



QUARTERLY STATEMENT

AS OF JUNE 30, 2019
OF THE CONDITION AND AFFAIRS OF THE

Buckeye Health Plan Community Solutions, Inc.

NAIC Group Code	01295	01295	NAIC Company Code	16112	Employer's ID Number	47-5664342
	(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	11/04/2015		Commenced Business		01/01/2018	
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.centene.com					
Statutory Statement Contact	Shaun O'Rourke			314-349-3805		
	(Name)			(Area Code) (Telephone Number) (Extension)		
	shaun.t.orourke@centene.com			314-725-4658		
	(E-Mail Address)			(FAX Number)		

OFFICERS

Name	Title	Name	Title
Steven Bradley Province #	President and CEO	Keith Harvey Williamson	Secretary
Jeffrey Alan Schwaneke	Treasurer	Tricia Lynn Dinkelman	Vice President of Tax

OTHER OFFICERS

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DIRECTORS OR TRUSTEES

Megan Rebecca Flaskamper	Tricia Lynn Dinkelman	Steven Bradley Province	
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State of
County of
SS

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Steven Bradley Province President and CEO	Keith Harvey Williamson Secretary	Jeffrey Alan Schwaneke Treasurer
a. Is this an original filing? Yes [X] No []		
b. If no:		
1. State the amendment number		
2. Date filed		
3. Number of pages attached		

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

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	409,746		409,746	409,640
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$9,317,788), cash equivalents (\$13,249) and short-term investments (\$0)	9,331,037		9,331,037	3,347,301
6. Contract loans (including \$premium notes)			0	0
7. Derivatives	0		0	0
8. Other invested assets	0		0	0
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	9,740,783	0	9,740,783	3,756,941
13. Title plants less \$charged off (for Title insurers only)			0	0
14. Investment income due and accrued	2,937		2,937	2,976
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection			0	24,882
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$earned but unbilled premiums)	30,867		30,867	0
15.3 Accrued retrospective premiums (\$56,857) and contracts subject to redetermination (\$)	56,857		56,857	45,318
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers			0	0
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon			0	324,102
18.2 Net deferred tax asset			0	0
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software			0	0
21. Furniture and equipment, including health care delivery assets (\$)			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates			0	3,000,000
24. Health care (\$181,209) and other amounts receivable	431,028	249,819	181,209	37,518
25. Aggregate write-ins for other-than-invested assets	0	0	0	7,770
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	10,262,472	249,819	10,012,653	7,199,507
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	10,262,472	249,819	10,012,653	7,199,507
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0
2501. State income tax receivable	0		0	7,770
2502.				
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)	0	0	0	7,770

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ reinsurance ceded).....	4,532,003		4,532,003	2,149,561
2. Accrued medical incentive pool and bonus amounts	1,372		1,372	7,153
3. Unpaid claims adjustment expenses	39,000		39,000	26,000
4. Aggregate health policy reserves including the liability of \$ for medical loss ratio rebate per the Public Health Service Act.....	468,340		468,340	1,449,129
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	484		484	311
9. General expenses due or accrued	32,070		32,070	26,303
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))	49,406		49,406	0
10.2 Net deferred tax liability.....			0	0
11. Ceded reinsurance premiums payable			0	0
12. Amounts withheld or retained for the account of others			0	0
13. Remittances and items not allocated			0	0
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current)			0	0
15. Amounts due to parent, subsidiaries and affiliates	264,726		264,726	174,481
16. Derivatives.....			0	0
17. Payable for securities			0	0
18. Payable for securities lending			0	0
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers).....			0	0
20. Reinsurance in unauthorized and certified (\$) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans	711,895		711,895	352,059
23. Aggregate write-ins for other liabilities (including \$ current)	11,542	0	11,542	0
24. Total liabilities (Lines 1 to 23).....	6,110,838	0	6,110,838	4,184,997
25. Aggregate write-ins for special surplus funds	XXX	XXX	180,287	0
26. Common capital stock	XXX	XXX	1	1
27. Preferred capital stock	XXX	XXX		0
28. Gross paid in and contributed surplus	XXX	XXX	5,899,999	5,899,999
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	(2,178,472)	(2,885,490)
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	3,901,815	3,014,510
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	10,012,653	7,199,507
DETAILS OF WRITE-INS				
2301. State Income Tax Payable.....	11,542		11,542	
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	11,542	0	11,542	0
2501. 2020 Health Insurance Fee Estimate.....	XXX	XXX	180,287	
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	180,287	0
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months.....	XXX	10,331	.0	11,185
2. Net premium income (including \$ non-health premium income).....	XXX	9,012,872	.0	9,222,510
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	9,012,872	.0	9,222,510
Hospital and Medical:				
9. Hospital/medical benefits		6,174,977	.0	7,487,068
10. Other professional services		372,971	.0	262,680
11. Outside referrals .....			.0	.0
12. Emergency room and out-of-area		692,225	.0	702,561
13. Prescription drugs		934,599	.0	1,216,096
14. Aggregate write-ins for other hospital and medical.....	.0	.0	.0	.0
15. Incentive pool, withhold adjustments and bonus amounts.....		2,267	.0	7,353
16. Subtotal (Lines 9 to 15) .....	.0	8,177,039	.0	9,675,758
Less:				
17. Net reinsurance recoveries .....			.0	.0
18. Total hospital and medical (Lines 16 minus 17) .....	.0	8,177,039	.0	9,675,758
19. Non-health claims (net).....			.0	.0
20. Claims adjustment expenses, including \$ 2,332 cost containment expenses.....		136,124	.0	164,093
21. General administrative expenses.....		792,475	.0	1,006,790
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only).....		(980,789)	.0	1,449,129
23. Total underwriting deductions (Lines 18 through 22) .....	.0	8,124,849	.0	12,295,770
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	888,023	.0	(3,073,260)
25. Net investment income earned		79,199	.0	48,853
26. Net realized capital gains (losses) less capital gains tax of \$ .....			.0	.0
27. Net investment gains (losses) (Lines 25 plus 26) .....	.0	79,199	.0	48,853
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$ 5,278)]		(5,278)	.0	(5,317)
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	961,944	.0	(3,029,724)
31. Federal and foreign income taxes incurred	XXX	4,690	.0	(324,104)
32. Net income (loss) (Lines 30 minus 31)	XXX	957,254	0	(2,705,620)
DETAILS OF WRITE-INS				
0601.	XXX			
0602.	XXX			
0603.	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	.0	.0	.0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX	0	0	0
0701.	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.				
1402.				
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page .....	.0	.0	.0	.0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	0	0	0	0
2901.				
2902.				
2903.				
2998. Summary of remaining write-ins for Line 29 from overflow page .....	.0	.0	.0	.0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1	2	3
	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
CAPITAL & SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year.....	3,014,510	0	1,700,000
34. Net income or (loss) from Line 32	957,254	0	(2,705,620)
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 \$		0	0
37. Change in net unrealized foreign exchange capital gain or (loss)		0	0
38. Change in net deferred income tax		0	0
39. Change in nonadmitted assets	(69,949)	0	(179,870)
40. Change in unauthorized and certified reinsurance	0	0	0
41. Change in treasury stock	0	0	0
42. Change in surplus notes	0	0	0
43. Cumulative effect of changes in accounting principles		0	0
44. Capital Changes:			
44.1 Paid in		0	0
44.2 Transferred from surplus (Stock Dividend)		0	0
44.3 Transferred to surplus		0	0
45. Surplus adjustments:			
45.1 Paid in		0	4,200,000
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)	887,305	0	1,314,510
49. Capital and surplus end of reporting period (Line 33 plus 48)	3,901,815	0	3,014,510
DETAILS OF WRITE-INS			
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	2	3
	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance.....	8,994,765	0	9,152,571
2. Net investment income	111,203	0	45,675
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	9,105,968	0	9,198,246
5. Benefit and loss related payments	6,013,262	0	7,736,432
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	477,788	0	605,076
8. Dividends paid to policyholders		0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses).....	(368,818)	0	(2)
10. Total (Lines 5 through 9)	6,122,232	0	8,341,506
11. Net cash from operations (Line 4 minus Line 10)	2,983,736	0	856,740
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	0	0	0
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	0	0	0
13. Cost of investments acquired (long-term only):			
13.1 Bonds	0	0	409,439
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	0	0
13.6 Miscellaneous applications	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	0	0	409,439
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)	0	0	(409,439)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock.....	3,000,000	0	1,200,000
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).....	3,000,000	0	1,200,000
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	5,983,736	0	1,647,301
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	3,347,301	0	1,700,000
19.2 End of period (Line 18 plus Line 19.1)	9,331,037	0	3,347,301

STATEMENT AS OF JUNE 30, 2019 OF THE Buckeye Health Plan Community Solutions, 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	1,145	.0	.0	.0	.0	.0	.0	1,145	.0	.0
2. First Quarter	1,699	.0	.0	.0	.0	.0	.0	1,699	.0	.0
3. Second Quarter	1,797	.0	.0	.0	.0	.0	.0	1,797	.0	.0
4. Third Quarter .....	.0									
5. Current Year	0									
6. Current Year Member Months	10,331							10,331		
Total Member Ambulatory Encounters for Period:										
7. Physician	15,721							15,721		
8. Non-Physician	5,120							5,120		
9. Total	20,841	0	0	0	0	0	0	20,841	0	0
10. Hospital Patient Days Incurred	2,051							2,051		
11. Number of Inpatient Admissions	262							262		
12. Health Premiums Written (a).....	9,014,367							9,014,367		
13. Life Premiums Direct.....	.0									
14. Property/Casualty Premiums Written .....	.0									
15. Health Premiums Earned	9,014,367							9,014,367		
16. Property/Casualty Premiums Earned .....	.0									
17. Amount Paid for Provision of Health Care Services	5,800,378							5,800,378		
18. Amount Incurred for Provision of Health Care Services	8,177,039							8,177,039		

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 9,014,367

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)					0	0
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	1,654,797	4,568,563	92,889	4,439,114	1,747,686	2,149,561
7. Title XIX - Medicaid					0	0
8. Other health					0	0
9. Health subtotal (Lines 1 to 8).....	1,654,797	4,568,563	92,889	4,439,114	1,747,686	2,149,561
10. Health care receivables (a)		431,028			0	0
11. Other non-health					0	0
12. Medical incentive pools and bonus amounts	8,046	0	272	1,100	8,318	7,153
13. Totals (Lines 9-10+11+12)	1,662,843	4,137,535	93,161	4,440,214	1,756,004	2,156,714

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

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Buckeye Health Plan Community Solutions, 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 Ohio Department of Insurance recognizes only statutory accounting practices 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. The state has adopted NAIC SAP with no prescribed differences.

NET INCOME	SSAP #	F/S Page	F/S Line #	2019	2018
(1) Buckeye Health Plan Community Solutions state basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ 957,254	\$ (2,705,620)
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:				-	-
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:				-	-
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	<u>\$ 957,254</u>	<u>\$ (2,705,620)</u>
SURPLUS					
(5) Buckeye Health Plan Community Solutions state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 3,901,815	\$ 3,014,510
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:				-	-
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:				-	-
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	<u>\$ 3,901,815</u>	<u>\$ 3,014,510</u>

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

No Change

C. Accounting Policy

1. No Change

2. Investment grade bonds (NAIC designations 1 or 2) not backed by other loans are valued at amortized cost using the scientific (constant yield) method. Bonds containing call provisions, except "make whole" call provisions, are amortized to the call or maturity value/date which produces the lowest asset value (yield to worst). Bonds which are below investment grade (NAIC designation 3 to 6) are carried at the lower of amortized cost or fair value. The Company holds no common stocks.

3. No Change

4. No Change.

5. No Change

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

7. No Change

8. No Change

9. No Change

10. No Change

11. No Change

12. No Change

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

No Change

4. Discontinued Operations

No Change

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

None

B. Debt Restructuring

None

C. Reverse Mortgages

None

D. Loan-Backed Securities

1. None

2. None

3. None

4. 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):

a. The aggregate amount of unrealized losses:

1. Less than 12 Months	\$0
2. 12 Months or Longer	\$0

b. The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months	\$0
2. 12 Months or Longer	\$0

5. 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. The Company does not intend to sell these securities prior to maturity; therefore, there is no indication of other than temporary impairment of these securities.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

None

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

None

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

None

H. Repurchase Agreements Transactions Accounted for as a Sale

None

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

None

J. Real Estate

None

K. Investments in low-income housing tax credits (LIHTC)

None

L. Restricted Assets

1. Restricted Assets (Including Pledged)

No change

2. Detail of Assets Pledged as Collateral Not Captured in Other Categories

None

3. Detail of Other Restricted Assets

None

4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

None

M. Working Capital Finance Investments

None

N. Offsetting and Netting of Assets and Liabilities

None

O. Structured Notes

None

P. 5*GI Securities

None

Q. Short Sales

None

R. Prepayment Penalty and Acceleration Fees

None

6. Joint Ventures, Partnerships and Limited Liability Companies

No Change

7. Investment Income

No Change

8. Derivative Instruments

The Company had no derivative instruments during the statement periods.

9. Income Taxes

No Change

10. Information Concerning Parent, Subsidiaries and Affiliates

No Change

11. Debt

A. Capital Notes

No Change

B. FHLB (Federal Home Loan Bank) agreements

None

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

A. Defined Benefit Plans

None

B.-I. No Change

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

None

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

A) Transfers of Receivables reported as Sales

No Change

B) Transfers and Servicing of Financial Assets

None

C) Wash Sales

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.

No Change

20. Fair Value Measurements

- A. The guidance in SSAP No. 100R – Fair Value allows the use of net asset value per share (NAV) instead of fair value for certain investments. The guidance is effective Jan. 1, 2018 with early adoption permitted. For reporting entities electing to early-adopt, the reporting entity shall include narrative disclosures on the use of NAV and include the SSAP No. 100R disclosures for situations when an investment may be sold below NAV or if there are significant restrictions in the liquidation of an investment held at NAV.

Level inputs are as follows:

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, 2019 for assets and liabilities measured at fair value on a recurring basis:

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Cash and Cash Equivalents	\$ 9,331,037	\$ -	\$ -	\$ -	\$ 9,331,037
Perpetual Preferred stock					
Total Perpetual Preferred Stocks	\$ -	\$ -	\$ -	\$ -	\$ -
Bonds					
Total Bonds	\$ -	\$ -	\$ -	\$ -	\$ -
Common Stock					
Total Common Stocks	\$ -	\$ -	\$ -	\$ -	\$ -
Derivative assets					
Total Derivatives	\$ -	\$ -	\$ -	\$ -	\$ -
Separate account assets	\$ -	\$ -	\$ -	\$ -	\$ -
Total assets at fair value/NAV	\$ 9,331,037	\$ -	\$ -	\$ -	\$ 9,331,037
b. Liabilities at fair value					
Derivative liabilities	\$ -	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -	\$ -

The following table summarizes fair value measurements by level at December 31, 2018 for assets and liabilities measured at fair value on a recurring basis:

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Cash and Cash Equivalents	\$ 3,347,301	\$ -	\$ -	\$ -	\$ 3,347,301
Perpetual Preferred stock					
Total Perpetual Preferred Stocks	\$ -	\$ -	\$ -	\$ -	\$ -
Bonds					
Total Bonds	\$ -	\$ -	\$ -	\$ -	\$ -
Common Stock					
Total Common Stocks	\$ -	\$ -	\$ -	\$ -	\$ -
Derivative assets					
Total Derivatives	\$ -	\$ -	\$ -	\$ -	\$ -
Separate account assets	\$ -	\$ -	\$ -	\$ -	\$ -
Total assets at fair value/NAV	\$ 3,347,301	\$ -	\$ -	\$ -	\$ 3,347,301
b. Liabilities at fair value					
Derivative liabilities	\$ -	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -	\$ -

B. None

C. Fair Value Disclosures Under Other Pronouncements

The following table summarizes the aggregate fair value measurements by level at June 30, 2019 for all financial instruments.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level I	Level II	Level III	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	410,961	409,746	410,961	-	-	-	-
Cash, Cash Equivalents & S-T Investments	\$ 9,331,037	\$ 9,331,037	\$ 9,331,037	\$ -	\$ -	\$ -	\$ -

The following table summarizes the aggregate fair value measurements by level at December 31, 2018 for all financial instruments.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level I	Level II	Level III	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	407,228	409,640	407,228	-	-	-	-
Cash, Cash Equivalents & S-T Investments	3,347,301	3,347,301	3,347,301	-	-	-	-

D. None

E. None

21. Other Items

A. Extraordinary Items

No Change

B. Troubled Debt Restructuring: Debtors

No Change

C. Other Disclosures

No Change

D. Business Interruption Insurance Recoveries

No Change

E. State Transferable Tax Credits

No Change

F. Subprime Mortgage Related Risk Exposure

No Change

G. Retained Assets

No Change

H. Insurance Linked Securities (ILS) Contracts

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 ACA

None

25. Change in Incurred Claims and Claims Adjustment Expenses

Reserves for incurred claims and claim adjustment expenses as of December 31, 2018 were \$2,157,000 and \$26,000, respectively. As of June 30, 2019, \$1,663,000 and \$25,000 have been paid for incurred claims and claims adjustment expenses, respectively, attributable to insured events of prior years. Reserves remaining for prior years are now \$93,000 and \$1,000 for incurred claims and claims adjustment expenses, respectively, as a result of re-estimation of unpaid claims and claim adjustment expenses. The Company experienced \$401,000 favorable development since December 31, 2018 generally as 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 | \$468,340 |
| 2. Date of the most recent evaluation of this liability | 07/17/2019 |
| 3. Was anticipated investment income utilized in the calculation? | Yes |

31. Anticipated Salvage and Subrogation

None

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

- 1.1

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

Yes ☐ No ☒
- 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.
- 3.4

Is the reporting entity publicly traded or a member of a publicly traded group?

Yes ☒ No ☐
- 3.5

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

0001071739
- 4.1

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

Yes ☐ No ☒

If yes, complete and file the merger history data file with the NAIC for the annual filing corresponding to this period.
- 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	2	3
Name of Entity	NAIC Company Code	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?

If yes, attach an explanation.

Yes ☐ No ☒ NA ☐
- 6.1

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

12/31/2017
- 6.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.
- 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).
- 6.4

By what department or departments?
- 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.

N/A
- 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	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	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:
N/A.....
- 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 [] No [X]
- 10.2

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

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 [] No [X]
- 14.2

If yes, please complete the following:

	1	2
	Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$0	\$
14.22 Preferred Stock	\$0	\$
14.23 Common Stock	\$0	\$
14.24 Short-Term Investments	\$0	\$
14.25 Mortgage Loans on Real Estate	\$	\$
14.26 All Other	\$	\$
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$0	\$0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$	\$

- 15.1

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

Yes [] No [X]
- 15.2

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

Yes [] No []
- If no, attach a description with this statement.
- 16

For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1

Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

\$0
- 16.2

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

\$0
- 16.3

Total payable for securities lending reported on the liability page

\$0

GENERAL INTERROGATORIES

17. Excluding items in Schedule E – Part 3 – Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity’s offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*?

Yes [X] No []

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

<div>1</div> <div>Name of Custodian(s)</div>	<div>2</div> <div>Custodian Address</div>

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:

<div>1</div> <div>Name(s)</div>	<div>2</div> <div>Location(s)</div>	<div>3</div> <div>Complete Explanation(s)</div>

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:

<div>1</div> <div>Old Custodian</div>	<div>2</div> <div>New Custodian</div>	<div>3</div> <div>Date of Change</div>	<div>4</div> <div>Reason</div>

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”]

<div>1</div> <div>Name of Firm or Individual</div>	<div>2</div> <div>Affiliation</div>

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 [] No [X]

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity’s assets?

Yes [] No [X]

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

<div>1</div> <div>Central Registration Depository Number</div>	<div>2</div> <div>Name of Firm or Individual</div>	<div>3</div> <div>Legal Entity Identifier (LEI)</div>	<div>4</div> <div>Registered With</div>	<div>5</div> <div>Investment Management Agreement (IMA) Filed</div>

18.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed?

Yes [X] No []

18.2 If no, list exceptions:
.....

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:
Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or
a. PL security is not available.
b. Issuer or obligor is current on all contracted interest and principal payments.
c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities?.....

Yes [] No [X]

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

Has the reporting entity self-designated PLGI securities?.....

Yes [] No [X]

GENERAL INTERROGATORIES
PART 2 - HEALTH

1.

Operating Percentages:

1.1 A&H loss percent

79.9 %

1.2 A&H cost containment percent

0.0 %

1.3 A&H expense percent excluding cost containment expenses

10.4 %

2.1

Do you act as a custodian for health savings accounts?

Yes ☐ No ☒

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 ☒

2.4

If yes, please provide the balance of the funds administered as of the reporting date

\$

3.

Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?

Yes ☐ No ☒

3.1

If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?

Yes ☐ No ☒

STATEMENT AS OF JUNE 30, 2019 OF THE Buckeye Health Plan Community Solutions, 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 (a)	Direct Business Only								
		2 Accident & Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 Federal Employees Health Benefits Program Premiums	6 Life & Annuity Premiums & Other Considerations	7 Property/ Casualty Premiums	8 Total Columns 2 Through 7	9 Deposit-Type Contracts	
1. Alabama	AL	N						0		
2. Alaska	AK	N						0		
3. Arizona	AZ	N						0		
4. Arkansas	AR	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	9,014,367					9,014,367		
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	0	9,014,367	0	0	0	0	9,014,367	0	0
60. Reporting entity contributions for Employee Benefit Plans	XXX							0		
61. Total (Direct Business)	XXX	0	9,014,367	0	0	0	0	9,014,367	0	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	0
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX	0	0	0	0	0	0	0	0	0

(a) Active Status Counts

L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG1 R – Registered – Non-domiciled RRGs0
E – Eligible – Reporting entities eligible or approved to write surplus lines in the state0 Q – Qualified – Qualified or accredited reinsurer0
N – None of the above – Not allowed to write business in the state56

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

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..... 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..... Buckeye Community Health Plan, Inc.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	11834.....	32-0045282.....				Absolute Total Care, Inc..... Health Plan Real Estate Holding, Inc.....	OH.....	IA.....	Centene Corporation..... Buckeye Community Health Plan, Inc.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Coordinated Care Corporation d/b/a Managed Health Services.....	MO.....	NIA.....	Centene Corporation..... Coordinated Care Corporation d/b/a Managed Health Services.....	Ownership.....	13.0.....	Centene Corporation..... Centene Corporation.....	Y.....	0.....
01295.....	Centene Corporation.....	12959.....	20-5693998.....				Healthy Washington Holdings, Inc..... Coordinated Care of Washington, Inc.....	SC.....	IA.....	Centene Corporation..... Absolute Total Care, Inc.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Absolute Total Care, Inc.....	Ownership.....	1.0.....	Centene Corporation..... Centene Corporation.....	Y.....	0.....
01295.....	Centene Corporation.....	95831.....	39-1821211.....				Health Plan Real Estate Holding, 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.....				Healthy Washington Holdings, Inc..... Coordinated Care of Washington, Inc.....	MO.....	NIA.....	Centene Corporation..... Healthy Washington Holdings, Inc.....	Ownership.....	15.0.....	Centene Corporation..... Centene Corporation.....	Y.....	0.....
01295.....	Centene Corporation.....	00000.....	46-5523218.....				Managed Health Services Insurance Corp..... Health Plan Real Estate Holding, Inc.....	DE.....	NIA.....	Centene Corporation..... Managed Health Services Insurance Corp.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	15352.....	46-2578279.....				Health Plan Real Estate Holding, Inc.....	WA.....	IA.....	Centene Corporation..... Managed Health Services Insurance Corp.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	96822.....	39-1678579.....				Hallmark Life Insurance Co.....	WI.....	IA.....	Centene Corporation..... Managed Health Services Insurance Corp.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Superior HealthPlan, Inc..... Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Centene Corporation..... Superior HealthPlan, Inc.....	Ownership.....	2.0.....	Centene Corporation..... Centene Corporation.....	Y.....	0.....
01295.....	Centene Corporation.....	60078.....	86-0819817.....				Healthy Louisiana Holdings LLC..... Louisiana Healthcare Connections, Inc.....	AZ.....	IA.....	Centene Corporation..... Healthy Louisiana Holdings LLC.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	95647.....	74-2770542.....				Magnolia Health Plan Inc.....	TX.....	IA.....	Centene Corporation..... Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				IlliniCare Health Plan, Inc.....	MO.....	NIA.....	Superior HealthPlan, Inc.....	Ownership.....	21.0.....	Centene Corporation..... Centene Corporation.....	Y.....	0.....
01295.....	Centene Corporation.....	00000.....	27-0916294.....					DE.....	NIA.....	Centene Corporation..... Healthy Louisiana Holdings LLC.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	13970.....	27-1287287.....					LA.....	IA.....	Centene Corporation..... Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	13923.....	20-8570212.....					MS.....	IA.....	Centene Corporation..... Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	14053.....	27-2186150.....					IL.....	IA.....	Centene Corporation..... Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... 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.....	46-2860967.....				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.....	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.....	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.....	16351.....	45-5583511.....				Western Sky Community Care, Inc.....	NM.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	.0.....
01295.....	Centene Corporation.....	16143.....	20-4761189.....				SilverSummit Healthplan, Inc.....	NV.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	.0.....
01295.....	Centene Corporation.....	00000.....	22-3292245.....				University Health Plans, Inc.....	NJ.....	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.....	12559.....	42-1694349.....				Trillium Community Health Plan, Inc.....	OR.....	IA.....	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.....
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.....	RE.....	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.....	38-4042368.....				Arkansas Total Care Holding Company, LLC.....	DE.....	NIA.....	Arkansas Health & Wellness Health Plan, Inc.....	Ownership.....	49.0.....	Centene Corporation.....	N.....	.0.....
01295.....	Centene Corporation.....	16256.....	82-2649097.....				Arkansas Total Care, Inc.....	AR.....	IA.....	Arkansas Total Care Holding Company, 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.....	81-2788043.....	.....	.....	.....	Healthy Oklahoma Holdings, Inc.....	DE.....	NIA.....	Centene Corporation..... Healthy Oklahoma Holdings, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	81-3121527.....	.....	.....	.....	Oklahoma Complete Health Inc.....	OK.....	NIA.....	.....	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.....	16310.....	20-4980818.....	.....	.....	.....	Bridgeway Health Solutions of Arizona Inc.....	AZ.....	IA.....	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.....	82-3210933.....	.....	.....	.....	Centene Center III, 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.....	45-5431787.....	.....	.....	.....	GPT Acquisition LLC.....	DE.....	NIA.....	CMC Real Estate Co. 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.....	38-4042368.....	.....	.....	.....	Arkansas Total Care Holding Company, LLC.....	DE.....	NIA.....	Lifeshare Management Group, LLC.....	Ownership.....	25.0.....	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.....

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.....	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 Management, L.L.C.....	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 Management, L.L.C.....	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.....	00000.....	80-0879942.....				Cenpatico of Arizona Inc.....	AZ.....	NIA.....	Cenpatico Behavioral Health of Arizona, LLC.....	Ownership.....	100.0.....	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.....	82-2288767.....				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.....
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 Benefits Options, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	36-4520004.....				Envolve Captive Insurance Company, Inc.....	SC.....	NIA.....	Envolve Vision Benefits, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	95302.....	75-2592153.....				Envolve Vision of Texas, Inc.....	TX.....	IA.....	Envolve Vision Benefits, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-4773088.....				Envolve Vision, Inc.....	DE.....	NIA.....	Envolve Vision Benefits, 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.....	83-2460878.....				Envolve Vision IPA of New York, Inc.....	NY.....	NIA.....	Envolve Vision, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	65-0094759.....				Envolve Vision of Florida, Inc.....	FL.....	NIA.....	Envolve Vision Benefits, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-4861241.....				Envolve Total Vision, Inc.....	DE.....	NIA.....	Envolve Vision Benefits, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	82-2908582.....				Envolve Optical, Inc.....	DE.....	NIA.....	Envolve Vision Benefits, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2783884.....				Envolve Dental, Inc.....	DE.....	NIA.....	Envolve Benefits 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.....	16106.....	81-2796896.....				Envolve Dental of Texas, Inc.....	TX.....	IA.....	Envolve Dental, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	83-1464482.....				Envolve Dental IPA of New York, Inc.....	NY.....	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.....	82-5316510.....				MHM Services, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	90-0766502.....				Centurion LLC.....	DE.....	NIA.....	MHM Services, Inc.....	Ownership.....	100.0.....	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.....
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.....	81-4938030.....				Centurion of Maryland, LLC.....	MD.....	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.....	81-5429405.....	.....	.....	.....	Centurion of Philadelphia, LLC.....	PA.....	NIA.....	Centurion LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	82-4735175.....	.....	.....	.....	Centurion Detention Health Services, LLC.....	DE.....	NIA.....	Centurion LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	82-4823469.....	.....	.....	.....	Centurion of New Hampshire, LLC.....	DE.....	NIA.....	Centurion LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	54-1856340.....	.....	.....	.....	MHM Correctional Services, LLC.....	DE.....	NIA.....	MHM Services, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	51-0620904.....	.....	.....	.....	MHM Services of California, LLC.....	CA.....	NIA.....	MHM Services, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	60-0002002.....	.....	.....	.....	MHM Solutions, LLC.....	DE.....	NIA.....	MHM Services, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	26-1877007.....	.....	.....	.....	Forensic Health Services, LLC.....	DE.....	NIA.....	MHM Services, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-1734817.....	.....	.....	.....	MHM Health Professionals, LLC.....	DE.....	NIA.....	MHM Services, Inc.....	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.....	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.....	20-0873587.....	.....	.....	.....	Foundation Care, LLC.....	MO.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	80.0.....	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.....

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.....	38-3153946.....				U.S. Medical Management, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	80.0.....	Centene Corporation.....	N.....	0.....
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.....	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.....	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.....
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.....

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.....	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.....	83-3534462.....				Pinnacle Senior Care of Illinois, LLC.....	IL.....	NIA.....	U.S. Medical Management, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	38-3176990.....				VPA, P.C.....	MI.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	20-2386997.....				VPA of Texas.....	MI.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	47-5208076.....				Health Net, LLC.....	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, LLC.....	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, LLC.....	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.....	68-0214809.....				Health Net Federal Services, LLC.....	DE.....	NIA.....	Health Net, 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.....	42-1680916.....				MHN Government Services LLC.....	DE.....	NIA.....	Health Net Federal Services, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
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.....	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.....	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.....	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.....	84-1175468.....				QualMed, Inc.....	DE.....	NIA.....	Health Net, LLC.....	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.....	23-2867300.....				QualMed Plans for Health of Western Pennsylvania, Inc.....	PA.....	NIA.....	Health Net, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	25-1516632.....				Pennsylvania Health Care Plan, Inc.....	PA.....	NIA.....	Health Net, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	94-3037822.....				Health Net Services Inc.....	DE.....	NIA.....	Health Net, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	54-2174068.....				Health Net Community Solutions, Inc.....	CA.....	NIA.....	Health Net, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	95206.....	36-3097810.....				Health Net of Arizona, Inc.....	AZ.....	IA.....	Health Net, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....					Health Net of Pennsylvania, LLC.....	PA.....	NIA.....	Health Net, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	23-2456130.....				QualMed Plans for Health of Pennsylvania, Inc.....	PA.....	NIA.....	Health Net, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	98-0150604.....				FH Assurance Company.....	CYM.....	NIA.....	Health Net, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	68-0295375.....				Health Net Pharmaceutical Services.....	CA.....	NIA.....	Health Net, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	86-0660443.....				Health Net of Arizona Administrative Services, Inc.....	AZ.....	NIA.....	Health Net, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	15895.....	81-1348826.....				Health Net Community Solutions of Arizona, Inc.....	AZ.....	IA.....	Health Net, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	84-1301249.....				National Pharmacy Services Inc.....	DE.....	NIA.....	Health Net, LLC.....	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.....

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

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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.....	46-2616037.....				Health Net Access, Inc.....	AZ.....	NIA.....	Health Net, LLC.....	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.....					MH Services International Holdings (UK) Limited.....	GBR.....	NIA.....	MHS Consulting, International, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....					MH Services International (UK) Limited.....	GBR.....	NIA.....	MH Services International Holdings (UK) Limited.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....					Centene UK Ltd.....	GBR.....	NIA.....	MH Services International (UK) Limited.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....					The Practice (Group) Limited.....	GBR.....	NIA.....	MH Services International (UK) Limited.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....					Villa Maria del Triunfo Salud S.A. C.....	PER.....	NIA.....	MHS Consulting, International, Inc.....	Ownership.....	5.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....					Callao Salud S.A.C.....	PER.....	NIA.....	MHS Consulting, International, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....					Centene Europe Finance Company Limited.....	MLT.....	NIA.....	MHS Consulting, International, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	82-1172163.....				Centene Health Plan Holdings, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	16395.....	82-5032556.....				Ambetter of North Carolina, Inc.....	NC.....	IA.....	Centene Health Plan Holdings, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	82-2699483.....				Carolina Complete Health Holding Company Partnership.....	DE.....	NIA.....	Centene Health Plan Holdings, Inc.....	Ownership.....	80.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	16526.....	82-2699332.....				Carolina Complete Health, Inc.....	NC.....	IA.....	Carolina Complete Health Holding Company Partnership.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	82-3380290.....				New York Quality Healthcare Corporation.....	NY.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	55-0878053.....				Salus Administrative Services, Inc.....	NY.....	NIA.....	New York Quality Healthcare Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	82-0802846.....				Salus IPA, LLC.....	NY.....	NIA.....	Salus Administrative Services, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	82-4670677.....				Calibrate Acquisition Co.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	47-4179393.....				Community Medical Holdings Corp.....	DE.....	NIA.....	Calibrate Acquisition Co.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	46-3485489.....				Access Medical Acquisition, Inc.....	DE.....	NIA.....	Community Medical Holdings Corp.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	45-3191569.....				Access Medical Group of North Miami Beach, Inc.....	FL.....	NIA.....	Access Medical Acquisition, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	45-3191719.....				Access Medical Group of Miami, Inc.....	FL.....	NIA.....	Access Medical Acquisition, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	45-3192283.....				Access Medical Group of Hialeah, Inc.....	FL.....	NIA.....	Access Medical Acquisition, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	N.....	0.....
01295.....	Centene Corporation.....	00000.....	45-3199819.....				Access Medical Group of Westchester, Inc.....	FL.....	NIA.....	Access Medical Acquisition, 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	45-3505196				Access Medical Group of Opa-Locka, Inc.	FL	NIA	Access Medical Acquisition, Inc.	Ownership	100.0	Centene Corporation	N	.0
01295	Centene Corporation	00000	45-3192955				Access Medical Group of Perrine, Inc.	FL	NIA	Access Medical Acquisition, Inc.	Ownership	100.0	Centene Corporation	N	.0
01295	Centene Corporation	00000	45-3192366				Access Medical Group of Florida City, Inc.	FL	NIA	Access Medical Acquisition, Inc.	Ownership	100.0	Centene Corporation	N	.0
01295	Centene Corporation	00000	82-1737078				Access Medical Group of Tampa, Inc.	FL	NIA	Access Medical Acquisition, Inc.	Ownership	100.0	Centene Corporation	N	.0
01295	Centene Corporation	00000	82-1750978				Access Medical Group of Tampa II, Inc.	FL	NIA	Access Medical Acquisition, Inc.	Ownership	100.0	Centene Corporation	N	.0
01295	Centene Corporation	00000	82-1773315				Access Medical Group of Tampa III, Inc.	FL	NIA	Access Medical Acquisition, Inc.	Ownership	100.0	Centene Corporation	N	.0
01295	Centene Corporation	00000	82-4883921				Interpreta Holdings, Inc.	DE	NIA	Centene Corporation	Ownership	80.1	Centene Corporation	N	.0
01295	Centene Corporation	00000	46-5517858				Interpreta, Inc.	DE	NIA	Interpreta Holdings, Inc.	Ownership	100.0	Centene Corporation	N	.0
01295	Centene Corporation	00000	82-4581788				Patriots Holding Co.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	.0
01295	Centene Corporation	00000					RxAdvance Corporation	DE	NIA	Patriots Holding Co.	Ownership	27.8	Centene Corporation	N	.0
01295	Centene Corporation	00000	32-2434596				Next Door Neighbors, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	.0
01295	Centene Corporation	00000	83-2381790				Next Door Neighbors, Inc.	DE	NIA	Next Door Neighbors, LLC	Ownership	100.0	Centene Corporation	N	.0
01295	Centene Corporation	00000	83-2446307				Centene Venture Company Michigan	MI	NIA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	N	.0
01295	Centene Corporation	16505	83-2425735				Centene Venture Company Illinois	IL	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	N	.0
01295	Centene Corporation	16528	83-2409040				Centene Venture Company Kansas	KS	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	N	.0
01295	Centene Corporation	16499	83-2434596				Centene Venture Company Florida	FL	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	N	.0
01295	Centene Corporation	00000					HealthEC, LLC		NIA	Centene Corporation	Ownership	12.8	Centene Corporation	N	.0
01295	Centene Corporation	00000	83-4144116				Arch Personalized Medicine Initiative, LLC	MO	NIA	Centene Corporation	Ownership	50.0	Centene Corporation	N	.0
01295	Centene Corporation	00000	83-4205348				Social Health Bridge, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	.0
01295	Centene Corporation	00000					Social Health Bridge Trust	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	.0
00000		00000										.0			.0
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SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

Asterisk	Explanation

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

RESPONSE

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

.....NO.....

Explanation:

Bar Code:

1.



1 6 1 1 2 2 0 1 9 3 6 5 0 0 0 0 2

OVERFLOW PAGE FOR WRITE-INS

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 .....	.0	.0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		.0
2.2 Additional investment made after acquisition .....		.0
3. Capitalized deferred interest and other .....		.0
4. Accrual of discount .....		.0
5. Unrealized valuation increase (decrease) .....		.0
6. Total gain (loss) on disposals .....		.0
7. Deduct amounts received on disposals .....		.0
8. Deduct amortization of premium and depreciation .....		.0
9. Total foreign exchange change in book/adjusted carrying value .....		.0
10. Deduct current year's other-than-temporary impairment recognized .....		.0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) .....	.0	.0
12. Deduct total nonadmitted amounts .....	.0	.0
13. Statement value at end of current period (Line 11 minus Line 12)	0	0

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	409,639	.0
2. Cost of bonds and stocks acquired		409,439
3. Accrual of discount	107	200
4. Unrealized valuation increase (decrease) .....		.0
5. Total gain (loss) on disposals .....		.0
6. Deduct consideration for bonds and stocks disposed of .....		.0
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. Total investment income recognized as a result of prepayment penalties and/or acceleration fees .....		.0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	409,746	409,639
12. Deduct total nonadmitted amounts .....	.0	.0
13. Statement value at end of current period (Line 11 minus Line 12)	409,746	409,639

STATEMENT AS OF JUNE 30, 2019 OF THE Buckeye Health Plan Community Solutions, 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
BONDS								
1. NAIC 1 (a).....	409,692	0	0	53	409,692	409,745	0	409,639
2. NAIC 2 (a).....	0				0	0	0	0
3. NAIC 3 (a).....	0				0	0	0	0
4. NAIC 4 (a).....	0				0	0	0	0
5. NAIC 5 (a).....	0				0	0	0	0
6. NAIC 6 (a).....	0				0	0	0	0
7. Total Bonds	409,692	0	0	53	409,692	409,745	0	409,639
PREFERRED STOCK								
8. NAIC 1	0				0	0	0	0
9. NAIC 2	0				0	0	0	0
10. NAIC 3	0				0	0	0	0
11. NAIC 4	0				0	0	0	0
12. NAIC 5	0				0	0	0	0
13. NAIC 6	0				0	0	0	0
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	409,692	0	0	53	409,692	409,745	0	409,639

(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 \$; NAIC 2 \$;

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

Schedule DA - Part 1

NONE

Schedule DA - Verification

NONE

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

SCHEDULE E – PART 2 – VERIFICATION
(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	8,767	0
2. Cost of cash equivalents acquired	4,482	8,791
3. Accrual of discount		0
4. Unrealized valuation increase (decrease)		0
5. Total gain (loss) on disposals.....		0
6. Deduct consideration received on disposals		24
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)	13,249	8,767
11. Deduct total nonadmitted amounts		0
12. Statement value at end of current period (Line 10 minus Line 11)	13,249	8,767

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE

Schedule D - Part 3

NONE

Schedule D - Part 4

NONE

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, 2019 OF THE Buckeye Health Plan Community Solutions, Inc.

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

[illegible]

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