

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2025 OF THE CONDITION AND AFFAIRS OF THE

WellCare Health Plans of Rhode Island, Inc.

	01295 rrent Period)	, 01295 (Prior Period)	NAIC Company	Code16	766 Emplo	yer's ID Number	84-4627844
Organized under the Laws	,	Rhode Isla	nd	State of Don	nicile or Port of Er	atry Rho	de Island
9		Triode Isla	ilu			itiy <u>Riic</u>	de Island
Country of Domicile				United State			
Licensed as business type:	•	ent & Health []	Property/Cas			edical & Dental Servi	,
		vice Corporation [j vision Servic	ce Corporation [•	tenance Organizatio	
Incorporated/Organized	Other []	02/03/2020	Common	nced Business	Is HMO Fed	erally Qualified? Yes 01/01/2021	
Statutory Home Office	Veterans Memorial			East	Providence, RI, US (
Statutory Florine Office		(Street and N		·		Town, State, Country and Z	
Main Administrative Office	7	700 Forsyth Bouleva	ard	St. Lo	uis, MO, US 6310	5	314-725-4477
_		(Street and Number)		(City or Town	State, Country and Zip		ode) (Telephone Number)
Mail Address		5 Henderson Road and Number or P.O. Box)		.,	Tamp	oa, FL, US 33634 State, Country and Zip Co	4-)
Primary Location of Books a	•	,	syth Boulevard	St	Louis, MO, US 6		314-725-4477
Tilliary Location of Books a	and records .		and Number)		Town, State, Country ar		ode) (Telephone Number)
Internet Web Site Address				www.centene	e.com		
Statutory Statement Contac	rt	Kimberly Brin	ghurst			813-206-2725	
الماد ما مدان		(Name)) (Telephone Number) (Ext	ension)
Kimberiy	.bringhurst@c (E-Mail Addres					75-2899 Number)	
	(2 / (20.00	-,	OFFIC	EDC	(
Nama		Title	OFFIC		lomo		Title
Name	i a	Presider	\		lame	Vice Presid	ent and Treasurer
Benjamin Mark Crai Kendra Louise Arch		Vice President and			vard Snyder III nn Dinkelman		esident of Tax
Trondra Edalog / trons	<u> </u>	VIOC I TOSIGOTIL GITC	OTHER OF	·	III BII IKCII II GII		boldent of Tax
Benjamin Mark Crai	g	DIRI	ECTORS O	R TRUSTE	ES		
State of		S	s				
County of	•••••						
The officers of this reporting er above, all of the herein describe this statement, together with re and of the condition and affairs been completed in accordance differ; or, (2) that state rules of knowledge and belief, respective when required, that is an exac regulators in lieu of or in additional control of the cont	ed assets were elated exhibits, so the said reposition with the NAIC or regulations revely. Furthermost copy (except	the absolute property of schedules and explana orting entity as of the Annual Statement Ins equire differences in real, the scope of this a for formatting difference	of the said reporting of tions therein contain reporting period state structions and Accou- reporting not related ttestation by the des	entity, free and cleaned, annexed or re ed above, and of it anting Practices and to accounting pra- ccribed officers also	ar from any liens or of ferred to, is a full at ts income and dedu- id Procedures manu- actices and procedu- to includes the relate	claims thereon, except a nd true statement of all ctions therefrom for the lal except to the extent lares, according to the land and corresponding electrical	is herein stated, and that the assets and liabilities period ended, and have that: (1) state law may best of their information, onic filing with the NAIC,
Benjamin Ma	ark Craig		James Edwar	d Snyder III		Kendra Louise	Archer
Preside	•		Vice President	,		Vice President an	
					a. Is this an or	iginal filing?	Yes [X] No []
Subscribed and sworn to	_	is ,			b. If no: 1. State the 2. Date filed	amendment number	
					J. Number 0	i pages attachieu	-

ASSETS

			Current Statement Date)	4
		1	2	3	
				Net Admitted Assets	December 31 Prior Year Net
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets
1.	Bonds	126,061		126,061	124 , 184
2.	Stocks:				
	2.1 Preferred stocks		i		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	ļ		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 (\$6,147,399),				
	cash equivalents (\$0)				
	and short-term investments (\$0)	6,147,399	ļ	6 , 147 , 399	8,728,744
	Contract loans (including \$premium notes)			0	0
	Derivatives			0	0
1	Other invested assets	l .	ı		0
	Receivables for securities				0
	Securities lending reinvested collateral assets				
11.	Aggregate write-ins for invested assets	0	0		
	Subtotals, cash and invested assets (Lines 1 to 11)	6,273,460	0	6,273,460	8,852,928
13.	Title plants less \$				
	only)		1	0	
14.	Investment income due and accrued	1 , 159		1 , 159	1,732
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of				
	collection	22,626		22,626	36,765
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$earned				
	but unbilled premiums).			0	J0
	15.3 Accrued retrospective premiums (\$2,711,485) and				
	contracts subject to redetermination (\$)	2,/11,485		2,711,485	1,865,793
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	i		i	J
	16.2 Funds held by or deposited with reinsured companies				J
	16.3 Other amounts receivable under reinsurance contracts				4 000 005
	Amounts receivable relating to uninsured plans				
	Current federal and foreign income tax recoverable and interest thereon				
	Net deferred tax asset			29,358	i
l	Guaranty funds receivable or on deposit	i		0	0
20.	Electronic data processing equipment and software			0	0
21.	Furniture and equipment, including health care delivery assets				_
22	(\$				0
				210,233	
	Receivables from parent, subsidiaries and affiliates				
1	Health care (\$	l .		0	030,400
20.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	10,647,403	81,232	10,566,171	13,434,686
27	From Separate Accounts, Segregated Accounts and Protected	10,047,403	01,232	10,500,171	10,404,000
۷1.	Cell Accounts				^
20	Total (Lines 26 and 27)	10,647,403	81,232	10,566,171	13,434,686
		10,047,403	01,232	10,300,171	13,434,000
1104	DETAILS OF WRITE-INS				^
1101.		i	i	l .	
1102.				U	U
	Summary of remaining write-ins for Line 11 from overflow page		0	0	
		0	0	0	0
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) Other non-admitted assets (prepaids)	-	36.340	0	0
l .	* ' '	36 , 340	36,340	0	0 1
2502. 2503.					,
	Summary of remaining write-ins for Line 25 from overflow page		^	0	^
		36,340	36,340	0	0
∠აყყ.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	30,340	1 30,340	U	<u> </u>

LIABILITIES, CAPITAL AND SURPLUS

	LIABILITIES, SAI		Current Period		Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$ reinsurance ceded)	130,994		130,994	3,659,463
	Accrued medical incentive pool and bonus amounts			187 ,268	
3.	Unpaid claims adjustment expenses			•	33,546
4.	Aggregate health policy reserves including the liability of				
, T.	\$ for medical loss ratio rebate per the Public Health				
	·			675 257	060 005
	Service Act			675,357	
5.	Aggregate life policy reserves				0
6.	Property/casualty unearned premium reserve			0	0
7.	Aggregate health claim reserves				0
8.	Premiums received in advance	40		40	191
9.	General expenses due or accrued			132,892	121,473
10 1	Current federal and foreign income tax payable and interest thereon (including			·	
	\$ on realized gains (losses))	373 095		373 095	427 969
10.5	Net deferred tax liability				0
I					
l	Ceded reinsurance premiums payable			_	10,491
l	Amounts withheld or retained for the account of others				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	4.500.000		4.500.000	0
16.	Derivatives				0
17.					0
i					
l	Payable for securities lending				U
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				
22.	Liability for amounts held under uninsured plans				604,907
i	Aggregate write-ins for other liabilities (including \$	220,107		225, 107	, 507
23.		400 007	0	400 007	00.454
	current)				
24.	Total liabilities (Lines 1 to 23)				
25.	Aggregate write-ins for special surplus funds				0
26.	Common capital stock	XXX	XXX	3,000,000	3,000,000
27.	Preferred capital stock	XXX	XXX		0
28.	Gross paid in and contributed surplus	xxx	xxx	2,627,840	2,627,840
29.	Surplus notes				
30.	Aggregate write-ins for other-than-special surplus funds				0
	Unassigned funds (surplus)				
31.				(1,407,001)	1, 103,324
32.	Less treasury stock, at cost:				
	32.1shares common (value included in Line 26				
	\$)	XXX	XXX		0
	32.2shares preferred (value included in Line 27				
	\$	xxx	XXX		0
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	xxx	XXX	4,160,289	6,731,364
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	10,566,171	13,434,686
J		7001	7000	.0,000,111	.0,701,000
	DETAILS OF WRITE-INS				
2301.	Unclaimed property payable	108,569		108,569	51,522
2302.	State income tax payable	71 638		71 638	41,932
İ				ŕ	
2303.					
2398.	Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399.	Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	180,207	0	180,207	93,454
		,		,	,
2501.					
2502.		xxx	XXX		
2503.		xxx	XXX		
İ					
2598.	Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX		0
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	0	0
3001.		XXX	XXX		
3002.					
3003.		XXX	XXX		
3098.	Summary of remaining write-ins for Line 30 from overflow page	xxx	XXX	0	0
					-
3099.	Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

		Current Ye	ear To Date	Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months				20,091
2.	Net premium income (including \$non-health premium income)				
3.	Change in unearned premium reserves and reserve for rate credits				
4.	Fee-for-service (net of \$medical expenses)				
5.	Risk revenue				
6.	Aggregate write-ins for other health care related revenues	XXX	0	0	0
7.	Aggregate write-ins for other non-health revenues	XXX	0	0	0
8.	Total revenues (Lines 2 to 7)	XXX	1,025,767	21,209,988	27,228,459
	al and Medical:				
9.	Hospital/medical benefits				
10.	'				
11.			i e		
12.	Emergency room and out-of-area		, ,		
13.	Prescription drugs			1	
14.	Aggregate write-ins for other hospital and medical				
15. 16.	· · · · · · · · · · · · · · · · · · ·				
10.	Subtotal (Lines 9 to 15)	0	(1,702,000)	10, 123,497	21,000,739
Less: 17.	Net reinsurance recoveries		30 584	0	0
18.	Total hospital and medical (Lines 16 minus 17)			i i	
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including \$(2,742) cost containment expenses.				
21	General administrative expenses.		, ,		
	Increase in reserves for life and accident and health contracts (including		1, 100	, 102,200	, 0 10 ,0 10
	\$increase in reserves for life only)			493.348	(126.722)
23.	Total underwriting deductions (Lines 18 through 22)				
1	Net underwriting gain or (loss) (Lines 8 minus 23)			1	
1	Net investment income earned		1	401,732	
26.	Net realized capital gains (losses) less capital gains tax of \$			0	0
27.	Net investment gains (losses) (Lines 25 plus 26)	0	216,813	401,732	501,783
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered				
	\$		7	(13,754)	(19,562)
29.	Aggregate write-ins for other income or expenses	0	0	0	0
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	2,437,242	1,413,102	2,302,968
31.	Federal and foreign income taxes incurred	XXX	504,848	394,416	456,604
32.	Net income (loss) (Lines 30 minus 31)	XXX	1,932,394	1,018,686	1,846,364
	DETAILS OF WRITE-INS				
i		XXX	-		
0602.		XXX			
0603.		XXX			
0698.	, 3	XXX	0	0	0
0699.	Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX	0	0	0
0701.		XXX	-		
0702. 0703.		XXX			
	Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	
0799.		XXX	0	0	0
	Totals (Lines 0701 tillough 0703 plus 0790) (Line 7 above)	7000			Ü
1402.					
1403.					
1498.		0	0	0	0
1499.		0	0	0	0
2901.				.0	0
2902.					
2903.			<u> </u>		
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999.	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EX	PENSES (Continue	u <i>)</i>
		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	CAPITAL & SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	6,731,364	4,873,864	4,873,864
34.	Net income or (loss) from Line 32	1,932,394	1,018,686	1,846,364
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	(12,839)	109,025	(42,732)
39.	Change in nonadmitted assets	9,370	(54,094).	53,868
40.	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock	0	0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles		0	0
44.	Capital Changes:			
	44.1 Paid in		0	0
	44.2 Transferred from surplus (Stock Dividend)		0	0
	44.3 Transferred to surplus		0	0
45.	Surplus adjustments:			
	45.1 Paid in	0	0	0
	45.2 Transferred to capital (Stock Dividend)	0	0	0
	45.3 Transferred from capital		0	0
46.	Dividends to stockholders	(4,500,000)	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)	(2,571,075)	1,073,617	1,857,500
49.	Capital and surplus end of reporting period (Line 33 plus 48)	4,160,289	5,947,481	6,731,364
	DETAILS OF WRITE-INS			
4701.				
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	0	0

CASH FLOW

		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ende December 31
	Cash from Operations			
١.	Premiums collected net of reinsurance	(3,896)	21,479,007	27 , 292 , 8
	Net investment income		401,571	500 ,
	Miscellaneous income	0	0	
	Total (Lines 1 to 3)	212.780	21,880,578	27.793.
	Benefit and loss related payments	1 575 626	17,245,807	22,906,
	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		0	22,000,
	Commissions, expenses paid and aggregate write-ins for deductions		4,089,799	5,495,
	Dividends paid to policyholders		0	
	Federal and foreign income taxes paid (recovered) net of \$tax on capital			
•	gains (losses)	559,721	(107,555)	(191,
	Total (Lines 5 through 9)	3,085,457	21,228,051	28,210,
	Net cash from operations (Line 4 minus Line 10)	(2,872,677)	652,527	(417,
•		(2,072,077)	032,321	(417,
	Cash from Investments			
•	Proceeds from investments sold, matured or repaid:	405.000	١	
	12.1 Bonds		0	
	12.2 Stocks		0	
	12.3 Mortgage loans	ļ0 ļ	0	
	12.4 Real estate		0	
	12.5 Other invested assets		0	
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		0	
	12.7 Miscellaneous proceeds	. 0	0	
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	125,000	0	
	Cost of investments acquired (long-term only):			
	13.1 Bonds		0	
	13.2 Stocks	ļ0 ļ	0	
	13.3 Mortgage loans	ļ0 ļ	0	
	13.4 Real estate	ļ0 ļ	0	
	13.5 Other invested assets	ļ0 ļ	0	
	13.6 Miscellaneous applications	0	0	
	13.7 Total investments acquired (Lines 13.1 to 13.6)	126,167	0	
	Net increase/(decrease) in contract loans and premium notes	0	0	
	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(1.167)	0	
	Cash from Financing and Miscellaneous Sources	(, - /		
	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	
	16.2 Capital and paid in surplus, less treasury stock.		500.000	500.
	16.3 Borrowed funds	0	0	
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		0	
	16.5 Dividends to stockholders		0	
	16.6 Other cash provided (applied)		404,899	490.
	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5	202,100	101,000	100,
•	plus Line 16.6)	292,499	904,899	990,
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		,	
	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(2 581 345)	1,557,426	572,
	Cash, cash equivalents and short-term investments:	(2,001,040)	, , , , , , , , , , , , , , , , ,	
•	19.1 Beginning of year	8.728.744	8 , 156 , 234	8,156,
	19.2 End of period (Line 18 plus Line 19.1)	6,147,399	9,713,660	8,728,
	18.2 Lita of perioa (Litte 10 plus Litte 18.1)	0, 171,000	0,710,000	0,720,

Note:	Supplemental disclosures of cash flow information for non-cash transactions:		
20.0001	accrued dividend	4,500,000	

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STATEMENT AS OF SEPTEMBER 30, 2025 OF THE WellCare Health Plans of Rhode Island, Inc.

EXHIBIT OF PREMIUMS. ENROLLMENT AND UTILIZATION

	1	Comprel (Hospital &	nensive	4	5	6		8	9	10	11	12	13	14
	Total	2 Individual	3 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	1,547	0	0	0	0	0	0	1,547	0	0	0	0	0	0
2. First Quarter	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Second Quarter	0	0	0	0	0	0	0	0	0	0	0	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	0													
Total Member Ambulatory Encounters for Period:														
7. Physician	0													
8. Non-Physician	0													
9. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0													
11. Number of Inpatient Admissions	0													
12. Health Premiums Written (a)	1,025,767							1,025,767						
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written	0													
15. Health Premiums Earned	1,025,767							1,025,767						
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services	2,416,787							2,416,787						
18. Amount Incurred for Provision of Health Care Services	(1,782,833)							(1,782,833)						

⁽a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 1,025,767

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

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims unpaid (Reported)						
						
					ļ	
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	2,437	0	0	0	7,167	9,604
0499999 Subtotals	2,437	0	0	0	7,167	9,604
0599999 Unreported claims and other claim reserves	XXX	XXX	XXX	XXX	XXX	121,390
0699999 Total amounts withheld	XXX	XXX	XXX	XXX	XXX	
0799999 Total claims unpaid	XXX	XXX	XXX	XXX	XXX	130,994
0899999 Accrued medical incentive pool and bonus amounts	XXX	XXX	XXX	XXX	XXX	187,268

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

	Clai Paid Yea		Lial End of Curi	oility	5	6	
	1 2		3 4		5	0	
Line of Business	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid Dec. 31 of Prior Year	On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year	
Comprehensive (hospital and medical) individual					0		
Comprehensive (hospital and medical) group					0		
3. Medicare Supplement					0		
4. Vision only					0		
5. Dental only					0		
6. Federal Employees Health Benefits Plan					0		
7. Title XVIII - Medicare	2,321,481	0	130,994	0	2,452,475	3,659,46	
8. Title XIX - Medicaid					0		
9. Credit A&H					0		
10. Disability income					0		
11. Long-term care					0		
12. Other health					0		
13. Health subtotal (Lines 1 to 12)	2,321,481	0	130,994	0	2,452,475	3,659,46	
14. Health care receivables (a)	48,557				48 , 557		
15. Other non-health					0		
16. Medical incentive pools and bonus amounts	143,863	0	187,268		331,131	889,00	
17. Totals (Lines 13-14+15+16)	2,416,787	0	318,262	0	2,735,049	4,548,46	

NOTES TO FINANCIAL STATEMENT

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

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

The Department recognizes only statutory accounting practices prescribed or permitted by the State of Rhode Island for determining and reporting the financial condition, results of operations, and cash flow of an insurance company for determining its solvency under Rhode Island 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 Rhode Island.

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

			F/S	F/S		
		SSAP#	Page	Line #	2025	 2024
	NET INCOME					
1	Company state basis (Page 4, Line 32, Columns 2 & 4)	XXX	4	32	\$ 1,932,394	\$ 1,846,364
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	\$ 1,932,394	\$ 1,846,364
	SURPLUS					
5	Company state basis (Page 3, Line 33, Columns 3 & 4)	XXX	3	33	\$ 4,160,289	\$ 6,731,364
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			_		 <u> </u>
8	NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 4,160,289	\$ 6,731,364

- 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. Loan-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 September 30, 2025.

NOTES TO FINANCIAL STATEMENT

- 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

No significant change.

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

Dividends - In 2025, the Company paid cash dividend of \$4,500,000 to the Parent Company, The WellCare Management Group, Inc..

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.

NOTES TO FINANCIAL STATEMENT

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.

NOTES TO FINANCIAL STATEMENT

1. The following table summarizes fair value measurements by level at September 30, 2025, 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	\$ 6,147,399	\$ -	\$ -	\$ -	\$ 6,147,399
Bonds					
Issuer credit obligations	\$ -	\$ -	\$ -	\$ -	\$ -
Asset-backed securities	<u>-</u>	. 	. 	· -	<u>-</u>
Total Bonds	\$ -	\$ -	\$ -	\$ -	\$ -
Common stock					
Parent, subsidiaries and affiliates	\$ -	\$ -	\$ -	\$ -	\$ -
Total Common stock	\$ -	\$ -	\$ -	\$ -	\$ -
Derivatives assets	\$ -	\$ -	\$ -	\$ -	\$ -
Total Derivatives assets	\$ -	\$ -	\$ -	\$ -	\$ -
Separate account assets	\$ -	\$ -	\$ -	\$ -	\$ -
Total assets at fair value	\$ 6,147,399	\$ -	\$ -	\$ -	\$ 6,147,399
b. Liabilities at fair value					
Separate account liabilities	\$ -	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -	\$ -

- B. Fair Value Disclosures Under Other Pronouncements None
- C. Aggregate Fair Value for all Financial Instruments

The following table summarizes fair value measurements by level at September 30, 2025, for all financial instruments:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2		Level 3	,	et Asset Value NAV)	Not Practicable (Carrying Value)	
				LCVCI 2	Φ.	LCVCI 3	(-	iva v)	v aiuc)	
Cash and cash equivalents	\$ 6,147,399 \$	6,147,399 \$	6,147,399 \$		- \$		- \$	- \$		-
Issuer credit obligations	 126,572	126,061	126,572		-		-	-		
Total Investments	\$ 6,273,971 \$	6,273,460 \$	6,273,971 \$		- \$		- \$	- \$		_

- 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 Effective January 1, 2025, the Company's Medicare contract was not renewed and is in runout.
- 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.

NOTES TO FINANCIAL STATEMENT

22. Events Subsequent

On September 26, 2025, the Company declared a cash dividend of \$4,500,000 to be paid to The WellCare Management Group, Inc., the direct parent of the Company. The Company received approval from the Department on October 14, 2025 and the dividend was paid on October 31, 2025.

Besides the event listed above, there were no additional events occurring subsequent to September 30, 2025 requiring disclosure. Subsequent events have been considered through November 5, 2025 for the Statutory statement issued on November 5, 2025.

23. Reinsurance

No significant change.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. B. C. D. - No significant change.

E. Risk-Sharing Provisions of the Affordable Care Act ("ACA") - None

25. Change in Incurred Claims Expenses

A. Reserves for unpaid claims as of December 31, 2024 were \$4,548,466. As of September 30, 2025, \$2,416,787 has been paid for incurred claims attributable to insured events of prior years. Reserves remaining for prior years are now \$318,262 as a result of reestimation of unpaid claims. Therefore, there has been \$1,813,417 favorable prior-year development since December 31, 2024. 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

No significant change.

31. Anticipated Salvage and Subrogation

No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Did the reporting entity experience any material trar Domicile, as required by the Model Act?	sactions requiring the filing of Disclosure	of Materia	al Transactio	ns with the St	ate of	Yes	S []	No [X]
1.2	If yes, has the report been filed with the domiciliary						Yes	s []	No []
2.1	Has any change been made during the year of this reporting entity?	statement in the charter, by-laws, articles	of incorpo	oration, or de	ed of settlem	ent of the	Yes	3 []	No [X]
2.2	If yes, date of change:								
3.1	Is the reporting entity a member of an Insurance Howhich is an insurer?						Yes	s [X]	No []
	If yes, complete Schedule Y, Parts 1 and 1A.								
3.2	Have there been any substantial changes in the org	anizational chart since the prior quarter el	nd?				Yes	S []	No [X]
3.3	If the response to 3.2 is yes, provide a brief descrip	<u> </u>							
3.4	Is the reporting entity publicly traded or a member of	f a publicly traded group?					Yes	s [X]	No []
3.5	If the response to 3.4 is yes, provide the CIK (Centr								
4.1	Has the reporting entity been a party to a merger or						Yes	S []	No [X]
4.2	If yes, provide the name of entity, NAIC Company C ceased to exist as a result of the merger or consolic		state abb	reviation) for	any entity the	at has			
	N	1 ame of Entity	NAIC Co	2 mpany Code	3 State of D				
					<u> </u>				
5.	If the reporting entity is subject to a management agfact, or similar agreement, have there been any sign of yes, attach an explanation.						Yes [] No	o [X]	NA []
6.1	State as of what date the latest financial examination	n of the reporting entity was made or is be	eing made	э				12	31/2022
6.2	State the as of date that the latest financial examina This date should be the date of the examined balan	ation report became available from either t ce sheet and not the date the report was o	he state	of domicile or d or released	the reporting	entity.		12	31/2022
6.3	State as of what date the latest financial examination or the reporting entity. This is the release date or consheet date).	mpletion date of the examination report a	nd not the	e date of the	examination (balance		067	21/2024
6.4	By what department or departments?								
6.5	State of Rhode Island Department of Business R Have all financial statement adjustments within the statement filed with Departments?	latest financial examination report been a	ccounted	for in a subs	equent financ	ial	Yes [] No) [] (NA [X]
	Have all of the recommendations within the latest file						Yes [] No	[]	NA [X]
7.1 7.2	Has this reporting entity had any Certificates of Autt suspended or revoked by any governmental entity of If yes, give full information:	nority, licenses or registrations (including of luring the reporting period?	corporate	registration,	if applicable)		Yes	s []	No [X]
8.1	Is the company a subsidiary of a bank holding comp	pany regulated by the Federal Reserve Bo	ard?				Yes	s []	No [X]
8.2	If response to 8.1 is yes, please identify the name of	• , ,							
8.3	Is the company affiliated with one or more banks, the	rifts or securities firms?					Yes	s []	No [X]
8.4	If response to 8.3 is yes, please provide below the rederal regulatory services agency [i.e. the Federal Deposit Insurance Corporation (FDIC) and the Securequiator.]	Reserve Board (FRB), the Office of the Co	omptrolle	r of the Curre	ency (OCC), t	he Federal			
	1	2		3	4	5	6		
	Affiliate Name	Location (City, State)		FRB	осс	FDIC	SEC		
9.1	Are the senior officers (principal executive officer, p similar functions) of the reporting entity subject to a						Voc	- [Y]	No []
	 (a) Honest and ethical conduct, including the ethica (b) Full, fair, accurate, timely and understandable d (c) Compliance with applicable governmental laws, (d) The prompt internal reporting of violations to an (e) Accountability for adherence to the code. 	al handling of actual or apparent conflicts of isclosure in the periodic reports required t rules and regulations;	of interes	t between pe	rsonal and pr			, [,,]	NO []
9.11	If the response to 9.1 is No, please explain:								
9.2	Has the code of ethics for senior managers been ar	nended?					Yes	S []	No [X]
9.21	If the response to 9.2 is Yes, provide information re	• • • • • • • • • • • • • • • • • • • •							
9.3	Have any provisions of the code of ethics been waiv						Yes	S []	No [X]
9.31	If the response to 9.3 is Yes, provide the nature of a	• • • •							
10.1	Does the reporting entity report any amounts due from	FINANCIA	L				Yes	s [X]	No []
10.2	If yes, indicate any amounts receivable from parent	included in the Page 2 amount:				\$			0

GENERAL INTERROGATORIES

INVESTMENT

11.1									erwise made availa		Yes []	No [X]
11.2	If yes, give full an	•										
12.	Amount of real es	state and mortga	ges held in oth	er invested ass	ets in Schedule	e BA:				\$		0
13.	Amount of real es	state and mortga	ges held in sho	ort-term investm	ents:					\$		0
14.1	Does the reporting	ng entity have an	y investments	in parent, subs	idiaries and aff	filiates?					Yes []	No [X]
14.2	If yes, please co	mplete the follow	ing:									
	7 /1		J				Book/	1 ⁄ear-End Adjusted ng Value	Book/	2 nt Quarter Adjusted ng Value		
		Bonds Preferred Stock						0 0				
	14.23	Common Stock .				\$		0	\$			
		Short-Term Inve Mortgage Loans						0	\$ \$			
		All Other Total Investment				\$			\$			
		(Subtotal Lines 1	4.21 to 14.26)		\$		0	\$	0		
		Total Investment above				\$			\$			
15 1	Has the reporting	entity entered in	to any hedging	r transactions re	eported on Sch	nedule DB?					Yes []	No [X]
											. ,	
15.2	If yes, has a complete of the second of the			edging program	been made av	vailable to the	domicili	ary state?		Yes [] NO []	NA [X]
16.	For the reporting 16.1 Total fair 16.2 Total book	·	ending progra ed collateral as ng value of rei	ssets reported on nvested collater	on Schedule Dl al assets repo	L, Parts 1 and	2		r:	\$ \$		0
										•		0
17.	entity's offices, va pursuant to a cus Considerations, F	aults or safety der todial agreement . Outsourcing of	oosit boxes, w with a qualifie Critical Functi	ere all stocks, b d bank or trust ons, Custodial o	onds and othe company in ac or Safekeeping	er securities, or ecordance with Agreements	wned the Section of the N	roughout the cur n 1, III – General AIC <i>Financial C</i> o			Yes []	No [X]
17.1	For all agreement	ts that comply wit	h the requiren	nents of the NAI	C Financial Co	ondition Exam	iners Ha	andbook, comple	ete the following:			
			Nama	1 f Custodian(s)				2 Custodian Addr				
			Name o	f Custodian(s)				Custodian Addre	ess			
17.2	For all agreement location and a cor		on:	equirements of t		ncial Conditior	n Examii		provide the name,			
			1 Name(s)		2 Location((s)		3 Complete Ex				
17.3	Have there been	any changes, inc	luding name c	hanges, in the	custodian(s) id	entified in 17.	1 during	the current quar	rter?		Yes []	No [X]
17.4	If yes, give full an	d complete inforr	nation relating	thereto:								
	, , ,	1	Ĭ	2		3			4			
		Old Cust	odian	New Cus	stodian	Date of Cha	ange	F	Reason			
17.5	Investment mana authority to make managed internal securities"]	investment decis	sions on behal	f of the reporting	g entity. This ir	ncludes both p	rimary a	and sub-advisors	s. For assets that a	re		
		1 Name of Firm					2					
47 500	75 " " "	Name of Firm		0 " 17.5		P 11 1	Affilia					
	7 For those firms/ir (i.e., designated)	with a "U") mana	ge more than	10% of the repo	rting entity's in	vested assets	?				Yes []	No [X]
		sets under mana r individuals listed	gement aggre	gate to more that or 17.5 with an a	an 50% of the i	reporting entit of "A" (affiliate	y's inves	sted assets?	provide the informa	ition for the tabl		No [X]
	Central Re Depositor	egistration		2 e of Firm or dividual		3 Legal Entity Identifier (LEI)		Regis	4 stered With		5 nt Manageme nt (IMA) File	
	Have all the filing	•	the <i>Purposes</i>	and Procedures	s Manual of the	e NAIC Investi	ment An	alysis Office bee	en followed?		Yes [X]	No [
19.	PL securi b. Issuer or c. The insur	tation necessary ty is not available obligor is current er has an actual	to permit a ful e. on all contrac expectation of	ll credit analysis ted interest and ultimate payme	of the security principal payment of all contra	y does not exist nents. nected interest a	st or an	NAIC CRP cred	GI security: it rating for an FE o		Yes []	No [X]
20.	By self-designatir Procedures Manu elements of each a. The security i. issued fro which co	ng PLGI securities al of the NAIC In self-designated I was either: rior to January 1, om January 1,	s, the reporting vestment Ana PLGI security: 2018 (which is 18 to December to the remains	g entity is certify lysis Office (P& s exempt from F per 31, 2021 and s in force, for wh	ring its complia P Manual) for p PLR filing requid d subject to a conich an insurar	nnce with the reprivate letter reprivate	equirem ating (Pl uant to t agreeme cannot p	ents as specified LR) securities ar the P&P Manual the transcript or the provide a copy of	d in the <i>Purposes</i> and the following), or or to January 1, 20, f a private letter rati	and 22	. 1	£1

GENERAL INTERROGATORIES

- b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the
- security.

 c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as an 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 selfdesignation.

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]

[]

- 21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each selfdesignated 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?	[]	No	[)
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GENERAL INTERROGATORIES

PART 2 - HEALTH

Operating Percentages:			
1.1 A&H loss percent	<u> </u>	(1	177 . 1) %
1.2 A&H cost containment percent	<u> </u>		(0.3) %
1.3 A&H expense percent excluding cost containment expenses.			60.6 %
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 continuous the reporting entity?		Yes []	No [X]

SCHEDULE S - CEDED REINSURANCE

			Showing All New Reinsurance Treatie	s - Current Year to	Date				
1 NAIC Company Code	2	3 Effective	4	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8	9 Certified Reinsurer Rating (1 through 6)	10 Effective Date of Certified Reinsurer Rating
Company Code	ID Number	Date	Name of Reinsurer	Jurisdiction	Ceded	Ceded	Type of Reinsurer	(1 through 6)	Reinsurer Rating
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SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Courset Veer to Date	Allocated by Ctate	and Tarritarian
Current Year to Date -	Allocated by States	s and Territories

				Current Y	ear to Date -	Allocated by	States and To		- t			
			1	2	3	4	Di	irect Business Or	nly 7	8	9	10
	0.1.5		Active	Accident & Health	Medicare	Medicaid		Federal Employees Health Benefits	Life & Annuity Premiums & Other	Property/ Casualty	Total Columns	Deposit-Type
1	States, Etc. Alabama	Λ1	Status (a)	Premiums	Title XVIII	Title XIX	CHIP Title XXI	Plan Premiums	Considerations	Premiums	2 Through 8	Contracts
1	Alaska		N								0	
i .	Arizona		N								0	
i	Arkansas		N								0	
1	California		N.								0	
1	Colorado		N.								0	
1	Connecticut		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	
i	lowa		N								0	
	Kansas		N				ļ			<u> </u>	0	
	Kentucky		N							<u> </u>	0	
1	Louisiana		N				<u> </u>	ļ		<u> </u>	0	ļ
	Maine		N								0	
	Maryland		N								0	
	Massachusetts		N								0	
	Michigan		NN.								0	
	Minnesota										0	ļ
1	Missouri										0	
1	Montana											
	Nebraska		N								0	
	Nevada		N								0	
i	New Hampshire		N								0	
1	New Jersey		N								0	
	New Mexico		N								0	
1	New York		N								0	
	North Carolina		N								0	
1	North Dakota		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	L		1,025,767						1,025,767	
41.	South Carolina	. SC	N								0	
42.	South Dakota	. SD	N								0	
43.	Tennessee	TN	N								0	
1	Texas		N							<u> </u>	0	ļ
	Utah		N								0	
	Vermont		N								0	
	Virginia		N								0	
1	Washington		N							ļ	0	ļ
i	West Virginia		N.								0	ļ
	Wisconsin		N								0	ļ
1	Wyoming		N								0	
i	American SamoaGuam		NN								0	
	Puerto Rico		NN.								0	
	U.S. Virgin Islands		NN.					İ			0	
i	Northern Mariana Islands		N.							İ	0	ļ
	Canada		i i				1	1		İ	0	
1	Aggregate other alien		XXX	0	0	0	0	0	0	0	0	n
1	Subtotal.		XXX	0	1,025,767	0	0	0	0	0	1,025,767	n
	Reporting entity contributions Employee Benefit Plans	for	XXX								0	
61.	Total (Direct Business)		XXX	0	1,025,767	0	0	0	0	0	1,025,767	0
	DETAILS OF WRITE-INS											
58001.			XXX									ļ
i			XXX				ļ	ļ				ļ
58003.			XXX									ļ
	Summary of remaining write- Line 58 from overflow page		XXX	0	0	0	0	0	0	0	0	0
	Totals (Lines 58001 through plus 58998) (Line 58 above) ive Status Counts	58003	XXX	0	0	0	0	0	0	0	0	0

Centene Corporation	n	42-1406317	DE	
Bankers	Reserve Life Insurance Company of Wisconsin	39-0993433	WI	71013
	Health Plan Real Estate Holding, Inc. (17%)	46-2860967	МО	
Peach S	tate Health Plan, Inc.	20-3174593	GA	12315
	Health Plan Real Estate Holding, Inc. (21%)	46-2860967	МО	
Iowa Tot	al Care, Inc.	46-4829006	IA	15713
Buckeye	Community Health Plan, Inc.	32-0045282	ОН	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	
Coordina	ated Care Corporation	39-1821211	IN	95831
	Health Plan Real Estate Holding, Inc. (15%)	46-2860967	МО	
Healthy '	Washington Holdings, Inc.	46-5523218	DE	
	Coordinated Care of Washington, Inc.	46-2578279	WA	15352
Manage	d 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	МО	
Healthy	Louisiana Holdings LLC	27-0916294	DE	
	Louisiana Healthcare Connections, Inc.	27-1287287	LA	13970
Magnolia	a Health Plan Inc.	20-8570212	MS	13923
Sunshine	e Health Holding LLC	26-0557093	FL	
	Sunshine State Health Plan, Inc. (50%)	20-8937577	FL	13148
Healthy	Missouri Holdings, Inc.	45-5070230	МО	
	Home State Health Plan, Inc.	45-2798041	МО	14218
	Health Plan Real Estate Holding, Inc. (5%)	46-2860967	МО	
Sunflowe	er State Health Plan, Inc.	45-3276702	KS	14345

Granite State Health Plan	ı, Inc.	45-4792498	NH	14226
California Health and We	Iness Plan	46-0907261	CA	
Western Sky Community	Care, Inc.	45-5583511	NM	1635
Tennessee Total Care, Ir	C.	26-1849394	TN	
SilverSummit Healthplan	Inc.	20-4761189	NV	1614
University Health Plans,	nc.	22-3292245	NJ	
Agate Resources, Inc.		20-0483299	OR	
Trillium Cor	munity Health Plan, Inc.	42-1694349	OR	1255
Nebraska Total Care, Inc		47-5123293	NE	1590
Pennsylvania Health & W	ellness, Inc.	47-5340613	PA	1604
Ambetter H	ealth of Pennsylvania, Inc.	33-3859301	PA	
Sunshine Health Commu	nity Solutions, Inc.	47-5667095	VA	1592
Buckeye Health Plan Cor	nmunity Solutions, Inc.	47-5664342	ОН	1611
Arkansas Health & Welln	ess Health Plan, Inc.	81-1282251	AR	1613
Arkansas T	otal Care Holding Company, LLC (49%)	38-4042368	DE	
	Arkansas Total Care, Inc.	82-2649097	AR	1625
Bridgeway Health Solution	ns, LLC	20-4980875	DE	
Bridgeway I	lealth Solutions of Arizona, Inc.	20-4980818	AZ	1631
Celtic Group, Inc.		36-2979209	DE	
Celtic Insura	nce Company	06-0641618	IL	8079
	Ambetter of Magnolia Inc.	35-2525384	MS	1576
	Ambetter of Peach State Inc.	36-4802632	GA	1572
Ambetter H	ealth of Louisiana, Inc.	92-3523808	LA	1751
Novasys He	alth, Inc.	27-2221367	DE	
Centene Management C	ompany LLC	39-1864073	WI	
Illinois Heal	h Practice Alliance, LLC (50%)	82-2761995	DE	
Lifeshare Management G	roup, LLC	46-2798132	NH	

	alth Net of California, Inc.		95-4402957	CA	
Health Net, LLC	AcariaHealth Pharma	cy #20, Inc.	20-8420512 47-5208076	DE	
	Foundation Care LLC		20-0873587	MO	
	Homescripts.Com, LL		27-3707698	MI	
	AcariaHealth Pharma		13-4262384	CA	
	AcariaHealth Pharma		26-0226900	CA	
	AcariaHealth Pharma		27-2765424	NY	
	AcariaHealth Pharma		20-8192615	TX	Ī
	AcariaHealth Pharma	cy #14, Inc.	27-1599047	CA	
Ac	riaHealth, Inc.		45-2780334	DE	T
Pre	sonyx, Inc.		80-0856383	DE	
Specialty Thera	eutic Care Holdings, LLC		27-3617766	DE	T
	MeridianRx, LLC		27-1339224	MI	
Ce	ntene Pharmacy Services, Inc.		77-0578529	DE	T
	Envolve	e Dental of Texas, Inc.	81-2796896	TX	
	Envolve	e Dental of Florida, Inc.	81-2969330	FL	1
	Envolve Dental, Inc.		46-2783884	DE	
	Envolve	e Total Vision, Inc.	20-4861241	DE	T
	Envolve	e Vision of Florida, Inc.	65-0094759	FL	
	Envolv	e Vision, Inc.	20-4773088	DE	1
	Envolve	e Vision of Texas, Inc.	75-2592153	TX	
	Envolve Vision Benef	its, Inc.	20-4730341	DE	
En	rolve Benefit Options, Inc.		61-1846191	DE	
En	rolve, Inc.		37-1788565	DE	Ť
Ce	patico Behavioral Health, LLC		68-0461584	CA	t

	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 Partnership (80%)	82-2699483	DE	
	Carolina Complete Health, Inc.	82-2699332	NC	16526
New York	Quality Healthcare Corporation	82-3380290	NY	16352
	WellCare of Connecticut, Inc.	06-1405640	CT	95310
Commun	ity 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 Med	ical Group of Florida City, LLC	45-3192366	FL	
	Access Med	ical Group of Tampa, LLC	82-1737078	FL	
	Access Med	ical Group of Tampa II, LLC	82-1750978	FL	
	Access Med	ical Group of Tampa III, LLC	82-1773315	FL	
	Access Med	ical Group of Lakeland, LLC	84-2750188	FL	
	Access Med	ical Group of Pembroke Pines, LLC	88-2251274	FL	
	Access Med	ical Group of Margate, LLC	88-2263310	FL	
	Access Med	ical Group of Riverview, LLC	88-2284518	FL	
	Access Med	ical Group of Kendall, LLC	92-0235557	FL	
	Access Med	ical Group of Lauderdale Lakes, LLC	92-0261029	FL	
	Access Med	ical Group of Sand Lake, LLC	33-2792794	FL	
	Access Med	ical Group of Miami Medicare, LLC	39-2435871	FL	
	Access Med	ical Group of Hillsborough Peds, LLC	39-2463326	FL	
Inte	erpreta Holdings, Inc. (80.1%)		82-4883921	DE	
	Interpreta, Inc.		46-5517858	DE	
Ne	xt Door Neighbors, LLC		32-2434596	DE	
	Next Door Neighbors, Inc.		83-2381790	DE	
	Centene Ver	nture Company Alabama Health Plan, Inc.	84-3707689	AL	16771
	Centene Ver	nture Company Illinois	83-2425735	IL	16505
	Centene Ver	nture Company Kansas	83-2409040	KS	16528
	Centene Ver	nture Company Florida	83-2434596	FL	16499
	Centene Ver	nture Company Indiana, Inc.	84-3679376	IN	16773
	Centene Ver	nture Company Tennessee	84-3724374	TN	16770
	Centene Ver	nture Insurance Company Texas	86-1543217	TX	16990
	Centene Ver	nture Company Michigan	83-2446307	MI	16613
Co	mprehensive Health Management, LLC		59-3547616	FL	
We	ellCare 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 163	329
	WellCare of Virginia, Inc.	82-0664467	VA 167	763
	WellCare of Oklahoma, Inc.	81-3299281	OK 161	117
	WellCare Health Insurance Company of Nevada, Inc.	84-3731013	NV	
	WellCare Health Insurance of the Southwest, Inc.	84-3739752	AZ 166	392
	WellCare of Georgia, Inc.	20-2103320	GA 107	760
	WellCare of Texas, Inc.	20-8058761	TX 129	964
	WellCare of South Carolina, Inc.	32-0062883	SC 117	775
	WellCare Health Plans of New Jersey, Inc.	20-8017319	NJ 130)20
	WellCare Health Plans of Massachusetts, Inc.	84-3547689	MA 169	970
	WellCare Health Insurance Company of Oklahoma, Inc.	84-4449030	OK 167	752
	WellCare Health Plans of Missouri, Inc.	84-3907795	MO 167	753
	WellCare Prescription Insurance, Inc.	20-2383134	AZ 101	155
	WellCare Health Insurance of Hawaii, Inc.	84-4664883	HI 170)02
	WellCare Health Plans of Rhode Island, Inc.	84-4627844	RI 167	766
	WellCare of Illinois, Inc.	84-4649985	IL 167	765
	Rhythm Health Tennessee, Inc.	45-5154364	TN 165	533
	WellCare Health Insurance of New York, Inc.	11-3197523	NY 108	384
	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	
	WellCare Health Insurance of Tennessee, Inc.	83-2276159	TN 165	532
	WellCare of New Hampshire, Inc.	83-2914327	NH 165	515
	WellCare Health Plans of Vermont, Inc.	83-2255514	IA 165	514

WellCare Health Insurance of Connecticut, Inc.	83-2126269	CT	16513
WellCare of Washington, Inc.	83-2069308	WA	16571
WellCare Health Plans of Kentucky, Inc.	47-0971481	KY	15510
WellCare of Alabama, Inc.	82-1301128	AL	16239
WellCare of Maine, Inc.	82-3114517	ME	16344
Harmony Health Systems, Inc.	22-3391045	NJ	
Harmony Health Plan, Inc.	36-4050495	IL	11229
WellCare Health Insurance Company of Kentucky, Inc.	36-6069295	KY	64467
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	МО	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 of North Carolina, Inc.	82-5488080	NC	16547
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
Meridian Health Plan of Illinois, Inc.	20-3209671	IL	13189
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 Y	ork 13-1851754	NY	80624
Heritage Health Systems, Inc.	62-1517194	TX	

	SelectCare of Texas, Inc).	62-1819658	TX	10096
	Heritage Health Systems	s of Texas, Inc.	76-0459857	TX	
QCA Health Plan, Inc			71-0794605	AR	95448
Qualchoice Life and I	ealth Insurance Company, Inc.		71-0386640	AR	70998
District Community C	re, Inc.		84-4119570	DC	16814
Oklahoma Complete	lealth Holding Company, LLC		86-2318658	OK	
Oklahor	a 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	
Magella	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	
Magella	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 Health Services of New Mexico, Inc.		85-0420095	NM	
	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	

M	agellan of Maryland, LLC			92-0642038	MD	
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	

6

1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	, , ,	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	_
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)			Entity(ies)/Person(s)	(Yes/No)	*
01295	Centene Corporation	00000 4	12-1406317		0001071739	New York Stock	Centene Corporation	DE	UIP	Shareholders/Board of Directors	Shareholders/Board of Directors		Centene Corporation	NO	
01293	Centene corporation		+Z • 14003 17	-	000 107 17 39	Excilariye	Bankers Reserve Life Insurance		J	D11601015	TO OF DITECTORS	100.0	Centene	INU	
01295	Centene Corporation	71013	39-0993433				Company of Wisconsin	W I	IA	Centene Corporation	Ownership.	100 0	Corporation	NO	
0.200	our condition at rong		0000100							Bankers Reserve Life	· · · · · · · · · · · · · · · · · · ·		00. po. ac. ron		
							Health Plan Real Estate			Insurance Company of			Centene		
01295	Centene Corporation	00000 4	46-2860967				Holding, Inc	MO	NIA	Wisconsin	Ownership	17.0	Corporation	YES	
<u>-</u>								.					Centene		
01295	Centene Corporation	12315 2	20-3174593				Peach State Health Plan, Inc	GA	IA	Centene Corporation	Ownership	100.0	Corporation	NO	
01295	Contone Corneration	00000 4	46 - 2860967				Health Plan Real Estate	MO	NIA	 Peach State Health Plan, Inc	Ownership	21.0	Centene Corporation	YES	
0 1290	Centene Corporation	00000 2	10-2000907	-			Holding, Inc	JVIU	N I A	Peach State Hearth Fran, Inc	Ownership	21.0	Centene	1E3	
01295	Centene Corporation	15713 4	46-4829006				lowa Total Care, Inc	I A	IA	Centene Corporation	Ownership	100 0	Corporation	NO	
01200	ourtone corporation	107 10	10 1020000				Buckeye Community Health Plan,			Contone corporation	0 #1101 0111 p		Centene		
01295	Centene Corporation	11834 3	32-0045282				Inc	OH	IA	Centene Corporation	Ownership	100.0	Corporation	NO	
							Health Plan Real Estate			Buckeye Community Health	·		Centene		
01295	Centene Corporation	00000 4	46 - 2860967				Holding, Inc	MO	NIA	Plan, Inc	Ownership	18.0	Corporation	YES	
04005	0	40050	00 5000000				About the Total Constitution	00		0	Owner and his	400.0	Centene	NO	
01295	Centene Corporation	12959 2	20 - 5693998				Absolute Total Care, Inc Health Plan Real Estate	SC	I A	Centene Corporation	Ownership	100.0	Corporation Centene	NU	
01295	Centene Corporation	00000 4	46 - 2860967				Holding, Inc	MO	NIA	Absolute Total Care, Inc	Ownership	1 1 0	Corporation	YES	
01200			+0-2000307				l	JJ#IO		Absorate rotal dare, me	Ownership		Centene	ILO	
01295	Centene Corporation	95831 3	39 - 1821211				Coordinated Care Corporation	IN	IA	Centene Corporation	Ownership	100.0	Corporation	NO	
							Health Plan Real Estate			'	'		Centene		
01295	Centene Corporation	00000 4	46 - 2860967				Holding, Inc	MO	NIA	Coordinated Care Corporation	Ownership	15.0	Corporation	YES	
04005		00000	40 5500040				Healthy Washington Holdings,	DE				400.0	Centene		
01295	Centene Corporation	00000 4	46 - 5523218	-			Coordinated Care of Washington,	DE	NIA	Centene Corporation Healthy Washington Holdings,	Ownership	100.0	Corporation Centene	NO	
01295	Centene Corporation	15352 4	46-2578279				Inc	WA	IA	Inc	Ownership	100.0	Corporation	NO	
01200			+0-2010210				Managed Health Services			1110	0 will 0 3111 p	100.0	Centene		
01295	Centene Corporation	96822 3	39 - 1678579				Insurance Corp	WI	I A	Centene Corporation	Ownership	100.0	Corporation	NO	
							Health Plan Real Estate			Managed Health Services	· ·		Centene		
01295	Centene Corporation	00000 4	46 - 2860967				Holding, Inc	MO	NIA	Insurance Corp	Ownership	2.0	Corporation	YES	
04005	Conton Consection	05047	74 0770540				Comparing Hoolah Plans	TV	1.4	Contana Communities	Own a mala i e	400.0	Centene	NO.	
01295	Centene Corporation	95647 7	74-2770542	-			Superior HealthPlan, Inc Health Plan Real Estate	TX	I A	Centene Corporation	Ownership	100.0	Corporation	NU	
01295	Centene Corporation	00000 4	46 - 2860967				Holding, Inc	MO	NIA	Superior HealthPlan, Inc	Ownership	21 0	Centene Corporation	YES	
0 1200			TO - ZUUUUUI				l	J*IU		Oupor for float till fall, filo	οπιιστοιτιμ		Centene	IL3	
01295	Centene Corporation	00000 2	27 - 0916294				Healthy Louisiana Holdings LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N0	
							Louisiana Healthcare			Healthy Louisiana Holdings	·		Centene		
01295	Centene Corporation	13970 2	27 - 1287287	.			Connections, Inc	LA	I A	LLC	Ownership	100.0	Corporation	N0	
04005	0	1,0000	00.0570040				Manual California Bi		1.4	0	0	400.0	Centene		
01295	Centene Corporation	13923 2	20 - 8570212	-			Magnolia Health Plan Inc	MS	I A	Centene Corporation	Ownership	100.0	Corporation	[N0]	
01295	Centene Corporation	00000 2	26-0557093				Sunshine Health Holding LLC	FL	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	
0 1230	locitione corporation		20-0001030				Journal Hearth Horumy LLG	J	IN I M	Content Corporation	Owner 2111h	100.0	Centene	INU	
01295	Centene Corporation	13148 2	20-8937577				Sunshine State Health Plan, Inc.	FL	IA	Sunshine Health Holding LLC	Ownership	50.0	Corporation	N0	

							T			T					
1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling		
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s	(Yes/No)	*
01295	Centene Corporation	00000	45-5070230				Healthy Missouri Holding, Inc	MO	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	
	,						,		1	,			Centene		
01295	Centene Corporation	14218	45-2798041				Home State Health Plan, Inc	MO	I A	Healthy Missouri Holding, Inc.	Ownership	100.0	Corporation	NO	
01295	Centene Corporation	. 00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	Home State Health Plan, Inc	Ownerchin	5.0	Centene Corporation	YES	
01295	l centene corporation	. 100000	40-2000907	-			Sunflower State Health Plan,	JWIO	N 1 A	Thome State hearth Fram, inc	Ownersinp		Centene		
01295	Centene Corporation	14345	45-3276702				Inc	KS	IA	Centene Corporation.	Ownership	100.0		NO	
	·									· ·	i i		Centene		
01295	Centene Corporation	. 14226	45-4792498				Granite State Health Plan, Inc	NH	IA	Centene Corporation	Ownership	100.0	Corporation	NO	
01295	Centene Corporation	. 00000	46-0907261				California Health and Wellness	CA	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	
01293	Centene Corporation	. 00000	40-090/201	-			Western Sky Community Care,		N I A	Centene corporation	Ownersiiip	100.0	Centene	INU	
01295	Centene Corporation	16351	45-5583511				Inc.	NM	IA	Centene Corporation.	Ownership	100.0		NO	
	· ·									'	·		Centene		
01295	Centene Corporation	. 00000	26-1849394				Tennessee Total Care, Inc	TN	NIA	Centene Corporation	Ownership	100.0	Corporation	NO	
01295	Contona Corneration	16143	20-4761189				SilverSummit Healthplan, Inc	NV	IA	Contone Corneration	Ownership	100.0	Centene	NO	
01295	Centene Corporation	. 10143	20-4/01109	-			. Silversummit healthplan, inc		I A	Centene Corporation	Ownership	100.0	Corporation Centene	INU	
01295	Centene Corporation	. 00000	22-3292245				University Health Plans, Inc	NJ	NIA	Centene Corporation	Ownership	100.0		NO	
									1				Centene		
01295	Centene Corporation	. 00000	20-0483299				Agate Resources, Inc	OR	NIA	Centene Corporation	Ownership	100.0	Corporation	NO	
04205	Contona Corneration	12559	42-1694349				Trillium Community Health Plan,	OR.	IA	Agata Dagguraga Ing	Ownarahin	100.0	Centene	NO	
01295	Centene Corporation	. 12009	42 - 1094349				THC	UK	I A	Agate Resources, Inc	Ownership	100.0	Corporation Centene	INU	
01295	Centene Corporation	15902	47 - 5123293				Nebraska Total Care, Inc	NE	IA	Centene Corporation	Ownership	100.0	Corporation	NO	
							Pennsylvania Health & Wellness,]				Centene		
01295	Centene Corporation	. 16041	47 - 5340613				Inc	РА	I A	Centene Corporation	Ownership	100.0	Corporation	NO	
04005	Contant Consenting	00000	33-3859301				Ambetter Health of	PA	NII A	Pennsylvania Health &	O	100.0	Centene	NO	
01295	Centene Corporation	. 00000	33-3859301				Pennsylvania, Inc Sunshine Health Community	РА	NIA	Wellness, Inc	Ownership	100.0	Corporation Centene	INU	
01295	Centene Corporation	15927	47 - 5667095				Solutions, Inc.	VA	I IA	Centene Corporation	Ownership.	100 0	Corporation	NO	
							Buckeye Health Plan Community				- · · · · · · · - · · · · · · · · ·		Centene		
01295	Centene Corporation	. 16112	47 - 5664342				Solutions, Inc.	0H	I A	Centene Corporation	Ownership	100.0	Corporation	N0	
01205	Contona Corneration	16120	04 40000E4				Arkansas Health & Wellness	AR	IA	Contona Corneration	Ownership	100.0	Centene	N/O	
01295	Centene Corporation	. 16130	81-1282251	-			Health Plan, Inc Arkansas Total Care Holding	AK		Centene Corporation Arkansas Health & Wellness	Ownership	100.0	Corporation Centene		
01295	Centene Corporation	00000	38-4042368				Company, LLC	DE	NIA	Health Plan. Inc.	Ownership	49.0	Corporation	NO	
	'								1	Arkansas Total Care Holding	'		Centene		
01295	Centene Corporation	. 16256	82-2649097				Arkansas Total Care, Inc	AR	IA	Company, LLC	Ownership	100.0	Corporation	NO	
01205	Contana Corneration	00000	20-4980875				Dridgeway Health Calutions 110		NI I A	Contono Cornoratias	Ownorch i =	100.0	Centene	N/O	
01295	Centene Corporation	. 00000	ZU-490U8/5	-			Bridgeway Health Solutions, LLC. Bridgeway Health Solutions of	DE	N I A	Centene Corporation Bridgeway Health Solutions,	Ownership	100.0	Corporation Centene		
01295	Centene Corporation	16310	20-4980818				Arizona Inc.	AZ	IIA	LLC	Ownership	100 0	Corporation	NO	
											'		Centene		
01295	Centene Corporation	. 00000	36-2979209				Celtic Group, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N0	
04005	Contana Company ties	00700	00 0044040				Colhie Insurance Comment		1.4	Caldia Casua III	Owner male in	400.0	Centene	N/O	
01295	Centene Corporation	. 80799	06-0641618				Celtic Insurance Company	L	IA	Celtic Group, Inc	Ownership	100.0	Corporation	NU	

								·	1			ı	T		
1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID.	Federal		Traded (U.S. or	,	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Yes/No)	*
01295	Centene Corporation	15762	35-2525384				Ambetter of Magnolia Inc	MS	IA	Celtic Insurance Company	Ownership	100.0	Centene Corporation Centene	NO	
01295	Centene Corporation	15729	36-4802632				Ambetter of Peach State Inc Ambetter Health of Louisiana.	GA	IA	Celtic Insurance Company	Ownership	100.0	Corporation	NO	
01295	Centene Corporation	17514	92-3523808				Inc	LA	I A	Celtic Group, Inc	Ownership	100.0	Corporation Centene	NO	
01295	Centene Corporation	00000	27 - 2221367				Novasys Health, Inc	DE	NIA	Celtic Group, Inc	Ownership	100.0	Corporation	NO	
01295	Centene Corporation	00000	39-1864073				Centene Management Company LLC	WI	NIA	Centene CorporationCentene Management Company	Ownership	100.0	Corporation	NO	
01295	Centene Corporation	00000	82-2761995				Alliance, LLC	DE	NIA	LLC	Ownership	50.0	Corporat ion	NO	
01295	Centene Corporation	00000	46-2798132				Lifeshare Management Group, LLC	NH	NIA	Centene Corporation	Ownership	100.0	Centene Corporation		
01295	Centene Corporation	00000	22-3889471				Envolve Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	
01295	Centene Corporation	00000	68-0461584				Cenpatico Behavioral Health,	CA	NIA	Envolve Holdings, LLC	Ownership	100.0	Centene Corporation	NO	
01295	Centene Corporation	00000	37 - 1788565				Envolve, Inc	DE	NIA	Envolve Holdings, LLC	Ownership	100.0	Centene Corporation	NO	
01295	Centene Corporation	00000	61 - 1846191				Envolve Benefits Options, Inc	DE	NIA	Envolve Holdings, LLC	Ownership	100.0	Centene Corporation	NO	
01295	Centene Corporation	00000	20-4730341				Envolve Vision Benefits, Inc	DE	NIA	Envolve Benefits Options,	Ownership	100.0	Centene Corporation	NO	
01295	Centene Corporation	95302	75-2592153				Envolve Vision of Texas, Inc	ТХ	I A	Envolve Vision Benefits, Inc.	Ownership	100.0	Centene Corporation	NO	
01295	Centene Corporation	00000	20-4773088				Envolve Vision, Inc	DE	NIA	Envolve Vision Benefits, Inc.	Ownership	100.0	Centene Corporation		
01295	Centene Corporation	00000	65-0094759				Envolve Vision of Florida, Inc	FL	NIA	Envolve Vision Benefits, Inc.	Ownership	100.0	Centene Corporation	NO	
01295	Centene Corporation	00000	20-4861241				Envolve Total Vision, Inc	DE	NIA	Envolve Vision Benefits, Inc Envolve Benefits Options,	Ownership	100.0	Centene Corporation	NO	
01295	Centene Corporation	00000	46-2783884				Envolve Dental, Inc	DE	NIA	Inc	Ownership	100.0	Centene Corporation Centene	NO	
01295	Centene Corporation	00000	81-2969330				Envolve Dental of Florida, Inc	FL	NIA	Envolve Dental, Inc	Ownership	100.0	Corporation Centene	NO	
01295	Centene Corporation	16106	81-2796896				Envolve Dental of Texas, Inc	TX	IA	Envolve Dental, Inc	Ownership	100.0	Corporation	NO	
01295	Centene Corporation	00000	77 -0578529				Centene Pharmacy Services, Inc	DE	NIA	Envolve Holdings, LLC Centene Pharmacy Services,	Ownership	100.0	Corporation	NO	
01295	Centene Corporation	00000	27 - 1339224				MeridianRx, LLCSpecialty Therapeutic Care	MI	NIA	Inc	Ownership	100.0	Corporation	NO	
01295	Centene Corporation	00000	27 - 3617766				Holdings, LLC	DE	NIA	Centene Corporation Specialty Therapeutic Care	Ownership	100.0	Corporation Centene	NO	
01295	Centene Corporation	00000	80-0856383				Presonyx, Inc	DE	NIA	Holdings, LLCSpecialty Therapeutic Care	Ownership	100.0	Corporation	NO	
01295	Centene Corporation	00000	45-2780334				AcariaHealth, Inc	DE	NIA	Holdings, LLC	Ownership	100.0	Corporation	N0	

16.3

1	2	3	4	5	6	7 Name of	8	9	10	11	12 Type of Control	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	(Ownership, Board, Management, Attorney-in-Fact, Influence Other)	If Control is Ownership Provide		Is an SCA Filing Required? (Yes/No)	*
	•			TOOL	Oiix	mornationary					<u> </u>	Ŭ	Centene	(100/110)	
01295	Centene Corporation	00000	27 - 1599047				AcariaHealth Pharmacy #14, Inc	CA	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation Centene	N0	
01295	Centene Corporation	00000	20-8192615	-			AcariaHealth Pharmacy #11, Inc	TX	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation	N0	
01295	Centene Corporation	00000	27 - 2765424				AcariaHealth Pharmacy #12, Inc	NY	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation	N0	
01295	Centene Corporation	00000	26-0226900				AcariaHealth Pharmacy #13, Inc	CA	NIA	AcariaHealth, Inc	Ownership	100.0	Centene Corporation	N0	
01295	Centene Corporation	00000	13-4262384				AcariaHealth Pharmacy, Inc	CA	NIA	AcariaHealth, Inc.	Ownership.	100.0	Centene Corporation	NO	
0.4005	·											400.0	Centene		
01295	Centene Corporation	00000	27 - 3707698				HomeScripts.com, LLC	MI	NIA	AcariaHealth, Inc	Ownership	100 .0	Corporation Centene	NO	
01295	Centene Corporation	00000	20-0873587				Foundation Care LLC.	MO	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation	N0	
01295	Centene Corporation	00000	20-8420512				AcariaHealth Pharmacy #26, Inc	DE	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation	N0	
01295	Centene Corporation	00000	47 - 5208076				Health Net. LLC	DF	NIA	Centene Corporation	Ownership	100 0	Centene Corporation	NO	
	'									'	'		Centene		
01295	Centene Corporation	00000	95-4402957				Health Net of California, Inc	CA	NIA	Health Net, LLC Health Net of California,	Ownership	100.0	Corporation	N0	
01295	Centene Corporation	66141	73-0654885				Health Net Life Insurance Company	CA	IA	Inc.	Ownership	100.0	Centene Corporation	NO	
	'						Health Net Life Reinsurance			Health Net of California,	İ '		Centene		
01295	Centene Corporation	00000	98-0409907	-			Company	CYM	NIA	Inc Health Net of California,	Ownership	100.0	CorporationCentene	N0	
01295	Centene Corporation	00000	83-1570018				MEB Ventures II. LLC	DE	N I A	Inc	Ownership	100.0	Corporation	NO.	
	,						,,				İ '		Centene		
01295	Centene Corporation	00000	83-1576137	-			BLR Properties, LLC	DE	NIA	MEB Ventures II, LLC	Ownership	80.0	Corporation Centene	N0	
01295	Centene Corporation	00000	95-4117722				Managed Health Network, LLC	DE	NIA	Health Net. LLC	Ownership	100.0	Corporation	NO.	
	'	i i					,						Centene		
01295	Centene Corporation	00000	95-3817988				Managed Health Network	CA	NIA	Managed Health Network, LLC	Ownership	100.0	Corporation	N0	
01295	Centene Corporation	00000	95-4146179				MHN Services. LLC	CA	NIA	Managed Health Network, LLC	Ownership	100.0	Corporation	NO.	
	,						Health Net Federal Services,			,			Centene		
01295	Centene Corporation	00000	68-0214809				LLC	DE	NIA	Health Net, LLC	.Ownership	100.0	Corporation	N0	
01295	Centene Corporation	00000	88-0357895				Network Providers, LLC	DE	NIA	Health Net Federal Services, LLC	Ownership	100.0	Centene Corporation	NO	
	,						Health Net Health Plan of				. Owner Simp		Centene		
01295	Centene Corporation	95800	93-1004034				Oregon, Inc.	OR	IA	Health Net, LLC	Ownership	100.0	Corporat ion	N0	
01295	Centene Corporation	00000	54-2174068				Health Net Community Solutions,	CA	N I A	Health Net, LLC	Ownership	100.0	Centene Corporation	NO	
0 1230	logiterie corporation		04-21/4000	-			1110	bn	IN I M	Inearth Net, LLO	. Owner Sill b	100.0	Centene	NU	
01295	Centene Corporation	95206	36-3097810				Health Net of Arizona, Inc	AZ	I A	Health Net, LLC	Ownership	100.0	Corporation	N0	
01205	Contono Cornoration	15895	81-1348826				Health Net Community Solutions	AZ	l IA	Health Not 110	Ownership	100.0	Centene	NO.	
01295	Centene Corporation.		01-1340020				of Arizona, Inc	AZ	I A	Health Net, LLC	.Ownership	100.0	Corporation	NU	

1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership.	13	14	15	16
		NAIC				Exchange if Publicly	Names of		Relationship to		Board, Management,	If Control is Ownership		Is an SCA Filing	
Group Code	Constant Norman	Company Code	ID Normalia a s	Federal RSSD	CIK	Traded (U.S. or	Parent, Subsidiaries or Affiliates	Domiciliary	Reporting	Directly Controlled by (Name of Entity/Person)	Attorney-in-Fact, Influence, Other)	Provide	Ultimate Controlling Entity(ies)/Person(s)	Required?	
Code	Group Name	Code	Number	KSSD	CIK	International)	Centene Health Plan Holdings,	Location	Entity	(Name of Entity/Person)	influence, Other)	Percentage	Centene	(Yes/No)	
01295	Centene Corporation	00000	82-1172163				Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	NO	
							Ambetter of North Carolina,			Centene Health Plan Holdings,			Centene		
01295	Centene Corporation	16395	82-5032556				Inc	NC	I A	Inc	Ownership	100.0	Corporation	NO	
0.4005							Carolina Complete Health	25		Centene Health Plan Holdings,			Centene		
01295	Centene Corporation	00000	82-2699483				Holding Company Partnership	DE	NIA	Inc Carolina Complete Health	Ownership	80.0	Corporation	N0	
01295	Centene Corporation	16526	82-2699332				Carolina Complete Health, Inc	NC	I A	Holding Company Partnership	Ownership.	100.0	Centene Corporation	NO	
01233	Contone corporation	10020	02-2000002				New York Quality Healthcare			Thorumg company ranthership	ι ο wποτ στιτ μ	1100.0	Centene		
01295	Centene Corporation	16352	82-3380290				Corporation	NY	IA	Centene Corporation	Ownership	100.0	Corporation	NO	
	·									New York Quality Healthcare	·		Centene		
01295	Centene Corporation	95310	06-1405640				WellCare of Connecticut, Inc	CT	A	Corporation	Ownership	100.0	Corporation	N0	
01205	Contona Corneration	00000	47 - 4179393				Community Medical Holdings Corn	DE	NIA	Centene Corporation	Ownership	100.0	Centene	NO	
01295	Centene Corporation	00000	47 -4179393				Community Medical Holdings Corp	 	N I A	Community Medical Holdings	Ownership	100.0	Corporation Centene	NU	
01295	Centene Corporation	00000	46-3485489				Access Medical Acquisition, LLC	DE	NIA	Corp	Ownership.	100.0	Corporation	NO	
							Access Medical Group of North			Access Medical Acquisition,			Centene		
01295	Centene Corporation	00000	45-3191569				Miami Beach, LLC	FL	NIA	LLC	Ownership	100.0	Corporation	NO	
0.4005			45 0404740				Access Medical Group of Miami,			Access Medical Acquisition,			Centene		
01295	Centene Corporation	00000	45-3191719				LLC	FL	NIA	LLC	Ownership	100.0	Corporation	N0	
01295	Centene Corporation	00000	45-3192283				Access Medical Group of Hialeah, LLC	FL	NIA	Access Medical Acquisition,	Ownership	100.0	Centene Corporation	NO	
0 1233	Contone corporation	00000	40-0102200				Access Medical Group of			Access Medical Acquisition.	ο wποτ στιτρ	1100.0	Centene		
01295	Centene Corporation	00000	45-3199819				Westchester, LLC.	FL	NIA	LLC.	Ownership	100.0	Corporation	NO	
							Access Medical Group of Opa-			Access Medical Acquisition,			Centene		
01295	Centene Corporation	00000	45-3505196				Locka, LLC	FL	NIA	LLC	Ownership	100.0	Corporation	N0	
01295	Centene Corporation	00000	45-3192955				Access Medical Group of Perrine, LLC	FI	NIA	Access Medical Acquisition,	Ownership	100.0	Centene Corporation	NO	
01233	centene corporation	00000	40-010200				Access Medical Group of Florida	J L		Access Medical Acquisition,	Owner 3111 p	1100.0	Centene		
01295	Centene Corporation	00000	45-3192366				City, LLC	FL	NIA	LLC	Ownership	100.0	Corporation	NO	
	·						Access Medical Group of Tampa,			Access Medical Acquisition,	·		Centene		
01295	Centene Corporation	00000	82-1737078				LLC.	FL	NIA	LLC	Ownership	100.0	Corporation	N0	
01295	Centene Corporation	00000	82-1750978				Access Medical Group of Tampa	FL	NIA	Access Medical Acquisition,	Ownership.	100.0	Centene Corporation	NO	
01295	centene corporation	00000	02-17-00970				Access Medical Group of Tampa	J L		Access Medical Acquisition,	Ownersinp	1100.0	Centene		
01295	Centene Corporation	00000	82-1773315				III. LLC	FL	NIA	LLC	Ownership	100.0	Corporation	NO	
	,						Access Medical Group of			Access Medical Acquisition,			Centene		
01295	Centene Corporation	00000	84-2750188				Lakeland, LLC	FL	NIA	LLC	Ownership	100.0	Corporation	N0	
01295	Centene Corporation	00000	88-2251274				Access Medical Group of Pembroke Pines. LLC	FI	NIA	Access Medical Acquisition,	Ownership.	100.0	Centene Corporation	NO	
01290	Contone corporation	00000	00-2201214				Access Medical Group of		NIA	Access Medical Acquisition,	OMIIG12111h	100.0	Centene		
01295	Centene Corporation	00000	88-2263310	.			Margate, LLC	FL	NIA	LLC	Ownership	100.0	Corporation	NO	
	'						Access Medical Group of			Access Medical Acquisition,			Centene		
01295	Centene Corporation	00000	88-2284518	[Riverview, LLC	FL	NIA	LLC	Ownership	100.0	Corporation	N0	
01205	Contono Cornoration	00000	92-0235557				Access Medical Group of	FL	NIA	Access Medical Acquisition,	Ownership	100.0	Centene	NO	
01295	Centene Corporation	00000	92 - 0230007				Kendall, LLCAccess Medical Group of		N I A	Access Medical Acquisition,	Ownership	100.0	Corporation Centene	INU	
01295	Centene Corporation	00000	92-0261029				Lauderdale Lakes, LLC	FL	N I A	LLC	Ownership	100 0	Corporation	NO	
			1 0-0.0-0				1		1	1	1	1	100.00.00.	1	

1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership.	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC		l <u>-</u>		Publicly	Names of		to	5 6	Management,	Ownership		Filing	
Group Code	Group Name	Company Code	ID Number	Federal RSSD	CIK	Traded (U.S. or International)	Parent, Subsidiaries or Affiliates	Domiciliary Location	Reporting Entity	Directly Controlled by (Name of Entity/Person)	Attorney-in-Fact, Influence. Other)	Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Required? (Yes/No)	*
Code	Gloup Name	Code	Number	NOOD	CIK	international)	Access Medical Group of Sand	Location	Littly	Access Medical Acquisition.	illiluerice, Other)	reiceillage	Centene	(165/140)	
01295	Centene Corporation	00000	33-2792794				Lake, LLC	FL	NIA	LLC	Ownership	100.0	Corporation	NO	
							Access Medical Group of Miami			Access Medical Acquisition,			Centene		
01295	Centene Corporation	00000	39-2435871				Medicare, LLC	FL	NIA	LLC.	Ownership	100.0	Corporation	N0	
01295	Centene Corporation	00000	39-2463326				Access Medical Group of Hillsborough Peds, LLC	FL	NIA	Access Medical Acquisition,	Ownership	100.0	Centene Corporation	NO	
0 1200	contone corporation	00000	2400020				l l l l l l l l l l l l l l l l l l l				0 #1101 3111 p	100.0	Centene		
01295	Centene Corporation	00000	82-4883921				Interpreta Holdings, Inc	DE	NIA	Centene Corporation	Ownership	80.1	Corporation	NO	
01295	Contone Corneration	00000	46-5517858				Interprete Inc	DE	NIA	Interpreta Holdings, Inc.	Ownorabin	100.0	Centene	NO	
01295	Centene Corporation	00000	40-0017000	-			Interpreta, Inc.	ν⊏	N I A	Interpreta norunigs, inc	Ownership	100.0	Corporation Centene	INU	
01295	Centene Corporation	00000	32-2434596				Next Door Neighbors, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	NO	
										l <u>.</u>			Centene		
01295	Centene Corporation	00000	83-2381790				Next Door Neighbors, Inc Centene Venture Company Alabama	DE	NIA	Next Door Neighbors, LLC	Ownership	100.0	Corporation	N0	
01295	Centene Corporation	16771	84-3707689				Health Plan. Inc.	AI	I A	Next Door Neighbors, Inc	Ownership	100.0	Centene Corporation	NO	
01200	contone corporation						Centene Venture Company	, ,		Hoxe Boot Horgingere, Inc.	0 W1101 0111 P		Centene		
01295	Centene Corporation	16505	83 - 2425735				Illinois	I L	A	Next Door Neighbors, Inc	Ownership	100.0	Corporation	N0	
01205	Contone Corneration	16528	83-2409040				Contana Vantura Company Kanaga	KS.	IA	Next Deer Neighberg Inc	Ownorabin	100.0	Centene	NO.	
01295	Centene Corporation	10020	03-2409040	-			Centene Venture Company Kansas	NO		Next Door Neighbors, Inc	Ownership	100.0	Corporation Centene	NU	
01295	Centene Corporation	16499	83-2434596				Centene Venture Company Florida	FL	I A	Next Door Neighbors, Inc	Ownership	100.0	Corporation	NO	
							Centene Venture Company						Centene		
01295	Centene Corporation	16773	84-3679376				Indiana, Inc Centene Venture Company	IN	I A	Next Door Neighbors, Inc	Ownership	100.0	Corporation Centene	N0	
01295	Centene Corporation	16770	84-3724374				Tennessee	TN	IA	Next Door Neighbors, Inc	Ownership	100.0	Corporation	NO	
01200	contono corporatron						Centene Venture Insurance			There been morgination, morning	0 11101 0111 p		Centene		
01295	Centene Corporation	16990	86 - 1543217				Company Texas	TX	A	Next Door Neighbors, Inc	Ownership	100.0	Corporation	N0	
01295	Centene Corporation	16613	83-2446307				Centene Venture Company Michigan	MI	l IA	Next Door Neighbors, Inc	Ownership	100.0	Centene Corporation	NO	
01293	Centene Corporation	10013	03-2440307				Comprehensive Health	JVI I		Next boot Nergibors, Inc	Owner Sirrp	100.0	Centene	INO	
01295	Centene Corporation	00000	59-3547616				Management, LLC.	FL.	NIA	Centene Corporation	Ownership	100.0	Corporation	NO	
04005	0	00000	00 4405000				Wall Care Harlith Diagram	DE	IIID	0	0	400.0	Centene	NO	
01295	Centene Corporation	00000	83-4405939	-			WellCare Health Plans, Inc	DE	UIP	Centene Corporation	Ownership	100.0	Corporation Centene	N0	
01295	Centene Corporation	00000	04-3669698				WCG Health Management, Inc	DE	UIP	WellCare Health Plans, Inc	Ownership	100.0	Corporation	NO	
	,						The WellCare Management Group,			,			Centene		
01295	Centene Corporation	00000	14-1647239				Inc	NY	UDP	WCG Health Management, Inc	Ownership	100.0	Corporation	N0	
01295	Centene Corporation	16329	81-5442932				WellCare of Mississippi, Inc	MS	l IA	The WellCare Management Group. Inc.	Ownership	100.0	Centene Corporation	NO	
01230	Contono Corporation	10020	01-0442002					JiIU	··············	The WellCare Management	σπιστοιτιμ	100.0	Centene		
01295	Centene Corporation	00000	82-0664467				WellCare of Virginia, Inc	VA	NIA	Group, Inc	Ownership	100.0	Corporation		
04005	Conton Commenting	10117	04 2200004				Wall Care of Oblighton Los	01/	1.4	The WellCare Management	Owen mak i :	400.0	Centene	NO.	
01295	Centene Corporation	16117	81-3299281				.WellCare of Oklahoma, Inc WellCare Health Insurance	0K		Group, Inc The WellCare Management	Ownership	100.0	Corporation Centene	NU	
01295	Centene Corporation	00000	84-3731013				Company of Nevada, Inc	NV	NIA	Group, Inc	Ownership	100.0	Corporation	NO	
							WellCare Health Insurance of			The WellCare Management	i i		Centene		
01295	Centene Corporation	16692	84-3739752				the Southwest, Inc	AZ		Group, Inc	Ownership	100.0	Corporation	N0	

1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership.	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to	5 6	Management,	Ownership		Filing	
Group Code	Group Name	Company Code	ID Number	Federal RSSD	CIK	Traded (U.S. or International)	Parent, Subsidiaries or Affiliates	Domiciliary Location	Reporting Entity	Directly Controlled by (Name of Entity/Person)	Attorney-in-Fact, Influence. Other)	Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)		*
Code	Group Name	Code	Number	KSSD	CIK	international)	or Amiliates	Location	Enuty	The WellCare Management	iniluence, Other)	Percentage	Centene	(Yes/No)	
01295	Centene Corporation	10760	20-2103320				WellCare of Georgia, Inc	GA	IA	Group. Inc.	Ownership	100.0	Corporation	NO	
							, , , , , , , , , , , , , , , , , , , ,]	The WellCare Management			Centene		
01295	Centene Corporation	12964	20-8058761				WellCare of Texas, Inc	ТХ	I A	Group, Inc.	Ownership	100.0	Corporation	. N0	
04005	0	44775	20 0000000				WellCare of South Carolina,	00		The WellCare Management	0	400.0	Centene	NO	
01295	Centene Corporation	11775	32-0062883				lnc WellCare Health Plans of New	SC		Group, Inc The WellCare Management	Ownership	100.0	Corporation	. NU	
01295	Centene Corporation	13020	20-8017319				Jersey. Inc.	NJ	I A	Group. Inc.	Ownership	100.0	Corporation	NO	
0 1200	Joseph Grant Grant	10020	20 0017010	-			WellCare Health Plans of		1	The WellCare Management	0 11 0 11 p		Centene		
01295	Centene Corporation	16970	84-3547689				Massachusetts, Inc	MA	IA	Group, Inc.	Ownership	100.0	Corporation	NO	
							WellCare Health Insurance		l	The WellCare Management			Centene		
01295	Centene Corporation	16752	84 - 4449030				Company of Oklahoma, Inc	0K	I A	Group, IncThe WellCare Management	Ownership	100.0	Corporation	. NO	
01295	Centene Corporation	16753	84-3907795				WellCare Health Plans of Missouri, Inc.	MO	IA	Group, Inc.	Ownership	100.0	Centene Corporation	NO.	
01295	Centene corporation	107 00	. 04-3307733				WellCare Prescription	JWO		The WellCare Management	Ownersinp	1100.0	Centene		
01295	Centene Corporation	10155	20-2383134				Insurance, Inc	AZ	IA	Group, Inc.	Ownership	100.0	Corporation	NO	
	·						WellCare Health Insurance of			The WellCare Management			Centene		
01295	Centene Corporation	17002	84-4664883				Hawaii, Inc.	Н	I A	Group, Inc	Ownership	100.0	Corporation	N0	
04205	Contant Consenting	10700	84-4627844				WellCare Health Plans of Rhode	RI	RE	The WellCare Management	O	100.0	Centene	NO	
01295	Centene Corporation	16766	84-402/844				Island, Inc	KI	KE	Group, Inc The WellCare Management	Ownership	100.0	Corporation Centene	. NU	
01295	Centene Corporation	16765	84-4649985				WellCare of Illinois, Inc	11	IA	Group, Inc.	Ownership	100.0	Corporation	NO	
										The WellCare Management			Centene		
01295	Centene Corporation	16533	45-5154364				Rhythm Health Tennessee, Inc	TN	I A	Group, Inc	Ownership	100.0	Corporation	NO	
04005	0	40004	44 0407500				WellCare Health Insurance of	NIV/		The WellCare Management	0	400.0	Centene	NO	
01295	Centene Corporation	10884	11-3197523				New York, Inc	NY	I A	Group, Inc The WellCare Management	Ownership	100.0	Corporation Centene		
01295	Centene Corporation	00000	27 - 0386122				Ohana Health Plan. Inc	н	lNIA	Group, Inc	Ownership	100.0	Corporation	NO	
0 1200	deriterio corporationi	00000	0000122				Johana Hoarth Fran, Ho		1	The WellCare Management	0 11 0 11 0 11 0 11 0 11 0 11		Centene		
01295	Centene Corporation	00000	83-2840051				WellCare of Indiana, Inc	IN	NIA	Group, Inc.	Ownership	100.0	Corporation	NO	
0.4005		00000	45 0000700				America's 1st Choice California			The WellCare Management		400 0	Centene		
01295	Centene Corporation	00000	45-3236788				Holdings, LLC	FL	NIA	Group, IncAmerica's 1st Choice	Ownership	100.0	Corporation Centene	. NO	
01295	Centene Corporation	00000	20-5327501				WellCare of California, Inc.	CA	NIA	California Holdings, LLC	Ownership	100.0	Corporation.	NO	
01200	deritario del per at ren						WellCare Health Insurance of			The WellCare Management	0 WINOT SITTP	100.0	Centene		
01295	Centene Corporation	16532	83-2276159				Tennessee, Inc	TN	I A	Group, Inc	Ownership	100.0	Corporation	NO	
0.4005		10515							l	The WellCare Management	ļ		Centene		
01295	Centene Corporation	16515	83-2914327				WellCare of New Hampshire, Inc	NH	I A	Group, Inc	Ownership	100.0	Corporation	. NO	
01295	Centene Corporation	16514	83-2255514				WellCare Health Plans of Vermont Inc.	I A	I A	The WellCare Management Group, Inc.	Ownership.	100.0	Centene Corporation	NO	
01200		10014	. 00 22200 14	-			WellCare Health Insurance of	I/\tag{\tag{\tag{\tag{\tag{\tag{\tag{		The WellCare Management	O#11613111P	100.0	Centene	.	
01295	Centene Corporation	16513	83-2126269				Connecticut, Inc	CT	I A	Group. Inc.	Ownership	100.0	Corporation	NO	
1]									The WellCare Management			Centene	1	
01295	Centene Corporation	16571	83-2069308				WellCare of Washington, Inc	WA	I A	Group, Inc.	Ownership	100.0	Corporation	. N0	
01295	Centene Corporation	15510	47-0971481				WellCare Health Plans of Kentucky, Inc.	KY	I.A.	The WellCare Management	Ownership	100.0	Centene Corporation	NO	
01290	Contene Corporation	10010	141 -091 1401				nontucky, IIIC	J		The WellCare Management	ownersurp	100.0	Centene	. INU	
01295	Centene Corporation	16239	82-1301128				WellCare of Alabama, Inc	AL]IA	Group, Inc	Ownership	100.0	Corporation	NO	
			1	1			1		1	11 /		1	1 1		

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
						Name of					Type of Control				
						Securities					(Ownership,				
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary		Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Yes/No)	*
04005	Contone Commenting	16344	82-3114517				WallCass of Mains Inc	l ME	1.4	The WellCare Management	O	100.0	Centene	NO	
01295	Centene Corporation	10344	82-3114517	-			WellCare of Maine, Inc	JVIE	I A	Group, IncThe WellCare Management	Ownership	100.0	Corporation Centene	NU	
01295	Centene Corporation	00000	22-3391045				Harmony Health Systems Inc.	NJ	NIA	Group, Inc.	Ownership.	100.0	Corporation	NO	
01295	centene corporation	00000	22-3391043				nariiony nearth systems inc	JNJ	N I A	Group, mc	Ownership	100.0	Centene	INU	
01295	Centene Corporation	11229	36-4050495				Harmony Health Plan, Inc	11	I A	Harmony Health Systems Inc	Ownership	100.0	Corporation	NO	
01233	Certiene Corporation	11223	00-4000400				WellCare Health Insurance			The WellCare Management	. Owner sirrp	100.0	Centene	INO	
01295	Centene Corporation	64467	36-6069295				Company of Kentucky, Inc	ΚY	IA	Group, Inc.	Ownership.	100.0	Corporation.	NO	
0.200	00.70.10 00.70.4.70	0 1 101	00 0000200				WellCare Health Insurance of			The WellCare Management			Centene		
01295	Centene Corporation	83445	86-0269558				Arizona. Inc.	AZ	IA	Group. Inc.	Ownership	100.0	Corporation	NO	
	'						WellCare Health Insurance of			The WellCare Management	'		Centene		
01295	Centene Corporation	16548	83-3493160				North Carolina, Inc	NC	I A	Group. Inc	Ownership	100.0	Corporation	NO	
	·						WellCare Health Insurance			The WellCare Management			Centene		
01295	Centene Corporation	16788	83-3333918				Company of Louisiana, Inc	LA	I A	Group, Inc.	Ownership	100.0	Corporation	NO	
							WellCare of Missouri Health		l	The WellCare Management			Centene		
01295	Centene Corporation	16512	83-3525830				Insurance Company, Inc	MO	A	Group, Inc.	Ownership	100.0	Corporation	N0	
0.4005							One Care by Care1st Health			The WellCare Management		400.0	Centene		
01295	Centene Corporation	00000	06 - 1742685	-			Plans of Arizona, Inc	AZ	NIA	Group, Inc	Ownership	100.0	Corporation	N0	
04005	Contone Commenting	10570	83-3166908				WellCare Health Insurance	WA.	1.4	The WellCare Management	O	100.0	Centene	NO	
01295	Centene Corporation	16570	83-3100908				Company of Washington, Inc WellCare of North Carolina,		I A	Group, IncThe WellCare Management	Ownership	100.0	Corporation Centene	NU	
01295	Centene Corporation	16547	82-5488080				Inc.	NC NC	I A	Group, Inc.	Ownership	100.0	Corporation	NO	
01293	Centene Corporation	10347	02-3400000				WellCare Health Insurance	JNG	IA	The WellCare Management	ownersinp	100.0	Centene	ino	
01295	Centene Corporation	16343	82-4247084				Company of America	AR	IA	Group. Inc.	Ownership.	100.0	Corporation	NO.	
01200	contono corporatron	100 10	02 12 17 00 1				WellCare National Health			The WellCare Management	0 milor or in p		Centene		
01295	Centene Corporation	16342	82-5127096				Insurance Company	ТХ	IA	Group. Inc.	Ownership	100.0	Corporation	NO	
							WellCare Health Insurance	1]	The WellCare Management			Centene		
01295	Centene Corporation	16516	83-3091673				Company of New Hampshire, Inc	NH	I A	IGroup. Inc.	Ownership	100.0	Corporation	NO	
	,						Wellcare Health Insurance			The WellCare Management	· '		Centene	1 1	
01295	Centene Corporation	16789	84-4709471				Company of New Jersey, Inc	NJ	I A	Group, Inc	Ownership	100.0	Corporation	NO	
							WellCare of Michigan Holding			The WellCare Management			Centene		
01295	Centene Corporation	00000	26-4004578				Company	. MI	NIA	Group, Inc.	Ownership	100.0	Corporation	N0	
01205	Contone Corneration	EDEGO	38-3253977				Meridian Health Plan of	l MI	I A	WellCare of Michigan Holding	Ownership	100.0	Centene	NO	
01295	Centene Corporation	52563	30-3233911	-			Michigan, Inc Meridian Health Plan of	JVI I	I A	Company	Ownership	100.0	Corporation	IN∪	
01295	Centene Corporation	13189	20-3209671				Meridian Health Plan of 	l 11	I A	Company	Ownership	100.0	Centene Corporation	NO	
01290	ventene vorporation	10108	ZU-JZU3U/ 1				111111015, 1110	I L		The WellCare Management	10411619111b	100.0	Centene	INU	
01295	Centene Corporation	13148	20-8937577				Sunshine State Health Plan, Inc.	FL	I A	Group. Inc.	Ownership	50.0	Corporation	l N∪	
0 1200	Santono Corporation	.0110					Same of the floar till Frair, Tile.		1	The WellCare Management			Centene		
01295	Centene Corporation	00000	27 - 4683816				Universal American Corp.	DE	NIA	Group, Inc.	Ownership	100.0	Corporation	NO	
7							Universal American Holdings,]	,			Centene		
01295	Centene Corporation	00000	45-1352914				LLC	DE	NIA	Universal American Corp	Ownership	100.0	Corporation	NO	
	,						American Progressive Life and			· ·					
							Health Insurance Company of New			Universal American Holdings,			Centene		
01295	Centene Corporation	80624	13-1851754				York	NY	I A	LLC.	Ownership	100.0	Corporation	N0	
										Universal American Holdings,			Centene	[]	
01295	Centene Corporation	00000	62-1517194				Heritage Health Systems, Inc	TX	NIA	LLC	Ownership	100.0	Corporation	N0	

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

1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group	<u> </u>	Company		Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary		Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Yes/No)	*
01295	Centene Corporation	10096	62-1819658				SelectCare of Texas. Inc.	TX	IA	Heritage Health Systems, Inc.	Ownershin	100.0	Centene Corporation	NO	
01233	Contone corporation	10000	. 02 - 10 13030				Heritage Health Systems of			The reade rear throughtenis, the	0 #1101 3111 p	100.0	Centene		
01295	Centene Corporation	00000	76-0459857				Texas, Inc.	ТХ	NIA	Heritage Health Systems, Inc.,	Ownership.	100.0	Corporation	NO	
	,						,				,		Centene		
01295	Centene Corporation	95448	. 71-0794605				QCA Healthplan, Inc	AR	I A	Centene Corporation	Ownership	100.0	Corporation		
04005	0	70000	74 0000040				Qualchoice Life and Health	AR	1.4	04	0	400.0	Centene	NO	
01295	Centene Corporation	70998	71-0386640				Insurance Company	AK	IA	Centene Corporation	Ownership	100.0	Corporation Centene	NU	
01295	Centene Corporation	16814	84-4119570				District Community Care Inc.	DC	IA	Centene Corporation	Ownership	100.0	Corporat ion	NO	
0.200	00.11.01.0 00. po. at 10.1		1				Oklahoma Complete Health		1	· ·	0 p		Centene		
01295	Centene Corporation	00000	86-2318658				Holding Company, LLC	0K	NIA	Centene Corporation	Ownership	100.0	Corporation	NO	
0.4005		10001	04.0404507					014		Oklahoma Complete Health		400.0	Centene		
01295	Centene Corporation	16904	81-3121527				Oklahoma Complete Health Inc	0 K	I A	Holding Company, LLC	Ownership	100.0	Corporation	N0	
01295	Centene Corporation	00000	86-2694770				RI Health & Wellness, Inc.	RI	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	NO	
01233	centene corporation	00000	. 00-2034//0				in hearth & wermess, mc	J	N1/^	Centene corporation	Owner 3111 p	100.0	Centene		
01295	Centene Corporation	00000	88-3410060				Delaware First Health, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	NO	
	'						Delaware First Health Complete,			'	· '		Centene		
01295	Centene Corporation	00000	. 88-4145615				Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation		
01205	Contona Corneration	00000	58-1076937				Magellan Health. Inc.	DE	NIA	Contona Corneration	Ownership	100.0	Centene	NO	
01295	Centene Corporation	00000	. 30-10/093/				Magellan Pharmacy Services,	ΣΕ	N I A	Centene Corporation	Ownership	100.0	Corporation Centene	NU	
01295	Centene Corporation	00000	47 - 5588795				Inc	DE	NIA	Magellan Health, Inc	Ownership	100.0	Corporation	NO NO	
0.200	00.11.01.0 00. po. at 101						Magellan Behavioral Health of			Magellan Pharmacy Services,	0		Centene		
01295	Centene Corporation	12632	52-2310906				New Jersey, LLC	NJ	I A	Inc	Ownership	100.0	Corporation	NO	
							Magellan Health Services of								
01205	Centene Corporation	00000	95-2868243				California, Inc. – Employer Services	CA	NIA	Magellan Pharmacy Services,	Ownership	100.0	Centene	N0	
01295	Centene Corporation	00000	. 93-2000243				Services		N I A	THC	Ownership	100.0	Corporation Centene		
01295	Centene Corporation	00000	52-2135463				Magellan Healthcare, Inc.	DE	NIA	Magellan Health, Inc.	Ownership	100.0	Corporation	NO	
							Human Affairs International of			, , , , , , , , , , , , , , , , , , , ,			Centene		
01295	Centene Corporation	00000	93-0999350				California	CA	NIA	Magellan Healthcare, Inc	Ownership	100.0	Corporation	N0	
04005	0	45550	40, 4400400				Magellan Complete Care of		1.4	Manadilan Harithanan Ing	0	400.0	Centene	NO	
01295	Centene Corporation	15550	. 46-4188169				Louisiana, Inc Magellan Behavioral Health of	LA	I A	Magellan Healthcare, Inc	Ownership	100.0	Corporation Centene	N0	
01295	Centene Corporation	00000	20-1919978				Florida, Inc	FL	NIA	Magellan Healthcare, Inc	Ownership	100.0	Corporation	NO	
01200	Contono corporation	00000	120 1010070				Magellan Health Services of			,	0 11101 0111 p		Centene		
01295	Centene Corporation	00000	20-1728452				Arĭzona, Inc	AZ	NIA	Magellan Healthcare, Inc	Ownership	100.0	Corporation	NO	
0.405-							Magellan Health Services of New	ļ ,		l.,			Centene		
01295	Centene Corporation	00000	85-0420095				Mexico, Inc	NM	NIA	Magellan Healthcare, Inc	Ownership	100.0	Corporation	NO	
01295	Centene Corporation	00000	85-4065417				Magellan of Idaho, LLC	ID	NIA	 Magellan Healthcare, Inc	Ownership	100.0	Centene Corporation	NO	
01233	ountone ourporation	00000	. 00-4000417				Magellan Complete Care of	1 U	IN I M	magorian neartheare, inc	οπιιστοιτίμ	100.0	Centene		
01295	Centene Corporation	15924	46-4457706				Pennsylvania, Inc.	PA	IA	Magellan Healthcare, Inc	Ownership	100.0	Corporation	NO	
										<u> </u>	l		Centene		
01295	Centene Corporation	97292	57 - 0724249				Magellan Life Insurance Company	DE	I A	Magellan Healthcare, Inc	Ownership	100.0	Corporation	NO	

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
						Name of					Type of Control				
						Securities					(Ownership,				
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company		Federal		Traded (U.S. or		Domiciliary		Directly Controlled by	Attorney-in-Fact,		Ultimate Controlling		
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Yes/No)	*
							Merit Behavioral Care						Centene		
01295	Centene Corporation	00000	22-3236927				Corporation	DE	NIA	Magellan Healthcare, Inc	Ownership	100.0	Corporation	N0	
							Magellan Providers of Texas,			Merit Behavioral Care			Centene		
01295	Centene Corporation	00000	76-0513383				Inc	TX	NIA	Corporation	Ownership	100.0	Corporation	N0	
							Magellan Behavioral Health of			Merit Behavioral Care			Centene		
01295	Centene Corporation	47019	23-2759528				Pennsylvania, Inc	PA	I A	Corporation	Ownership	100.0	Corporation	N0	
							Magellan Behavioral of						Centene		
01295	Centene Corporation	00000	52-1946167				Michigan, Inc	MI	NIA	Magellan Healthcare, Inc	Ownership	100.0	Corporation	N0	
													Centene		
01295	Centene Corporation	00000	92-0642038				Magellan of Maryland, LLC	MD	NIA	Magellan Healthcare, Inc	Ownership	100.0	Corporation	N0	
							Magnolia Joint Venture Holding						Centene		
01295	Centene Corporation	00000	92-0679069				Company, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N0	
							l <u></u>						Centene		
01295	Centene Corporation	17804	. 33 - 1995487				Ambetter Health of Texas, Inc	TX	I A	Centene Corporation	Ownership	100.0	Corporation	NO	
							Ambetter Health of Florida,						Centene		
01295	Centene Corporation	17793	33-2010592				Inc.	FL	I A	Centene Corporation	Ownership	100.0	Corporation	NO	
													Centene		
01295	Centene Corporation	00000	39-4149441				Idaho Complete Health, Inc	ID	I A	Centene Corporation	Ownership	100.0	Corporation	N0	
			ļ	ļ											
			ļ	ļ											
				ļ											
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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
2.	AUGUST FILING 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.	N/A
xpla	nation:	
Bar C	ode:	

OVERFLOW PAGE FOR WRITE-INS

SCHEDULE A – VERIFICATION

Real Estate		
	1	2
		Prior Year Ended
	Year To Date	December 31
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 Current year change in encumbrances		0
3. Current year change in encumbrances		0
Total gain (loss) on disposals		0
5. Deduct amounts received on disposals		0
Total foreign exchange change in book/adjusted carrying value		0
7. Deduct current year's other-than-temporary impairment recognized		0
8. Deduct current year's depreciation		0
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)		0
10. Deduct total nonadmitted amounts		0
11. Statement value at end of current period (Line 9 minus Line 10)	0	0

SCHEDULE B - VERIFICATION

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

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets		
	1	2
		Prior Year Ended
	Year To Date	December 31
Book/adjusted carrying value, December 31 of prior year	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		0
2.1 Actual cost at time of acquisition 2.2 Additional investment made after acquisition 3. Capitalized deferred interest and other. 4. Accorded of discount.		0
3. Capitalized deferred interest and other		0
		0
5. Unrealized valuation increase/(decrease)		0
6. Total gain (loss) on disposals.		
7. Deduct amounts received on disposals.		0
Deduct amortization of premium, depreciation and proportional amortization		0
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
13. Statement value at end of current period (Line 11 minus Line 12)	T 0	0

SCHEDULE D - VERIFICATION

Bonds and Stocks		
	1	2
		Prior Year Ended
	Year To Date	December 31
Book/adjusted carrying value of bonds and stocks, December 31 of prior year	124, 184	122,714
Cost of bonds and stocks acquired	126, 166	0
3. Accrual of discount	816	1,470
Unrealized valuation increase/(decrease)		0
5. Total gain (loss) on disposals		0
Deduct consideration for bonds and stocks disposed of	125,000	0
7. Deduct amortization of premium.	106	0
Total foreign exchange change in book/adjusted carrying value		0
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)	126,061	124 , 184
12. Deduct total nonadmitted amounts	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	126,061	124, 184

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	arter for all Bonds and Prete 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)	124,941	126,167	125,000	(47)	124,559	124,941	126,061	124 , 184
2. NAIC 2 (a)	0				0	0	0	(
3. NAIC 3 (a)	0				0	0	0	<u> </u> (
4. NAIC 4 (a)	0				0	0	0	
5. NAIC 5 (a)	0				0	0	0	
6. NAIC 6 (a)					0	0	0	C
7. Total ICO	124,941	126,167	125,000	(47)	124,559	124,941	126,061	124, 184
ASSET-BACKED SECURITIES (ABS)								
8. NAIC 1	0				0	0	0	
9. NAIC 2	0				0	0	0	(
10. NAIC 3	0				0	0	0	
11. NAIC 4	0				0	0	0	(
12. NAIC 5	0				0	0	0	(
13. NAIC 6	0				0	0	0	(
14. Total ABS	0	0	0	0	0	0	0	(
PREFERRED STOCK								
15. NAIC 1	0				0	0	0	(
16. NAIC 2	0				0	0	0	[
17. NAIC 3	0				0	0	0	<u> </u>
18. NAIC 4	0				0	0	0	(
19. NAIC 5	0				0	0	0	
20. NAIC 6	0				0	0	0	(
21. Total Preferred Stock	0	0	0	0	0	0	0	
22. Total ICO, ABS & Preferred Stock	124.941	126,167	125.000	(47)	124.559	124.941	126.061	124, 184

(a) Book/Adjusted Carrying Value column	for the end of the current reporting period	ncludes the following amount of short-term and cash equiv	alent bonds by NAIC designation: NAIC 1 \$; NAIC 2 \$
NAIC 3 \$; NAIC	C4\$; NAIC 5\$; NAIC 6 \$		

Schedule DA - Part 1

Schedule DA - Verification

Schedule DB - Part A - Verification

Schedule DB - Part B - Verification

Schedule DB - Part C - Section 1

Schedule DB - Part C - Section 2

Schedule DB - Verification

Schedule E - Part 2 - Verification

Schedule A - Part 2

Schedule A - Part 3

Schedule B - Part 2

Schedule B - Part 3

Schedule BA - Part 2

Schedule BA - Part 3

SCHEDULE D - PART 3

Show All Long-Term Bond	te and Stock Acquired	d During the Current Quarter	

1 2 3 4 5 6 7 8 Name of closes and control beginning and seven and	Show All Long-Term Bonds and Stock Acquired During the Current Quarter										
United Comment Comme	1 1	2	3	4	5	6	7	8	9		
9/126/24/2-3 WHITED SAIRS REASKIN 0/725/20/5 Warrown 0/725	Identification		Acquired	of	of Shares			Interest and	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol		
0019999999 - Issuer Credit Obligations - U.S. Government Obligations (Exempt from RBC) 126.107 125.000 149 333 126.107 125.000 126.107 125.107 1	Issuer Credit Obligat	tions - U.S. Government Obligations (Exempt fro	m RBC)								
Q489999999 - Subtotal - Issuer Credit Obligations (Infiliated) 126.167 125.000 149 XXX	91282C-KZ-3	UNITED STATES TREASURY	07/25/2025		XXX						
15,9999999 - Subtotals - Issuer Credit Obligations - Part 3 125,000 149 XXX			gations (Exempt from RBC)			- /					
126,167 125,000 149 XXX 200999999 - Subtotals - Issuer Credit Obligations and Asset-Backed Securities 126,167 125,000 149 XXX 200999999 - Subtotals - Issuer Credit Obligations and Asset-Backed Securities 126,167 125,000 149 XXX 126,167 125,000 126,167 125,000 126,167 125,000 126,167 125,000 126,167 125,						126,167					
2009999999 - Subtotals - Issuer Credit Obligations and Asset-Backed Securities 126, 167 125,000 149 XXX						126,167		14			
								14	9 XXX		
600999999 Totals	2009999999 - St	ubtotals - Issuer Credit Obligations and Asset-Ba	acked Securities			126,167	125,000	14	9 XXX		
600999999 Totals XXX 149 XXX											
	6009999999 Totals	s	•			126,167	XXX	14	9 XXX		

SCHEDULE D - PART 4

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

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE WellCare Health Plans of Rhode Island, Inc.

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter																				
1	2	3	4	5	6	7	8	9			ook/Adjusted Ca			15	16	17	18	19	20	21
									10	11	12	13	14							NAIC
																		l <u>.</u> .		Designation,
									Linnaalinad		Current Year's Other-Than-		Total Foreign	Book/	Fausium			Bond Interest/Stock	Stated	NAIC Desig. Modifier and
CUSIP				Number of				Prior Year	Unrealized Valuation	Current Year's	Temporary	Total Change		Adjusted	Foreign	Realized Gain	Total Gain	Dividends	Contractual	
Identi-		Disposal		Shares of				Book/Adjusted	Increase/	(Amortization)/	Impairment	in B./A.C.V.	Change in	carrying value	(Loss) on	(Loss) on	(Loss) on	Received	Maturity	Administrative
fication	Description	Date	Name of Purchaser		Consideration	Par Value	Actual Cost	Carrying Value	(Decrease)	Accretion	Recognized	(10+11-12)	B./A.C.V.	Disposal Date	Disposal	Disposal	Disposal	During Year	Date	Symbol
Issuer Cred	it Obligations - U.S. Governmen	t Obligations	(Exempt from RBC)	0.00.0	Consideration	i di valao	7101441 0001	carrying value	(200.000)	71001011011	1 tooog.mzou	(1011112)	2.,7 0	1 Biopodai Bato	D.opoou.	_ Dioposai	Dioposa.	During rous	Buto	<u> </u>
91282C-FY-3	JUNITED STATES TREASURY	07/15/2025	Maturity @ 100.00	XXX	125.000	125,000	121,885	124,184		816		816		125,000			0	3.750	07/15/2025	
	99 - Issuer Credit Obligations -			rom RBC)	125,000	125,000	121,885	124,184	0	816	0	816	0	125,000	0	0	0	3,750	XXX	XXX
04899999	99 - Subtotal - Issuer Credit Ob	ligations (Una	iffiliated)	- /	125,000	125,000	121,885	124, 184	0	816	0		0		0	0	0		XXX	XXX
05099999	97 - Subtotals - Issuer Credit Ol	oligations - Pa	art 4		125,000	125,000	121,885	124,184	0	816	0		0	125,000	0	0	0		XXX	XXX
05099999	99 - Subtotals - Issuer Credit O	oligations			125,000	125,000	121,885	124,184	0	816	0	816	0	125,000	0	0	0	3,750	XXX	XXX
	999 - Subtotals - Issuer Credit C		d Asset-Backed Securities		125,000	125,000	121,885	124,184	0	816	0	816	0	125,000	0	0	0	3,750	XXX	XXX
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6009999	99 Totals				125,000	XXX	121,885	124,184	0	816	0	816	0	125,000	0	0	0	3,750	XXX	XXX

Schedule DB - Part A - Section 1

Schedule DB - Part B - Section 1

Schedule DB - Part D - Section 1

Schedule DB - Part D - Section 2

Schedule DB - Part E

Schedule DL - Part 1

Schedule DL - Part 2

SCHEDULE E - PART 1 - CASH Month End Depository Balances

	Mont	h End Der	ository Balanc	es				
1	2	3	4	5		Balance at End of	9	
Depository	Restricted Asset Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	6	During Current C 7 Second Month	8	*
Open Depositories								
Truist Bank, N.A		4.210	68,523	22,812	6,228,540	6,147,863	6,147,399	XXX
(See Instructions) - Open Depositories	XXX	XXX						XXX
0199999 Total Open Depositories	ХХХ	XXX	68,523	22,812	6,228,540	6,147,863	6,147,399	XXX
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0399999 Total Cash on Deposit	XXX	XXX	68,523	22,812	6,228,540	6,147,863	6,147,399	XXX
0499999 Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
0599999 Total	XXX	XXX	68,523	22,812	6,228,540	6,147,863	6,147,399	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter											
1	2	3	4	5	6	7	8	9			
		Restricted	Date	Stated Rate	Maturity	Book/Adjusted Carrying Value	Amount of Interest	Amount Received			
CUSIP	Description	Asset Code	Acquired	of Interest	Date	Carrying Value	Due & Accrued	During Year			
000	2 dec., p. de .	7.0001.0000	7.09404	0		July Tulus	240 47 1001404	2 49 . 64			
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8609999999 Total	l Cash Equivalents		T	r	·	0	n	n			