



# QUARTERLY STATEMENT

AS OF MARCH 31, 2021  
OF THE CONDITION AND AFFAIRS OF THE

## Harmony Health Plan, Inc.

NAIC Group Code	01295	01295	NAIC Company Code	11229	Employer's ID Number	36-4050495
	(Current Period)	(Prior Period)				
Organized under the Laws of	Illinois		State of Domicile or Port of Entry		Illinois	
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	08/18/1995	Commenced Business		07/01/1996		
Statutory Home Office	300 S. Riverside, Suite 500		Chicago, IL, US 60606			
	(Street and Number)		(City or Town, State, Country and Zip Code)			
Main Administrative Office	7700 Forsyth Boulevard	St. Louis, MO, US 63105		314-725-4477		
	(Street and Number)	(City or Town, State, Country and Zip Code)		(Area Code) (Telephone Number)		
Mail Address	P.O. Box 31391	Tampa, FL, US 33631-3391				
	(Street and Number or P.O. Box)	(City or Town, State, Country and Zip Code)				
Primary Location of Books and Records	7700 Forsyth Boulevard	St. 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	Michael Wasik		813-206-2725			
	(Name)		(Area Code) (Telephone Number) (Extension)			
	michael.wasik@wellcare.com		813-675-2899			
	(E-Mail Address)		(FAX Number)			

### OFFICERS

Name	Title	Name	Title
James Elias Kiamos	President	Jeffrey Alan Schwaneke	Treasurer and Vice President
Janet Robey Alonzo	Secretary and Vice President	Tricia Lynn Dinkelman	Vice President of Tax

### OTHER OFFICERS

Felicia Victoria-Hereau Spivak	Assistant Secretary	Timothy Joseph Ryan	CFO
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### DIRECTORS OR TRUSTEES

James Elias Kiamos	Patrick Albert Burke	Sherry Beth Husa
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State of .....

ss

County of .....

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

James Elias Kiamos  
President

Jeffrey Alan Schwaneke  
Treasurer and Vice President

Janet Robey Alonzo  
Secretary and Vice President

Subscribed and sworn to before me this  
day of

a. Is this an original filing? Yes [ X ] No [ ]

b. If no:

1. State the amendment number
2. Date filed
3. Number of pages attached

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

**ASSETS**

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	242,288,402		242,288,402	230,601,647
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 (\$ .....4,720,737 ), cash equivalents (\$ .....17,818,425 ) and short-term investments (\$ .....30,492,929 ) .....	53,032,091		53,032,091	73,751,331
6. Contract loans (including \$ ..... premium notes) .....			0	0
7. Derivatives .....	0		0	0
8. Other invested assets .....	0		0	0
9. Receivables for securities .....	38,723		38,723	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) .....	295,359,216	0	295,359,216	304,352,978
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	1,414,088		1,414,088	1,110,722
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	1,781,304		1,781,304	32,891,310
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....			0	0
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ) .....	50,923,057		50,923,057	2,655,454
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 .....	9,041,203		9,041,203	4,296,955
18.1 Current federal and foreign income tax recoverable and interest thereon .....			0	0
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 .....	16,207,579	0	16,207,579	0
24. Health care (\$ .....36,488,891 ) and other amounts receivable .....	41,717,688	5,228,796	36,488,892	35,885,220
25. Aggregate write-ins for other-than-invested assets .....	16,250,312	16,250,312	0	179,703
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	432,694,447	21,479,108	411,215,339	381,372,342
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27) .....	432,694,447	21,479,108	411,215,339	381,372,342
<b>DETAILS OF WRITE-INS</b>				
1101. ....			0	0
1102. ....			0	0
1103. ....			0	0
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) .....	0	0	0	0
2501. State and other tax recoverable .....	0	0	0	179,703
2502. Other non-admitted assets (prepaids) .....	16,250,312	16,250,312	0	0
2503. ....			0	0
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) .....	16,250,312	16,250,312	0	179,703

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ ..... reinsurance ceded).....	132,342,397		132,342,397	130,546,588
2. Accrued medical incentive pool and bonus amounts .....	31,301,336		31,301,336	28,012,235
3. Unpaid claims adjustment expenses .....	921,849		921,849	844,475
4. Aggregate health policy reserves including the liability of \$ ..... for medical loss ratio rebate per the Public Health Service Act.....	15,857,566		15,857,566	19,128,912
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 .....	202,895		202,895	46,708
9. General expenses due or accrued .....	28,104,414		28,104,414	28,130,341
10.1 Current federal and foreign income tax payable and interest thereon (including \$ ..... on realized gains (losses)) .....	12,160,660		12,160,660	3,633,398
10.2 Net deferred tax liability.....	30,970,986		30,970,986	30,883,621
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 .....			0	1,678,543
16. Derivatives.....			0	0
17. Payable for securities .....	1,690,000		1,690,000	3,910,489
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 .....	38,439,783		38,439,783	24,431,912
23. Aggregate write-ins for other liabilities (including \$ ..... current) .....	1,449,020	0	1,449,020	1,116,733
24. Total liabilities (Lines 1 to 23).....	293,440,906	0	293,440,906	272,363,955
25. Aggregate write-ins for special surplus funds .....	XXX	XXX	0	0
26. Common capital stock .....	XXX	XXX	600,000	600,000
27. Preferred capital stock .....	XXX	XXX		0
28. Gross paid in and contributed surplus .....	XXX	XXX	102,640,548	102,640,548
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	14,533,885	5,767,839
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	117,774,433	109,008,387
34. Total liabilities, capital and surplus (Lines 24 and 33) .....	XXX	XXX	411,215,339	381,372,342
<b>DETAILS OF WRITE-INS</b>				
2301. Unclaimed property payable.....	1,001,299		1,001,299	1,116,733
2302. State income tax payable.....	447,721		447,721	0
2303. ....	0		0	0
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) .....	1,449,020	0	1,449,020	1,116,733
2501. ....	XXX	XXX		0
2502. ....	XXX	XXX		0
2503. ....	XXX	XXX		0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) .....	XXX	XXX	0	0
3001. ....	XXX	XXX		0
3002. ....	XXX	XXX		0
3003. ....	XXX	XXX		0
3098. Summary of remaining write-ins for Line 30 from overflow page .....	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above) .....	XXX	XXX	0	0

**STATEMENT OF REVENUE AND EXPENSES**

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months.....	XXX	263,905	232,512	941,841
2. Net premium income (including \$ non-health premium income).....	XXX	290,682,242	258,391,663	1,009,451,864
3. Change in unearned premium reserves and reserve for rate credits .....	XXX	3,656,035	0	(12,511,976)
4. Fee-for-service (net of \$ medical expenses) .....	XXX	0	0	0
5. Risk revenue .....	XXX	0	0	0
6. Aggregate write-ins for other health care related revenues .....	XXX	0	812,592	0
7. Aggregate write-ins for other non-health revenues .....	XXX	0	0	0
8. Total revenues (Lines 2 to 7) .....	XXX	294,338,277	259,204,255	996,939,888
<b>Hospital and Medical:</b>				
9. Hospital/medical benefits .....		176,306,654	145,933,193	587,238,377
10. Other professional services .....		16,603,151	4,638,725	40,593,427
11. Outside referrals .....		0	0	0
12. Emergency room and out-of-area .....		11,612,703	9,444,997	67,349,873
13. Prescription drugs .....		19,931,245	16,033,405	44,941,301
14. Aggregate write-ins for other hospital and medical.....	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts.....		9,807,553	12,740,585	50,728,434
16. Subtotal (Lines 9 to 15) .....	0	234,261,306	188,790,905	790,851,412
<b>Less:</b>				
17. Net reinsurance recoveries .....	0	0	0	6,378
18. Total hospital and medical (Lines 16 minus 17) .....	0	234,261,306	188,790,905	790,845,034
19. Non-health claims (net).....		0	0	0
20. Claims adjustment expenses, including \$ 1,493,416 cost containment expenses.....		3,563,162	2,761,167	11,507,720
21. General administrative expenses.....		31,078,032	76,648,281	163,564,980
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only).....		0	0	0
23. Total underwriting deductions (Lines 18 through 22) .....	0	268,902,500	268,200,353	965,917,734
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	XXX	25,435,777	(8,996,098)	31,022,154
25. Net investment income earned .....		1,010,554	1,339,774	3,942,270
26. Net realized capital gains (losses) less capital gains tax of \$ .....		1,666	246	461,576
27. Net investment gains (losses) (Lines 25 plus 26) .....	0	1,012,220	1,340,020	4,403,846
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ ) (amount charged off \$ )] .....		(171,629)	0	(604,044)
29. Aggregate write-ins for other income or expenses .....	0	0	(117,513)	(49,179)
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	26,276,368	(7,773,591)	34,772,777
31. Federal and foreign income taxes incurred .....	XXX	2,250,454	489,640	11,739,047
32. Net income (loss) (Lines 30 minus 31) .....	XXX	24,025,914	(8,263,231)	23,033,730
<b>DETAILS OF WRITE-INS</b>				
0601. Other income.....	XXX	0	812,592	0
0602. ....	XXX	0	0	0
0603. ....	XXX	0	0	0
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	812,592	0
0701. ....	XXX	0	0	0
0702. ....	XXX	0	0	0
0703. ....	XXX	0	0	0
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. ....		0	0	0
1402. ....		0	0	0
1403. ....		0	0	0
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. Fines and penalties.....	0	0	(117,513)	(49,179)
2902. ....		0	0	0
2903. ....		0	0	0
2998. Summary of remaining write-ins for Line 29 from overflow page .....	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above) .....	0	0	(117,513)	(49,179)

**STATEMENT OF REVENUE AND EXPENSES (Continued)**

	1	2	3
	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
<b>CAPITAL &amp; SURPLUS ACCOUNT</b>			
33. Capital and surplus prior reporting year.....	109,008,387	127,028,290	127,028,290
34. Net income or (loss) from Line 32 .....	24,025,914	(8,263,231)	23,033,730
35. Change in valuation basis of aggregate policy and claim reserves .....	0	0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ .....	12	(1,328,396)	9,972
37. Change in net unrealized foreign exchange capital gain or (loss) .....	0	0	0
38. Change in net deferred income tax .....	(87,365)	(890,694)	1,319,797
39. Change in nonadmitted assets .....	(15,172,515)	(3,453,185)	(2,446,135)
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	0
44. Capital Changes:			
44.1 Paid in .....	0	0	0
44.2 Transferred from surplus (Stock Dividend) .....	0	0	0
44.3 Transferred to surplus .....	0	0	0
45. Surplus adjustments:			
45.1 Paid in .....	0	0	0
45.2 Transferred to capital (Stock Dividend) .....	0	0	0
45.3 Transferred from capital .....	0	0	0
46. Dividends to stockholders .....	0	0	0
47. Aggregate write-ins for gains or (losses) in surplus .....	0	0	(39,937,267)
48. Net change in capital and surplus (Lines 34 to 47) .....	8,766,046	(13,935,506)	(18,019,903)
49. Capital and surplus end of reporting period (Line 33 plus 48)	117,774,433	113,092,784	109,008,387
<b>DETAILS OF WRITE-INS</b>			
4701. Prior period audit adjustment.....	0	0	(39,937,267)
4702. ....	0	0	0
4703. ....	0	0	0
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	(39,937,267)

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

**CASH FLOW**

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance.....	274,065,524	238,472,864	1,018,602,447
2. Net investment income .....	1,594,703	3,461,189	6,447,253
3. Miscellaneous income .....	0	812,592	0
4. Total (Lines 1 to 3) .....	275,660,227	242,746,645	1,025,049,700
5. Benefit and loss related payments .....	248,014,372	189,959,636	797,445,263
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	25,326,124	60,077,025	186,001,206
8. Dividends paid to policyholders .....	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses).....	(6,277,251)	0	(29,336,861)
10. Total (Lines 5 through 9) .....	267,063,245	250,036,661	954,109,608
11. Net cash from operations (Line 4 minus Line 10) .....	8,596,982	(7,290,016)	70,940,092
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	15,847,154	16,906,622	120,112,339
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 .....	2,272	0	1,484
12.7 Miscellaneous proceeds .....	12	0	3,910,489
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	15,849,438	16,906,622	124,024,312
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	28,421,587	38,395,712	139,145,465
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 .....	2,259,212	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	30,680,799	38,395,712	139,145,465
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) .....	(14,831,373)	(21,489,090)	(15,121,153)
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes .....	0	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	0	0
16.3 Borrowed funds .....	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	0	0	0
16.5 Dividends to stockholders .....	0	0	0
16.6 Other cash provided (applied).....	(14,484,849)	22,871,684	(44,971,405)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6).....	(14,484,849)	22,871,684	(44,971,405)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(20,719,240)	(5,907,422)	10,847,534
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	73,751,331	62,903,797	62,903,797
19.2 End of period (Line 18 plus Line 19.1) .....	53,032,091	56,996,374	73,751,331

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year .....	79,459	.0	.0	.0	.0	.0	.0	79,459	.0	.0
2. First Quarter .....	89,391	.0	.0	.0	.0	.0	.0	89,391	.0	.0
3. Second Quarter .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Third Quarter .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. Current Year	0									
6. Current Year Member Months	264,610							264,610		
Total Member Ambulatory Encounters for Period:										
7. Physician .....	235,667							235,667		
8. Non-Physician .....	140,585							140,585		
9. Total	376,252	0	0	0	0	0	0	376,252	0	0
10. Hospital Patient Days Incurred	57,523							57,523		
11. Number of Inpatient Admissions	8,175							8,175		
12. Health Premiums Written (a).....	290,752,100							290,752,100		
13. Life Premiums Direct.....	.0									
14. Property/Casualty Premiums Written .....	.0									
15. Health Premiums Earned .....	294,408,135							295,003,404	(595,269)	
16. Property/Casualty Premiums Earned .....	.0									
17. Amount Paid for Provision of Health Care Services .....	231,757,001							228,742,042	3,016,034	(1,075)
18. Amount Incurred for Provision of Health Care Services	234,261,306							227,554,755	6,700,565	5,986

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 290,752,100



STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

**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	2	3	4		
	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid Dec. 31 of Prior Year	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 .....	74,510,817	170,592,375	39,822,839	81,754,250	114,333,656	123,472,872
7. Title XIX - Medicaid .....		3,019,966	6,854,085	3,684,530	6,854,085	6,854,085
8. Other health .....					.0	219,631
9. Health subtotal (Lines 1 to 8).....	74,510,817	173,612,341	46,676,924	85,438,780	121,187,741	130,546,588
10. Health care receivables (a) .....		25,460,207			.0	.0
11. Other non-health .....					.0	.0
12. Medical incentive pools and bonus amounts .....	4,814,638	1,703,814	19,314,559	11,986,776	24,129,197	28,012,235
13. Totals (Lines 9-10+11+12)	79,325,455	149,855,948	65,991,483	97,425,556	145,316,938	158,558,823

6

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

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

## NOTES TO FINANCIAL STATEMENTS

These items are based on illustrations taken from the NAIC Annual Statement Instructions

**1. Summary of Significant Accounting Policies and Going Concern**

A. Accounting Practices

	<u>SSAP #</u>	<u>F/S Page</u>	<u>F/S Line #</u>		<u>2021</u>		<u>2020</u>
<b>NET INCOME</b>							
(1) Company state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$	24,025,914	\$	23,033,730
(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	\$	24,025,914	\$	23,033,730
<b>SURPLUS</b>							
(5) Company state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$	117,774,433	\$	109,008,387
(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	\$	117,774,433	\$	109,008,387

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

C. Accounting Policy

- (1)
- (2)
- (3)
- (4)
- (5)
- (6)
- (7)
- (8)
- (9)
- (10)
- (11)
- (12)
- (13)

D. Going Concern

- (1)
  - a.
  - b.
  - c.
- (2)
- (3)
- (4)

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

**3. Business Combinations and Goodwill**

B. Statutory Merger

- (1)
- (2)
- (3)
- (4)
- (5)

C. Assumption Reinsurance

- (1)
- (2)
- (3)
- (4)

D. Impairment Loss

- (1)
- (2)

**4. Discontinued Operations**

A. Discontinued Operation Disposed of or Classified as Held for Sale

- (2)
- (4) Carrying Amount and Fair Value of Discontinued Operations and the Effect on Assets, Liabilities, Surplus and Income

B. Change in Plan of Sale of Discontinued Operation

C. Nature of Any Significant Continuing Involvement with Discontinued Operations After Disposal

D. Equity Interest Retained in the Discontinued Operation After Disposal

**5. Investments**

A. Mortgage Loans, including Mezzanine Real Estate Loans

- (1)
- (2)



# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

(4) At December 31, 2021, the actuarial reserve of \$\_ reduced the asset value of the group of reverse mortgages. The Company recorded an unrealized loss of \$\_ as a result of the re-estimate of the cash flows.

D. Loan-Backed Securities

(1)  
(2)

	(1) Amortized Cost Basis Before Other-than- Temporary Impairment	(2) Other-than-Temporary Impairment Recognized in Loss	(3) Fair Value 1 - 2
OTTI recognized 1 <sup>st</sup> Quarter			
a. Intent to sell	\$	\$	\$ 0
b. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	\$	\$	\$ 0
c. Total 1 <sup>st</sup> Quarter	\$ 0	\$ 0	\$ 0
OTTI recognized 2 <sup>nd</sup> Quarter			
d. Intent to sell	\$	\$	\$ 0
e. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	\$	\$	\$ 0
f. Total 2 <sup>nd</sup> Quarter	\$ 0	\$ 0	\$ 0
OTTI recognized 3 <sup>rd</sup> Quarter			
g. Intent to sell	\$	\$	\$ 0
h. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	\$	\$	\$ 0
i. Total 3 <sup>rd</sup> Quarter	\$ 0	\$ 0	\$ 0
OTTI recognized 4 <sup>th</sup> Quarter			
j. Intent to sell	\$	\$	\$ 0
k. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	\$	\$	\$ 0
l. Total 4 <sup>th</sup> Quarter	\$ 0	\$ 0	\$ 0
m. Annual Aggregate Total		\$ 0	

(4)

a. The aggregate amount of unrealized losses:		
	1. Less than 12 Months	\$
	2. 12 Months or Longer	\$
b. The aggregate related fair value of securities with unrealized losses:		
	1. Less than 12 Months	\$
	2. 12 Months or Longer	\$

(5)

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

(1)-(2)

(3)

Collateral Received

a. Aggregate Amount Collateral Received

	<u>Fair Value</u>	
1. Securities Lending		
(a) Open	\$	
(b) 30 Days or Less		
(c) 31 to 60 Days		
(d) 61 to 90 Days		
(e) Greater Than 90 Days		
(f) Sub-Total	\$ 0	
(g) Securities Received		
(h) Total Collateral Received	\$ 0	
2. Dollar Repurchase Agreement		
(a) Open	\$	
(b) 30 Days or Less		
(c) 31 to 60 Days		
(d) 61 to 90 Days		
(e) Greater Than 90 Days		
(f) Sub-Total	\$ 0	
(g) Securities Received		
(h) Total Collateral Received	\$ 0	

b. The fair value of that collateral and of the portion of that collateral that it has sold or repledged

\$

c.

(4)

(5)

Collateral Reinvestment

a. Aggregate Amount Cash Collateral Reinvested

	<u>Amortized Cost</u>	<u>Fair Value</u>
1. Securities Lending		
(a) Open	\$	\$
(b) 30 Days or Less		
(c) 31 to 60 Days		
(d) 61 to 90 Days		
(e) 91 to 120 Days		
(f) 121 to 180 Days		
(g) 181 to 365 Days		
(h) 1 to 2 Years		
(i) 2 to 3 Years		
(j) Greater Than 3 Years		
(k) Sub-Total	\$ 0	\$ 0
(l) Securities Received		
(m) Total Collateral Reinvested	\$ 0	\$ 0
2. Dollar Repurchase Agreement		
(a) Open	\$	\$
(b) 30 Days or Less		
(c) 31 to 60 Days		
(d) 61 to 90 Days		
(e) 91 to 120 Days		
(f) 121 to 180 Days		
(g) 181 to 365 Days		
(h) 1 to 2 Years		
(i) 2 to 3 Years		
(j) Greater Than 3 Years		
(k) Sub-Total	\$ 0	\$ 0
(l) Securities Received		
(m) Total Collateral Reinvested	\$ 0	\$ 0

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

b.

(6)

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

(1)

REPURCHASE TRANSACTION – CASH TAKER – OVERVIEW OF SECURED BORROWING TRANSACTIONS

(2) Type of Repo Trades Used

- a. Bilateral (YES/NO)
- b. Tri-Party (YES/NO)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
---------------	----------------	---------------	----------------

(3) Original (Flow) & Residual Maturity

a. Maximum Amount

- 1. Open – No Maturity
- 2. Overnight
- 3. 2 Days to 1 Week
- 4. > 1 Week to 1 Month
- 5. > 1 Month to 3 Months
- 6. > 3 Months to 1 Year
- 7. > 1 Year

b. Ending Balance

- 1. Open – No Maturity
- 2. Overnight
- 3. 2 Days to 1 Week
- 4. > 1 Week to 1 Month
- 5. > 1 Month to 3 Months
- 6. > 3 Months to 1 Year
- 7. > 1 Year

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
---------------	----------------	---------------	----------------

(4)

(5) Securities "Sold" Under Repo – Secured Borrowing

a. Maximum Amount

- 1. BACV
- 2. Nonadmitted – Subset of BACV
- 3. Fair Value

b. Ending Balance

- 1. BACV
- 2. Nonadmitted – Subset of BACV
- 3. Fair Value

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
---------------	----------------	---------------	----------------

XXX	XXX	XXX	XXX
XXX	XXX	XXX	XXX

(6) Securities Sold Under Repo – Secured Borrowing by NAIC Designation  
ENDING BALANCE

- a. Bonds – BACV
- b. Bonds – FV
- c. LB & SS – BACV
- d. LB & SS – FV
- e. Preferred Stock – BACV
- f. Preferred Stock – FV
- g. Common Stock
- h. Mortgage Loans – BACV
- i. Mortgage Loans – FV
- j. Real Estate – BACV
- k. Real Estate – FV
- l. Derivatives – BACV
- m. Derivatives – FV
- n. Other Invested Assets – BACV
- o. Other Invested Assets – FV
- p. Total Assets – BACV
- q. Total Assets – FV

1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
-----------	-------------	-------------	-------------

0	0	0	0
0	0	0	0

ENDING BALANCE

5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NONADMITTED
-------------	-------------	-------------	------------------

- a. Bonds – BACV
  - b. Bonds – FV
  - c. LB & SS – BACV
  - d. LB & SS – FV
  - e. Preferred Stock – BACV
  - f. Preferred Stock – FV
  - g. Common Stock
  - h. Mortgage Loans – BACV
  - i. Mortgage Loans – FV
  - j. Real Estate – BACV
  - k. Real Estate – FV
  - l. Derivatives – BACV
  - m. Derivatives – FV
  - n. Other Invested Assets – BACV
  - o. Other Invested Assets – FV
  - p. Total Assets – BACV
  - q. Total Assets – FV
- p=a+c+e+g+h+j+l+n      q=b+d+f+g+i+k+m+o

0	0	0	0
0	0	0	0

(7) Collateral Received – Secured Borrowing

- a. Maximum Amount
  - 1. Cash
  - 2. Securities (FV)
- b. Ending Balance
  - 1. Cash
  - 2. Securities (FV)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
---------------	----------------	---------------	----------------

(8) Cash & Non-Cash Collateral Received – Secured Borrowing by NAIC Designation  
ENDING BALANCE

- a. Cash
- b. Bonds – FV
- c. LB & SS – FV
- d. Preferred Stock – FV
- e. Common Stock

1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
-----------	-------------	-------------	-------------

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

f.	Mortgage Loans – FV				
g.	Real Estate – FV				
h.	Derivatives – FV				
i.	Other Invested Assets – FV				
j.	Total Collateral Assets – FV (Sum of a through i)	0	0	0	0

ENDING BALANCE

5	6	7	8
NAIC 4	NAIC 5	NAIC 6	DOES NOT QUALIFY AS ADMITTED

a.	Cash				
b.	Bonds – FV				
c.	LB & SS – FV				
d.	Preferred Stock – FV				
e.	Common Stock				
f.	Mortgage Loans – FV				
g.	Real Estate – FV				
h.	Derivatives – FV				
i.	Other Invested Assets – FV				
j.	Total Collateral Assets – FV (Sum of a through i)	0	0	0	0

(9) Allocation of Aggregate Collateral by Remaining Contractual Maturity

FAIR VALUE
------------

- a. Overnight and Continuous
- b. 30 Days or Less
- c. 31 to 90 Days
- d. > 90 Days

(10) Allocation of Aggregate Collateral Reinvested by Remaining Contractual Maturity

AMORTIZED COST	FAIR VALUE
----------------	------------

- a. 30 Days or Less
- b. 31 to 60 Days
- c. 61 to 90 Days
- d. 91 to 120 Days
- e. 121 to 180 Days
- f. 181 to 365 Days
- g. 1 to 2 Years
- h. 2 to 3 Years
- i. > 3 Years

(11) Liability to Return Collateral – Secured Borrowing (Total)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
---------------	----------------	---------------	----------------

- a. Maximum Amount
  - 1. Cash (Collateral – All)
  - 2. Securities Collateral (FV)
- b. Ending Balance
  - 1. Cash (Collateral – All)
  - 2. Securities Collateral (FV)

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

(1)

REPURCHASE TRANSACTION – CASH PROVIDER – OVERVIEW OF SECURED BORROWING TRANSACTIONS

(2) Type of Repo Trades Used

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
---------------	----------------	---------------	----------------

- a. Bilateral (YES/NO)
- b. Tri-Party (YES/NO)

(3) Original (Flow) & Residual Maturity

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
---------------	----------------	---------------	----------------

- a. Maximum Amount
  - 1. Open – No Maturity
  - 2. Overnight
  - 3. 2 Days to 1 Week
  - 4. > 1 Week to 1 Month
  - 5. > 1 Month to 3 Months
  - 6. > 3 Months to 1 Year
  - 7. > 1 Year
- b. Ending Balance
  - 1. Open – No Maturity
  - 2. Overnight
  - 3. 2 Days to 1 Week
  - 4. > 1 Week to 1 Month
  - 5. > 1 Month to 3 Months
  - 6. > 3 Months to 1 Year
  - 7. > 1 Year

(4)

(5) Fair Value of Securities Acquired Under Repo - Secured Borrowing

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
---------------	----------------	---------------	----------------

- a. Maximum Amount
- b. Ending Balance

(6) Securities Acquired Under Repo – Secured Borrowing by NAIC Designation

ENDING BALANCE

1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
-----------	-------------	-------------	-------------

a.	Bonds – FV				
b.	LB & SS – FV				
c.	Preferred Stock – FV				
d.	Common Stock				
e.	Mortgage Loans – FV				
f.	Real Estate – FV				
g.	Derivatives – FV				
h.	Other Invested Assets – FV				
i.	Total Assets – FV (Sum of a through h)	0	0	0	0

ENDING BALANCE

5	6	7	8
NAIC 4	NAIC 5	NAIC 6	DOES NOT QUALIFY AS ADMITTED

- a. Bonds – FV
- b. LB & SS – FV
- c. Preferred Stock – FV
- d. Common Stock
- e. Mortgage Loans – FV
- f. Real Estate – FV
- g. Derivatives – FV
- h. Other Invested Assets – FV

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

i. Total Assets – FV (Sum of a through h) 0                      0                      0                      0

(7) Collateral Provided – Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash				
2. Securities (FV)				
3. Securities (BACV)	XXX	XXX	XXX	XXX
4. Nonadmitted Subset (BACV)	XXX	XXX	XXX	XXX
b. Ending Balance				
1. Cash				
2. Securities (FV)				
3. Securities (BACV)				
4. Nonadmitted Subset (BACV)				

(8) Allocation of Aggregate Collateral Pledged by Remaining Contractual Maturity

	AMORTIZED COST	FAIR VALUE
a. Overnight and Continuous		
b. 30 Days or Less		
c. 31 to 90 Days		
d. > 90 Days		

(9) Recognized Receivable for Return of Collateral – Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash				
2. Securities (FV)				
b. Ending Balance				
1. Cash				
2. Securities (FV)				

(10) Recognized Liability to Return Collateral – Secured Borrowing (Total)

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Repo Securities Sold/Acquired with Cash Collateral				
2. Repo Securities Sold/Acquired with Securities Collateral (FV)				
b. Ending Balance				
1. Repo Securities Sold/Acquired with Cash Collateral				
2. Repo Securities Sold/Acquired with Securities Collateral (FV)				

H. Repurchase Agreements Transactions Accounted for as a Sale

(1) REPURCHASE TRANSACTION – CASH TAKER – OVERVIEW OF SALE TRANSACTIONS

(2) Type of Repo Trades Used

- a. Bilateral (YES/NO)
- b. Tri-Party (YES/NO)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(3) Original (Flow) & Residual Maturity

- a. Maximum Amount
  - 1. Open – No Maturity
  - 2. Overnight
  - 3. 2 Days to 1 Week
  - 4. > 1 Week to 1 Month
  - 5. > 1 Month to 3 Months
  - 6. > 3 Months to 1 Year
  - 7. > 1 Year
- b. Ending Balance
  - 1. Open – No Maturity
  - 2. Overnight
  - 3. 2 Days to 1 Week
  - 4. > 1 Week to 1 Month
  - 5. > 1 Month to 3 Months
  - 6. > 3 Months to 1 Year
  - 7. > 1 Year

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(4) Securities "Sold" Under Repo - Sale

- a. Maximum Amount
  - 1. BACV
  - 2. Nonadmitted – Subset of BACV
  - 3. Fair Value
- b. Ending Balance
  - 1. BACV
  - 2. Nonadmitted – Subset of BACV
  - 3. Fair Value

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
XXX	XXX	XXX	XXX
XXX	XXX	XXX	XXX
XXX	XXX	XXX	XXX
XXX	XXX	XXX	XXX

(6) Securities Sold Under Repo – Sale by NAIC Designation  
ENDING BALANCE

- a. Bonds – BACV
- b. Bonds – FV
- c. LB & SS – BACV
- d. LB & SS – FV
- e. Preferred Stock – BACV
- f. Preferred Stock – FV
- g. Common Stock
- h. Mortgage Loans – BACV
- i. Mortgage Loans – FV
- j. Real Estate – BACV
- k. Real Estate – FV
- l. Derivatives – BACV
- m. Derivatives – FV
- n. Other Invested Assets – BACV
- o. Other Invested Assets – FV
- p. Total Assets – BACV
- q. Total Assets – FV

1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3

- a. Bonds – BACV
- b. Bonds – FV
- c. LB & SS – BACV
- d. LB & SS – FV

0	0	0	0
0	0	0	0
5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NONADMITTED

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

e.	Preferred Stock – BACV			
f.	Preferred Stock – FV			
g.	Common Stock			
h.	Mortgage Loans – BACV			
i.	Mortgage Loans – FV			
j.	Real Estate – BACV			
k.	Real Estate – FV			
l.	Derivatives – BACV			
m.	Derivatives – FV			
n.	Other Invested Assets – BACV			
o.	Other Invested Assets – FV			
p.	Total Assets – BACV	0	0	0
q.	Total Assets – FV	0	0	0
	p=a+c+e+g+h+j+l+n      q=b+d+f+g+i+k+m+o			

(7) Proceeds Received - Sale

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash				
2. Securities (FV)				
3. Nonadmitted				
b. Ending Balance				
1. Cash				
2. Securities (FV)				
3. Nonadmitted				

(8) Cash & Non-Cash Collateral Received – Sale by NAIC Designation

ENDING BALANCE

	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
a. Bonds – FV				
b. LB & SS – FV				
c. Preferred Stock – FV				
d. Common Stock				
e. Mortgage Loans – FV				
f. Real Estate – FV				
g. Derivatives – FV				
h. Other Invested Assets – FV				
i. Total Assets – FV (Sum of a through h)	0	0	0	0

ENDING BALANCE

	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NONADMITTED
a. Bonds – FV				
b. LB & SS – FV				
c. Preferred Stock – FV				
d. Common Stock				
e. Mortgage Loans – FV				
f. Real Estate – FV				
g. Derivatives – FV				
h. Other Invested Assets – FV				
i. Total Assets – FV (Sum of a through h)	0	0	0	0

(9) Recognized Forward Resale Commitment

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
b. Ending Balance				

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

(1) REPURCHASE TRANSACTION – CASH PROVIDER – OVERVIEW OF SALE TRANSACTIONS

(2) Type of Repo Trades Used

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Bilateral (YES/NO)				
b. Tri-Party (YES/NO)				

(3) Original (Flow) & Residual Maturity

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Open – No Maturity				
2. Overnight				
3. 2 Days to 1 Week				
4. > 1 Week to 1 Month				
5. > 1 Month to 3 Months				
6. > 3 Months to 1 Year				
7. > 1 Year				
b. Ending Balance				
1. Open – No Maturity				
2. Overnight				
3. 2 Days to 1 Week				
4. > 1 Week to 1 Month				
5. > 1 Month to 3 Months				
6. > 3 Months to 1 Year				
7. > 1 Year				

(4) Securities Acquired Under Repo - Sale

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. BACV	XXX	XXX	XXX	XXX
2. Nonadmitted – Subset of BACV	XXX	XXX	XXX	XXX
3. Fair Value				
b. Ending Balance				
1. BACV	XXX	XXX	XXX	XXX
2. Nonadmitted – Subset of BACV	XXX	XXX	XXX	XXX
3. Fair Value				

(6) Securities Acquired Under Repo – Sale by NAIC Designation

ENDING BALANCE

	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
a. Bonds – BACV				
b. Bonds – FV				
c. LB & SS – BACV				
d. LB & SS – FV				
e. Preferred Stock – BACV				
f. Preferred Stock – FV				

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

g. Common Stock				
h. Mortgage Loans – BACV				
i. Mortgage Loans – FV				
j. Real Estate – BACV				
k. Real Estate – FV				
l. Derivatives – BACV				
m. Derivatives – FV				
n. Other Invested Assets – BACV				
o. Other Invested Assets – FV				
p. Total Assets – BACV	0	0	0	0
q. Total Assets – FV	0	0	0	0
ENDING BALANCE				

5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NONADMITTED
-------------	-------------	-------------	------------------

a. Bonds – BACV				
b. Bonds – FV				
c. LB & SS – BACV				
d. LB & SS – FV				
e. Preferred Stock – BACV				
f. Preferred Stock – FV				
g. Common Stock				
h. Mortgage Loans – BACV				
i. Mortgage Loans – FV				
j. Real Estate – BACV				
k. Real Estate – FV				
l. Derivatives – BACV				
m. Derivatives – FV				
n. Other Invested Assets – BACV				
o. Other Invested Assets – FV				
p. Total Assets – BACV	0	0	0	0
q. Total Assets – FV	0	0	0	0
p=a+c+e+g+h+j+l+n    q=b+d+f+g+i+k+m+o				

(7) Proceeds Provided - Sale

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash				
2. Securities (FV)				
3. Securities (BACV)	XXX	XXX	XXX	XXX
4. Nonadmitted Subset (BACV)	XXX	XXX	XXX	XXX
b. Ending Balance				
1. Cash				
2. Securities (FV)				
3. Securities (BACV)				
4. Nonadmitted Subset (BACV)				

(8) Recognized Forward Resale Commitment

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
b. Ending Balance				

J. Real Estate

(1)

- a.
- b.
- c.

(2)

- a.
- b.

(3)

(4)

- a.
- b.
- c.
- d.
- e.

(5)

- a.
- b.

K. Low-Income Housing Tax Credits (LIHTC)

(1)

(2)

(3)

(4)

(5)

- a.
- b.
- c.

(6)

- a.
- b.

(7)

L. Restricted Assets

(1) Restricted Assets (Including Pledged)

	1	2	3	4	5	6	7
Restricted Asset Category	Total Gross (Admitted & Nonadmitted) Restricted from Current Year	Total Gross (Admitted & Nonadmitted) Restricted From Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 minus 4)	Gross (Admitted & Nonadmitted) Restricted to Total Assets (a)	Admitted Restricted to Total Admitted Assets (b)
a. Subject to contractual obligation for which liability is not shown	\$	\$ 0	\$ 0	\$	\$ 0	0.0 %	0.0 %
b. Collateral held under security lending agreements		0	0		0	0.0	0.0
c. Subject to repurchase agreements		0	0		0	0.0	0.0
d. Subject to reverse repurchase agreements		0	0		0	0.0	0.0
e. Subject to dollar repurchase agreements		0	0		0	0.0	0.0
f. Subject to dollar reverse repurchase agreements		0	0		0	0.0	0.0
g. Placed under option contracts		0	0		0	0.0	0.0
h. Letter stock or securities restricted as to sale – excluding							

**STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.**

Restricted Asset Category	1	2	3	4	5	6	7
	Total Gross (Admitted & Nonadmitted) Restricted from Current Year	Total Gross (Admitted & Nonadmitted) Restricted From Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 minus 4)	Gross (Admitted & Nonadmitted) Restricted to Total Assets (a)	Admitted Restricted to Total Admitted Assets (b)
FHLB capital stock		0	0		0	0.0	0.0
i. FHLB capital stock		0	0		0	0.0	0.0
j. On deposit with states		6,992,814	(6,992,814)		0	0.0	0.0
k. On deposit with other regulatory bodies		0	0		0	0.0	0.0
l. Pledged as collateral to FHLB (including assets backing funding agreements)		0	0		0	0.0	0.0
m. Pledged as collateral not captured in other categories	0	0	0		0	0.0	0.0
n. Other restricted assets	0	0	0		0	0.0	0.0
<b>o. Total Restricted Assets</b>	\$ 0	\$ 6,992,814	\$ (6,992,814)	\$ 0	\$ 0	0.0 %	0.0 %

(a) Column 1 divided by Asset Page, Column 1, Line 28

(b) Column 5 divided by Asset Page, Column 3, Line 28

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

Collateral Assets	1	2	3	4
	Book/Adjusted Carrying Value (BACV)	Fair Value	% of BACV to Total Assets (Admitted and Nonadmitted) *	% of BACV to Total Admitted Assets **
a. Cash, Cash Equivalents and Short-Term Investments	\$ 0	\$ 0	0.0 %	0.0 %
b. Schedule D, Part 1			0.0 %	0.0 %
c. Schedule D, Part 2, Section 1			0.0 %	0.0 %
d. Schedule D, Part 2, Section 2			0.0 %	0.0 %
e. Schedule B			0.0 %	0.0 %
f. Schedule A			0.0 %	0.0 %
g. Schedule BA, Part 1			0.0 %	0.0 %
h. Schedule DL, Part 1			0.0 %	0.0 %
i. Other			0.0 %	0.0 %
<b>i. Total Collateral Assets (a+b+c+d+e+f+g+h+i)</b>	\$ 0	\$ 0	0.0 %	0.0 %

\* Column 1 divided by Asset Page, Line 26 (Column 1)

\*\* Column 1 divided by Asset Page, Line 26 (Column 3)

k. Recognized Obligation to Return Collateral Asset	1	2
	Amount	% of Liability to Total Liabilities *
	\$ 0	0.0 %

\* Column 1 divided by Liability Page, Line 24 (Column 3)

M. Working Capital Finance Investments

(1) Aggregate Working Capital Finance Investments (WCFI) Book/Adjusted Carrying Value by NAIC Designation:

	Gross Asset CY	Non-admitted Asset CY	Net Admitted Asset CY
a. WCFI Designation 1	\$ 0	\$ 0	\$ 0
b. WCFI Designation 2			0
c. WCFI Designation 3			0
d. WCFI Designation 4			0
e. WCFI Designation 5			0
f. WCFI Designation 6			0
g. Total	\$ 0	\$ 0	\$ 0

(2) Aggregate Maturity Distribution on the Underlying Working Capital Finance Programs:

	Book/Adjusted Carrying Value
a. Up to 180 Days	
b. 181 Days to 365 Days	
c. Total	\$ 0

(3) Offsetting and Netting of Assets and Liabilities

O. 5GI Securities

Investment	Number of 5GI Securities		Aggregate BACV		Aggregate Fair Value	
	Current Year	Prior Year	Current Year	Prior Year	Current Year	Prior Year
(1) Bonds – AC		0	\$ 0	\$ 0	\$ 0	\$ 0
(2) Bonds – FV		0	\$ 0	\$ 0	\$ 0	\$ 0
(3) LB&SS – AC		0	\$ 0	\$ 0	\$ 0	\$ 0
(4) LB&SS – FV		0	\$ 0	\$ 0	\$ 0	\$ 0
(5) Preferred Stock – AC		0	\$ 0	\$ 0	\$ 0	\$ 0
(6) Preferred Stock – FV		0	\$ 0	\$ 0	\$ 0	\$ 0
<b>(7) Total (1+2+3+4+5+6)</b>	0	0	\$ 0	\$ 0	\$ 0	\$ 0

AC – Amortized Cost

FV – Fair Value

P. Short Sales

(1) Unsettled Short Sale Transactions (Outstanding as of Reporting Date)

	Proceeds Received	Current Fair Value of Securities Sold Short	Unrealized Gain or Loss	Expected Settlement (# of Days)	Fair Value of Short Sales Exceeding (or expected to exceed) 3 Settlement Days	Fair Value of Short Sales Expected to be Settled by Secured Borrowing
a. Bonds	\$ 0	\$ 0	\$ 0	XXX	\$ 0	\$ 0
b. Preferred Stock						
c. Common Stock						
<b>d. Totals (a+b+c)</b>	\$ 0	\$ 0	\$ 0		\$ 0	\$ 0

(2) Settled Short Sale Transactions

	Proceeds Received	Current Fair Value of Securities Sold Short	Realized Gain or Loss on Transaction	Fair Value of Short Sales that Exceeded 3 Settlement Days	Fair Value of Short Sales Settled by Secured Borrowing
a. Bonds	\$ 0	\$ 0	\$ 0		
b. Preferred Stock					
c. Common Stock					

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

d. Totals (a+b+c)	\$	0	\$	0	\$	0	\$	0	\$	0
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Q. Prepayment Penalty and Acceleration Fees General Account

(1) Number of CUSIPs

(2) Aggregate Amount of Investment Income

R. Reporting Entity's Share of Cash Pool by Asset type.

	<u>Asset Type</u>	<u>Percent Share</u>
(1) Cash		%
(2) Cash Equivalents		%
(3) Short-Term Investments		%
(4) Total		0.000 %

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

A.  
B.

**7. Investment Income**

A.  
B.

**8. Derivative Instruments**

A. Derivatives under SSAP No. 86 – Derivatives

(1)  
(2)  
(3)  
(4)  
(5)  
(6)  
(7)

a.  
b.

(8)

a.

	<u>Fiscal Year</u>	<u>Derivative Premium Payments Due</u>
1.	2021	\$
2.	2022	
3.	2023	
4.	2024	
5.	Thereafter	
6.	Total Future Settled Premiums	\$ 0

b.

		<u>Undiscounted Future Premium Commitments</u>	0	\$	<u>Derivative Fair Value With Premium Commitments (Reported on DB)</u>	0	\$	<u>Derivative Fair Value Excluding Impact of Future Settled Premiums</u>	0
1.	Prior Year	\$			\$			\$	
2.	Current Year	\$			\$			\$	

B. Derivatives under SSAP No. 108 – Derivatives Hedging Variable Annuity Guarantees

(1)

(2) Recognition of gains/losses and deferred assets and liabilities

a. Scheduled Amortization

	<u>Amortization Year</u>	<u>Deferred Assets</u>	<u>Deferred Liabilities</u>
1.	2021		
2.	2022		
3.	2023		
4.	2024		
5.	2025		
6.	2026		
7.	2027		
8.	2028		
9.	2029		
10.	2030		
11.	Total	0	0

b. Total Deferred Balance\*

\* Should agree to Column 19 of Schedule DB, Part E

0

c. Reconciliation of Amortization:

1.	Prior Year Total Deferred Balance	\$
2.	Current Year Amortization	\$
3.	Current Year Deferred Recognition	\$
4.	Ending Deferred Balance [1-(2+3)]	\$ 0

d. Open Derivative Removed from SSAP No. 108 and Captured in Scope of SSAP No. 86

1.	Total Derivative Fair Value Change	\$
2.	Change in Fair Value Reflected as a Natural Offset to VM21 Liability Under SSAP No. 108	\$
3.	Change in Fair Value Reflected as a Deferred Asset / Liability Under SSAP No. 108	\$
4.	Other Changes	\$
5.	Unrealized Gain / Loss Recognized for Derivative Under SSAP No. 86 [1-(sum of 2 through 4)]	\$ 0

e. Open Derivative Removed from SSAP No. 86 and Captured in Scope of SSAP No. 108

1.	Total Derivative Fair Value Change	\$
2.	Unrealized Gain / Loss Recognized Prior to the Reclassification to SSAP No. 108	\$
3.	Other Changes	\$
4.	Fair Value Change Available for Application under SSAP No. 108 [1-(2+3)]	\$ 0

(3)

a.

c. Amortization

	<u>Amortization Year</u>	<u>Recognized Deferred Assets</u>	<u>Recognized Deferred Liabilities</u>	<u>Accelerated Amortization</u>	<u>Original Amortization</u>
1.	2021				
2.	2022				
3.	2023				

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

- 4. 2024
- 5. 2025
- 6. Total Adjusted Amortization

d.  
(4)  
a.

c. Amortization

Amortization Year	Recognized Deferred Assets	Recognized Deferred Liabilities	Accelerated Amortization	Original Amortization
1. 2021				
2. 2022				
3. 2023				
4. 2024				
5. 2025				
6. Total Adjusted Amortization				

d.

9. Income Taxes

A. The components of the net deferred tax asset/(liability) at March 31 are as follows:

1.

		3/31/2021		
		(1)	(2)	(3)
		Ordinary	Capital	(Col 1+2) Total
(a)	Gross Deferred Tax Assets	\$	\$	\$ 0
(b)	Statutory Valuation Allowance Adjustments	\$	\$	\$ 0
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 0	\$ 0	\$ 0
(d)	Deferred Tax Assets Nonadmitted	\$	\$	\$ 0
(e)	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ 0	\$ 0	\$ 0
(f)	Deferred Tax Liabilities	\$	\$	\$ 0
(g)	Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 0	\$ 0	\$ 0

		12/31/2020		
		(4)	(5)	(6)
		Ordinary	Capital	(Col 4+5) Total
(a)	Gross Deferred Tax Assets	\$ 2,884,148	\$ 6,355	\$ 2,890,503
(b)	Statutory Valuation Allowance Adjustments	\$ 0	\$ 0	\$ 0
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 2,884,148	\$ 6,355	\$ 2,890,503
(d)	Deferred Tax Assets Nonadmitted	\$ 0	\$ 0	\$ 0
(e)	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ 2,884,148	\$ 6,355	\$ 2,890,503
(f)	Deferred Tax Liabilities	\$ 141,534	\$ 33,632,591	\$ 33,774,125
(g)	Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 2,742,614	\$ (33,626,236)	\$ (30,883,622)

		Change		
		(7)	(8)	(9)
		(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
(a)	Gross Deferred Tax Assets	\$ (2,884,148)	\$ (6,355)	\$ (2,890,503)
(b)	Statutory Valuation Allowance Adjustments	\$ 0	\$ 0	\$ 0
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ (2,884,148)	\$ (6,355)	\$ (2,890,503)
(d)	Deferred Tax Assets Nonadmitted	\$ 0	\$ 0	\$ 0
(e)	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ (2,884,148)	\$ (6,355)	\$ (2,890,503)
(f)	Deferred Tax Liabilities	\$ (141,534)	\$ (33,632,591)	\$ (33,774,125)
(g)	Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ (2,742,614)	\$ 33,626,236	\$ 30,883,622

2.

		3/31/2021		
		(1)	(2)	(3)
		Ordinary	Capital	(Col 1+2) Total

Admission Calculation Components SSAP No. 101

(a)	Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks.	\$	\$	\$ 0
(b)	Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$	\$	\$ 0
	1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	\$	\$	\$ 0
	2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	\$ XXX	\$ XXX	\$
(c)	Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	\$	\$	\$ 0
(d)	Deferred Tax Assets Admitted as the result of application of SSAP No. 101.	\$	\$	\$ 0
	Total (2(a) + 2(b) + 2(c))	\$ 0	\$ 0	\$ 0

		12/31/2020		
		(4)	(5)	(6)
		Ordinary	Capital	(Col 4+5) Total
(a)	Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks.	\$ 2,884,148	\$ 6,355	\$ 2,890,503
(b)	Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$ 0	\$ 0	\$ 0
	1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	\$ 0	\$ 0	\$ 0
	2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	\$ XXX	\$ XXX	\$ 16,351,258
(c)	Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	\$ 0	\$ 0	\$ 0
(d)	Deferred Tax Assets Admitted as the result of application of SSAP No. 101.	\$	\$	\$ 0
	Total (2(a) + 2(b) + 2(c))	\$ 2,884,148	\$ 6,355	\$ 2,890,503

		Change		
		(7)	(8)	(9)
		(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

(a)	Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks.	\$	(2,884,148)	\$	(6,355)	\$	(2,890,503)
(b)	Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$	0	\$	0	\$	0
	1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	\$	0	\$	0	\$	0
	2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX		XXX		\$	(16,351,258)
(c)	Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	\$	0	\$	0	\$	0
(d)	Deferred Tax Assets Admitted as the result of application of SSAP No. 101.	\$	(2,884,148)	\$	(6,355)	\$	(2,890,503)
	Total (2(a) + 2(b) + 2(c))						

3.

2021	2020
------	------

(a)	Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.	327.000
(b)	Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.	\$ 109,008,388.000

4.

3/31/2021	
(1) Ordinary	(2) Capital

Impact of Tax-Planning Strategies

(a)	Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.		
	1. Adjusted Gross DTAs Amount From Note 9A1(c)	0	0
	2. Percentage Of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies		
	3. Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)	0	0
	4. Percentage Of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies		

12/31/2020	
(3) Ordinary	(4) Capital

(a)	Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.		
	1. Adjusted Gross DTAs Amount From Note 9A1(c)	2,884,148	6,355
	2. Percentage Of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies	59.3	0.2
	3. Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)	2,884,148	6,355
	4. Percentage Of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies	59.3	0.2

Change	
(5) (Col 1-3) Ordinary	(6) (Col 2-4) Capital

(a)	Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.		
	1. Adjusted Gross DTAs Amount From Note 9A1(c)	(2,884,148)	(6,355)
	2. Percentage Of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies	(59.3)	(0.2)
	3. Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)	(2,884,148)	(6,355)
	4. Percentage Of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies	(59.3)	(0.2)

(b) Does the Company's tax-planning strategies include the use of reinsurance? Yes No

B.

- (1)
- (2)
- (3)
- (4)

C. Current income taxes incurred consist of the following major components

(1)	(2)	(3)
3/31/2021	12/31/2020	(Col 1-2) Change

1. Current Income Tax

(a)	Federal	\$	11,964,126	\$	(11,964,126)
(b)	Foreign	\$	0	\$	0
(c)	Subtotal	\$	11,964,126	\$	(11,964,126)
(d)	Federal income tax on net capital gains	\$	122,697	\$	(122,697)
(e)	Utilization of capital loss carry-forwards	\$	0	\$	0
(f)	Other	\$	(225,080)	\$	225,080
(g)	Federal and foreign income taxes incurred	\$	11,861,743	\$	(11,861,743)

2. Deferred Tax Assets:

(a)	Ordinary				
	(1) Discounting of unpaid losses	\$	507,677	\$	(507,677)
	(2) Unearned premium reserve	\$	1,962	\$	(1,962)
	(3) Policyholder reserves	\$	0	\$	0
	(4) Investments	\$	0	\$	0
	(5) Deferred acquisition costs	\$	0	\$	0
	(6) Policyholder dividends accrual	\$	0	\$	0
	(7) Fixed assets	\$	0	\$	0
	(8) Compensation and benefits accrual	\$	0	\$	0
	(9) Pension accrual	\$	0	\$	0
	(10) Receivables - nonadmitted	\$	424,449	\$	(424,449)
	(11) Net operating loss carry-forward	\$	0	\$	0
	(12) Tax credit carry-forward	\$	0	\$	0
	(13) Other (including items <5% of total ordinary tax assets)	\$	1,950,061	\$	(1,950,061)
	(99) Subtotal	\$	2,884,149	\$	(2,884,149)
(b)	Statutory valuation allowance adjustment	\$	0	\$	0
(c)	Nonadmitted	\$	0	\$	0
(d)	Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$	2,884,149	\$	(2,884,149)
(e)	Capital:				
	(1) Investments	\$	0	\$	0
	(2) Net capital loss carry-forward	\$	0	\$	0
	(3) Real estate	\$	0	\$	0
	(4) Other (including items <5% of total capital tax assets)	\$	6,355	\$	(6,355)
	(99) Subtotal	\$	6,355	\$	(6,355)

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

(f)	Statutory valuation allowance adjustment	\$		0	\$	0
(g)	Nonadmitted	\$		0	\$	0
(h)	Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$	0	\$	6,355	\$ (6,355)
(i)	Admitted deferred tax assets (2d + 2h)	\$	0	\$	2,890,504	\$ (2,890,504)
<b>3. Deferred Tax Liabilities:</b>						
(a) Ordinary						
(1)	Investments	\$	\$	0	\$	0
(2)	Fixed assets	\$	\$	0	\$	0
(3)	Deferred and uncollected premium	\$	\$	0	\$	0
(4)	Policyholder reserves	\$	\$	141,534	\$	(141,534)
(5)	Other (including items <5% of total ordinary tax liabilities)	\$	\$	0	\$	0
(99)	Subtotal	\$	0	\$	141,534	\$ (141,534)
(b) Capital:						
(1)	Investments	\$	\$	33,632,591	\$	(33,632,591)
(2)	Real estate	\$	\$	0	\$	0
(3)	Other (including items <5% of total capital tax liabilities)	\$	\$	0	\$	0
(99)	Subtotal	\$	0	\$	33,632,591	\$ (33,632,591)
(c) Deferred tax liabilities (3a99 + 3b99)						
		\$	0	\$	33,774,125	\$ (33,774,125)
<b>4.</b>	<b>Net deferred tax assets/liabilities (2i - 3c)</b>	<b>\$</b>	<b>0</b>	<b>\$</b>	<b>(30,883,621)</b>	<b>\$ 30,883,621</b>

D.

E.

(1)

(2)

(3)

F.

(1)

(2)

G.

H. Repatriation Transition Tax (RTT)

I. Alternative Minimum Tax Credit

			<u>Amount</u>
(1)	Gross AMT Credit Recognized as:		
a.	Current year recoverable	\$	
b.	Deferred tax asset (DTA)	\$	
(2)	Beginning Balance of AMT Credit Carryforward	\$	
(3)	Amounts Recovered	\$	
(4)	Adjustments	\$	
(5)	Ending Balance of AMT Credit Carryforward (5=2-3-4)	\$	0
(6)	Reduction for Sequestration	\$	
(7)	Nonadmitted by Reporting Entity	\$	
(8)	Reporting Entity Ending Balance (8=5-6-7)	\$	0

**10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties**

A.

B.

C. Transactions with related party who are not reported on Schedule Y

(3) Detail of Material Related Party Transactions Involving Exchange of Assets and Liabilities

D.

E.

F.

G.

H.

I.

J.

K.

L.

M. All SCA Investments

(1) Balance Sheet Value (Admitted and Nonadmitted) All SCAs (Except 8bi Entities)

SCA Entity	Percentage of SCA Ownership	Gross Amount	Admitted Amount	Nonadmitted Amount
------------	-----------------------------	--------------	-----------------	--------------------

(2) NAIC Filing Response Information

SCA Entity (Should be same entities as shown in M(1) above.)	Type of NAIC Filing*	Date of Filing to the NAIC	NAIC Valuation Amount	NAIC Response Received Y/N	NAIC Disallowed Entities Valuation Method, Resubmission Required Y/N	Code**
e. Total SSAP No. 97 8b Entities (except 8bi entities) (b+c+d)	XXX	XXX	\$ 0	XXX	XXX	XXX
f. Aggregate Total (a+e)	XXX	XXX	\$ 0	XXX	XXX	XXX

\*S1 – Sub-1, S2 – Sub-2 or RDF – Resubmission of Disallowed Filing

\*\* I – Immaterial or M - Material

N. Investment in Insurance SCAs

(1)

(3)

**11. Debt**

A.

B. FHLB (Federal Home Loan Bank) Agreements

(1)

(2) FHLB Capital Stock

a. Aggregate Totals

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

		Total
1.	Current Year	
(a)	Membership Stock – Class A	0
(b)	Membership Stock – Class B	0
(c)	Activity Stock	
(d)	Excess Stock	
(e)	Aggregate Total (a+b+c+d)	0
(f)	Actual or estimated Borrowing Capacity as Determined by the Insurer	

		Total
2.	Prior Year-end	
(a)	Membership Stock – Class A	0
(b)	Membership Stock – Class B	0
(c)	Activity Stock	0
(d)	Excess Stock	0
(e)	Aggregate Total (a+b+c+d)	0
(f)	Actual or estimated Borrowing Capacity as Determined by the Insurer	0

11B(2)a1(f) should be equal to or greater than 11B(4)a1(d)  
 11B(2)a2(f) should be equal to or greater than 11B(4)a2(d)

b. Membership Stock (Class A and B) Eligible and Not Eligible for Redemption

Membership Stock	1 Current Year Total (2+3+4+5+6)	2 Not Eligible for Redemption	Eligible for Redemption			
			3 Less Than 6 Months	4 6 months to Less Than 1 year	5 1 to Less Than 3 Years	6 3 to 5 Years
1. Class A	0					
2. Class B	0					

11B(2)b1 Current Year Total (Column 1) should equal 11B(2)a1(a) Total (Column 1)  
 11B(2)b2 Current Year Total (Column 1) should equal 11B(2)a1(b) Total (Column 1)

(3) Collateral Pledged to FHLB

a. Amount Pledged as of Reporting Date

	1 Fair Value	2 Carrying Value	3 Aggregate Total Borrowing
1. Current Year Total Collateral Pledged	0	0	0
2. Prior Year-end Total Collateral Pledged	0	0	0

11B(3)a1 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b1 (Columns 1, 2 and 3 respectively)  
 11B(3)a2 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b2 (Columns 1, 2 and 3 respectively)

b. Maximum Amount Pledged During Reporting Period

	1 Fair Value	2 Carrying Value	3 Amount Borrowed at Time of Maximum Collateral
1. Current Year Total Maximum Collateral Pledged	0	0	0
2. Prior Year-end Total Maximum Collateral Pledged	0	0	0

(4) Borrowing from FHLB

a. Amount as of the Reporting Date

		Total	Funding Agreements Reserves Established
1.	Current Year		
(a)	Debt		XXX
(b)	Funding Agreements		
(c)	Other		XXX
(d)	Aggregate Total (a+b+c)	0	0

		Total	Funding Agreements Reserves Established
2.	Prior Year-end		
(a)	Debt	0	XXX
(b)	Funding Agreements	0	0
(c)	Other	0	XXX
(d)	Aggregate Total (a+b+c)	0	0

b. Maximum Amount during Reporting Period (Current Year)

		Total
1.	Debt	
2.	Funding Agreements	
3.	Other	
4.	Aggregate Total (Lines 1+2+3)	0

11B(4)b4 should be equal to or greater than 11B(4)a1(d)

c. FHLB – Prepayment Obligations

Does the company have prepayment obligations under the following arrangements (YES/NO)?
---

1. Debt
2. Funding Agreements
3. Other

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

A. Defined Benefit Plan

(1) Change in benefit obligation

a. Pension Benefits

		<u>Overfunded</u>			<u>Underfunded</u>		
	2021	2021	2020	2021	2020	2021	2020
1. Benefit obligation at beginning of year	\$	0	\$	0	\$	0	0
2. Service cost	\$	\$	\$	0	\$	\$	0
3. Interest cost	\$	\$	\$	0	\$	\$	0
4. Contribution by plan participants	\$	\$	\$	0	\$	\$	0

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

5.	Actuarial gain (loss)	\$	\$	0	\$	\$	0
6.	Foreign currency exchange rate changes	\$	\$	0	\$	\$	0
7.	Benefits paid	\$	\$	0	\$	\$	0
8.	Plan amendments	\$	\$	0	\$	\$	0
9.	Business combinations, divestitures, curtailments, settlements and special termination benefits	\$	\$	0	\$	\$	0
10.	Benefit obligation at end of year	\$	0	\$	0	\$	0

b. Postretirement Benefits

		<u>Overfunded</u>			<u>Underfunded</u>		
	2021	2021	2020	2021	2021	2020	
1.	Benefit obligation at beginning of year	\$	0	\$	0	\$	0
2.	Service cost	\$	\$	0	\$	\$	0
3.	Interest cost	\$	\$	0	\$	\$	0
4.	Contribution by plan participants	\$	\$	0	\$	\$	0
5.	Actuarial gain (loss)	\$	\$	0	\$	\$	0
6.	Foreign currency exchange rate changes	\$	\$	0	\$	\$	0
7.	Benefits paid	\$	\$	0	\$	\$	0
8.	Plan amendments	\$	\$	0	\$	\$	0
9.	Business combinations, divestitures, curtailments, settlements and special termination benefits	\$	\$	0	\$	\$	0
10.	Benefit obligation at end of year	\$	0	\$	0	\$	0

c. Special or Contractual Benefits Per SSAP No. 11

		<u>Overfunded</u>			<u>Underfunded</u>		
	2021	2021	2020	2021	2021	2020	
1.	Benefit obligation at beginning of year	\$	0	\$	0	\$	0
2.	Service cost	\$	\$	0	\$	\$	0
3.	Interest cost	\$	\$	0	\$	\$	0
4.	Contribution by plan participants	\$	\$	0	\$	\$	0
5.	Actuarial gain (loss)	\$	\$	0	\$	\$	0
6.	Foreign currency exchange rate changes	\$	\$	0	\$	\$	0
7.	Benefits paid	\$	\$	0	\$	\$	0
8.	Plan amendments	\$	\$	0	\$	\$	0
9.	Business combinations, divestitures, curtailments, settlements and special termination benefits	\$	\$	0	\$	\$	0
10.	Benefit obligation at end of year	\$	0	\$	0	\$	0

(2) Change in plan assets

		<u>Pension Benefits</u>			<u>Postretirement Benefits</u>			<u>Special or Contractual Benefits Per SSAP No. 11</u>	
		2021	2020	2021	2020	2021	2020	2021	2020
a.	Fair value of plan assets at beginning of year	\$	0	\$	0	\$	0	\$	0
b.	Actual return on plan assets	\$	\$	0	\$	0	\$	\$	0
c.	Foreign currency exchange rate changes	\$	\$	0	\$	0	\$	\$	0
d.	Reporting entity contribution	\$	\$	0	\$	0	\$	\$	0
e.	Plan participants' contributions	\$	\$	0	\$	0	\$	\$	0
f.	Benefits paid	\$	\$	0	\$	0	\$	\$	0
g.	Business combinations, divestitures and settlements	\$	\$	0	\$	0	\$	\$	0
h.	Fair value of plan assets at end of year	\$	0	\$	0	\$	0	\$	0

(3) Funded status

		<u>Pension Benefits</u>			<u>Postretirement Benefits</u>		
		2021	2020	2021	2020	2021	2020
a.	Components						
1.	Prepaid benefit costs	\$	\$	0	\$	\$	0
2.	Overfunded plan assets	\$	\$	0	\$	\$	0
3.	Accrued benefit costs	\$	\$	0	\$	\$	0
4.	Liability for pension benefits	\$	\$	0	\$	\$	0
b.	Assets and liabilities recognized						
1.	Assets (nonadmitted)	\$	\$	0	\$	\$	0
2.	Liabilities recognized	\$	\$	0	\$	\$	0
c.	Unrecognized liabilities	\$	\$	0	\$	\$	0

(4) Components of net periodic benefit cost

		<u>Pension Benefits</u>			<u>Postretirement Benefits</u>			<u>Special or Contractual Benefits Per SSAP No. 11</u>	
		2021	2020	2021	2020	2021	2020	2021	2020
a.	Service cost	\$	\$	0	\$	0	\$	\$	0
b.	Interest cost	\$	\$	0	\$	0	\$	\$	0
c.	Expected return on plan assets	\$	\$	0	\$	0	\$	\$	0
d.	Transition asset or obligation	\$	\$	0	\$	0	\$	\$	0
e.	Gains and losses	\$	\$	0	\$	0	\$	\$	0
f.	Prior service cost or credit	\$	\$	0	\$	0	\$	\$	0
g.	Gain or loss recognized due to a settlement or curtailment	\$	\$	0	\$	0	\$	\$	0
h.	Total net periodic benefit cost	\$	0	\$	0	\$	0	\$	0

(5) Amounts in unassigned funds (surplus) recognized as components of net periodic benefit cost

		<u>Pension Benefits</u>			<u>Postretirement Benefits</u>		
		2021	2020	2021	2020	2021	2020
a.	Items not yet recognized as a component of net periodic cost - prior year	\$	\$	0	\$	\$	0
b.	Net transition asset or obligation recognized	\$	\$	0	\$	\$	0
c.	Net prior service cost or credit arising during the period	\$	\$	0	\$	\$	0
d.	Net prior service cost or credit recognized	\$	\$	0	\$	\$	0
e.	Net gain and loss arising during the period	\$	\$	0	\$	\$	0
f.	Net gain and loss recognized	\$	\$	0	\$	\$	0
g.	Items not yet recognized as a component of net periodic cost - current year	\$	\$	0	\$	\$	0

(6) Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost

		<u>Pension Benefits</u>			<u>Postretirement Benefits</u>		
		2021	2020	2021	2020	2021	2020
a.	Net transition asset or obligation	\$	\$	0	\$	\$	0
b.	Net prior service cost or credit	\$	\$	0	\$	\$	0
c.	Net recognized gains and losses	\$	\$	0	\$	\$	0

(7) Weighted-average assumptions used to determine net periodic benefit cost as of March 31

		2021	2020
a.	Weighted-average discount rate		0.000
b.	Expected long-term rate of return on plan assets		0.000
c.	Rate of compensation increase		0.000
d.	Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates)		0.000

Weighted-average assumptions used to determine projected benefit obligations as of March 31 :

		2021	2020
e.	Weighted-average discount rate		0.000
f.	Rate of compensation increase		0.000
g.	Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates)		0.000

(8)

(9)

(10) The following estimated future payments, which reflect expected future service, as appropriate, are expected to be paid in the years indicated:

	<u>Year(s)</u>	<u>Amount</u>
a.	2021	\$
b.	2022	\$
c.	2023	\$

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

d. 2024 \$  
 e. 2025 \$  
 f. 2026 through 2030 \$

- (11)
- (12)
- (13)
- (14)
- (15)
- (16)
- (17)
- (18)

- B.
- C.
- (2)
- D.
- E. Defined Contribution Plans
  
- F. Multiemployer Plans
  
- G. Consolidated/Holding Company Plans
  
- H. Postemployment Benefits and Compensated Absences
  
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

- (1)
- (2)
- (3)

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

- A.
- B.
- C.
- D.
- E.
- F.
- G.
- H.
- I.
- J. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$
- K. The Company issued the following surplus debentures or similar obligations:
  
- L. The impact of any restatement due to prior quasi-reorganizations is as follows:
- M.

**14. Liabilities, Contingencies and Assessments**

- A.
- (1) Total SSAP No. 97 - Investments in Subsidiary, Controlled, and Affiliated Entities, and SSAP No. 48 - Joint Ventures, Partnerships and Limited Liability Companies contingent liabilities: \$

(3)

a.	Aggregate Maximum Potential of Future Payments of All Guarantees (undiscounted) the guarantor could be required to make under guarantees. (Should equal total of Column 4 for (2) above.)	\$	0
b.	Current Liability Recognized in F/S:		
	1. Noncontingent Liabilities	\$	
	2. Contingent Liabilities	\$	
c.	Ultimate Financial Statement Impact if action under the guarantee is required.		
	1. Investments in SCA	\$	
	2. Joint Venture	\$	
	3. Dividends to Stockholders (capital contribution)	\$	
	4. Expense	\$	
	5. Other	\$	
	6. Total (Should equal (3)a.)	\$	0

**B. Assessments**

- (1)
- (2)

a.	Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end	\$	
d.	Assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end	\$	0

(3)

a.	Discount Rate Applied		%
----	-----------------------	--	---

**C. Gain Contingencies**

- D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits  
 The company paid the following amounts in the reporting period to settle claims related extra contractual obligations or bad faith claims stemming from lawsuits.

	Direct
Claims related ECO and bad faith losses paid during the reporting period	\$

Number of claims where amounts were paid to settle claims related extra contractual obligations or bad faith claims resulting from lawsuits during the reporting period.

(a) 0-25 Claims	(b) 26-50 Claims	(c) 51-100 Claims	(d) 101-500 Claims	(e) More than 500 Claims

Indicate whether claim count information is disclosed per claim or per claimant.

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

( f ) Per Claim [ ]                      ( g ) Per Claimant [ ]

E. Joint and Several Liabilities

F. All Other Contingencies

**15. Leases**

A. Lessee Operating Lease

(1)

- a.
- b.
- c.
- d.
- e.

(2) a. At December 31, the minimum aggregate rental commitments are as follows:

	Year Ending <u>December 31</u>				<u>Operating Leases</u>
1.	2021	\$			
2.	2022	\$			
3.	2023	\$			
4.	2024	\$			
5.	2025	\$			
6.	Total	\$			

b.

(3)

- a.
- b.

B.

(1)

- a.
- b.

c. Future minimum lease payment receivables under noncancelable leasing arrangements as of December 31, are as follows:

	Year Ending <u>December 31</u>				<u>Operating Leases</u>
1.	2021	\$			
2.	2022	\$			
3.	2023	\$			
4.	2024	\$			
5.	2025	\$			
6.	Total	\$			

d.

(2)

a.

b. The Company's investment in leveraged leases relates to equipment used primarily in the transportation industries. The component of net income from leveraged leases at December 31, current year and prior year were as shown below:

			2021		2020
1.	Income from leveraged leases before income tax including investment tax credit	\$		\$	0
2.	Less current income tax	\$		\$	0
3.	Net income from leveraged leases	\$	0	\$	0

c. The components of the investment in leveraged leases at December 31, current year and prior year were as shown below:

			2021		2020
1.	Lease contracts receivable (net of principal and interest on non-recourse financing)	\$		\$	0
2.	Estimated residual value of leased assets	\$		\$	0
3.	Unearned and deferred income	\$		\$	0
4.	Investment in leveraged leases	\$		\$	0
5.	Deferred income taxes related to leveraged leases	\$		\$	0
6.	Net investment in leveraged leases	\$		\$	0

**16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk**

(1) The table below summarizes the face amount of the Company's financial instruments with off-balance-sheet risk.

			2021	<u>Assets</u>	2020		2021	<u>Liabilities</u>	2020
a.	Swaps	\$		\$	0	\$		\$	0
b.	Futures	\$		\$	0	\$		\$	0
c.	Options	\$		\$	0	\$		\$	0
d.	Total	\$	0	\$	0	\$	0	\$	0

(2)

(3)

(4)

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

A. Transfers of Receivables Reported as Sales

(1)

(2)

B. Transfer and Servicing of Financial Assets

(1)

(2)

- a.
- b.
- c.

(3)

(4)

a.

1.

(a)

(b)

2.

b.

1.

(a)

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

- (b)
- (c)
- (d)
- 2.
- 3.
- 4.
- 5.
- (5)
- (6)
- (7)
- C. Wash Sales

(1)

**18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans**

**A. ASO Plans**

The gain from operations from Administrative Services Only (ASO) uninsured plans and the uninsured portion of partially insured plans was as follows during 2021 :

	ASO <u>Uninsured Plans</u>	Uninsured Portion of Partially <u>Insured Plans</u>	Total <u>ASO</u>
a. Net reimbursement for administrative expenses (including administrative fees) in excess of actual expenses	\$	\$	\$ 0
b. Total net other income or expenses (including interest paid to or received from plans)	\$	\$	\$ 0
c. Net gain or (loss) from operations	\$ 0	\$ 0	\$ 0
d. Total claim payment volume	\$	\$	\$ 0

**B. ASC Plans**

The gain from operations from Administrative Services Contract (ASC) uninsured plans and the uninsured portion of partially insured plans was as follows during 2021 :

	ASC <u>Uninsured Plans</u>	Uninsured Portion of Partially <u>Insured Plans</u>	Total <u>ASC</u>
a. Gross reimbursement for medical cost incurred	\$	\$	\$ 0
b. Gross administrative fees accrued	\$	\$	\$ 0
c. Other income or expenses (including interest paid to or received from plans)	\$	\$	\$ 0
d. Gross expenses incurred (claims and administrative)	\$	\$	\$ 0
e. Total net gain or loss from operations	\$ 0	\$ 0	\$ 0

**C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract:**

- (1)
- (2)
- (3)
- (4)

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

**20. Fair Value Measurements**

**A.**

- (3)
- (4)
- (5)

**B.**

**E.**

**21. Other Items**

**A. Unusual or Infrequent Items**

**B. Troubled Debt Restructuring: Debtors**

- (1)
- (2)
- (3)
- (4)

**C. Other Disclosures**

**D. Business Interruption Insurance Recoveries**

**E. State Transferable and Non-transferable Tax Credits**

- (2)
- (3)

(4) State Tax Credits Admitted and Nonadmitted

	<u>Total Admitted</u>	<u>Total Nonadmitted</u>
a. Transferable		
b. Non-transferable		

**F. Subprime-Mortgage-Related Risk Exposure**

(1)

(2) Direct exposure through investments in subprime mortgage loans.

	Book/Adjusted Carrying Value (excluding interest)	Fair Value	Value of Land and Buildings	Other-Than-Temporary Impairment Losses Recognized	Default Rate
a. Mortgages in the process of foreclosure					
b. Mortgages in good standing					
c. Mortgages with restructured terms					
d. Total	0	0	0	0	XXX

(3) Direct exposure through other investments.

	Actual Cost	Book/Adjusted Carrying Value (excluding interest)	Fair Value	Other-Than- Temporary Impairment Losses Recognized
a. Residential mortgage-backed securities				
b. Commercial mortgage-backed securities				

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

c. Collateralized debt obligations				
d. Structured securities				
e. Equity investment in SCAs *				
f. Other assets				
g. Total	0	0	0	0

\* Company's subsidiary Company has investments in subprime mortgages. These investments comprise \_ % of the companies invested assets.

(4) Underwriting exposure to subprime mortgage risk through Mortgage Guaranty or Financial Guaranty insurance coverage.

	Losses Paid in the Current Year	Losses Incurred in the Current Year	Case Reserves at End of Current Period	IBNR Reserves at End of Current Period
a. Mortgage guaranty coverage				
b. Financial guaranty coverage				

G. Retained Assets

(1)

(2)

	In Force			
	As of End of Current Year		As of End of Prior Year	
	Number	Balance	Number	Balance
a. Up to and including 12 months		\$ 0	0	\$ 0
b. 13 to 24 months		\$ 0	0	\$ 0
c. 25 to 36 months		\$ 0	0	\$ 0
d. 37 to 48 months		\$ 0	0	\$ 0
e. 49 to 60 months		\$ 0	0	\$ 0
f. Over 60 months		\$ 0	0	\$ 0
g. Total	0	\$ 0	0	\$ 0

(3)

	Individual		Group	
	Number	Balance/Amount	Number	Balance/Amount
a. Number/balance of retained asset accounts at the beginning of the year	0	\$ 0	0	\$ 0
b. Number/amount of retained asset accounts issued/added during the year		\$		\$
c. Investment earnings credited to retained asset accounts during the year	N/A	\$	N/A	\$
d. Fees and other charges assessed to retained asset accounts during the year	NA	\$	NA	\$
e. Number/amount of retained asset accounts transferred to state unclaimed property funds during the year		\$		\$
f. Number/amount of retained asset accounts closed/withdrawn during the year		\$		\$
g. Number/balance of retained asset accounts at the end of the year g=a+b+c-d-e-f	0	\$ 0	0	\$ 0

H. Insurance-Linked Securities (ILS) Contracts

Number of Outstanding ILS Contracts	Aggregate Maximum Proceeds
-------------------------------------	----------------------------

Management of Risk Related To:

(1) Directly-Written Insurance Risks

a. ILS Contracts as Issuer	\$
b. ILS Contracts as Ceding Insurer	\$
c. ILS Contracts as Counterparty	\$

(2) Assumed Insurance Risks

a. ILS Contracts as Issuer	\$
b. ILS Contracts as Ceding Insurer	\$
c. ILS Contracts as Counterparty	\$

I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy

(1) Amount of admitted balance that could be realized that could be realized from an investment vehicle	\$	
(2) Percentage Bonds		%
(3) Percentage Stocks		%
(4) Percentage Mortgage Loans		%
(5) Percentage Real Estate		%
(6) Percentage Cash and Short-Term Investments		%
(7) Percentage Derivatives		%
(8) Percentage Other Invested Assets		%

22. Events Subsequent

		Current Year		Prior Year
A. Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the Federal Affordable Care Act? (YES/NO)?				
B. ACA fee assessment payable for the upcoming year	\$		\$	0
C. ACA fee assessment paid	\$		\$	0
D. Premium written subject to ACA 9010 assessment	\$		\$	0
E. Total Adjusted Capital before surplus adjustment (Five-Year Historical Line 14)	\$			
F. Total Adjusted Capital after surplus adjustment (Five-Year Historical Line 14 minus 22B above)	\$			
G. Authorized Control Level (Five-Year Historical Line 15)	\$			
H. Would reporting the ACA assessment as of Dec. 31, 2021, have triggered an RBC action level (YES/NO)?				

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 - General Interrogatories

(1)

(2)

Section 2 - Ceded Reinsurance Report - Part A

(1)

a.

b.

(2)

Section 3 - Ceded Reinsurance Report - Part B

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

- (1)
- (2)

**B. Uncollectible Reinsurance**

(1) The Company has written off in the current year reinsurance balances due from the companies listed below, the amount of: \$ \_  
That is reflected as:

a.	Losses incurred	\$
b.	Loss adjustment expenses incurred	\$
c.	Premiums earned	\$
d.	Other	\$

**C. Commutation of Reinsurance Reflected in Income and Expenses**

The company has reported in its operations in the current year as a result of commutation of reinsurance with the companies listed below, amounts that are reflected as:

(1)	Losses incurred	\$
(2)	Loss adjustment expenses incurred	\$
(3)	Premiums earned	\$
(4)	Other	\$

**D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation**

- b.
- b.

**E. Reinsurance Credit**

- (1)
- (2)
- (3)
- (4)
- (5)
- (6)

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

- A.
- B.
- C.

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

	1 Individual	2 Small Group Employer	3 Large Group Employer	4 Other Categories with Rebates	5 Total
<b>Prior Reporting Year</b>					
(1) Medical loss ratio rebates incurred	0	0	0	0	0
(2) Medical loss ratio rebates paid	0	0	0	0	0
(3) Medical loss ratio rebates unpaid	0	0	0	0	0
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	0
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	0
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	0
<b>Current Reporting Year-to-Date</b>					
(7) Medical loss ratio rebates incurred	0	0	0	0	0
(8) Medical loss ratio rebates paid					0
(9) Medical loss ratio rebates unpaid					0
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	0

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

(1) Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk sharing provisions (YES/NO)? Yes [ ] No [ ]

(2) Impact of Risk-Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year

AMOUNT

a. Permanent ACA Risk Adjustment Program

Assets

1. Premium adjustments receivable due to ACA Risk Adjustment (including high-risk pool payments) \$

Liabilities

2. Risk adjustment user fees payable for ACA Risk Adjustment \$

3. Premium adjustments payable due to ACA Risk Adjustment (including high-risk pool premium) \$

Operations (Revenue & Expense)

4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment \$

5. Reported in expenses as ACA risk adjustment user fees (incurred/paid) \$

b. Transitional ACA Reinsurance Program

Assets

1. Amounts recoverable for claims paid due to ACA Reinsurance \$

2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability) \$

3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance \$

Liabilities

4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium \$

5. Ceded reinsurance premiums payable due to ACA Reinsurance \$

6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance \$

Operations (Revenue & Expense)

7. Ceded reinsurance premiums due to ACA Reinsurance \$

8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments \$

9. ACA Reinsurance contributions – not reported as ceded premium \$

c. Temporary ACA Risk Corridors Program

Assets

1. Accrued retrospective premium due to ACA Risk Corridors \$

Liabilities

2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors \$

Operations (Revenue & Expense)

3. Effect of ACA Risk Corridors on net premium income (paid/received) \$

4. Effect of ACA Risk Corridors on change in reserves for rate credits \$

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

**STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.**

	Accrued During the Prior Year on Business Written Before Dec 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before Dec 31 of the Prior Year		Differences		Adjustments		Unsettled Balances as of the Reporting Date		
	1	2	3	4	Prior Year Accrued Less Payments (Col 1 – 3)	Prior Year Accrued Less Payments (Col 2 – 4)	To Prior Year Balance	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1 – 3 + 7)	Cumulative Balances from Prior Years (Col 2 – 4 + 8)	
					5	6					
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program											
1. Premiums adjustments receivable (including high-risk pool payments)	\$	\$	\$	\$	\$ 0	\$ 0	\$	\$	A	\$ 0	\$ 0
2. Premium adjustments (payable) (including high-risk pool premium)	\$	\$	\$	\$	\$ 0	\$ 0	\$	\$	B	\$ 0	\$ 0
3. Subtotal ACA Permanent Risk Adjustment Program	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0		\$ 0	\$ 0
b. Transitional ACA Reinsurance Program											
1. Amounts recoverable for claims paid	\$	\$	\$	\$	\$ 0	\$ 0	\$	\$	C	\$ 0	\$ 0
2. Amounts recoverable for claims unpaid (contra liability)	\$	\$	\$	\$	\$ 0	\$ 0	\$	\$	D	\$ 0	\$ 0
3. Amounts receivable relating to uninsured plans	\$	\$	\$	\$	\$ 0	\$ 0	\$	\$	E	\$ 0	\$ 0
4. Liabilities for contributions payable due to ACA Reinsurance – not reported as cede premium	\$	\$	\$	\$	\$ 0	\$ 0	\$	\$	F	\$ 0	\$ 0
5. Ceded reinsurance premiums payable	\$	\$	\$	\$	\$ 0	\$ 0	\$	\$	G	\$ 0	\$ 0
6. Liability for amounts held under uninsured plans					0	0			H	0	0
7. Subtotal ACA Transitional Reinsurance Program	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0		\$ 0	\$ 0
c. Temporary ACA Risk Corridors Program											
1. Accrued retrospective premium	\$	\$	\$	\$	\$ 0	\$ 0	\$	\$	I	\$ 0	\$ 0
2. Reserve for rate credits or policy experience rating refunds	\$	\$	\$	\$	\$ 0	\$ 0	\$	\$	J	\$ 0	\$ 0
3. Subtotal ACA Risk Corridors Program	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0		\$ 0	\$ 0
d. Total for ACA Risk Sharing Provisions	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0		\$ 0	\$ 0

Explanations of Adjustments

- A
- B
- C
- D
- E
- F
- G
- H
- I
- J

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

Risk Corridors Program Year	Accrued During the Prior Year on Business Written Before Dec 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before Dec 31 of the Prior Year		Differences		Adjustments		Unsettled Balances as of the Reporting Date		
	1	2	3	4	Prior Year Accrued Less Payments (Col 1 – 3)	Prior Year Accrued Less Payments (Col 2 – 4)	To Prior Year Balance	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1 – 3 + 7)	Cumulative Balances from Prior Years (Col 2 – 4 + 8)	
					5	6					
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. 2014											
1. Accrued retrospective premium	\$	\$	\$	\$	\$ 0	\$ 0	\$	\$	A	\$ 0	\$ 0
2. Reserve for rate credits or policy experience rating refunds	\$	\$	\$	\$	\$ 0	\$ 0	\$	\$	B	\$ 0	\$ 0
b. 2015											
1. Accrued retrospective premium	\$	\$	\$	\$	\$ 0	\$ 0	\$	\$	C	\$ 0	\$ 0
2. Reserve for rate credits or policy experience rating refunds	\$	\$	\$	\$	\$ 0	\$ 0	\$	\$	D	\$ 0	\$ 0
c. 2016											
1. Accrued retrospective premium	\$	\$	\$	\$	\$ 0	\$ 0	\$	\$	E	\$ 0	\$ 0
2. Reserve for rate credits or policy											

# STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

	1	2	3	4	5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
experience rating refunds	\$	\$	\$	\$	\$ 0	\$ 0	\$	\$	F	\$ 0	\$ 0
d. Total for Risk Corridors	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0		\$ 0	\$ 0

Explanations of Adjustments

- A
- B
- C
- D
- E
- F

24E(4)d (Columns 1 through 10) should equal 24E(3)c3 (Columns 1 through 10 respectively)

(5) ACA Risk Corridors Receivable as of Reporting Date

Risk Corridors Program Year	1 Estimated Amount to be Filed or Final Amount Filed with CMS	2 Non-Accrued Amounts for Impairment or Other Reasons	3 Amounts received from CMS	4 Asset Balance (Gross of Non-admissions) (1-2-3)	5 Non-admitted Amount	6 Net Admitted Asset (4-5)
a. 2014	\$	\$	\$	\$ 0	\$	\$ 0
b. 2015	\$	\$	\$	\$ 0	\$	\$ 0
c. 2016	\$	\$	\$	\$ 0	\$	\$ 0
d. Total (a+b+c)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

24E(5)d (Column 4) should equal 24E(3)c1 (Column 9)  
24E(5)d (Column 6) should equal 24E(2)c1

**25. Changes in Incurred Claims and Claim Adjustment Expenses**

- A.
- B.

**26. Intercompany Pooling Arrangements**

- A.
- B.
- C.
- D.
- E.
- F.
- G.

**27. Structured Settlements**

Health Entities should not complete this Note.

**28. Health Care Receivables**

**29. Participating Policies**

**30. Premium Deficiency Reserves**

1. Liability carried for premium deficiency reserves \$
2. Date of the most recent evaluation of this liability
3. Was anticipated investment income utilized in the calculation? Yes [ ] No [ ]

**31. Anticipated Salvage and Subrogation**

# GENERAL INTERROGATORIES

## PART 1 - COMMON INTERROGATORIES GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? ..... Yes [ ] No [X]
- 1.2 If yes, has the report been filed with the domiciliary state? ..... Yes [ ] No [ ]
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... Yes [ ] No [X]
- 2.2 If yes, date of change: .....
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? ..... Yes [X] No [ ]  
If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? ..... Yes [ ] No [X]
- 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 [X] No [ ]
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.....0001071739
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes [ ] No [X]  
If yes, complete and file the merger history data file with the NAIC.
- 4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? ..... Yes [ ] No [X] NA [ ]  
If yes, attach an explanation.
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. ....12/31/2017
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. ....12/31/2017
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). ....05/23/2019
- 6.4 By what department or departments?  
Illinois Department of Insurance.....
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? ..... Yes [ ] No [ ] NA [X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes [X] No [ ] NA [ ]
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? ..... Yes [ ] No [X]
- 7.2 If yes, give full information:  
.....
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?..... Yes [ ] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.  
.....
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms?..... Yes [ ] No [X]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

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

**GENERAL INTERROGATORIES**

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... Yes  No
- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
  - (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
  - (c) Compliance with applicable governmental laws, rules and regulations;
  - (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
  - (e) Accountability for adherence to the code.

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

- 9.2 Has the code of ethics for senior managers been amended? ..... Yes  No

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

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

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

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

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: ..... \$ .....0

13. Amount of real estate and mortgages held in short-term investments: ..... \$ .....0

- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? ..... Yes  No

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	\$ .....0
14.22 Preferred Stock .....	\$ .....0	\$ .....0
14.23 Common Stock .....	\$ .....0	\$ .....0
14.24 Short-Term Investments .....	\$ .....0	\$ .....0
14.25 Mortgage Loans on Real Estate .....	\$ .....0	\$ .....0
14.26 All Other .....	\$ .....0	\$ .....0
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 .....	\$ .....0	\$ .....0

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? ..... Yes  No

- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes  No  NA

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  No

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

1 Name of Custodian(s)	2 Custodian Address
US Bank.....	Portland, Oregon.....

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? .....

Yes  No

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

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

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

1 Name of Firm or Individual	2 Affiliation
BBH.....	U.....

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) manage more than 10% of the reporting entity’s invested assets?

Yes  No

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

Yes  No

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

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

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

Yes  No

18.2 If no, list exceptions:

.....

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

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

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

Yes  No

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

## GENERAL INTERROGATORIES

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:.....
- a. The shares were purchased prior to January 1, 2019.
  - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
  - c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
  - d. The fund only or predominantly holds bonds in its portfolio.
  - e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
  - f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?

Yes [ ] No [X]

**GENERAL INTERROGATORIES**  
**PART 2 - HEALTH**

- 1. Operating Percentages:
  - 1.1 A&H loss percent ..... 80.1 %
  - 1.2 A&H cost containment percent ..... 0.5 %
  - 1.3 A&H expense percent excluding cost containment expenses ..... 11.3 %
- 2.1 Do you act as a custodian for health savings accounts?..... Yes [ ] No [X]
- 2.2 If yes, please provide the amount of custodial funds held as of the reporting date..... \$ \_\_\_\_\_
- 2.3 Do you act as an administrator for health savings accounts?..... Yes [ ] No [X]
- 2.4 If yes, please provide the balance of the funds administered as of the reporting date..... \$ \_\_\_\_\_
- 3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?..... Yes [X] No [ ]
- 3.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?..... Yes [ ] No [X]



STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

**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 CHIP Title XXI	6 Federal Employees Health Benefits Program Premiums	7 Life & Annuity Premiums & Other Considerations	8 Property/Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts	
1. Alabama	AL	L								.0	
2. Alaska	AK	N								.0	
3. Arizona	AZ	N								.0	
4. Arkansas	AR	L	52,631,587							52,631,587	
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	L								.0	
14. Illinois	IL	L	64,922,530							64,922,530	
15. Indiana	IN	L								.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	L	105,346,065							105,346,065	
26. Missouri	MO	L								.0	
27. Montana	MT	L								.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	N								.0	
37. Oklahoma	OK	L								.0	
38. Oregon	OR	N								.0	
39. Pennsylvania	PA	N								.0	
40. Rhode Island	RI	N								.0	
41. South Carolina	SC	L	21,060,919							21,060,919	
42. South Dakota	SD	N								.0	
43. Tennessee	TN	L	46,790,999							46,790,999	
44. Texas	TX	N								.0	
45. Utah	UT	N								.0	
46. Vermont	VT	N								.0	
47. Virginia	VA	L								.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	.0
59. Subtotal	.XXX	.0	290,752,100	.0	.0	.0	.0	.0	.0	290,752,100	.0
60. Reporting entity contributions for Employee Benefit Plans	.XXX									.0	
61. Total (Direct Business)	XXX	0	290,752,100	0	0	0	0	0	0	290,752,100	0
<b>DETAILS OF WRITE-INS</b>											
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	.0
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX	0	0	0	0	0	0	0	0	0	0

(a) Active Status Counts

L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG .....12 R – Registered – Non-domiciled RRGs .....0  
 E – Eligible – Reporting entities eligible or approved to write surplus lines in the state .....0 Q – Qualified – Qualified or accredited reinsurer .....0  
 N – None of the above – Not allowed to write business in the state .....45

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

Centene Corporation	42-1406317	DE	
Bankers Reserve Life Insurance Company of Wisconsin	39-0993433	WI	71013
Health Plan Real Estate Holding, Inc (17%)	46-2860967	MO	
Peach State Health Plan, Inc	20-3174593	GA	12315
Health Plan Real Estate Holding, Inc (21%)	46-2860967	MO	
Iowa Total Care, Inc	46-4829006	IA	15713
Buckeye Community Health Plan, Inc	32-0045282	OH	11834
Health Plan Real Estate Holding, Inc (18%)	46-2860967	MO	
Absolute Total Care, Inc	20-5693998	SC	12959
Health Plan Real Estate Holding, Inc (1%)	46-2860967	MO	
Coordinated Care Corporation d/b/a Managed Health Services	39-1821211	IN	95831
Health Plan Real Estate Holding, Inc (15%)	46-2860967	MO	
Healthy Washington Holdings, Inc	46-5523218	DE	
Coordinated Care of Washington, Inc	46-2578279	WA	15352
Managed Health Services Insurance Corp	39-1678579	WI	96822
Health Plan Real Estate Holding, Inc (2%)	46-2860967	MO	
Hallmark Life Insurance Co	86-0819817	AZ	60078
Superior HealthPlan, Inc	74-2770542	TX	95647
Health Plan Real Estate Holding, Inc (21%)	46-2860967	MO	
Healthy Louisiana Holdings LLC	27-0916294	DE	
Louisiana Healthcare Connections, Inc	27-1287287	LA	13970
Magnolia Health Plan Inc	20-8570212	MS	13923
Sunshine Health Holding LLC	26-0557093	FL	
Sunshine State Health Plan, Inc	20-8937577	FL	13148
Kentucky Spirit Health Plan, Inc	45-1294925	KY	14100
Healthy Missouri Holding, Inc (95%)	45-5070230	MO	
Home State Health Plan, Inc	45-2798041	MO	14218
Health Plan Real Estate Holding, Inc (5%)	46-2860967	MO	
Sunflower State Health Plan, Inc	45-3276702	KS	14345
Granite State Health Plan, Inc	45-4792498	NH	14226
California Health and Wellness Plan	46-0907261	CA	
Michigan Complete Health, Inc.	30-0312489	MI	10769

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

Western Sky Community Care, Inc.	45-5583511	NM	16351
Tennessee Total Care, Inc.	26-1849394	TN	
SilverSummit Healthplan, Inc.	20-4761189	NV	16143
University Health Plans, Inc.	22-3292245	NJ	
Agate Resources, Inc.	20-0483299	OR	
Trillium Community Health Plan, Inc.	42-1694349	OR	12559
Nebraska Total Care, Inc.	47-5123293	NE	15902
Pennsylvania Health & Wellness, Inc.	47-5340613	PA	16041
Superior HealthPlan Community Solutions, Inc.	47-5664832	TX	15912
Sunshine Health Community Solutions, Inc.	47-5667095	FL	15927
Buckeye Health Plan Community Solutions, Inc.	47-5664342	OH	16112
Arkansas Health & Wellness Health Plan, Inc.	81-1282251	AR	16130
Arkansas Total Care Holding Company, LLC (49%)	38-4042368	DE	
Arkansas Total Care, Inc.	82-2649097	AR	16256
Oklahoma Complete Health Inc.	81-3121527	OK	16904
Bridgeway Health Solutions, LLC	20-4980875	DE	
Bridgeway Health Solutions of Arizona Inc.	20-4980818	AZ	16310
Celtic Group, Inc	36-2979209	DE	
Celtic Insurance Company	06-0641618	IL	80799
Ambetter of Magnolia Inc	35-2525384	MS	15762
Ambetter of Peach State Inc.	36-4802632	GA	15729
Novasys Health, Inc	27-2221367	DE	
CeltiCare Health Plan Holdings LLC	26-4278205	DE	
CeltiCare Health Plan of Massachusetts, Inc.	26-4818440	MA	13632
Centene Management Company LLC	39-1864073	WI	
CMC Real Estate Company, LLC	20-0057283	DE	
Centene Center LLC	26-4094682	DE	
Centene Center I, LLC	82-1816153	DE	
Centene Center II, LLC	47-5156015	DE	
7676 Management, LLC	85-1711857	MO	
7676 Forsyth, LLC	85-1724287	MO	
TRMEB, LLC		MO	
Illinois Health Practice Alliance, LLC (50%)	82-2761995	DE	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

Integrated Care Network of Florida, LLC (50%)	84-3023173	DE	
Lifeshare Management Group, LLC	46-2798132	NH	
Arkansas Total Care Holding Company, LLC (25%)	38-4042368	DE	
CCTX Holdings, LLC	20-2074217	DE	
Centene Company of Texas, LP (1%)	74-2810404	TX	
Centene Holdings, LLC	20-2074277	DE	
Centene Company of Texas, LP (99%)	74-2810404	TX	
MHS Travel & Charter, Inc	43-1795436	WI	
Health Care Enterprises, LLC	46-4855483	DE	
Integrated Mental Health Management, L.L.C.	74-2892993	TX	
Integrated Mental Health Services	74-2785494	TX	
Envolve Holdings, LLC	22-3889471	DE	
Cenpatico Behavioral Health, LLC	68-0461584	CA	
Cenpatico Behavioral Health of Arizona, LLC	20-1624120	AZ	
Cenpatico of Arizona Inc.	80-0879942	AZ	
Envolve, Inc.	37-1788565	DE	
Envolve PeopleCare, Inc.	06-1476380	DE	
LiveHealthier, Inc.	47-2516714	DE	
Envolve Benefits Options, Inc.	61-1846191	DE	
Envolve Vision Benefits, Inc.	20-4730341	DE	
Envolve Vision of Texas, Inc.	75-2592153	TX	95302
Envolve Vision, Inc	20-4773088	DE	
Envolve Vision IPA of New York, Inc.	83-2460878	NY	
Envolve Vision of Florida, Inc	65-0094759	FL	
Envolve Total Vision, Inc.	20-4861241	DE	
Envolve Optical, Inc.	82-2908582	DE	
Envolve Dental, Inc.	46-2783884	DE	
Envolve Dental of Florida, Inc.	81-2969330	FL	
Envolve Dental of Texas, Inc.	81-2796896	TX	16106
Envolve Dental IPA of New York, Inc.	83-1464482	NY	
Envolve Pharmacy Solutions, Inc.	77-0578529	DE	
LBB Industries, Inc	76-0511700	TX	
RX Direct, Inc	75-2612875	TX	
Envolve Pharmacy IPA, LLC	46-2307356	NY	
MeridianRx, LLC	27-1339224	MI	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

MeridianRx IPA, LLC		
MeridianRx of Indiana, LLC	83-3612209	MI
MHM Services, Inc.	82-5316510	DE
Centurion LLC	90-0766502	DE
Centurion of Arizona, LLC	81-4228054	AZ
Centurion of Vermont, LLC	47-1686283	VT
Centurion of Mississippi, LLC	47-2967381	MS
Centurion of Tennessee, LLC	30-0752651	TN
Centurion of Minnesota, LLC	46-2717814	MN
Centurion Correctional Healthcare of New Mexico, LLC	81-1161492	NM
Centurion of Florida, LLC	81-0687470	FL
Centurion of Maryland, LLC	81-4938030	MD
Centurion of Georgia, LLC	82-3128848	GA
Centurion Detention Health Services, LLC	82-4735175	DE
Centurion of New Hampshire, LLC	82-4823469	DE
Centurion of Pennsylvania, LLC	82-4823469	PA
Centurion of West Virginia, LLC	46-4839132	WV
Centurion of Kansas, LLC	84-3436283	KS
Centurion of Delaware, LLC	84-3767794	DE
Centurion of Wyoming, LLC	84-3857653	WY
Centurion of Missouri, LLC	46-4102135	MO
Centurion of Michigan, LLC	46-1041008	MI
Centurion of Idaho, LLC	85-4020081	ID
Centurion of Indiana, LLC		IN
Centurion of Maine, LLC	85-4143511	ME
Centurion Health of Indiana, LLC	85-4243085	IN
MHM Correctional Services, LLC	54-1856340	DE
MHM Services of California, LLC	51-0620904	CA
MHM Solutions, LLC	60-0002002	DE
Forensic Health Services, LLC	26-1877007	DE
MHM Health Professionals, LLC	46-1734817	DE
Specialty Therapeutic Care Holdings, LLC	27-3617766	DE
Specialty Therapeutic Care, LP (99.99%)	73-1698808	TX
Specialty Therapeutic Care, GP, LLC	73-1698807	TX
Specialty Therapeutic Care, LP (0.01%)	73-1698808	TX

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

AcariaHealth Solutions, Inc.	80-0856383	DE
AcariaHealth, Inc.	45-2780334	DE
AcariaHealth Pharmacy #14, Inc	27-1599047	CA
AcariaHealth Pharmacy #11, Inc	20-8192615	TX
AcariaHealth Pharmacy #12, Inc	27-2765424	NY
AcariaHealth Pharmacy #13, Inc	26-0226900	CA
AcariaHealth Pharmacy, Inc	13-4262384	CA
HomeScripts.com, LLC	27-3707698	MI
Foundation Care, LLC (80%)	20-0873587	MO
U.S. Medical Management Holdings, Inc	27-0275614	DE
U.S. Medical Management, LLC (20%)	38-3153946	DE
U.S. Medical Management, LLC (80%)	38-3153946	DE
RMED, LLC	31-1733889	FL
IAH of Florida, LLC	47-2138680	FL
Heritage Home Hospice, LLC	51-0581762	MI
Grace Hospice of Austin, LLC	20-2827613	MI
ComfortBrook Hospice, LLC	20-1530070	OH
Comfort Hospice of Texas, LLC	20-4996551	MI
Grace Hospice of San Antonio, LLC	20-2827526	MI
Grace Hospice of Grand Rapids, LLC	45-0679248	MI
Grace Hospice of Indiana, LLC	45-0634905	MI
Grace Hospice of Virginia, LLC	45-5080637	MI
Comfort Hospice of Missouri, LLC	45-5080567	MI
Grace Hospice of Wisconsin, LLC	46-1708834	MI
Grace Hospice of Illinois, LLC	81-5129923	IL
Seniorcorps Peninsula, LLC	26-4435532	VA
A N J, LLC	20-0927034	TX
R&C Healthcare, LLC	33-1179031	TX
Pinnacle Senior Care of Missouri, LLC	46-0861469	MI
Country Style Health Care, LLC	03-0556422	TX
Phoenix Home Health Care,	14-1878333	DE

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

15.5

LLC			
Traditional Home Health Services, LLC	75-2635025	TX	
Family Nurse Care, LLC	38-2751108	MI	
Family Nurse Care II, LLC	20-5108540	MI	
Family Nurse Care of Ohio, LLC	20-3920947	MI	
Pinnacle Senior Care of Wisconsin, LLC	46-4229858	WI	
Pinnacle Senior Care of Indiana, LLC	81-1565426	MI	
Pinnacle Home Care, LLC	76-0713516	TX	
North Florida Health Services, Inc	59-3519060	FL	
Pinnacle Sr. Care of Kalamazoo, LLC	47-1742728	MI	
Hospice DME Company, LLC	46-1734288	MI	
Rapid Respiratory Services, LLC	20-4364776	DE	
USMM Accountable Care Partners, LLC	46-5735993	DE	
Pinnacle Senior Care of Illinois, LLC	83-3534462	IL	
VPA, P.C.	38-3176990	MI	
IAH of Michigan, PLLC	47-2159305	MI	
IAH of Wisconsin, PLLC	47-2146160	MI	
VPA of Texas	20-2386997	MI	
IAH of Texas, PLLC	35-2519603	MI	
Advantechs X-Ray Imaging Services, L.L.C.	36-4539790	TX	
Health Net, LLC	47-5208076	DE	
Health Net of California, Inc.	95-4402957	CA	
Health Net Life Insurance Company	73-0654885	CA	66141
Health Net Life Reinsurance Company	98-0409907	CYM	
Managed Health Network, LLC	95-4117722	DE	
Managed Health Network	95-3817988	CA	
MHN Services, LLC	95-4146179	CA	
Health Net Federal Services, LLC	68-0214809	DE	
MHN Government Services LLC	42-1680916	DE	
Network Providers, LLC (10%)	88-0357895	DE	
Network Providers, LLC (90%)	88-0357895	DE	
Health Net Health Plan of Oregon, Inc.	93-1004034	OR	95800
Health Net Community Solutions, Inc.	54-2174068	CA	
Health Net of Arizona, Inc.	36-3097810	AZ	95206

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

**PART 1 - ORGANIZATIONAL CHART**

Health Net Community Solutions of Arizona, Inc.	81-1348826	AZ	15895
Health Net Access, Inc.	46-2616037	AZ	
MHS Consulting, International, Inc	20-8630006	DE	
Centene International Ventures, LLC	83-1047281	DE	
MHS European Holdings s.a.r.l.	27-2075447	LUX	
PRIMEROSALUD, S.L.	Foreign	ESP	
Torrejon Salud, S.A. (89.47%)	Foreign	ESP	
Ribera Salud, S.A. (90.1%)	Foreign	ESP	
Torrevieja Salud UTE (65%)	Foreign	ESP	
Ribera Salud II (96~%)	Foreign	ESP	
ERESCANNER (15%)	Foreign	ESP	
BR Salud UTE (45%)	Foreign	ESP	
Marina Salud (35%)	Foreign	ESP	
Villa Maria del Triuinfo Salud S.A. C. (5%)	Foreign	PER	
Callao Salud S.A.C. (5%)	Foreign	PER	
Infraestructuras y Servicios de Alzira S.L. (50%)	Foreign	ESP	
Elche-Crevillente Salud (100%)	Foreign	ESP	
B2B Salud, S.L.U.	Foreign	ESP	
B2B Gestion integral, S.L.	Foreign	ESP	
Ribera Lab, S.L.U.	Foreign	ESP	
Torrevieja Diagnóstics, S.L.U.	Foreign	ESP	
Centro Inmunológico De La Comunidad Valenciana, S.L.	Foreign	ESP	
Hospinet, S.L. (51%)	Foreign	ESP	
Servicios De Mantenimiento Prevencor, S.L.U. (80%)	Foreign	ESP	
Winning Security, S.L. (51%)	Foreign	ESP	
Ribera Salud proyectos S.L.	Foreign	ESP	
Ribera-Quilpro UTE	Foreign	ESP	
Ribera Salud Infraestructuras S.L.U.	Foreign	ESP	
Pro Diagnostic Group, a.s (66.43%)	Foreign	SVK	
Pro RTG (80%)	Foreign	SVK	
DR			
Magnet	Foreign	SVK	
Pro			
Magnet	Foreign	SVK	
Medicina			
NZ	Foreign	SVK	
MR	Foreign	SVK	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

Poprad		
CT Poprad	Foreign	SVK
MR Zilina	Foreign	SVK
Pro Magnet CZ	Foreign	SVK
OB Klinika, a.s. (10%)	Foreign	SVK
Progress Medical a.s.	Foreign	SVK
OB Klinika, a.s. (90%)	Foreign	SVK
OB Care, s.r.o	Foreign	SVK
Discare CZ, a.s.	Foreign	SVK
CT Presov s.r.o	Foreign	SVK
MR Centrum Melnik, s.r.o	Foreign	SVK
Hospital Povisa, S.A. (93.29%)	Foreign	ESP
Ribera Salud Tecnologias S.L.U.	Foreign	ESP
Torrevieja Salud S.L.U.	Foreign	ESP
Torrevieja Salud UTE (35%)	Foreign	ESP
Ribera Management, S.L.U.	Foreign	ESP
Ribera Healthcare,S.L.U.	Foreign	ESP
Ribera Diagnóstics, S.L.U.	Foreign	ESP
UR Salud UTE (49%)	Foreign	ESP
Secure Capital Solutions 2000, S.L.U	Foreign	ESP
Hospital Polusa, S.A. (78.4%)	Foreign	ESP
Clinica Santo Domingo De Lugo, S.L.	Foreign	ESP
MH Services International Holdings (UK) Limited	Foreign	GBR
MH Services International (UK) Limited	Foreign	GBR
AT Medics Holdings LLP (1%)	Foreign	PAK
Operose Health Limited	Foreign	GBR
AT Medics Holdings LLP (99%)	Foreign	GBR
AT Technology (Private) Limited (80%)	Foreign	GBR
At Medics Limited	Foreign	GBR
Primary Care Partners Limited	Foreign	GBR
AT Learning Limited	Foreign	GBR
AT Technology Services Limited	Foreign	GBR
AT Technology (Private) Limited (20%)	Foreign	PAK
Operose Health (Group) Limited	Foreign	GBR
The Practice Properties Limited	Foreign	GBR
Operose Health (Group) UK Limited	Foreign	GBR
The Practice Surgeries Limited	Foreign	GBR
Phoenix Primary Care Limited	Foreign	GBR

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

Phoenix Primary (South) Limited	Foreign	GBR
Circle Health Holdings Limited (40%)	Foreign	GBR
Circle Health 1 Limited	Foreign	GBR
Circle Health 2 Limited	Foreign	GBR
Circle Holdings Limited	Foreign	JEY
Circle International PLC	Foreign	GBR
Circle Health Limited	Foreign	GBR
Nations Healthcare Limited	Foreign	GBR
Circle Nottingham Limited	Foreign	GBR
Circle Rehabilitation Services (90%)	Foreign	GBR
Circle Hospital (Bath) Limited	Foreign	GBR
Circle Hospital (Reading) Limited	Foreign	GBR
Circle Clinical Services Limited	Foreign	GBR
Circle Birmingham Limited	Foreign	GBR
Circle Harmony Health Limited (50%)	Foreign	CHN
Shanghai Circle Harmony Hospital Management	Foreign	CHN
Circle Health 3 Limited	Foreign	GBR
Circle Health 4 Limited	Foreign	GBR
GHG Healthcare Holdings Limited	Foreign	GBR
General Healthcare Group Limited	Foreign	GBR
General Healthcare Holdings 2 Limited	Foreign	GBR
General Healthcare Holdings 3 Limited	Foreign	GBR
North West Cancer Clinic Limited (90%)	Foreign	GBR
GHG (DB) Pension Trustees	Foreign	GBR
GHG Mount Alvernia Hospital Limited	Foreign	GBR
Generale de Sante International Limited	Foreign	GBR
BMI Southend Private Hospital Limited (50%)	Foreign	GBR
BMI Imaging Clinic Limited (50%)	Foreign	GBR
Mount Alvernia PET CT Limited (73.5%)	Foreign	GBR
Meriden Hospital Advanced Imaging Centre Ltd. (50%)	Foreign	GBR
BMI Syon Clinic Limited (50%)	Foreign	GBR
GHG Intermediate Holdings Limited	Foreign	GBR
General Healthcare Holdings 4 Limited	Foreign	GBR
BMI Healthcare Limited	Foreign	GBR
3SH Limited (50%)	Foreign	GBR
BMI Hospital Decontamination Limited	Foreign	GBR
Three Shires Hospital LP (50%)	Foreign	GBR

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

**PART 1 - ORGANIZATIONAL CHART**

	The Pavilion Clinic Ltd (51%)	Foreign	GBR	
	GHG Leasing Limited	Foreign	GBR	
	South Cheshire SPV Limited	Foreign	GBR	
	Bishopswood SPV Limited	Foreign	GBR	
	Runnymede SPV Limited	Foreign	GBR	
	CEF Holding Company Limited	Foreign	MLT	
	Centene Europe Finance Company Limited	Foreign	MLT	
	Centene International Financing Company Limited	Foreign	MLT	
	Centene Health Plan Holdings, Inc.	82-1172163	DE	
	Ambetter of North Carolina, Inc.			
	Carolina Complete Health Holding Company Partnership (80%)	82-5032556	NC	16395
	Carolina Complete Health, Inc.	82-2699483	DE	
	New York Quality Healthcare Corporation	82-2699332	NC	16526
	Salus Administrative Services, Inc.	82-3380290	NY	
	Salus IPA, LLC	55-0878053	NY	
	Calibrate Acquisition Co	82-0802846	NY	
	Community Medical Holdings Corp	82-4670677	DE	
	Access Medical Acquisition, LLC	47-4179393	DE	
	Access Medical Group of North Miami Beach, LLC	46-3485489	DE	
	Access Medical Group of Miami, LLC	45-3191569	FL	
	Access Medical Group of Hialeah, LLC	45-3191719	FL	
	Access Medical Group of Westchester, LLC	45-3192283	FL	
	Access Medical Group of Opa-Locka, LLC	45-3199819	FL	
	Access Medical Group of Perrine, LLC	45-3505196	FL	
	Access Medical Group of Florida City, LLC	45-3192955	FL	
	Access Medical Group of Tampa, LLC	45-3192366	FL	
	Access Medical Group of Tampa II, LLC	82-1737078	FL	
	Access Medical Group of Tampa III, LLC	82-1750978	FL	
	Access Medical Group of Lakeland, LLC	82-1773315	FL	
	Interpreta Holdings, Inc. (80.1%)	84-2750188	FL	
	Interpreta, Inc.	82-4883921	DE	
	Patriots Holding Co	46-5517858	DE	
	RxAdvance Corporation (38.31%)	82-4581788	DE	
	Next Door Neighbors, LLC (60%)	32-2434596	DE	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

Next Door Neighbors, Inc.	83-2381790	DE	
Centene Venture Company Alabama Health Plan, Inc.	84-3707689	AL	16771
Centene Venture Company Illinois	83-2425735	IL	16505
Centene Venture Company Kansas	83-2409040	KS	16528
Centene Venture Company Florida	83-2434596	FL	16499
Centene Venture Company Indiana, Inc.	84-3679376	IN	16773
Centene Venture Company Tennessee	84-3724374	TN	16770
Centene Venture Insurance Company Texas	86-1543217	TX	
Centene Venture Company Michigan	83-2446307	MI	16613
HealthEC, LLC (12.82%)		DE	
Arch Personalized Medicine Initiative, LLC (50%)	83-4144116	MO	
Social Health Bridge, LLC	83-4205348	DE	
Social Health Bridge Trust	84-6403386	DE	
WellCare Health Plans, Inc.	83-4405939	DE	
WCG Health Management, Inc.	04-3669698	DE	
The WellCare Management Group, Inc.	14-1647239	NY	
WellCare of New York, Inc.	14-1676443	NY	95534
WellCare of Connecticut, Inc.	06-1405640	CT	95310
WellCare of Mississippi, Inc.	81-5442932	MS	16329
WellCare of Virginia, Inc.	82-0664467	VA	
WellCare of Oklahoma, Inc.	81-3299281	OK	16117
WellCare Health Insurance Company of Nevada, Inc.	84-3721013	NV	
WellCare Health Insurance of Southwest, Inc.	84-3739752	AZ	16692
WellCare of Florida, Inc.	59-2583622	FL	95081
WellCare of Georgia, Inc.	20-2103320	GA	10760
WellCare of Kansas, Inc.	45-3617189	KS	14404
WellCare of Texas, Inc.	20-8058761	TX	16964
WellCare of Ohio, Inc.	20-3562146	OH	12749
WellCare of South Carolina, Inc.	32-0062883	SC	11775
WellCare Health Plans of New Jersey, Inc.	20-8017319	NJ	13020
WellCare of Pennsylvania, Inc.	81-1631920	PA	
WellCare Health Plans of Massachusetts, Inc	84-3547689	MA	
WellCare Health Insurance Company of Oklahoma, Inc.	84-4449030	OK	16752

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

**PART 1 - ORGANIZATIONAL CHART**

WellCare Health Plans of Missouri, Inc.	84-3907795	MO	16753
WellCare Prescription Insurance, Inc.	20-2383134	AZ	10155
WellCare Health Insurance of Hawaii, Inc.	84-4664883	HI	
WellCare Health Plans of Rhode Island, Inc.	84-4627844	RI	16766
WellCare of Illinois, Inc.	84-4649985	IL	16765
WellCare of Arkansas, Inc.	83-2797833	AR	16531
WellCare Pharmacy Benefits Management, Inc.	20-4869374	DE	
Exactus Pharmacy Solutions, Inc.	20-8420512	DE	
Comprehensive Reinsurance, Ltd.	98-0448921	CYM	
WellCare Health Plans of California, Inc.	27-4293249	CA	
Rhythm Health Tennessee, Inc.	45-5154364	TN	16533
Comprehensive Health Management, Inc.	59-3547616	FL	
WellCare Health Insurance of New York, Inc.	11-3197523	NY	10884
Ohana Health Plan, Inc.	27-0386122	HI	
WellCare of Indiana, Inc.	83-2840051	IN	
America's 1st Choice California Holdings, LLC	45-3236788	FL	
WellCare of California, Inc.	20-5327501	CA	
Windsor Health Group, Inc.	62-1832645	TN	
WellCare Health Insurance of Tennessee, Inc.	83-2276159	TN	16532
WellCare of New Hampshire, Inc.	83-2914327	NH	16515
WellCare Health Plans of Vermont, Inc.	83-2255514	VT	16514
WellCare Health Insurance of Connecticut, Inc.	83-2126269	CT	16513
WellCare of Washington, Inc.	83-2069308	WA	16571
WellCare Health Plans of Kentucky, Inc.	47-0971481	KY	15510
WellCare of Alabama, Inc.	82-1301128	AL	16239
WellCare of Maine, Inc.	82-3114517	ME	16344
Harmony Health Systems Inc.	22-3391045	NJ	
Harmony Health Management, Inc.	36-4467676	NJ	
Harmony Health Plan, Inc.	36-4050495	IL	11229
Harmony Behavioral Health IPA, Inc.	20-3262322	NY	
WellCare Health Insurance Company of Kentucky, Inc.	36-6069295	KY	64467
WellCare Health Insurance of Arizona, Inc.	86-0269558	AZ	83445

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

**PART 1 - ORGANIZATIONAL CHART**

WellCare Health Insurance of North Carolina, Inc.	83-3493160	NC	16548
WellCare Health Insurance Company of Louisiana, Inc.	83-3333918	LA	16788
WellCare of Missouri Health Insurance Company, Inc.	83-3525830	MO	16512
WellCare Health Plans of Wisconsin, Inc.	83-3351254	WI	16569
Care 1st Health Plan of Arizona, Inc.	57-1165217	AZ	
Care1st Health Plan Administrative Services, Inc.	46-2680154	AZ	
One Care by Care1st Health Plans of Arizona, Inc.	06-1742685	AZ	
WellCare Health Insurance Company of Washington, Inc.	83-3166908	WA	16570
WellCare Health Insurance Company of Wisconsin, Inc.	83-3310218	WI	16568
WellCare of Puerto Rico, Inc.	66-0888149	PR	
WellCare of North Carolina, Inc.	82-5488080	NC	16547
WellCare Health Plans of Arizona, Inc.	82-3169616	AZ	16253
WellCare Health Insurance Company of America	82-4247084	AR	16343
WellCare National Health Insurance Company	82-5127096	TX	16342
WellCare Health Insurance Company of New Hampshire, Inc.	83-3091673	NH	16516
Wellcare Health Insurance Company of New Jersey, Inc.	84-4709471	NJ	16789
Meridian Management Company, LLC	26-4004494	MI	
Meridian Network Services, LLC		MI	
WellCare of Michigan Holding Company	26-4004578	MI	
Meridian Health Plan of Michigan, Inc.	38-3253977	MI	52563
Meridian Health Plan of Illinois, Inc.	20-3209671	IL	13189
Universal American Corp.	27-4683816	DE	
Universal American Holdings, LLC	45-1352914	DE	
Universal American Financial Services, Inc.	95-3800329	DE	
Premier Marketing Group, LLC	58-2633295	DE	
Penn Marketing America, LLC	95-3623226	DE	
Worlco Management Services, Inc.	23-1913528	NY	
UAM Agent Services Corp.	42-0989096	IA	
APS Parent, Inc.	45-4644722	DE	
American Progressive Life and Health Insurance Company of New York	13-1851754	NY	80624
Quincy Coverage Corporation	13-3491681	NY	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

**PART 1 - ORGANIZATIONAL CHART**

Heritage Health Systems, Inc.	62-1517194	TX	
SelectCare of Texas, Inc.	62-1819658	TX	10096
Heritage Health Systems of Texas, Inc.	76-0459857	TX	
Golden Triangle Physician Alliance	62-1694548	TX	
Heritage Physician Networks	76-0560730	TX	
SelectCare Health Plans, Inc.	74-3141949	TX	10768
HHS Texas Management, LP (99.1%)	76-0500963	TX	
HHS Texas Management, Inc.	76-0500964	TX	
HHS Texas Management, LP. (0.9%)	76-0500963	TX	
Collaborative Health Systems, LLC	90-0779287	NY	
Accountable Care Coalition of Georgia , LLC (51%)	45-5481108	GA	
Accountable Care Coalition of Chesapeake, LLC (51%)	81-2588974	MD	
Accountable Care Coalition of Mississippi, LLC (51%)	46-2881180	MS	
Accountable Care Coalition of North Texas, LLC (51%)	45-4552802	TX	
Accountable Care Coalition of Northeast Georgia, LLC(51%)	47-3894436	GA	
Accountable Care Coalition of Northwest Florida, LLC (51%)	46-4106526	FL	
Accountable Care Coalition of Southeast Physician Partners, LLC	47-3913308	SC	
Accountable Care Coaliton of Southeast Texas, Inc.	47-3842552	TX	
Accountable Care Colation of Southeast Wisconsin, LLC (51%)	45-4113610	WI	
Accountable Care Coalition of Texas, Inc.	45-2742298	TX	
AWC of Syracuse, Inc.	47-2346408	NY	
Chrysalis Medical Services, LLC (51%)	30-0803845	NJ	
Collaborative Health Systems of Maryland, LLC (50%)	81-3365375	MD	
Collaborative Health Systems of Virginia, LLC	81-3306594	VA	
Accountable Care Coalition of Maryland, LLC (51%)	45-4119736	MD	
Accountable Care Coalition of Maryland Primary Care, LLC (51%)	45-5449147	MD	
Essential Care Partners, LLC (51%)	45-4561546	TX	
Hudson Accountable Care, LLC (51%)	47-3923394	NY	
Maryland Collaborative Care, LLC (51%)	90-0855950	MD	
Mid-Atlantic Collaborative Care, LLC	81-2704355	MD	
Northern Maryland Collaborative Care, LLC (51%)	45-5626871	MD	
Accountable Care Coalition of Elite Providers VII, LLC	82-1246845	AZ	
Accountable Care Coalition of Community Health Centers, LLC (51%)	82-1681146	TX	
Accountable Care Coalition of Community Health Centers II, LLC	82-1669422	TX	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

**PART 1 - ORGANIZATIONAL CHART**

15.14

Accountable Care Coalition of Southeast Partners, LLC (51%)	82-1623920	GA	
Accountable Care Coalition of Elite Providers LLC	82-1558080	HI	
Accountable Care Coalition of Florida Partners, LLC	84-2217098	FL	
Maryland Collaborative Care Transformation Organization, Inc.	82-1280079	DE	
Accountable Care Coalition of New Jersey, Inc. (51%)	82-1263227	NJ	
Accountable Care Coalition of Quality Health, LLC	82-1604548	OR	
Accountable Care Coalition of Prime Health, LLC	82-1698885	OR	
Accountable Care Coalition of Northeast Partners, LLC	82-0727997	PA	
Accountable Care Coalition of Tennessee, LLC (51%)	82-1219279	TN	
Accountable Care Coalition Direct Contracting, LLC (51%)	84-2574901	FL	
Accountable Care Coalition of Elite Providers II, LLC	85-0822080	DE	
Accountable Care Coalition of Elite Providers, III, LLC	85-0829473	DE	
Accountable Care Coalition of Elite Providers IV, LLC	85-0847691	DE	
Accountable Care Coalition of Elite Providers V, LLC	85-0863292	DE	
Accountable Care Coalition of Elite Providers VI, LLC	85-0907849	DE	
Accountable Care Coalition of Quality Health II, LLC	85-0878405	DE	
Accountable Care Coalition of Quality Health III, LLC	85-0893657	DE	
Collaborative Health Systems IPA, LLC	85-1770215	FL	
QCA Healthplan, Inc.	71-0794605	AR	95448
Qualchoice Life and Health Insurance Company	71-0386640	AR	70998
HealthSmart Benefits Management, LLC	27-1300475	TX	
Parker LP, LLC	20-2387587	NV	
HealthSmart Preferred Care II, LP (99%)	75-2508316	TX	
HealthSmart Primary Care Clinics, LP (99%)	20-3394046	TX	
HealthSmart Care Management Solutions, LP (99%)	75-2960859	TX	
HealthSmart Information Systems, Inc.	75-2727437	TX	
HealthSmart Benefit Solutions, Inc.	36-4099199	IL	
HealthSmart Preferred Network II, Inc	06-1621470	DE	
HealthSmart Rx Solutions, Inc.	34-1635597	OH	
Mauli Ola Health and Wellness, Inc.		HI	
District Community Care Inc.	84-4119570	DC	16814
Centene Institute for Advanced Health Education, LLC	84-5160960	DE	
Centene Canada Corporation		CAN	
Centene Investments, LLC	85-3006977	DE	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

**PART 1 - ORGANIZATIONAL CHART**

Wellframe, Inc. (7.10%)		DE
Diameter Health, Inc. (16.65%)		DE
Vida Health, Inc. (1.97%)		DE
Prowl Holdings, LLC (96.116%)	85-3802075	DE
Panther Pass Co, LLC	83-3240368	PA
Panther Specialty Holding Co, LLC		PA
Pantherx Specialty, LLC	45-3620087	PA
Pantherx Access Services, LLC	37-1778465	PA
Babylon Holdings Limited (2.50%)		GBR
Hazel Health, Inc. (7.40%)		DE
Quartet Health, Inc. (9.50%)		De
Rubicon MD (5.84%)		DE
Apixio, Inc.	80-0508223	DE
HughesLeahyKarlovic, LLC (20%)	43-1106904	MO
Oklahoma Complete Health Holding Company, LLC	86-2318658	OK
RI Health & Wellness, Inc.	86-2694770	RI

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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		1071739	New York Stock Exchange	Centene Corporation	DE		Shareholders/Board of Directors	Shareholders/Board of Directors	100.0	Shareholders/Board of Directors	N	
01295	Centene Corporation	71013	39-0993433				Bankers Reserve Life Insurance Company of Wisconsin	WI	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc	MO	NIA	Insurance Company of Wisconsin	Ownership	17.0	Centene Corporation	Y	
01295	Centene Corporation	12315	20-3174593				Peach State Health Plan, Inc	GA	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc	MO	NIA	Peach State Health Plan, Inc	Ownership	21.0	Centene Corporation	Y	
01295	Centene Corporation	15713	46-4829006				Iowa Total Care, Inc	IA	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	11834	32-0045282				Buckeye Community Health Plan, Inc	OH	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc	MO	NIA	Buckeye Community Health Plan, Inc	Ownership	18.0	Centene Corporation	Y	
01295	Centene Corporation	12959	20-5693998				Absolute Total Care, Inc	SC	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc	MO	NIA	Absolute Total Care, Inc	Ownership	1.0	Centene Corporation	Y	
01295	Centene Corporation	95831	39-1821211				Coordinated Care Corporation d/b/a Managed Health Services	IN	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc	MO	NIA	Coordinated Care Corporation d/b/a Managed Health Services	Ownership	15.0	Centene Corporation	Y	
01295	Centene Corporation	00000	46-5523218				Healthy Washington Holdings, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	15352	46-2578279				Coordinated Care of Washington, Inc	WA	IA	Healthy Washington Holdings, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	96822	39-1678579				Managed Health Services Insurance Corp	WI	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc	MO	NIA	Managed Health Services Insurance Corp	Ownership	2.0	Centene Corporation	Y	
01295	Centene Corporation	60078	86-0819817				Hallmark Life Insurance Co	AZ	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	95647	74-2770542				Superior HealthPlan, Inc	TX	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc	MO	NIA	Superior HealthPlan, Inc	Ownership	21.0	Centene Corporation	Y	
01295	Centene Corporation	00000	27-0916294				Healthy Louisiana Holdings LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	13970	27-1287287				Louisiana Healthcare Connections, Inc	LA	IA	Healthy Louisiana Holdings LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	13923	20-8570212				Magnolia Health Plan Inc	MS	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	26-0557093				Sunshine Health Holding LLC	FL	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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	13148	20-8937577				Sunshine State Health Plan, Inc.	FL	IA	Sunshine Health Holding LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	14100	45-1294925				Kentucky Spirit Health Plan, Inc.	KY	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-5070230				Healthy Missouri Holding, Inc.	MO	NIA	Centene Corporation	Ownership	95.0	Centene Corporation	N	
01295	Centene Corporation	14218	45-2798041				Home State Health Plan, Inc.	MO	IA	Healthy Missouri Holding, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Home State Health Plan, Inc.	Ownership	5.0	Centene Corporation	Y	
01295	Centene Corporation	14345	45-3276702				Sunflower State Health Plan, Inc.	KS	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	14226	45-4792498				Granite State Health Plan, Inc.	NH	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-0907261				California Health and Wellness Plan	CA	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	10769	30-0312489				Michigan Complete Health, Inc.	MI	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16351	45-5583511				Western Sky Community Care, Inc.	NM	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	26-1849394				Tennessee Total Care, Inc.	TN	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16143	20-4761189				SilverSummit Healthplan, Inc.	NV	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	22-3292245				University Health Plans, Inc.	NJ	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-0483299				Agate Resources, Inc.	OR	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	12559	42-1694349				Trillium Community Health Plan, Inc.	OR	IA	Agate Resources, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	15902	47-5123293				Nebraska Total Care, Inc.	NE	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16041	47-5340613				Pennsylvania Health & Wellness, Inc.	PA	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	15912	47-5664832				Superior HealthPlan Community Solutions, Inc.	TX	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	15927	47-5667095				Sunshine Health Community Solutions, Inc.	FL	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16112	47-5664342				Buckeye Health Plan Community Solutions, Inc.	OH	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16130	81-1282251				Arkansas Health & Wellness Health Plan, Inc.	AR	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	38-4042368				Arkansas Total Care Holding Company, LLC	DE	NIA	Arkansas Health & Wellness Health Plan, Inc.	Ownership	49.0	Centene Corporation	N	
01295	Centene Corporation	16256	82-2649097				Arkansas Total Care, Inc.	AR	IA	Arkansas Total Care Holding Company, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16904	81-3121527				Oklahoma Complete Health Inc.	OK	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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	20-4980875				Bridgeway Health Solutions, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16310	20-4980818				Bridgeway Health Solutions of Arizona Inc	AZ	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	36-2979209				Celtic Group, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	80799	06-0641618				Celtic Insurance Company	IL	IA	Celtic Group, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	15762	35-2525384				Ambetter of Magnolia Inc	MS	IA	Celtic Insurance Company	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	15729	36-4802632				Ambetter of Peach State Inc	GA	IA	Celtic Insurance Company	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	27-2221367				Novasys Health, Inc	DE	NIA	Celtic Group, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	26-4278205				CeltiCare Health Plan Holdings LLC	DE	NIA	Celtic Group, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	13632	26-4818440				CeltiCare Health Plan of Massachusetts, Inc	MA	IA	CeltiCare Health Plan Holdings LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	39-1864073				Centene Management Company LLC	WI	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-0057283				CMC Real Estate Company, LLC	DE	NIA	Centene Management Company LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	26-4094682				Centene Center LLC	DE	NIA	CMC Real Estate Company, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-1816153				Centene Center I, LLC	DE	NIA	CMC Real Estate Company, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	47-5156015				Centene Center II, LLC	DE	NIA	CMC Real Estate Company, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	85-1711857				7676 Management, LLC	MO	NIA	CMC Real Estate Company, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	85-1724287				7676 Forsyth, LLC	MO	NIA	7676 Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					TRMEB, LLC	MO	NIA	CMC Real Estate Company, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-2761995				Illinois Health Practice Alliance, LLC	DE	NIA	Centene Management Company LLC	Ownership	50.0	Centene Corporation	N	
01295	Centene Corporation	00000	84-3023173				Integrated Care Network of Florida, LLC	DE	NIA	Centene Management Company LLC	Ownership	50.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-2798132				Lifeshare Management Group, LLC	NH	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	38-4042368				Arkansas Total Care Holding Company, LLC	DE	NIA	Lifeshare Management Group, LLC	Ownership	25.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-2074217				CCTX Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	74-2810404				Centene Company of Texas, LP	TX	NIA	CCTX Holdings, LLC	Ownership	1.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-2074277				Centene Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	

16.2

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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	74-2810404				Centene Company of Texas, LP	TX	NIA	Centene Holdings, LLC	Ownership	99.0	Centene Corporation	N	
01295	Centene Corporation	00000	43-1795436				MHS Travel & Charter, Inc.	WI	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-4855483				Health Care Enterprises, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	74-2892993				Integrated Mental Health Management, L.L.C.	TX	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	74-2785494				Integrated Mental Health Services	TX	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	22-3889471				Involve Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	68-0461584				Cenpatico Behavioral Health, LLC	CA	NIA	Involve Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-1624120				Cenpatico Behavioral Health of Arizona, LLC	AZ	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	80-0879942				Cenpatico of Arizona Inc.	AZ	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	37-1788565				Involve, Inc.	DE	NIA	Involve Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	06-1476380				Involve PeopleCare, Inc.	DE	NIA	Involve Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	47-2516714				LiveHealthier, Inc.	DE	NIA	Involve PeopleCare, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	61-1846191				Involve Benefits Options, Inc.	DE	NIA	Involve Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-4730341				Involve Vision Benefits, Inc.	DE	NIA	Involve Benefits Options, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	95302	75-2592153				Involve Vision of Texas, Inc.	TX	IA	Involve Vision Benefits, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-4773088				Involve Vision, Inc.	DE	NIA	Involve Vision Benefits, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	83-2460878				Involve Vision IPA of New York, Inc.	NY	NIA	Involve Vision Benefits, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	65-0094759				Involve Vision of Florida, Inc.	FL	NIA	Involve Vision Benefits, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-4861241				Involve Total Vision, Inc.	DE	NIA	Involve Vision Benefits, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-2908582				Involve Optical, Inc.	DE	NIA	Involve Vision Benefits, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-2783884				Involve Dental, Inc.	DE	NIA	Involve Benefits Options, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	81-2969330				Involve Dental of Florida, Inc.	FL	NIA	Involve Dental, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16106	81-2796896				Involve Dental of Texas, Inc.	TX	IA	Involve Dental, Inc.	Ownership	100.0	Centene Corporation	N	

16.3

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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	83-1464482				Envolve Dental IPA of New York, Inc.	NY	NIA	Envolve Dental, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	77-0578529				Envolve Pharmacy Solutions, Inc.	DE	NIA	Envolve Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	76-0511700				LBB Industries, Inc.	TX	NIA	Envolve Pharmacy Solutions, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	75-2612875				RX Direct, Inc.	TX	NIA	Envolve Pharmacy Solutions, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-2307356				Envolve Pharmacy IPA, LLC	NY	NIA	Envolve Pharmacy Solutions, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	27-1339224				MeridianRx, LLC	MI	NIA	Envolve Pharmacy Solutions, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					MeridianRx IPA, LLC	MI	NIA	MeridianRx, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	83-3612209				MeridianRx of Indiana, LLC	MI	NIA	MeridianRx, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-5316510				MHM Services, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	90-0766502				Centurion LLC	DE	NIA	MHM Services, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	81-4228054				Centurion of Arizona, LLC	AZ	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	47-1686283				Centurion of Vermont, LLC	VT	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	47-2967381				Centurion of Mississippi, LLC	MS	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	30-0752651				Centurion of Tennessee, LLC	TN	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-2717814				Centurion of Minnesota, LLC	MN	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	81-1161492				Centurion Correctional Healthcare of New Mexico, LLC	NM	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	81-0687470				Centurion of Florida, LLC	FL	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	81-4938030				Centurion of Maryland, LLC	MD	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-3128848				Centurion of Georgia, LLC	GA	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-4735175				Centurion Detention Health Services, LLC	DE	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-4823469				Centurion of New Hampshire, LLC	DE	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-4823469				Centurion of Pennsylvania, LLC	PA	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-4839132				Centurion of West Virginia, LLC	WV	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	84-3436283				Centurion of Kansas, LLC	KS	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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	84-3767794				Centurion of Delaware, LLC	DE	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	84-3857653				Centurion of Wyoming, LLC	WY	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-4102135				Centurion of Missouri, LLC	MO	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-1041008				Centurion of Michigan, LLC	MI	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	85-4020081				Centurion of Idaho, LLC	ID	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Centurion of Indiana, LLC	IN	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	85-4143511				Centurion of Maine, LLC	ME	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	85-4243085				Centurion Health of Indiana, LLC	IN	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	54-1856340				MHM Correctional Services, LLC	DE	NIA	MHM Services, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	51-0620904				MHM Services of California, LLC	CA	NIA	MHM Services, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	60-0002002				MHM Solutions, LLC	DE	NIA	MHM Services, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	26-1877007				Forensic Health Services, LLC	DE	NIA	MHM Services, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-1734817				MHM Health Professionals, LLC	DE	NIA	MHM Services, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	27-3617766				Specialty Therapeutic Care Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	73-1698808				Specialty Therapeutic Care, LP	TX	NIA	Specialty Therapeutic Care Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	73-1698807				Specialty Therapeutic Care, GP, LLC	TX	NIA	Specialty Therapeutic Care Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	73-1698808				Specialty Therapeutic Care, LP	TX	NIA	Specialty Therapeutic Care, GP, LLC	Ownership	0.0	Centene Corporation	N	
01295	Centene Corporation	00000	80-0856383				AcariaHealth Solutions, Inc	DE	NIA	Specialty Therapeutic Care Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-2780334				AcariaHealth, Inc	DE	NIA	Specialty Therapeutic Care Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	27-1599047				AcariaHealth Pharmacy #14, Inc	CA	NIA	AcariaHealth, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-8192615				AcariaHealth Pharmacy #11, Inc	TX	NIA	AcariaHealth, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	27-2765424				AcariaHealth Pharmacy #12, Inc	NY	NIA	AcariaHealth, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	26-0226900				AcariaHealth Pharmacy #13, Inc	CA	NIA	AcariaHealth, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	13-4262384				AcariaHealth Pharmacy, Inc	CA	NIA	AcariaHealth, Inc	Ownership	100.0	Centene Corporation	N	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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	27-3707698				HomeScripts.com, LLC	MI	NIA	AcariaHealth, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-0873587				Foundation Care, LLC	MO	NIA	AcariaHealth, Inc.	Ownership	80.0	Centene Corporation	N	
01295	Centene Corporation	00000	27-0275614				U.S. Medical Management Holdings, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	38-3153946				U.S. Medical Management, LLC	DE	NIA	U.S. Medical Management Holdings, Inc.	Ownership	20.0	Centene Corporation	N	
01295	Centene Corporation	00000	38-3153946				U.S. Medical Management, LLC	DE	NIA	Centene Corporation	Ownership	80.0	Centene Corporation	N	
01295	Centene Corporation	00000	31-1733889				RMED, LLC	FL	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	47-2138680				IAH of Florida, LLC	FL	NIA	RMED, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	51-0581762				Heritage Home Hospice, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-2827613				Grace Hospice of Austin, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-1530070				ComfortBrook Hospice, LLC	OH	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-4996551				Comfort Hospice of Texas, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-2827526				Grace Hospice of San Antonio, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-0679248				Grace Hospice of Grand Rapids, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-0634905				Grace Hospice of Indiana, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-5080637				Grace Hospice of Virginia, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-5080567				Comfort Hospice of Missouri, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-1708834				Grace Hospice of Wisconsin, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	81-5129923				Grace Hospice of Illinois, LLC	IL	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	26-4435532				Seniorcorps Peninsula, LLC	VA	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-0927034				A N J, LLC	TX	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	33-1179031				R&C Healthcare, LLC	TX	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-0861469				Pinnacle Senior Care of Missouri, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	03-0556422				Country Style Health Care, LLC	TX	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	14-1878333				Phoenix Home Health Care, LLC	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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01295	Centene Corporation	00000	75-2635025				Traditional Home Health Services, LLC	TX	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	38-2751108				Family Nurse Care, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-5108540				Family Nurse Care II, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-3920947				Family Nurse Care of Ohio, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-4229858				Pinnacle Senior Care of Wisconsin, LLC	WI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	81-1565426				Pinnacle Senior Care of Indiana, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	76-0713516				Pinnacle Home Care, LLC	TX	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	59-3519060				North Florida Health Services, Inc	FL	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	47-1742728				Pinnacle Sr. Care of Kalamazoo, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-1734288				Hospice DME Company, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-4364776				Rapid Respiratory Services, LLC	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-5735993				USMM Accountable Care Partners, LLC	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	83-3534462				Pinnacle Senior Care of Illinois, LLC	IL	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	38-3176990				VPA, P.C	MI	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	47-2159305				IAH of Michigan, PLLC	MI	NIA	VPA, P.C	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	47-2146160				IAH of Wisconsin, PLLC	MI	NIA	VPA, P.C	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-2386997				VPA of Texas	MI	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	35-2519603				IAH of Texas, PLLC	MI	NIA	VPA of Texas	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	36-4539790				Advantechs X-Ray Imaging Services, L.L.C	TX	NIA	VPA of Texas	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	47-5208076				Health Net, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	95-4402957				Health Net of California, Inc	CA	NIA	Health Net, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	66141	73-0654885				Health Net Life Insurance Company	CA	IA	Health Net of California, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	98-0409907				Health Net Life Reinsurance Company	CYM	NIA	Health Net of California, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	95-4117722				Managed Health Network, LLC	DE	NIA	Health Net, LLC	Ownership	100.0	Centene Corporation	N	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

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01295	Centene Corporation	00000	95-3817988				Managed Health Network	CA	NIA	Managed Health Network, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	95-4146179				MHN Services, LLC	CA	NIA	Managed Health Network, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	68-0214809				Health Net Federal Services, LLC	DE	NIA	Health Net, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	42-1680916				MHN Government Services LLC	DE	NIA	Health Net Federal Services, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	88-0357895				Network Providers, LLC	DE	NIA	MHN Government Services LLC	Ownership	10.0	Centene Corporation	N	
01295	Centene Corporation	00000	88-0357895				Network Providers, LLC	DE	NIA	MHN Government Services LLC	Ownership	90.0	Centene Corporation	N	
01295	Centene Corporation	95800	93-1004034				Health Net Health Plan of Oregon, Inc	OR	IA	Health Net, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	54-2174068				Health Net Community Solutions, Inc	CA	NIA	Health Net, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	95206	36-3097810				Health Net of Arizona, Inc	AZ	IA	Health Net, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	15895	81-1348826				Health Net Community Solutions of Arizona, Inc	AZ	IA	Health Net, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-2616037				Health Net Access, Inc	AZ	NIA	Health Net, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-8630006				MHS Consulting, International, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	83-1047281				Centene International Ventures, LLC	DE	NIA	MHS Consulting, International, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	27-2075447				MHS European Holdings s.a.r.l	LUX	NIA	MHS Consulting, International, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					PRIMEROSALUD, S.L	ESP	NIA	MHS Consulting, International, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Torrejon Salud, S.A	ESP	NIA	PRIMEROSALUD, S.L	Ownership	89.5	Centene Corporation	N	
01295	Centene Corporation	00000					Ribera Salud, S.A	ESP	NIA	PRIMEROSALUD, S.L	Ownership	90.1	Centene Corporation	N	
01295	Centene Corporation	00000					Torre vieja Salud UTE	ESP	NIA	Ribera Salud, S.A	Ownership	65.0	Centene Corporation	N	
01295	Centene Corporation	00000					Ribera Salud II	ESP	NIA	Ribera Salud, S.A	Ownership	96.0	Centene Corporation	N	
01295	Centene Corporation	00000					ERESCANNER	ESP	NIA	Ribera Salud, S.A	Ownership	15.0	Centene Corporation	N	
01295	Centene Corporation	00000					BR Salud UTE	ESP	NIA	Ribera Salud, S.A	Ownership	45.0	Centene Corporation	N	
01295	Centene Corporation	00000					Marina Salud	ESP	NIA	Ribera Salud, S.A	Ownership	35.0	Centene Corporation	N	
01295	Centene Corporation	00000					Villa Maria del Triunfo Salud S.A. C	PER	NIA	Ribera Salud, S.A	Ownership	5.0	Centene Corporation	N	
01295	Centene Corporation	00000					Callao Salud S.A.C	PER	NIA	Ribera Salud, S.A	Ownership	5.0	Centene Corporation	N	

16.8

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

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01295	Centene Corporation	00000					Infraestructuras y Servicios de Alzira S.L	ESP	NIA	Ribera Salud, S.A	Ownership	50.0	Centene Corporation	N	
01295	Centene Corporation	00000					Elche-Crevillente Salud	ESP	NIA	Ribera Salud, S.A	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					B2B Salud, S.L.U	ESP	NIA	Ribera Salud, S.A	Ownership	2.0	Centene Corporation	N	
01295	Centene Corporation	00000					B2B Gest ion integral, S.L	ESP	NIA	B2B Salud, S.L.U	Ownership	2.0	Centene Corporation	N	
01295	Centene Corporation	00000					Ribera Lab, S.L.U	ESP	NIA	B2B Salud, S.L.U	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Torrevieja Diagnostics, S.L.U	ESP	NIA	Ribera Lab, S.L.U	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Centro Inmunolgico De La Comunidad Valenciana, S.L	ESP	NIA	Ribera Lab, S.L.U	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Hospinet, S.L	ESP	NIA	B2B Salud, S.L.U	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000					Servicios De Mantenimiento Prevencor, S.L.U	ESP	NIA	B2B Salud, S.L.U	Ownership	80.0	Centene Corporation	N	
01295	Centene Corporation	00000					Winning Security, S.L	ESP	NIA	B2B Salud, S.L.U	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000					Ribera Salud proyectos S.L	ESP	NIA	Ribera Salud, S.A	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Ribera-Quilpro UTE	ESP	NIA	Ribera Salud, S.A	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Ribera Salud Infraestructuras S.L.U	ESP	NIA	Ribera Salud, S.A	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Pro Diagnostic Group, a.s	SVK	NIA	Ribera Salud Infraestructuras S.L.U	Ownership	66.4	Centene Corporation	N	
01295	Centene Corporation	00000					Pro RTG	SVK	NIA	Pro Diagnostic Group, a.s	Ownership	80.0	Centene Corporation	N	
01295	Centene Corporation	00000					DR Magnet	SVK	NIA	Pro Diagnostic Group, a.s	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Pro Magnet	SVK	NIA	Pro Diagnostic Group, a.s	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Medicina NZ	SVK	NIA	Pro Diagnostic Group, a.s	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					MR Poprad	SVK	NIA	Pro Diagnostic Group, a.s	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					CT Poprad	SVK	NIA	MR Poprad	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					MR Zilina	SVK	NIA	Pro Diagnostic Group, a.s	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Pro Magnet CZ	SVK	NIA	Pro Diagnostic Group, a.s	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					OB Klinika, a.s	SVK	NIA	Pro Magnet CZ	Ownership	10.0	Centene Corporation	N	
01295	Centene Corporation	00000					Progress Medical a.s	SVK	NIA	Pro Magnet CZ	Ownership	100.0	Centene Corporation	N	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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					OB Klinika, a.s	SVK	NIA	Progress Medical a.s	Ownership	90.0	Centene Corporation	N	
01295	Centene Corporation	00000					OB Care, s.r.o	SVK	NIA	Progress Medical a.s	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Discare CZ, a.s	SVK	NIA	Pro Diagnostic Group, a.s	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					CT Presov s.r.o	SVK	NIA	Pro Diagnostic Group, a.s	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					MR Centrum Melnik, s.r.o	SVK	NIA	Pro Diagnostic Group, a.s	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Hospital Povisa, S.A	ESP	NIA	Ribera Salud, S.A	Ownership	93.3	Centene Corporation	N	
01295	Centene Corporation	00000					Ribera Salud Tecnologias S.L.U	ESP	NIA	Ribera Salud, S.A	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Torrevieja Salud S.L.U	ESP	NIA	Ribera Salud, S.A	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Torrevieja Salud UTE	ESP	NIA	Torrevieja Salud S.L.U	Ownership	35.0	Centene Corporation	N	
01295	Centene Corporation	00000					Ribera Management, S.L.U	ESP	NIA	Ribera Salud, S.A	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Ribera Healthcare, S.L.U	ESP	NIA	Ribera Salud, S.A	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Ribera Diagnostics, S.L.U	ESP	NIA	Ribera Salud, S.A	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					UR Salud UTE	ESP	NIA	Ribera Salud, S.A	Ownership	49.0	Centene Corporation	N	
01295	Centene Corporation	00000					Secure Capital Solutions 2000, S.L.U	ESP	NIA	Ribera Salud, S.A	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Hospital Polusa, S.A	ESP	NIA	Secure Capital Solutions 2000, S.L.U	Ownership	78.4	Centene Corporation	N	
01295	Centene Corporation	00000					Clinica Santo Domingo De Lugo, S.L	ESP	NIA	Ribera Salud, S.A	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					MH Services International Holdings (UK) Limited	GBR	NIA	MHS Consulting, International, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					MH Services International (UK) Limited	GBR	NIA	MH Services International Holdings (UK) Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					AT Medics Holdings LLP	PAK	NIA	MH Services International (UK) Limited	Ownership	1.0	Centene Corporation	N	
01295	Centene Corporation	00000					Operose Health Limited	GBR	NIA	MH Services International (UK) Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					AT Medics Holdings LLP	GBR	NIA	Operose Health Limited	Ownership	99.0	Centene Corporation	N	
01295	Centene Corporation	00000					AT Technology (Private) Limited	GBR	NIA	AT Medics Holdings LLP	Ownership	80.0	Centene Corporation	N	
01295	Centene Corporation	00000					At Medics Limited	GBR	NIA	AT Medics Holdings LLP	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Primary Care Partners Limited	GBR	NIA	AT Medics Holdings LLP	Ownership	100.0	Centene Corporation	N	

16.10

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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					AT Learning Limited	GBR	NIA	AT Medics Holdings LLP	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					AT Technology Services Limited	GBR	NIA	AT Medics Holdings LLP	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					AT Technology (Private) Limited	PAK	NIA	AT Technology Services Limited	Ownership	20.0	Centene Corporation	N	
01295	Centene Corporation	00000					Operose Health (Group) Limited	GBR	NIA	MH Services International (UK) Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					The Practice Properties Limited	GBR	NIA	Operose Health (Group) Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Operose Health (Group) UK Limited	GBR	NIA	Operose Health (Group) Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					The Practice Surgeries Limited	GBR	NIA	Operose Health (Group) Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Phoenix Primary Care Limited	GBR	NIA	The Practice Surgeries Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Phoenix Primary (South) Limited	GBR	NIA	The Practice Surgeries Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Circle Health Holdings Limited	GBR	NIA	MH Services International (UK) Limited	Ownership	40.0	Centene Corporation	N	
01295	Centene Corporation	00000					Circle Health 1 Limited	GBR	NIA	Circle Health Holdings Limited	Ownership	1.0	Centene Corporation	N	
01295	Centene Corporation	00000					Circle Health 2 Limited	GBR	NIA	Circle Health 1 Limited	Ownership	2.0	Centene Corporation	N	
01295	Centene Corporation	00000					Circle Holdings Limited	JEY	NIA	Circle Health 2 Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Circle International PLC	GBR	NIA	Circle Holdings Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Circle Health Limited	GBR	NIA	Circle International PLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Nations Healthcare Limited	GBR	NIA	Circle Health Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Circle Nottingham Limited	GBR	NIA	Circle Health Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Circle Rehabilitation Services	GBR	NIA	Circle Health Limited	Ownership	90.0	Centene Corporation	N	
01295	Centene Corporation	00000					Circle Hospital (Bath) Limited	GBR	NIA	Circle Health Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Circle Hospital (Reading) Limited	GBR	NIA	Circle Health Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Circle Clinical Services Limited	GBR	NIA	Circle Health Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Circle Birmingham Limited	GBR	NIA	Circle Health Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Circle Harmony Health Limited	CHN	NIA	Circle Health Limited	Ownership	50.0	Centene Corporation	N	
01295	Centene Corporation	00000					Shanghai Circle Harmony Hospital Management	CHN	NIA	Circle Harmony Health Limited	Ownership	100.0	Centene Corporation	N	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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					Circle Health 3 Limited	GBR	NIA	Circle Health 2 Limited	Ownership	3.0	Centene Corporation	N	
01295	Centene Corporation	00000					Circle Health 4 Limited	GBR	NIA	Circle Health 3 Limited	Ownership	4.0	Centene Corporation	N	
01295	Centene Corporation	00000					GHG Healthcare Holdings Limited	GBR	NIA	Circle Health 4 Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					General Healthcare Group Limited	GBR	NIA	GHG Healthcare Holdings Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					General Healthcare Holdings 2 Limited	GBR	NIA	General Healthcare Group Limited	Ownership	2.0	Centene Corporation	N	
01295	Centene Corporation	00000					General Healthcare Holdings 3 Limited	GBR	NIA	General Healthcare Holdings 2 Limited	Ownership	3.0	Centene Corporation	N	
01295	Centene Corporation	00000					North West Cancer Clinic Limited	GBR	NIA	General Healthcare Holdings 3 Limited	Ownership	90.0	Centene Corporation	N	
01295	Centene Corporation	00000					GHG (DB) Pension Trustees	GBR	NIA	General Healthcare Holdings 3 Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					GHG Mount Alvernia Hospital Limited	GBR	NIA	General Healthcare Holdings 3 Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Generale de Sante International Limited	GBR	NIA	General Healthcare Holdings 3 Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					BMI Southend Private Hospital Limited	GBR	NIA	General Healthcare Holdings 3 Limited	Ownership	50.0	Centene Corporation	N	
01295	Centene Corporation	00000					BMI Imaging Clinic Limited	GBR	NIA	General Healthcare Holdings 3 Limited	Ownership	50.0	Centene Corporation	N	
01295	Centene Corporation	00000					Mount Alvernia PET CT Limited	GBR	NIA	BMI Imaging Clinic Limited	Ownership	73.5	Centene Corporation	N	
01295	Centene Corporation	00000					Meriden Hospital Advanced Imaging Centre Ltd	GBR	NIA	General Healthcare Holdings 3 Limited	Ownership	50.0	Centene Corporation	N	
01295	Centene Corporation	00000					BMI Syon Clinic Limited	GBR	NIA	General Healthcare Holdings 3 Limited	Ownership	50.0	Centene Corporation	N	
01295	Centene Corporation	00000					GHG Intermediate Holdings Limited	GBR	NIA	General Healthcare Holdings 2 Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					General Healthcare Holdings 4 Limited	GBR	NIA	GHG Intermediate Holdings Limited	Ownership	4.0	Centene Corporation	N	
01295	Centene Corporation	00000					BMI Healthcare Limited	GBR	NIA	GHG Intermediate Holdings Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					3SH Limited	GBR	NIA	BMI Healthcare Limited	Ownership	50.0	Centene Corporation	N	
01295	Centene Corporation	00000					BMI Hospital Decontamination Limited	GBR	NIA	BMI Healthcare Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Three Shires Hospital LP	GBR	NIA	BMI Healthcare Limited	Ownership	50.0	Centene Corporation	N	
01295	Centene Corporation	00000					The Pavilion Clinic Ltd	GBR	NIA	Three Shires Hospital LP	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000					GHG Leasing Limited	GBR	NIA	GHG Intermediate Holdings Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					South Cheshire SPV Limited	GBR	NIA	GHG Intermediate Holdings Limited	Ownership	100.0	Centene Corporation	N	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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					Bishopswood SPV Limited	GBR	NIA	GHG Intermediate Holdings Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Runnymede SPV Limited	GBR	NIA	GHG Intermediate Holdings Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					CEF Holding Company Limited	MLT	NIA	MHS Consulting, International, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Centene Europe Finance Company Limited	MLT	NIA	CEF Holding Company Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Centene International Financing Company Limited	MLT	NIA	CEF Holding Company Limited	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-1172163				Centene Health Plan Holdings, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16395	82-5032556				Ambetter of North Carolina, Inc	NC	IA	Centene Health Plan Holdings, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-2699483				Carolina Complete Health Holding Company Partnership	DE	NIA	Centene Health Plan Holdings, Inc	Ownership	80.0	Centene Corporation	N	
01295	Centene Corporation	16526	82-2699332				Carolina Complete Health, Inc	NC	IA	Carolina Complete Health Holding Company Partnership	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-3380290				New York Quality Healthcare Corporation f/k/a Centene Acquisition Corporation	NY	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	55-0878053				Salus Administrative Services, Inc	NY	NIA	New York Quality Healthcare Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-0802846				Salus IPA, LLC	NY	NIA	Salus Administrative Services, Inc	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-4670677				Calibrate Acquisition Co	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	47-4179393				Community Medical Holdings Corp	DE	NIA	Calibrate Acquisition Co	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-3485489				Access Medical Acquisition, LLC	DE	NIA	Community Medical Holdings Corp	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-3191569				Access Medical Group of North Miami Beach, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-3191719				Access Medical Group of Miami, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-3192283				Access Medical Group of Hialeah, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-3199819				Access Medical Group of Westchester, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-3505196				Access Medical Group of Opa-Locka, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-3192955				Access Medical Group of Perrine, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-3192366				Access Medical Group of Florida City, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-1737078				Access Medical Group of Tampa, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	N	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

**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	82-1750978				Access Medical Group of Tampa II, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-1773315				Access Medical Group of Tampa III, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	84-2750188				Access Medical Group of Lakeland, LLC	FL	NIA	Access Medical Acquisition, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-4883921				Interpreta Holdings, Inc.	DE	NIA	Centene Corporation	Ownership	80.1	Centene Corporation	N	
01295	Centene Corporation	00000	46-5517858				Interpreta, Inc.	DE	NIA	Interpreta Holdings, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-4581788				Patriots Holding Co.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					RxAdvance Corporation	DE	NIA	Patriots Holding Co.	Ownership	38.3	Centene Corporation	N	
01295	Centene Corporation	00000	32-2434596				Next Door Neighbors, LLC	DE	NIA	Centene Corporation	Ownership	60.0	Centene Corporation	N	
01295	Centene Corporation	00000	83-2381790				Next Door Neighbors, Inc.	DE	NIA	Next Door Neighbors, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16771	84-3707689				Centene Venture Company Alabama Health Plan, Inc.	AL	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16505	83-2425735				Centene Venture Company Illinois	IL	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16528	83-2409040				Centene Venture Company Kansas	KS	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16499	83-2434596				Centene Venture Company Florida	FL	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16773	84-3679376				Centene Venture Company Indiana, Inc.	IN	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16770	84-3724374				Centene Venture Company Tennessee	TN	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	86-1543217				Centene Venture Insurance Company Texas	TX	NIA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16613	83-2446307				Centene Venture Company Michigan	MI	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					HealthEC, LLC	DE	NIA	Centene Corporation	Ownership	12.8	Centene Corporation	N	
01295	Centene Corporation	00000	83-4144116				Arch Personalized Medicine Initiative, LLC	MO	NIA	Centene Corporation	Ownership	50.0	Centene Corporation	N	
01295	Centene Corporation	00000	83-4205348				Social Health Bridge, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	84-6403386				Social Health Bridge Trust	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	83-4405939				WellCare Health Plans, Inc.	DE		Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	04-3669698				WCG Health Management, Inc.	DE		WellCare Health Plans, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	14-1647239				The WellCare Management Group, Inc.	NY		WCG Health Management, Inc.	Ownership	100.0	Centene Corporation	N	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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01295	Centene Corporation	95534	14-1676443				WellCare of New York, Inc.	NY	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	95310	06-1405640				WellCare of Connecticut, Inc.	CT	IA	WellCare of New York, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16329	81-5442932				WellCare of Mississippi, Inc.	MS	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-0664467				WellCare of Virginia, Inc.	VA	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16117	81-3299281				WellCare of Oklahoma, Inc.	OK	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	84-3721013				WellCare Health Insurance Company of Nevada, Inc.	NV	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16692	84-3739752				WellCare Health Insurance of Southwest, Inc.	AZ	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	95081	59-2583622				WellCare of Florida, Inc.	FL	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	10760	20-2103320				WellCare of Georgia, Inc.	GA	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	14404	45-3617189				WellCare of Kansas, Inc.	KS	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16964	20-8058761				WellCare of Texas, Inc.	TX	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	12749	20-3562146				WellCare of Ohio, Inc.	OH	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	11775	32-0062883				WellCare of South Carolina, Inc.	SC	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	13020	20-8017319				WellCare Health Plans of New Jersey, Inc.	NJ	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	81-1631920				WellCare of Pennsylvania, Inc.	PA	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	84-3547689				WellCare Health Plans of Massachusetts, Inc.	MA	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16752	84-4449030				WellCare Health Insurance Company of Oklahoma, Inc.	OK	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16753	84-3907795				WellCare Health Plans of Missouri, Inc.	MO	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	10155	20-2383134				WellCare Prescription Insurance, Inc.	AZ	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	84-4664883				WellCare Health Insurance of Hawaii, Inc.	HI	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16766	84-4627844				WellCare Health Plans of Rhode Island, Inc.	RI	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16765	84-4649985				WellCare of Illinois, Inc.	IL	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16531	83-2797833				WellCare of Arkansas, Inc.	AR	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-4869374				WellCare Pharmacy Benefits Management, Inc.	DE	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	

16.15

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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	20-8420512				Exactus Pharmacy Solutions, Inc.	DE	NIA	WellCare Pharmacy Benefits Management, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	98-0448921				Comprehensive Reinsurance, Ltd.	CYM	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	27-4293249				WellCare Health Plans of California, Inc.	CA	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16533	45-5154364				Rhythm Health Tennessee, Inc.	TN	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	59-3547616				Comprehensive Health Management, Inc.	FL	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	10884	11-3197523				WellCare Health Insurance of New York, Inc.	NY	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	27-0386122				Ohana Health Plan, Inc.	HI	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	83-2840051				WellCare of Indiana, Inc.	IN	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-3236788				America's 1st Choice California Holdings, LLC.	FL	NIA	The WellCare Management Group, Inc.	Ownership	1.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-5327501				WellCare of California, Inc.	CA	IA	America's 1st Choice California Holdings, LLC.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	62-1832645				Windsor Health Group, Inc.	TN	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16532	83-2276159				WellCare Health Insurance of Tennessee, Inc.	TN	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16515	83-2914327				WellCare of New Hampshire, Inc.	NH	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16514	83-2255514				WellCare Health Plans of Vermont, Inc.	VT	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16513	83-2126269				WellCare Health Insurance of Connecticut, Inc.	CT	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16571	83-2069308				WellCare of Washington, Inc.	WA	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	15510	47-0971481				WellCare Health Plans of Kentucky, Inc.	KY	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16239	82-1301128				WellCare of Alabama, Inc.	AL	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16344	82-3114517				WellCare of Maine, Inc.	ME	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	22-3391045				Harmony Health Systems Inc.	NJ		The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	36-4467676				Harmony Health Management, Inc.	NJ	NIA	Harmony Health Systems Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	11229	36-4050495				Harmony Health Plan, Inc.	IL	IA	Harmony Health Systems Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-3262322				Harmony Behavioral Health IPA, Inc.	NY	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	

16.16

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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	64467	36-6069295				WellCare Health Insurance Company of Kentucky, Inc.	KY	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	83445	86-0269558				WellCare Health Insurance of Arizona, Inc.	AZ	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16548	83-3493160				WellCare Health Insurance of North Carolina, Inc.	NC	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16788	83-3333918				WellCare Health Insurance Company of Louisiana, Inc.	LA	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16512	83-3525830				WellCare of Missouri Health Insurance Company, Inc.	MO	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16569	83-3351254				WellCare Health Plans of Wisconsin, Inc.	WI	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	57-1165217				Care 1st Health Plan of Arizona, Inc.	AZ	IA	The WellCare Management Group, Inc.	Ownership	1.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-2680154				Care1st Health Plan Administrative Services, Inc.	AZ	NIA	Care 1st Health Plan of Arizona, Inc.	Ownership	1.0	Centene Corporation	N	
01295	Centene Corporation	00000	06-1742685				One Care by Care1st Health Plans of Arizona, Inc.	AZ	NIA	The WellCare Management Group, Inc.	Ownership	1.0	Centene Corporation	N	
01295	Centene Corporation	16570	83-3166908				WellCare Health Insurance Company of Washington, Inc.	WA	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16568	83-3310218				WellCare Health Insurance Company of Wisconsin, Inc.	WI	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	66-0888149				WellCare of Puerto Rico, Inc.	PR	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16547	82-5488080				WellCare of North Carolina, Inc.	NC	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16253	82-3169616				WellCare Health Plans of Arizona, Inc.	AZ	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16343	82-4247084				WellCare Health Insurance Company of America	AR	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16342	82-5127096				WellCare National Health Insurance Company	TX	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16516	83-3091673				WellCare Health Insurance Company of New Hampshire, Inc.	NH	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16789	84-4709471				Wellcare Health Insurance Company of New Jersey, Inc.	NJ	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	26-4004494				Meridian Management Company, LLC (a/k/a Meridian Administration Company, LLC)	MI	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Meridian Network Services, LLC	MI	NIA	Meridian Management Company, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	26-4004578				WellCare of Michigan Holding Company	MI	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	52563	38-3253977				Meridian Health Plan of Michigan, Inc.	MI	IA	WellCare of Michigan Holding Company	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	13189	20-3209671				Meridian Health Plan of Illinois, Inc.	IL	IA	WellCare of Michigan Holding Company	Ownership	100.0	Centene Corporation	N	

16.17

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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	27-4683816				Universal American Corp.	DE	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-1352914				Universal American Holdings, LLC	DE	NIA	Universal American Corp.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	95-3800329				Universal American Financial Services, Inc.	DE	NIA	Universal American Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	58-2633295				Premier Marketing Group, LLC	DE	NIA	Universal American Financial Services, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	95-3623226				Penn Marketing America, LLC	DE	NIA	Universal American Financial Services, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	23-1913528				Worlco Management Services, Inc.	NY	NIA	Universal American Financial Services, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	42-0989096				UAM Agent Services Corp.	IA	NIA	Universal American Financial Services, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-4644722				APS Parent, Inc.	DE	NIA	Universal American Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	80624	13-1851754				American Progressive Life and Health Insurance Company of New York	NY	IA	Universal American Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	13-3491681				Quincy Coverage Corporation	NY	NIA	Universal American Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	62-1517194				Heritage Health Systems, Inc.	TX	NIA	Universal American Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	10096	62-1819658				SelectCare of Texas, Inc.	TX	IA	Heritage Health Systems, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	76-0459857				Heritage Health Systems of Texas, Inc.	TX	NIA	Heritage Health Systems, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	62-1694548				Golden Triangle Physician Alliance	TX	NIA	Heritage Health Systems of Texas, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	76-0560730				Heritage Physician Networks	TX	NIA	Heritage Health Systems, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	10768	74-3141949				SelectCare Health Plans, Inc.	TX	IA	Heritage Health Systems, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	76-0500963				HHS Texas Management, LP	TX	NIA	Heritage Health Systems, Inc.	Ownership	99.1	Centene Corporation	N	
01295	Centene Corporation	00000	76-0500964				HHS Texas Management, Inc.	TX	NIA	Heritage Health Systems, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	76-0500963				HHS Texas Management, LP	TX	NIA	HHS Texas Management, Inc.	Ownership	0.9	Centene Corporation	N	
01295	Centene Corporation	00000	90-0779287				Collaborative Health Systems, LLC	NY	NIA	Universal American Corp.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-5481108				Accountable Care Coalition of Georgia, LLC	GA	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	81-2588974				Accountable Care Coalition of Chesapeake, LLC	MD	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-2881180				Accountable Care Coalition of Mississippi, LLC	MS	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	

16.18

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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	45-4552802				Accountable Care Coalition of North Texas, LLC	TX	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	47-3894436				Accountable Care Coalition of Northeast Georgia, LLC	GA	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	46-4106526				Accountable Care Coalition of Northwest Florida, LLC	FL	NIA	aborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	47-3913308				Accountable Care Coalition of Southeast Physician Partners, LLC	SC	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	47-3842552				Accountable Care Coaliton of Southeast Texas, Inc	TX	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-4113610				Accountable Care Colation of Southeast Wisconsin, LLC	WI	NIA	aborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-2742298				Accountable Care Coalition of Texas, Inc	TX	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	47-2346408				AWC of Syracuse, Inc	NY	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	30-0803845				Chrysalis Medical Services, LLC	NJ	NIA	aborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	81-3365375				Collaborative Health Systems of Maryland, LLC	MD	NIA	Collaborative Health Systems, LLC	Ownership	50.0	Centene Corporation	N	
01295	Centene Corporation	00000	81-3306594				Collaborative Health Systems of Virginia, LLC	VA	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-4119736				Accountable Care Coalition of Maryland, LLC	MD	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-5449147				Accountable Care Coalition of Maryland Primary Care, LLC	MD	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-4561546				Essential Care Partners, LLC	TX	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	47-3923394				Hudson Accountable Care, LLC	NY	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	90-0855950				Maryland Collaborative Care, LLC	MD	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	81-2704355				Mid-Atlantic Collaborative Care, LLC	MD	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-5626871				Northern Maryland Collaborative Care, LLC	MD	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-1246845				Accountable Care Coalition of Elite Providers VII, LLC	AZ	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-1681146				Accountable Care Coalition of Community Health Centers, LLC	TX	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-1669422				Accountable Care Coalition of Community Health Centers II, LLC	TX	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-1623920				Accountable Care Coalition of Southeast Partners, LLC	GA	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-1558080				Accountable Care Coalition of Elite Providers LLC	HI	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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	84-2217098				Accountable Care Coalition of Florida Partners, LLC	FL	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-1280079				Maryland Collaborative Care Transformation Organization, Inc	DE	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-1263227				Accountable Care Coalition of New Jersey, Inc	NJ	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-1604548				Accountable Care Coalition of Quality Health, LLC	OR	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-1698885				Accountable Care Coalition of Prime Health, LLC	OR	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-0727997				Accountable Care Coalition of Northeast Partners, LLC	PA	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	82-1219279				Accountable Care Coalition of Tennessee, LLC	TN	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	84-2574901				Accountable Care Coalition Direct Contracting, LLC	FL	NIA	Collaborative Health Systems, LLC	Ownership	51.0	Centene Corporation	N	
01295	Centene Corporation	00000	85-0822080				Accountable Care Coalition of Elite Providers II, LLC	DE	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	85-0829473				Accountable Care Coalition of Elite Providers III, LLC	DE	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	85-0847691				Accountable Care Coalition of Elite Providers IV, LLC	DE	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	85-0863292				Accountable Care Coalition of Elite Providers V, LLC	DE	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	85-0907849				Accountable Care Coalition of Elite Providers VI, LLC	DE	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	85-0878405				Accountable Care Coalition of Quality Health II, LLC	DE	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	85-0893657				Accountable Care Coalition of Quality Health III, LLC	DE	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	85-1770215				Collaborative Health Systems IPA, LLC	FL	NIA	Collaborative Health Systems, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	95448	71-0794605				QCA Healthplan, Inc	AR	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	70998	71-0386640				Qualchoice Life and Health Insurance Company	AR	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	27-1300475				HealthSmart Benefits Management, LLC	TX	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-2387587				Parker LP, LLC	NV	NIA	HealthSmart Benefits Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	75-2508316				HealthSmart Preferred Care II, LP	TX	NIA	Parker LP, LLC	Ownership	99.0	Centene Corporation	N	
01295	Centene Corporation	00000	20-3394046				HealthSmart Primary Care Clinics, LP	TX	NIA	Parker LP, LLC	Ownership	99.0	Centene Corporation	N	
01295	Centene Corporation	00000	75-2960859				HealthSmart Care Management Solutions, LP	TX	NIA	Parker LP, LLC	Ownership	99.0	Centene Corporation	N	

16.20

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	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	75-2727437				HealthSmart Information Systems, Inc.	TX	NIA	HealthSmart Benefits Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	36-4099199				HealthSmart Benefit Solutions, Inc.	IL	NIA	HealthSmart Benefits Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	06-1621470				HealthSmart Preferred Network II, Inc.	DE	NIA	HealthSmart Benefits Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	34-1635597				HealthSmart Rx Solutions, Inc.	OH	NIA	HealthSmart Preferred Network II, Inc.	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Mauli Oia Health and Wellness, Inc.	HI	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	16814	84-4119570				District Community Care Inc	DC	IA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	84-5160960				Centene Institute for Advanced Health Education, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Centene Canada Corporation	CAN	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	85-3006977				Centene Investments, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Wellframe, Inc.	DE	NIA	Centene Investments, LLC	Ownership	7.1	Centene Corporation	N	
01295	Centene Corporation	00000					Diameter Health, Inc.	DE	NIA	Centene Investments, LLC	Ownership	16.7	Centene Corporation	N	
01295	Centene Corporation	00000					Vida Health, Inc.	DE	NIA	Centene Investments, LLC	Ownership	2.0	Centene Corporation	N	
01295	Centene Corporation	00000	85-3802075				Prowl Holdings, LLC	DE	NIA	Centene Corporation	Ownership	96.1	Centene Corporation	N	
01295	Centene Corporation	00000	83-3240368				Panther Pass Co, LLC	PA	NIA	Prowl Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Panther Specialty Holding Co, LLC	PA	NIA	Panther Pass Co, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	45-3620087				Pantherx Specialty, LLC	PA	NIA	Panther Specialty Holding Co, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	37-1778465				Pantherx Access Services, LLC	PA	NIA	Pantherx Specialty, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000					Babylon Holdings Limited	GBR	NIA	Centene Corporation	Ownership	2.5	Centene Corporation	N	
01295	Centene Corporation	00000					Hazel Health, Inc.	DE	NIA	Centene Corporation	Ownership	7.4	Centene Corporation	N	
01295	Centene Corporation	00000					Quartet Health, Inc.	DE	NIA	Centene Corporation	Ownership	9.5	Centene Corporation	N	
01295	Centene Corporation	00000					Rubicon MD	DE	NIA	Centene Corporation	Ownership	5.8	Centene Corporation	N	
01295	Centene Corporation	00000	80-0508223				Apixio, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	43-1106904				HughesLeahyKarlovic, LLC	MO	NIA	Centene Corporation	Ownership	20.0	Centene Corporation	N	
01295	Centene Corporation	00000	86-2318658				Oklahoma Complete Health Holding Company, LLC	OK	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	86-2694770				RI Health & Wellness, Inc.	RI	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	

**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?

.....YES.....

**Explanation:**

**Bar Code:**

**OVERFLOW PAGE FOR WRITE-INS**

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STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

**SCHEDULE A – VERIFICATION**

Real Estate

	1 Year To Date	2 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 Year To Date	2 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 Year To Date	2 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 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	230,601,647	214,344,942
2. Cost of bonds and stocks acquired .....	28,421,587	139,145,465
3. Accrual of discount .....	16,969	5,216
4. Unrealized valuation increase (decrease) .....	12	9,959
5. Total gain (loss) on disposals .....	(162)	582,789
6. Deduct consideration for bonds and stocks disposed of .....	15,847,154	120,112,339
7. Deduct amortization of premium .....	904,496	3,374,386
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) .....	242,288,402	230,601,647
12. Deduct total nonadmitted amounts .....	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	242,288,402	230,601,647

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

**SCHEDULE D - PART 1B**

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. NAIC 1 (a).....	212,809,721	9,073,724	28,538,040	3,531,444	196,876,849	0	0	212,809,721
2. NAIC 2 (a).....	59,408,626	25,119,246	8,858,702	(4,694,852)	70,974,318	0	0	59,408,626
3. NAIC 3 (a).....	4,929,248			916	4,930,165	0	0	4,929,248
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	277,147,595	34,192,969	37,396,742	(1,162,491)	272,781,331	0	0	277,147,595
<b>PREFERRED STOCK</b>								
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	277,147,595	34,192,969	37,396,742	(1,162,491)	272,781,331	0	0	277,147,595

(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 \$ .....19,767,439 ; NAIC 2 \$ .....10,725,490 ;  
NAIC 3 \$ ..... ; NAIC 4 \$ ..... ; NAIC 5 \$ ..... ; NAIC 6 \$ .....

S102

## SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
9199999	30,492,929	XXX	30,728,461	79,425	35,062

## SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	39,170,272	4,286,315
2. Cost of short-term investments acquired .....	5,771,382	39,229,423
3. Accrual of discount .....		5,094
4. Unrealized valuation increase (decrease).....		0
5. Total gain (loss) on disposals .....	2,272	0
6. Deduct consideration received on disposals .....	14,181,697	4,291,000
7. Deduct amortization of premium.....	269,300	59,560
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).....	30,492,929	39,170,272
11. Deduct total nonadmitted amounts.....		0
12. Statement value at end of current period (Line 10 minus Line 11)	30,492,929	39,170,272

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.....	22,517,826	38,379,452
2. Cost of cash equivalents acquired .....	133,526,893	1,149,186,906
3. Accrual of discount .....	718	232
4. Unrealized valuation increase (decrease) .....		13
5. Total gain (loss) on disposals.....		1,484
6. Deduct consideration received on disposals .....	138,220,618	1,165,045,311
7. Deduct amortization of premium .....	6,394	4,950
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) .....	17,818,425	22,517,826
11. Deduct total nonadmitted amounts .....		0
12. Statement value at end of current period (Line 10 minus Line 11)	17,818,425	22,517,826

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**



STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	For eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's (Amortization)/Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation, NAIC Desig. Modifier and SVO Administrative Symbol
<b>Bonds - U.S. Governments</b>																					
36179M-5M-8	G2 MA0852 - RMBS		03/01/2021	Paydown	XXX	937	937	977	976		(40)		(40)		937			.0	.5	03/20/2043	1 A
36179M-X4-7	G2 MA0699 - RMBS		03/01/2021	Paydown	XXX	6,424	6,424	6,697	6,695		(271)		(271)		6,424			.0	.36	01/20/2043	1 A
36179N-BB-3	G2 MA0934 - RMBS		03/01/2021	Paydown	XXX	3,431	3,431	3,577	3,577		(146)		(146)		3,431		.0	.0	.19	04/20/2043	1 A
36179Q-WD-9	G2 MA2444 - RMBS		03/01/2021	Paydown	XXX	107,939	107,939	110,873	110,913		(2,975)		(2,975)		107,939			.0	.516	12/20/2044	1 A
36179Q-WE-7	G2 MA2445 - RMBS		03/01/2021	Paydown	XXX	1,010	1,010	1,053	1,053		(43)		(43)		1,010		.0	.0	.6	12/20/2044	1 A
36179Q-YR-6	G2 MA2520 - RMBS		03/01/2021	Paydown	XXX	49,801	49,801	51,155	51,167		(1,366)		(1,366)		49,801		.0	.0	.237	01/20/2045	1 A
36179R-7J-2	G2 MA3597 - RMBS		03/01/2021	Paydown	XXX	69,211	69,211	72,152	72,207		(2,996)		(2,996)		69,211		.0	.0	.386	04/20/2046	1 A
36179R-D7-1	G2 MA2826 - RMBS		03/01/2021	Paydown	XXX	15,640	15,640	16,305	16,319		(679)		(679)		15,640		.0	.0	.87	05/20/2045	1 A
36179S-5M-5	G2 MA4452 - RMBS		03/01/2021	Paydown	XXX	308,220	308,220	323,631	323,926		(15,706)		(15,706)		308,220		.0	.0	2,006	05/20/2047	1 A
36179S-B7-1	G2 MA3662 - RMBS		03/01/2021	Paydown	XXX	299,225	299,225	307,757	307,843		(8,618)		(8,618)		299,225		.0	.0	1,464	05/20/2046	1 A
36179S-LS-4	G2 MA3937 - RMBS		03/01/2021	Paydown	XXX	48,494	48,494	50,555	50,598		(2,103)		(2,103)		48,494		.0	.0	.265	09/20/2046	1 A
36179S-QW-0	G2 MA4069 - RMBS		03/01/2021	Paydown	XXX	176,790	176,790	184,235	184,387		(7,596)		(7,596)		176,790		.0	.0	.969	09/20/2046	1 A
36179T-7M-1	G2 MA5400 - RMBS		03/01/2021	Paydown	XXX	163,183	163,183	172,669	172,986		(9,803)		(9,803)		163,183		.0	.0	1,286	08/20/2048	1 A
36179T-AL-9	G2 MA4511 - RMBS		03/01/2021	Paydown	XXX	287,442	287,442	301,140	301,547		(14,106)		(14,106)		287,442		.0	.0	1,862	06/20/2047	1 A
36179T-CX-1	G2 MA4586 - RMBS		03/01/2021	Paydown	XXX	484,875	484,875	504,118	504,608		(19,734)		(19,734)		484,875		.0	.0	2,681	07/20/2047	1 A
36179T-EY-7	G2 MA4651 - RMBS		03/01/2021	Paydown	XXX	408,287	408,287	420,982	421,087		(12,799)		(12,799)		408,287		.0	.0	1,963	08/20/2047	1 A
36179T-NQ-4	G2 MA4899 - RMBS		03/01/2021	Paydown	XXX	525,436	525,436	541,364	541,435		(15,999)		(15,999)		525,436		.0	.0	2,532	12/20/2047	1 A
36179T-NR-2	G2 MA4900 - RMBS		03/01/2021	Paydown	XXX	331,445	331,445	343,978	344,255		(12,810)		(12,810)		331,445		.0	.0	1,826	12/20/2047	1 A
36179T-UB-9	G2 MA5078 - RMBS		03/01/2021	Paydown	XXX	234,813	234,813	245,343	245,810		(10,997)		(10,997)		234,813		.0	.0	1,556	03/20/2048	1 A
36179U-CC-4	G2 MA5467 - RMBS		03/01/2021	Paydown	XXX	347,844	347,844	365,154	364,113		(16,270)		(16,270)		347,844		.0	.0	2,494	09/20/2048	1 A
36179U-GE-6	G2 MA5597 - RMBS		03/01/2021	Paydown	XXX	309,651	309,651	328,617	328,696		(19,045)		(19,045)		309,651		.0	.0	2,441	11/20/2048	1 A
36179U-H5-4	G2 MA5652 - RMBS		03/01/2021	Paydown	XXX	141,111	141,111	148,023	147,775		(6,665)		(6,665)		141,111		.0	.0	1,010	12/20/2048	1 A
36179U-KX-9	G2 MA5710 - RMBS		03/01/2021	Paydown	XXX	371,524	371,524	385,921	385,766		(14,241)		(14,241)		371,524		.0	.0	2,429	01/20/2049	1 A
36179U-KY-7	G2 MA5711 - RMBS		03/01/2021	Paydown	XXX	218,555	218,555	229,039	228,746		(10,190)		(10,190)		218,555		.0	.0	1,587	01/20/2049	1 A
36179U-O4-7	G2 MA5875 - RMBS		03/01/2021	Paydown	XXX	184,209	184,209	189,980	189,115		(4,906)		(4,906)		184,209		.0	.0	1,013	04/20/2049	1 A
36179U-O5-4	G2 MA5876 - RMBS		03/01/2021	Paydown	XXX	65,623	65,623	68,130	67,666		(2,042)		(2,042)		65,623		.0	.0	.429	04/20/2049	1 A
36179U-ZT-2	G2 MA6154 - RMBS		03/01/2021	Paydown	XXX	477,706	477,706	494,650	490,487		(12,781)		(12,781)		477,706		.0	.0	2,640	09/20/2049	1 A
<b>0599999 - Bonds - U.S. Governments</b>						5,638,827	5,638,827	5,868,075	5,863,753	0	(224,926)	0	(224,926)	0	5,638,827	0	0	0	33,746	XXX	XXX
<b>Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions</b>																					
3128MJ-5G-1	FH G08846 - RMBS		03/01/2021	Paydown	XXX	314,043	314,043	321,845	321,602		(7,559)		(7,559)		314,043		.0	.0	1,737	11/01/2048	1 A
3128MJ-5M-6	FH G08852 - RMBS		03/01/2021	Paydown	XXX	272,792	272,792	282,894	283,023		(10,231)		(10,231)		272,792		.0	.0	1,725	12/01/2048	1 A
3132A5-J2-2	FH ZS4781 - RMBS		03/01/2021	Paydown	XXX	405,311	405,311	426,020	426,001		(20,690)		(20,690)		405,311		.0	.0	2,773	07/01/2048	1 A
3132AC-YK-0	FH ZT0714 - RMBS		03/01/2021	Paydown	XXX	264,867	264,866	282,848	282,281		(17,414)		(17,414)		264,866		.0	.0	1,905	10/01/2048	1 A
3132AD-XW-3	FH ZT1593 - RMBS		03/01/2021	Paydown	XXX	398,294	398,294	408,251	407,878		(9,584)		(9,584)		398,294		.0	.0	2,138	01/01/2049	1 A
3132DV-KP-9	FH SD7502 - RMBS		03/01/2021	Paydown	XXX	592,683	592,683	616,321	611,637		(18,954)		(18,954)		592,683		.0	.0	3,448	07/01/2049	1 A
3132DV-KQ-7	FH SD7503 - RMBS		03/01/2021	Paydown	XXX	240,850	240,850	250,597	248,611		(7,761)		(7,761)		240,850		.0	.0	1,357	08/01/2049	1 A
3133KG-WA-2	FH RA1541 - RMBS		03/01/2021	Paydown	XXX	279,842	279,842	284,192	283,403		(3,562)		(3,562)		279,842		.0	.0	1,376	11/01/2049	1 A
3138ER-CV-0	FN AL9083 - RMBS		03/01/2021	Paydown	XXX	138,136	138,136	144,244	144,291		(6,155)		(6,155)		138,136		.0	.0	776	09/01/2046	1 A
3138ET-D2-6	FN AL8219 - RMBS		03/01/2021	Paydown	XXX	405,212	405,212	430,918	430,907		(25,695)		(25,695)		405,212		.0	.0	2,609	02/01/2046	1 A
3140J9-KU-4	FN BM4806 - RMBS		03/01/2021	Paydown	XXX	521,904	521,904	532,668	532,699		(10,795)		(10,795)		521,904		.0	.0	2,546	12/01/2047	1 A
3140J9-SN-2	FN BM5024 - RMBS		03/01/2021	Paydown	XXX	204,807	204,807	209,607	209,589		(4,782)		(4,782)		204,807		.0	.0	1,007	11/01/2048	1 A
3140JG-LW-3	FN BNO340 - RMBS		03/01/2021	Paydown	XXX	178,205	178,205	188,563	187,644		(9,439)		(9,439)		178,205		.0	.0	1,190	12/01/2048	1 A
3140JQ-TQ-6	FN BN7758 - RMBS		03/01/2021	Paydown	XXX	194,145	194,145	200,151	199,116		(4,972)		(4,972)		194,145		.0	.0	.889	09/01/2049	1 A
3140QA-3W-8	FN CA3512 - RMBS		03/01/2021	Paydown	XXX	237,766	237,766	257,382	254,490		(16,724)		(16,724)		237,766		.0	.0	1,917	05/01/2049	1 A
3140QB-S5-8	FN CA4139 - RMBS		03/01/2021	Paydown	XXX	245,959	245,959	251,032	250,163		(4,203)		(4,203)		245,959		.0	.0	1,236	09/01/2049	1 A
3140QC-CF-1	FN CA4569 - RMBS		03/01/2021	Paydown	XXX	248,048	248,048	263,299	260,455		(12,407)		(12,407)		248,048		.0	.0	1,909	11/01/2049	1 A
3140X4-DE-3	FN FM1000 - RMBS		03/01/2021	Paydown	XXX	661,495	661,495	675,234	675,228		(13,733)		(13,733)		661,495		.0	.0	3,220	04/01/2047	1 A
3140X4-LV-6	FN FM1239 - RMBS		03/01/2021	Paydown	XXX	490,963	490,963	505,155	505,126		(14,163)		(14,163)		490,963		.0	.0	2,848	11/01/2048	1 A
3140X4-NL-6	FN FM1294 - RMBS		03/01/2021	Paydown	XXX	61,538	61,538	65,682	65,510		(3,972)		(3,972)		61,538		.0	.0	480	08/01/2049	1 A
3140X4-TZ-9	FN FM1467 - RMBS		03/01/2021	Paydown	XXX	308,465	308,465	315,261	315,259		(6,794)		(6,794)		308,465		.0	.0	1,500	12/01/2047	1 A
3140X4-V3-7	FN FM1533 - RMBS		03/01/2021	Paydown	XXX	193,459	193,459	204,794	204,830		(11,371)		(11,371)		193,459		.0	.0	1,297	02/01/2048	1 A
3140X4-YL-4	FN FM1614 - RMBS		03/01/2021	Paydown	XXX	155,195	155,195	162,591	162,560		(7,365)		(7,365)		155,195		.0				

STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	For e i g n	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation, NAIC Desig. Modifier and SVO Administrative Symbol
31418D-KV-3	FN MA3907 - RMBS		03/01/2021	Paydown	XXX	313,910	313,910	329,262	326,138		(12,228)		(12,228)		313,910		0	0	2,037	01/01/2050	1.A
31418D-LT-7	FN MA3937 - RMBS		03/01/2021	Paydown	XXX	575,349	575,349	586,316	584,816		(9,468)		(9,468)		575,349		0	0	2,852	02/01/2050	1.A
<b>3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions</b>						9,921,933	9,921,932	10,301,630	10,277,737	0	(355,804)	0	(355,804)	0	9,921,932	0	0	0	58,229	XXX	XXX
<b>Bonds - Industrial and Miscellaneous (Unaffiliated)</b>																					
59980C-AA-1	MCMLT 2017-3 A1 - CMO/RMBS		03/01/2021	Paydown	XXX	22,681	22,681	22,805	22,766		(85)		(85)		22,681		0	0	101	01/25/2061	1.A FE
89169D-AA-9	TPMT 173 A1 - RMBS		03/01/2021	Paydown	XXX	25,279	25,279	25,454	25,411		(133)		(133)		25,279		0	0	106	07/25/2057	1.A FE
89173U-AA-5	TPMT 2017-4 A1 - RMBS		03/01/2021	Paydown	XXX	137,946	138,108	139,462	139,267		(1,159)		(1,159)		138,108		(163)	(163)	602	06/25/2057	1.A FE
89175J-AA-8	TPMT 176 A1 - CMO/RMBS		03/01/2021	Paydown	XXX	26,704	26,704	26,937	26,884		(180)		(180)		26,704		0	0	114	10/25/2057	1.A FE
89175T-AA-6	TPMT 2018-4 A1 - RMBS		03/01/2021	Paydown	XXX	73,786	73,786	75,293	75,092		(1,306)		(1,306)		73,786		0	0	360	06/25/2058	1.A FE
<b>3899999 - Bonds - Industrial and Miscellaneous (Unaffiliated)</b>						286,395	286,558	289,951	289,420	0	(2,863)	0	(2,863)	0	286,558	0	(163)	(163)	1,284	XXX	XXX
<b>8399997 - Bonds - Subtotals - Bonds - Part 4</b>						15,847,154	15,847,317	16,459,656	16,430,910	0	(583,594)	0	(583,594)	0	15,847,317	0	(163)	(163)	93,258	XXX	XXX
<b>8399999 - Bonds - Subtotals - Bonds</b>						15,847,154	15,847,317	16,459,656	16,430,910	0	(583,594)	0	(583,594)	0	15,847,317	0	(163)	(163)	93,258	XXX	XXX
<b>9999999 Totals</b>						15,847,154	15,847,317	16,459,656	16,430,910	0	(583,594)	0	(583,594)	0	15,847,317	0	(163)	(163)	93,258	XXX	XXX

E05.1

Schedule DB - Part A - Section 1

**NONE**

Schedule DB - Part B - Section 1

**NONE**

Schedule DB - Part D - Section 1

**NONE**

Schedule DB - Part D - Section 2

**NONE**

Schedule DL - Part 1

**NONE**

Schedule DL - Part 2

**NONE**

Schedule DB - Part E

**NONE**



STATEMENT AS OF MARCH 31, 2021 OF THE Harmony Health Plan, Inc.

**SCHEDULE E - PART 2 - CASH EQUIVALENTS**

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due & Accrued	9 Amount Received During Year
All Other Money Market Mutual Funds								
31846V-33-6	FIRST AMER:GVT OBLG X		.03/30/2021	.040	XXX	12,119,989	143	.6
608919-71-8	FEDERATED HRMS GV 0 PRMR		.03/02/2021	.040	XXX	5,698,436	143	.140
857492-70-6	SS INST INV:US GV MM PRM		.01/05/2021	.040	XXX		99	
8699999 - All Other Money Market Mutual Funds						17,818,425	384	147
9999999 Total Cash Equivalents						17,818,425	384	147



**SUPPLEMENT FOR THE QUARTER ENDING MARCH 31, 2021 OF THE Harmony Health Plan, Inc.  
 MEDICARE PART D COVERAGE SUPPLEMENT**

**(Net of Reinsurance)**

NAIC Group Code.....01295

NAIC Company Code.....11229

	Individual Coverage		Group Coverage		5 Total Cash
	1 Insured	2 Uninsured	3 Insured	4 Uninsured	
1. Premiums Collected.....		XXX		XXX	.0
2. Earned Premiums		XXX		XXX	XXX
3. Claims Paid.....		XXX		XXX	.0
4. Claims Incurred.....		XXX		XXX	XXX
5. Reinsurance Coverage and Low Income Cost Sharing – Claims Paid Net of Reimbursements Applied (a).....	XXX		XXX		.0
6. Aggregate Policy Reserves - Change.....		XXX		XXX	XXX
7. Expenses Paid.....		XXX		XXX	.0
8. Expenses Incurred.....		XXX		XXX	XXX
9. Underwriting Gain or Loss.....	.0	XXX	.0	XXX	XXX
10. Cash Flow Result	XXX	XXX	XXX	XXX	0

(a) Uninsured Receivable/Payable with CMS at End of Quarter: \$ ..... due from CMS or \$ ..... due to CMS