,025,686 | | 13,025,686 | 6,446,503 |
| 16. Derivatives | | | 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) | | | 0 | 0 |
| 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) | 2,496,193 | 0 | 2,496,193 | 0 |
| 24. Total liabilities (Lines 1 to 23) | 64,949,684 | 0 | 64,949,684 | 50,167,813 |
| 25. Aggregate write-ins for special surplus funds | XXX | XXX | 0 | 2,463,683 |
| 26. Common capital stock | XXX | XXX | 1,013,750 | 1,013,750 |
| 27. Preferred capital stock | XXX | XXX | 1,500,000 | 1,500,000 |
| 28. Gross paid in and contributed surplus | XXX | XXX | 48,680,395 | 48,680,395 |
| 29. Surplus notes | XXX | XXX | | 0 |
| 30. Aggregate write-ins for other-than-special surplus funds | XXX | XXX | 0 | 0 |
| 31. Unassigned funds (surplus) | XXX | XXX | (23,284,997) | (31,996,457) |
| 32. Less treasury stock, at cost:<br>32.1 ..... shares common (value included in Line 26 $ ..... )<br>32.2 ..... shares preferred (value included in Line 27 $ ..... ) | XXX<br>XXX | XXX<br>XXX | | 0<br>0 |
| 33. Total capital and surplus (Lines 25 to 31 minus Line 32) | XXX | XXX | 27,909,148 | 21,661,371 |
| 34. Total liabilities, capital and surplus (Lines 24 and 33) | XXX | XXX | 92,858,832 | 71,829,184 |
| **DETAILS OF WRITE-INS** | | | | |
| 2301. Rounding | | | 0 | 0 |
| 2302. Health Insurer Fee | 2,463,683 | | 2,463,683 | |
| 2303. State Tax Payable | 32,510 | | 32,510 | |
| 2398. Summary of remaining write-ins for Line 23 from overflow page | 0 | 0 | 0 | 0 |
| 2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above) | 2,496,193 | 0 | 2,496,193 | 0 |
| 2501. ACA Section 9010 Assessment | XXX | XXX | | 0 |
| 2502. Health Insurer Fee | XXX | XXX | 0 | 2,463,683 |
| 2503. | XXX | XXX | | |
| 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 | 0 | 2,463,683 |
| 3001. | XXX | XXX | | 0 |
| 3002. | XXX | XXX | | |
| 3003. | XXX | XXX | | |
| 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<br>Uncovered | 2<br>Total | 3<br>Total | 4<br>Total |
| 1. | Member Months | XXX | 107,876 | 87,781 | 392,319 |
| 2. | Net premium income (including $ non-health premium income) | XXX | 46,898,492 | 32,853,247 | 142,410,805 |
| 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 | 7,771 | 22,500 |
| 8. | Total revenues (Lines 2 to 7) | XXX | 46,898,492 | 32,861,018 | 142,433,305 |
| **Hospital and Medical:** | | | | | |
| 9. | Hospital/medical benefits | | 20,512,829 | 20,405,476 | 80,241,784 |
| 10. | Other professional services | | 153,201 | 0 | 0 |
| 11. | Outside referrals | | | 0 | 0 |
| 12. | Emergency room and out-of-area | | 3,689,490 | 2,672,420 | 22,336,821 |
| 13. | Prescription drugs | | 5,877,709 | 5,133,961 | 21,391,033 |
| 14. | Aggregate write-ins for other hospital and medical | 0 | 0 | 0 | 0 |
| 15. | Incentive pool, withhold adjustments and bonus amounts | | 307,391 | 0 | 0 |
| 16. | Subtotal (Lines 9 to 15) | 0 | 30,540,620 | 28,211,857 | 123,969,638 |
| **Less:** | | | | | |
| 17. | Net reinsurance recoveries | | (196,351) | 17,649 | 453,053 |
| 18. | Total hospital and medical (Lines 16 minus 17) | 0 | 30,736,971 | 28,194,208 | 123,516,585 |
| 19. | Non-health claims (net) | | | 0 | 0 |
| 20. | Claims adjustment expenses, including $ cost containment expenses | | (24,965) | 1,061,498 | 3,825,194 |
| 21. | General administrative expenses | | 13,021,915 | 3,805,335 | 26,494,887 |
| 22. | Increase in reserves for life and accident and health contracts (including $ increase in reserves for life only) | | (3,967,995) | 0 | 15,871,980 |
| 23. | Total underwriting deductions (Lines 18 through 22) | 0 | 39,765,926 | 33,061,041 | 169,708,646 |
| 24. | Net underwriting gain or (loss) (Lines 8 minus 23) | XXX | 7,132,566 | (200,023) | (27,275,341) |
| 25. | Net investment income earned | | 346,105 | 303,359 | 670,740 |
| 26. | Net realized capital gains (losses) less capital gains tax of $ | | | (33,972) | (28,057) |
| 27. | Net investment gains (losses) (Lines 25 plus 26) | 0 | 346,105 | 269,387 | 642,683 |
| 28. | Net gain or (loss) from agents' or premium balances charged off [(amount recovered $ ) (amount charged off $ )] | | | 0 | 0 |
| 29. | Aggregate write-ins for other income or expenses | 0 | 0 | 0 | (1,298,836) |
| 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 | 7,478,671 | 69,364 | (27,931,494) |
| 31. | Federal and foreign income taxes incurred | XXX | 1,117,093 | 1,177,458 | (1,696,365) |
| 32. | Net income (loss) (Lines 30 minus 31) | XXX | 6,361,578 | (1,108,094) | (26,235,129) |
| | **DETAILS OF WRITE-INS** | | | | |
| 0601. | | XXX | | | |
| 0602. | | XXX | | | |
| 0603. | | XXX | | | |
| 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. | Commission on Life Product | XXX | | 7,771 | 22,500 |
| 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 | 7,771 | 22,500 |
| 1401. | | | | | |
| 1402. | | | | | |
| 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. | | | | | |
| 2902. | Change in deferred tax | | | | (1,298,836) |
| 2903. | | | | | |
| 2998. | Summary of remaining write-ins for Line 29 from overflow page | 0 | 0 | 0 | 0 |
| 2999. | Totals (Lines 2901 through 2903 plus 2998) (Line 29 above) | 0 | 0 | 0 | (1,298,836) |

# STATEMENT OF REVENUE AND EXPENSES (Continued)

| | | 1<br>Current Year To Date | 2<br>Prior Year To Date | 3<br>Prior Year Ended December 31 |
|---|---|---|---|---|
| | **CAPITAL & SURPLUS ACCOUNT** | | | |
| 33. | Capital and surplus prior reporting year | 21,661,371 | 50,908,495 | 50,908,493 |
| 34. | Net income or (loss) from Line 32 | 6,361,578 | (1,108,094) | (26,235,129) |
| 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 $ | 22,485 | 0 | 0 |
| 37. | Change in net unrealized foreign exchange capital gain or (loss) | | 0 | 0 |
| 38. | Change in net deferred income tax | | 10,663 | (266,972) |
| 39. | Change in nonadmitted assets | (136,289) | (7,612) | (683,724) |
| 40. | Change in unauthorized and certified reinsurance | 0 | 0 | 0 |
| 41. | Change in treasury stock | 0 | 0 | 0 |
| 42. | Change in surplus notes | 0 | 0 | (5,000,000) |
| 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 | 34,200,000 |
| | 45.2 Transferred to capital (Stock Dividend) | 0 | 0 | 0 |
| | 45.3 Transferred from capital | | 0 | 0 |
| 46. | Dividends to stockholders | | 0 | (31,056,811) |
| 47. | Aggregate write-ins for gains or (losses) in surplus | 0 | 0 | (204,486) |
| 48. | Net change in capital and surplus (Lines 34 to 47) | 6,247,774 | (1,105,043) | (29,247,122) |
| 49. | Capital and surplus end of reporting period (Line 33 plus 48) | 27,909,145 | 49,803,452 | 21,661,371 |
| | **DETAILS OF WRITE-INS** | | | |
| 4701. | rounding | | 0 | 0 |
| 4702. | Tax Receivable at Sale | | | (204,486) |
| 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 | 0 | (204,486) |

# CASH FLOW

| | 1<br>Current Year<br>To Date | 2<br>Prior Year<br>To Date | 3<br>Prior Year Ended<br>December 31 |
|---|---|---|---|
| **Cash from Operations** | | | |
| 1. Premiums collected net of reinsurance | 40,259,658 | 34,061,147 | 160,916,416 |
| 2. Net investment income | 315,135 | 422,088 | 754,706 |
| 3. Miscellaneous income | 0 | (34,419) | 22,500 |
| 4. Total (Lines 1 to 3) | 40,574,793 | 34,448,816 | 161,693,622 |
| 5. Benefit and loss related payments | 23,585,540 | 27,364,260 | 141,518,608 |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts | | 0 | 0 |
| 7. Commissions, expenses paid and aggregate write-ins for deductions | (14,968,081) | 4,277,538 | 26,037,698 |
| 8. Dividends paid to policyholders | | 0 | 0 |
| 9. Federal and foreign income taxes paid (recovered) net of $ tax on capital gains (losses) | (2,807,442) | 1,990,946 | 1,780,728 |
| 10. Total (Lines 5 through 9) | 5,810,017 | 33,632,744 | 169,337,034 |
| 11. Net cash from operations (Line 4 minus Line 10) | 34,764,776 | 816,072 | (7,643,412) |
| **Cash from Investments** | | | |
| 12. Proceeds from investments sold, matured or repaid: | | | |
| 12.1 Bonds | 0 | 23,025,331 | 24,630,792 |
| 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 | 0 |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments | 0 | 0 | 2 |
| 12.7 Miscellaneous proceeds | 22,485 | 0 | 0 |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7) | 22,485 | 23,025,331 | 24,630,794 |
| 13. Cost of investments acquired (long-term only): | | | |
| 13.1 Bonds | 0 | 345,985 | 3,627,750 |
| 13.2 Stocks | 0 | 0 | 0 |
| 13.3 Mortgage loans | 0 | 0 | 0 |
| 13.4 Real estate | 0 | 0 | 0 |
| 13.5 Other invested assets | 0 | 0 | 0 |
| 13.6 Miscellaneous applications | 0 | 0 | 1,540 |
| 13.7 Total investments acquired (Lines 13.1 to 13.6) | 0 | 345,985 | 3,629,290 |
| 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) | 22,485 | 22,679,346 | 21,001,504 |
| **Cash from Financing and Miscellaneous Sources** | | | |
| 16. Cash provided (applied): | | | |
| 16.1 Surplus notes, capital notes | 0 | 0 | (5,000,000) |
| 16.2 Capital and paid in surplus, less treasury stock | 18,400,000 | 0 | 15,800,000 |
| 16.3 Borrowed funds | 0 | 0 | 0 |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities | | 0 | 0 |
| 16.5 Dividends to stockholders | 0 | 0 | 31,056,811 |
| 16.6 Other cash provided (applied) | (18,400,000) | (157,499) | 0 |
| 17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) | 0 | (157,499) | (20,256,811) |
| **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) | 34,787,261 | 23,337,919 | (6,898,719) |
| 19. Cash, cash equivalents and short-term investments: | | | |
| 19.1 Beginning of year | 31,160,311 | 38,059,030 | 38,059,030 |
| 19.2 End of period (Line 18 plus Line 19.1) | 65,947,572 | 61,396,949 | 31,160,311 |

# 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 | 36,483 | 21,593 | 11,362 | 2,520 | 0 | 0 | 0 | 0 | 0 | 1,008 |
| 2. First Quarter | 38,741 | 25,419 | 9,887 | 2,467 | 0 | 0 | 0 | 0 | 0 | 968 |
| 3. Second Quarter | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4. Third Quarter | 0 | | | | | | | | | |
| 5. Current Year | 0 | | | | | | | | | |
| 6. Current Year Member Months | 110,841 | 69,819 | 30,612 | 7,445 | | | | | | 2,965 |
| Total Member Ambulatory Encounters for Period: | | | | | | | | | | |
| 7. Physician | 32,670 | 4,096 | 19,421 | 9,153 | | | | | | |
| 8. Non-Physician | 47,417 | 1,558 | 41,176 | 4,683 | | | | | | |
| 9. Total | 80,087 | 5,654 | 60,597 | 13,836 | 0 | 0 | 0 | 0 | 0 | 0 |
| 10. Hospital Patient Days Incurred | 907 | 6 | 405 | 496 | | | | | | |
| 11. Number of Inpatient Admissions | 204 | 3 | 121 | 80 | | | | | | |
| 12. Health Premiums Written (a) | 46,851,889 | 33,530,840 | 11,685,639 | 1,307,432 | | | | | | 327,978 |
| 13. Life Premiums Direct | 46,604 | | 46,604 | | | | | | | |
| 14. Property/Casualty Premiums Written | 0 | | | | | | | | | |
| 15. Health Premiums Earned | 46,898,493 | 33,530,840 | 11,732,243 | 1,307,432 | | | | | | 327,978 |
| 16. Property/Casualty Premiums Earned | 0 | | | | | | | | | |
| 17. Amount Paid for Provision of Health Care Services | 35,575,177 | 26,688,576 | 7,419,411 | 1,167,244 | | | | | | 299,946 |
| 18. Amount Incurred for Provision of Health Care Services | 30,540,619 | 19,749,355 | 9,548,381 | 942,937 | | | | | | 299,946 |

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

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

**Aging Analysis of Unpaid Claims**

| 1<br>Account | 2<br>1 - 30 Days | 3<br>31 - 60 Days | 4<br>61 - 90 Days | 5<br>91 - 120 Days | 6<br>Over 120 Days | 7<br>Total |
|---|---|---|---|---|---|---|
| Claims unpaid (Reported) | | | | | | |
| 0199999 Individually listed claims unpaid | 0 | 0 | 0 | 0 | 0 | 0 |
| 0299999 Aggregate accounts not individually listed-uncovered | | | | | | 0 |
| 0399999 Aggregate accounts not individually listed-covered | 537,263 | 99,712 | 66,780 | 65,210 | 196,329 | 965,293 |
| 0499999 Subtotals | 537,263 | 99,712 | 66,780 | 65,210 | 196,329 | 965,293 |
| 0599999 Unreported claims and other claim reserves | XXX | XXX | XXX | XXX | XXX | 24,899,749 |
| 0699999 Total amounts withheld | XXX | XXX | XXX | XXX | XXX | |
| 0799999 Total claims unpaid | XXX | XXX | XXX | XXX | XXX | 25,865,043 |
| 0899999 Accrued medical incentive pool and bonus amounts | XXX | XXX | XXX | XXX | XXX | 307,391 |

# UNDERWRITING AND INVESTMENT EXHIBIT

## ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

| Line of Business | Claims Paid Year to Date | | Liability End of Current Quarter | | 5 | 6 |
|---|---|---|---|---|---|---|
| | 1<br>On Claims Incurred Prior to January 1 of Current Year | 2<br>On Claims Incurred During the Year | 3<br>On Claims Unpaid Dec. 31 of Prior Year | 4<br>On Claims Incurred During the Year | Claims Incurred in Prior Years (Columns 1 + 3) | Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year |
| 1. Comprehensive (hospital and medical) | 14,136,301 | 7,921,940 | 4,744,779 | 20,144,017 | 18,881,080 | 16,530,241 |
| 2. Medicare Supplement | 449,640 | 717,604 | | 524,614 | 449,640 | 457,226 |
| 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 | 116,287 | 183,659 | | 451,634 | 116,287 | 380,834 |
| 9. Health subtotal (Lines 1 to 8) | 14,702,228 | 8,823,203 | 4,744,779 | 21,120,265 | 19,447,007 | 17,368,301 |
| 10. Health care receivables (a) | 1,496,391 | | | 3,596,965 | 1,496,391 | 3,432,931 |
| 11. Other non-health | | | | | 0 | 0 |
| 12. Medical incentive pools and bonus amounts | | 52,831 | | 307,391 | 0 | 0 |
| 13. Totals (Lines 9-10+11+12) | 13,205,837 | 8,876,034 | 4,744,779 | 17,830,691 | 17,950,616 | 13,935,370 |

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

# NOTES TO FINANCIAL STATEMENTS

## 1. Summary of Significant Accounting Policies

A) Accounting Practices

The financial statements of QualChoice Life and Health Insurance Company, Inc. (the Company) are presented on the basis of accounting practices prescribed or permitted by the Arkansas Department of Insurance (DOI).

The Arkansas DOI recognizes only statutory accounting practices prescribed or permitted by the State of Arkansas for determining and reporting the financial condition and results of operations of an insurance company, for determining solvency under the Arkansas Insurance Law. The National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures Manual* (NAIC SAP) has been adopted with modifications as a component of prescribed or permitted practices of the state of Arkansas.

| | NET INCOME | SSAP # | F/S Page | F/S Line # | State of Domicile | 2020 | 2019 |
|---|---|---|---|---|---|---|---|
| (1) | QualChoice Life & Health Insurance Company, Inc. state basis (Page 4, Line 32, Columns 2 & 4) | XXX | XXX | XXX | Arkansas | $ 6,361,579 | $ (26,235,129) |
| (2) | State Prescribed Practices that increase/(decrease) NAIC SAP: e.g., Depreciation of fixed assets | | | | Arkansas | $ - | $ - |
| (3) | State Permitted Practices that increase/(decrease) NAIC SAP: e.g., Depreciation of fixed assets, home office property | | | | Arkansas | $ - | $ - |
| (4) | NAIC SAP (1-2-3=4) | XXX | XXX | XXX | Arkansas | $ 6,361,579 | $ (26,235,129) |
| | SURPLUS | | | | | | |
| (5) | QualChoice Life & Health Insurance Company, Inc. state basis (Page 3, Line 33, Columns 3 & 4) | XXX | XXX | XXX | Arkansas | $ 27,909,148 | $ 21,661,371 |
| (6) | State Prescribed Practices that increase/(decrease) NAIC SAP: e.g., Goodwill, net e.g., Fixed Assets, net | | | | Arkansas | $ - | $ - |
| (7) | State Permitted Practices that increase/(decrease) NAIC SAP: e.g., Home Office Property | | | | Arkansas | $ - | $ - |
| (8) | NAIC SAP (5-6-7=8) | XXX | XXX | XXX | Arkansas | $ 27,909,148 | $ 21,661,371 |

B) Use of Estimates in the Preparation of the Financial Statement

The preparation of financial statements in conformity with the Annual Statement Instructions and the Accounting Practices and Procedures Manual requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C) Accounting Policy

1. Cash and short-term investments are carried at cost, which approximates fair value. Short-term investments include securities purchased within twelve month or less of maturity date.

2. Investment grade bonds (NAIC designation 1 or 2) not backed by other loans are valued at amortized cost using the scientific (constant yield) method. Bonds containing call provisions, except "make whole" call provisions, are amortized to the call or maturity value/date which produces the lowest asset value (yield to worst). Bonds which are below investment grade (NAIC designations 3 to 6) are carried at the lower of amortized cost or fair value.

3. The Company holds no common stocks.

4. The Company holds no preferred stocks.

5. The Company holds no mortgage loans.

6. The Company holds no loan-back securities.

7. The Company has no investments in subsidiaries, controlled or affiliated companies.

8. The Company has no investments in joint ventures, partnerships and limited liability companies.

9. The Company holds no derivatives.

10. The Company reviews expectations regarding the profitability of contracts in force to determine whether a premium deficiency reserve is required. The Company considers anticipated investment income when calculating its premium deficiency reserves. The adequacy of reserve requirements is continually reviewed by management, with any reductions in the reserve being recorded as a beneficial effect in the Statement of Revenue and Expenses. The Company has a $11,903,985 premium deficiency reserve recorded as of March 31, 2020.

11. Unpaid losses and loss adjustment expenses include amounts determined from claims estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount to be adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments are reflected in the period determined.

# NOTES TO FINANCIAL STATEMENTS

12. There were no changes to the capitalization policy.

13. Pharmaceutical rebates are based on actual pharmaceutical claims experience.

14. Premiums are generally received in the month for which coverage applies, and income from such premiums is recorded as earned during the period in which the Company is obligated to provide services to members. Premiums collected in advance of the month for which coverage applies are deferred and recorded as unearned premium revenue.

15. The Company recognizes investment income when earned. The Company records receivables for investment income earned as of the reporting date but not paid to the Company until subsequent to the reporting date. The Company performs an evaluation of the receivables to determine whether impairment exists.

D) Going Concern

The Company's management has not identified any conditions or events that raise substantial doubt in its ability to continue as a going concern.

**2. Accounting Changes and Corrections of Errors**

The Company prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by the State of Arkansas. There were no accounting changes or correction or errors from the prior period.

**3. Business Combinations and Goodwill**

A. Statutory Purchase Method – None

B. Statutory Merger – None

C. Assumption Reinsurance – None

D. Impairment Loss – None

**4. Discontinued Operations**

None

**5. Investments**

A. Mortgage Loans, including Mezzanine Real Estate Loans – None

B. Debt Restructuring – None

C. Reverse Mortgages – None

D. Loan-Backed Securities - None

E. Dollar Repurchase Agreements and/or Securities Lending Transactions – Not applicable

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing – Not applicable

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing – Not applicable

H. Repurchase Agreements Transactions Accounted for as a Sale – Not applicable

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale – Not applicable

J. Real Estate – Not applicable

K. Low-Income Housing Tax Credits (LIHTC) – Not applicable

L. Restricted Assets

# NOTES TO FINANCIAL STATEMENTS

| Restricted Asset Category | Total Gross Restricted from Current Year | Total Gross Restricted From Prior Year | Increase/ (Decrease) (1 minus 2) | Total Current Year Admitted Restricted | Percentage Gross Restricted to Total Assets | Percentage Admitted Restricted to Total Admitted Assets |
|---|---|---|---|---|---|---|
| a. Subject to contractual obligation for which liability is not shown | | | | | | |
| b. Collateral held under security lending agreements | | | | | | |
| c. Subject to repurchase agreements | | | | | | |
| d. Subject to reverse repurchase agreements | | | | | | |
| e. Subject to dollar repurchase agreements | | | | | | |
| f. Subject to dollar reverse repurchase agreements | | | | | | |
| g. Placed under option contracts | | | | | | |
| h. Letter stock or securities restricted as to sale - excluding FHLB capital stock | | | | | | |
| i. FHLB capital stock | | | | | | |
| j. On deposit with states | 1,675,976 | 1,678,400 | (2,424) | 1,675,976 | 1.8% | 1.8% |
| k. On deposit with other regulatory bodies | | | | | | |
| l. Pledged as collateral to FHLB (including assets backing funding agreements). | | | | | | |
| m. Pledged as collateral not captured in other categories | | | | | | |
| n. Other restricted assets | | | | | | |
| o. Total Restricted Assets | 1,675,976 | 1,678,400 | (2,424) | 1,675,976 | 1.8% | 1.8% |

1. Restricted Assets (Including Pledged)
2. Detail of Assets Pledged as Collateral Not Captured in Other Categories – None
3. Detail of Other Restricted Assets – None
4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements – None

M. Working Capital Finance Investments - None

N. Offsetting and Netting of Assets and Liabilities - None

O. Structured Notes – None

P. 5GI Securities – None

Q. Short Sales- None

R. Prepayment Penalty and Acceleration Fees - Not applicable

**6. Joint Ventures, Partnerships and Limited Liability Companies**

The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies.

**7. Investment Income**

1. All investment income due and accrued with amounts that are over 90 days past due was excluded from surplus.

2. The total amount excluded was $0.

**8. Derivative Instruments**

# NOTES TO FINANCIAL STATEMENTS

None

**9. Income Taxes**

No changes

**10. Information Concerning Parent, Subsidiaries and Affiliates**

A, B, C, G. Effective 4/1/19, the Company is a wholly-owned subsidiary of Centene Corporation.

Centene Management Company, LLC, a wholly owned subsidiary of Centene Corporation, provides data, claims processing, case management, care coordination and general management services to the Company. Medical and administrative expenses included $3,131,583 for such services during the period ended March 31, 2020.

Envolve PeopleCare Inc., a wholly owned subsidiary Envolve Holdings, Inc. which is a wholly owned subsidiary of Centene Corporation, provides health management and nurse-line triage services to the Company. Medical and administrative expenses included $ 13,265 for such services during the period ended March 31, 2020.

Envolve Pharmacy Solutions, Inc., a wholly owned subsidiary Envolve Holdings, Inc., which is a wholly owned subsidiary of Centene Corporation, provides pharmacy benefits management services to the Company. Medical and administrative expenses included $5,094,523 for such services during the period ended March 31, 2020.

Envolve Vision, Inc., which is ultimately a wholly owned subsidiary of Centene Corporation, provides managed vision services to the Company. Medical and administrative expenses included $139,936 for such services during the period ended March 31, 2020.

D. Included in the Company's balance sheet as of March 31, 2020 are the following receivables from and payables to parent, subsidiaries and affiliates:

| Affiliated Entity | 2020 Receivable | 2020 Payable |
|---|---|---|
| QCA Health Plan Inc. | 1,489,918 | |
| Centene Management Company | - | 12,769,378 |
| Centene Center LLC | - | 21,891 |

E. Not Applicable.

F. Not Applicable

H. Not Applicable.

I. Not Applicable.

J. Not Applicable.

K. Not Applicable.

L. Not Applicable.

M. Not Applicable.

N. Not Applicable.

**11. Debt**

A. None.

B. None.

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

None.

**13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations**

No changes.

**14. Liabilities, contingencies, and assessments**

A. Contingent Commitments - None

# NOTES TO FINANCIAL STATEMENTS

B. Assessments – None

C. Gain Contingencies - None

D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits – None

E. Joint and Several Liabilities – None

F. All Other Contingencies – None

**15. Leases**
None

**16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk**
None

**17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities**
None

**18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans**
None

**19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators**
None

**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 March 31, 2020 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) | Net Asset Value (NAV) | Total |
|---|---|---|---|---|---|
| a. Assets at fair value | | | | | |
| Cash, Short Term Investments and Cash Equivalents | $ 65,947,572 | $ - | $ - | $ - | $ 65,947,572 |
| 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 | $ 65,947,572 | $ - | $ - | $ - | $ 65,947,572 |
| b. Liabilities at fair value | | | | | |
| Derivative liabilities | $ - | $ - | $ - | $ - | $ - |
| Total liabilities at fair value | $ - | $ - | $ - | $ - | $ - |

The following table summarizes fair value measurements by level at December 31, 2019 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) | Net Asset Value (NAV) | Total |
|---|---|---|---|---|---|
| a. Assets at fair value | | | | | |
| Cash, Short Term Investments and Cash Equivalents | $ 31,160,311 | $ - | $ - | $ - | $ 31,160,311 |
| 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 | $ 31,160,311 | $ - | $ - | $ - | $ 31,160,311 |
| b. Liabilities at fair value | | | | | |
| Derivative liabilities | $ - | $ - | $ - | $ - | $ - |
| Total liabilities at fair value | $ - | $ - | $ - | $ - | $ - |

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 March 31, 2020 for all financial instruments:

# NOTES TO FINANCIAL STATEMENTS

| Type of Financial Instrument | Aggregate Fair Value | Admitted Assets | Level I | Level II | Level III | Net Asset Value (NAV) | Not Practicable (Carrying Value) |
|---|---|---|---|---|---|---|---|
| Cash, Short Term Investments and cash equivalents | $ 65,947,572 | $ 65,947,572 | $ 65,947,572 | — | — | — | — |
| Bonds | $ 3,316,331 | $ 3,277,897 | $ 1,651,855 | 1,664,476 | — | — | — |

The following table summarizes fair value measurements by level at December 31, 2019 for all financial instruments:

| Type of Financial Instrument | Aggregate Fair Value | Admitted Assets | Level I | Level II | Level III | Net Asset Value (NAV) | Not Practicable (Carrying Value) |
|---|---|---|---|---|---|---|---|
| Cash, Short Term Investments and cash equivalents | $ 31,160,311 | $ 31,160,311 | $ 31,160,311 | — | — | — | — |
| Bonds | $ 3,274,721 | $ 3,280,903 | $ 1,629,635 | 1,645,086 | — | — | — |

D. Not Practicable to Estimate Fair Value

None

E. Investments Measured Using the NAV Practical Expedient

None

**21. Other Items**

No change

**22. Events Subsequent**

Subsequent events have been considered through March 1, 2020 for the statutory statement issued on March 1, 2020.

Type I – Recognizable Subsequent Events - None

Type II – Non-recognizable Subsequent Events

The Company is monitoring the current COVID-19 pandemic. Due to market volatility and economic measures taken to contain the virus there may be impact to our operations and financial position, however we are unable to estimate those impacts, if any, at this time.

**23. Reinsurance**

No Change

**24. Retrospectively Rated Contracts & Contracts Subject to Redetermination**

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

B. The Company records accrued retrospective premiums through written premium.

C. The amount of net premiums written by the Company at March 31, 2020 which are subject to retrospective rating features was $47M, which represents 99% of the total net premiums written.

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

| | 1<br>Individual | 2<br>Small Group Employer | 3<br>Large Group Employer | 4<br>Other Categories with Rebates | 5<br>Total |
|---|---|---|---|---|---|
| Prior Reporting Year | | | | | |
| (1) Medical loss ratio rebates incurred | $ - | $ - | $ - | $ - | $ - |
| (2) Medical loss ratio rebates paid | $ - | $ - | $ - | $ - | $ - |
| (3) Medical loss ratio rebates unpaid | $ - | $ - | $ - | $ - | $ - |
| (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) Medical loss ratio rebates paid | $ - | $ - | $ - | $ - | $ - |
| (9) Medical loss ratio rebates unpaid | $ - | $ - | $ - | $ - | $ - |
| (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 | $ - |

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

# NOTES TO FINANCIAL STATEMENTS

E) Risk Sharing Provisions of the Affordable Care Act

**1) Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk-sharing provisions (YES/NC** 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 (including HCRP) | 1,971,499 |
| Liabilities | |
| 2) Risk adjustment user fees payable for ACA Risk Adjustment | 85,458 |
| 3) Premium adjustments payable due to ACA Risk Adjustment | 7,789,172 |
| Operations (Revenue & Expense) | |
| 4) Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk adjustment | (2,593,346) |
| 5) Reported in expenses as ACA risk adjustment user fees (incurred/paid) | 15,298 |

***b) Transitional ACA Reinsurance Program***

| | |
|---|---|
| Assets | |
| 1) Amounts recoverable for claims paid due to ACA Reinsurance | - |
| 2) Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability) | - |
| 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 | - |
| 5) Ceded reinsurance premiums payable due to ACA Reinsurance | - |
| 6) Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance | - |
| Operations (Revenue & Expense) | |
| 7) Ceded reinsurance premiums due to ACA Reinsurance | - |
| 8) Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments | - |
| 9) ACA Reinsurance contributions - not reported as ceded premium | - |

***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 | - |
| Operations (Revenue & Expense) | |
| 3) Effect of ACA Risk Corridors on net premium income | - |
| 4) Effect of ACA Risk Corridors on change in reserves for rate credits | - |

**3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance**

| | Accrued During the Prior Year on Business Written Before December 31 of the Prior Year | | Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year | | Differences | | Adjustments | | | Unsettled Balances as of the Reporting Date | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | Prior Year Accrued Less Payments (Col 1-3) | Prior Year Accrued Less Payments (Col. 2-4) | To Prior Year Balances | To Prior Year Balances | | Cumulative Balance from Prior Years (Col 1-3+7) | Cumulative Balance from Prior Years (Col. 2-4+8) |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | | 9 | 10 |
| | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | Ref | Receivable | (Payable) |
| a) Permanent ACA Risk Adjustment Program | | | | | | | | | | | |
| 1) Premium adjustments receivable | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | A | $ - | $ - |
| 2) Premium adjustments (payable) | $ - | $ (8,454,066) | $ - | $ - | - | $ (8,454,066) | $ - | $ 857,840 | B | $ - | $ (7,596,225) |
| 3) Subtotal ACA Permanent Risk Adjustment Program | $ - | $ (8,454,066) | $ - | $ - | - | $ (8,454,066) | $ - | $ 857,840 | | $ - | $ (7,596,225) |
| b) Transitional ACA Reinsurance Program | | | | | | | | | | | |
| 1) Amounts recoverable for claims paid | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | C | $ - | $ - |
| 2) Amounts recoverable for claims unpaid (contra liability) | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | D | $ - | $ - |
| 3) Amounts receivable relating to uninsured plans | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | E | $ - | $ - |
| 4) Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | F | $ - | $ - |
| 5) Ceded reinsurance premiums payable | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | G | $ - | $ - |
| 6) Liability for amounts held under uninsured plans | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | H | $ - | $ - |
| 7) Subtotal ACA Transitional Reinsurance Program | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | | $ - | $ - |
| c) Temporary ACA Risk Corridors Program | | | | | | | | | | | |
| 1) Accrued retrospective premium | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | I | $ - | $ - |
| 2) Reserve for rate credits or policy experience rating refunds | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | J | $ - | $ - |
| 3) Subtotal ACA Risk Corridors Program | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | | $ - | $ - |
| d. Total for ACA Risk Sharing Provisions | $ - | $ (8,454,066) | $ - | $ - | - | $ (8,454,066) | $ - | $ 857,840 | | $ - | $ (7,596,225) |

**4) Rollforward of Risk Corridors Asset and Liability Balances by Program Benefit Year**

| | Accrued During the Prior Year on Business Written Before December 31 of the Prior Year | | Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year | | Differences | | Adjustments | | | Unsettled Balances as of the Reporting Date | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | Prior Year Accrued Less Payments (Col 1-3) | Prior Year Accrued Less Payments (Col. 2-4) | To Prior Year Balances | To Prior Year Balances | | Cumulative Balance from Prior Years (Col 1-3+7) | Cumulative Balance from Prior Years (Col. 2-4+8) |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | | 9 | 10 |
| | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | Ref | Receivable | (Payable) |
| a) 2014 | | | | | | | | | | | |
| 1. Accrued retrospective premium | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | A | $ - | $ - |
| 2. Reserve for rate credits or policy experience rating refunds | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | B | $ - | $ - |
| | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | | $ - | $ - |
| b) 2015 | | | | | | | | | | | |
| 1. Accrued retrospective premium | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | C | $ - | $ - |
| 2. Reserve for rate credits or policy experience rating refunds | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | D | $ - | $ - |
| c) 2016 | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | F | $ - | $ - |
| 1. Accrued retrospective premium | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | G | $ - | $ - |
| 2. Reserve for rate credits or policy experience rating refunds | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | H | $ - | $ - |
| d) Total for Risk Corridors | $ - | $ - | $ - | $ - | - | $ - | $ - | $ - | $ - | $ - | $ - |

**5) ACA Risk Corridors Receivable as of Reporting Date**

| | 1 | 2 | 3 | 4 | 5 | 6 |
|---|---|---|---|---|---|---|
| *Risk Corridors Program Year* | Estimated Amount to be filed/final amount filed with federal agency | Non-Accrued Amounts fro Impairment of Other Reasons | Amounts received from CMS | Asset balance gross of non-admission (1-2-3) | Non-admitted amounts | Net admitted assets (4-5) |
| a. 2014 | $ - | $ - | $ - | $ - | $ - | $ - |
| b. 2015 | $ 4,524,488 | $ 4,524,488 | $ - | $ - | $ - | $ - |
| c. 2016 | $ 6,742,797 | $ 6,742,797 | $ - | $ - | $ - | $ - |
| d. Total (a+b+c) | $ 11,267,285 | $ 11,267,285 | $ - | $ - | $ - | $ - |

## 25. Change in Incurred Claims and Claim Adjustment Expenses

A. Reserves for incurred claims as of December 31, 2019 was $17.4M. As of March 31, 2020, $13.2M has been paid for incurred claims attributable to insured events of prior years. Reserves remaining for prior years is now $$4.7M for incurred claims and unpaid claims adjustment expense as a result of re-estimation of unpaid claims and claims adjustment expenses, and evaluation of liabilities associated with legal actions that arise in the normal course of business. The Company experienced $0.6 million of unfavorable prior year development since December 31, 2019 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.

# NOTES TO FINANCIAL STATEMENTS

B. There has been no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expense.

**26. Intercompany Pooling Arrangements**

The Company has no intercompany pooling arrangement.

A. – G. N/A

**27. Structured Settlements**

None

**28. Health Care Receivables**

No changes

**29. Participating Policies**

None

**30. Premium Deficiency Reserves**

As of March 31, 2020:

| | |
|---|---|
| 1. The liability for the premium deficiency reserves | $11,903,985 |
| 2. Date of most recent evaluation of this liability | December 31, 2019 |
| 3. Was anticipated investment income utilized in the calculation? | Yes |

**31. Anticipated Salvage and Subrogation**

None.

# GENERAL INTERROGATORIES

## PART 1 - COMMON INTERROGATORIES
## GENERAL

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

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

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

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

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

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

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

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

On January 23, 2020, [entity's name] parent company, Centene Corporation, acquired all of the issued and outstanding shares of WellCare Health Plans, Inc. The transaction was valued at $19,555 million, including the assumption of debt .....

3.4 Is the reporting entity publicly traded or a member of a publicly traded group? ..... Yes [X] No [ ]

3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group..... 0001071739

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

If yes, complete and file the merger history data file with the NAIC.

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<br>Name of Entity | 2<br>NAIC Company Code | 3<br>State of Domicile |
|---|---|---|
| | | |

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

If yes, attach an explanation.

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. ..... 12/31/2017

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. ..... 12/31/2017

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). ..... 06/24/2019

6.4 By what department or departments?

Arkansas Insurance Department .....

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

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

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

7.2 If yes, give full information:

.....

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

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

.....

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

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

| 1<br>Affiliate Name | 2<br>Location<br>(City, State) | 3<br>FRB | 4<br>OCC | 5<br>FDIC | 6<br>SEC |
|---|---|---|---|---|---|
| | | | | | |

# GENERAL INTERROGATORIES

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

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

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

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

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

(e) Accountability for adherence to the code.

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

.....

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

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

.....

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

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

.....

## FINANCIAL

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

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... $ ..... 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<br>Prior Year-End<br>Book/Adjusted<br>Carrying Value | 2<br>Current Quarter<br>Book/Adjusted<br>Carrying Value |
|---|---|---|---|
| 14.21 | Bonds | $ 0 | $ |
| 14.22 | Preferred Stock | $ 0 | $ |
| 14.23 | Common Stock | $ 0 | $ |
| 14.24 | Short-Term Investments | $ 0 | $ |
| 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 [ ] NA [X]

If no, attach a description with this statement.

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 |

# GENERAL INTERROGATORIES

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<br>Name of Custodian(s) | 2<br>Custodian Address |
|---|---|
| Wells Fargo Institutional Retirement and Trust | 550 Fourth St South, 8th Floor, Minneapolis, MN 55415 |

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<br>Name(s) | 2<br>Location(s) | 3<br>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 [ ]

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

| 1<br>Old Custodian | 2<br>New Custodian | 3<br>Date of Change | 4<br>Reason |
|---|---|---|---|
| | | | |

17.5 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["…that have access to the investment accounts"; "…handle securities"]

| 1<br>Name of Firm or Individual | 2<br>Affiliation |
|---|---|
| Wells Capital Management | U |
| | |
| | |
| | |

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's invested assets? Yes [ ] No [ X ]

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets? Yes [ ] No [ X ]

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

| 1<br>Central Registration Depository Number | 2<br>Name of Firm or Individual | 3<br>Legal Entity Identifier (LEI) | 4<br>Registered With | 5<br>Investment Management Agreement (IMA) Filed |
|---|---|---|---|---|
| 104973 | Wells Capital Management | 549300B3H2I002L85I90 | SEC | NO |

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

18.2 If no, list exceptions:

.....

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:

a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
b. Issuer or obligor is current on all contracted interest and principal payments.
c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? ..... Yes [ ] No [X]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

a. The security was purchased prior to January 1, 2018.
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities? ..... Yes [ ] No [X]

# GENERAL INTERROGATORIES

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

a. The shares were purchased prior to January 1, 2019.
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
d. The fund only or predominantly holds bonds in its portfolio.
e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [ ] No [X]

# GENERAL INTERROGATORIES

## PART 2 - HEALTH

1. Operating Percentages:

| | |
|---|---|
| 1.1 A&H loss percent | 57.1 % |
| 1.2 A&H cost containment percent | 0.0 % |
| 1.3 A&H expense percent excluding cost containment expenses | % |
| 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 | $ |
| 3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? | Yes [X] No [ ] |
| 3.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? | Yes [ ] No [X] |

# SCHEDULE S - CEDED REINSURANCE

**Showing All New Reinsurance Treaties - Current Year to Date**

| 1<br>NAIC Company Code | 2<br>ID Number | 3<br>Effective Date | 4<br>Name of Reinsurer | 5<br>Domiciliary Jurisdiction | 6<br>Type of Reinsurance Ceded | 7<br>Type of Business Ceded | 8<br>Type of Reinsurer | 9<br>Certified Reinsurer Rating (1 through 6) | 10<br>Effective Date of Certified Reinsurer Rating |
|---|---|---|---|---|---|---|---|---|---|
| | | | LIFE & ANNUITY – AFFILIATES | | | | | | |
| | | | LIFE & ANNUITY – NON-AFFILIATES | | | | | | |
| 77828 | 57-0523959 | 12/01/2010 | COMPANION LIFE INS CO | SC | OTH/G | | | | |
| | | | ACCIDENT & HEALTH – AFFILIATES | | | | | | |
| | | | ACCIDENT & HEALTH – NON-AFFILIATES | | | | | | |
| | | | PROPERTY/CASUALTY – AFFILIATES | | | | | | |
| | | | PROPERTY/CASUALTY – NON-AFFILIATES | | | | | | |

# SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

**Current Year to Date - Allocated by States and Territories**

| States, Etc. | 1 Active Status (a) | 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 | N | | | | | | | 0 | |
| 2. Alaska AK | N | | | | | | | 0 | |
| 3. Arizona AZ | N | | | | | | | 0 | |
| 4. Arkansas AR | L | 46,851,889 | | | | 46,604 | | 46,898,493 | |
| 5. California CA | N | | | | | | | 0 | |
| 6. Colorado CO | N | | | | | | | 0 | |
| 7. Connecticut CT | N | | | | | | | 0 | |
| 8. Delaware DE | N | | | | | | | 0 | |
| 9. Dist. Columbia DC | N | | | | | | | 0 | |
| 10. Florida FL | N | | | | | | | 0 | |
| 11. Georgia GA | N | | | | | | | 0 | |
| 12. Hawaii HI | N | | | | | | | 0 | |
| 13. Idaho ID | N | | | | | | | 0 | |
| 14. Illinois IL | N | | | | | | | 0 | |
| 15. Indiana IN | N | | | | | | | 0 | |
| 16. Iowa IA | N | | | | | | | 0 | |
| 17. Kansas KS | N | | | | | | | 0 | |
| 18. Kentucky KY | N | | | | | | | 0 | |
| 19. Louisiana LA | N | | | | | | | 0 | |
| 20. Maine ME | N | | | | | | | 0 | |
| 21. Maryland MD | N | | | | | | | 0 | |
| 22. Massachusetts MA | N | | | | | | | 0 | |
| 23. Michigan MI | N | | | | | | | 0 | |
| 24. Minnesota MN | N | | | | | | | 0 | |
| 25. Mississippi MS | N | | | | | | | 0 | |
| 26. Missouri MO | N | | | | | | | 0 | |
| 27. Montana MT | N | | | | | | | 0 | |
| 28. Nebraska NE | L | | | | | | | 0 | |
| 29. Nevada NV | N | | | | | | | 0 | |
| 30. New Hampshire NH | N | | | | | | | 0 | |
| 31. New Jersey NJ | N | | | | | | | 0 | |
| 32. New Mexico NM | N | | | | | | | 0 | |
| 33. New York NY | N | | | | | | | 0 | |
| 34. North Carolina NC | N | | | | | | | 0 | |
| 35. North Dakota ND | N | | | | | | | 0 | |
| 36. Ohio OH | N | | | | | | | 0 | |
| 37. Oklahoma OK | N | | | | | | | 0 | |
| 38. Oregon OR | N | | | | | | | 0 | |
| 39. Pennsylvania PA | N | | | | | | | 0 | |
| 40. Rhode Island RI | N | | | | | | | 0 | |
| 41. South Carolina SC | N | | | | | | | 0 | |
| 42. South Dakota SD | N | | | | | | | 0 | |
| 43. Tennessee TN | N | | | | | | | 0 | |
| 44. Texas TX | N | | | | | | | 0 | |
| 45. Utah UT | N | | | | | | | 0 | |
| 46. Vermont VT | N | | | | | | | 0 | |
| 47. Virginia VA | N | | | | | | | 0 | |
| 48. Washington WA | N | | | | | | | 0 | |
| 49. West Virginia WV | N | | | | | | | 0 | |
| 50. Wisconsin WI | N | | | | | | | 0 | |
| 51. Wyoming WY | N | | | | | | | 0 | |
| 52. American Samoa AS | N | | | | | | | 0 | |
| 53. Guam GU | N | | | | | | | 0 | |
| 54. Puerto Rico PR | N | | | | | | | 0 | |
| 55. U.S. Virgin Islands VI | N | | | | | | | 0 | |
| 56. Northern Mariana Islands MP | N | | | | | | | 0 | |
| 57. Canada CAN | N | | | | | | | 0 | |
| 58. Aggregate other alien OT | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 59. Subtotal | XXX | 46,851,889 | 0 | 0 | 0 | 46,604 | 0 | 46,898,493 | 0 |
| 60. Reporting entity contributions for Employee Benefit Plans | XXX | | | | | | | 0 | |
| 61. Total (Direct Business) | XXX | 46,851,889 | 0 | 0 | 0 | 46,604 | 0 | 46,898,493 | 0 |
| **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 |

(a) Active Status Counts

L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG ..... 2
E – Eligible – Reporting entities eligible or approved to write surplus lines in the state ..... 0
N – None of the above – Not allowed to write business in the state ..... 55
R – Registered – Non-domiciled RRGs ..... 0
Q – Qualified – Qualified or accredited reinsurer ..... 0

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

## PART 1 - ORGANIZATIONAL CHART

| | | | |
|---|---|---|---|
| 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 (18%) | 46-2860967 | MO | |
| Absolute Total Care, Inc | 20-5693998 | SC | 12959 |
| Health Plan Real Estate Holding, Inc (1%) | 46-2860967 | MO | |
| Coordinated Care Corporation d/b/a Managed Health Services | 39-1821211 | IN | 95831 |
| Health Plan Real Estate Holding, Inc (15%) | 46-2860967 | MO | |
| Healthy Washington Holdings, Inc | 46-5523218 | DE | |
| Coordinated Care of Washington, Inc | 46-2578279 | WA | 15352 |
| Managed Health Services Insurance Corp | 39-1678579 | WI | 96822 |
| Health Plan Real Estate Holding, Inc (2%) | 46-2860967 | MO | |
| Hallmark Life Insurance Co | 86-0819817 | AZ | 60078 |
| 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 |
| Sunshine Health Holding LLC | 26-0557093 | FL | |
| Sunshine State Health Plan, Inc | 20-8937577 | FL | 13148 |
| Kentucky Spirit Health Plan, Inc | 45-1294925 | KY | 14100 |
| Healthy Missouri Holding, Inc (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 |
| California Health and Wellness Plan | 46-0907261 | CA | |
| Michigan Complete Health, Inc. | 30-0312489 | MI | 10769 |
| Western Sky Community Care, Inc. | 45-5583511 | NM | 16351 |
| Tennessee Total Care, Inc. | 26-1849394 | TN | |
| SilverSummit Healthplan, Inc. | 20-4761189 | NV | 16143 |
| University Health Plans, Inc. | 22-3292245 | NJ | |
| Agate Resources, Inc. | 20-0483299 | OR | |
| Trillium Community Health Plan, Inc. | 42-1694349 | OR | 12559 |
| Nebraska Total Care, Inc. | 47-5123293 | NE | 15902 |
| Pennsylvania Health & Wellness, Inc. | 47-5340613 | PA | 16041 |

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

## PART 1 - ORGANIZATIONAL CHART

| | | | |
|---|---|---|---|
| Superior HealthPlan Community Solutions, Inc. | 47-5664832 | TX | 15912 |
| Sunshine Health Community Solutions, Inc. | 47-5667095 | FL | 15927 |
| Buckeye Health Plan Community Solutions, Inc. | 47-5664342 | OH | 16112 |
| Arkansas Health & Wellness Health Plan, Inc. | 81-1282251 | AR | 16130 |
| Arkansas Total Care Holding Company, LLC (49%) | 38-4042368 | DE | |
| Arkansas Total Care, Inc. | 82-2649097 | AR | 16256 |
| Oklahoma Complete Health Inc. | 81-3121527 | OK | |
| Bridgeway Health Solutions, LLC | 20-4980875 | DE | |
| Bridgeway Health Solutions of Arizona Inc. | 20-4980818 | AZ | 16310 |
| Celtic Group, Inc | 36-2979209 | DE | |
| Celtic Insurance Company | 06-0641618 | IL | 80799 |
| Ambetter of Magnolia Inc | 35-2525384 | MS | 15762 |
| Ambetter of Peach State Inc. | 36-4802632 | GA | 15729 |
| Novasys Health, Inc | 27-2221367 | DE | |
| CeltiCare Health Plan Holdings LLC | 26-4278205 | DE | |
| CeltiCare Health Plan of Massachusetts, Inc. | 26-4818440 | MA | 13632 |
| Centene Management Company LLC | 39-1864073 | WI | |
| CMC Real Estate Co. LLC | 20-0057283 | DE | |
| Centene Center LLC | 26-4094682 | DE | |
| Centene Center I, LLC | 82-1816153 | DE | |
| Centene Center II, LLC | 47-5156015 | DE | |
| Illinois Health Practice Alliance, LLC (50%) | 82-2761995 | DE | |
| Integrated Care Network of Florida, LLC | 84-3023173 | DE | |
| Lifeshare Management Group, LLC | 46-2798132 | NH | |
| Arkansas Total Care Holding Company, LLC (25%) | 38-4042368 | 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 | |
| Health Care Enterprises, LLC | 46-4855483 | DE | |
| Integrated Mental Health Management, L.L.C. | 74-2892993 | TX | |
| Integrated Mental Health Services | 74-2785494 | TX | |
| Envolve Holdings, LLC | 22-3889471 | DE | |
| Cenpatico Behavioral Health, LLC | 68-0461584 | CA | |
| Cenpatico Behavioral Health of Arizona, LLC | 20-1624120 | AZ | |
| Cenpatico of Arizona Inc. | 80-0879942 | AZ | |
| Envolve, Inc. | 37-1788565 | DE | |
| Envolve - New York, Inc. | 47-3454898 | NY | |
| Envolve PeopleCare, Inc. | 06-1476380 | DE | |
| LiveHealthier, Inc. | 47-2516714 | DE | |
| Envolve Benefits Options, Inc. | 61-1846191 | DE | |

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

## PART 1 - ORGANIZATIONAL CHART

| | | | |
|---|---|---|---|
| Envolve Vision Benefits, Inc. | 20-4730341 | DE | |
| Envolve Captive Insurance Company, Inc. | 36-4520004 | SC | |
| Envolve Vision of Texas, Inc. | 75-2592153 | TX | 95302 |
| Envolve Vision, Inc | 20-4773088 | DE | |
| Envolve Vision IPA of New York, Inc. | 83-2460878 | NY | |
| Envolve Vision of Florida, Inc | 65-0094759 | FL | |
| Envolve Total Vision, Inc. | 20-4861241 | DE | |
| Envolve Optical, Inc. | 82-2908582 | DE | |
| Envolve Dental, Inc. | 46-2783884 | DE | |
| Envolve Dental of Florida, Inc. | 81-2969330 | FL | |
| Envolve Dental of Texas, Inc. | 81-2796896 | TX | 16106 |
| Envolve Dental IPA of New York, Inc. | 83-1464482 | NY | |
| Envolve Pharmacy Solutions, Inc. | 77-0578529 | DE | |
| LBB Industries, Inc | 76-0511700 | TX | |
| RX Direct, Inc | 75-2612875 | TX | |
| Envolve Pharmacy IPA, LLC | 46-2307356 | NY | |
| Casenet LLC | 90-0636938 | DE | |
| Casenet S.R.O. | Foreign | CZE | |
| MHM Services, Inc. | 82-5316510 | DE | |
| Centurion LLC | 90-0766502 | DE | |
| Centurion of Arizona, LLC | 81-4228054 | AZ | |
| Centurion of Vermont, LLC | 47-1686283 | VT | |
| Centurion of Mississippi, LLC | 47-2967381 | MS | |
| Centurion of Tennessee, LLC | 30-0752651 | TN | |
| Centurion of Minnesota, LLC | 46-2717814 | MN | |
| Centurion Correctional Healthcare of New Mexico, LLC | 81-1161492 | NM | |
| Centurion of Florida, LLC | 81-0687470 | FL | |
| Centurion of Maryland, LLC | 81-4938030 | MD | |
| Centurion of Alabama, LLC | 82-2268901 | AL | |
| Centurion of Georgia, LLC | 82-3128848 | GA | |
| Centurion Detention Health Services, LLC | 82-4735175 | DE | |
| Centurion of New Hampshire, LLC | 82-4823469 | DE | |
| Centurion of Pennsylvania, LLC | 82-4823469 | PA | |
| Centurion of West Virginia, LLC | 46-4839132 | WV | |
| Centurion of Kansas, LLC | 84-3436283 | KS | |
| Centurion of Delaware, LLC | 84-3767794 | DE | |
| Centurion of Wyoming, LLC | 84-3857653 | WY | |
| MHM Correctional Services, LLC | 54-1856340 | DE | |
| MHM Services of California, LLC | 51-0620904 | CA | |
| MHM Solutions, LLC | 60-0002002 | DE | |
| Forensic Health Services, LLC. | 26-1877007 | DE | |
| MHM Health Professionals, LLC | 46-1734817 | DE | |

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

## PART 1 - ORGANIZATIONAL CHART

| | | |
|---|---|---|
| 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 |
| AcariaHealth Solutions, Inc. | 80-0856383 | DE |
| AcariaHealth, Inc. | 45-2780334 | DE |
| AcariaHealth Pharmacy #14, Inc | 27-1599047 | CA |
| AcariaHealth Pharmacy #11, Inc | 20-8192615 | TX |
| AcariaHealth Pharmacy #12, Inc | 27-2765424 | NY |
| AcariaHealth Pharmacy #13, Inc | 26-0226900 | CA |
| AcariaHealth Pharmacy, Inc | 13-4262384 | CA |
| HomeScripts.com, LLC | 27-3707698 | MI |
| New York Rx, Inc. | 20-8235695 | NY |
| Foundation Care, LLC (80%) | 20-0873587 | MO |
| U.S. Medical Management Holdings, Inc | 27-0275614 | DE |
| U.S. Medical Management, LLC (20%) | 38-3153946 | DE |
| U.S. Medical Management, LLC (80%) | 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 Wisconsin, LLC | 46-1708834 | MI |
| Grace Hospice of Illinois, LLC | 81-5129923 | IL |
| Seniorcorps Peninsula, LLC | 26-4435532 | VA |
| R&C Healthcare, LLC | 33-1179031 | 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 Senior Care of Indiana, LLC | 81-1565426 | MI |
| Pinnacle Home Care, LLC | 76-0713516 | TX |
| North Florida Health Services, Inc | 59-3519060 | FL |
| Pinnacle Sr. Care of Kalamazoo, LLC | 47-1742728 | MI |

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

## PART 1 - ORGANIZATIONAL CHART

| | | | |
|---|---|---|---|
| Hospice DME Company, LLC | 46-1734288 | MI | |
| Rapid Respiratory Services, LLC | 20-4364776 | DE | |
| USMM Accountable Care Partners, LLC | 46-5735993 | DE | |
| Pinnacle Senior Care of Illinois, LLC | 83-3534462 | IL | |
| VPA, P.C. | 38-3176990 | MI | |
| IAH of Michigan, PLLC | 47-2159305 | MI | |
| IAH of Wisconsin, PLLC | 47-2146160 | MI | |
| VPA of Texas | 20-2386997 | MI | |
| IAH of Texas, PLLC | 35-2519603 | MI | |
| Advantechs X-Ray Imaging Services, L.L.C. | 36-4539790 | TX | |
| Health Net, LLC | 47-5208076 | DE | |
| Health Net of California, Inc. | 95-4402957 | CA | |
| Health Net Life Insurance Company | 73-0654885 | CA | 66141 |
| Health Net Life Reinsurance Company | 98-0409907 | CYM | |
| Managed Health Network, LLC | 95-4117722 | DE | |
| Managed Health Network | 95-3817988 | CA | |
| MHN Services, LLC | 95-4146179 | CA | |
| Health Net Federal Services, LLC | 68-0214809 | DE | |
| MHN Government Services LLC | 42-1680916 | DE | |
| MHN Government Services-Guam, Inc. | 90-0889803 | DE | |
| MHN Government Services-International, Inc. | 90-0889825 | DE | |
| MHN Government Services-Puerto Rico, Inc. | 90-0889815 | DE | |
| Network Providers, LLC (10%) | 88-0357895 | DE | |
| Health Net Veterans, LLC | 35-2490375 | DE | |
| Network Providers, LLC (90%) | 88-0357895 | DE | |
| Health Net Health Plan of Oregon, Inc. | 93-1004034 | OR | 95800 |
| Health Net Community Solutions, Inc. | 54-2174068 | CA | |
| Health Net of Arizona, Inc. | 36-3097810 | AZ | 95206 |
| Health Net Pharmaceutical Services | 68-0295375 | CA | |
| Health Net Community Solutions of Arizona, Inc. | 81-1348826 | AZ | 15895 |
| Health Net Access, Inc. | 46-2616037 | AZ | |
| MHS Consulting, International, Inc | 20-8630006 | DE | |
| Centene International Ventures, LLC | 83-1047281 | DE | |
| MHS European Holdings s.a.r.l. | 27-2075447 | LUX | |
| PRIMEROSALUD, S.L. | Foreign | ESP | |
| Ribera Salud, S.A. (90.1%) | Foreign | ESP | |
| Torrevieja Salud UTE (65%) | Foreign | ESP | |
| Ribera Salud II (96~%) | Foreign | ESP | |
| ERESCANNER (15%) | Foreign | ESP | |
| BR Salud UTE (45%) | Foreign | ESP | |
| Marina Salud (35%) | Foreign | ESP | |
| Villa Maria del Triuinfo Salud S.A. C. (5%) | Foreign | PER | |
| Callao Salud S.A.C. (5%) | Foreign | PER | |
| Infraestructuras y Servicios de Alzira S.L. (50%) | Foreign | ESP | |
| Elche-Crevillente Salud (100%) | Foreign | ESP | |

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

## PART 1 - ORGANIZATIONAL CHART

| | | |
|---|---|---|
| B2B Salud | Foreign | ESP |
| B2B Gestion integral, S.L. | Foreign | ESP |
| B2B Lab,S.L. | Foreign | ESP |
| Ribera Salud proyectos S.L. | Foreign | ESP |
| Ribera-Quilpro UTE | Foreign | ESP |
| Ribera Salud Infraestructuras S.L.U. | Foreign | ESP |
| Pro Diagnostic Group, a.s (66.43%) | Foreign | SVK |
| Pro RTG (80%) | | SVK |
| DR Magnet | | SVK |
| Pro Magnet | | SVK |
| Medicina NZ | | SVK |
| MR Poprad | | SVK |
| CT Poprad | | SVK |
| MR Zilina | | SVK |
| Pro Magnet CZ | | CZE |
| Progress Medical a.s. | | CZE |
| OB Klinika, a.s. | | CZE |
| OB Care, s.r.o | | CZE |
| Hospital Povisa, S.A. (93.29%) | | ESP |
| Ribera Salud Tecnologias S.L.U. | Foreign | ESP |
| Torrevieja Salud S.L.U. | Foreign | ESP |
| Torrevieja Salud UTE (35%) | Foreign | ESP |
| Torrejon Salud, S.A. (89.47%) | Foreign | ESP |
| MH Services International Holdings (UK) Limited | Foreign | GBR |
| MH Services International (UK) Limited | Foreign | GBR |
| Operose Health Limited | Foreign | GBR |
| Operose Health (Group) Limited | Foreign | GBR |
| The Practice Properties Limited | Foreign | GBR |
| Operose Health (Group) UK Limited | Foreign | GBR |
| The Practice Surgeries Limited | Foreign | GBR |
| Phoenix Primary Care Limited | Foreign | GBR |
| Phoenix Primary (South) Limited | Foreign | GBR |
| Circle Health Holdings Limited (40%) | Foreign | GBR |
| Circle Health 1 Limited | Foreign | GBR |
| Circle Health 2 Limited | Foreign | GBR |
| Circle Holdings Limited | Foreign | JEY |
| Circle Partnership Limited | Foreign | VGB |
| Circle International PLC | Foreign | GBR |
| Circle Health Limited | Foreign | GBR |
| Health Properties Limited | Foreign | JEY |
| Health Properties (South Manchester) Limited | Foreign | JEY |
| Nations Healthcare Limited | Foreign | GBR |

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

## PART 1 - ORGANIZATIONAL CHART

| | | | | |
|---|---|---|---|---|
| Circle Nottingham Limited | Foreign | GBR | | |
| Circle Rehabilitation Services (90%) | Foreign | GBR | | |
| Circle Hospital (Bath) Limited | Foreign | GBR | | |
| Circle Hospital (Reading) Limited | Foreign | GBR | | |
| Circle Clinical Services Limited | Foreign | GBR | | |
| Circle Birmingham Limited | Foreign | GBR | | |
| Circle Harmony Health Limited (50%) | Foreign | CHN | | |
| Shanghai Circle Harmony Hospital Management | Foreign | CHN | | |
| Circle Health 3 Limited | Foreign | GBR | | |
| Circle Health 4 Limited | Foreign | GBR | | |
| GHG Healthcare Holdings Limited | Foreign | GBR | | |
| General Healthcare Group Limited | Foreign | GBR | | |
| General Healthcare Holdings 2 Limited | Foreign | GBR | | |
| General Healthcare Holdings 3 Limited | Foreign | GBR | | |
| North West Cancer Clinic Limited (90%) | Foreign | GBR | | |
| GHG (DB) Pension Trustees | Foreign | GBR | | |
| GHG Mount Alvernia Hospital Limited | Foreign | GBR | | |
| Generale de Sante International Limited | Foreign | GBR | | |
| BMI Southend Private Hospital Limited (50%) | Foreign | GBR | | |
| BMI Imaging Clinic Limited (50%) | Foreign | GBR | | |
| Mount Alvernia PET CT Limited (73.5%) | Foreign | GBR | | |
| GHG Intermediate Holdings Limited | Foreign | GBR | | |
| General Healthcare Holdings 4 Limited | Foreign | GBR | | |
| BMI Healthcare Limited | Foreign | GBR | | |
| 3SH Limited (50%) | Foreign | GBR | | |
| BMI Hospital Decontamination Limited | Foreign | GBR | | |
| Three Shires Hospital LP (50%) | Foreign | GBR | | |
| The Pavilion Clinic Ltd (51%) | Foreign | GBR | | |
| GHG Leasing Limited | Foreign | GBR | | |
| South Cheshire SPV Limited | Foreign | GBR | | |
| Bishopswood SPV Limited | Foreign | GBR | | |
| Runnymeade SPV Limited | Foreign | GBR | | |
| Centene Europe Finance Company Limited | Foreign | MLT | | |
| Centene Health Plan Holdings, Inc. | 82-1172163 | DE | | |
| Ambetter of North Carolina, Inc. | 82-5032556 | NC | 16395 | |
| Carolina Complete Health Holding Company Partnership (80%) | 82-2699483 | DE | | |
| Carolina Complete Health, Inc. | 82-2699332 | NC | 16526 | |
| New York Quality Healthcare Corporation | 82-3380290 | NY | | |
| Salus Administrative Services, Inc. | 55-0878053 | NY | | |
| Salus IPA, LLC | 82-0802846 | NY | | |
| Calibrate Acquisition Co | 82-4670677 | DE | | |
| Community Medical Holdings Corp | 47-4179393 | DE | | |

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

## PART 1 - ORGANIZATIONAL CHART

| | | | |
|---|---|---|---|
| Access Medical Acquisition, Inc. | 46-3485489 | DE | |
| Access Medical Group of North Miami Beach, Inc. | 45-3191569 | FL | |
| Access Medical Group of Miami, Inc. | 45-3191719 | FL | |
| Access Medical Group of Hialeah, Inc. | 45-3192283 | FL | |
| Access Medical Group of Westchester, Inc. | 45-3199819 | FL | |
| Access Medical Group of Opa-Locka, Inc. | 45-3505196 | FL | |
| Access Medical Group of Perrine, Inc. | 45-3192955 | FL | |
| Access Medical Group of Florida City, Inc. | 45-3192366 | FL | |
| Access Medical Group of Tampa, Inc. | 82-1737078 | FL | |
| Access Medical Group of Tampa II, Inc. | 82-1750978 | FL | |
| Access Medical Group of Tampa III, Inc. | 82-1773315 | FL | |
| Access Medical Group of Lakeland, LLC | 84-2750188 | FL | |
| Interpreta Holdings, Inc. (80.1%) | 82-4883921 | DE | |
| Interpreta, Inc. | 46-5517858 | DE | |
| Patriots Holding Co | 82-4581788 | DE | |
| RxAdvance Corporation (30.33%) | | DE | |
| Centene Venture Company Alabama Health Plan, Inc. | 84-3707689 | AL | |
| Centene Venture Company Michigan | 83-2446307 | MI | 16613 |
| Next Door Neighbors, LLC (60%) | 32-2434596 | DE | |
| Next Door Neighbors, Inc. | 83-2381790 | DE | |
| Centene Venture Company Illinois | 83-2425735 | IL | 16505 |
| Centene Venture Company Kansas | 83-2409040 | KS | 16528 |
| Centene Venture Company Florida | 83-2434596 | FL | 16499 |
| Centene Venture Company Indiana, Inc. | 84-3679376 | IN | |
| Centene Venture Company Tennessee | 84-3724374 | TN | |
| HealthEC, LLC (12.8%) | | | |
| Arch Personalized Medicine Initiative, LLC (50%) | 83-4144116 | MO | |
| Social Health Bridge, LLC | 83-4205348 | DE | |
| Social Health Bridage Trust | 84-6403386 | DE | |
| WellCare Health Plans, Inc. | 83-4405939 | DE | |
| WCG Health Management, Inc. | 04-3669698 | DE | |
| The WellCare Management Group, Inc. | 14-1647239 | NY | |
| WellCare of New York, Inc. | 14-1676443 | NY | 95534 |
| WellCare of Connecticut, Inc. | 06-1405640 | CT | 95310 |
| WellCare of Mississippi, Inc. | 81-5442932 | MS | 16329 |
| WellCare of Virginia, Inc. | 82-0664467 | VA | 16763 |
| WellCare of Oklahoma, Inc. | 81-3299281 | OK | 16117 |
| WellCare Health Insurance Company of Nevada, Inc. | 84-3721013 | NV | |
| WellCare Health Insurance of the Southwest, Inc. | 84-3739752 | AZ | 16692 |
| WellCare of Florida, Inc. | 59-2583622 | FL | 95081 |
| WellCare of Georgia, Inc. | 20-2103320 | GA | 10760 |
| WellCare of Kansas, Inc. | 45-3617189 | KS | 14404 |

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

## PART 1 - ORGANIZATIONAL CHART

| | | | |
|---|---|---|---|
| WellCare of Texas, Inc. | 20-8058761 | TX | 12964 |
| WellCare of Ohio, Inc, | 20-3562146 | OH | 12749 |
| WellCare of South Carolina, Inc. | 32-0062883 | SC | 11775 |
| WellCare Health Plans of New Jersey, Inc. | 20-8017319 | NJ | 13020 |
| WellCare of Pennsylvania, Inc. | 81-1631920 | PA | |
| WellCare Health Plans of Massachusetts, Inc | 84-3547689 | MA | |
| WellCare Health Insurance Company of Oklahoma, Inc. | 84-4449030 | OK | 16752 |
| WellCare Health Plans of Missouri, Inc. | 84-3907795 | MO | 16753 |
| WellCare Prescription Insurance, Inc. | 20-2383134 | FL | 10155 |
| WellCare of Arkansas, Inc. | 83-2797833 | AR | 16531 |
| WellCare Pharmacy Benefits Management, Inc. | 20-4869374 | DE | |
| Exactus Pharmacy Solutions, Inc. | 20-8420512 | DE | |
| Comprehensive Reinsurance, Ltd. | 98-0448921 | CYM | |
| WellCare Health Plans of California, Inc. | 27-4293249 | CA | |
| WellCare Health Plans of Tennessee, Inc. | 45-5154364 | TN | 16533 |
| WellCare Health Insurance Company of New Jersey, Inc. | 84-4709471 | NJ | |
| WellCare Health Insurance of Hawaii, Inc. | 84-4664883 | HI | |
| WellCare Health Plans of Rhode Island, Inc. | 84-4627844 | RI | 16766 |
| WellCare of Illinois, Inc. | 84-4649985 | IL | 16765 |
| Comprehensive Health Management, Inc. | 59-3547616 | FL | |
| WellCare Health Insurance of New York, Inc | 11-3197523 | NY | 10884 |
| Ohana Health Plan, Inc. | 27-0386122 | HI | |
| WellCare of Indiana, Inc. | 83-2840051 | IN | |
| America's 1st Choice California Holdings, LLC | 45-3236788 | FL | |
| WellCare of California, Inc. | 20-5327501 | CA | |
| Windsor Health Group, Inc. | 62-1832645 | TN | |
| WellCare Health Insurance of Tennessee, Inc. | 83-2276159 | TN | 16532 |
| WellCare of New Hampshire, Inc. | 83-2914327 | NH | 16515 |
| WellCare Health Plans of Vemont, Inc. | 83-2255514 | VT | 16514 |
| WellCare Health Insurance of Connecticut, Inc. | 83-2126269 | CT | 16513 |
| WellCare of Washington,Inc. | 83-2069308 | WA | 16571 |
| WellCare Health Plans of Kentucky, Inc. | 47-0971481 | KY | 15510 |
| WellCare of Alabama, Inc. | 82-1301128 | AL | 16239 |
| WellCare of Maine, Inc. | 82-3114517 | ME | 16344 |
| Harmony Health Systems Inc. | 22-3391045 | NJ | |
| Harmony Health Management, Inc. | 36-4467676 | NJ | |
| Harmony Health Plan, Inc. | 36-4050495 | IL | 11229 |
| Harmony Behavioral Health, Inc. | 20-3320236 | FL | |
| Harmony Behavioral Health IPA, Inc. | 20-3262322 | NY | |
| WellCare Health Insurance Company of Kentucky, Inc. | 36-6069295 | KY | 64467 |
| WellCare Health Insurance of Arizona, Inc. | 86-0269558 | AZ | 83445 |
| WellCare Health Insurance of North Carolina, Inc. | 83-3493160 | NC | 16548 |

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

## PART 1 - ORGANIZATIONAL CHART

| | | | |
|---|---|---|---|
| WellCare Health Insurance Company of Louisiana, Inc. | 83-3333918 | LA | |
| WellCare of Missouri Health Insurance Company, Inc. | 83-3525830 | MO | 16512 |
| WellCare Health Plans of Wisconsin, Inc. | 83-3351254 | WI | 16569 |
| Care 1st Health Plan of Arizona, Inc. | 57-1165217 | AZ | |
| Care1st Health Plan Administrative Services, Inc. | 46-2680154 | AZ | |
| One Care by Care1st Health Plans of Arizona, Inc. | 06-1742685 | AZ | |
| WellCare Health Insurance Company of Washington, Inc. | 83-3166908 | WA | 16570 |
| WellCare Health Insurance Company of Wisconsin, Inc. | 83-3310218 | WI | 16568 |
| WellCare of Puerto Rico, Inc. | 66-0888149 | PR | |
| WellCare of North Carolina, Inc. | 82-5488080 | NC | 16547 |
| WellCare Health Plans of Arizona, Inc. | 82-3169616 | AZ | 16253 |
| WellCare Health Insuance Company of America | 82-4247084 | AR | 16343 |
| WellCare National Health Insurance Company | 82-5127096 | TX | 16342 |
| WellCare Health Insurance Company of New Hampshire, Inc. | 83-3091673 | NH | 16516 |
| Meridian Management Company, LLC (a/k/a Meridian Administration Company, LLC) | 26-4004494 | MI | |
| Meridian Nerwork Services, LLC | | MI | |
| MeridianRx, LLC | 27-1339224 | MI | |
| MeridianRx IPA, LLC | 32-0408908 | NY | |
| MeridianRx of Indiana, LLC | 83-3612209 | MI | |
| WellCare of Michigan Holding Company | 26-4004578 | MI | |
| Meridian Health Plan of Michigan, Inc. | 38-3253977 | MI | 52563 |
| Meridian Health Plan of Illinois, Inc. | 20-3209671 | IL | 13189 |
| Universal American Corp. | 27-4683816 | DE | |
| Universal American Holdings, LLC | 45-1352914 | DE | |
| Universal American Financial Services, Inc. | 95-3800329 | DE | |
| Premier Marketing Group, LLC | 58-2633295 | DE | |
| Penn Marketing America, LLC | 95-3623226 | DE | |
| Worlco Management Services, Inc. | 23-1913528 | NY | |
| UAM Agent Services Corp. | 42-0989096 | IA | |
| APS Parent,Inc. | 45-4644722 | DE | |
| UAM/APS Holding Corp. | 26-0153606 | DE | |
| APS Healthcare, Inc. | 54-1602622 | DE | |
| APS Healthcare Holdings, Inc. | 52-2134236 | DE | |
| American Progressive Life and Health Insurance Company of New York | 13-1851754 | NY | 80624 |
| Quincy Coverage Corporation | 13-3491681 | NY | |
| Heritage Health Systems, Inc. | 62-1517194 | TX | |
| SelectCare of Texas, Inc. | 62-1819658 | TX | 10096 |
| Heritage Health Systems of Texas, Inc. | 76-0459857 | TX | |
| Golden Triangle Physician Alliance | 62-1694548 | TX | |
| Heritage Physician Networks | 76-0560730 | TX | |
| SelectCare Health Plans, Inc. | 74-3141949 | TX | 10768 |
| HHS Texas Management, LP (99.1%) | 76-0500963 | TX | |

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

## PART 1 - ORGANIZATIONAL CHART

| | | |
|---|---|---|
| HHS Texas Management, Inc. | 76-0500964 | TX |
| HHS Texas Management, LP. (0.9%) | 76-0500963 | TX |
| Collaborative Health Systems, LLC | 90-0779287 | NY |
| Accountable Care Coalition of Georgia , LLC (51%) | 45-5481108 | GA |
| Accountable Care Coaltion of Central Georgia, LLC (51%) | 45-5510251 | GA |
| Accountable Care Coalition of Chesapeake, LLC (51%) | 81-2588974 | MD |
| Accountable Care Coalition of DeKalb, LLC (80%) | 45-4537668 | GA |
| Accountable Care Coalition of Mississippi, LLC (51%) | 46-2881180 | MS |
| Accountable Care Coalition of Mount Kisco, LLC (51%) | 45-4105836 | NY |
| Accountable Care Coalition of North Texas, LLC (51%) | 45-4552802 | TX |
| Accountable Care Coalition of Northeast Georgia, LLC (51%) | 47-3894436 | GA |
| Accountable Care Coalition of Northwest Florida, LLC (51%) | 46-4106526 | FL |
| Accountable Care Coalition of Southeast Physician Partners, LLC | 47-3913308 | SC |
| Accountable Care Coaliton of Southeast Texas, Inc. | 47-3842552 | TX |
| Accountable Care Colation of Southeast Wisconsin, LLC (51) | 45-4113610 | WI |
| Accountable Care Coalition of Syracuse, LLC (51%) | 45-4546234 | NY |
| Accountable Care Coalition of Texas, Inc. | 45-2742298 | TX |
| AWC of Syracuse, Inc. | 47-2346408 | NY |
| Chrysalis Medical Services, LLC (51%) | 30-0803845 | NJ |
| Collaborative Health Systems of Maryland, LLC (50%) | 81-3365375 | MD |
| Collaborative Health Systems of Virginia, LLC | 81-3306594 | VA |
| Accountable Care Coalition of Maryland, LLC (51%) | 45-4119736 | MD |
| Accountable Care Coalition of Maryland Primary Care, LLC (51%) | 45-5449147 | MD |
| Essential Care Partners, LLC (51%) | 45-4561546 | TX |
| Hudson Accountable Care, LLC (51%) | 47-3923394 | NY |
| Maryland Collaborative Care, LLC (51%) | 90-0855950 | MD |
| Mid-Atlantic Collaborative Care, LLC (51%) | 81-2704355 | MD |
| Northern Maryland Collaborative Care, LLC (51%) | 45-5626871 | MD |
| Accountable Care Coalition of Arizona, LLC | 82-1246845 | AZ |
| Accountable Care Coalition of Community Health Centers, LLC (51%) | 82-1681146 | TX |
| Accountable Care Coalition of Community Health Centers II, LLC | 82-1669422 | TX |
| Accountable Care Coalition of Southeast Partners, LLC (51%) | 82-1623920 | GA |
| Accountable Care Coalition of Hawaii LLC | 82-1558080 | HI |
| Virginia Collaborative Care, LLC (51%) | 45-5439406 | VA |
| Accountable Care Coalition of Florida Partners, LLC | 84-2217098 | FL |
| Maryland Collaborative Care Transformation Organization, Inc. | 82-1280079 | DE |
| Accountable Care Coalition of New Jersey, Inc. (51%) | 82-1263227 | NJ |
| Accountable Care Coaliton of North West Region, LLC | 82-1604548 | OR |
| Accoutable Care Coalition of Northwest Region II, LLC | 82-1698885 | OR |
| Accountable Care Coalition of Northeast Partners, LLC | 82-0727997 | PA |
| Accountable Care Coalition of Tennessee, LLC (51%) | 82-1219279 | TN |
| Accountable Care Coalition Direct Contracting, LLC (51%) | 84-2574901 | FL |

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

## PART 1 - ORGANIZATIONAL CHART

| | | | |
|---|---|---|---|
| QCA Healthplan, Inc. | 71-0794605 | AR | 95448 |
| Qualchoice Life and Health Insurance Company | 71-0386640 | AR | 70998 |
| Hudson Acquisition, LLC | 83-3502610 | TX | |
| HealthSmart Benefits Management, LLC | 27-1300475 | TX | |
| Parker LP, LLC | 20-2387587 | NV | |
| HealthSmart Preferred Care II, LP (99%) | 75-2508316 | TX | |
| HealthSmart Primary Care Clinics, LP (99%) | 20-3394046 | TX | |
| HealthSmart Care Management Solutions, LP (99%) | 75-2960859 | TX | |
| HealthSmart Information Systems, Inc. | 75-2727437 | TX | |
| HealthSmart Benefit Solutions, Inc. | 36-4099199 | IL | |
| HealthSmart Preferred Network II, Inc | 06-1621470 | DE | |
| HealthSmart Rx Solutions, Inc. | 34-1635597 | OH | |
| Mauli Ola Health and Wellness, Inc. | | HI | |
| District Community Care Inc. | 84-4119570 | DC | |
| Centene Institute for Advanced Health Education, LLC | 84-5160960 | DE | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 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 | N | |
| 01295 | Centene Corporation | 71013 | 39-0993433 | | | | Bankers Reserve Life Insurance Company of Wisconsin | WI | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 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 | Y | |
| 01295 | Centene Corporation | 12315 | 20-3174593 | | | | Peach State Health Plan, Inc. | GA | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-2860967 | | | | Health Plan Real Estate Holding, Inc. | MO | NIA | Peach State Health Plan, Inc. | Ownership | 21.0 | Centene Corporation | Y | |
| 01295 | Centene Corporation | 15713 | 46-4829006 | | | | Iowa Total Care, Inc. | IA | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 11834 | 32-0045282 | | | | Buckeye Community Health Plan, Inc. | OH | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-2860967 | | | | Health Plan Real Estate Holding, Inc. | MO | NIA | Buckeye Community Health Plan, Inc. | Ownership | 18.0 | Centene Corporation | Y | |
| 01295 | Centene Corporation | 12959 | 20-5693998 | | | | Absolute Total Care, Inc. | SC | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-2860967 | | | | Health Plan Real Estate Holding, Inc. | MO | NIA | Absolute Total Care, Inc. | Ownership | 1.0 | Centene Corporation | Y | |
| 01295 | Centene Corporation | 95831 | 39-1821211 | | | | Coordinated Care Corporation d/b/a Managed Health Services | IN | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 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 | Y | |
| 01295 | Centene Corporation | 00000 | 46-5523218 | | | | Healthy Washington Holdings, Inc. | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 15352 | 46-2578279 | | | | Coordinated Care of Washington, Inc. | WA | IA | Healthy Washington Holdings, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 96822 | 39-1678579 | | | | Managed Health Services Insurance Corp | WI | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-2860967 | | | | Health Plan Real Estate Holding, Inc. | MO | NIA | Managed Health Services Insurance Corp | Ownership | 2.0 | Centene Corporation | Y | |
| 01295 | Centene Corporation | 60078 | 86-0819817 | | | | Hallmark Life Insurance Co. | AZ | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 95647 | 74-2770542 | | | | Superior HealthPlan, Inc. | TX | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-2860967 | | | | Health Plan Real Estate Holding, Inc. | MO | NIA | Superior HealthPlan, Inc. | Ownership | 21.0 | Centene Corporation | Y | |
| 01295 | Centene Corporation | 00000 | 27-0916294 | | | | Healthy Louisiana Holdings LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 13970 | 27-1287287 | | | | Louisiana Healthcare Connections, Inc. | LA | IA | Healthy Louisiana Holdings LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 13923 | 20-8570212 | | | | Magnolia Health Plan Inc. | MS | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 26-0557093 | | | | Sunshine Health Holding LLC | FL | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 13148 | 20-8937577 | | | | Sunshine State Health Plan, Inc. | FL | IA | Sunshine Health Holding LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 14100 | 45-1294925 | | | | Kentucky Spirit Health Plan, Inc. | KY | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-5070230 | | | | Healthy Missouri Holding, Inc. | MO | NIA | Centene Corporation | Ownership | 95.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 14218 | 45-2798041 | | | | Home State Health Plan, Inc. | MO | IA | Healthy Missouri Holding, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-2860967 | | | | Health Plan Real Estate Holding, Inc. | MO | NIA | Home State Health Plan, Inc. | Ownership | 5.0 | Centene Corporation | Y | |
| 01295 | Centene Corporation | 14345 | 45-3276702 | | | | Sunflower State Health Plan, Inc. | KS | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 14226 | 45-4792498 | | | | Granite State Health Plan, Inc. | NH | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-0907261 | | | | California Health and Wellness Plan | CA | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 10769 | 30-0312489 | | | | Michigan Complete Health, Inc. | MI | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16351 | 45-5583511 | | | | Western Sky Community Care, Inc. | NM | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 26-1849394 | | | | Tennessee Total Care, Inc. | TN | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16143 | 20-4761189 | | | | SilverSummit Healthplan, Inc. | NV | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 22-3292245 | | | | University Health Plans, Inc. | NJ | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-0483299 | | | | Agate Resources, Inc. | OR | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 12559 | 42-1694349 | | | | Trillium Community Health Plan, Inc. | OR | IA | Agate Resources, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 15902 | 47-5123293 | | | | Nebraska Total Care, Inc. | NE | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16041 | 47-5340613 | | | | Pennsylvania Health & Wellness, Inc. | PA | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 15912 | 47-5664832 | | | | Superior HealthPlan Community Solutions, Inc. | TX | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 15927 | 47-5667095 | | | | Sunshine Health Community Solutions, Inc. | FL | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16112 | 47-5664342 | | | | Buckeye Health Plan Community Solutions, Inc. | OH | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16130 | 81-1282251 | | | | Arkansas Health & Wellness Health Plan, Inc. | AR | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 38-4042368 | | | | Arkansas Total Care Holding Company, LLC | DE | NIA | Arkansas Health & Wellness Health Plan, Inc. | Ownership | 49.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16256 | 82-2649097 | | | | Arkansas Total Care, Inc. | AR | IA | Arkansas Total Care Holding Company, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 81-3121527 | | | | Oklahoma Complete Health Inc. | OK | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | 20-4980875 | | | | Bridgeway Health Solutions, LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16310 | 20-4980818 | | | | Bridgeway Health Solutions of Arizona Inc. | AZ | IA | Bridgeway Health Solutions, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 36-2979209 | | | | Celtic Group, Inc. | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 80799 | 06-0641618 | | | | Celtic Insurance Company | IL | IA | Celtic Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 15762 | 35-2525384 | | | | Ambetter of Magnolia Inc. | MS | IA | Celtic Insurance Company | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 15729 | 36-4802632 | | | | Ambetter of Peach State Inc. | GA | IA | Celtic Insurance Company | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 27-2221367 | | | | Novasys Health, Inc. | DE | NIA | Celtic Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 26-4278205 | | | | CeltiCare Health Plan Holdings LLC | DE | NIA | Celtic Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 13632 | 26-4818440 | | | | CeltiCare Health Plan of Massachusetts, Inc. | MA | IA | CeltiCare Health Plan Holdings LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 39-1864073 | | | | Centene Management Company LLC | WI | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-0057283 | | | | CMC Real Estate Co. LLC | DE | NIA | Centene Management Company LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 26-4094682 | | | | Centene Center LLC | DE | NIA | CMC Real Estate Co. LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-1816153 | | | | Centene Center I, LLC | DE | NIA | CMC Real Estate Co. LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 47-5156015 | | | | Centene Center II, LLC | DE | NIA | CMC Real Estate Co. LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-2761995 | | | | Illinois Health Practice Alliance, LLC | DE | NIA | Centene Management Company LLC | Ownership | 50.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 84-3023173 | | | | Integrated Care Network of Florida, LLC | DE | NIA | Centene Management Company LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-2798132 | | | | Lifeshare Management Group, LLC | NH | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 38-4042368 | | | | Arkansas Total Care Holding Company, LLC | DE | NIA | Lifeshare Management Group, LLC | Ownership | 25.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-2074217 | | | | CCTX Holdings, LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 74-2810404 | | | | Centene Company of Texas, LP | TX | NIA | CCTX Holdings, LLC | Ownership | 1.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-2074277 | | | | Centene Holdings, LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 74-2810404 | | | | Centene Company of Texas, LP | TX | NIA | Centene Holdings, LLC | Ownership | 99.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 43-1795436 | | | | MHS Travel & Charter, Inc. | WI | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-4855483 | | | | Health Care Enterprises, LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | 74-2892993 | | | | Integrated Mental Health Management, L.L.C. | TX | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 74-2785494 | | | | Integrated Mental Health Services | TX | NIA | Integrated Mental Health Management, L.L.C. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 22-3889471 | | | | Envolve Holdings, LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 68-0461584 | | | | Cenpatico Behavioral Health, LLC | CA | NIA | Envolve Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-1624120 | | | | Cenpatico Behavioral Health of Arizona, LLC | AZ | NIA | Cenpatico Behavioral Health, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 80-0879942 | | | | Cenpatico of Arizona Inc. | AZ | NIA | Cenpatico Behavioral Health of Arizona, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 37-1788565 | | | | Envolve, Inc. | DE | NIA | Envolve Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 47-3454898 | | | | Envolve - New York, Inc. | NY | NIA | Envolve, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 06-1476380 | | | | Envolve PeopleCare, Inc. | DE | NIA | Envolve Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 47-2516714 | | | | LiveHealthier, Inc. | DE | NIA | Envolve PeopleCare, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 61-1846191 | | | | Envolve Benefits Options, Inc. | DE | NIA | Envolve Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-4730341 | | | | Envolve Vision Benefits, Inc. | DE | NIA | Envolve Benefits Options, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 36-4520004 | | | | Envolve Captive Insurance Company, Inc. | SC | NIA | Envolve Vision Benefits, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 95302 | 75-2592153 | | | | Envolve Vision of Texas, Inc. | TX | IA | Envolve Vision Benefits, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-4773088 | | | | Envolve Vision, Inc. | DE | NIA | Envolve Vision Benefits, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 83-2460878 | | | | Envolve Vision IPA of New York, Inc. | NY | NIA | Envolve Vision Benefits, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 65-0094759 | | | | Envolve Vision of Florida, Inc. | FL | NIA | Envolve Vision Benefits, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-4861241 | | | | Envolve Total Vision, Inc. | DE | NIA | Envolve Vision Benefits, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-2908582 | | | | Envolve Optical, Inc. | DE | NIA | Envolve Vision Benefits, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-2783884 | | | | Envolve Dental, Inc. | DE | NIA | Envolve Benefits Options, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 81-2969330 | | | | Envolve Dental of Florida, Inc. | FL | NIA | Envolve Dental, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16106 | 81-2796896 | | | | Envolve Dental of Texas, Inc. | TX | IA | Envolve Dental, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 83-1464482 | | | | Envolve Dental IPA of New York, Inc. | NY | NIA | Envolve Dental, Inc. | Ownership | 100.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | 77-0578529 | | | | Envolve Pharmacy Solutions, Inc. | DE | NIA | Envolve Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 76-0511700 | | | | LBB Industries, Inc. | TX | NIA | Envolve Pharmacy Solutions, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 75-2612875 | | | | RX Direct, Inc. | TX | NIA | Envolve Pharmacy Solutions, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-2307356 | | | | Envolve Pharmacy IPA, LLC | NY | NIA | Envolve Pharmacy Solutions, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 90-0636938 | | | | Casenet LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Casenet S.R.O. | CZE | NIA | Casenet LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-5316510 | | | | MHM Services, Inc. | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 90-0766502 | | | | Centurion LLC | DE | NIA | MHM Services, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 81-4228054 | | | | Centurion of Arizona, LLC | AZ | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 47-1686283 | | | | Centurion of Vermont, LLC | VT | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 47-2967381 | | | | Centurion of Mississippi, LLC | MS | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 30-0752651 | | | | Centurion of Tennessee, LLC | TN | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-2717814 | | | | Centurion of Minnesota, LLC | MN | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 81-1161492 | | | | Centurion Correctional Healthcare of New Mexico, LLC | NM | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 81-0687470 | | | | Centurion of Florida, LLC | FL | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 81-4938030 | | | | Centurion of Maryland, LLC | MD | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-2268901 | | | | Centurion of Alabama, LLC | AL | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-3128848 | | | | Centurion of Georgia, LLC | GA | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-4735175 | | | | Centurion Detention Health Services, LLC | DE | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-4823469 | | | | Centurion of New Hampshire, LLC | DE | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-4823469 | | | | Centurion of Pennsylvania, LLC | PA | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-4839132 | | | | Centurion of West Virginia, LLC | WV | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 84-3436283 | | | | Centurion of Kansas, LLC | KS | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 84-3767794 | | | | Centurion of Delaware, LLC | DE | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | 84-3857653 | | | | Centurion of Wyoming, LLC | WY | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 54-1856340 | | | | MHM Correctional Services, LLC | DE | NIA | MHM Services, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 51-0620904 | | | | MHM Services of California, LLC | CA | NIA | MHM Services, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 60-0002002 | | | | MHM Solutions, LLC | DE | NIA | MHM Services, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 26-1877007 | | | | Forensic Health Services, LLC. | DE | NIA | MHM Services, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-1734817 | | | | MHM Health Professionals, LLC | DE | NIA | MHM Services, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 27-3617766 | | | | Specialty Therapeutic Care Holdings, LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 73-1698808 | | | | Specialty Therapeutic Care, LP | TX | NIA | Specialty Therapeutic Care Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 73-1698807 | | | | Specialty Therapeutic Care, GP, LLC | TX | NIA | Specialty Therapeutic Care Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 73-1698808 | | | | Specialty Therapeutic Care, LP | TX | NIA | Specialty Therapeutic Care, GP, LLC | Ownership | 0.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 80-0856383 | | | | AcariaHealth Solutions, Inc. | DE | NIA | Specialty Therapeutic Care Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-2780334 | | | | AcariaHealth, Inc. | DE | NIA | Specialty Therapeutic Care Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 27-1599047 | | | | AcariaHealth Pharmacy #14, Inc. | CA | NIA | AcariaHealth, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-8192615 | | | | AcariaHealth Pharmacy #11, Inc. | TX | NIA | AcariaHealth, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 27-2765424 | | | | AcariaHealth Pharmacy #12, Inc. | NY | NIA | AcariaHealth, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 26-0226900 | | | | AcariaHealth Pharmacy #13, Inc. | CA | NIA | AcariaHealth, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 13-4262384 | | | | AcariaHealth Pharmacy, Inc. | CA | NIA | AcariaHealth, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 27-3707698 | | | | HomeScripts.com, LLC | MI | NIA | AcariaHealth, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-8235695 | | | | New York Rx, Inc. | NY | NIA | AcariaHealth, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-0873587 | | | | Foundation Care, LLC | MO | NIA | AcariaHealth, Inc. | Ownership | 80.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 27-0275614 | | | | U.S. Medical Management Holdings, Inc. | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 38-3153946 | | | | U.S. Medical Management, LLC | DE | NIA | U.S. Medical Management Holdings, Inc. | Ownership | 20.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 38-3153946 | | | | U.S. Medical Management, LLC | DE | NIA | Centene Corporation | Ownership | 80.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 31-1733889 | | | | RMED, LLC | FL | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | 47-2138680 | | | | IAH of Florida, LLC | FL | NIA | RMED, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 51-0581762 | | | | Heritage Home Hospice, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-2827613 | | | | Grace Hospice of Austin, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-1530070 | | | | ComfortBrook Hospice, LLC | OH | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-4996551 | | | | Comfort Hospice of Texas, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-2827526 | | | | Grace Hospice of San Antonio, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-0679248 | | | | Grace Hospice of Grand Rapids, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-0634905 | | | | Grace Hospice of Indiana, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-5080637 | | | | Grace Hospice of Virginia, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-5080567 | | | | Comfort Hospice of Missouri, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-1708834 | | | | Grace Hospice of Wisconsin, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 81-5129923 | | | | Grace Hospice of Illinois, LLC | IL | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 26-4435532 | | | | Seniorcorps Peninsula, LLC | VA | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 33-1179031 | | | | R&C Healthcare, LLC | TX | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-0861469 | | | | Pinnacle Senior Care of Missouri, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 03-0556422 | | | | Country Style Health Care, LLC | TX | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 14-1878333 | | | | Phoenix Home Health Care, LLC | DE | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 75-2635025 | | | | Traditional Home Health Services, LLC | TX | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 38-2751108 | | | | Family Nurse Care, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-5108540 | | | | Family Nurse Care II, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-3920947 | | | | Family Nurse Care of Ohio, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-4229858 | | | | Pinnacle Senior Care of Wisconsin, LLC | WI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 81-1565426 | | | | Pinnacle Senior Care of Indiana, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 76-0713516 | | | | Pinnacle Home Care, LLC | TX | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | 59-3519060 | | | | North Florida Health Services, Inc. | FL | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 47-1742728 | | | | Pinnacle Sr. Care of Kalamazoo, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-1734288 | | | | Hospice DME Company, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-4364776 | | | | Rapid Respiratory Services, LLC | DE | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-5735993 | | | | USMM Accountable Care Partners, LLC | DE | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 83-3534462 | | | | Pinnacle Senior Care of Illinois, LLC | IL | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 38-3176990 | | | | VPA, P.C. | MI | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 47-2159305 | | | | IAH of Michigan, PLLC | MI | NIA | VPA, P.C. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 47-2146160 | | | | IAH of Wisconsin, PLLC | MI | NIA | VPA, P.C. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-2386997 | | | | VPA of Texas | MI | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 35-2519603 | | | | IAH of Texas, PLLC | MI | NIA | VPA of Texas | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 36-4539790 | | | | Advantechs X-Ray Imaging Services, L.L.C. | TX | NIA | VPA of Texas | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 47-5208076 | | | | Health Net, LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 95-4402957 | | | | Health Net of California, Inc. | CA | NIA | Health Net, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 66141 | 73-0654885 | | | | Health Net Life Insurance Company | CA | IA | Health Net of California, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 98-0409907 | | | | Health Net Life Reinsurance Company | CYM | NIA | Health Net of California, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 95-4117722 | | | | Managed Health Network, LLC | DE | NIA | Health Net, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 95-3817988 | | | | Managed Health Network | CA | NIA | Managed Health Network, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 95-4146179 | | | | MHN Services, LLC | CA | NIA | Managed Health Network, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 68-0214809 | | | | Health Net Federal Services, LLC | DE | NIA | Health Net, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 42-1680916 | | | | MHN Government Services LLC | DE | NIA | Health Net Federal Services, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 90-0889803 | | | | MHN Government Services-Guam, Inc. | DE | NIA | MHN Government Services LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 90-0889825 | | | | MHN Government Services-International, Inc. | DE | NIA | MHN Government Services LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 90-0889815 | | | | MHN Government Services-Puerto Rico, Inc. | DE | NIA | MHN Government Services LLC | Ownership | 100.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | 88-0357895 | | | | Network Providers, LLC | DE | NIA | MHN Government Services LLC | Ownership | 10.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 35-2490375 | | | | Health Net Veterans, LLC | DE | NIA | MHN Government Services LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 88-0357895 | | | | Network Providers, LLC | DE | NIA | MHN Government Services LLC | Ownership | 90.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 95800 | 93-1004034 | | | | Health Net Health Plan of Oregon, Inc. | OR | IA | Health Net, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 54-2174068 | | | | Health Net Community Solutions, Inc. | CA | NIA | Health Net, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 95206 | 36-3097810 | | | | Health Net of Arizona, Inc. | AZ | IA | Health Net, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 68-0295375 | | | | Health Net Pharmaceutical Services | CA | NIA | Health Net, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 15895 | 81-1348826 | | | | Health Net Community Solutions of Arizona, Inc. | AZ | IA | Health Net, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-2616037 | | | | Health Net Access, Inc. | AZ | NIA | Health Net, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-8630006 | | | | MHS Consulting, International, Inc. | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 83-1047281 | | | | Centene International Ventures, LLC | DE | NIA | MHS Consulting, International, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 27-2075447 | | | | MHS European Holdings s.a.r.l. | LUX | NIA | MHS Consulting, International, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | PRIMEROSALUD, S.L. | ESP | NIA | MHS Consulting, International, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Ribera Salud, S.A. | ESP | NIA | PRIMEROSALUD, S.L. | Ownership | 90.1 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Torrevieja Salud UTE | ESP | NIA | Ribera Salud, S.A. | Ownership | 65.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Ribera Salud II | ESP | NIA | Ribera Salud, S.A. | Ownership | 96.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | ERESCANNER | ESP | NIA | Ribera Salud, S.A. | Ownership | 15.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | BR Salud UTE | ESP | NIA | Ribera Salud, S.A. | Ownership | 45.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Marina Salud | ESP | NIA | Ribera Salud, S.A. | Ownership | 35.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Villa Maria del Triuinfo Salud S.A. C. | PER | NIA | Ribera Salud, S.A. | Ownership | 5.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Callao Salud S.A.C. | PER | NIA | Ribera Salud, S.A. | Ownership | 5.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Infraestructuras y Servicios de Alzira S.L. | ESP | NIA | Ribera Salud, S.A. | Ownership | 50.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Elche-Crevillente Salud | ESP | NIA | Ribera Salud, S.A. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | B2B Salud | ESP | NIA | Ribera Salud, S.A. | Ownership | 100.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | | | | | B2B Gestion integral, S.L. | ESP | NIA | B2B Salud | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | B2B Lab,S.L. | ESP | NIA | B2B Gestion integral, S.L. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Ribera Salud proyectos S.L. | ESP | NIA | Ribera Salud, S.A. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Ribera-Quilpro UTE | ESP | NIA | Ribera Salud, S.A. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Ribera Salud Infraestructuras S.L.U. | ESP | NIA | Ribera Salud, S.A. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Pro Diagnostic Group, a.s. | SVK | NIA | Ribera Salud Infraestructuras S.L.U. | Ownership | 66.4 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Pro RTG | SVK | NIA | Pro Diagnostic Group, a.s. | Ownership | 80.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | DR Magnet | SVK | NIA | Pro Diagnostic Group, a.s. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Pro Magnet | SVK | NIA | Pro Diagnostic Group, a.s. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Medicina NZ | SVK | NIA | Pro Diagnostic Group, a.s. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | MR Poprad | SVK | NIA | Pro Diagnostic Group, a.s. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | CT Poprad | SVK | NIA | MR Poprad | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | MR Zilina | SVK | NIA | Pro Diagnostic Group, a.s. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Pro Magnet CZ | CZE | NIA | Pro Diagnostic Group, a.s. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Progress Medical a.s. | CZE | NIA | Pro Magnet CZ | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | OB Klinika, a.s. | CZE | NIA | Progress Medical a.s. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | OB Care, s.r.o. | CZE | NIA | Progress Medical a.s. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Hospital Povisa, S.A. | ESP | NIA | Ribera Salud, S.A. | Ownership | 93.3 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Ribera Salud Tecnologias S.L.U. | ESP | NIA | Ribera Salud, S.A. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Torrevieja Salud S.L.U. | ESP | NIA | Ribera Salud, S.A. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Torrevieja Salud UTE | ESP | NIA | Torrevieja Salud S.L.U. | Ownership | 35.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Torrejon Salud, S.A. | ESP | NIA | PRIMEROSALUD, S.L. | Ownership | 89.5 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | MH Services International Holdings (UK) Limited | GBR | NIA | MHS Consulting, International, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | MH Services International (UK) Limited | GBR | NIA | MH Services International Holdings (UK) Limited | Ownership | 100.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | | | | | Operose Health Limited | GBR | NIA | MH Services International (UK) Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Operose Health (Group) Limited | GBR | NIA | MH Services International (UK) Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | The Practice Properties Limited | GBR | NIA | Operose Health (Group) Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Operose Health (Group) UK Limited | GBR | NIA | Operose Health (Group) Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | The Practice Surgeries Limited | GBR | NIA | Operose Health (Group) Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Phoenix Primary Care Limited | GBR | NIA | The Practice Surgeries Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Phoenix Primary (South) Limited | GBR | NIA | The Practice Surgeries Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle Health Holdings Limited | GBR | NIA | MH Services International (UK) Limited | Ownership | 40.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle Health 1 Limited | GBR | NIA | Circle Health Holdings Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle Health 2 Limited | GBR | NIA | Circle Health 1 Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle Holdings Limited | JEY | NIA | Circle Health 2 Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle Partnership Limited | VGB | NIA | Circle Holdings Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle International PLC | GBR | NIA | Circle Holdings Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle Health Limited | GBR | NIA | Circle International PLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Health Properties Limited | JEY | NIA | Circle Health Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Health Properties (South Manchester) Limited | JEY | NIA | Health Properties Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Nations Healthcare Limited | GBR | NIA | Circle Health Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle Nottingham Limited | GBR | NIA | Circle Health Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle Rehabilitation Services | GBR | NIA | Circle Health Limited | Ownership | 90.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle Hospital (Bath) Limited | GBR | NIA | Circle Health Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle Hospital (Reading) Limited | GBR | NIA | Circle Health Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle Clinical Services Limited | GBR | NIA | Circle Health Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle Birmingham Limited | GBR | NIA | Circle Health Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle Harmony Health Limited | CHN | NIA | Circle Health Limited | Ownership | 50.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | | | | | Shanghai Circle Harmony Hospital Management | CHN | NIA | Circle Harmony Health Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle Health 3 Limited | GBR | NIA | Circle Health 2 Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Circle Health 4 Limited | GBR | NIA | Circle Health 3 Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | GHG Healthcare Holdings Limited | GBR | NIA | Circle Health 4 Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | General Healthcare Group Limited | GBR | NIA | GHG Healthcare Holdings Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | General Healthcare Holdings 2 Limited | GBR | NIA | General Healthcare Group Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | General Healthcare Holdings 3 Limited | GBR | NIA | General Healthcare Holdings 2 Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | North West Cancer Clinic Limited | GBR | NIA | General Healthcare Holdings 3 Limited | Ownership | 90.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | GHG (DB) Pension Trustees | GBR | NIA | General Healthcare Holdings 3 Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | GHG Mount Alvernia Hospital Limited | GBR | NIA | General Healthcare Holdings 3 Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Generale de Sante International Limited | GBR | NIA | General Healthcare Holdings 3 Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | BMI Southend Private Hospital Limited | GBR | NIA | General Healthcare Holdings 3 Limited | Ownership | 50.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | BMI Imaging Clinic Limited | GBR | NIA | General Healthcare Holdings 3 Limited | Ownership | 50.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Mount Alvernia PET CT Limited | GBR | NIA | BMI Imaging Clinic Limited | Ownership | 73.5 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | GHG Intermediate Holdings Limited | GBR | NIA | General Healthcare Holdings 2 Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | General Healthcare Holdings 4 Limited | GBR | NIA | GHG Intermediate Holdings Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | BMI Healthcare Limited | GBR | NIA | GHG Intermediate Holdings Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | 3SH Limited | GBR | NIA | BMI Healthcare Limited | Ownership | 50.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | BMI Hospital Decontamination Limited | GBR | NIA | BMI Healthcare Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Three Shires Hospital LP | GBR | NIA | BMI Healthcare Limited | Ownership | 50.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | The Pavilion Clinic Ltd | GBR | NIA | The Pavilion Clinic Ltd | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | GHG Leasing Limited | GBR | NIA | GHG Intermediate Holdings Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | South Cheshire SPV Limited | GBR | NIA | GHG Intermediate Holdings Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Bishopswood SPV Limited | GBR | NIA | GHG Intermediate Holdings Limited | Ownership | 100.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | | | | | Runnymeade SPV Limited | GBR | NIA | GHG Intermediate Holdings Limited | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Centene Europe Finance Company Limited | MLT | NIA | MHS Consulting, International, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-1172163 | | | | Centene Health Plan Holdings, Inc. | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16395 | 82-5032556 | | | | Ambetter of North Carolina, Inc. | NC | IA | Centene Health Plan Holdings, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-2699483 | | | | Carolina Complete Health Holding Company Partnership | DE | NIA | Centene Health Plan Holdings, Inc. | Ownership | 80.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16526 | 82-2699332 | | | | Carolina Complete Health, Inc. | NC | IA | Carolina Complete Health Holding Company Partnership | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-3380290 | | | | New York Quality Healthcare Corporation | NY | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 55-0878053 | | | | Salus Administrative Services, Inc. | NY | NIA | New York Quality Healthcare Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-0802846 | | | | Salus IPA, LLC | NY | NIA | Salus Administrative Services, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-4670677 | | | | Calibrate Acquisition Co. | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 47-4179393 | | | | Community Medical Holdings Corp. | DE | NIA | Calibrate Acquisition Co. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-3485489 | | | | Community Medical Holdings Corp. | DE | NIA | Community Medical Holdings Corp. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-3191569 | | | | Access Medical Group of North Miami Beach, Inc. | FL | NIA | Community Medical Holdings Corp. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-3191719 | | | | Access Medical Group of Miami, Inc. | FL | NIA | Community Medical Holdings Corp. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-3192283 | | | | Access Medical Group of Hialeah, Inc. | FL | NIA | Community Medical Holdings Corp. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-3199819 | | | | Access Medical Group of Westchester, Inc. | FL | NIA | Community Medical Holdings Corp. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-3505196 | | | | Access Medical Group of Opa-Locka, Inc. | FL | NIA | Community Medical Holdings Corp. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-3192955 | | | | Access Medical Group of Perrine, Inc. | FL | NIA | Community Medical Holdings Corp. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-3192366 | | | | Access Medical Group of Florida City, Inc. | FL | NIA | Community Medical Holdings Corp. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-1737078 | | | | Access Medical Group of Tampa, Inc. | FL | NIA | Community Medical Holdings Corp. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-1750978 | | | | Access Medical Group of Tampa II, Inc. | FL | NIA | Community Medical Holdings Corp. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-1773315 | | | | Access Medical Group of Tampa III, Inc. | FL | NIA | Community Medical Holdings Corp. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 84-2750188 | | | | Access Medical Group of Lakeland, LLC | FL | NIA | Community Medical Holdings Corp. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-4883921 | | | | Interpreta Holdings, Inc. | DE | NIA | Centene Corporation | Ownership | 80.1 | Centene Corporation | N | |

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

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|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | 46-5517858 | | | | Interpreta, Inc. | DE | NIA | Interpreta Holdings, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-4581788 | | | | Patriots Holding Co | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | RxAdvance Corporation | DE | NIA | Patriots Holding Co | Ownership | 30.3 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 84-3707689 | | | | Centene Venture Company Alabama Health Plan, Inc. | AL | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16613 | 83-2446307 | | | | Centene Venture Company Michigan | MI | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 32-2434596 | | | | Next Door Neighbors, LLC | DE | NIA | Centene Corporation | Ownership | 60.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 83-2381790 | | | | Next Door Neighbors, Inc. | DE | NIA | Next Door Neighbors, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16505 | 83-2425735 | | | | Centene Venture Company Illinois | IL | IA | Next Door Neighbors, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16528 | 83-2409040 | | | | Centene Venture Company Kansas | KS | IA | Next Door Neighbors, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16499 | 83-2434596 | | | | Centene Venture Company Florida | FL | IA | Next Door Neighbors, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 84-3679376 | | | | Centene Venture Company Indiana, Inc. | IN | NIA | Next Door Neighbors, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 84-3724374 | | | | Centene Venture Company Tennessee | TN | NIA | Next Door Neighbors, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | HealthEC, LLC | | NIA | Centene Corporation | Ownership | 12.8 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 83-4144116 | | | | Arch Personalized Medicine Initiative, LLC | MO | NIA | Centene Corporation | Ownership | 50.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 83-4205348 | | | | Social Health Bridge, LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 84-6403386 | | | | Social Health Bridge Trust | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 83-4405939 | | | | WellCare Health Plans, Inc. | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 04-3669698 | | | | WCG Health Management, Inc. | DE | NIA | WellCare Health Plans, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 14-1647239 | | | | The WellCare Management Group, Inc. | NY | NIA | WCG Health Management, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 95534 | 14-1676443 | | | | WellCare of New York, Inc. | NY | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 95310 | 06-1405640 | | | | WellCare of Connecticut, Inc. | CT | IA | WellCare of New York, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16329 | 81-5442932 | | | | WellCare of Mississippi, Inc. | MS | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16763 | 82-0664467 | | | | WellCare of Virginia, Inc. | VA | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16117 | 81-3299281 | | | | WellCare of Oklahoma, Inc. | OK | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | 84-3721013 | | | | WellCare Health Insurance Company of Nevada, Inc. | NV | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16692 | 84-3739752 | | | | WellCare Health Insurance of Southwest, Inc. | AZ | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 95081 | 59-2583622 | | | | WellCare of Florida, Inc. | FL | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 10760 | 20-2103320 | | | | WellCare of Georgia, Inc. | GA | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 14404 | 45-3617189 | | | | WellCare of Kansas, Inc. | KS | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 12964 | 20-8058761 | | | | WellCare of Texas, Inc. | TX | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 12749 | 20-3562146 | | | | WellCare of Ohio, Inc, | OH | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 11775 | 32-0062883 | | | | WellCare of South Carolina, Inc. | SC | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 13020 | 20-8017319 | | | | WellCare Health Plans of New Jersey, Inc. | NJ | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 81-1631920 | | | | WellCare of Pennsylvania, Inc. | PA | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 84-3547689 | | | | WellCare Health Plans of Massachusetts, Inc. | MA | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16752 | 84-4449030 | | | | WellCare Health Insurance Company of Oklahoma, Inc. | OK | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16753 | 84-3907795 | | | | WellCare Health Plans of Missouri, Inc. | MO | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 10155 | 20-2383134 | | | | WellCare Prescription Insurance, Inc. | FL | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16531 | 83-2797833 | | | | WellCare of Arkansas, Inc. | AR | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-4869374 | | | | WellCare Pharmacy Benefits Management, Inc. | DE | NIA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-8420512 | | | | Exactus Pharmacy Solutions, Inc. | DE | NIA | WellCare Pharmacy Benefits Management, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 98-0448921 | | | | Comprehensive Reinsurance, Ltd. | CYM | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 27-4293249 | | | | WellCare Health Plans of California, Inc. | CA | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16533 | 45-5154364 | | | | WellCare Health Plans of Tennessee, Inc. | TN | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 84-4709471 | | | | WellCare Health Insurance Company of New Jersey, Inc. | NJ | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 84-4664883 | | | | WellCare Health Insurance of Hawaii, Inc. | HI | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16766 | 84-4627844 | | | | WellCare Health Plans of Rhode Island, Inc. | RI | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16765 | 84-4649985 | | | | WellCare of Illinois, Inc. | IL | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | 59-3547616 | | | | Comprehensive Health Management, Inc. | FL | NIA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 10884 | 11-3197523 | | | | WellCare Health Insurance of New York, Inc. | NY | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 27-0386122 | | | | Ohana Health Plan, Inc. | HI | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 83-2840051 | | | | WellCare of Indiana, Inc. | IN | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-3236788 | | | | America's 1st Choice California Holdings, LLC | FL | NIA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-5327501 | | | | WellCare of California, Inc. | CA | IA | America's 1st Choice California Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 62-1832645 | | | | Windsor Health Group, Inc. | TN | NIA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16532 | 83-2276159 | | | | WellCare Health Insurance of Tennessee, Inc. | TN | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16515 | 83-2914327 | | | | WellCare of New Hampshire, Inc. | NH | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16514 | 83-2255514 | | | | WellCare Health Plans of Vermont, Inc. | VT | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16513 | 83-2126269 | | | | WellCare Health Insurance of Connecticut, Inc. | CT | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16571 | 83-2069308 | | | | WellCare of Washington, Inc. | WA | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 15510 | 47-0971481 | | | | WellCare Health Plans of Kentucky, Inc. | KY | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16239 | 82-1301128 | | | | WellCare of Alabama, Inc. | AL | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16344 | 82-3114517 | | | | WellCare of Maine, Inc. | ME | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 22-3391045 | | | | Harmony Health Systems Inc. | NJ | NIA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 36-4467676 | | | | Harmony Health Management, Inc. | NJ | NIA | Harmony Health Systems Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 11229 | 36-4050495 | | | | Harmony Health Plan, Inc. | IL | IA | Harmony Health Systems Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-3320236 | | | | Harmony Behavioral Health, Inc. | FL | NIA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-3262322 | | | | Harmony Behavioral Health IPA, Inc. | NY | NIA | Harmony Behavioral Health, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 64467 | 36-6069295 | | | | WellCare Health Insurance Company of Kentucky, Inc. | KY | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 83445 | 86-0269558 | | | | WellCare Health Insurance of Arizona, Inc. | AZ | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16548 | 83-3493160 | | | | WellCare Health Insurance of North Carolina, Inc. | NC | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 83-3333918 | | | | WellCare Health Insurance Company of Louisiana, Inc. | LA | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 16512 | 83-3525830 | | | | WellCare of Missouri Health Insurance Company, Inc. | MO | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16569 | 83-3351254 | | | | WellCare Health Plans of Wisconsin, Inc. | WI | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 57-1165217 | | | | Care 1st Health Plan of Arizona, Inc. | AZ | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-2680154 | | | | Care1st Health Plan Administrative Services, Inc. | AZ | IA | Care 1st Health Plan of Arizona, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 06-1742685 | | | | One Care by Care1st Health Plans of Arizona, Inc. | AZ | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16570 | 83-3166908 | | | | WellCare Health Insurance Company of Washington, Inc. | WA | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16568 | 83-3310218 | | | | WellCare Health Insurance Company of Wisconsin, Inc. | WI | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 66-0888149 | | | | WellCare of Puerto Rico, Inc. | PR | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16547 | 82-5488080 | | | | WellCare of North Carolina, Inc. | NC | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16253 | 82-3169616 | | | | WellCare Health Plans of Arizona, Inc. | AZ | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16343 | 82-4247084 | | | | WellCare Health Insuance Company of America | AR | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16342 | 82-5127096 | | | | WellCare National Health Insurance Company | TX | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 16516 | 83-3091673 | | | | WellCare Health Insurance Company of New Hampshire, Inc. | NH | IA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 26-4004494 | | | | Meridian Management Company, LLC (a/k/a Meridian Administration Company, LLC) | MI | NIA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Meridian Nerwork Services, LLC | MI | NIA | Meridian Management Company, LLC (a/k/a Meridian Administration Company, LLC) | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 27-1339224 | | | | MeridianRx, LLC | MI | NIA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 32-0408908 | | | | MeridianRx IPA, LLC | NY | NIA | MeridianRx, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 83-3612209 | | | | MeridianRx of Indiana, LLC | MI | NIA | MeridianRx, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 26-4004578 | | | | WellCare of Michigan Holding Company | MI | NIA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 52563 | 38-3253977 | | | | Meridian Health Plan of Michigan, Inc. | MI | IA | WellCare of Michigan Holding Company | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 13189 | 20-3209671 | | | | Meridian Health Plan of Illinois, Inc. | IL | IA | WellCare of Michigan Holding Company | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 27-4683816 | | | | Universal American Corp. | DE | NIA | The WellCare Management Group, Inc. | Ownership | 100.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | 45-1352914 | | | | Universal American Holdings, LLC | DE | NIA | Universal American Corp | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 95-3800329 | | | | Universal American Financial Services, Inc | DE | NIA | Universal American Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 58-2633295 | | | | Premier Marketing Group, LLC | DE | NIA | Universal American Financial Services, Inc | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 95-3623226 | | | | Penn Marketing America, LLC | DE | NIA | Universal American Financial Services, Inc | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 23-1913528 | | | | Worlco Management Services, Inc | NY | NIA | Universal American Financial Services, Inc | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 42-0989096 | | | | UAM Agent Services Corp | IA | NIA | Universal American Financial Services, Inc | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-4644722 | | | | APS Parent, Inc | DE | NIA | Universal American Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 26-0153606 | | | | UAM/APS Holding Corp | DE | NIA | APS Parent, Inc | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 54-1602622 | | | | APS Healthcare, Inc | DE | NIA | UAM/APS Holding Corp | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 52-2134236 | | | | APS Healthcare Holdings, Inc | DE | NIA | APS Healthcare, Inc | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 80624 | 13-1851754 | | | | American Progressive Life and Health Insurance Company of New York | NY | IA | Universal American Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 13-3491681 | | | | Quincy Coverage Corporation | NY | NIA | Universal American Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 62-1517194 | | | | Heritage Health Systems, Inc | TX | NIA | Universal American Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 10096 | 62-1819658 | | | | SelectCare of Texas, Inc | TX | IA | Heritage Health Systems, Inc | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 76-0459857 | | | | Heritage Health Systems of Texas, Inc | TX | NIA | Heritage Health Systems, Inc | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 62-1694548 | | | | Golden Triangle Physician Alliance | TX | NIA | Heritage Health Systems of Texas, Inc | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 76-0560730 | | | | Heritage Physician Networks | TX | NIA | Heritage Health Systems, Inc | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 10768 | 74-3141949 | | | | SelectCare Health Plans, Inc | TX | IA | Heritage Health Systems, Inc | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 76-0500963 | | | | HHS Texas Management, LP | TX | NIA | Heritage Health Systems, Inc | Ownership | 99.1 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 76-0500964 | | | | HHS Texas Management, Inc | TX | NIA | Heritage Health Systems, Inc | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 76-0500963 | | | | HHS Texas Management, LP | TX | NIA | HHS Texas Management, Inc | Ownership | 0.9 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 90-0779287 | | | | Collaborative Health Systems, LLC | NY | NIA | Universal American Corp | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-5481108 | | | | Accountable Care Coalition of Georgia , LLC | GA | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | 45-5510251 | | | | Accountable Care Coaltion of Central Georgia, LLC | GA | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 81-2588974 | | | | Accountable Care Coalition of Chesapeake, LLC | MD | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-4537668 | | | | Accountable Care Coalition of DeKalb, LLC | GA | NIA | Collaborative Health Systems, LLC | Ownership | 80.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-2881180 | | | | Accountable Care Coalition of Mississippi, LLC | MS | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-4105836 | | | | Accountable Care Coalition of Mount Kisco, LLC | NY | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-4552802 | | | | Accountable Care Coalition of North Texas, LLC | TX | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 47-3894436 | | | | Accountable Care Coalition of Northeast Georgia, LLC | GA | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 46-4106526 | | | | Accountable Care Coalition of Northwest Florida, LLC | FL | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 47-3913308 | | | | Accountable Care Coalition of Southeast Physician Partners, LLC | SC | NIA | Collaborative Health Systems, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 47-3842552 | | | | Accountable Care Coaliton of Southeast Texas, Inc. | TX | NIA | Collaborative Health Systems, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-4113610 | | | | Accountable Care Colation of Southeast Wisconsin, LLC | WI | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-4546234 | | | | Accountable Care Coalition of Syracuse, LLC | NY | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-2742298 | | | | Accountable Care Coalition of Texas, Inc. | TX | NIA | Collaborative Health Systems, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 47-2346408 | | | | AWC of Syracuse, Inc. | NY | NIA | Collaborative Health Systems, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 30-0803845 | | | | Chrysalis Medical Services, LLC | NJ | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 81-3365375 | | | | Collaborative Health Systems of Maryland, LLC | MD | NIA | Collaborative Health Systems, LLC | Ownership | 50.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 81-3306594 | | | | Collaborative Health Systems of Virginia, LLC | VA | NIA | Collaborative Health Systems, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-4119736 | | | | Accountable Care Coalition of Maryland, LLC | MD | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-5449147 | | | | Accountable Care Coalition of Maryland Primary Care, LLC | MD | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-4561546 | | | | Essential Care Partners, LLC | TX | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 47-3923394 | | | | Hudson Accountable Care, LLC | NY | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 90-0855950 | | | | Maryland Collaborative Care, LLC | MD | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 81-2704355 | | | | Mid-Atlantic Collaborative Care, LLC | MD | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | 45-5626871 | | | | Northern Maryland Collaborative Care, LLC | MD | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-1246845 | | | | Accountable Care Coalition of Arizona, LLC | AZ | NIA | Collaborative Health Systems, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-1681146 | | | | Accountable Care Coalition of Community Health Centers, LLC | TX | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-1669422 | | | | Accountable Care Coalition of Community Health Centers II, LLC | TX | NIA | Collaborative Health Systems, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-1623920 | | | | Accountable Care Coalition of Southeast Partners, LLC | GA | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-1558080 | | | | Accountable Care Coalition of Hawaii LLC | HI | NIA | Collaborative Health Systems, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 45-5439406 | | | | Virginia Collaborative Care, LLC | VA | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 84-2217098 | | | | Accountable Care Coalition of Florida Partners, LLC | FL | NIA | Collaborative Health Systems, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-1280079 | | | | Maryland Collaborative Care Transformation Organization, Inc. | DE | NIA | Collaborative Health Systems, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-1263227 | | | | Accountable Care Coalition of New Jersey, Inc. | NJ | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-1604548 | | | | Accountable Care Coaliton of North West Region, LLC | OR | NIA | Collaborative Health Systems, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-1698885 | | | | Accoutable Care Coalition of Northwest Region II, LLC | OR | NIA | Collaborative Health Systems, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-0727997 | | | | Accountable Care Coalition of Northeast Partners, LLC | PA | NIA | Collaborative Health Systems, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 82-1219279 | | | | Accountable Care Coalition of Tennessee, LLC | TN | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 84-2574901 | | | | Accountable Care Coalition Direct Contracting, LLC | FL | NIA | Collaborative Health Systems, LLC | Ownership | 51.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 95448 | 71-0794605 | | | | QCA Healthplan, Inc. | AR | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 70998 | 71-0386640 | | | | Qualchoice Life and Health Insurance Company | AR | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 83-3502610 | | | | Hudson Acquisition, LLC | TX | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 27-1300475 | | | | HealthSmart Benefits Management, LLC | TX | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-2387587 | | | | Parker LP, LLC | NV | NIA | HealthSmart Benefits Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 75-2508316 | | | | HealthSmart Preferred Care II, LP | TX | NIA | Parker LP, LLC | Ownership | 99.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 20-3394046 | | | | HealthSmart Primary Care Clinics, LP | TX | NIA | Parker LP, LLC | Ownership | 99.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 75-2960859 | | | | HealthSmart Care Management Solutions, LP | TX | NIA | Parker LP, LLC | Ownership | 99.0 | Centene Corporation | N | |

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>Federal RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity/Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies)/Person(s) | 15<br>Is an SCA Filing Required? (Y/N) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01295 | Centene Corporation | 00000 | 75-2727437 | | | | HealthSmart Information Systems, Inc. | TX | NIA | HealthSmart Benefits Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 36-4099199 | | | | HealthSmart Benefit Solutions, Inc. | IL | NIA | HealthSmart Benefits Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 06-1621470 | | | | HealthSmart Preferred Network II, Inc. | DE | NIA | HealthSmart Benefits Management, LLC | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 34-1635597 | | | | HealthSmart Rx Solutions, Inc. | OH | NIA | HealthSmart Preferred Network II, Inc. | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | | | | | Mauli Ola Health and Wellness, Inc. | HI | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 84-4119570 | | | | District Community Care Inc. | DC | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |
| 01295 | Centene Corporation | 00000 | 84-5160960 | | | | Centene Institute for Advanced Health Education, LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | |

| Asterisk | Explanation |
|---|---|
| 0000001 | |

# 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:**

**Bar Code:**

1.

# OVERFLOW PAGE FOR WRITE-INS

MQ002 Additional Aggregate Lines for Page 02 Line 25.
*ASSETS

| | 1<br>Assets | 2<br>Nonadmitted Assets | 3<br>Net Admitted Assets (Cols. 1 - 2) | 4<br>December 31 Prior Year Net Admitted Assets |
|---|---|---|---|---|
| 2504. Accumulated Amortization - Intangibles | 2,340 | 2,340 | 0 | 0 |
| 2505. Misc Receivable | 212 | | 212 | |
| 2597. Summary of remaining write-ins for Line 25 from Page 02 | 2,552 | 2,340 | 212 | 0 |

# SCHEDULE A – VERIFICATION

**Real Estate**

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

NONE

# SCHEDULE B – VERIFICATION

**Mortgage Loans**

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

NONE

# SCHEDULE BA – VERIFICATION

**Other Long-Term Invested Assets**

| | 1<br>Year To Date | 2<br>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. 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 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) | 0 | 0 |
| 12. Deduct total nonadmitted amounts | 0 | 0 |
| 13. Statement value at end of current period (Line 11 minus Line 12) | 0 | 0 |

NONE

# SCHEDULE D – VERIFICATION

**Bonds and Stocks**

| | 1<br>Year To Date | 2<br>Prior Year Ended December 31 |
|---|---|---|
| 1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year | 3,277,396 | 24,322,102 |
| 2. Cost of bonds and stocks acquired | | 3,627,750 |
| 3. Accrual of discount | | (3,412) |
| 4. Unrealized valuation increase (decrease) | | 0 |
| 5. Total gain (loss) on disposals | | (33,977) |
| 6. Deduct consideration for bonds and stocks disposed of | | 24,634,204 |
| 7. Deduct amortization of premium | 3,006 | 863 |
| 8. Total foreign exchange change in book/adjusted carrying value | | 0 |
| 9. Deduct current year's other-than-temporary impairment recognized | | 0 |
| 10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees | | 0 |
| 11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) | 3,274,390 | 3,277,396 |
| 12. Deduct total nonadmitted amounts | 0 | 0 |
| 13. Statement value at end of current period (Line 11 minus Line 12) | 3,274,390 | 3,277,396 |

# 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<br>Book/Adjusted Carrying Value Beginning of Current Quarter | 2<br>Acquisitions During Current Quarter | 3<br>Dispositions During Current Quarter | 4<br>Non-Trading Activity During Current Quarter | 5<br>Book/Adjusted Carrying Value End of First Quarter | 6<br>Book/Adjusted Carrying Value End of Second Quarter | 7<br>Book/Adjusted Carrying Value End of Third Quarter | 8<br>Book/Adjusted Carrying Value December 31 Prior Year |
|---|---|---|---|---|---|---|---|---|
| **BONDS** | | | | | | | | |
| 1. NAIC 1 (a) | 3,080,903 | 249,838 | | (2,851) | 3,327,890 | 0 | 0 | 3,080,903 |
| 2. NAIC 2 (a) | 200,000 | | | | 200,000 | 0 | 0 | 200,000 |
| 3. NAIC 3 (a) | 0 | | | | 0 | 0 | 0 | 0 |
| 4. NAIC 4 (a) | 0 | | | | 0 | 0 | 0 | 0 |
| 5. NAIC 5 (a) | 0 | | | | 0 | 0 | 0 | 0 |
| 6. NAIC 6 (a) | 0 | | | | 0 | 0 | 0 | 0 |
| 7. Total Bonds | 3,280,903 | 249,838 | 0 | (2,851) | 3,527,890 | 0 | 0 | 3,280,903 |
| **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 | 3,280,903 | 249,838 | 0 | (2,851) | 3,527,890 | 0 | 0 | 3,280,903 |

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 $ 249,993 ; NAIC 2 $ ; NAIC 3 $ ; NAIC 4 $ ; NAIC 5 $ ; NAIC 6 $

# SCHEDULE DA - PART 1

**Short-Term Investments**

NONE

| | 1<br>Book/adjusted Carrying Value | 2<br>Fair Value | 3<br>Actual Cost | 4<br>Interest Collected Year To Date | 5<br>Paid for Accrued Interest Year To Date |
|---|---|---|---|---|---|
| 9199999 | | XXX | | | |

# SCHEDULE DA - VERIFICATION

**Short-Term Investments**

| | 1<br>Year To Date | 2<br>Prior Year Ended December 31 |
|---|---|---|
| 1. Book/adjusted carrying value, December 31 of prior year | 0 | 0 |
| 2. Cost of short-term investments acquired | | 1,608,872 |
| 3. Accrual of discount | | 7,128 |
| 4. Unrealized valuation increase (decrease) | | 0 |
| 5. Total gain (loss) on disposals | | 0 |
| 6. Deduct consideration received on disposals | | 1,616,000 |
| 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 | 0 |
| 11. Deduct total nonadmitted amounts | | 0 |
| 12. Statement value at end of current period (Line 10 minus Line 11) | 0 | 0 |

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 – PART 2 – VERIFICATION

**(Cash Equivalents)**

| | 1<br>Year To Date | 2<br>Prior Year Ended December 31 |
|---|---|---|
| 1. Book/adjusted carrying value, December 31 of prior year | 6,544,390 | 40,200 |
| 2. Cost of cash equivalents acquired | 81,401,285 | 111,381,200 |
| 3. Accrual of discount | 155 | 0 |
| 4. Unrealized valuation increase (decrease) | | 0 |
| 5. Total gain (loss) on disposals | | 2 |
| 6. Deduct consideration received on disposals | 31,264,182 | 104,877,012 |
| 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) | 56,681,648 | 6,544,390 |
| 11. Deduct total nonadmitted amounts | | 0 |
| 12. Statement value at end of current period (Line 10 minus Line 11) | 56,681,648 | 6,544,390 |

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE

# SCHEDULE D - PART 3

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

| 1<br>CUSIP Identification | 2<br>Description | 3<br>Foreign | 4<br>Date Acquired | 5<br>Name of Vendor | 6<br>Number of Shares of Stock | 7<br>Actual Cost | 8<br>Par Value | 9<br>Paid for Accrued Interest and Dividends | 10<br>NAIC Designation and Administrative Symbol |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

# SCHEDULE D - PART 4

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Change in Book/Adjusted Carrying Value | | | | | 16 | 17 | 18 | 19 | 20 | 21 | 22 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | 11 | 12 | 13 | 14 | 15 | | | | | | | |
| CUSIP Identi-fication | Description | Foreign | Disposal Date | Name of Purchaser | Number of Shares of Stock | Consideration | Par Value | Actual Cost | Prior Year Book/Adjusted Carrying Value | Unrealized Valuation Increase/ (Decrease) | Current Year's (Amortization)/ Accretion | Current Year's Other Than Temporary Impairment Recognized | Total Change in B./A.C.V. (11+12-13) | Total Foreign Exchange Change in B./A.C.V. | Book/ Adjusted Carrying Value at Disposal Date | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Bond Interest/Stock Dividends Received During Year | Stated Contractual Maturity Date | NAIC Designation and Administrative Symbol |
| 9999999 Totals | | | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX |

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 DB - Part E

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

# SCHEDULE E - PART 1 - CASH

**Month End Depository Balances**

| 1 | 2 | 3 | 4 | 5 | Book Balance at End of Each Month During Current Quarter | | | 9 |
|---|---|---|---|---|---|---|---|---|
| | | | | | 6 | 7 | 8 | |
| Depository | Code | Rate of Interest | Amount of Interest Received During Current Quarter | Amount of Interest Accrued at Current Statement Date | First Month | Second Month | Third Month | * |
| Open Depositories | | | | | | | | |
| Bank of America | Charlotte, NC | | 0.380 | 18,837 | 18,837 | 10,754,308 | 3,346,409 | 5,105,333 | XXX |
| Arvest Trust | Little Rock, AR | | | 0 | 0 | 4,637,149 | 9,841,380 | 4,160,591 | XXX |
| 0199998 Deposits in ..... depositories that do not exceed the allowable limit in any one depository (See Instructions) - Open Depositories | | XXX | XXX | | | | | | XXX |
| 0199999 Total Open Depositories | | XXX | XXX | 18,837 | 18,837 | 15,391,457 | 13,187,789 | 9,265,924 | XXX |
| 0399999 Total Cash on Deposit | | XXX | XXX | 18,837 | 18,837 | 15,391,457 | 13,187,789 | 9,265,924 | XXX |
| 0499999 Cash in Company's Office | | XXX | XXX | XXX | XXX | | | | XXX |
| **0599999 Total** | | XXX | XXX | 18,837 | 18,837 | 15,391,457 | 13,187,789 | 9,265,924 | XXX |

# SCHEDULE E - PART 2 - CASH EQUIVALENTS

**Show Investments Owned End of Current Quarter**

| 1<br>CUSIP | 2<br>Description | 3<br>Code | 4<br>Date Acquired | 5<br>Rate of Interest | 6<br>Maturity Date | 7<br>Book/Adjusted Carrying Value | 8<br>Amount of Interest Due & Accrued | 9<br>Amount Received During Year |
|---|---|---|---|---|---|---|---|---|
| Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations | | | | | | | | |
| XXX | Adventist Health System/Sunbelt Obligate | | 03/09/2020 | | 04/02/2020 | 249,993 | | 155 |
| 3299999 - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations | | | | | | 249,993 | 0 | 155 |
| 3899999 - Bonds - Industrial and Miscellaneous (Unaffiliated) - Subtotals - Industrial and Miscellaneous (Unaffiliated) | | | | | | 249,993 | 0 | 155 |
| 7699999 - Bonds - Total Bonds - Subtotals - Issuer Obligations | | | | | | 249,993 | 0 | 155 |
| 8399999 - Bonds - Total Bonds - Subtotals - Bonds | | | | | | 249,993 | 0 | 155 |
| Exempt Money Market Mutual Funds – as Identified by SVO | | | | | | | | |
| 857492-86-2 | SS INST INV:TRS+ MM PRM | | 03/02/2020 | 0.340 | XXX | 10,029,175 | 8,302 | 24,267 |
| 949921-12-6 | WELLSFARGO:GOVT MM SEL | | 03/16/2020 | 0.280 | XXX | 8,143,094 | 4,331 | 11,947 |
| 8599999 - Exempt Money Market Mutual Funds – as Identified by SVO | | | | | | 18,172,268 | 12,633 | 36,214 |
| All Other Money Market Mutual Funds | | | | | | | | |
| 09248U-70-0 | BLKRK LQ:FEDFUND INSTL | | 03/06/2020 | 0.330 | XXX | | 6,475 | |
| 31607A-70-3 | FIDELITY IMM:GOVT INSTL | | 03/02/2020 | 0.290 | XXX | 16,018,967 | 13,890 | 15,174 |
| 38141W-27-3 | GOLDMAN:FS GOVT INST | | 03/02/2020 | 0.320 | XXX | 19,033,359 | 14,035 | 25,981 |
| 608919-71-8 | FEDERATED GOVT OBL PRMR | | 03/02/2020 | 0.300 | XXX | 3,157,717 | 2,286 | 11,096 |
| 825252-88-5 | INVESCO GOV&AGENCY INST | | 03/02/2020 | 0.380 | XXX | 49,343 | 36 | 1,806 |
| 857492-70-6 | SS INST INV:US GV MM PRM | | 03/02/2020 | 0.280 | XXX | | 2,948 | |
| 8699999 - All Other Money Market Mutual Funds | | | | | | 38,259,386 | 39,670 | 54,056 |
| | | | | | | | | |
| | | | | | | | | |
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| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 8899999 Total Cash Equivalents | | | | | | 56,681,648 | 52,303 | 90,425 |