



**ANNUAL STATEMENT  
FOR THE YEAR ENDING DECEMBER 31, 2017  
OF THE CONDITION AND AFFAIRS OF THE**

## WellCare of Ohio, Inc.

NAIC Group Code	01199 (Current Period)	01199 (Prior Period)	NAIC Company Code	12749	Employer's ID Number	20-3562146
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	09/27/2005		Commenced Business	01/01/2007		
Statutory Home Office	8735 Henderson Road (Street and Number)			Tampa, FL, US 33634 (City or Town, State, Country and Zip Code)		
Main Administrative Office	8735 Henderson Road (Street and Number)			813-206-6200 (Area Code) (Telephone Number)		
	Tampa, FL, US 33634 (City or Town, State, Country and Zip Code)					
Mail Address	P.O. Box 31391 (Street and Number or P.O. Box)			Tampa, FL, US 33631-3391 (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	8735 Henderson Road (Street and Number)			813-206-6200 (Area Code) (Telephone Number) (Extension)		
	Tampa, FL, US 33634 (City or Town, State, Country and Zip Code)					
Internet Web Site Address	www.wellcare.com					
Statutory Statement Contact	Mike Wasik (Name)			813-206-2725 (Area Code) (Telephone Number) (Extension)		
	michael.wasik@wellcare.com (E-Mail Address)			813-675-2899 (Fax Number)		

## OFFICERS

Name	Title	Name	Title
David Thomas Reynolds	President	Michael Troy Meyer	Asst. Treasurer, VP and Corporate Controller
Richard Charles Fisher #	CFO and Vice President	Tammy Lynn Meyer #	Assistant Secretary and Vice President

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## OTHER OFFICERS

Michael Warren Haber \_\_\_\_\_, Secretary and Vice President \_\_\_\_\_ Goran Jankovic # \_\_\_\_\_, Vice President and Treasurer \_\_\_\_\_

## **DIRECTORS OR TRUSTEES**

David Thomas Reynolds Michael Troy Meyer Andrew Lynn Asher Michael Warren Haber  
Anet Haking #

State of \_\_\_\_\_

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.

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David Thomas Reynolds  
President

Michael Troy Meyer  
Asst. Treasurer, VP and Corporate Controller

Richard Charles Fisher  
CFO and Vice President

Subscribed and sworn to before me this  
day of .

a. Is this an original filing? Yes [  ] No [  ]  
b. If no:  
1. State the amendment number \_\_\_\_\_  
2. Date filed \_\_\_\_\_  
3. Number of pages attached \_\_\_\_\_

Exhibit 2 - A&H Premiums Due and Unpaid  
**NONE**

Exhibit 3 - Health Care Receivables  
**NONE**

Exhibit 3A - Analysis of HC Receivables  
**NONE**

Exhibit 4 - Claims Unpaid  
**NONE**

## ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.

## EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1 Name of Affiliate	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	Admitted	
						7 Current	8 Non-Current
Comprehensive Health Management, Inc.	85				.85		
0199999 Individually listed receivables	85	0	0	0	.85	0	0
0299999 Receivables not individually listed							
0399999 Total gross amounts receivable	85	0	0	0	85	0	0

## ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.

## **EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES**

## ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.

## **EXHIBIT 7 - PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS**

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payments	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups .....	0	0.0		.0		
2. Intermediaries .....	0	0.0		0.0		
3. All other providers .....	0	0.0		0.0		
4. Total capitation payments .....	0	0.0	0	0.0	0	0
Other Payments:						
5. Fee-for-service .....	0	0.0	XXX	XXX		
6. Contractual fee payments .....	(232,899)	100.0	XXX	XXX		(232,899)
7. Bonus/withhold arrangements - fee-for-service .....	0	0.0	XXX	XXX		
8. Bonus/withhold arrangements - contractual fee payments .....	0	0.0	XXX	XXX		
9. Non-contingent salaries .....	0	0.0	XXX	XXX		
10. Aggregate cost arrangements .....	0	0.0	XXX	XXX		
11. All other payments .....	0	0.0	XXX	XXX		
12. Total other payments .....	(232,899)	100.0	XXX	XXX	0	(232,899)
13. Total (Line 4 plus Line 12) .....	(232,899)	100 %	XXX	XXX	0	(232,899)

## **EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES**

## ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.

## EXHIBIT 8 – FURNITURE, EQUIPMENT AND SUPPLIES OWNED

Description	1 Cost	2 Improvements	3 Accumulated Depreciation	4 Book Value Less Encumbrances	5 Assets Not Admitted	6 Net Admitted Assets
1. Administrative furniture and equipment .....						
2. Medical furniture, equipment and fixtures .....						
3. Pharmaceuticals and surgical supplies .....						
4. Durable medical equipment .....						
5. Other property and equipment						
6. Total	0	0	0	0	0	0



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

WellCare of Ohio, Inc.

2. \_\_\_\_\_

(LOCATION)

NAIC Group Code	01199	BUSINESS IN THE STATE OF Ohio	DURING THE YEAR 2017								NAIC Company Code	12749
			Comprehensive (Hospital & Medical)		4	5	6	7	8	9		
	1	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:												
1. Prior Year .....		0										
2. First Quarter .....		0										
3. Second Quarter .....		0										
4. Third Quarter .....		0										
5. Current Year .....		0										
6. Current Year Member Months .....		0										
Total Member Ambulatory Encounters for Year:												
7. Physician .....		0										
8. Non-Physician .....		0										
9. Total .....		0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred .....		0										
11. Number of Inpatient Admissions .....		0										
12. Health Premiums Written (b) .....		(48,323)								(48,323)		
13. Life Premiums Direct .....		0										
14. Property/Casualty Premiums Written .....		0										
15. Health Premiums Earned .....		0										
16. Property/Casualty Premiums Earned .....		0										
17. Amount Paid for Provision of Health Care Services .....		(232,899)								(108,975)		(123,924)
18. Amount Incurred for Provision of Health Care Services .....		(287,756)								(163,832)		(123,924)

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....(48,323)



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

WellCare of Ohio, Inc.

2. \_\_\_\_\_

(LOCATION)

NAIC Group Code	01199	BUSINESS IN THE STATE OF Consolidated	DURING THE YEAR 2017								NAIC Company Code	12749
			Comprehensive (Hospital & Medical)		4	5	6	7	8	9		
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:												
1. Prior Year .....		0	0	0	0	0	0	0	0	0	0	0
2. First Quarter .....		0	0	0	0	0	0	0	0	0	0	0
3. Second Quarter .....		0	0	0	0	0	0	0	0	0	0	0
4. Third Quarter .....		0	0	0	0	0	0	0	0	0	0	0
5. Current Year .....		0	0	0	0	0	0	0	0	0	0	0
6. Current Year Member Months .....		0	0	0	0	0	0	0	0	0	0	0
Total Member Ambulatory Encounters for Year:												
7. Physician .....		0	0	0	0	0	0	0	0	0	0	0
8. Non-Physician .....		0	0	0	0	0	0	0	0	0	0	0
9. Total .....		0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred .....		0	0	0	0	0	0	0	0	0	0	0
11. Number of Inpatient Admissions .....		0	0	0	0	0	0	0	0	0	0	0
12. Health Premiums Written (b) .....		(48,323)	0	0	0	0	0	0	0	(48,323)	0	0
13. Life Premiums Direct .....		0	0	0	0	0	0	0	0	0	0	0
14. Property/Casualty Premiums Written .....		0	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned .....		0	0	0	0	0	0	0	0	0	0	0
16. Property/Casualty Premiums Earned .....		0	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services .....		(232,899)	0	0	0	0	0	0	0	(108,975)	(123,924)	0
18. Amount Incurred for Provision of Health Care Services .....		(287,756)	0	0	0	0	0	0	0	(163,832)	(123,924)	0

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....(48,323)

Schedule S - Part 1 - Section 2  
**NONE**

Schedule S - Part 2  
**NONE**

Schedule S - Part 3 - Section 2  
**NONE**

Schedule S - Part 4  
**NONE**

Schedule S - Part 5  
**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.**

**SCHEDULE S – PART 6**

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

	1 2017	2 2016	3 2015	4 2014	5 2013
<b>A. OPERATIONS ITEMS</b>					
1. Premiums.....	0	0	0	0	0
2. Title XVIII-Medicare.....	0	0	0	1,918	2,360
3. Title XIX-Medicaid.....	0	0	(1)	0	174
4. Commissions and reinsurance expense allowance.....	0	0	0	0	0
5. Total hospital and medical expenses.....	0	0	0	0	0
<b>B. BALANCE SHEET ITEMS</b>					
6. Premiums receivable .....	0	0	0	0	0
7. Claims payable.....	0	0	0	0	0
8. Reinsurance recoverable on paid losses.....	0	0	231	932	2,194
9. Experience rating refunds due or unpaid.....	0	0	0	0	0
10. Commissions and reinsurance expense allowances due.....	0	0	0	0	0
11. Unauthorized reinsurance offset.....	0	0	0	2,707	1,766
12. Offset for reinsurance with Certified Reinsurers.....	0	0	0	0	0
<b>C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
13. Funds deposited by and withheld from (F).....	0	0	0	0	0
14. Letters of credit (L).....	0	0	0	0	0
15. Trust agreements (T).....	0	0	0	0	0
16. Other (O).....	0	0	0	0	0
<b>D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
17. Multiple Beneficiary Trust.....	0	0	0	0	0
18. Funds deposited by and withheld from (F)	0	0	0	0	0
19. Letters of credit (L)	0	0	0	0	0
20. Trust agreements (T)	0	0	0	0	0
21. Other (O)	0	0	0	0	0

**ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.**

**SCHEDULE S - PART 7**

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	14,442,719		14,442,719
2. Accident and health premiums due and unpaid (Line 15).....	0		0
3. Amounts recoverable from reinsurers (Line 16.1).....	0		0
4. Net credit for ceded reinsurance.....	XXX	0	0
5. All other admitted assets (Balance).....	12,458		12,458
6. Total assets (Line 28) .....	14,455,177	0	14,455,177
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
7. Claims unpaid (Line 1).....	0	0	0
8. Accrued medical incentive pool and bonus payments (Line 2).....	0		0
9. Premiums received in advance (Line 8).....	0		0
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19, first inset amount plus second inset amount).....	0		0
11. Reinsurance in unauthorized companies (Line 20 minus inset amount).....	0		0
12. Reinsurance with Certified Reinsurers (Line 20 inset amount).....	0		0
13. Funds held under reinsurance treaties with Certified Reinsurers (Line 19 third inset amount).....	0		0
14. All other liabilities (Balance).....	246,541		246,541
15. Total liabilities (Line 24).....	246,541	0	246,541
16. Total capital and surplus (Line 33).....	14,208,636	XXX	14,208,636
17. Total liabilities, capital and surplus (Line 34) .....	14,455,177	0	14,455,177
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
18. Claims unpaid.....	0		
19. Accrued medical incentive pool.....	0		
20. Premiums received in advance .....	0		
21. Reinsurance recoverable on paid losses .....	0		
22. Other ceded reinsurance recoverables .....	0		
23. Total ceded reinsurance recoverables .....	0		
24. Premiums receivable .....	0		
25. Funds held under reinsurance treaties with authorized and unauthorized reinsurers .....	0		
26. Unauthorized reinsurance .....	0		
27. Reinsurance with Certified Reinsurers.....	0		
28. Funds held under reinsurance treaties with Certified Reinsurers.....	0		
29. Other ceded reinsurance payables/offsets .....	0		
30. Total ceded reinsurance payables/offsets .....	0		
31. Total net credit for ceded reinsurance .....	0		

**ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.**

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

Allocated By States and Territories

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

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.**

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
01199.....	WellCare Health Plans Inc.....	95310.....	06-1405640.....				WellCare of Connecticut Inc.....	CT.....	IA.....	WellCare of New York, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	95081.....	59-2583622.....				WellCare of Florida Inc.....	FL.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	59-3547616.....				Comprehensive Health Management Inc.....	FL.....	NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	14-1647239.....				The WellCare Management Group, Inc.....	NY.....	UDP.....	WCG Health Management, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	95534.....	14-1676443.....				WellCare of New York Inc.....	NY.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	20-3320236.....				Harmony Behavioral Health Inc.....	FL.....	NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	11229.....	36-4050495.....				Harmony Health Plan Inc.....	IL.....	IA.....	Harmony Health Systems, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	22-3391045.....				Harmony Health Systems Inc.....	IL.....	NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	36-4467676.....				Harmony Health Management Inc.....	IL.....	NIA.....	Harmony Health Systems, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	47-0937650.....	0001279363	NYSE.....		WellCare Health Plans Inc.....	FL.....	UIP.....	Shareholders.....	.....	0.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	04-3669698.....				WCG Health Management Inc.....	FL.....	UIP.....	WellCare Health Plans, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	10760.....	20-2103320.....				WellCare of Georgia Inc.....	GA.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	98-0448921.....				Comprehensive Reinsurance Ltd.....	CYM.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	10155.....	20-2383134.....				WellCare Prescription Insurance Inc.....	FL.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	12749.....	20-3562146.....				WellCare of Ohio Inc.....	OH.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	20-3262322.....				Harmony Behavioral Health IPA Inc.....	NY.....	NIA.....	Harmony Behavioral Health, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	20-4869374.....				WellCare Pharmacy Benefits Management Inc.....	DE.....	NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	83445.....	86-0269558.....				WellCare Health Insurance of Arizona Inc.....	AZ.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	64467.....	36-6069295.....				WellCare Health Insurance Company of Kentucky Inc.....	KY.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	12956.....	11-3197523.....				WellCare Health Insurance of New York Inc.....	NY.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	13020.....	20-8017319.....				WellCare Health Plans of New Jersey Inc.....	NJ.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	12964.....	20-8058761.....				WellCare of Texas Inc.....	TX.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	20-8420512.....				Exactus Pharmacy Solutions, Inc.....	DE.....	NIA.....	WellCare Pharmacy Benefits Management.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	27-0386122.....				Ohana Health Plans, Inc.....	HI.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....

## ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
01199.....	WellCare Health Plans Inc.....	00000.....	27-4293249.....				WellCare Health Plans of California, Inc.....	.CA.....	.IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	14404.....	45-3617189.....				WellCare of Kansas, Inc.....	.KS.....	.IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	45-5154364.....				WellCare Health Plans of Tennessee, Inc.....	.TN.....	.IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	45-3236788.....				America's 1st Choice California Holdings, LLC.....	.FL.....	.NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	20-5327501.....				Easy Choice Health Plan, Inc.....	.CA.....	.IA.....	America's 1st Choice California Holdings, LLC.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	11775.....	32-0062883.....				WellCare of South Carolina, Inc.....	.SC.....	.IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	12913.....	20-5862801.....				Missouri Care, Incorporated.....	.MO.....	.IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	27-4212954.....				The WellCare Community Foundation.....	.DE.....	.NIA.....	WellCare Health Plans, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	62-1832645.....				Windsor Health Group, Inc.....	.TN.....	.NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	62-1530448.....				Windsor Management Services, Inc.....	.TN.....	.NIA.....	Windsor Health Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	15510.....	47-0971481.....				WellCare Health Plans of Kentucky, Inc.....	.KY.....	.IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	15951.....	47-5456872.....				WellCare of Nebraska, Inc.....	.NE.....	.IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	81-1631920.....				WellCare of Pennsylvania, Inc.....	.PA.....	.IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	16117.....	81-3299281.....				WellCare of Oklahoma, Inc.....	.OK.....	.IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	06-1742685.....				One Care by Care 1st Health Plan of Arizona, Inc.....	.AZ.....	.IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	57-1165217.....				Care 1st Health Plan Inc.....	.AZ.....	.IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	46-2680154.....				Care 1st Health Plan Administrative Services, Inc.....	.AZ.....	.NIA.....	Care 1st Health Plan Arizona, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	81-5442932.....				WellCare of Mississippi, Inc.....	.MS.....	.IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	82-0664467.....				WellCare of Virginia, Inc.....	.VA.....	.IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	16239.....	82-1301128.....				WellCare of Alabama, Inc.....	.AL.....	.IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	82-1246845.....				Accountable Care Coalition of Arizona, LLC.....	.AZ.....	.NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	45-4112652.....				Accountable Care Coalition of Caldwell County, LLC.....	.NC.....	.NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	45-5510251.....				Accountable Care Coalition of Central Georgia, LLC.....	.GA.....	.NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	81-2588974.....				Accountable Care Coalition of Chesapeake, LLC.....	.MD.....	.NIA.....	Collaborative Health Systems LLC.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....

## ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.

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01199.....	WellCare Health Plans Inc.....	00000.....	45-4113655.....				Accountable Care Coalition of Coastal Georgia, LLC.....	GA.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	82-1681146.....				Accountable Care Coalition of Community Health Centers, LLC.....	TX.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	82-1669422.....				Accountable Care Coalition of Community Health Centers II, LLC.....	TX.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	45-4537668.....				Accountable Care Coalition of DeKalb, LLC.....	GA.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	80.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	81-2629752.....				Accountable Care Coalition of Eastern Wisconsin, LLC.....	WI.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	45-5481108.....				Accountable Care Coalition of Georgia, LLC.....	GA.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	82-1623920.....				Accountable Care Coalition of Georgia Community Health Centers, LLC.....	GA.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	82-1558080.....				Accountable Care Coalition of Hawaii, LLC.....	HI.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	82-0746336.....				Accountable Care Coalition of Indiana, LLC.....	IN.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	82-1637625.....				Accountable Care Coalition of Louisiana, LLC.....	LA.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	45-5449147.....				Accountable Care Coalition of Maryland Primary Care, LLC.....	MD.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	45-4119739.....				Accountable Care Coalition of Maryland, LLC.....	MD.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	46-2881180.....				Accountable Care Coalition of Mississippi, LLC.....	MS.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	45-4105836.....				Accountable Care Coalition of Mount Kisco, LLC.....	NY.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	82-1263227.....				Accountable Care Coalition of New Jersey, LLC.....	NJ.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	45-4552802.....				Accountable Care Coalition of North Texas, LLC.....	TX.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	47-3894436.....				Accountable Care Coalition of Northeast Georgia, LLC.....	GA.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	45-4106526.....				Accountable Care Coalition of Northwest Florida, LLC.....	FL.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	82-1604548.....				Accountable Care Coalition of North West Region, LLC.....	OR.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	82-1698885.....				Accountable Care Coalition of North West Region II, LLC.....	OR.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	82-0727997.....				Accountable Care Coalition of Pennsylvania, LLC.....	PA.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	47-3913308.....				Accountable Care Coalition of South Carolina, LLC.....	SC.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	47-3843552.....				Accountable Care Coalition of Southeast Texas, Inc.....	TX.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....

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01199	WellCare Health Plans Inc.	00000	45-4113610			Accountable Care Coalition of Southeast Wisconsin		WI	NIA	Collaborative Health Systems LLC	Ownership	51.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	45-4546234			Accountable Care Coalition of Syracuse, LLC		NY	NIA	Collaborative Health Systems LLC	Ownership	51.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	82-1219279			Accountable Care Coalition of Tennessee, LLC		TN	NIA	Collaborative Health Systems LLC	Ownership	51.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	45-2742298			Accountable Care Coalition of Texas, Inc.		TX	NIA	Collaborative Health Systems LLC	Ownership	100.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	45-4113780			Accountable Care Coalition of the Tri-Counties, LLC		SC	NIA	Collaborative Health Systems LLC	Ownership	51.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	45-4537584			Accountable Care Coalition of Western Georgia, LLC		GA	NIA	Collaborative Health Systems LLC	Ownership	51.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	80624	13-1851754			American Progressive Life & Health Insurance Company of New York		NY	IA	Universal American Holdings, LLC	Ownership	100.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	52-2134236			APS Healthcare Holdings, Inc.		DE	NIA	APS Healthcare, Inc.	Ownership	100.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	54-1602622			APS Healthcare, Inc.		DE	NIA	UAM/APS Holding Corp	Ownership	100.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	45-4644722			APS Parent, Inc.		DE	NIA	Universal American Holdings, LLC	Ownership	100.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	30-0803845			Chrysalis Medical Services, LLC		TX	NIA	Heritage Health Systems, Inc.	Ownership	100.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	81-3365375			Collaborative Health Systems of Maryland, Inc.		MD	NIA	Collaborative Health Systems, LLC	Ownership	100.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	81-3306594			Collaborative Health Systems of Virginia, Inc.		VA	NIA	Collaborative Health Systems, LLC	Ownership	100.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	90-0779287			Collaborative Health Systems, LLC		NY	NIA	Universal American Corp	Ownership	100.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	81-2602493			Empire Collaborative Care, LLC		NY	NIA	Collaborative Health Systems, LLC	Ownership	100.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	45-4561546			Essential Care Partners, LLC		TX	NIA	Collaborative Health Systems, LLC	Ownership	51.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	62-1694548			Golden Triangle Physician Alliance		TX	NIA	Heritages Health Systems of Texas Inc.	Ownership	100.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	76-0459857			Heritage Health Systems of Texas, Inc.		TX	NIA	Heritage Health Systems, Inc.	Ownership	100.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	62-1517194			Heritage Health Systems, Inc.		TX	NIA	Universal American Corp	Ownership	100.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	76-0560730			Heritage Physician Networks		TX	NIA	Heritage Health Systems, Inc.	Ownership	100.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	76-0500964			HHS Texas Management, Inc.		GA	NIA	Heritage Health Systems, Inc.	Ownership	100.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	76-0500963			HHS Texas Management, LP		GA	NIA	Heritage Health Systems, Inc.	Ownership	99.0	WellCare Health Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	47-3923394			Hudson Accountable Care, LLC		NY	NIA	Collaborative Health Systems, LLC	Ownership	100.0	WellCare Health Plans, Inc.	N	0

## ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.

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01199.....	WellCare Health Plans Inc.....	00000.....	45-4552092.....				Maine Community Accountable Care Organization, LLC.....	ME.....	NIA.....	Maine Primary Care Holdings, LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	45-4679969.....				Maine Primary Care Holdings, LLC.....	ME.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	97.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	90-0855950.....				Maryland Collaborative Care, LLC.....	MD.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	81-2704355.....				Mid-Atlantic Collaborative Care, LLC.....	MD.....	NIA.....	Collaborative Health Systems, LLC.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	45-5626871.....				Northern Maryland Collaborative Care, LLC.....	MD.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	95-3623226.....				Penn Marketing America, LLC.....	DE.....	NIA.....	Universal American Financial Services.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	58-2633295.....				Premier Marketing Group, LLC.....	DE.....	NIA.....	Penn Marketing America, LLC.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	13-3491681.....				Quincy Coverage Corporation.....	NY.....	NIA.....	Universal American Holdings, LLC.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	10768.....	74-3141949.....				SelectCare Health Plans, Inc.....	TX.....	IA.....	Heritage Health Systems, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	10096.....	62-1819658.....				SelectCare of Texas, Inc.....	TX.....	IA.....	Heritage Health Systems, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	42-0989096.....				UAM Agent Services Corp.....	IA.....	NIA.....	Universal American Financial Services.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	26-0153605.....				UAM/APS Holding Corp.....	DE.....	NIA.....	APS Parent, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	27-4683816.....				Universal American Corp.....	DE.....	UIP.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	95-3800329.....				Universal American Financial Services.....	DE.....	NIA.....	Universal American Holdings, LLC.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	45-1352914.....				Universal American Holdings, LLC.....	DE.....	UIP.....	Universal American Corp.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	45-5439406.....				Virginia Collaborative Care, LLC.....	VA.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	51.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	23-1913528.....				Worlco Management Services, Inc.....	NY.....	NIA.....	Worlco Management Services.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	82-2497115.....				WellCare of New Mexico.....	NM.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	47-2346408.....				AWC of Syracuse, Inc.....	NY.....	NIA.....	Collaborative Health Systems LLC.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	82-3169616.....				WellCare Health Plans of Arizona, Inc.....	AZ.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	82-3114517.....				WellCare of Maine, Inc.....	ME.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....
01199.....	WellCare Health Plans Inc.....	00000.....	66-0888149.....				WellCare of Puerto Rico, Inc.....	PR.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0.....	WellCare Health Plans, Inc.....	N.....	0.....

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.

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

Asterisk	Explanation
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## ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.

## **SCHEDULE Y**

## PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

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## ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

### MARCH FILING

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

### APRIL FILING

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

### JUNE FILING

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

### AUGUST FILING

10. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	.....YES.....
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The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

### MARCH FILING

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

### APRIL FILING

20. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	.....NO.....
21. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?	.....NO.....
22. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	.....YES.....
23. Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?	.....YES.....

### AUGUST FILING

24. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	.....NO.....
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#### Explanation:

- 11.
- 12.
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## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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**ANNUAL STATEMENT FOR THE YEAR 2017 OF THE WellCare of Ohio, Inc.**



## LIFE SUPPLEMENTS

For The Year Ended December 31, 2017

(To Be Filed By March 1)

Of The WellCare of Ohio, Inc. ..... Insurance Company  
Address (City, State and Zip Code) Tampa, FL 33634  
NAIC Group Code 01199 NAIC Company Code 12749 Employer's ID Number 20-3562146