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QUARTERLY STATEMENT

AS OF JUNE 30, 2026

OF THE CONDITION AND AFFAIRS OF THE

WellCare Health Plans of Kentucky, Inc.

NAIC Group Code 01295 (Current Period), 01295 (Prior Period) NAIC Company Code 15510 Employer's ID Number 47-0971481

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

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 05/28/2014 Commenced Business 01/01/2015

Statutory Home Office 13551 Triton Park Blvd, Suite 1800 (Street and Number), Louisville, KY, US 40223 (City or Town, State, Country and Zip Code)

Main Administrative Office 7700 Forsyth Boulevard (Street and Number) St. Louis, MO, US 63105 (City or Town, State, Country and Zip Code) 314-725-4477 (Area Code) (Telephone Number)

Mail Address 8725 Henderson Road (Street and Number or P.O. Box), Tampa, FL, US 33634 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 7700 Forsyth Boulevard (Street and Number) St. Louis, MO, US 63105 (City or Town, State, Country and Zip Code) 314-725-4477 (Area Code) (Telephone Number)

Internet Web Site Address www.centene.com

Statutory Statement Contact Lisa BIrch (Name) 813-206-2725 (Area Code) (Telephone Number) (Extension)

RegReporting@centene.com (E-Mail Address) 813-675-2899 (FAX Number)

OFFICERS

Name	Title	Name	Title
Corey Glenn Ewing	President and Chief Executive Officer	David Michael Wolff #	Interim Vice President & Treasurer
Kendra Louise Archer	Vice President & Secretary	Tricia Lynn Dinkelman	Vice President of Tax

OTHER OFFICERS

Marc Nyarko	Chief Operating Officer		

DIRECTORS OR TRUSTEES

Corey Glenn Ewing	Marc Nyarko	David Michael Wolff #	

State of .....

County of ..... ss

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

Corey Glenn Ewing President and Chief Executive Officer	David Michael Wolff Interim Vice President & Treasurer	Kendra Louise Archer Vice President & Secretary

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

ASSETS

	Current Statement Date			4
	1	2	3	
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1. Bonds	528,178		528,178	529,364
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 ($ 113,461,893), cash equivalents ($ 0) and short-term investments ($ 0)	113,461,893		113,461,893	70,134,796
6. Contract loans (including $ premium notes)			0	0
7. Derivatives	0		0	0
8. Other invested assets	0		0	0
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	113,990,071	0	113,990,071	70,664,160
13. Title plants less $ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	4,280		4,280	4,359
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	125,211		125,211	169,383
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 ($) and contracts subject to redetermination ($)			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers			0	0
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon	5,706,124		5,706,124	10,455,644
18.2 Net deferred tax asset	1,486,301		1,486,301	580,227
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 ($)			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates	3,490,672		3,490,672	15,117,162
24. Health care ($ 2,190,609) and other amounts receivable	3,083,207	892,598	2,190,609	3,974,660
25. Aggregate write-ins for other-than-invested assets	1,533,883	0	1,533,883	1,781,848
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	129,419,749	892,598	128,527,151	102,747,443
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	129,419,749	892,598	128,527,151	102,747,443
DETAILS OF WRITE-INS				
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	1,533,883		1,533,883	1,781,848
2502.			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)	1,533,883	0	1,533,883	1,781,848

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less $ ..... reinsurance ceded)	39,928,102		39,928,102	38,077,336
2. Accrued medical incentive pool and bonus amounts	677,382		677,382	404,271
3. Unpaid claims adjustment expenses	300,992		300,992	317,457
4. Aggregate health policy reserves including the liability of $ ..... for medical loss ratio rebate per the Public Health Service Act	24,283,007		24,283,007	14,426,386
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	6,001,949		6,001,949	7,049,141
9. General expenses due or accrued	2,915,624		2,915,624	2,322,575
10.1 Current federal and foreign income tax payable and interest thereon (including $ ..... on realized gains (losses))			0	0
10.2 Net deferred tax liability			0	0
11. Ceded reinsurance premiums payable			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	105,104		105,104	127,505
16. Derivatives			0	0
17. Payable for securities			0	0
18. Payable for securities lending			0	0
19. Funds held under reinsurance treaties (with $ ..... authorized reinsurers, $ ..... unauthorized reinsurers and $ ..... certified reinsurers)			0	0
20. Reinsurance in unauthorized and certified ($ .....) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans			0	0
23. Aggregate write-ins for other liabilities (including $ ..... current)	1,737,662	0	1,737,662	2,825,852
24. Total liabilities (Lines 1 to 23)	75,949,822	0	75,949,822	65,550,522
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX	1,000,000	1,000,000
27. Preferred capital stock	XXX	XXX		0
28. Gross paid in and contributed surplus	XXX	XXX	98,414,252	78,414,252
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	(46,836,923)	(42,217,331)
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	52,577,329	37,196,921
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	128,527,151	102,747,443
DETAILS OF WRITE-INS				
2301. State assessment payable	1,737,662		1,737,662	2,825,852
2302.			0	0
2303.			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)	1,737,662	0	1,737,662	2,825,852
2501.	XXX	XXX		0
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	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	230,285	250,832	513,976
2.	Net premium income (including $ non-health premium income)	XXX	181,513,123	138,693,515	284,465,952
3.	Change in unearned premium reserves and reserve for rate credits	XXX		0	0
4.	Fee-for-service (net of $ medical expenses)	XXX		0	0
5.	Risk revenue	XXX		0	0
6.	Aggregate write-ins for other health care related revenues	XXX	0	0	0
7.	Aggregate write-ins for other non-health revenues	XXX	0	0	0
8.	Total revenues (Lines 2 to 7)	XXX	181,513,123	138,693,515	284,465,952
Hospital and Medical:					
9.	Hospital/medical benefits		102,235,031	91,036,009	203,274,472
10.	Other professional services		708,433	740,680	1,584,352
11.	Outside referrals			0	0
12.	Emergency room and out-of-area		6,954,893	7,578,335	18,482,518
13.	Prescription drugs		43,069,401	32,302,626	80,571,498
14.	Aggregate write-ins for other hospital and medical	0	0	0	0
15.	Incentive pool, withhold adjustments and bonus amounts		716,654	370,526	987,409
16.	Subtotal (Lines 9 to 15)	0	153,684,412	132,028,176	304,900,249
Less:					
17.	Net reinsurance recoveries			0	0
18.	Total hospital and medical (Lines 16 minus 17)	0	153,684,412	132,028,176	304,900,249
19.	Non-health claims (net)			0	0
20.	Claims adjustment expenses, including $ 74,817 cost containment expenses		1,246,952	1,278,156	2,789,742
21.	General administrative expenses		19,817,880	15,855,148	31,709,522
22.	Increase in reserves for life and accident and health contracts (including $ increase in reserves for life only)		11,221,419	19,215,447	0
23.	Total underwriting deductions (Lines 18 through 22)	0	185,970,663	168,376,927	339,399,514
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(4,457,540)	(29,683,412)	(54,933,562)
25.	Net investment income earned		1,129,150	253,844	1,244,411
26.	Net realized capital gains (losses) less capital gains tax of $			0	0
27.	Net investment gains (losses) (Lines 25 plus 26)	0	1,129,150	253,844	1,244,411
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered $) (amount charged off $ 956,446)]		(956,446)	(300,642)	(620,048)
29.	Aggregate write-ins for other income or expenses	0	0	0	8
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	(4,284,836)	(29,730,210)	(54,309,191)
31.	Federal and foreign income taxes incurred	XXX	1,486,302	(2,177,495)	(11,297,790)
32.	Net income (loss) (Lines 30 minus 31)	XXX	(5,771,138)	(27,552,715)	(43,011,401)
	DETAILS OF WRITE-INS				
0601.		XXX		0	0
0602.		XXX		0	0
0603.		XXX		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	0	0
0701.		XXX		0	0
0702.		XXX		0	0
0703.		XXX		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
1402.				0	0
1403.				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.	Miscellaneous income - litigation settlement			0	8
2902.				0	0
2903.					
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999.	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0	0	8

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	CAPITAL & SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	37,196,921	16,383,289	16,383,289
34.	Net income or (loss) from Line 32	(5,771,138)	(27,552,715)	(43,011,401)
35.	Change in valuation basis of aggregate policy and claim reserves		0	0
36.	Change in net unrealized capital gains (losses) less capital gains tax of $		0	0
37.	Change in net unrealized foreign exchange capital gain or (loss)		0	0
38.	Change in net deferred income tax	906,074	3,945,014	67,882
39.	Change in nonadmitted assets	245,472	(2,292,020)	157,150
40.	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock	0	0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles		0	0
44.	Capital Changes:			
	44.1 Paid in		0	0
	44.2 Transferred from surplus (stock dividend)		0	0
	44.3 Transferred to surplus		0	0
45.	Surplus adjustments:			
	45.1 Paid in	20,000,000	36,000,000	63,600,000
	45.2 Transferred to capital (stock dividend)	0	0	0
	45.3 Transferred from capital		0	0
46.	Dividends to stockholders		0	0
47.	Aggregate write-ins for gains or (losses) in surplus	0	0	0
48.	Net change in capital and surplus (Lines 34 to 47)	15,380,408	10,100,279	20,813,632
49.	Capital and surplus end of reporting period (Line 33 plus 48)	52,577,329	26,483,568	37,196,921
	DETAILS OF WRITE-INS			
4701.			0	0
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	0	0

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	179,145,305	147,086,953	305,175,901
2. Net investment income	1,130,414	252,576	1,243,131
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	180,275,719	147,339,529	306,419,032
5. Benefit and loss related payments	149,531,011	118,605,727	281,220,778
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	21,444,694	18,090,905	35,535,061
8. Dividends paid to policyholders		0	0
9. Federal and foreign income taxes paid (recovered) net of $ ..... tax on capital gains (losses)	(3,263,218)	19,137	(1,294,881)
10. Total (Lines 5 through 9)	167,712,487	136,715,769	315,460,957
11. Net cash from operations (Line 4 minus Line 10)	12,563,232	10,623,760	(9,041,925)
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	0	0	525,000
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	0	0	525,000
13. Cost of investments acquired (long-term only):			
13.1 Bonds	0	0	529,819
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	0	0
13.6 Miscellaneous applications	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	0	0	529,819
14. Net increase/(decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	0	0	(4,819)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	29,500,000	14,000,000	54,100,000
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities		0	0
16.5 Dividends to stockholders	0	0	0
16.6 Other cash provided (applied)	1,263,866	(7,154,126)	(5,189,786)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	30,763,866	6,845,874	48,910,214
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	43,327,098	17,469,634	39,863,469
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	70,134,796	30,271,326	30,271,326
19.2 End of period (Line 18 plus Line 19.1)	113,461,893	47,740,960	70,134,796

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001. Accrued capital contribution		0	9,500,000

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:														
1. Prior year	42,288	42,288	0	0	0	0	0	0	0	0	0	0	0	0
2. First quarter	38,805	38,805	0	0	0	0	0	0	0	0	0	0	0	0
3. Second quarter	37,210	37,210	0	0	0	0	0	0	0	0	0	0	0	0
4. Third quarter	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Current year	0													
6. Current year member months	230,285	230,285												
Total Member Ambulatory Encounters for Period:														
7. Physician	94,421	94,421												
8. Non-physician	154,299	154,299												
9. Total	248,720	248,720	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital patient days incurred	7,159	7,159												
11. Number of inpatient admissions	1,395	1,395												
12. Health premiums written (a)	181,513,123	181,513,123												
13. Life premiums direct	0													
14. Property/casualty premiums written	0													
15. Health premiums earned	181,513,123	181,513,123												
16. Property/casualty premiums earned	0													
17. Amount paid for provision of health care services	151,560,535	151,560,535												
18. Amount incurred for provision of health care services	153,684,412	153,684,412												

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

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

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims unpaid (Reported)						
0199999 Individually listed claims unpaid	0	0	0	0	0	0
0299999 Aggregate accounts not individually listed-uncovered						0
0399999 Aggregate accounts not individually listed-covered	10,281,827	794,884	447,418	524,873	4,417,163	16,466,165
0499999 Subtotals	10,281,827	794,884	447,418	524,873	4,417,163	16,466,165
0599999 Unreported claims and other claim reserves	XXX	XXX	XXX	XXX	XXX	23,461,937
0699999 Total amounts withheld	XXX	XXX	XXX	XXX	XXX	
0799999 Total claims unpaid	XXX	XXX	XXX	XXX	XXX	39,928,102
0899999 Accrued medical incentive pool and bonus amounts	XXX	XXX	XXX	XXX	XXX	677,382

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	6
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
1. Comprehensive (hospital and medical) individual	29,129,938	125,070,260	6,757,728	33,170,375	35,887,666	38,077,335
2. Comprehensive (hospital and medical) group					0	0
3. Medicare Supplement					0	0
4. Vision only					0	0
5. Dental only					0	0
6. Federal Employees Health Benefits Plan					0	0
7. Title XVIII - Medicare					0	0
8. Title XIX - Medicaid					0	0
9. Credit A&H					0	0
10. Disability income					0	0
11. Long-term care					0	0
12. Other health					0	0
13. Health subtotal (Lines 1 to 12)	29,129,938	125,070,260	6,757,728	33,170,375	35,887,666	38,077,335
14. Health care receivables (a)		3,083,207			0	0
15. Other non-health					0	0
16. Medical incentive pools and bonus amounts	346,438	97,106	215,479	461,903	561,917	404,272
17. Totals (Lines 13-14+15+16)	29,476,376	122,084,159	6,973,207	33,632,278	36,449,583	38,481,607

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

NOTES TO FINANCIAL STATEMENT

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of WellCare Health Plans of Kentucky, Inc. (the "Company"), domiciled in the State of Kentucky, are presented on the basis of accounting practices prescribed or permitted by the Kentucky Department of Insurance, (the "Department").

The Department recognizes only statutory accounting practices prescribed or permitted by the State of Kentucky for determining and reporting the financial condition, results of operations, and cash flow of an insurance company for determining its solvency under Kentucky insurance law. The National Association of Insurance Commissioners' ("NAIC") Accounting Practices and Procedures manual, ("NAIC SAP") has been adopted as a component of prescribed or permitted practices by the State of Kentucky.

A reconciliation of the Company's net loss and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Kentucky is shown below:

		SSAP #	F/S Page	F/S Line #	2026	2025
	NET LOSS					
1	Company state basis (Page 4, Line 32, Columns 2 & 4)	xxx	4	32	$ (5,771,138)	$ (43,011,401)
2	State Prescribed Practices that are an increase/(decrease) from NAIC SAP: None	—	—	—	-	-
3	State Permitted Practices that are an increase/(decrease) from NAIC SAP: None	—	—	—	-	-
4	NAIC SAP (1-2-3=4)	xxx	xxx	xxx	$ (5,771,138)	$ (43,011,401)
	SURPLUS					
5	Company state basis (Page 3, Line 33, Columns 3 & 4)	xxx	3	33	$ 52,577,329	$ 37,196,921
6	State Prescribed Practices that are an increase/(decrease) from NAIC SAP: None	—	—	—	-	-
7	State Permitted Practices that are an increase/(decrease) from NAIC SAP: None	—	—	—	-	-
8	NAIC SAP (5-6-7=8)	xxx	xxx	xxx	$ 52,577,329	$ 37,196,921

B. Uses of Estimates in the Preparation of the Financial Statements - No significant change.

C. Accounting Policy - No significant change.

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

2. Accounting Changes and Corrections of Errors

No significant change.

3. Business Combinations and Goodwill

No significant change.

4. Discontinued Operations

No significant change.

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans - No significant change.

B. Debt Restructuring - No significant change.

C. Reverse Mortgages - No significant change.

D. Asset-Backed Securities - None

E. The Company's policy for dollar repurchase agreements require a minimum of 100% of the fair value of securities purchases agreements to be maintained as collateral. There were no dollar repurchase arrangements outstanding for the period ended June 30, 2026.

F. Repurchase Agreement Transactions Accounted for as Secured Borrowing - None

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing - None

H. Repurchase Agreements Transactions Accounted for as a Sale - None

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale - None

J. Real Estate - No significant change.

K. Low-Income Housing Tax Credits ("LIHTC") - No significant change.

L. Restricted Assets (including Pledged) - No significant change.

M. Working Capital Finance Investments - None

N. Offsetting and Netting of Assets and Liabilities - None

O. 5* GI Securities - No significant change.

P. Short Sales - No significant change.

Q. Prepayment Penalty and Acceleration Fees - No significant change.

R. Reporting Entity's Share of Cash Pool by Asset Type - None

6. Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

7. Investment Income

No significant change.

8. Derivative Instruments

None

9. Income Taxes

No significant change.

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

Capital Contribution - In 2026 and 2025, the Company received a capital contribution of $20,000,000 and $63,600,000, respectively, from its affiliated management company, Centene Management Company, LLC.

11. Debt

A. Debt - No significant change.

B. Federal Home Loan Bank Agreements - None

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

None

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

No significant change.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments - No significant change.

B. Assessments - No significant change.

C. Gain Contingencies - No significant change.

D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming From Lawsuits - No significant change.

E. Joint and Several Liabilities - No significant change.

F. All Other Contingencies - No significant change.

15. Leases

No significant change.

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

No significant change.

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

A. Transfers of Receivables Reported as Sales - No significant change.

B. Transfer and Servicing of Financial Assets - None

C. Wash Sales - None

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

No significant change.

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

No significant change.

20. Fair Value Measurements

A. Assets and liabilities recorded at fair value in the statutory statement of admitted assets, liabilities and capital and surplus are categorized based upon the extent to which the fair value estimates are based upon observable or unobservable inputs. Level inputs are as follows:

Level input	Input definition
Level I	Inputs are unadjusted, quoted prices for identical assets or liabilities in active markets at the measurement date.
Level II	Inputs other than quoted prices included in Level I that are observable for the asset or liability through corroboration with market data at the measurement date.
Level III	Unobservable inputs that reflect management's best estimate of what market participants would use in pricing the asset or liability at the measurement date.

1. The following table summarizes fair value measurements by level at June 30, 2026, for assets and liabilities measured at fair value.

Description of each class of asset or liability	Level 1	Level 2	Level 3	(NAV)	Total
a. Assets at fair value					
Cash, cash equivalents and short-term investments	$ 113,461,893	$ -	$ -	$ -	$ 113,461,893
Bonds					
Issuer credit obligations	$ -	$ -	$ -	$ -	$ -
Asset-backed securities	-	-	-	-	-
Total Bonds	$ -	$ -	$ -	$ -	$ -
Common stock					
Parent, subsidiaries and affiliates	$ -	$ -	$ -	$ -	$ -
Total Common stock	$ -	$ -	$ -	$ -	$ -
Derivatives assets	$ -	$ -	$ -	$ -	$ -
Total Derivatives assets	$ -	$ -	$ -	$ -	$ -
Separate account assets	$ -	$ -	$ -	$ -	$ -
Total assets at fair value	$ 113,461,893	$ -	$ -	$ -	$ 113,461,893
b. Liabilities at fair value					
Separate account liabilities	$ -	$ -	$ -	$ -	$ -
Total liabilities at fair value	$ -	$ -	$ -	$ -	$ -

B. Fair Value Disclosures Under Other Pronouncements - None

NOTES TO FINANCIAL STATEMENT

C. Aggregate Fair Value for all Financial Instruments

The following table summarizes fair value measurements by level at June 30, 2026, for all financial instruments:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Cash and cash equivalents	$ 113,461,893	$ 113,461,893	$ 113,461,893	$ -	$ -	$ -	$ -
Issuer credit obligations	523,113	528,178	523,113	-	-	-	-

D. Unable to Estimate Fair Value - None

E. Assets Measured at Net Asset Value - None

21. Other Items

A. Extraordinary Items - No significant change.

B. Troubled Debt Restructuring - No significant change.

C. Other Disclosures and Unusual Items - No significant change.

D. Business Interruption Insurance Recoveries - No significant change.

E. State Transferable and Non-Transferable Tax Credits - No significant change.

F. Subprime Mortgage Related Risk Exposure - No significant change.

G. Retained Assets - No significant change.

H. Insurance-Linked Securities (“ILS”) Contracts - No significant change.

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 - No significant change.

22. Events Subsequent

In connection with the preparation of the statutory-basis financial statements, the Company evaluated subsequent events after the statutory-basis statements of admitted assets, liabilities, and capital and surplus date of June 30, 2026, through August 7, 2026, which was the date the statutory-basis financial statements were issued.

23. Reinsurance

No significant change.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. The Company estimates accrued retrospective premiums for its comprehensive individual health insurance business in accordance with the regulations put forth in Title 45 of the Code of Federal Regulations Part 153, Subpart F for the Administrative Care Act ("ACA") Risk Corridors program and Title 45 of the Code of Federal Regulations Part 158 for the ACA Medical Loss Ratio ("MLR") Rebate program.

B. The Company records accrued retrospective premium as an adjustment to earned premiums.

C. The amount of net premiums written by the Company at June 30, 2026, that are subject to retrospective rating features was $181,513,123 or 100% of the total net premiums written.

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

NOTES TO FINANCIAL STATEMENT

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

E. Risk-Sharing Provisions of the ACA

1) Did the reporting entity write accident and health insurance premium that is subject to the ACA risk-sharing provisions (YES/NO)?
YES

2) Impact of Risk-Sharing Provisions of the ACA on admitted assets, liabilities, and revenue for the Current Year

a) Permanent ACA Risk Adjustment Program

Assets	
1. Premium adjustments receivable due to ACA Risk Adjustment	$ -
Liabilities	
2. Risk adjustment user fees payable for ACA Risk Adjustment	$ 139,384
3. Premium adjustments payable due to ACA Risk Adjustment	$ 13,061,588
Operations (Revenue & Expense)	
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk adjustment	$ 1,364,798
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	$ 46,479

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

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
					Prior Year Accrued Less Payments (Col 1-3)	Prior Year Accrued Less Payments (Col. 2-4)	To Prior Year Balances	To Prior Year Balances	Ref	Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col. 2-4+8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)		Receivable	(Payable)
a) Permanent ACA Risk Adjustment Program											
1) Premium adjustments receivable	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	A	$ -	$ -
2) Premium adjustments (payable)	$ -	$ (14,426,385.85)	$ -	$ -	$ -	$ (14,426,385.85)	$ -	$ 2,168,561.02	B	$ -	$ (12,257,825)
3) Subtotal ACA Permanent Risk Adjustment Program	$ -	$ (14,426,385.85)	$ -	$ -	$ -	$ (14,426,385.85)	$ -	$ 2,168,561.02		$ -	$ (12,257,825)

A & B - Adjustments due to updated 2025 transfers liabilities and RADV transfer liabilities driven by final CMS announcements

25. Change in Incurred Claims Expenses

A. Reserves for unpaid claims as of December 31, 2025 were $38,481,607. As of June 30, 2026, $29,476,375 has been paid for incurred claims attributable to insured events of prior years. Reserves remaining for prior years are now $6,973,207 as a result of re-estimation of unpaid claims. Therefore, there has been $2,032,024 favorable prior-year development since December 31, 2025. The increase or decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

B. There were no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses for the most recent reporting period presented.

26. Intercompany Pooling Arrangements

No significant change.

27. Structured Settlements

No significant change.

28. Health Care Receivables

No significant change.

29. Participating Policies

No significant change.

30. Premium Deficiency Reserves

The following table summarizes the Company's premium deficiency reserves as of June 30, 2026:

1. Liability carried for premium deficiency reserves	$	11,221,419
2. Date of most recent evaluation of this liability		July 31, 2026
3. Was anticipated investment income utilized in the calculation?		Yes

31. Anticipated Salvage and Subrogation

No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? ..... Yes [X] No [ ]

1.2 If yes, has the report been filed with the domiciliary state? ..... Yes [X] 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]

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. 12/31/2022

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. 12/31/2022

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). 07/03/2024

6.4 By what department or departments?
Kentucky 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 [ ] No [ ] NA [X]

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

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 [X] 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 [X]

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

.....

9.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [ ] No [X]

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

.....

FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?..... Yes [X] No [ ]

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

GENERAL INTERROGATORIES

INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) ..... Yes [ ] No [X]

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

.....

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

13.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? ..... Yes [ ] No [X]

13.2 If yes, please complete the following:

		1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
13.21	Bonds	$ 0	$ 0
13.22	Preferred Stock	$ 0	$ 0
13.23	Common Stock	$ 0	$ 0
13.24	Short-Term Investments	$ 0	$ 0
13.25	Mortgage Loans on Real Estate	$ 0	$ 0
13.26	All Other	$ 0	$ 0
13.27	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 13.21 to 13.26)	$ 0	$ 0
13.28	Total Investment in Parent included in Lines 13.21 to 13.26 above	$ 0	$ 0

14.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? ..... Yes [ ] No [X]

14.2 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.

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

15.1	Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	$ 0
15.2	Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	$ 0
15.3	Total payable for securities lending reported on the liability page	$ 0

16. 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 [X]

16.1 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

16.2 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)

16.3 Have there been any changes, including name changes, in the custodian(s) identified in 16.1 during the current quarter? ..... Yes [ ] No [X]

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

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

16.5 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. This includes both primary and sub-advisors. 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

16.5097 For those firms/individuals listed in the table for Question 16.5, 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 [ ] NA [X]

16.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 16.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets? Yes [ ] No [ ] NA [X]

16.6 For those firms or individuals listed in the table for 16.5 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 Registered With	4 Investment Management Agreement (IMA) Filed

17.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed? ..... Yes [X] No [ ]

17.2 If no, list exceptions:

.....

18. 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 [X]

19. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the Purposes and Procedures Manual of the NAIC Investment Analysis Office (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:

a. The security was either:
   i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or
   ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.

GENERAL INTERROGATORIES

c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.

Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual?.... Yes [ ] No [X]

20. 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	90.9 %
1.2 A&H cost containment percent	0.0 %
1.3 A&H expense percent excluding cost containment expenses	11.6 %
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 [ ] No [X]
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]

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Type of Reinsurer	9 Certified Reinsurer Rating (1 through 6)	10 Effective Date of Certified Reinsurer Rating
			NONE						

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 Plan Premiums	7 Life & Annuity Premiums & Other Considerations	8 Property/ Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts
1. Alabama AL	N								0	
2. Alaska AK	N								0	
3. Arizona AZ	N								0	
4. Arkansas AR	N								0	
5. California CA	N								0	
6. Colorado CO	N								0	
7. Connecticut CT	N								0	
8. Delaware DE	N								0	
9. Dist. Columbia DC	N								0	
10. Florida FL	N								0	
11. Georgia GA	N								0	
12. Hawaii HI	N								0	
13. Idaho ID	N								0	
14. Illinois IL	N								0	
15. Indiana IN	N								0	
16. Iowa IA	N								0	
17. Kansas KS	N								0	
18. Kentucky KY	L	181,513,123							181,513,123	
19. Louisiana LA	N								0	
20. Maine ME	N								0	
21. Maryland MD	N								0	
22. Massachusetts MA	N								0	
23. Michigan MI	N								0	
24. Minnesota MN	N								0	
25. Mississippi MS	N								0	
26. Missouri MO	N								0	
27. Montana MT	N								0	
28. Nebraska NE	N								0	
29. Nevada NV	N								0	
30. New Hampshire NH	N								0	
31. New Jersey NJ	N								0	
32. New Mexico NM	N								0	
33. New York NY	N								0	
34. North Carolina NC	N								0	
35. North Dakota ND	N								0	
36. Ohio OH	N								0	
37. Oklahoma OK	N								0	
38. Oregon OR	N								0	
39. Pennsylvania PA	N								0	
40. Rhode Island RI	N								0	
41. South Carolina SC	N								0	
42. South Dakota SD	N								0	
43. Tennessee TN	N								0	
44. Texas TX	N								0	
45. Utah UT	N								0	
46. Vermont VT	N								0	
47. Virginia VA	N								0	
48. Washington WA	N								0	
49. West Virginia WV	N								0	
50. Wisconsin WI	N								0	
51. Wyoming WY	N								0	
52. American Samoa AS	N								0	
53. Guam GU	N								0	
54. Puerto Rico PR	N								0	
55. U.S. Virgin Islands VI	N								0	
56. Northern Mariana Islands MP	N								0	
57. Canada CAN	N								0	
58. Aggregate other alien OT	XXX	0	0	0	0	0	0	0	0	0
59. Subtotal	XXX	181,513,123	0	0	0	0	0	0	181,513,123	0
60. Reporting entity contributions for employee benefit plans	XXX								0	
61. Total (direct business)	XXX	181,513,123	0	0	0	0	0	0	181,513,123	0
DETAILS OF WRITE-INS										
58001.	XXX									
58002.	XXX									
58003.	XXX									
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX	0	0	0	0	0	0	0	0	0

(a) Active Status Counts

1. L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG 1
2. R – Registered – Non-domiciled RRGs 0
3. E – Eligible – Reporting entities eligible or approved to write surplus lines in the state 0
4. Q – Qualified – Qualified or accredited reinsurer 0
5. N – None of the above – Not allowed to write business in the state 56

STATEMENT AS OF JUNE 30, 2026 OF THE WellCare Health Plans of Kentucky, Inc.

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	
		Health Plan Real Estate Holding II, Inc. (5.22%)								42-2483231	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	
		Health Plan Real Estate Holding II, Inc. (7.83%)								42-2483231	MO	
	Coordinated Care Corporation									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	
	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. (50%)								20-8937577	FL	13148

STATEMENT AS OF JUNE 30, 2026 OF THE WellCare Health Plans of Kentucky, Inc.

	Healthy Missouri Holdings, Inc.								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	
	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
	Health Plan Real Estate Holding II, Inc. (5.22%)								42-2483231	MO	
	Pennsylvania Health & Wellness, Inc.								47-5340613	PA	16041
	Ambetter Health of Pennsylvania, Inc.								33-3859301	PA	17832
	Health Plan Real Estate Holding II, Inc. (15.67%)								42-2483231	MO	
	Sunshine Health Community Solutions, Inc.								47-5667095	VA	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
	Bridgeway Health Solutions, LLC								20-4980875	DE	
	Bridgeway Health Solutions of Arizona, Inc.								20-4980818	AZ	16310
	Celtic Group, Inc.								36-2979209	DE	

STATEMENT AS OF JUNE 30, 2026 OF THE WellCare Health Plans of Kentucky, Inc.

		Celtic Insurance Company							06-0641618	IL	80799
			Ambetter of Magnolia Inc.						35-2525384	MS	15762
			Ambetter of Peach State Inc.						36-4802632	GA	15729
			Health Plan Real Estate Holding II, Inc. (26.11%)						42-2483231	MO	
		Ambetter Health of Louisiana, Inc.							92-3523808	LA	17514
		Novasys Health, Inc.							27-2221367	DE	
	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	
		Illinois Health Practice Alliance, LLC (50%)							82-2761995	DE	
	Lifeshare Management Group, LLC								46-2798132	NH	
	Envolve Holdings, LLC								22-3889471	DE	
		Cenpatico Behavioral Health, LLC							68-0461584	CA	
		Envolve, Inc.							37-1788565	DE	
		Envolve Benefit 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 of Florida, Inc.					65-0094759	FL	
				Envolve Total Vision, Inc.					20-4861241	DE	
			Envolve Dental, Inc.						46-2783884	DE	
				Envolve Dental of Florida, Inc.					81-2969330	FL	
				Envolve Dental of Texas, Inc.					81-2796896	TX	16106

		Centene Pharmacy Services, Inc.							77-0578529	DE	
	Specialty Therapeutic Care Holdings, LLC								27-3617766	DE	
		Presonyx, 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, Inc.						13-4262384	CA	
			Homescripts.Com, LLC						27-3707698	MI	
			Foundation Care LLC						20-0873587	MO	
			AcariaHealth Pharmacy #26, Inc.						20-8420512	DE	
	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	CJ	
			MEB Ventures II, LLC						83-1570018	DE	
				BLR Properties, LLC (80%)					83-1576137	DE	
		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	
			Network Providers, LLC						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

		Health Net Community Solutions of Arizona, Inc.						81-1348826	AZ	15895
	Centene Health Plan Holdings, Inc.							82-1172163	DE	
		Ambetter of North Carolina, Inc.						82-5032556	NC	16395
		Carolina Complete Health Holding Company, LLC (80%)						82-2699483	DE	
			Carolina Complete Health, Inc.					82-5488080	NC	16547
	New York Quality Healthcare Corporation							82-3380290	NY	16352
		WellCare of Connecticut, Inc.						06-1405640	CT	95310
	Community Medical Holdings Corp.							47-4179393	DE	
		Access Medical Acquisition, LLC						46-3485489	DE	
			Access Medical Group of North Miami Beach, LLC					45-3191569	FL	
			Access Medical Group of Miami, LLC					45-3191719	FL	
			Access Medical Group of Hialeah, LLC					45-3192283	FL	
			Access Medical Group of Westchester, LLC					45-3199819	FL	
			Access Medical Group of Opa-Locka, LLC					45-3505196	FL	
			Access Medical Group of Perrine, LLC					45-3192955	FL	
			Access Medical Group of Florida City, LLC					45-3192366	FL	
			Access Medical Group of Tampa, LLC					82-1737078	FL	
			Access Medical Group of Tampa II, LLC					82-1750978	FL	
			Access Medical Group of Tampa III, LLC					82-1773315	FL	
			Access Medical Group of Lakeland, LLC					84-2750188	FL	
			Access Medical Group of Pembroke Pines, LLC					88-2251274	FL	
			Access Medical Group of Margate, LLC					88-2263310	FL	
			Access Medical Group of Riverview, LLC					88-2284518	FL	
			Access Medical Group of Kendall, LLC					92-0235557	FL	
			Access Medical Group of Lauderdale Lakes, LLC					92-0261029	FL	

STATEMENT AS OF JUNE 30, 2026 OF THE WellCare Health Plans of Kentucky, Inc.

			Access Medical Group of Sand Lake, LLC							33-2792794	FL	
			Access Medical Group of Miami Medicare, LLC							39-2435871	FL	
			Access Medical Group of Hillsborough Peds, LLC							39-2463326	FL	
	Interpreta Holdings, Inc. (80.1%)									82-4883921	DE	
		Interpreta, Inc.								46-5517858	DE	
	Next Door Neighbors, LLC									32-2434596	DE	
		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	16990
			Centene Venture Company Michigan							83-2446307	MI	16613
	Comprehensive Health Management, LLC									59-3547616	FL	
	WellCare Health Plans, Inc.									83-4405939	DE	
		WCG Health Management, Inc.								04-3669698	DE	
			The WellCare Management Group, Inc.							14-1647239	NY	
				WellCare of Mississippi, Inc.						81-5442932	MS	16329
				WellCare of Oklahoma, Inc.						81-3299281	OK	16117
				WellCare Health Insurance Company of Nevada, Inc.						84-3731013	NV	
				WellCare Health Insurance of the Southwest, Inc.						84-3739752	AZ	16692
				WellCare of Georgia, Inc.						20-2103320	GA	10760
				WellCare of Texas, Inc.						20-8058761	TX	12964

STATEMENT AS OF JUNE 30, 2026 OF THE WellCare Health Plans of Kentucky, Inc.

				WellCare of South Carolina, Inc.					32-0062883	SC	11775
				WellCare Health Plans of New Jersey, Inc.					20-8017319	NJ	13020
				WellCare Health Plans of Massachusetts, Inc.					84-3547689	MA	16970
				WellCare Health Insurance Company of Oklahoma, Inc.					84-4449030	OK	16752
				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	17002
				WellCare Health Plans of Rhode Island, Inc.					84-4627844	RI	16766
				WellCare of Illinois, Inc.					84-4649985	IL	16765
				Rhythm Health Tennessee, Inc.					45-5154364	TN	16533
				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	
						Health Plan Real Estate Holding II, Inc. (8.62%)			42-2483231	MO	
				WellCare Health Insurance of Tennessee, Inc.					83-2276159	TN	16532
				WellCare of New Hampshire, Inc.					83-2914327	NH	16515
				WellCare of Iowa, Inc.					83-2255514	IA	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	

STATEMENT AS OF JUNE 30, 2026 OF THE WellCare Health Plans of Kentucky, Inc.

					Harmony Health Plan, Inc.					36-4050495	IL	11229
				WellCare Health Insurance Company of Kentucky, Inc.						36-6069295	KY	64467
					Health Plan Real Estate Holding II, Inc. (7.83%)					42-2483231	MO	
				WellCare Health Insurance of Arizona, Inc.						86-0269558	AZ	83445
				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
				One Care by Care1st Health Plan of Arizona, Inc.						06-1742685	AZ	
				WellCare Health Insurance Company of Washington, Inc.						83-3166908	WA	16570
				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
				WellCare of Michigan Holding Company						26-4004578	MI	
					Meridian Health Plan of Michigan, Inc.					38-3253977	MI	52563
						Health Plan Real Estate Holding II, Inc. (7.83%)				42-2483231	MO	
					Meridian Health Plan of Illinois, Inc.					20-3209671	IL	13189
						Health Plan Real Estate Holding II, Inc. (15.67%)				42-2483231	MO	
				Sunshine State Health Plan, Inc. (50%)						20-8937577	FL	13148
				Universal American Corp.						27-4683816	DE	
					Universal American Holdings, LLC					45-1352914	DE	
						American Progressive Life and Health Insurance Company of New York				13-1851754	NY	80624
						Heritage Health Systems, Inc.				62-1517194	TX	
							SelectCare of Texas, Inc.			62-1819658	TX	10096
							Heritage Health Systems of Texas, Inc.			76-0459857	TX	

STATEMENT AS OF JUNE 30, 2026 OF THE WellCare Health Plans of Kentucky, Inc.

	QCA Health Plan, Inc.									71-0794605	AR	95448
	Qualchoice Life and Health Insurance Company, Inc.									71-0386640	AR	70998
	District Community Care, Inc.									84-4119570	DC	16814
	Oklahoma Complete Health Holding Company, LLC									86-2318658	DE	
		Oklahoma Complete Health, Inc.								81-3121527	OK	16904
	RI Health & Wellness, Inc.									86-2694770	RI	
	Delaware First Health, Inc.									88-3410060	DE	
	Delaware First Health Complete, Inc.									88-4145615	DE	
	Magellan Health, Inc.									58-1076937	DE	
		Magellan Pharmacy Services, Inc.								47-5588795	DE	
			Magellan Behavioral Health of New Jersey, LLC							52-2310906	NJ	12632
			Magellan Health Services of California, Inc. - Employer Services							95-2868243	CA	
		Magellan Healthcare, Inc.								52-2135463	DE	
			Human Affairs International of California							93-0999350	CA	
			Magellan Complete Care of Louisiana, Inc.							46-4188169	LA	15550
			Magellan Behavioral Health of Florida, Inc.							20-1919978	FL	
			Magellan Health Services of Arizona, Inc.							20-1728452	AZ	
			Magellan of Idaho, LLC							85-4065417	ID	
			Magellan Complete Care of Pennsylvania, Inc.							46-4457706	PA	15924
			Magellan Life Insurance Company							57-0724249	DE	97292
			Merit Behavioral Care Corporation							22-3236927	DE	
				Magellan Providers of Texas, Inc.						76-0513383	TX	
				Magellan Behavioral Health of Pennsylvania, Inc.						23-2759528	PA	47019
			Magellan Behavioral of Michigan, Inc.							52-1946167	MI	
			Magellan of Maryland, LLC							92-0642038	MD	

STATEMENT AS OF JUNE 30, 2026 OF THE WellCare Health Plans of Kentucky, Inc.

	Magnolia Joint Venture Holding Company, Inc.								92-0679069	DE	
	Ambetter Health of Texas, Inc.								33-1995487	TX	17804
	Ambetter Health of Florida, Inc.								33-2010592	FL	17793
	Idaho Complete Health, Inc.								39-4149441	ID	
	Ambetter Health of California, Inc.								41-2541685	CA	
	Ambetter Health Solutions of Pennsylvania, Inc.								41-3157902	PA	
	Ambetter Health Insurance of Utah, Inc.								41-3198544	UT	
	Ambetter Health of Kentucky, Inc.								41-3995057	KY	

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
01295	Centene Corporation	00000	42-1406317		0001071739	New York Stock Exchange	Centene Corporation	DE	UIP	Shareholders/Board of Directors	Shareholders/Board of Directors	100.0	Centene Corporation	NO	0
01295	Centene Corporation	71013	39-0993433				Bankers Reserve Life Insurance Company of Wisconsin	WI	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Bankers Reserve Life Insurance Company of Wisconsin	Ownership	17.0	Centene Corporation	YES	0
01295	Centene Corporation	12315	20-3174593				Peach State Health Plan, Inc.	GA	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Peach State Health Plan, Inc.	Ownership	21.0	Centene Corporation	YES	0
01295	Centene Corporation	00000	42-2483231				Health Plan Real Estate Holding II, Inc.	MO	NIA	Peach State Health Plan, Inc.	Ownership	5.2	Centene Corporation	YES	0
01295	Centene Corporation	15713	46-4829006				Iowa Total Care, Inc.	IA	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	11834	32-0045282				Buckeye Community Health Plan, Inc.	OH	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Buckeye Community Health Plan, Inc.	Ownership	18.0	Centene Corporation	YES	0
01295	Centene Corporation	12959	20-5693998				Absolute Total Care, Inc.	SC	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Absolute Total Care, Inc.	Ownership	1.0	Centene Corporation	YES	0
01295	Centene Corporation	00000	42-2483231				Health Plan Real Estate Holding II, Inc.	MO	NIA	Absolute Total Care, Inc.	Ownership	7.8	Centene Corporation	YES	0
01295	Centene Corporation	95831	39-1821211				Coordinated Care Corporation	IN	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Coordinated Care Corporation	Ownership	15.0	Centene Corporation	YES	0
01295	Centene Corporation	00000	46-5523218				Healthy Washington Holdings, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	15352	46-2578279				Coordinated Care of Washington, Inc.	WA	IA	Healthy Washington Holdings, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	96822	39-1678579				Managed Health Services Insurance Corp.	WI	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Managed Health Services Insurance Corp.	Ownership	2.0	Centene Corporation	YES	0
01295	Centene Corporation	95647	74-2770542				Superior HealthPlan, Inc.	TX	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Superior HealthPlan, Inc.	Ownership	21.0	Centene Corporation	YES	0
01295	Centene Corporation	00000	27-0916294				Healthy Louisiana Holdings LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	13970	27-1287287				Louisiana Healthcare Connections, Inc.	LA	IA	Healthy Louisiana Holdings LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	13923	20-8570212				Magnolia Health Plan Inc.	MS	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
01295	Centene Corporation	00000	26-0557093				Sunshine Health Holding LLC	FL	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	13148	20-8937577				Sunshine State Health Plan, Inc.	FL	IA	Sunshine Health Holding LLC	Ownership	50.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	45-5070230				Healthy Missouri Holding, Inc.	MO	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	14218	45-2798041				Home State Health Plan, Inc.	MO	IA	Healthy Missouri Holding, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Home State Health Plan, Inc.	Ownership	5.0	Centene Corporation	YES	0
01295	Centene Corporation	14345	45-3276702				Sunflower State Health Plan, Inc.	KS	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	14226	45-4792498				Granite State Health Plan, Inc.	NH	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	46-0907261				California Health and Wellness Plan	CA	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16351	45-5583511				Western Sky Community Care, Inc.	NM	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	26-1849394				Tennessee Total Care, Inc.	TN	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16143	20-4761189				SilverSummit Healthplan, Inc.	NV	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	22-3292245				University Health Plans, Inc.	NJ	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	20-0483299				Agate Resources, Inc.	OR	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	12559	42-1694349				Trillium Community Health Plan, Inc.	OR	IA	Agate Resources, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	15902	47-5123293				Nebraska Total Care, Inc.	NE	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	42-2483231				Health Plan Real Estate Holding II, Inc.	MO	NIA	Nebraska Total Care, Inc.	Ownership	5.2	Centene Corporation	YES	0
01295	Centene Corporation	16041	47-5340613				Pennsylvania Health & Wellness, Inc.	PA	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	17832	33-3859301				Ambetter Health of Pennsylvania, Inc.	PA	IA	Pennsylvania Health & Wellness, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	42-2483231				Health Plan Real Estate Holding II, Inc.	MO	NIA	Pennsylvania Health & Wellness, Inc.	Ownership	15.7	Centene Corporation	YES	0
01295	Centene Corporation	15927	47-5667095				Sunshine Health Community Solutions, Inc.	VA	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16112	47-5664342				Buckeye Health Plan Community Solutions, Inc.	OH	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16130	81-1282251				Arkansas Health & Wellness Health Plan, Inc.	AR	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	38-4042368				Arkansas Total Care Holding Company, LLC	DE	NIA	Arkansas Health & Wellness Health Plan, Inc.	Ownership	49.0	Centene Corporation	NO	0
01295	Centene Corporation	16256	82-2649097				Arkansas Total Care, Inc.	AR	IA	Arkansas Total Care Holding Company, LLC	Ownership	100.0	Centene Corporation	NO	0

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01295	Centene Corporation	00000	20-4980875				Bridgeway Health Solutions, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16310	20-4980818				Bridgeway Health Solutions of Arizona Inc.	AZ	IA	Bridgeway Health Solutions, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	36-2979209				Celtic Group, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	80799	06-0641618				Celtic Insurance Company	IL	IA	Celtic Group, Inc	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	15762	35-2525384				Ambetter of Magnolia Inc.	MS	IA	Celtic Insurance Company	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	15729	36-4802632				Ambetter of Peach State Inc.	GA	IA	Celtic Insurance Company	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	42-2483231				Health Plan Real Estate Holding II, Inc.	MO	NIA	Celtic Insurance Company	Ownership	26.1	Centene Corporation	YES	0
01295	Centene Corporation	17514	92-3523808				Ambetter Health of Louisiana, Inc.	LA	IA	Celtic Group, Inc	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	27-2221367				Novasys Health, Inc.	DE	NIA	Celtic Group, Inc	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	39-1864073				Centene Management Company LLC	WI	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	20-0057283				CMC Real Estate Company, LLC	DE	NIA	Centene Management Company LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	26-4094682				Centene Center LLC	DE	NIA	CMC Real Estate Company LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	82-1816153				Centene Center I, LLC	DE	NIA	CMC Real Estate Company LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	47-5156015				Centene Center II, LLC	DE	NIA	CMC Real Estate Company LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	82-2761995				Illinois Health Practice Alliance, LLC	DE	NIA	Centene Management Company LLC	Ownership	50.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	46-2798132				Lifeshare Management Group, LLC	NH	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	22-3889471				Envolve Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	68-0461584				Cenpatico Behavioral Health, LLC	CA	NIA	Envolve Holdings, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	37-1788565				Envolve, Inc.	DE	NIA	Envolve Holdings, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	61-1846191				Envolve Benefits Options, Inc.	DE	NIA	Envolve Holdings, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	20-4730341				Envolve Vision Benefits, Inc	DE	NIA	Envolve Benefits Options, Inc	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	95302	75-2592153				Envolve Vision of Texas, Inc.	TX	IA	Envolve Vision Benefits, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	20-4773088				Envolve Vision, Inc.	DE	NIA	Envolve Vision Benefits, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	65-0094759				Envolve Vision of Florida, Inc.	FL	NIA	Envolve Vision Benefits, Inc.	Ownership	100.0	Centene Corporation	NO	0

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01295	Centene Corporation	00000	20-4861241				Envolve Total Vision, Inc.	DE	NIA	Envolve Vision Benefits, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	46-2783884				Envolve Dental, Inc.	DE	NIA	Envolve Benefits Options, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	81-2969330				Envolve Dental of Florida, Inc.	FL	NIA	Envolve Dental, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16106	81-2796896				Envolve Dental of Texas, Inc.	TX	IA	Envolve Dental, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	77-0578529				Centene Pharmacy Services, Inc.	DE	NIA	Envolve Holdings, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	27-3617766				Specialty Therapeutic Care Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	80-0856383				Presonyx, Inc.	DE	NIA	Specialty Therapeutic Care Holdings, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	45-2780334				AcariaHealth, Inc.	DE	NIA	Specialty Therapeutic Care Holdings, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	27-1599047				AcariaHealth Pharmacy #14, Inc.	CA	NIA	AcariaHealth, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	20-8192615				AcariaHealth Pharmacy #11, Inc.	TX	NIA	AcariaHealth, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	27-2765424				AcariaHealth Pharmacy #12, Inc.	NY	NIA	AcariaHealth, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	13-4262384				AcariaHealth Pharmacy, Inc.	CA	NIA	AcariaHealth, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	27-3707698				HomeScripts.com, LLC	MI	NIA	AcariaHealth, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	20-0873587				Foundation Care LLC	MO	NIA	AcariaHealth, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	20-8420512				AcariaHealth Pharmacy #26, Inc.	DE	NIA	AcariaHealth, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	47-5208076				Health Net, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	95-4402957				Health Net of California, Inc.	CA	NIA	Health Net, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	66141	73-0654885				Health Net Life Insurance Company	CA	IA	Health Net of California, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	98-0409907				Health Net Life Reinsurance Company	CYM	NIA	Health Net of California, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	83-1570018				MEB Ventures II, LLC	DE	NIA	Health Net of California, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	83-1576137				BLR Properties, LLC	DE	NIA	MEB Ventures II, LLC	Ownership	80.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	95-4117722				Managed Health Network, LLC	DE	NIA	Health Net, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	95-3817988				Managed Health Network	CA	NIA	Managed Health Network, LLC	Ownership	100.0	Centene Corporation	NO	0

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01295	Centene Corporation	00000	95-4146179				MHN Services, LLC	CA	NIA	Managed Health Network, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	68-0214809				Health Net Federal Services, LLC	DE	NIA	Health Net, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	88-0357895				Network Providers, LLC	DE	NIA	Health Net Federal Services, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	95800	93-1004034				Health Net Health Plan of Oregon, Inc.	OR	IA	Health Net, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	54-2174068				Health Net Community Solutions, Inc.	CA	NIA	Health Net, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	95206	36-3097810				Health Net of Arizona, Inc.	AZ	IA	Health Net, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	15895	81-1348826				Health Net Community Solutions of Arizona, Inc.	AZ	IA	Health Net, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	82-1172163				Centene Health Plan Holdings, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16395	82-5032556				Ambetter of North Carolina, Inc.	NC	IA	Centene Health Plan Holdings, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	82-2699483				Carolina Complete Health Holding Company, LLC	DE	NIA	Centene Health Plan Holdings, Inc.	Ownership	80.0	Centene Corporation	NO	0
01295	Centene Corporation	16547	82-5488080				Carolina Complete Health, Inc.	NC	IA	Carolina Complete Health Holding Company, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16352	82-3380290				New York Quality Healthcare Corporation	NY	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	95310	06-1405640				WellCare of Connecticut, Inc.	CT	IA	New York Quality Healthcare Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	47-4179393				Community Medical Holdings Corp.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	46-3485489				Access Medical Acquisition, LLC	DE	NIA	Community Medical Holdings Corp.	Ownership	100.0	Centene Corporation	NO	0
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	NO	0
01295	Centene Corporation	00000	45-3191719				Access Medical Group of Miami, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	45-3192283				Access Medical Group of Hialeah, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	45-3199819				Access Medical Group of Westchester, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	45-3505196				Access Medical Group of Opa-Locka, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	45-3192955				Access Medical Group of Perrine, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	45-3192366				Access Medical Group of Florida City, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	82-1737078				Access Medical Group of Tampa, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	82-1750978				Access Medical Group of Tampa II, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0

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01295	Centene Corporation	00000	82-1773315				Access Medical Group of Tampa III, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	84-2750188				Access Medical Group of Lakeland, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	88-2251274				Access Medical Group of Pembroke Pines, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	88-2263310				Access Medical Group of Margate, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	88-2284518				Access Medical Group of Riverview, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	92-0235557				Access Medical Group of Kendall, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	92-0261029				Access Medical Group of Lauderdale Lakes, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	33-2792794				Access Medical Group of Sand Lake, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	39-2435871				Access Medical Group of Miami Medicare, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	39-2463326				Access Medical Group of Hillsborough Peds, LLC	FL	NIA	Access Medical Acquisition, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	82-4883921				Interpreta Holdings, Inc.	DE	NIA	Centene Corporation	Ownership	80.1	Centene Corporation	NO	0
01295	Centene Corporation	00000	46-5517858				Interpreta, Inc.	DE	NIA	Interpreta Holdings, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	32-2434596				Next Door Neighbors, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	83-2381790				Next Door Neighbors, Inc.	DE	NIA	Next Door Neighbors, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16771	84-3707689				Centene Venture Company Alabama Health Plan, Inc.	AL	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16505	83-2425735				Centene Venture Company Illinois	IL	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16528	83-2409040				Centene Venture Company Kansas	KS	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16499	83-2434596				Centene Venture Company Florida	FL	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16773	84-3679376				Centene Venture Company Indiana, Inc.	IN	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16770	84-3724374				Centene Venture Company Tennessee	TN	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16990	86-1543217				Centene Venture Insurance Company Texas	TX	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16613	83-2446307				Centene Venture Company Michigan	MI	IA	Next Door Neighbors, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	59-3547616				Comprehensive Health Management, LLC	FL	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	83-4405939				WellCare Health Plans, Inc.	DE	UIP	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0

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01295	Centene Corporation	00000	04-3669698				WCG Health Management, Inc.	DE	UIP	WellCare Health Plans, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	14-1647239				The WellCare Management Group, Inc.	NY	UDP	WCG Health Management, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16329	81-5442932				WellCare of Mississippi, Inc.	MS	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16117	81-3299281				WellCare of Oklahoma, Inc.	OK	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	84-3731013				WellCare Health Insurance Company of Nevada, Inc.	NV	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16692	84-3739752				WellCare Health Insurance of the Southwest, Inc.	AZ	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	10760	20-2103320				WellCare of Georgia, Inc.	GA	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	12964	20-8058761				WellCare of Texas, Inc.	TX	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	11775	32-0062883				WellCare of South Carolina, Inc.	SC	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
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	NO	0
01295	Centene Corporation	16970	84-3547689				WellCare Health Plans of Massachusetts, Inc.	MA	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
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	NO	0
01295	Centene Corporation	16753	84-3907795				WellCare Health Plans of Missouri, Inc.	MO	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	10155	20-2383134				WellCare Prescription Insurance, Inc.	AZ	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	17002	84-4664883				WellCare Health Insurance of Hawaii, Inc.	HI	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
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	NO	0
01295	Centene Corporation	16765	84-4649985				WellCare of Illinois, Inc.	IL	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16533	45-5154364				Rhythm Health Tennessee, Inc.	TN	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
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	NO	0
01295	Centene Corporation	00000	27-0386122				Ohana Health Plan, Inc.	HI	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	83-2840051				WellCare of Indiana, Inc.	IN	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	45-3236788				America's 1st Choice California Holdings, LLC	FL	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	20-5327501				WellCare of California, Inc.	CA	NIA	America's 1st Choice California Holdings, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	42-2483231				Health Plan Real Estate Holding II, Inc.	MO	NIA	WellCare of California, Inc.	Ownership	8.6	Centene Corporation	YES	0

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

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01295	Centene Corporation	16532	83-2276159				WellCare Health Insurance of Tennessee, Inc.	TN	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16515	83-2914327				WellCare of New Hampshire, Inc.	NH	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16514	83-2255514				WellCare of Iowa, Inc.	IA	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16513	83-2126269				WellCare Health Insurance of Connecticut, Inc.	CT	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16571	83-2069308				WellCare of Washington, Inc.	WA	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	15510	47-0971481				WellCare Health Plans of Kentucky, Inc.	KY	RE	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16239	82-1301128				WellCare of Alabama, Inc.	AL	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16344	82-3114517				WellCare of Maine, Inc.	ME	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	22-3391045				Harmony Health Systems Inc.	NJ	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	11229	36-4050495				Harmony Health Plan, Inc.	IL	IA	Harmony Health Systems Inc.	Ownership	100.0	Centene Corporation	NO	0
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	NO	0
01295	Centene Corporation	00000	42-2483231				Health Plan Real Estate Holding II, Inc.	MO	NIA	WellCare Health Insurance Company of Kentucky, Inc.	Ownership	7.8	Centene Corporation	YES	0
01295	Centene Corporation	83445	86-0269558				WellCare Health Insurance of Arizona, Inc.	AZ	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
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	NO	0
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	NO	0
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	NO	0
01295	Centene Corporation	00000	06-1742685				One Care by Care1st Health Plans of Arizona, Inc.	AZ	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
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	NO	0
01295	Centene Corporation	16343	82-4247084				WellCare Health Insurance Company of America	AR	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16342	82-5127096				WellCare National Health Insurance Company	TX	IA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
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	NO	0
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	NO	0
01295	Centene Corporation	00000	26-4004578				WellCare of Michigan Holding Company	MI	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	52563	38-3253977				Meridian Health Plan of Michigan, Inc.	MI	IA	WellCare of Michigan Holding Company	Ownership	100.0	Centene Corporation	NO	0

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01295	Centene Corporation	00000	42-2483231				Health Plan Real Estate Holding II, Inc.	MO	NIA	Meridian Health Plan of Michigan, Inc.	Ownership	7.8	Centene Corporation	YES	0
01295	Centene Corporation	13189	20-3209671				Meridian Health Plan of Illinois, Inc.	IL	IA	WellCare of Michigan Holding Company	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	42-2483231				Health Plan Real Estate Holding II, Inc.	MO	NIA	Meridian Health Plan of Illinois, Inc.	Ownership	15.7	Centene Corporation	YES	0
01295	Centene Corporation	13148	20-8937577				Sunshine State Health Plan, Inc.	FL	IA	The WellCare Management Group, Inc.	Ownership	50.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	27-4683816				Universal American Corp.	DE	NIA	The WellCare Management Group, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	45-1352914				Universal American Holdings, LLC	DE	NIA	Universal American Corp	Ownership	100.0	Centene Corporation	NO	0
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	NO	0
01295	Centene Corporation	00000	62-1517194				Heritage Health Systems, Inc.	TX	NIA	Universal American Holdings, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	10096	62-1819658				SelectCare of Texas, Inc.	TX	IA	Heritage Health Systems, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	76-0459857				Heritage Health Systems of Texas, Inc.	TX	NIA	Heritage Health Systems, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	95448	71-0794605				QCA Healthplan, Inc.	AR	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	70998	71-0386640				Qualchoice Life and Health Insurance Company	AR	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16814	84-4119570				District Community Care Inc.	DC	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	86-2318658				Oklahoma Complete Health Holding Company, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	16904	81-3121527				Oklahoma Complete Health Inc.	OK	IA	Oklahoma Complete Health Holding Company, LLC	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	86-2694770				RI Health & Wellness, Inc.	RI	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	88-3410060				Delaware First Health, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	88-4145615				Delaware First Health Complete, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	58-1076937				Magellan Health, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	47-5588795				Magellan Pharmacy Services, Inc.	DE	NIA	Magellan Health, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	12632	52-2310906				Magellan Behavioral Health of New Jersey, LLC	NJ	IA	Magellan Pharmacy Services, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	95-2868243				Magellan Health Services of California, Inc. - Employer Services	CA	NIA	Magellan Pharmacy Services, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	52-2135463				Magellan Healthcare, Inc.	DE	NIA	Magellan Health, Inc.	Ownership	100.0	Centene Corporation	NO	0

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01295	Centene Corporation	00000	93-0999350				Human Affairs International of California	CA	NIA	Magellan Healthcare, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	15550	46-4188169				Magellan Complete Care of Louisiana, Inc.	LA	IA	Magellan Healthcare, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	20-1919978				Magellan Behavioral Health of Florida, Inc.	FL	NIA	Magellan Healthcare, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	20-1728452				Magellan Health Services of Arizona, Inc.	AZ	NIA	Magellan Healthcare, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	85-4065417				Magellan of Idaho, LLC	ID	NIA	Magellan Healthcare, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	15924	46-4457706				Magellan Complete Care of Pennsylvania, Inc.	PA	IA	Magellan Healthcare, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	97292	57-0724249				Magellan Life Insurance Company	DE	IA	Magellan Healthcare, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	22-3236927				Merit Behavioral Care Corporation	DE	NIA	Magellan Healthcare, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	76-0513383				Magellan Providers of Texas, Inc.	TX	NIA	Merit Behavioral Care Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	47019	23-2759528				Magellan Behavioral Health of Pennsylvania, Inc.	PA	IA	Merit Behavioral Care Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	52-1946167				Magellan Behavioral of Michigan, Inc.	MI	NIA	Magellan Healthcare, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	92-0642038				Magellan of Maryland, LLC	MD	NIA	Magellan Healthcare, Inc.	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	92-0679069				Magnolia Joint Venture Holding Company, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	17804	33-1995487				Ambetter Health of Texas, Inc.	TX	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	17793	33-2010592				Ambetter Health of Florida, Inc.	FL	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	39-4149441				Idaho Complete Health, Inc.	ID	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	0
01295	Centene Corporation	00000	41-2541685				Ambetter Health of California, Inc.	CA	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	
01295	Centene Corporation	00000	41-3157902				Ambetter Health Solutions of Pennsylvania, Inc.	PA	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	
01295	Centene Corporation	00000	41-3198544				Ambetter Health Insurance of Utah, Inc.	UT	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	
01295	Centene Corporation	00000	41-3995057				Ambetter Health of Kentucky, Inc.	KY	IA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	

Asterisk	Explanation

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	Response
1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO

AUGUST FILING

2. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.	YES

Explanation:

Bar Code:

1.

OVERFLOW PAGE FOR WRITE-INS

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 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, depreciation and proportional amortization		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	529,364	522,843
2. Cost of bonds and stocks acquired		529,819
3. Accrual of discount		2,157
4. Unrealized valuation increase/(decrease)		0
5. Total gain (loss) on disposals		0
6. Deduct consideration for bonds and stocks disposed of		525,000
7. Deduct amortization of premium	1,185	456
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)	528,178	529,364
12. Deduct total nonadmitted amounts	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	528,178	529,364

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
ISSUER CREDIT OBLIGATIONS (ICO)								
1. NAIC 1 (a)	528,778			(600)	528,778	528,178	0	529,364
2. NAIC 2 (a)	0				0	0	0	0
3. NAIC 3 (a)	0				0	0	0	0
4. NAIC 4 (a)	0				0	0	0	0
5. NAIC 5 (a)	0				0	0	0	0
6. NAIC 6 (a)	0				0	0	0	0
7. Total ICO	528,778	0	0	(600)	528,778	528,178	0	529,364
ASSET-BACKED SECURITIES (ABS)								
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 ABS	0	0	0	0	0	0	0	0
PREFERRED STOCK								
15. NAIC 1	0				0	0	0	0
16. NAIC 2	0				0	0	0	0
17. NAIC 3	0				0	0	0	0
18. NAIC 4	0				0	0	0	0
19. NAIC 5	0				0	0	0	0
20. NAIC 6	0				0	0	0	0
21. Total Preferred Stock	0	0	0	0	0	0	0	0
22. Total ICO, ABS & Preferred Stock	528,778	0	0	(600)	528,778	528,178	0	529,364

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 $; NAIC 2 $;
NAIC 3 $; NAIC 4 $; NAIC 5 $; NAIC 6 $

Schedule DA - Part 1

NONE

Schedule DA - Verification

NONE

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

Schedule E - Part 2 - Verification

NONE

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE

Schedule D - Part 3

NONE

Schedule D - Part 4

NONE

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DB - Part E

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					6	7	8	
Depository	Restricted Asset Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	First Month	Second Month	Third Month	*
Open depositories								
Truist Bank, N.A. (Suntrust).....Charlotte, NC.....		3.600	512,514	300,945	51,255,901	87,579,527	113,461,893	XXX
0199998 Deposits in ..... depositories that do not exceed the allowable limit in any one depository (see Instructions) - open depositories	XXX	XXX						XXX
0199999 Total open depositories	XXX	XXX	512,514	300,945	51,255,901	87,579,527	113,461,893	XXX
0399999 Total cash on deposit	XXX	XXX	512,514	300,945	51,255,901	87,579,527	113,461,893	XXX
0499999 Cash in company's office	XXX	XXX	XXX	XXX				XXX
0599999 Total	XXX	XXX	512,514	300,945	51,255,901	87,579,527	113,461,893	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Restricted Asset Code	4 Date Acquired	5 Stated Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due & Accrued	9 Amount Received During Year
8609999999 Total cash equivalents						0	0	0

NONE