



ANNUAL STATEMENT
FOR THE YEAR ENDING DECEMBER 31, 2011
OF THE CONDITION AND AFFAIRS OF THE

Buckeye Community Health Plan, Inc.

NAIC Group Code 1295 , 1295 NAIC Company Code 11834 Employer's ID Number 32-0045282
(Current Period) (Prior Period)

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

Country of Domicile United States

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

Incorporated/Organized 10/29/2003 Commenced Business 01/01/2004

Statutory Home Office 175 South Third Street, Suite 1200 , Columbus, OH 43215
(Street and Number) (City, State and Zip Code)

Main Administrative Office 7700 Forsyth Boulevard
(Street and Number)
Saint Louis, MO 63105-3389 314-725-4477
(City, State and Zip Code) (Area Code) (Telephone Number)

Mail Address 7700 Forsyth Boulevard , Saint Louis, MO 63105-3389
(Street and Number or P.O. Box) (City, State and Zip Code)

Primary Location of Books and Records 7700 Forsyth Boulevard
(Street and Number)
Saint Louis, MO 63105-3389 314-505-6246
(City, State and Zip Code) (Area Code) (Telephone Number) (Extension)

Internet Web Site Address www.centene.com

Statutory Statement Contact Douglas James Boyd , 314-505-6246
(Name) (Area Code) (Telephone Number) (Extension)
dboyd@centene.com 314-725-4568
(E-Mail Address) (Fax Number)

OFFICERS

Name	Title	Name	Title
<u>Steven Allen White</u> ,	<u>President and CEO</u>	<u>Keith Harvey Williamson</u> ,	<u>Secretary</u>
<u>William Nelder Scheffel</u> ,	<u>Treasurer</u>		

OTHER OFFICERS

<u>Tricia Lynn Dinkelman</u> ,	<u>Director of Tax, Centene Corporation</u>	<u>Christopher Donald Bowers</u> ,	<u>Senior VP, Health Plan Business</u>
<u>Kathy Cobbs Bradley-Wells</u> ,	<u>Assistant Secretary</u>	<u>Ronald Albert Charles, MD</u> ,	<u>Vice President- Medical Affairs</u>
			<u>Vice President- Medical Management</u>
<u>Holly Lynette Mayer-Howell</u> ,	<u>Vice President- Finance</u>	<u>Lori Jean Mulichak</u> ,	<u>Vice President- Network Develop. & Contracting</u>
	<u>Assistant Treasurer, Centene Corporation</u>	<u>John Charles Wiley</u> ,	<u>Vice President- Compliance and Regulatoy Affairs</u>
<u>Darren Charles Meyer</u> ,			
<u>Tracy Michelle Cloud #</u> ,	<u>Vice President- Operational Services</u>	<u>David Brian Amerine</u> ,	

DIRECTORS OR TRUSTEES

<u>William Nelder Scheffel</u>	<u>Steven Allen White</u>	<u>Kathy Cobbs Bradley-Wells</u>	<u>Owen Elwood Johnson, MD</u>
<u>Mark William Eggert</u>	<u>Jimmy Vance Stewart #</u>	<u>Stephen Flanders Loebs, PHD</u>	

State of Missouri **ss**
County of Saint Louis

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.

<u>Steven Allen White</u> President and CEO	<u>Keith Harvey Williamson</u> Secretary	<u>William Nelder Scheffel</u> Treasurer
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Subscribed and sworn to before me this _____ day of February, 2012

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 _____

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE Buckeye Community Health Plan, Inc.

EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE Buckeye Community Health Plan, Inc.

EXHIBIT 3 - HEALTH CARE RECEIVABLES

[illegible]

EXHIBIT 4 – CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

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ANNUAL STATEMENT FOR THE YEAR 2011 OF THE Buckeye Community Health Plan, Inc.

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE Buckeye Community Health Plan, Inc.

EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

[illegible]

EXHIBIT 7 - PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

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EXHIBIT 8 – FURNITURE, EQUIPMENT AND SUPPLIES OWNED

Description	1	2	3	4	5	6
	Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
1. Administrative furniture and equipment	NONE					
2. Medical furniture, equipment and fixtures						
3. Pharmaceuticals and surgical supplies						
4. Durable medical equipment						
5. Other property and equipment						
6. Total	0	0	0	0	0	0



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE Buckeye Community Health Plan, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION		Buckeye Community Health Plan, Inc.					2. Columbus, OH		(LOCATION)		
NAIC Group Code	1295	BUSINESS IN THE STATE OF Ohio			DURING THE YEAR 2011			NAIC Company Code			11834
	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 Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year		159,321						412	158,909		
2. First Quarter		160,329						508	159,821		
3. Second Quarter		159,205						590	158,615		
4. Third Quarter		160,524						661	159,863		
5. Current Year		159,059						711	158,348		
6. Current Year Member Months		1,926,956						7,153	1,919,803		
Total Member Ambulatory Encounters for Year:											
7. Physician		1,122,252						13,134	1,109,118		
8. Non-Physician		942,773						4,846	937,927		
9. Total		2,065,025	0	0	0	0	0	17,980	2,047,045	0	
10. Hospital Patient Days Incurred		91,341						1,467	89,874		
11. Number of Inpatient Admissions		18,423						243	18,180		
12. Health Premiums Written (b).....		616,497,251						7,413,279	609,083,972		
13. Life Premiums Direct.....		0									
14. Property/Casualty Premiums Written.....		0									
15. Health Premiums Earned.....		616,497,251						7,413,279	609,083,972		
16. Property/Casualty Premiums Earned.....		0									
17. Amount Paid for Provision of Health Care Services		456,315,656						6,668,721	449,646,935		
18. Amount Incurred for Provision of Health Care Services		478,460,585						6,554,506	471,906,079		

(a) For health business: number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$7,413,279



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE Buckeye Community Health Plan, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Buckeye Community Health Plan, Inc. 2. _____ (LOCATION)

NAIC Group Code	1295	BUSINESS IN THE STATE OF Consolidated			DURING THE YEAR 2011			NAIC Company Code		11834
	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 Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	159,321	0	0	0	0	0	0	412	158,909	0
2 First Quarter	160,329	0	0	0	0	0	0	508	159,821	0
3 Second Quarter	159,205	0	0	0	0	0	0	590	158,615	0
4. Third Quarter	160,524	0	0	0	0	0	0	661	159,863	0
5. Current Year	159,059	0	0	0	0	0	0	711	158,348	0
6 Current Year Member Months	1,926,956	0	0	0	0	0	0	7,153	1,919,803	0
Total Member Ambulatory Encounters for Year:										
7. Physician	1,122,252	0	0	0	0	0	0	13,134	1,109,118	0
8. Non-Physician	942,773	0	0	0	0	0	0	4,846	937,927	0
9. Total	2,065,025	0	0	0	0	0	0	17,980	2,047,045	0
10. Hospital Patient Days Incurred	91,341	0	0	0	0	0	0	1,467	89,874	0
11. Number of Inpatient Admissions	18,423	0	0	0	0	0	0	243	18,180	0
12. Health Premiums Written (b).....	616,497,251	0	0	0	0	0	0	7,413,279	609,083,972	0
13. Life Premiums Direct.....	0	0	0	0	0	0	0	0	0	0
14. Property/Casualty Premiums Written.....	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned.....	616,497,251	0	0	0	0	0	0	7,413,279	609,083,972	0
16. Property/Casualty Premiums Earned.....	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	456,315,656	0	0	0	0	0	0	6,668,721	449,646,935	0
18. Amount Incurred for Provision of Health Care Services	478,460,585	0	0	0	0	0	0	6,554,506	471,906,079	0

(a) For health business: number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 7,413,279

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE Buckeye Community Health Plan, Inc.

SCHEDULE S - PART 1 - SECTION 2

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Premiums	8 Unearned Premiums	9 Reserve Liability Other Than For Unearned Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
				NONE							
0999999 Total (Sum of 0399999 and 0699999)						0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE Buckeye Community Health Plan, Inc.

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

[illegible]

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Schedule S - Part 5

Five-Year Exhibit of Reinsurance Ceded Business
(000 Omitted)

	1 2011	2 2010	3 2009	4 2008	5 2007
A. OPERATIONS ITEMS					
1. Premiums.....	0	0	0	0	0
2. Title XVIII-Medicare.....	0	0	0	0	0
3. Title XIX-Medicaid.....	9,718	10,767	9,236	5,747	10,974
4. Commissions and reinsurance expense allowance.....		0	0	0	0
5. Total hospital and medical expenses.....	10,981	4,080	5,871	8,563	7,021
B. BALANCE SHEET ITEMS					
6. Premiums receivable		0	0	0	0
7. Claims payable.....	(2,903)	(1,402)	(2,685)	(762)	(122)
8. Reinsurance recoverable on paid losses.....	1,300	522	348	367	1,707
9. Experience rating refunds due or unpaid.....		0	0	0	0
10. Commissions and reinsurance expense allowances unpaid.....		0	0	0	0
11. Unauthorized reinsurance offset.....	0	0	0	0	0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
12. Funds deposited by and withheld from (F).....	0	0	0	0	0
13. Letters of credit (L).....	0	0	0	0	0
14. Trust agreements (T).....	0	0	0	0	0
15. Other (O)	0	0	0	0	0

SCHEDULE S - PART 6

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1	2	3
	As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	140,420,325		140,420,325
2. Accident and health premiums due and unpaid (Line 15)	6,265,359		6,265,359
3. Amounts recoverable from reinsurers (Line 16.1)	1,300,494	(1,300,494)	0
4. Net credit for ceded reinsurance	XXX	4,202,994	4,202,994
5. All other admitted assets (Balance)	11,597,097		11,597,097
6. Total assets (Line 28)	159,583,275	2,902,500	162,485,775
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1)	53,820,053	2,902,500	56,722,553
8. Accrued medical incentive pool and bonus payments (Line 2)	0		0
9. Premiums received in advance (Line 8)	0		0
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19)	0		0
11. Reinsurance in unauthorized companies (Line 20)	0		0
12. All other liabilities (Balance)	20,265,989		20,265,989
13. Total liabilities (Line 24)	74,086,042	2,902,500	76,988,542
14. Total capital and surplus (Line 33)	85,497,233	XXX	85,497,233
15. Total liabilities, capital and surplus (Line 34)	159,583,275	2,902,500	162,485,775
NET CREDIT FOR CEDED REINSURANCE			
16. Claims unpaid	2,902,500		
17. Accrued medical incentive pool	0		
18. Premiums received in advance	0		
19. Reinsurance recoverable on paid losses	1,300,494		
20. Other ceded reinsurance recoverables	0		
21. Total ceded reinsurance recoverables	4,202,994		
22. Premiums receivable	0		
23. Funds held under reinsurance treaties with authorized and unauthorized reinsurers	0		
24. Unauthorized reinsurance	0		
25. Other ceded reinsurance payables/offsets	0		
26. Total ceded reinsurance payables/offsets	0		
27. Total net credit for ceded reinsurance	4,202,994		

SCHEDULE T – PART 2
INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN

Allocated By States and Territories

		Direct Business Only					
		1	2	3	4	5	6
States, Etc.		Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Deposit-Type Contracts	Totals
1. Alabama	AL .....						.0
2. Alaska	AK .....						.0
3. Arizona	AZ .....						.0
4. Arkansas	AR .....						.0
5. California	CA .....						.0
6. Colorado	CO .....						.0
7. Connecticut	CT .....						.0
8. Delaware	DE .....						.0
9. District of Columbia	DC .....						.0
10. Florida	FL .....						.0
11. Georgia	GA .....						.0
12. Hawaii	HI .....						.0
13. Idaho	ID .....						.0
14. Illinois	IL .....						.0
15. Indiana	IN .....						.0
16. Iowa	IA .....						.0
17. Kansas	KS .....						.0
18. Kentucky	KY .....						.0
19. Louisiana	LA .....						.0
20. Maine	ME .....						.0
21. Maryland	MD .....						.0
22. Massachusetts	MA .....						.0
23. Michigan	MI .....						.0
24. Minnesota	MN .....						.0
25. Mississippi	MS .....						.0
26. Missouri	MO .....						.0
27. Montana	MT .....						.0
28. Nebraska	NE .....						.0
29. Nevada	NV .....						.0
30. New Hampshire	NH .....						.0
31. New Jersey	NJ .....						.0
32. New Mexico	NM .....						.0
33. New York	NY .....						.0
34. North Carolina	NC .....						.0
35. North Dakota	ND .....						.0
36. Ohio	OH .....						.0
37. Oklahoma	OK .....						.0
38. Oregon	OR .....						.0
39. Pennsylvania	PA .....						.0
40. Rhode Island	RI .....						.0
41. South Carolina	SC .....						.0
42. South Dakota	SD .....						.0
43. Tennessee	TN .....						.0
44. Texas	TX .....						.0
45. Utah	UT .....						.0
46. Vermont	VT .....						.0
47. Virginia	VA .....						.0
48. Washington	WA .....						.0
49. West Virginia	WV .....						.0
50. Wisconsin	WI .....						.0
51. Wyoming	WY .....						.0
52. American Samoa	AS .....						.0
53. Guam	GU .....						.0
54. Puerto Rico	PR .....						.0
55. U.S. Virgin Islands	VI .....						.0
56. Northern Mariana Islands	MP .....						.0
57. Canada	CN .....						.0
58. Aggregate Other Alien	OT .....						.0
59. Totals		0	0	0	0	0	0

NONE

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE Buckeye Community Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
1295.....	Centene Corporation.....	12959.....	20-5693998.....				Absolute Total Care, Inc.....	SC.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	56-2384404.....				Access Health Solutions LLC.....	FL.....	NIA.....	Sunshine Health Holding Company, Inc.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	95302.....	75-2592153.....				AECC Total Vision Health Plan of Texas, Inc.....	TX.....	IA.....	OptiCare Managed Vision, Inc.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	71013.....	39-0993433.....				Bankers Reserve Life Insurance Company of Wisconsin.....	WI.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	20-4980818.....				Bridgeway Health Solutions of Arizona, LLC.....	AZ.....	NIA.....	Bridgeway Health Solutions, LLC.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	20-4980875.....				Bridgeway Health Solutions, LLC.....	DE.....	NIA.....	CenCorp Health Solutions, Inc.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	11834.....	32-0045282.....				Buckeye Community Health Plan, Inc.....	OH.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	90-0636938.....				Casenet LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	81.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	86-0782736.....				CBHSP Arizona, Inc.....	AZ.....	NIA.....	Cenpatico Behavioral Health, LLC.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	36-2979209.....				Celtic Group, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	80799.....	06-0641618.....				Celtic Insurance Company.....	IL.....	IA.....	Celtic Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	26-4278205.....				CeltiCare Health Plan Holdings LLC.....	DE.....	NIA.....	Celtic Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	13632.....	26-4818440.....				CeltiCare Health Plan of Massachusetts.....	MA.....	IA.....	CeltiCare Health Plan Holdings LLC.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	22-3889471.....				CenCorp Health Solutions, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	20-1624120.....				Cenpatico Behavioral Health of Arizona, LLC.....	AZ.....	NIA.....	Cenpatico Behavioral Health, LLC.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	12525.....	74-3018565.....				Cenpatico Behavioral Health of TX, Inc.....	TX.....	IA.....	Cenpatico Behavioral Health, LLC.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	65-1180389.....				Cenpatico Behavioral Health Wisconsin, LLC.....	WI.....	NIA.....	Cenpatico Behavioral Health, LLC.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	68-0461584.....				Cenpatico Behavioral Health, LLC.....	CA.....	NIA.....	CenCorp Health Solutions, Inc.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	45-2819782.....				Cenpatico CeltiCare Integrated Services, Inc.....	MA.....	NIA.....	Cenpatico Behavioral Health, LLC.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	26-4094682.....				Centene Center LLC.....	DE.....	NIA.....	CMC Real Estate Co. LLC.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	74-2810404.....				Centene Company of Texas, LP.....	TX.....	NIA.....	Centene Holdings, LLC.....	Ownership.....	99.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	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.....	
1295.....	Centene Corporation.....	0.....	20-2074277.....				Centene Holdings, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	39-1864073.....				Centene Management Company LLC.....	WI.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	20-0057283.....				CMC Real Estate Co. LLC.....	DE.....	NIA.....	Centene Management Company LLC.....	Ownership.....	100.0	Centene Corporation.....	

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE Buckeye Community Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
1295.....	Centene Corporation.....	95831.....	39-1821211.....				Coordinated Care Corporation d/b/a Managed Health Services.....	IN.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	06-1404277.....				Family Care & Workforce Diversity Consultants LLC d/b/a Worklife Innovations.....	CT.....	NIA.....	Nurtur Health, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	60078.....	86-0819817.....				Hallmark Life Insurance Co.....	AZ.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	27-0916294.....				Healthy Louisiana Holdings LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	51.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	45-2798041.....				Home State Health Plan, Inc.....	MO.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	14053.....	27-2186150.....				IlliniCare Health Plan, Inc.....	IL.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	74-2892993.....				Integrated Mental Health Mgmt, LLC.....	TX.....	NIA.....	Cenpatco Behavioral Health, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	74-2785494.....				Integrated Mental Health Services.....	TX.....	NIA.....	Integrated Mental Health Mgmt, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	14100.....	45-1294925.....				Kentucky Spirit Health Plan, Inc.....	KY.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	76-0511700.....				LBB Industries, Inc.....	TX.....	NIA.....	US Script, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	13970.....	27-1287287.....				Louisiana Healthcare Connections, Inc.....	LA.....	IA.....	Healthy Louisiana Holdings LLC.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	13923.....	20-8570212.....				Magnolia Health Plan Inc.....	MS.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	96822.....	39-1678579.....				Managed Health Services Insurance Corp.....	WI.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	27-2221367.....				Novasys Health, Inc.....	DE.....	NIA.....	Celtic Group, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	20-4730372.....				Nurse Response, Inc.....	DE.....	NIA.....	NurseWise LP.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	42-1565807.....				NurseWise Holdings LLC.....	DE.....	NIA.....	CenCorp Health Solutions, Inc.....	Ownership.....	99.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	52-2379566.....				NurseWise LP.....	DE.....	NIA.....	NurseWise Holdings LLC.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	06-1476380.....				Nurtur Health, Inc.....	DE.....	NIA.....	CenCorp Health Solutions, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	65-0094759.....				Ocucare Systems, Inc.....	FL.....	NIA.....	OptiCare Managed Vision, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	20-4730341.....				OptiCare Managed Vision, Inc.....	DE.....	NIA.....	CenCorp Health Solutions, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	20-4773088.....				OptiCare Vision Company, Inc.....	DE.....	NIA.....	OptiCare Managed Vision, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	36-4520004.....				OptiCare Vision Insurance Co, Inc.....	SC.....	NIA.....	OptiCare Managed Vision, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	12315.....	20-3174593.....				Peach State Health Plan, Inc.....	GA.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	
1295.....	Centene Corporation.....	0.....	75-2612875.....				RX Direct, Inc.....	TX.....	NIA.....	US Script, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	

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SCHEDULE Y

PART 2 - SUMMARY OF INSURER’S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
0.....	42-1406317.....	Centene Corporation.....	67,059,535.....	(121,148,147).....			13,061,464.....				(41,027,149).....	
0.....	39-1864073.....	Centene Management Company LLC.....					412,084,763.....				412,084,763.....	
0.....	20-0057283.....	CMC Real Estate Co. LLC.....									.0.....	
0.....	26-4094682.....	Centene Center LLC.....									.0.....	
71013.....	39-0993433.....	Bankers Reserve Life Insurance Company o.....	(25,000,000).....				(142,825,460).....	(21,211,433).....			(189,036,893).....	(19,747,749).....
0.....	22-3889471.....	CenCorp Health Solutions, Inc.....					606,986.....				606,986.....	
0.....	42-1565807.....	NurseWise Holdings LLC.....									.0.....	
0.....	52-2379566.....	NurseWise LP.....					24,154,279.....				24,154,279.....	
0.....	20-4730372.....	Nurse Response, Inc.....									.0.....	
0.....	20-4980875.....	Bridgeway Health Solutions, LLC.....									.0.....	
0.....	20-4980818.....	Bridgeway Health Solutions of Arizona, L.....									.0.....	
0.....	06-1476380.....	Nurtur Health, Inc.....					18,934,609.....				18,934,609.....	
0.....	06-1404277.....	Family Care & Workforce Diversity Consul.....									.0.....	
0.....	16-1686991.....	Wellness By Choice, LLC.....									.0.....	
0.....	68-0461584.....	Cenpatico Behavioral Health, LLC.....					119,953,453.....				119,953,453.....	
12525.....	74-3018565.....	Cenpatico Behavioral Health of TX, Inc.....									.0.....	
0.....	45-2819782.....	Cenpatico CeltiCare Integrated Services.....									.0.....	
0.....	86-0782736.....	CBHSP Arizona, Inc.....									.0.....	
0.....	74-2892993.....	Integrated Mental Health Mgmt, LLC.....									.0.....	
0.....	74-2785494.....	Integrated Mental Health Services.....					126,977,193.....				126,977,193.....	
0.....	65-1180389.....	Cenpatico Behavioral Health Wisconsin, L.....									.0.....	
0.....	20-1624120.....	Cenpatico Behavioral Health of Arizona.....									.0.....	
0.....	20-4730341.....	OptiCare Managed Vision, Inc.....					1,242,084.....				1,242,084.....	
0.....	36-4520004.....	OptiCare Vision Insurance Co, Inc.....									.0.....	
95302.....	75-2592153.....	AECG Total Vision Health Plan of Texas.....					5,611,271.....				5,611,271.....	
0.....	20-4773088.....	OptiCare Vision Company, Inc.....					20,294,327.....				20,294,327.....	
0.....	65-0094759.....	Ocucare Systems, Inc.....					2,541,702.....				2,541,702.....	
0.....	20-4861241.....	Total Vision, Inc.....									.0.....	
12315.....	20-3174593.....	Peach State Health Plan, Inc.....	(5,000,000).....				(223,547,978).....	3,592,656.....			(224,955,322).....	2,521,213.....
11834.....	32-0045282.....	Buckeye Community Health Plan, Inc.....	(15,000,000).....				(140,921,324).....	(1,263,231).....			(157,184,554).....	4,202,994.....
12959.....	20-5693998.....	Absolute Total Care, Inc.....					(82,445,454).....	289,357.....			(82,156,097).....	1,045,076.....
95831.....	39-1821211.....	Coordinated Care Corporation d/b/a Manag.....	(11,100,000).....				(71,384,677).....				(82,484,677).....	
96822.....	39-1678579.....	Managed Health Services Insurance Corp.....	(7,000,000).....				(27,690,721).....	796,787.....			(33,893,935).....	61,000.....
60078.....	86-0819817.....	Hallmark Life Insurance Co.....					(693,237).....				(693,237).....	
0.....	36-2979209.....	Celtic Group, Inc.....					8,265,667.....				8,265,667.....	
80799.....	06-0641618.....	Celtic Insurance Company.....		10,000,000.....			(13,040,617).....				(3,040,617).....	
0.....	27-2221367.....	Novasys Health, Inc.....					3,048,382.....				3,048,382.....	
0.....	26-4278205.....	CeltiCare Health Plan Holdings LLC.....									.0.....	
13632.....	26-4818440.....	CeltiCare Health Plan of Massachusetts.....					(29,388,696).....				(29,388,696).....	
95647.....	74-2770542.....	Superior HealthPlan, Inc.....		25,000,000.....			(186,697,285).....	15,055,988.....			(146,641,297).....	7,350,339.....
0.....	27-0916294.....	Healthy Louisiana Holdings LLC.....									.0.....	
13970.....	27-1287287.....	Louisiana Healthcare Connections, Inc.....									.0.....	

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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** 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.

MARCH FILING

- | | Responses |
|---|---------------|
| 1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? |YES..... |
| 2. Will an actuarial opinion be filed by March 1? |YES..... |
| 3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? |YES..... |
| 4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1? |YES..... |

APRIL FILING

- | | |
|--|---------------|
| 5. Will Management's Discussion and Analysis be filed by April 1? |YES..... |
| 6. Will the Supplemental Investment Risks Interrogatories be filed by April 1? |YES..... |
| 7. Will the Accident and Health Policy Experience Exhibit be filed by April 1? |YES..... |

JUNE FILING

- | | |
|--|---------------|
| 8. Will an audited financial report be filed by June 1? |YES..... |
| 9. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? |YES..... |

AUGUST FILING

- | | |
|--|---------------|
| 10. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1? |YES..... |
|--|---------------|

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.

MARCH FILING

- | | |
|--|---------------------------|
| 11. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? |NO..... |
| 12. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC? |NO..... |
| 13. Will the Supplemental Property/Casualty data due March 1 be filed with the state of domicile and the NAIC? |NO..... |
| 14. Will the Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? |NO..... |
| 15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1? |NO..... |
| 16. Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1? |NO..... |
| 17. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? |NO..... |
| 18. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? |SEE EXPLANATION..... |
| 19. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? |SEE EXPLANATION..... |
| 20. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed with electronically with the NAIC by March 1? |SEE EXPLANATION..... |

APRIL FILING

- | | |
|--|--------------|
| 21. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? |NO..... |
| 22. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC? |NO..... |
| 23. Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC? |NO..... |
| 24. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? |NO..... |
| 25. Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1? |NO..... |

AUGUST FILING

- | | |
|--|---------------|
| 26. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? |YES..... |
|--|---------------|

Explanation:

11.
12.
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14.
15.
16.
17.
18. Relief from regulation not applied for
19. Relief from regulation not applied for
20. Relief from regulation not applied for

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

21.

22.

23.

24.

25.

Bar code:



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