



QUARTERLY STATEMENT

AS OF JUNE 30, 2017  
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	4349 Easton Way, Suite 200			Columbus, OH, US 43219		
	(Street and Number)			(City or Town, State, Country and Zip Code)		
Main Administrative Office	7700 Forsyth Boulevard		Saint Louis, MO, US 63105		314-725-4477	
	(Street and Number)		(City or Town, State, Country and Zip Code)		(Area Code) (Telephone Number)	
Mail Address	7700 Forsyth Boulevard		Saint Louis, MO, US 63105			
	(Street and Number or P.O. Box)		(City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	7700 Forsyth Boulevard		Saint Louis, MO, US 63105		314-725-4477	
	(Street and Number)		(City or Town, State, Country and Zip Code)		(Area Code) (Telephone Number)	
Internet Web Site Address	www.bchpohio.com					
Statutory Statement Contact	Jennifer Leigh Ponath			314-445-0601		
	(Name)			(Area Code) (Telephone Number) (Extension)		
	jponath@centene.com			314-725-4658		
	(E-Mail Address)			(FAX Number)		

OFFICERS

Name	Title	Name	Title
Bruce Roberts Hill	President and CEO	Keith Harvey Williamson	Secretary
Jeffrey Alan Schwaneke	Treasurer		

OTHER OFFICERS

Tricia Lynn Dinkelman	Vice President of Tax	Kathy Cobbs Bradley-Wells	Assistant Secretary
Ronald Albert Charles, MD	Vice President Medical Affairs	Erik Dorwin Helms	Sr. Vice President Strategic Initiatives
Hagy Gail Wegener	Vice President Quality Improvement	Lori Jean Mulichak, RN	Sr. Vice President Medical Management
Christopher Donald Bowers	Exec. Vice President Health Plans	Andrew Joseph Reitz #	Vice President of Compliance
	Vice President of Government Relations & Marketing		
Eric Allan Poklar			

DIRECTORS OR TRUSTEES

Kathy Cobbs Bradley-Wells	Christopher Donald Bowers	Charles Robert Vignos	Angela Cornelius Dawson
Jimmy Vance Stewart	Bruce Roberts Hill	William Darrell Smucker, MD	Edward Thomas Arcy, D.O
Elizabeth Anne Kelly			

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.

Bruce Roberts Hill  
President and CEO

Keith Harvey Williamson  
Secretary

Jeffrey Alan Schwaneke  
Treasurer

Subscribed and sworn to before me this  
day of August, 2017

- 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

STATEMENT AS OF JUNE 30, 2017 OF THE Buckeye Community Health Plan, Inc.

ASSETS

	Current Statement Date			4  December 31 Prior Year Net Admitted Assets
	1  Assets	2  Nonadmitted Assets	3  Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	257,117,766		257,117,766	280,722,641
2. Stocks:				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....	6,495,416		6,495,416	6,424,761
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 (\$ ..... (2,102,227) ), cash equivalents (\$ ..... 6,710,497 ) and short-term investments (\$ ..... 71,422,011 ) .....	76,030,280		76,030,280	56,023,576
6. Contract loans (including \$ ..... premium notes) .....			0	0
7. Derivatives .....	0		0	0
8. Other invested assets .....	8,191,519		8,191,519	7,417,728
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) .....	347,834,981	0	347,834,981	350,588,706
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	1,663,094		1,663,094	1,821,666
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	34,846,298		34,846,298	9,399,266
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....			0	0
15.3 Accrued retrospective premiums (\$ ..... 10,433,111 ) and contracts subject to redetermination (\$ ..... ) .....	10,433,111		10,433,111	3,575,977
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	4,463,665		4,463,665	4,344,375
16.2 Funds held by or deposited with reinsured companies .....			0	0
16.3 Other amounts receivable under reinsurance contracts .....	108,887		108,887	108,887
17. Amounts receivable relating to uninsured plans .....	17,493,206		17,493,206	10,969,713
18.1 Current federal and foreign income tax recoverable and interest thereon .....	32,720,381		32,720,381	31,417,209
18.2 Net deferred tax asset .....	8,872,684		8,872,684	7,887,203
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 .....	112,097		112,097	2,946,602
24. Health care (\$ ..... 4,672,245 ) and other amounts receivable .....	10,109,670	5,437,425	4,672,245	4,549,949
25. Aggregate write-ins for other-than-invested assets .....	2,087,595	24,096	2,063,499	1,816,433
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	470,745,669	5,461,521	465,284,148	429,425,986
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27) .....	470,745,669	5,461,521	465,284,148	429,425,986
<b>DETAILS OF WRITE-INS</b>				
1101. ....			0	0
1102. ....			0	0
1103. ....			0	0
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) .....	0	0	0	0
2501. Prepaid Expenses .....	24,096	24,096	0	0
2502. State Income Taxes Receivable .....	2,063,499		2,063,499	1,816,433
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) .....	2,087,595	24,096	2,063,499	1,816,433

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ .....3,842,110 reinsurance ceded).....	150,638,334		150,638,334	154,488,158
2. Accrued medical incentive pool and bonus amounts .....	3,263,364		3,263,364	1,467,955
3. Unpaid claims adjustment expenses .....	2,379,727		2,379,727	2,592,774
4. Aggregate health policy reserves including the liability of \$ ..... for medical loss ratio rebate per the Public Health Service Act.....			0	7,832,364
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 .....	24,829,937		24,829,937	1,571,384
9. General expenses due or accrued .....	27,230,649		27,230,649	36,904,711
10.1 Current federal and foreign income tax payable and interest thereon (including \$ ..... on realized gains (losses)) .....			0	0
10.2 Net deferred tax liability.....			0	0
11. Ceded reinsurance premiums payable .....	3,621,000		3,621,000	1,614,780
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 .....	121,711		121,711	0
16. Derivatives.....		0	0	0
17. Payable for securities .....	620,000		620,000	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 \$ .....19,152,667 current) .....	19,152,667	0	19,152,667	11,945,224
24. Total liabilities (Lines 1 to 23).....	231,857,389	0	231,857,389	218,417,350
25. Aggregate write-ins for special surplus funds .....	XXX	XXX	23,688,659	0
26. Common capital stock .....	XXX	XXX	1,000,000	1,000,000
27. Preferred capital stock .....	XXX	XXX		0
28. Gross paid in and contributed surplus .....	XXX	XXX	129,150,000	129,150,000
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	79,588,100	80,858,636
32. Less treasury stock, at cost:				
32.1 ..... shares common (value included in Line 26 \$ ..... ) .....	XXX	XXX		0
32.2 ..... shares preferred (value included in Line 27 \$ ..... ) .....	XXX	XXX		0
33. Total capital and surplus (Lines 25 to 31 minus Line 32) .....	XXX	XXX	233,426,759	211,008,636
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	465,284,148	429,425,986
DETAILS OF WRITE-INS				
2301. 2016 Risk Adjustment Payable.....	9,939,904		9,939,904	11,133,686
2302. 2017 Risk Adjustment Payable.....	8,118,928		8,118,928	
2303. Cost Sharing Reduction.....	970,429		970,429	733,206
2398. Summary of remaining write-ins for Line 23 from overflow page .....	123,406	0	123,406	78,332
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	19,152,667	0	19,152,667	11,945,224
2501. 2018 Health Insurer Fee Estimate.....	XXX	XXX	23,688,659	0
2502. ....	XXX	XXX		
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	23,688,659	0
3001. ....	XXX	XXX		0
3002. ....	XXX	XXX		0
3003. ....	XXX	XXX		0
3098. Summary of remaining write-ins for Line 30 from overflow page .....	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months.....	XXX	2,048,537	1,936,487	3,917,170
2. Net premium income (including \$ non-health premium income).....	XXX	1,090,493,095	1,022,924,753	2,048,369,014
3. Change in unearned premium reserves and reserve for rate credits .....	XXX		0	0
4. Fee-for-service (net of \$ medical expenses) .....	XXX		0	0
5. Risk revenue .....	XXX		0	0
6. Aggregate write-ins for other health care related revenues .....	XXX	0	0	0
7. Aggregate write-ins for other non-health revenues .....	XXX	0	0	0
8. Total revenues (Lines 2 to 7) .....	XXX	1,090,493,095	1,022,924,753	2,048,369,014
<b>Hospital and Medical:</b>				
9. Hospital/medical benefits .....		570,738,147	519,345,560	1,070,087,178
10. Other professional services .....		107,122,968	95,296,850	198,352,162
11. Outside referrals .....			0	0
12. Emergency room and out-of-area .....		56,014,407	57,089,045	111,861,841
13. Prescription drugs .....		173,607,351	156,824,152	314,184,247
14. Aggregate write-ins for other hospital and medical.....	0	756,181	(2,569,773)	(2,492,591)
15. Incentive pool, withhold adjustments and bonus amounts.....		2,695,455	3,865,019	4,851,917
16. Subtotal (Lines 9 to 15) .....	0	910,934,509	829,850,853	1,696,844,754
<b>Less:</b>				
17. Net reinsurance recoveries .....		6,114,321	7,531,100	16,961,081
18. Total hospital and medical (Lines 16 minus 17) .....	0	904,820,188	822,319,753	1,679,883,673
19. Non-health claims (net).....			0	0
20. Claims adjustment expenses, including \$ 329,791 cost containment expenses.....		12,114,624	21,879,069	22,747,600
21. General administrative expenses.....		148,831,358	159,050,578	312,879,276
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only).....			(7,034,376)	(7,034,376)
23. Total underwriting deductions (Lines 18 through 22) .....	0	1,065,766,170	996,215,024	2,008,476,173
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	XXX	24,726,925	26,709,729	39,892,841
25. Net investment income earned .....		2,810,882	2,861,586	5,660,376
26. Net realized capital gains (losses) less capital gains tax of \$ .....		(10,784)	14,384	46,120
27. Net investment gains (losses) (Lines 25 plus 26) .....	0	2,800,098	2,875,970	5,706,496
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ ) (amount charged off \$ 231,043 )] .....		(231,043)	(209,896)	(358,405)
29. Aggregate write-ins for other income or expenses .....	0	0	0	0
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	27,295,980	29,375,803	45,240,932
31. Federal and foreign income taxes incurred .....	XXX	12,264,439	17,226,045	22,488,345
32. Net income (loss) (Lines 30 minus 31) .....	XXX	15,031,541	12,149,758	22,752,587
<b>DETAILS OF WRITE-INS</b>				
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. ....	XXX			
0702. ....	XXX			
0703. ....	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page .....	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above) .....	XXX	0	0	0
1401. Unpaid Reinsurance Recoveries.....		756,181	(2,569,773)	(2,492,591)
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	756,181	(2,569,773)	(2,492,591)
2901. ....			0	0
2902. ....			0	0
2903. ....			0	0
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	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1	2	3
	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
<b>CAPITAL &amp; SURPLUS ACCOUNT</b>			
33. Capital and surplus prior reporting year.....	211,008,636	178,284,359	178,284,359
34. Net income or (loss) from Line 32 .....	15,031,541	12,149,758	22,752,587
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 \$ .....167,674	430,407	26,890	335,845
37. Change in net unrealized foreign exchange capital gain or (loss) .....		0	0
38. Change in net deferred income tax .....	905,737	(2,551,300)	(4,138,318)
39. Change in nonadmitted assets .....	6,050,438	(686,945)	3,774,163
40. Change in unauthorized and certified reinsurance .....	0	0	0
41. Change in treasury stock .....		0	0
42. Change in surplus notes .....	0	0	0
43. Cumulative effect of changes in accounting principles .....		0	0
44. Capital Changes:			
44.1 Paid in .....		0	0
44.2 Transferred from surplus (Stock Dividend) .....		0	0
44.3 Transferred to surplus .....		0	0
45. Surplus adjustments:			
45.1 Paid in .....		10,000,000	10,000,000
45.2 Transferred to capital (Stock Dividend) .....	0	0	0
45.3 Transferred from capital .....		0	0
46. Dividends to stockholders .....		0	0
47. Aggregate write-ins for gains or (losses) in surplus .....	0	0	0
48. Net change in capital and surplus (Lines 34 to 47) .....	22,418,123	18,938,403	32,724,277
49. Capital and surplus end of reporting period (Line 33 plus 48)	233,426,759	197,222,762	211,008,636
<b>DETAILS OF WRITE-INS</b>			
4701. ....			
4702. ....			
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	0

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance.....	1,082,591,558	986,019,093	2,053,368,974
2. Net investment income .....	3,722,072	3,672,707	7,464,263
3. Miscellaneous income .....	0	0	0
4. Total (Lines 1 to 3) .....	1,086,313,630	989,691,800	2,060,833,237
5. Benefit and loss related payments .....	901,135,353	852,808,571	1,730,236,695
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....		0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	174,819,174	170,322,897	341,973,959
8. Dividends paid to policyholders .....		0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses).....	13,567,509	24,959,484	54,572,976
10. Total (Lines 5 through 9) .....	1,089,522,036	1,048,090,952	2,126,783,630
11. Net cash from operations (Line 4 minus Line 10) .....	(3,208,406)	(58,399,152)	(65,950,393)
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	42,991,476	64,900,612	107,631,065
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	479,266
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	0	0	(36)
12.7 Miscellaneous proceeds .....	1,378,941	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	44,370,417	64,900,612	108,110,295
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	20,148,127	64,001,774	93,378,994
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 .....	1,007,181	263,998	263,998
13.6 Miscellaneous applications .....	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	21,155,308	64,265,772	93,642,992
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) .....	23,215,110	634,840	14,467,303
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes .....	0	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	23,000,000	23,000,000
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	0
16.6 Other cash provided (applied).....	0	0	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	23,000,000	23,000,000
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	20,006,704	(34,764,312)	(28,483,090)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	56,023,576	84,506,666	84,506,666
19.2 End of period (Line 18 plus Line 19.1) .....	76,030,280	49,742,354	56,023,576

STATEMENT AS OF JUNE 30, 2017 OF THE Buckeye Community Health Plan, Inc.

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 .....	326,813	7,767	.0	.0	.0	.0	.0	11,966	307,080	.0
2. First Quarter .....	342,658	16,593	.0	.0	.0	.0	.0	12,543	313,522	.0
3. Second Quarter .....	346,092	15,344	.0	.0	.0	.0	.0	12,735	318,013	.0
4. Third Quarter .....	.0									
5. Current Year	0									
6. Current Year Member Months	2,048,537	94,300						74,457	1,879,780	
Total Member Ambulatory Encounters for Period:										
7. Physician .....	1,314,167	33,078						255,013	1,026,076	
8. Non-Physician .....	2,286,931	41,522						57,570	2,187,839	
9. Total	3,601,098	74,600	0	0	0	0	0	312,583	3,213,915	0
10. Hospital Patient Days Incurred	647,425	2,198						26,636	618,591	
11. Number of Inpatient Admissions	37,058	405						3,423	33,230	
12. Health Premiums Written (a).....	1,101,290,827	23,770,703						119,380,168	958,139,956	
13. Life Premiums Direct.....	.0									
14. Property/Casualty Premiums Written .....	.0									
15. Health Premiums Earned .....	1,101,290,827	23,770,703						119,380,168	958,139,956	
16. Property/Casualty Premiums Earned .....	.0									
17. Amount Paid for Provision of Health Care Services .....	906,874,603	16,512,075						111,948,661	778,413,867	
18. Amount Incurred for Provision of Health Care Services	910,934,509	18,559,995						108,648,106	783,726,408	

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 119,380,168

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

[illegible]

UNDERWRITING AND INVESTMENT EXHIBIT  
ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5  Claims Incurred in Prior Years (Columns 1 + 3)	6  Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
	1  On Claims Incurred Prior to January 1 of Current Year	2  On Claims Incurred During the Year	3  On Claims Unpaid Dec. 31 of Prior Year	4  On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) .....	3,085,874	14,155,359	303,636	4,871,908	3,389,510	3,672,160
2. Medicare Supplement .....					.0	.0
3. Dental only .....					.0	.0
4. Vision only .....					.0	.0
5. Federal Employees Health Benefits Plan .....					.0	.0
6. Title XVIII - Medicare .....	17,481,847	98,525,895	1,141,833	20,584,270	18,623,680	25,378,875
7. Title XIX - Medicaid .....	99,830,538	682,254,714	4,068,222	119,668,465	103,898,760	125,437,123
8. Other health .....					.0	.0
9. Health subtotal (Lines 1 to 8).....	120,398,259	794,935,968	5,513,691	145,124,643	125,911,950	154,488,158
10. Health care receivables (a) .....		9,359,669			.0	.0
11. Other non-health .....					.0	.0
12. Medical incentive pools and bonus amounts .....		900,046	1,375,382	1,887,982	1,375,382	1,467,955
13. Totals (Lines 9-10+11+12)	120,398,259	786,476,345	6,889,073	147,012,625	127,287,332	155,956,113

(a) Excludes \$ .....750,000 loans or advances to providers not yet expensed.

NOTES TO FINANCIAL STATEMENTS

(1) Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Buckeye Community Health Plan, Inc. (the Company) have been prepared in conformity with accounting practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company for determining its solvency under Ohio Insurance Law.

The National Association of Insurance Commissioners’ (NAIC) *Accounting Practices and Procedures* Manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the State of Ohio.

NET INCOME	SSAP #	F/S Page	F/S Line #	State of Domicile	2017	2016
(1) Buckeye Community Health Plan state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	Ohio	\$ 15,031,541	\$ 22,752,587
(2) State Prescribed Practices that increase/(decrease) NAIC SAP: e.g., Depreciation of fixed assets				Ohio	-	-
(3) State Permitted Practices that increase/(decrease) NAIC SAP: e.g., Depreciation of fixed assets, home office property				Ohio	-	-
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	Ohio	\$ 15,031,541	\$ 22,752,587
SURPLUS						
(5) Buckeye Community Health Plan state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	Ohio	\$ 233,426,759	\$ 211,008,633
(6) State Prescribed Practices that increase/(decrease) NAIC SAP: e.g., Goodwill, net e.g., Fixed Assets, net				Ohio	-	-
(7) State Permitted Practices that increase/(decrease) NAIC SAP: e.g., Home Office Property				Ohio	-	-
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	Ohio	\$ 233,426,759	\$ 211,008,633

B. Use of Estimates in the Preparation of the Financial Statements.

No change

C. Accounting Policy

1-5. No change.

6. Loan-backed securities are carried at amortized cost. Adjustments are applied prospectively.

7-13. No change.

D. Going Concern - The Company’s management has not identified any conditions or events that raise substantial doubt about its ability to continue as a going concern.

(2) Accounting Changes and Corrections of Errors

No change

(3) Business Combinations and Goodwill

A. Statutory Purchase Method

No change

B. Statutory Merger

No change

C. Assumption Reinsurance

No change

D. Impairment Loss

No change

(4) Discontinued Operations

No change

(5) Investments

The following long-term investments can be liquidated within 24 hours without incurring a significant penalty (defined as greater than 20%).

NOTES TO FINANCIAL STATEMENTS

	Amortized Cost	Market Value
Bonds	\$256,717,749	\$257,801,462

- A. A-C. No change
- B. Debt Restructuring – None.
- C. Reverse Mortgages – None.
- D. Loan-Backed Securities
  - Prepayment assumptions were obtained from S&P Capital IQ.
  - There are no securities within the scope of this statement with a recognized other-than-temporary impairment.
  - There are no securities with a recognized other-than-temporary impairment.
  - All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):
    - The aggregate amount of unrealized losses:
      - Less than 12 Months \$77,970
      - 12 Months or Longer \$14,126
    - The aggregate related fair value of securities with unrealized losses:
      - Less than 12 Months \$10,130,979
      - 12 Months or Longer \$3,330,149
  - For any security in an unrealized loss position, the Company assesses whether it intends to sell the security or if it is more likely than not that the Company will be required to sell the security before recovery of the amortized cost basis for reasons such as liquidity, contractual or regulatory purposes. If the security meets this criterion, the decline in fair value is other-than-temporary and is recorded in earnings.

For loan-backed securities in an unrealized loss position, management further evaluates whether the collection of all cashflows is probable. Management utilizes the prospective adjustment method to evaluate the present value of future cash flows. For those loan-back and structured securities (NAIC designated 1 or 2) where management has determined that collection of all contractual cashflows is not probable, the securities are considered other than temporarily impaired to the extent amortized cost is greater than the present value of future cash flows.
- E. Repurchase Agreements and/or Securities Lending Transactions
  - No change
  - None
  - None
- F. Real Estate

No change
- G. Low-income housing tax credit

No change
- H. Restricted Assets

No change
- I. Working Capital Finance Investments - None
- J. Offsetting and Netting of Assets and Liabilities - None
- K. Structured Notes – None
- L. 5\* Securities – None

(6) Joint Ventures, Partnerships and Limited Liability Companies

NOTES TO FINANCIAL STATEMENTS

No change

(7) Investment Income

No change

(8) Derivative Instruments

No change

(9) Income Taxes

No change

(10) Information Concerning Parent, Subsidiaries and Affiliates

No change

(11) Debt

- A. Capital Notes - None
- B. FHLB (Federal Home Loan Bank Agreements) - None

(12) Retirement Plans, Deferred Compensation, Post-Employment Benefits, Compensated Absences and Other Postretirement Benefit Plans.

A-I. None

(13) Capital and Surplus, Shareholders’ Dividend Restrictions and Quasi-Reorganizations

No change

(14) Liabilities, Contingencies and Assessments

No change

(15) Leases

No change

(16) Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk.

No change

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

None

(18) Gain or Loss to the Reporting Entity from Uninsured A&H Plans and the Uninsured Portion of Partially Insured Plans.

No change

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

None

(20) Fair Value Measurements

- A. 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:

NOTES TO FINANCIAL STATEMENTS

Level input	Input definition
Level 1	Inputs are unadjusted, quoted prices for identical assets or liabilities in active markets at the measurement date.
Level 2	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 3	Unobservable inputs that reflect management's best estimate of what market participants would use in pricing the asset or liability at the measurement date.

The following table summarizes fair value measurements by level at June 30, 2017 for assets and liabilities measured at fair value on a recurring basis:

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Total
a. Assets at fair value				
Cash, Cash Equivalents & Short Term Investments	\$ 76,030,280	\$ -	\$ -	\$ 76,030,280
Perpetual Preferred stock				
Industrial and Misc	\$ -	\$ -	\$ -	\$ -
Parent, Subsidiaries and Affiliates	-	-	-	-
Total Perpetual Preferred Stocks	\$ -	\$ -	\$ -	\$ -
Bonds				
U.S. Governments	\$ -	\$ -	\$ -	\$ -
Industrial and Misc	-	1,154,200	-	1,154,200
Hybrid Securities	-	-	-	-
Parent, Subsidiaries and Affiliates	-	-	-	-
Total Bonds	\$ -	\$ 1,154,200	\$ -	\$ 1,154,200
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	\$ 76,030,280	\$ 1,154,200	\$ -	\$ 77,184,480
b. Liabilities at fair value				
Derivative liabilities	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -

The following table summarizes fair value measurements by level at December 31, 2016 for assets and liabilities measured at fair value on a recurring basis:

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Total
a. Assets at fair value				
Cash, Cash Equivalents & Short Term Investments	\$ 52,903,257	\$ -	\$ -	\$ 52,903,257
Perpetual Preferred stock				
Industrial and Misc	\$ -	\$ -	\$ -	\$ -
Parent, Subsidiaries and Affiliates	-	-	-	-
Total Perpetual Preferred Stocks	\$ -	\$ -	\$ -	\$ -
Bonds				
U.S. Governments	\$ -	\$ -	\$ -	\$ -
Industrial and Misc	-	1,154,200	-	1,154,200
Hybrid Securities	-	-	-	-
Parent, Subsidiaries and Affiliates	-	-	-	-
Total Bonds	\$ -	\$ 1,154,200	\$ -	\$ 1,154,200
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	\$ 52,903,257	\$ 1,154,200	\$ -	\$ 54,057,457
b. Liabilities at fair value				
Derivative liabilities	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -

- B. None
- C. The following table summarizes the aggregate fair value measurements by level at June 30, 2017 for all financial instruments. There are no short-term bonds as of June 30, 2017.

NOTES TO FINANCIAL STATEMENTS

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level I	Level II	Level III	Not Practicable (Carrying Value)
Bonds	\$ 258,201,006	\$ 257,117,764	\$ 6,080,767	\$ 250,966,039	\$ 1,154,200	\$ -
Cash, Cash Equivalents & Short Term Investments	76,030,280	76,030,280	76,030,280	-	-	-
Common Stock	-	-	-	-	-	-
Perpetual Preferred Stock	-	-	-	-	-	-
Mortgage Loans	-	-	-	-	-	-
Total	\$ 334,231,286	\$ 333,148,043	\$ 82,111,047	\$ 250,966,039	\$ 1,154,200	\$ -

D. The following table summarizes the aggregate fair value measurements by level at December 31, 2016 for all financial instruments. The table includes \$3,120,317 of bonds classified as short-term.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level I	Level II	Level III	Not Practicable (Carrying Value)
Bonds	\$ 283,397,679	\$ 283,842,959	\$ 837,704	\$ 278,559,976	\$ 4,000,000	\$ -
Cash, Cash Equivalents & Short Term Investments	52,903,257	52,903,257	52,903,257	-	-	-
Common Stock	-	-	-	-	-	-
Perpetual Preferred Stock	-	-	-	-	-	-
Mortgage Loans	-	-	-	-	-	-
Total	\$ 336,300,936	\$ 336,746,216	\$ 53,740,961	\$ 278,559,976	\$ 4,000,000	\$ -

E. None

(21) Other Items

No change

(22) Events Subsequent

No change

(23) Reinsurance

No change

(24) Retrospectively Rated Contracts and Contracts Subject to Redetermination

A-D. No change

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

1) Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk-sharing provisions (YES/NO)?	Yes
2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year	
a) Permanent ACA Risk Adjustment Program	
Assets	
1) Premium adjustments receivable due to ACA Risk Adjustment	-
Liabilities	
2) Risk adjustment user fees payable for ACA Risk Adjustment	29,447
3) Premium adjustments payable due to ACA Risk Adjustment	18,058,832
Operations (Revenue & Expense)	
4) Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk adjustment	(6,925,145)
5) Reported in expenses as ACA risk adjustment user fees (incurred/paid)	13,072
b) Transitional ACA Reinsurance Program	
Assets	
1) Amounts recoverable for claims paid due to ACA Reinsurance	1,056,418
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	48,843
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	263,691
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	-

NOTES TO FINANCIAL STATEMENTS

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		Ref	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)		Receivable	(Payable)
a) Permanent ACA Risk Adjustment Program											
1) Premium adjustments receivable	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -
2) Premium adjustments (payable)	\$ -	\$ (11,133,686)	\$ -	\$ -	\$ -	\$ (11,133,686)	\$ -	\$ 1,193,783		\$ -	\$ (9,939,904)
3) Subtotal ACA Permanent Risk Adjustment Program	\$ -	\$ (11,133,686)	\$ -	\$ -	\$ -	\$ (11,133,686)	\$ -	\$ 1,193,783		\$ -	\$ (9,939,904)
b) Transitional ACA Reinsurance Program											
1) Amounts recoverable for claims paid	\$ 782,623	\$ -	\$ 191,462	\$ -	\$ 591,161	\$ -	\$ 485,257	\$ -		\$ 1,056,418	\$ -
2) Amounts recoverable for claims unpaid (contra liability)	\$ 84,207	\$ -	\$ -	\$ -	\$ 84,207	\$ -	\$ (84,207)	\$ -		\$ -	\$ -
3) Amounts receivable relating to uninsured plans	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -
4) Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium	\$ -	\$ (48,843)	\$ -	\$ -	\$ -	\$ (48,843)	\$ -	\$ -		\$ -	\$ (48,843)
5) Ceded reinsurance premiums payable	\$ -	\$ (195,372)	\$ -	\$ (195,372)	\$ -	\$ -	\$ -	\$ -		\$ -	\$ 0
6) Liability for amounts held under uninsured plans	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -
7) Subtotal ACA Transitional Reinsurance Program	\$ 866,831	\$ (244,215)	\$ 191,462	\$ (195,372)	\$ 675,369	\$ (48,843)	\$ 381,049	\$ -		\$ 1,056,418	\$ (48,843)
c) Temporary ACA Risk Corridors Program											
1) Accrued retrospective premium	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -
2) Reserve for rate credits or policy experience rating refunds	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -
3) Subtotal ACA Risk Corridors Program	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -
d. Total for ACA Risk Sharing Provisions	\$ 866,831	\$ (11,377,901)	\$ 191,462	\$ (195,372)	\$ 675,369	\$ (11,182,529)	\$ 381,049	\$ 1,193,783		\$ 1,056,418	\$ (9,988,747)

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

	Balance as of 12/31/16	2016 Cash Received (YTD)	2017 Estimate Adjustments (YTD)	Balance as of 3/31/17	Balance as of 6/30/17	Balance as of 9/30/17	Balance as of 12/31/17
2014 Risk Corridor Receivable	-	-	-	-	-	-	-
2014 Risk Corridor Payable	-	-	-	-	-	-	-
2015 Risk Corridor Receivable	-	-	-	-	-	-	-
2015 Risk Corridor Payable	-	-	-	-	-	-	-
2016 Risk Corridor Receivable	-	-	-	-	-	-	-
2016 Risk Corridor Payable	-	-	-	-	-	-	-
Total Risk Corridor Receivable	-	-	-	-	-	-	-
Total Risk Corridor Payable	-	-	-	-	-	-	-

5) ACA Risk Corridors Receivable as of Reporting Date

	Estimated Amount to be filed/final amount filed with federal agency	Amounts impaired or not accrued	Amounts received from federal agency	Asset balance gross of non-admission	Non-admitted amounts	Net admitted assets
ACA Risk Corridor Receivable						
2014 Benefit Year	-	-	-	-	-	-
2015 Benefit Year	-	-	-	-	-	-
2016 Benefit Year	-	-	-	-	-	-

(25) Change in Incurred Claims and Claims Adjustment Expenses

Reserves for incurred claims and claim adjustment expenses as of December 31, 2016 were \$154.5 million and \$2.6 million. As of June 30, 2017, \$120.4 million and \$2.5 million have been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$6.9 million and \$0.1 million as a result of the reestimation of unpaid claims and claim adjustment expenses. Therefore, there has been \$27.2 million in favorable prior-year development. This decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

(26) Intercompany Pooling Arrangements

No change

(27) Structured Settlements

No change

(28) Health Care Receivables

No change

(29) Participating Policies

No change

(30) Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves

2. Date of the most recent evaluation of this liability

3. Was anticipated investment income utilized in the calculation?
- \$0

7/14/2017

Yes☒ No☐

(31) Anticipated Salvage and Subrogation

No change

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES  
GENERAL

- 1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes ☐ No ☒
- 1.2

If yes, has the report been filed with the domiciliary state?

Yes ☐ No ☐
- 2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes ☐ No ☒
- 2.2

If yes, date of change:
- 3.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?

Yes ☒ No ☐
- If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes ☐ No ☒
- 3.3

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

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

Yes ☐ No ☒
- 4.2

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

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

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?

Yes ☐ No ☒ NA ☐
- If yes, attach an explanation.
- 6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2012
- 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.

12/31/2012
- 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).

03/10/2014
- 6.4

By what department or departments?

Ohio Department of Insurance
- 6.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes ☐ No ☐ NA ☒
- 6.6

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

Yes ☐ No ☐ NA ☒
- 7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes ☐ No ☒
- 7.2

If yes, give full information:
- 8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes ☐ No ☒
- 8.2

If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes ☐ No ☒
- 8.4

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

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

GENERAL INTERROGATORIES

9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? .....  
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;  
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;  
(c) Compliance with applicable governmental laws, rules and regulations;  
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and  
(e) Accountability for adherence to the code.

Yes [X] No [ ]

9.11

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

9.2

Has the code of ethics for senior managers been amended? .....

Yes [ ] No [X]

9.21

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

9.3

Have any provisions of the code of ethics been waived for any of the specified officers? .....

Yes [ ] No [X]

9.31

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

FINANCIAL

10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?.....

Yes [X] No [ ]

10.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:.....\$ .....0

INVESTMENT

11.1

Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) .....

Yes [ ] No [X]

11.2

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

12.

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

13.

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

14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates? .....

Yes [X] No [ ]

14.2

If yes, please complete the following:

	1	2
	Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21 Bonds .....	\$ .....	\$ .....
14.22 Preferred Stock .....	\$ .....	\$ .....
14.23 Common Stock .....	\$ .....6,424,761	\$ .....6,495,416
14.24 Short-Term Investments .....	\$ .....	\$ .....
14.25 Mortgage Loans on Real Estate .....	\$ .....	\$ .....
14.26 All Other .....	\$ .....	\$ .....
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$ .....6,424,761	\$ .....6,495,416
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above .....	\$ .....	\$ .....

15.1

Has the reporting entity entered into any hedging transactions reported on Schedule DB? .....

Yes [ ] No [X]

15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? .....

Yes [ ] No [ ]

If no, attach a description with this statement.

GENERAL INTERROGATORIES

- 16 For the reporting entity’s security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

16.3 Total payable for securities lending reported on the liability page
- \$ .....0

\$ .....0

\$ .....0

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

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

1 Name of Custodian(s)	2 Custodian Address
Wells Fargo Advisors.....	One North Jefferson, St. Louis, MO 63103.....
Wells Capital Management.....	525 Market St., 10th Floor, San Francisco, CA 94105.....
Wells Fargo Securities.....	608 Second Avenue South, 10th Floor MAC N9303-102, Minneapolis, MN 55402.....
Brown Brothers Harriman & Co.....	140 Broadway, New York, NY 10005.....
Bank of America.....	135 South LaSalle, Chicago, IL 60603.....

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

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

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

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

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

- 17.5 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 Name of Firm or Individual	2 Affiliation
Wells Capital Management.....	U.....
BYW Investment Advisors, Inc.....	U.....
Wells Fargo Securities.....	U.....
Brown Brothers Harriman & Co.....	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 assets? .....
- Yes [ X ] No [ ]

- 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 assets? .....
- Yes [ X ] No [ ]

- 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 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
104973.....	Wells Capital Management.....	549300B3H21002L85190.....	SEC.....	NO.....
168297.....	BYW Investment Advisors, Inc.....	-.....	SEC.....	DS.....
126292.....	Wells Fargo Securities.....	VYVVKR63DVZZN70PB21.....	SEC.....	NO.....
104487.....	Brown Brothers Harriman.....	-.....	F INRA.....	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:
- .....

GENERAL INTERROGATORIES  
PART 2 - HEALTH

1.	Operating Percentages:	
1.1	A&H loss percent.....	83.0 %
1.2	A&H cost containment percent .....	0.0 %
1.3	A&H expense percent excluding cost containment expenses.....	14.7 %
2.1	Do you act as a custodian for health savings accounts?.....	Yes [ ] No [X]
2.2	If yes, please provide the amount of custodial funds held as of the reporting date.....	\$
2.3	Do you act as an administrator for health savings accounts?.....	Yes [ ] No [X]
2.4	If yes, please provide the balance of the funds administered as of the reporting date.....	\$

**STATEMENT AS OF JUNE 30, 2017 OF THE Buckeye Community Health Plan, Inc.**

## SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

[illegible]

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories										
States, Etc.	1  Active Status	Direct Business Only								
		2  Accident & Health Premiums	3  Medicare Title XVIII	4  Medicaid Title XIX	5  Federal Employees Health Benefits Program Premiums	6  Life & Annuity Premiums & Other Considerations	7  Property/ Casualty Premiums	8  Total Columns 2 Through 7	9  Deposit-Type Contracts	
1. Alabama	AL	N						0		
2. Alaska	AK	N						0		
3. Arizona	AZ	N						0		
4. Arkansas	AR	N						0		
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	N						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	L	23,770,703	119,380,168	958,139,956			1,101,290,827		
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	23,770,703	119,380,168	958,139,956	0	0	0	1,101,290,827		0
60. Reporting entity contributions for Employee Benefit Plans	XXX							0		
61. Total (Direct Business)	(a) 1	23,770,703	119,380,168	958,139,956	0	0	0	1,101,290,827		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

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

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

15

Centene Corporation	42-1406317	DE	
Bankers Reserve Life Insurance Company of Wisconsin	39-0993433	WI	71013
Health Plan Real Estate Holding, Inc (17%)	46-2860967	MO	
Peach State Health Plan, Inc	20-3174593	GA	12315
Health Plan Real Estate Holding, Inc (21%)	46-2860967	MO	
Iowa Total Care, Inc	46-4829006	IA	15713
Buckeye Community Health Plan, Inc	32-0045282	OH	11834
Health Plan Real Estate Holding, Inc (13%)	46-2860967	MO	
Absolute Total Care, Inc	20-5693998	SC	12959
Health Plan Real Estate Holding, Inc (1%)	46-2860967	MO	
Physicians Choice, LLC	59-3807546	SC	
PhyTrust of South Carolina LLC	65-1206841	FL	
Coordinated Care Corporation d/b/a Managed Health Services	39-1821211	IN	95831
Health Plan Real Estate Holding, Inc (15%)	46-2860967	MO	
Healthy Washington Holdings, Inc	46-5523218	DE	
Coordinated Care of Washington, Inc	46-2578279	WA	15352
Managed Health Services Insurance Corp	39-1678579	WI	96822
Health Plan Real Estate Holding, Inc (2%)	46-2860967	MO	
Hallmark Life Insurance Co	86-0819817	AZ	60078
Superior HealthPlan, Inc	74-2770542	TX	95647
Health Plan Real Estate Holding, Inc (21%)	46-2860967	MO	
Healthy Louisiana Holdings LLC	27-0916294	DE	
Louisiana Healthcare Connections, Inc	27-1287287	LA	13970
Magnolia Health Plan Inc	20-8570212	MS	13923
IlliniCare Health Plan, Inc	27-2186150	IL	14053
Health Plan Real Estate Holding, Inc (5%)	46-2860967	MO	
Sunshine Health Holding LLC	26-0557093	FL	
Sunshine State Health Plan, Inc	20-8937577	FL	13148
Access Health Solutions LLC	56-2384404	FL	
Kentucky Spirit Health Plan, Inc	45-1294925	KY	14100
Healthy Missouri Holding, Inc (95%)	45-5070230	MO	
Home State Health Plan, Inc	45-2798041	MO	14218
Health Plan Real Estate Holding, Inc (5%)	46-2860967	MO	
Sunflower State Health Plan, Inc	45-3276702	KS	14345
Granite State Health Plan, Inc	45-4792498	NH	14226
Bridgeway Advantage Solutions, Inc	46-4195563	AZ	15447
California Health and Wellness Plan	46-0907261	CA	
Michigan Complete Health, Inc.	30-0312489	MI	10769
SilverSummit Healthplan, Inc.	20-4761189	NV	16143
Agate Resources, Inc.	20-0483299	OR	
Lane Individual Practice Association, Inc.	93-1198219	OR	

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

Trillium Community Health Plan, Inc. (60%)	42-1694349	OR	12559
Trillium Community Health Plan, Inc. (40%)	42-1694349	OR	12559
Agate Properties, LLC	26-4475075	OR	
Independent Professional Services, LLC	93-1198376	OR	
Nebraska Total Care, Inc.	47-5123293	NE	15902
Pennsylvania Health & Wellness, Inc.	47-5340613	PA	16041
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		AR	
Healthy Oklahoma Holdings, Inc.	81-2788043	DE	
Oklahoma Complete Health Inc.	81-3121527	OK	
Bridgeway Health Solutions, LLC	20-4980875	DE	
Bridgeway Health Solutions of Arizona Inc.	20-4980818	AZ	
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	
CMC Hanley, LLC	46-4234827	MO	
Forhan, LLC	47-2914561	MO	
Hanley-Forsyth, LLC	37-1766939	MO	
GPT Acquisition LLC	45-5431787	DE	
Clayton Property Investment LLC	45-4372065	DE	
LSM Holdco, Inc.	46-2794037	DE	
Lifeshare Management Group, LLC	46-2798132	NH	
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	
Envolve Holdings, Inc.	22-3889471	DE	

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

15.2

Cenpatico Behavioral Health, LLC	68-0461584	CA	
CBHSP Arizona, Inc	86-0782736	AZ	
Cenpatico of California, Inc	47-2595704	CA	
Integrated Mental Health Mgmt, LLC	74-2892993	TX	
Integrated Mental Health Services	74-2785494	TX	
Cenpatico Behavioral Health of Arizona, LLC	20-1624120	AZ	
Cenpatico of Arizona Inc. (80%)	80-0879942	AZ	14704
Envolve, Inc.	37-1788565	DE	
AHA Administrative Services, LLC	47-4545413	AL	
Envolve - New York, Inc.	47-3454898	NY	
Community Care of Central Colorado, LLC		DE	
Envolve PeopleCare, Inc.	06-1476380	DE	
LiveHealthier, Inc.	47-2516714	DE	
Envolve Benefits Options, Inc.	61-1846191	DE	
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 of Florida, Inc	65-0094759	FL	
Envolve Total Vision, Inc.	20-4861241	DE	
Envolve Vision of New York, Inc.	06-1635519	NY	
Envolve Dental, Inc.	46-2783884	DE	
Envolve Dental of Florida, Inc.	81-2969330	FL	
Envolve Dental of Texas, Inc.	81-2796896	TX	16106
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	
Centurion Group, Inc	61-1450727	DE	
Centurion LLC (51%)	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	
Massachusetts Partnership for Correctional Healthcare, LLC	61-1696004	MA	
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 Illinois, LLC	81-3007264	IL	

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

15.3

Centurion of Maryland, LLC	81-4938030	MD
Centurion of Philadelphia, LLC	81-5429405	PA
Specialty Therapeutic Care Holdings, LLC	27-3617766	DE
Specialty Therapeutic Care, LP (99.99%)	73-1698808	TX
Specialty Therapeutic Care, GP, LLC	73-1698807	TX
Specialty Therapeutic Care, LP (0.01%)	73-1698808	TX
Specialty Therapeutic Care West, LLC	26-2624521	TX
AcariaHealth Solutions, Inc.	80-0856383	DE
AcariaHealth, Inc.	45-2780334	DE
AcariaHealth Pharmacy #14, Inc	27-1599047	CA
AcariaHealth Pharmacy #11, Inc	20-8192615	TX
AcariaHealth Pharmacy #12, Inc	27-2765424	NY
AcariaHealth Pharmacy #13, Inc	26-0226900	CA
AcariaHealth Pharmacy, Inc	13-4262384	CA
HomeScripts.com, LLC	27-3707698	MI
New York Rx, Inc.	20-8235695	NY
U.S. Medical Management Holdings, Inc	27-0275614	DE
U.S. Medical Management, LLC (20%)	38-3153946	DE
U.S. Medical Management, LLC (48%)	38-3153946	DE
RMED, LLC	31-1733889	FL
IAH of Florida, LLC	47-2138680	FL
Heritage Home Hospice, LLC	51-0581762	MI
Grace Hospice of Austin, LLC	20-2827613	MI
ComfortBrook Hospice, LLC	20-1530070	OH
Comfort Hospice of Texas, LLC	20-4996551	MI
Grace Hospice of San Antonio, LLC	20-2827526	MI
Grace Hospice of Grand Rapids, LLC	45-0679248	MI
Grace Hospice of Indiana, LLC	45-0634905	MI
Grace Hospice of Virginia, LLC	45-5080637	MI
Comfort Hospice of Missouri, LLC	45-5080567	MI
Grace Hospice of Colorado, LLC	45-5080675	MI
Grace Hospice of Wisconsin, LLC	46-1708834	MI
Grace Hospice of Illinois, LLC	81-5129923	IL
Seniorcorps Peninsula, LLC	26-4435532	VA
R&C Healthcare, LLC	33-1179031	TX
A N J, LLC	20-0927034	TX
Pinnacle Senior Care of Missouri, LLC	46-0861469	MI
Country Style Health Care, LLC	03-0556422	TX
Phoenix Home Health Care, LLC	14-1878333	DE
Traditional Home Health Services, LLC	75-2635025	TX
Family Nurse Care, LLC	38-2751108	MI

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

15.4

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	
Hospice DME Company, LLC	46-1734288	MI	
Rapid Respiratory Services, LLC	20-4364776	DE	
USMM Accountable Care Network, LLC	46-5730959	DE	
USMM Accountable Care Partners, LLC	46-5735993	DE	
USMM Accountable Care Solutions, LLC	46-5745748	DE	
USMM ACO, LLC	45-4165480	MI	
USMM ACO Florida, LLC	45-4157180	MI	
USMM ACO North Texas, LLC	45-4154905	MI	
Health Net, Inc.	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	
Health Net of California Real Estate Holdings, Inc.	54-2174069	CA	
Managed Health Network, LLC	95-4117722	DE	
Managed Health Network	95-3817988	CA	
MHN Services, LLC	95-4146179	CA	
MHN Services IPA, Inc.	13-4027559	NY	
Health Net Federal Services, LLC	68-0214809	DE	
MHN Government Services LLC	42-1680916	DE	
MHN Global Services, Inc.	51-0589404	DE	
MHN Government Services-Belgium, Inc.	80-0852000	DE	
MHN Government Services-Djibouti, Inc.	90-0889816	DE	
MHN Government Services-Germany, Inc.	80-0852008	DE	
MHN Government Services-Guam, Inc.	90-0889803	DE	
MHN Government Services-International, Inc.	90-0889825	DE	
MHN Government Services-Italy, Inc.	80-0852019	DE	
MHN Government Services-Japan, Inc.	46-1038058	DE	
MHN Government Services-Puerto Rico, Inc.	90-0889815	DE	
MHN Government Services-Turkey, Inc.	90-0889824	DE	
MHN Government Services-United Kingdom, Inc.	90-0889833	DE	
Network Providers, LLC (10%)	88-0357895	DE	
Health Net Preferred Providers, LLC	61-1388903	DE	
Health Net Veterans, LLC	35-2490375	DE	
Network Providers, LLC (90%)	88-0357895	DE	

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

Health Net of the Northeast, LLC (25%)	06-1116976	DE	
North Region Providers, LLC	n/a	DE	
Health Net of the Northeast, LLC (75%)	06-1116976	DE	
QualMed, Inc.	84-1175468	DE	
QualMed Plans for Health of Colorado, Inc.	84-0975985	CO	
Health Net Health Plan of Oregon, Inc.	93-1004034	OR	95800
HSI Advantage Health Holdings, Inc.	23-2867299	DE	
QualMed Plans for Health of Western Pennsylvania, Inc.	23-2867300	PA	
Pennsylvania Health Care Plan, Inc.	25-1516632	PA	
Health Net Services Inc.	94-3037822	DE	
Health Net Community Solutions, Inc.	54-2174068	CA	
Health Net of Arizona, Inc.	36-3097810	AZ	95206
Health Net One Payment Services, Inc.	54-2153100	DE	
Health Net of Pennsylvania, LLC	n/a	PA	
QualMed Plans for Health of Pennsylvania, Inc.	23-2456130	PA	
FH Surgery Limited, Inc.	68-0390434	CA	
Foundation Health Facilities, Inc.	68-0390438	CA	
FH Assurance Company	98-0150604	CYM	
Health Net Pharmaceutical Services	68-0295375	CA	
Health Net of Arizona Administrative Services, Inc.	86-0660443	AZ	
Health Net Community Solutions of Arizona, Inc.	81-1348826	AZ	15895
National Pharmacy Services Inc.	84-1301249	DE	
Integrated Pharmacy Systems, Inc. (90%)	23-2789453	PA	
FH Surgery Centers Inc.	68-0390435	CA	
Greater Sacramento Surgery Center LP (66%)	68-0343818	CA	
Health Net Access, Inc.	46-2616037	AZ	
MHS Consulting, International, Inc	20-8630006	DE	
PRIMEROSALUD, S.L.	Foreign	ESP	
Centene UK Limited	Foreign	GBR	
The Practice (Group) Limited (75%)	Foreign	GBR	

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	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names 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)	Is an SCA Filing Required? (Y/N)	*
01295.....	Centene Corporation.....	00000.....	42-1406317.....		0001071739.....	New York Stock Exchange.....	Centene Corporation..... Bankers Reserve Life Insurance Company of Wisconsin.....	DE.....	UDP.....	Shareholders/Board of Directors.....	Shareholders/Board of Directors.....	100.0.....	Shareholders/Board of Directors..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	71013.....	39-0993433.....				Health Plan Real Estate Holding, Inc.....	WI.....	IA.....	Centene Corporation..... Bankers Reserve Life Insurance Company of Wisconsin.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Peach State Health Plan, Inc..... Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Centene Corporation..... Peach State Health Plan, Inc.....	Ownership.....	17.0.....	Centene Corporation..... Centene Corporation.....	Y.....	0.....
01295.....	Centene Corporation.....	12315.....	20-3174593.....				Iowa Total Care, Inc..... Buckeye Community Health Plan, Inc.....	GA.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Peach State Health Plan, Inc.....	Ownership.....	21.0.....	Centene Corporation..... Centene Corporation.....	Y.....	0.....
01295.....	Centene Corporation.....	15713.....	46-4829006.....				Health Plan Real Estate Holding, Inc.....	IA.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	11834.....	32-0045282.....				Health Plan Real Estate Holding, Inc.....	OH.....	RE.....	Centene Corporation..... Buckeye Community Health Plan, Inc.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Absolute Total Care, Inc..... Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Centene Corporation..... Absolute Total Care, Inc.....	Ownership.....	13.0.....	Centene Corporation..... Centene Corporation.....	Y.....	0.....
01295.....	Centene Corporation.....	12959.....	20-5693998.....				Physicians Choice, LLC.....	SC.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				PhyTrust of South Carolina LLC..... Coordinated Care Corporation d/b/a Managed Health Services.....	MO.....	NIA.....	Absolute Total Care, Inc.....	Ownership.....	1.0.....	Centene Corporation..... Centene Corporation.....	Y.....	0.....
01295.....	Centene Corporation.....	00000.....	59-3807546.....				Health Plan Real Estate Holding, Inc..... Healthy Washington Holdings, Inc.....	SC.....	NIA.....	Absolute Total Care, Inc.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	65-1206841.....				Coordinated Care of Washington, Inc..... Managed Health Services Insurance Corp.....	FL.....	NIA.....	Absolute Total Care, Inc.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	95831.....	39-1821211.....				Health Plan Real Estate Holding, Inc..... Healthy Washington Holdings, Inc.....	IN.....	IA.....	Centene Corporation..... Coordinated Care Corporation d/b/a Managed Health Services.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Managed Health Services Insurance Corp..... Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Centene Corporation..... Managed Health Services Insurance Corp.....	Ownership.....	15.0.....	Centene Corporation..... Centene Corporation.....	Y.....	0.....
01295.....	Centene Corporation.....	00000.....	46-5523218.....				Health Plan Real Estate Holding, Inc.....	DE.....	NIA.....	Centene Corporation..... Healthy Washington Holdings, Inc.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	15352.....	46-2578279.....				Superior HealthPlan, Inc..... Health Plan Real Estate Holding, Inc.....	WA.....	IA.....	Centene Corporation..... Superior HealthPlan, Inc.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	96822.....	39-1678579.....				Healthy Louisiana Holdings LLC..... Louisiana Healthcare Connections, Inc.....	WI.....	IA.....	Centene Corporation..... Managed Health Services Insurance Corp.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Centene Corporation..... Managed Health Services Insurance Corp.....	Ownership.....	2.0.....	Centene Corporation..... Centene Corporation.....	Y.....	0.....
01295.....	Centene Corporation.....	60078.....	86-0819817.....				Health Plan Real Estate Holding, Inc.....	AZ.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	95647.....	74-2770542.....				Health Plan Real Estate Holding, Inc.....	TX.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Healthy Louisiana Holdings LLC..... Louisiana Healthcare Connections, Inc.....	MO.....	NIA.....	Superior HealthPlan, Inc.....	Ownership.....	21.0.....	Centene Corporation..... Centene Corporation.....	Y.....	0.....
01295.....	Centene Corporation.....	00000.....	27-0916294.....				Healthy Louisiana Holdings LLC..... Louisiana Healthcare Connections, Inc.....	DE.....	NIA.....	Centene Corporation..... Healthy Louisiana Holdings LLC.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	13970.....	27-1287287.....				Healthy Louisiana Holdings LLC..... Louisiana Healthcare Connections, Inc.....	LA.....	IA.....	Centene Corporation..... Healthy Louisiana Holdings LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....

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	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names 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)	Is an SCA Filing Required? (Y/N)	*
01295.....	Centene Corporation.....	13923.....	20-8570212.....				Magnolia Health Plan Inc.....	MS.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	14053.....	27-2186150.....				IlliniCare Health Plan, Inc.....	IL.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	IlliniCare Health Plan, Inc.....	Ownership.....	5.0	Centene Corporation.....	Y.....	0
01295.....	Centene Corporation.....	00000.....	26-0557093.....				Sunshine Health Holding LLC.....	FL.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	13148.....	20-8937577.....				Sunshine State Health Plan, Inc.....	FL.....	IA.....	Sunshine Health Holding LLC.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	56-2384404.....				Access Health Solutions LLC.....	FL.....	NIA.....	Sunshine Health Holding LLC.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	14100.....	45-1294925.....				Kentucky Spirit Health Plan, Inc.....	KY.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	45-5070230.....				Healthy Missouri Holding, Inc.....	MO.....	NIA.....	Centene Corporation.....	Ownership.....	95.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	14218.....	45-2798041.....				Home State Health Plan, Inc.....	MO.....	IA.....	Healthy Missouri Holding, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Home State Health Plan, Inc.....	Ownership.....	5.0	Centene Corporation.....	Y.....	0
01295.....	Centene Corporation.....	14345.....	45-3276702.....				Sunflower State Health Plan, Inc.....	KS.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	14226.....	45-4792498.....				Granite State Health Plan, Inc.....	NH.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	15447.....	46-4195563.....				Bridgeway Advantage Solutions, Inc.....	AZ.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	46-0907261.....				California Health and Wellness Plan.....	CA.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	10769.....	30-0312489.....				Michigan Complete Health, Inc.....	MI.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	20-4761189.....				SilverSummit Healthplan, Inc.....	NV.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	20-0483299.....				Agate Resources, Inc.....	OR.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	93-1198219.....				Lane Individual Practice Association, Inc.....	OR.....	NIA.....	Agate Resources, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	12559.....	42-1694349.....				Trillium Community Health Plan, Inc.....	OR.....	IA.....	Lane Individual Practice Association, Inc.....	Ownership.....	60.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	12559.....	42-1694349.....				Trillium Community Health Plan, Inc.....	OR.....	IA.....	Agate Resources, Inc.....	Ownership.....	40.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	26-4475075.....				Agate Properties, LLC.....	OR.....	NIA.....	Agate Resources, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	93-1198376.....				Independent Professional Services, LLC.....	OR.....	NIA.....	Agate Resources, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	15902.....	47-5123293.....				Nebraska Total Care, Inc.....	NE.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	16041.....	47-5340613.....				Pennsylvania Health & Wellness, Inc.....	PA.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N.....	0

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	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names 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)	Is an SCA Filing Required? (Y/N)	*
01295.....	Centene Corporation.....	15912.....	47-5664832.....				Superior HealthPlan Community Solutions, Inc.....	TX.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	15927.....	47-5667095.....				Sunshine Health Community Solutions, Inc.....	FL.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	16112.....	47-5664342.....				Buckeye Health Plan Community Solutions, Inc.....	OH.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	16130.....	81-1282251.....				Arkansas Health & Wellness Health Plan, Inc.....	AR.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....					Arkansas Total Care Holding Company, LLC.....	AR.....	NIA.....	Arkansas Health & Wellness Health Plan, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	81-2788043.....				Healthy Oklahoma Holdings, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	81-3121527.....				Oklahoma Complete Health Inc.....	OK.....	NIA.....	Healthy Oklahoma Holdings, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-4980875.....				Bridgeway Health Solutions, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-4980818.....				Bridgeway Health Solutions of Arizona Inc.....	AZ.....	NIA.....	Bridgeway Health Solutions, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	36-2979209.....				Celtic Group, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	80799.....	06-0641618.....				Celtic Insurance Company.....	IL.....	IA.....	Celtic Group, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	15762.....	35-2525384.....				Ambetter of Magnolia Inc.....	MS.....	IA.....	Celtic Insurance Company.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	15729.....	36-4802632.....				Ambetter of Peach State Inc.....	GA.....	IA.....	Celtic Insurance Company.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	27-2221367.....				Novasys Health, Inc.....	DE.....	NIA.....	Celtic Group, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	26-4278205.....				CeltiCare Health Plan Holdings LLC.....	DE.....	NIA.....	Celtic Group, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	13632.....	26-4818440.....				CeltiCare Health Plan of Massachusetts, Inc.....	MA.....	IA.....	CeltiCare Health Plan Holdings LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	39-1864073.....				Centene Management Company LLC.....	WI.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-0057283.....				CMC Real Estate Co. LLC.....	DE.....	NIA.....	Centene Management Company LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	26-4094682.....				Centene Center LLC.....	DE.....	NIA.....	CMC Real Estate Co. LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	82-1816153.....				Centene Center I, LLC.....	DE.....	NIA.....	CMC Real Estate Co. LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	47-5156015.....				Centene Center II, LLC.....	DE.....	NIA.....	CMC Real Estate Co. LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-4234827.....				CMC Hanley, LLC.....	MO.....	NIA.....	CMC Real Estate Co. LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	47-2914561.....				Forhan, LLC.....	MO.....	NIA.....	CMC Real Estate Co. LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	37-1766939.....				Hanley-Forsyth, LLC.....	MO.....	NIA.....	CMC Real Estate Co. LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....

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	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names 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)	Is an SCA Filing Required? (Y/N)	*
01295.....	Centene Corporation.....	00000.....	45-5431787.....				GPT Acquisition LLC.....	DE.....	NIA.....	CMC Real Estate Co. LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	45-4372065.....				Clayton Property Investment LLC.....	DE.....	NIA.....	GPT Acquisition LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2794037.....				LSM Holdco, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2798132.....				Lifeshare Management Group, LLC.....	NH.....	NIA.....	LSM Holdco, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-2074217.....				CCTX Holdings, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	74-2810404.....				Centene Company of Texas, LP.....	TX.....	NIA.....	CCTX Holdings, LLC.....	Ownership.....	1.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-2074277.....				Centene Holdings, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	74-2810404.....				Centene Company of Texas, LP.....	TX.....	NIA.....	Centene Holdings, LLC.....	Ownership.....	99.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	43-1795436.....				MHS Travel & Charter, Inc.....	WI.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-4855483.....				Health Care Enterprises, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	22-3889471.....				Envolve Holdings, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	68-0461584.....				Cenpatico Behavioral Health, LLC.....	CA.....	NIA.....	Envolve Holdings, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	86-0782736.....				CBHSP Arizona, Inc.....	AZ.....	NIA.....	Cenpatico Behavioral Health, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	47-2595704.....				Cenpatico of California, Inc.....	CA.....	NIA.....	Cenpatico Behavioral Health, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	74-2892993.....				Integrated Mental Health Mgmt, LLC.....	TX.....	NIA.....	Cenpatico Behavioral Health, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	74-2785494.....				Integrated Mental Health Services.....	TX.....	NIA.....	Integrated Mental Health Mgmt, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-1624120.....				Cenpatico Behavioral Health of Arizona, LLC.....	AZ.....	NIA.....	Cenpatico Behavioral Health, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	14704.....	80-0879942.....				Cenpatico of Arizona Inc.....	AZ.....	IA.....	Cenpatico Behavioral Health of Arizona, LLC.....	Ownership.....	80.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	37-1788565.....				Envolve, Inc.....	DE.....	NIA.....	Envolve Holdings, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	47-4545413.....				AHA Administrative Services, LLC.....	AL.....	NIA.....	Envolve, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	47-3454898.....				Envolve - New York, Inc.....	NY.....	NIA.....	Envolve, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....					Community Care of Central Colorado, LLC.....	DE.....	NIA.....	Envolve, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	06-1476380.....				Envolve PeopleCare, Inc.....	DE.....	NIA.....	Envolve Holdings, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....

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	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names 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)	Is an SCA Filing Required? (Y/N)	*
01295.....	Centene Corporation.....	00000.....	47-2516714.....				LiveHealthier, Inc.....	DE	NIA	Envolve PeopleCare, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	61-1846191.....				Envolve Benefits Options, Inc.....	DE	NIA	Envolve Holdings, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	20-4730341.....				Envolve Vision Benefits, Inc.....	DE	NIA	Envolve Benefit Options, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	36-4520004.....				Envolve Captive Insurance Company, Inc.....	SC	NIA	Envolve Benefit Options, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	95302.....	75-2592153.....				Envolve Vision of Texas, Inc.....	TX	IA	Envolve Benefit Options, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	20-4773088.....				Envolve Vision, Inc.....	DE	NIA	Envolve Benefit Options, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	65-0094759.....				Envolve Vision of Florida, Inc.....	FL	NIA	Envolve Benefit Options, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	20-4861241.....				Envolve Total Vision, Inc.....	DE	NIA	Envolve Benefit Options, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	06-1635519.....				Envolve Vision of New York, Inc.....	NY	NIA	Envolve Benefit Options, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	46-2783884.....				Envolve Dental, Inc.....	DE	NIA	Envolve Benefit Options, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	81-2969330.....				Envolve Dental of Florida, Inc.....	FL	NIA	Envolve Dental, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	81-2796896.....				Envolve Dental of Texas, Inc.....	TX	NIA	Envolve Dental, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	77-0578529.....				Envolve Pharmacy Solutions, Inc.....	DE	NIA	Envolve Holdings, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	76-0511700.....				LBB Industries, Inc.....	TX	NIA	Envolve Pharmacy Solutions, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	75-2612875.....				RX Direct, Inc.....	TX	NIA	Envolve Pharmacy Solutions, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	46-2307356.....				Envolve Pharmacy IPA, LLC.....	NY	NIA	Envolve Pharmacy Solutions, Inc.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	90-0636938.....				Casenet LLC.....	DE	NIA	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....					Casenet S.R.O.....	CZE	NIA	Casenet LLC.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	61-1450727.....				Centurion Group, Inc.....	DE	NIA	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	90-0766502.....				Centurion LLC.....	DE	NIA	Centurion Group, Inc.....	Ownership.....	51.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	81-4228054.....				Centurion of Arizona, LLC.....	AZ	NIA	Centurion LLC.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	47-1686283.....				Centurion of Vermont, LLC.....	VT	NIA	Centurion LLC.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	47-2967381.....				Centurion of Mississippi, LLC.....	MS	NIA	Centurion LLC.....	Ownership.....	100.0	Centene Corporation.....	N	0
01295.....	Centene Corporation.....	00000.....	30-0752651.....				Centurion of Tennessee, LLC.....	TN	NIA	Centurion LLC.....	Ownership.....	100.0	Centene Corporation.....	N	0

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	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names 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)	Is an SCA Filing Required? (Y/N)	*
01295.....	Centene Corporation.....	00000.....	61-1696004.....				Massachusetts Partnership for Correctional Healthcare, LLC.....	MA.....	NIA.....	Centurion LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2717814.....				Centurion of Minnesota, LLC.....	MN.....	NIA.....	Centurion LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	81-1161492.....				Centurion Correctional Healthcare of New Mexico, LLC.....	NM.....	NIA.....	Centurion LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	81-0687470.....				Centurion of Florida, LLC.....	FL.....	NIA.....	Centurion LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	81-3007264.....				Centurion of Illinois, LLC.....	IL.....	NIA.....	Centurion LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	81-4938030.....				Centurion of Maryland, LLC.....	MD.....	NIA.....	Centurion LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	81-5429405.....				Centurion of Philadelphia, LLC.....	PA.....	NIA.....	Centurion LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	27-3617766.....				Specialty Therapeutic Care Holdings, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	73-1698808.....				Specialty Therapeutic Care, LP.....	TX.....	NIA.....	Specialty Therapeutic Care Holdings, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	73-1698807.....				Specialty Therapeutic Care, GP, LLC.....	TX.....	NIA.....	Specialty Therapeutic Care Holdings, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	73-1698808.....				Specialty Therapeutic Care, LP.....	TX.....	NIA.....	Specialty Therapeutic Care, GP, LLC.....	Ownership.....	0.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	26-2624521.....				Specialty Therapeutic Care West, LLC.....	TX.....	NIA.....	Specialty Therapeutic Care, LP.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	80-0856383.....				AcariaHealth Solutions, Inc.....	DE.....	NIA.....	Specialty Therapeutic Care Holdings, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	45-2780334.....				AcariaHealth, Inc.....	DE.....	NIA.....	Specialty Therapeutic Care Holdings, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	27-1599047.....				AcariaHealth Pharmacy #14, Inc.....	CA.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-8192615.....				AcariaHealth Pharmacy #11, Inc.....	TX.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	27-2765424.....				AcariaHealth Pharmacy #12, Inc.....	NY.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	26-0226900.....				AcariaHealth Pharmacy #13, Inc.....	CA.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	13-4262384.....				AcariaHealth Pharmacy, Inc.....	CA.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	27-3707698.....				HomeScripts.com, LLC.....	MI.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-8235695.....				New York Rx, Inc.....	NY.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	27-0275614.....				U.S. Medical Management Holdings, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	38-3153946.....				U.S. Medical Management, LLC.....	DE.....	NIA.....	U.S. Medical Management Holdings, Inc.....	Ownership.....	20.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	38-3153946.....				U.S. Medical Management, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	48.0.....	Centene Corporation.....	N.....	0.....

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	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names 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)	Is an SCA Filing Required? (Y/N)	*
01295.....	Centene Corporation.....	00000.....	31-1733889.....	.....	.....	.....	RMED, LLC.....	FL.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	47-2138680.....	.....	.....	.....	IAH of Florida, LLC.....	FL.....	NIA.....	RMED, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	51-0581762.....	.....	.....	.....	Heritage Home Hospice, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-2827613.....	.....	.....	.....	Grace Hospice of Austin, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-1530070.....	.....	.....	.....	ComfortBrook Hospice, LLC.....	OH.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-4996551.....	.....	.....	.....	Comfort Hospice of Texas, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-2827526.....	.....	.....	.....	Grace Hospice of San Antonio, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	45-0679248.....	.....	.....	.....	Grace Hospice of Grand Rapids, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	45-0634905.....	.....	.....	.....	Grace Hospice of Indiana, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	45-5080637.....	.....	.....	.....	Grace Hospice of Virginia, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	45-5080567.....	.....	.....	.....	Comfort Hospice of Missouri, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	45-5080675.....	.....	.....	.....	Grace Hospice of Colorado, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-1708834.....	.....	.....	.....	Grace Hospice of Wisconsin, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	81-5129923.....	.....	.....	.....	Grace Hospice of Illinois, LLC.....	IL.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	26-4435532.....	.....	.....	.....	Seniorcorps Peninsula, LLC.....	VA.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	33-1179031.....	.....	.....	.....	R&C Healthcare, LLC.....	TX.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-0927034.....	.....	.....	.....	A N J, LLC.....	TX.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-0861469.....	.....	.....	.....	Pinnacle Senior Care of Missouri, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	03-0556422.....	.....	.....	.....	Country Style Health Care, LLC.....	TX.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	14-1878333.....	.....	.....	.....	Phoenix Home Health Care, LLC.....	DE.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	75-2635025.....	.....	.....	.....	Traditional Home Health Services, LLC.....	TX.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	38-2751108.....	.....	.....	.....	Family Nurse Care, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-5108540.....	.....	.....	.....	Family Nurse Care II, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-3920947.....	.....	.....	.....	Family Nurse Care of Ohio, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....

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	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names 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)	Is an SCA Filing Required? (Y/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.....	0.....
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.....	0.....
01295.....	Centene Corporation.....	00000.....	76-0713516.....				Pinnacle Home Care, LLC.....	TX.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	59-3519060.....				North Florida Health Services, Inc.....	FL.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	47-1742728.....				Pinnacle Sr. Care of Kalamazoo, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-1734288.....				Hospice DME Company, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-4364776.....				Rapid Respiratory Services, LLC.....	DE.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-5730959.....				USMM Accountable Care Network, LLC.....	DE.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-5735993.....				USMM Accountable Care Partners, LLC.....	DE.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-5745748.....				USMM Accountable Care Solutions, LLC.....	DE.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	45-4165480.....				USMM ACO, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	45-4157180.....				USMM ACO Florida, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	45-4154905.....				USMM ACO North Texas, LLC.....	MI.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	47-5208076.....				Health Net, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	95-4402957.....				Health Net of California, Inc.....	CA.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	66141.....	73-0654885.....				Health Net Life Insurance Company.....	CA.....	IA.....	Health Net of California, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	98-0409907.....				Health Net Life Reinsurance Company.....	CYM.....	NIA.....	Health Net of California, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	54-2174069.....				Health Net of California Real Estate Holdings, Inc.....	CA.....	NIA.....	Health Net of California, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	95-4117722.....				Managed Health Network, LLC.....	DE.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	95-3817988.....				Managed Health Network.....	CA.....	NIA.....	Managed Health Network, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	95-4146179.....				MHN Services, LLC.....	CA.....	NIA.....	Managed Health Network, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	13-4027559.....				MHN Services IPA, Inc.....	NY.....	NIA.....	MHN Services, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	68-0214809.....				Health Net Federal Services, LLC.....	DE.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	42-1680916.....				MHN Government Services LLC.....	DE.....	NIA.....	Health Net Federal Services, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....

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	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names 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)	Is an SCA Filing Required? (Y/N)	*
01295.....	Centene Corporation.....	00000.....	51-0589404.....				MHN Global Services, Inc.....	DE.....	NIA.....	MHN Government Services LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	80-0852000.....				MHN Government Services-Belgium, Inc.....	DE.....	NIA.....	MHN Government Services LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	90-0889816.....				MHN Government Services-Djibouti, Inc.....	DE.....	NIA.....	MHN Government Services LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	80-0852008.....				MHN Government Services-Germany, Inc.....	DE.....	NIA.....	MHN Government Services LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	90-0889803.....				MHN Government Services-Guam, Inc.....	DE.....	NIA.....	MHN Government Services LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	90-0889825.....				MHN Government Services-International, Inc.....	DE.....	NIA.....	MHN Government Services LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	80-0852019.....				MHN Government Services-Italy, Inc.....	DE.....	NIA.....	MHN Government Services LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-1038058.....				MHN Government Services-Japan, Inc.....	DE.....	NIA.....	MHN Government Services LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	90-0889815.....				MHN Government Services-Puerto Rico, Inc.....	DE.....	NIA.....	MHN Government Services LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	90-0889824.....				MHN Government Services-Turkey, Inc.....	DE.....	NIA.....	MHN Government Services LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	90-0889833.....				MHN Government Services-United Kingdom, Inc.....	DE.....	NIA.....	MHN Government Services LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	88-0357895.....				Network Providers, LLC.....	DE.....	NIA.....	MHN Government Services LLC.....	Ownership.....	10.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	61-1388903.....				Health Net Preferred Providers, LLC.....	DE.....	NIA.....	Health Net Federal Services, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	35-2490375.....				Health Net Veterans, LLC.....	DE.....	NIA.....	Health Net Federal Services, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	88-0357895.....				Network Providers, LLC.....	DE.....	NIA.....	Health Net Federal Services, LLC.....	Ownership.....	90.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	06-1116976.....				Health Net of the Northeast, LLC.....	DE.....	NIA.....	Network Providers, LLC.....	Ownership.....	25.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....					North Region Providers, LLC.....	DE.....	NIA.....	Health Net Federal Services, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	06-1116976.....				Health Net of the Northeast, LLC.....	DE.....	NIA.....	Health Net, Inc.....	Ownership.....	75.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	84-1175468.....				QualMed, Inc.....	DE.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	84-0975985.....				QualMed Plans for Health of Colorado, Inc.....	CO.....	NIA.....	QualMed, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	95800.....	93-1004034.....				Health Net Health Plan of Oregon, Inc.....	OR.....	IA.....	QualMed, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	23-2867299.....				HSI Advantage Health Holdings, Inc.....	DE.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	23-2867300.....				QualMed Plans for Health of Western Pennsylvania, Inc.....	PA.....	NIA.....	HSI Advantage Health Holdings, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	25-1516632.....				Pennsylvania Health Care Plan, Inc.....	PA.....	NIA.....	HSI Advantage Health Holdings, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....

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	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names 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)	Is an SCA Filing Required? (Y/N)	*
01295.....	Centene Corporation.....	00000.....	94-3037822.....				Health Net Services Inc.....	DE.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	54-2174068.....				Health Net Community Solutions, Inc.....	CA.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	95206.....	36-3097810.....				Health Net of Arizona, Inc.....	AZ.....	IA.....	Health Net, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	54-2153100.....				Health Net One Payment Services, Inc.....	DE.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....					Health Net of Pennsylvania, LLC.....	PA.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	23-2456130.....				QualMed Plans for Health of Pennsylvania, Inc.....	PA.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	68-0390434.....				FH Surgery Limited, Inc.....	CA.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	68-0390438.....				Foundation Health Facilities, Inc.....	CA.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	98-0150604.....				FH Assurance Company.....	CYM.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	68-0295375.....				Health Net Pharmaceutical Services.....	CA.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	86-0660443.....				Health Net of Arizona Administrative Services, Inc.....	AZ.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	15895.....	81-1348826.....				Health Net Community Solutions of Arizona, Inc.....	AZ.....	IA.....	Health Net, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	84-1301249.....				National Pharmacy Services Inc.....	DE.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	23-2789453.....				Integrated Pharmacy Systems, Inc.....	PA.....	NIA.....	National Pharmacy Services Inc.....	Ownership.....	90.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	68-0390435.....				FH Surgery Centers Inc.....	CA.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	68-0343818.....				Greater Sacramento Surgery Center LP.....	CA.....	NIA.....	FH Surgery Centers Inc.....	Ownership.....	66.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	46-2616037.....				Health Net Access, Inc.....	AZ.....	NIA.....	Health Net, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....	20-8630006.....				MHS Consulting, International, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....					PRIMEROSALUD, S.L.....	ESP.....	NIA.....	MHS Consulting, International, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....					Centene UK Limited.....	GBR.....	NIA.....	MHS Consulting, International, Inc.....	Ownership.....	100.0	Centene Corporation.....	N.....	0
01295.....	Centene Corporation.....	00000.....					The Practice (Group) Limited.....	GBR.....	NIA.....	Centene UK Limited.....	Ownership.....	75.0	Centene Corporation.....	N.....	0

Asterisk	Explanation

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

RESPONSE

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

.....NO.....

Explanation:

1.

Bar Code:

1.



1 1 8 3 4 2 0 1 7 3 6 5 0 0 0 0 2

OVERFLOW PAGE FOR WRITE-INS

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

	1 Covered	2 Uncovered	3 Total	4 Total
2304. Advanced Premium Tax Credit.....	123,406		123,406	78,332
2397. Summary of remaining write-ins for Line 23 from Page 03	123,406	0	123,406	78,332

SCHEDULE A – VERIFICATION

Real Estate

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

SCHEDULE B – VERIFICATION

Mortgage Loans

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

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	7,417,728	7,326,368
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		103,998
2.2 Additional investment made after acquisition .....	1,007,181	160,000
3. Capitalized deferred interest and other .....		0
4. Accrual of discount .....		0
5. Unrealized valuation increase (decrease) .....	(233,390)	306,628
6. Total gain (loss) on disposals .....		0
7. Deduct amounts received on disposals .....		479,266
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) .....	8,191,519	7,417,728
12. Deduct total nonadmitted amounts .....	0	0
13. Statement value at end of current period (Line 11 minus Line 12) .....	8,191,519	7,417,728

SCHEDULE D – VERIFICATION

Bonds and Stocks

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	287,147,403	302,929,794
2. Cost of bonds and stocks acquired .....	20,148,127	93,378,994
3. Accrual of discount .....	51,588	130,221
4. Unrealized valuation increase (decrease) .....	72,529	152,805
5. Total gain (loss) on disposals .....	(10,784)	46,156
6. Deduct consideration for bonds and stocks disposed of .....	42,991,476	107,631,065
7. Deduct amortization of premium .....	804,206	1,859,503
8. Total foreign exchange change in book/adjusted carrying value .....	0	0
9. Deduct current year's other-than-temporary impairment recognized .....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	263,613,180	287,147,403
11. Deduct total nonadmitted amounts .....	0	0
12. Statement value at end of current period (Line 10 minus Line 11) .....	263,613,180	287,147,403

STATEMENT AS OF JUNE 30, 2017 OF THE Buckeye Community Health Plan, Inc.

SCHEDULE D - PART 1B

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. NAIC 1 (a).....	305,560,729	516,195,597	539,863,868	(889,205)	305,560,729	281,003,253	0	274,374,013
2. NAIC 2 (a).....	52,233,863	321,317	4,498,768	525,209	52,233,863	48,581,622	0	54,402,121
3. NAIC 3 (a).....	1,149,850	0	0	4,350	1,149,850	1,154,200	0	1,154,200
4. NAIC 4 (a).....	4,000,000	0	0	0	4,000,000	4,000,000	0	4,000,000
5. NAIC 5 (a).....	0	0	0	0	0	0	0	0
6. NAIC 6 (a).....	0	0	0	0	0	0	0	0
7. Total Bonds	362,944,442	516,516,914	544,362,636	(359,645)	362,944,442	334,739,074	0	333,930,335
<b>PREFERRED STOCK</b>								
8. NAIC 1 .....	0	0	0	0	0	0	0	0
9. NAIC 2 .....	0	0	0	0	0	0	0	0
10. NAIC 3 .....	0	0	0	0	0	0	0	0
11. NAIC 4 .....	0	0	0	0	0	0	0	0
12. NAIC 5 .....	0	0	0	0	0	0	0	0
13. NAIC 6 .....	0	0	0	0	0	0	0	0
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	362,944,442	516,516,914	544,362,636	(359,645)	362,944,442	334,739,074	0	333,930,335

(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 \$ .....77,621,311 ; NAIC 2 \$ .....0 ;  
NAIC 3 \$ .....0 ; NAIC 4 \$ .....0 ; NAIC 5 \$ .....0 ; NAIC 6 \$ .....0

SCHEDULE DA - PART 1
Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
9199999	71,422,010	xxx	71,422,010	15,981	0

SCHEDULE DA - VERIFICATION
Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	53,207,695	51,608,886
2. Cost of short-term investments acquired .....	810,760,374	1,248,741,026
3. Accrual of discount .....		767
4. Unrealized valuation increase (decrease).....		0
5. Total gain (loss) on disposals .....		(36)
6. Deduct consideration received on disposals .....	792,530,740	1,247,096,298
7. Deduct amortization of premium.....	15,317	46,650
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).....	71,422,011	53,207,695
11. Deduct total nonadmitted amounts.....		0
12. Statement value at end of current period (Line 10 minus Line 11)	71,422,011	53,207,695

Schedule DB - Part A - Verification

**NONE**

Schedule DB - Part B - Verification

**NONE**

Schedule DB - Part C - Section 1

**NONE**

Schedule DB - Part C - Section 2

**NONE**

Schedule DB - Verification

**NONE**

SCHEDULE E - VERIFICATION  
(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	67,693	799,981
2. Cost of cash equivalents acquired .....	60,631,743	455,666,902
3. Accrual of discount .....	1,268	810
4. Unrealized valuation increase (decrease) .....		0
5. Total gain (loss) on disposals.....		0
6. Deduct consideration received on disposals .....	53,990,206	456,400,000
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) .....	6,710,498	67,693
11. Deduct total nonadmitted amounts .....		0
12. Statement value at end of current period (Line 10 minus Line 11)	6,710,498	67,693

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**

## E04

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator <sup>(a)</sup>
Bonds - U.S. Political Subdivisions of States, Territories and Possessions									
64966L-CJ-8	NEW YORK N Y		05/25/2017	JP MORGAN SECS INC., - FIXED INCOME		1,000,000	1,000,000	.461	1FE
2499999 - Bonds - U.S. Political Subdivisions of States, Territories and Possessions						1,000,000	1,000,000	461	XXX
Bonds - U.S. Special Revenue									
130795-C9-6	CALIFORNIA STATEWIDE CMNTYS DEV AUTH REV		04/04/2017	WELLS FARGO SECURITIES LLC		200,000	200,000	.130	1FE
160853-MR-5	CHARLOTTE-MECKLENBURG HOSP AUTH N C HEAL		04/26/2017	JP MORGAN SECS INC., - FIXED INCOME		100,000	100,000	.48	1FE
368497-FB-4	GEISINGER AUTH PA HEALTH SYS REV		04/17/2017	BONY/TORONTO DOMINION SECURITI		1,800,000	1,800,000	.526	1FE
45471A-EB-4	INDIANA FIN AUTH HOSP REV		04/03/2017	WELLS FARGO SECURITIES LLC		1,400,000	1,400,000	.868	1FE
544495-DY-7	LOS ANGELES CALIF DEPT WTR & PWR REV		04/03/2017	RBC CAPITAL MARKETS		1,500,000	1,500,000	.0	1FE
613520-LD-5	MONTGOMERY CANTY OHIO HOSP REV		05/23/2017	BARCLAYS CAPITAL INC FIXED INC		1,000,000	1,000,000	.411	1FE
645771-D4-5	NEW JERSEY BLDG AUTH ST BLDG REV		05/24/2017	Unknown		21,070	20,000	.442	1FE
645771-E4-4	NEW JERSEY BLDG AUTH ST BLDG REV		05/24/2017	Unknown		321,317	305,000	6.735	2FE
65820H-VF-7	NORTH CAROLINA MED CARE COMMN HOSP REV		06/27/2017	WELLS FARGO SECURITIES LLC		300,000	300,000	.166	1FE
65821D-CS-8	NORTH CAROLINA MED CARE COMMN HEALTH CAR		04/03/2017	WELLS FARGO SECURITIES LLC		1,200,000	1,200,000	.0	1FE
717903-EB-7	PHILADELPHIA PA HOSPS & HIGHER ED FACS A		05/01/2017	JP MORGAN SECS INC., - FIXED INCOME		300,000	300,000	.160	1FE
717903-F2-9	PHILADELPHIA PA HOSPS & HIGHER ED FACS A		04/27/2017	Brown Brothers Harriman & Co		300,000	300,000	.160	1FE
89602N-2B-9	TRIBOROUGH BRDG & TUNL AUTH N Y REV		05/25/2017	WELLS FARGO SECURITIES LLC		1,500,000	1,500,000	.619	1FE
3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions						9,942,387	9,925,000	10,265	XXX
Bonds - Industrial and Miscellaneous (Unaffiliated)									
00162L-CE-5	ALM XVI LTD - CDO	C	06/20/2017	Goldman Sachs		620,000	620,000	.0	1FE
458140-AW-0	INTEL CORP		04/11/2017	Not Provided		494,000	500,000	3,494	1FE
594918-BP-8	MICROSOFT CORP		04/11/2017	Not Provided		245,250	250,000	.743	1FE
3899999 - Bonds - Industrial and Miscellaneous (Unaffiliated)						1,359,250	1,370,000	4,237	XXX
8399997 - Subtotals - Bonds - Part 3						12,301,637	12,295,000	14,963	XXX
8399999 - Subtotals - Bonds						12,301,637	12,295,000	14,963	XXX
9999999 Totals						12,301,637	XXX	14,963	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues .....0 .

STATEMENT AS OF JUNE 30, 2017 OF THE Buckeye Community Health Plan, Inc.

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 Identification	Description	For e i g n	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 or Market Indicator (a)
Bonds - All Other Governments																					
50065W-AC-0	KOREA NATIONAL OIL CORP.	C.	04/03/2017	Maturity @ 100.0		900,000	900,000	938,781	902,236	0	(2,236)	0	(2,236)	0	900,000	0	0	0	14,063	04/03/2017	1FE
1099999 - Bonds - All Other Governments						900,000	900,000	938,781	902,236	0	(2,236)	0	(2,236)	0	900,000	0	0	0	14,063	XXX	XXX
Bonds - U.S. States, Territories and Possessions																					
452152-CR-0	ILLINOIS ST.		06/01/2017	JP MORGAN SECS INC., - FIXED INCOME		1,251,297	1,210,000	1,346,633	1,273,076	0	(11,645)	0	(11,645)	0	1,261,431	0	(10,134)	(10,134)	53,106	01/01/2019	2FE
1799999 - Bonds - U.S. States, Territories and Possessions						1,251,297	1,210,000	1,346,633	1,273,076	0	(11,645)	0	(11,645)	0	1,261,431	0	(10,134)	(10,134)	53,106	XXX	XXX
Bonds - U.S. Political Subdivisions of States, Territories and Possessions																					
575567-VF-6	MASSACHUSETTS BAY TRANSN AUTH MASS.		04/18/2017	WELLS FARGO SECURITIES LLC.		1,500,000	1,500,000	1,500,000	0	0	0	0	0	0	1,500,000	0	0	0	1,486	03/01/2030	1FE
67070X-80-4	NUVEEN DIVD-AMT		05/25/2017	Call @ 99.841		2,000,000	2,000,000	1,996,000	1,998,524	0	779	0	779	0	1,999,302	0	698	698	14,151	10/01/2017	1FE
2499999 - Bonds - U.S. Political Subdivisions of States, Territories and Possessions						3,500,000	3,500,000	3,496,000	1,998,524	0	779	0	779	0	3,499,302	0	698	698	15,637	XXX	XXX
Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions																					
130795-C9-6	CALIFORNIA STATEWIDE CMNTYS DEV AUTH REV		04/18/2017	WELLS FARGO SECURITIES LLC.		200,000	200,000	200,000	0	0	0	0	0	0	200,000	0	0	0	194	04/01/2045	1FE
160853-WR-5	CHARLOTTE-MECKLENBURG HOSP AUTH N C HEAL		04/28/2017	JP MORGAN SECS INC., - FIXED INCOME		700,000	700,000	700,000	0	0	0	0	0	0	700,000	0	0	0	567	01/15/2038	1FE
3137EA-DH-9	Not Provided		04/11/2017			749,741	750,000	757,544	750,880	0	(492)	0	(492)	0	750,388	0	(647)	(647)	2,146	06/29/2017	1
3138W9-J5-0	FN AS0283 - RMBS		06/01/2017	Paydown		159,154	159,154	158,657	158,689	0	465	0	465	0	159,154	0	0	0	1,048	08/01/2028	1
3138W9-RN-2	FN AS0492 - RMBS		06/01/2017	Paydown		79,465	79,465	78,931	78,990	0	475	0	475	0	79,465	0	0	0	651	09/01/2028	1
3138X6-W2-8	FN AU6676 - RMBS		06/01/2017	Paydown		88,745	88,745	88,149	88,219	0	526	0	526	0	88,745	0	0	0	779	09/01/2028	1
3138XD-SE-1	FN AV2316 - RMBS		06/01/2017	Paydown		37,305	37,305	36,973	37,014	0	291	0	291	0	37,305	0	0	0	302	12/01/2028	1
31418A-WC-8	FN MA1542 - RMBS		06/01/2017	Paydown		30,076	30,076	29,907	29,922	0	154	0	154	0	30,076	0	0	0	204	08/01/2028	1
38122N-XK-3	GOLDEN ST TOB SECURITIZATION CORP CALIF		06/01/2017	Maturity @ 100.0		530,000	530,000	613,740	538,559	0	(8,559)	0	(8,559)	0	530,000	0	0	0	13,250	06/01/2017	1FE
45471A-EB-4	INDIANA FIN AUTH HOSP REV LOS ANGELES CALIF DEPT		04/18/2017	WELLS FARGO SECURITIES LLC.		1,400,000	1,400,000	1,400,000	0	0	0	0	0	0	1,400,000	0	0	0	1,346	03/01/2036	1FE
544495-DY-7	WTR & PWR REV LOUISIANA PUB FACS AUTH		04/18/2017	RBC CAPITAL MARKETS		2,900,000	2,900,000	2,900,000	0	0	0	0	0	0	2,900,000	0	0	0	2,020	07/01/2035	1FE
546398-Y9-3	REVENUE MASSACHUSETTS ST DEV FIN		06/01/2017	Maturity @ 100.0		315,000	315,000	318,163	315,811	0	(811)	0	(811)	0	315,000	0	0	0	3,150	06/01/2017	1FE
57583U-B4-9	AGY REV MIAMI-DADE CNTY FLA HSG		04/18/2017	U.S. BANK/MUNICIPAL		100,000	100,000	100,000	0	0	0	0	0	0	100,000	0	0	0	131	07/01/2048	1FE
593344-AS-3	FIN AUTH MULTIFA MONTGOMERY CNTY OHIO HOSP		04/01/2017	Maturity @ 100.0		315,000	315,000	315,000	315,000	0	0	0	0	0	315,000	0	0	0	1,339	04/01/2017	1FE
613520-LC-7	REV MONTGOMERY CNTY OHIO HOSP		04/18/2017	BARCLAYS CAPITAL INC FIXED INC		600,000	600,000	600,000	0	0	0	0	0	0	600,000	0	0	0	812	11/15/2039	1FE
613520-LD-5	REV MONTGOMERY CNTY OHIO HOSP		04/18/2017	BARCLAYS CAPITAL INC FIXED INC		100,000	100,000	100,000	100,000	0	0	0	0	0	100,000	0	0	0	238	11/15/2045	1FE
644614-VP-1	NEW HAMPSHIRE HEALTH & ED FACS AUTH REV		04/18/2017	JP MORGAN SECS INC., - FIXED INCOME		100,000	100,000	100,000	0	0	0	0	0	0	100,000	0	0	0	180	07/01/2033	1FE
645771-VX-1	NEW JERSEY BLDG AUTH ST BLDG REV		05/24/2017	Unknown		342,387	325,000	386,773	346,701	0	(4,314)	0	(4,314)	0	342,387	0	0	0	7,177	12/15/2018	2FE
64972F-PP-5	NEW YORK N Y CITY MUN WTR		04/18/2017	WELLS FARGO SECURITIES LLC.		100,000	100,000	100,000	0	0	0	0	0	0	100,000	0	0	0	157	06/15/2033	1FE
649726-CM-4	NEW YORK N Y CITY MUN WTR		04/18/2017	JP MORGAN SECS INC., - FIXED INCOME		300,000	300,000	300,000	0	0	0	0	0	0	300,000	0	0	0	490	06/15/2050	1FE
65821D-CS-8	NORTH CAROLINA MED CARE COMMUN HEALTH CAR		04/18/2017	WELLS FARGO SECURITIES LLC.		1,200,000	1,200,000	1,200,000	0	0	0	0	0	0	1,200,000	0	0	0	421	10/01/2038	1FE
67756A-H9-6	OHIO ST HIGHER EDL FAC COMMUN REV		04/18/2017	BARCLAYS CAPITAL INC FIXED INC		700,000	700,000	700,000	0	0	0	0	0	0	700,000	0	0	0	1,288	01/01/2043	1FE
717825-NH-2	PHILADELPHIA PA HOSPS & HIGHER ED FACS A		04/18/2017	JP MORGAN SECS INC., - FIXED INCOME		100,000	100,000	100,000	0	0	0	0	0	0	100,000	0	0	0	91	07/01/2025	1FE
717903-F2-9	PHILADELPHIA PA HOSPS & HIGHER ED FACS A		04/28/2017	JP MORGAN SECS INC., - FIXED INCOME		300,000	300,000	300,000	0	0	0	0	0	0	300,000	0	0	0	167	07/01/2041	1FE
89602N-2B-9	TRIBOROUGH BRDG & TUNL AUTH N Y REVS		04/18/2017	WELLS FARGO SECURITIES LLC.		1,900,000	1,900,000	1,900,000	0	0	0	0	0	0	1,900,000	0	0	0	2,348	01/01/2032	1FE
914455-MB-3	UNIVERSITY MICH UNIV REVS		04/18/2017	WELLS FARGO SECURITIES LLC.		400,000	400,000	400,000	0	0	0	0	0	0	400,000	0	0	0	620	12/01/2024	1FE
3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions						13,746,872	13,729,745	13,883,834	2,759,785	0	(12,266)	0	(12,266)	0	13,747,519	0	(647)	(647)	41,117	XXX	XXX
Bonds - Industrial and Miscellaneous (Unaffiliated)																					
00182E-AT-6	ANZ NEW ZEALAND (INTL) LTD (LONDON BRANC	C.	04/27/2017	Maturity @ 100.0		510,000	510,000	510,000	510,000	0	0	0	0	0	510,000	0	0	0	3,818	04/27/2017	1FE
02154W-AA-7	TAX 1 NT - ABS		06/15/2017	Paydown		61,828	61,828	61,828	61,828	0	0	0	0	0	61,828	0	0	0	668	02/15/2021	1FE

## E05.1

## E05.1

## E05.1

## E05.1

Schedule DB - Part A - Section 1

**NONE**

Schedule DB - Part B - Section 1

**NONE**

Schedule DB - Part D - Section 1

**NONE**

Schedule DB - Part D - Section 2

**NONE**

Schedule DL - Part 1

**NONE**

Schedule DL - Part 2

**NONE**

**STATEMENT AS OF JUNE 30, 2017 OF THE Buckeye Community Health Plan, Inc.**

## SCHEDULE E - PART 1 - CASH

[illegible]

## SCHEDULE E - PART 2 - CASH EQUIVALENTS

E13