



QUARTERLY STATEMENT

AS OF MARCH 31, 2017
OF THE CONDITION AND AFFAIRS OF THE

CELTIC INSURANCE COMPANY

NAIC Group Code 1295 (Current Period) , 1295 (Prior Period) NAIC Company Code 80799 Employer's ID Number 06-0641618

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

Country of Domicile United States

Licensed as business type: Life, Accident & Health Property/Casualty Hospital, Medical & Dental Service or Indemnity
 Dental Service Corporation Vision Service Corporation Health Maintenance Organization
 Other Is HMO Federally Qualified? Yes No

Incorporated/Organized 05/03/1949 Commenced Business 01/20/1950

Statutory Home Office 77 W. Wacker Drive, Suite 1200 , Chicago, IL, US 60601
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 77 W. Wacker Drive, Suite 1200 Chicago, IL, US 60601 800-714-4658
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 77 W. Wacker Drive, Suite 1200 Chicago, IL, US 60601
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 77 W. Wacker Drive, Suite 1200 Chicago, IL, US 60601 800-714-4658
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Web Site Address www.celtic-net.com

Statutory Statement Contact Bryan Carlin 314-445-0004
(Name) (Area Code) (Telephone Number) (Extension)

bcarlin@centene.com 314-725-4658
(E-Mail Address) (FAX Number)

OFFICERS

| Name | Title | Name | Title |
|------------------------|--------------------------------------|-----------------------|---------------------------------|
| <u>Anand A. Shukla</u> | <u>Senior Vice President</u> | <u>David J. Burke</u> | <u>Vice President Treasurer</u> |
| <u>Karen E. Wegg</u> | <u>Vice President Administration</u> | | |

OTHER OFFICERS

| | | | |
|----------------------------|-------------------------------|-----------------------------|------------------------------|
| <u>Barbara Basham</u> | <u>Vice President</u> | <u>John P. Ryan</u> | <u>Vice President</u> |
| <u>Steele Stewart</u> | <u>Vice President Actuary</u> | <u>Jeffrey A. Schwaneke</u> | <u>Controller</u> |
| <u>Keith H. Williamson</u> | <u>Secretary</u> | <u>Tricia L. Dinkelman</u> | <u>Vice President of Tax</u> |
| | | | |
| | | | |

DIRECTORS OR TRUSTEES

| | | | |
|------------------------|----------------------------|-----------------------|-----------------------------|
| <u>Anand A. Shukla</u> | <u>Tricia L. Dinkelman</u> | <u>David J. Burke</u> | <u>Jeffrey A. Schwaneke</u> |
|------------------------|----------------------------|-----------------------|-----------------------------|

State of Illinois

SS

County of Cook

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

Anand A. Shukla
Senior Vice President

David J. Burke
Vice President Treasurer

Karen E. Wegg
Vice President Administration

a. Is this an original filing? Yes No

b. If no:

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

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

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

ASSETS

| | Current Statement Date | | | 4 December 31 Prior Year Net Admitted Assets |
|---|------------------------|-------------------------|---|---|
| | 1 Assets | 2 Nonadmitted Assets | 3 Net Admitted Assets (Cols. 1 - 2) | |
| 1. Bonds | 265,958,321 | | 265,958,321 | 199,786,624 |
| 2. Stocks: | | | | |
| 2.1 Preferred stocks | | | 0 | 0 |
| 2.2 Common stocks | 39,408,639 | | 39,408,639 | 26,338,338 |
| 3. Mortgage loans on real estate: | | | | |
| 3.1 First liens | | | 0 | 0 |
| 3.2 Other than first liens | | | 0 | 0 |
| 4. Real estate: | | | | |
| 4.1 Properties occupied by the company (less \$ encumbrances) | | | 0 | 0 |
| 4.2 Properties held for the production of income (less \$ encumbrances) | | | 0 | 0 |
| 4.3 Properties held for sale (less \$ encumbrances) | | | 0 | 0 |
| 5. Cash (\$215,963,151), cash equivalents (\$26,988,996) and short-term investments (\$370,864,206) | 613,816,353 | | 613,816,353 | 239,737,937 |
| 6. Contract loans (including \$ premium notes) | | | 0 | 0 |
| 7. Derivatives | 0 | | 0 | 0 |
| 8. Other invested assets | 2,221,097 | | 2,221,097 | 1,269,429 |
| 9. Receivables for securities | | | 0 | 0 |
| 10. Securities lending reinvested collateral assets | | | 0 | 0 |
| 11. Aggregate write-ins for invested assets | 0 | 0 | 0 | 0 |
| 12. Subtotals, cash and invested assets (Lines 1 to 11) | 921,404,410 | 0 | 921,404,410 | 467,132,328 |
| 13. Title plants less \$ charged off (for Title insurers only) | | | 0 | 0 |
| 14. Investment income due and accrued | 1,772,704 | | 1,772,704 | 1,328,389 |
| 15. Premiums and considerations: | | | | |
| 15.1 Uncollected premiums and agents' balances in the course of collection | 26,749,081 | | 26,749,081 | 6,242,222 |
| 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums) | | | 0 | 0 |
| 15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$) | | | 0 | 0 |
| 16. Reinsurance: | | | | |
| 16.1 Amounts recoverable from reinsurers | 23,030,608 | | 23,030,608 | 19,892,987 |
| 16.2 Funds held by or deposited with reinsured companies | | | 0 | 0 |
| 16.3 Other amounts receivable under reinsurance contracts | 888,725 | | 888,725 | 864,974 |
| 17. Amounts receivable relating to uninsured plans | | | 0 | 0 |
| 18.1 Current federal and foreign income tax recoverable and interest thereon | | | 0 | 12,536,618 |
| 18.2 Net deferred tax asset | 8,578,873 | | 8,578,873 | 15,948,262 |
| 19. Guaranty funds receivable or on deposit | (1,811) | | (1,811) | 3,852 |
| 20. Electronic data processing equipment and software | | | 0 | 0 |
| 21. Furniture and equipment, including health care delivery assets (\$) | | | 0 | 0 |
| 22. Net adjustment in assets and liabilities due to foreign exchange rates | | | 0 | 0 |
| 23. Receivables from parent, subsidiaries and affiliates | 27,355,469 | | 27,355,469 | 64,810,375 |
| 24. Health care (\$7,008,462) and other amounts receivable | 15,015,030 | 8,006,568 | 7,008,462 | 4,269,854 |
| 25. Aggregate write-ins for other-than-invested assets | 1,771,756 | 1,771,756 | 0 | 0 |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) | 1,026,564,845 | 9,778,324 | 1,016,786,521 | 593,029,861 |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | 0 | 0 |
| 28. Total (Lines 26 and 27) | 1,026,564,845 | 9,778,324 | 1,016,786,521 | 593,029,861 |
| DETAILS OF WRITE-INS | | | | |
| 1101. | | | 0 | 0 |
| 1102. | | | 0 | 0 |
| 1103. | | | 0 | 0 |
| 1198. Summary of remaining write-ins for Line 11 from overflow page | 0 | 0 | 0 | 0 |
| 1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) | 0 | 0 | 0 | 0 |
| 2501. Prepaid expenses | 1,771,756 | 1,771,756 | 0 | 0 |
| 2502. | | | | |
| 2503. | | | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | 0 | 0 | 0 | 0 |
| 2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) | 1,771,756 | 1,771,756 | 0 | 0 |

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

LIABILITIES, CAPITAL AND SURPLUS

| | Current Period | | | Prior Year |
|--|----------------|----------------|---------------|-------------|
| | 1 Covered | 2 Uncovered | 3 Total | 4 Total |
| 1. Claims unpaid (less \$3,581,073 reinsurance ceded)..... | 221,290,474 | | 221,290,474 | 107,255,508 |
| 2. Accrued medical incentive pool and bonus amounts | 1,229,196 | | 1,229,196 | 610,931 |
| 3. Unpaid claims adjustment expenses | 3,590,773 | | 3,590,773 | 1,664,877 |
| 4. Aggregate health policy reserves including the liability of \$8,757,227 for medical loss ratio rebate per the Public Health Service Act..... | 20,128,123 | | 20,128,123 | 19,136,131 |
| 5. Aggregate life policy reserves | 4,012,451 | | 4,012,451 | 4,012,246 |
| 6. Property/casualty unearned premium reserve | 0 | | 0 | 0 |
| 7. Aggregate health claim reserves | 0 | | 0 | 0 |
| 8. Premiums received in advance | 43,517,630 | | 43,517,630 | 44,681,266 |
| 9. General expenses due or accrued | 40,879,012 | | 40,879,012 | 14,936,364 |
| 10.1 Current federal and foreign income tax payable and interest thereon (including \$(25,151) on realized gains (losses)) | 6,254,463 | | 6,254,463 | 0 |
| 10.2 Net deferred tax liability..... | 0 | | 0 | 0 |
| 11. Ceded reinsurance premiums payable | 1,150,099 | | 1,150,099 | 5,750,496 |
| 12. Amounts withheld or retained for the account of others | 0 | | 0 | 0 |
| 13. Remittances and items not allocated | 0 | | 0 | 0 |
| 14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current) | 0 | | 0 | 0 |
| 15. Amounts due to parent, subsidiaries and affiliates | 1,310,457 | | 1,310,457 | 1,535,296 |
| 16. Derivatives..... | 0 | 0 | 0 | 0 |
| 17. Payable for securities | 15,139,275 | | 15,139,275 | 0 |
| 18. Payable for securities lending | 0 | | 0 | 0 |
| 19. Funds held under reinsurance treaties (with \$1,322,388 authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers) | 1,322,388 | | 1,322,388 | 1,346,146 |
| 20. Reinsurance in unauthorized and certified (\$) companies | 0 | | 0 | 0 |
| 21. Net adjustments in assets and liabilities due to foreign exchange rates | 0 | | 0 | 0 |
| 22. Liability for amounts held under uninsured plans | 0 | | 0 | 0 |
| 23. Aggregate write-ins for other liabilities (including \$ current) | 542,080,637 | 0 | 542,080,637 | 338,848,703 |
| 24. Total liabilities (Lines 1 to 23)..... | 901,904,978 | 0 | 901,904,978 | 539,777,964 |
| 25. Aggregate write-ins for special surplus funds | XXX | XXX | 10,740,050 | 0 |
| 26. Common capital stock | XXX | XXX | 2,500,000 | 2,500,000 |
| 27. Preferred capital stock | XXX | XXX | 0 | 0 |
| 28. Gross paid in and contributed surplus | XXX | XXX | 57,588,655 | 57,588,655 |
| 29. Surplus notes | XXX | XXX | 0 | 0 |
| 30. Aggregate write-ins for other-than-special surplus funds | XXX | XXX | 0 | 0 |
| 31. Unassigned funds (surplus) | XXX | XXX | 44,052,838 | (6,836,758) |
| 32. Less treasury stock, at cost: | | | | |
| 32.1 shares common (value included in Line 26 \$) | XXX | XXX | 0 | 0 |
| 32.2 shares preferred (value included in Line 27 \$) | XXX | XXX | 0 | 0 |
| 33. Total capital and surplus (Lines 25 to 31 minus Line 32) | XXX | XXX | 114,881,543 | 53,251,897 |
| 34. Total liabilities, capital and surplus (Lines 24 and 33) | XXX | XXX | 1,016,786,521 | 593,029,861 |
| DETAILS OF WRITE-INS | | | | |
| 2301. ACA risk adjustment payable..... | 488,913,446 | | 488,913,446 | 278,331,464 |
| 2302. ACA cost-sharing reduction payable..... | 51,264,906 | | 51,264,906 | 59,854,501 |
| 2303. Unclaimed property..... | 511,815 | | 511,815 | 512,132 |
| 2398. Summary of remaining write-ins for Line 23 from overflow page | 1,390,470 | 0 | 1,390,470 | 150,606 |
| 2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above) | 542,080,637 | 0 | 542,080,637 | 338,848,703 |
| 2501. Health insurer fee estimate..... | XXX | XXX | 10,740,050 | 0 |
| 2502. | XXX | XXX | 0 | 0 |
| 2503. | XXX | XXX | 0 | 0 |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | XXX | XXX | 0 | 0 |
| 2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) | XXX | XXX | 10,740,050 | 0 |
| 3001. | XXX | XXX | 0 | 0 |
| 3002. | XXX | XXX | 0 | 0 |
| 3003. | XXX | XXX | 0 | 0 |
| 3098. Summary of remaining write-ins for Line 30 from overflow page | XXX | XXX | 0 | 0 |
| 3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above) | XXX | XXX | 0 | 0 |

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

STATEMENT OF REVENUE AND EXPENSES

| | Current Year To Date | | Prior Year To Date | Prior Year Ended December 31 |
|---|----------------------|-------------|--------------------|------------------------------|
| | 1 Uncovered | 2 Total | 3 Total | 4 Total |
| 1. Member Months..... | XXX | 1,886,666 | 959,237 | 3,315,392 |
| 2. Net premium income (including \$ non-health premium income)..... | XXX | 499,537,191 | 217,768,646 | 781,893,834 |
| 3. Change in unearned premium reserves and reserve for rate credits | XXX | | 0 | 0 |
| 4. Fee-for-service (net of \$ medical expenses) | XXX | | 0 | 0 |
| 5. Risk revenue | XXX | | 0 | 0 |
| 6. Aggregate write-ins for other health care related revenues | XXX | 0 | 0 | 0 |
| 7. Aggregate write-ins for other non-health revenues | XXX | 0 | 0 | 0 |
| 8. Total revenues (Lines 2 to 7) | XXX | 499,537,191 | 217,768,646 | 781,893,834 |
| Hospital and Medical: | | | | |
| 9. Hospital/medical benefits | | 171,987,431 | 92,240,603 | 353,830,584 |
| 10. Other professional services | | 26,777,920 | 10,736,741 | 49,808,602 |
| 11. Outside referrals | | | 0 | 0 |
| 12. Emergency room and out-of-area | | 50,972,470 | 18,654,102 | 78,482,760 |
| 13. Prescription drugs | | 80,827,683 | 29,368,738 | 143,934,749 |
| 14. Aggregate write-ins for other hospital and medical | 0 | 0 | 0 | 0 |
| 15. Incentive pool, withhold adjustments and bonus amounts | | 676,957 | 48,000 | 1,439,572 |
| 16. Subtotal (Lines 9 to 15) | 0 | 331,242,461 | 151,048,184 | 627,496,267 |
| Less: | | | | |
| 17. Net reinsurance recoveries | | 4,211,606 | 2,295,138 | 25,137,233 |
| 18. Total hospital and medical (Lines 16 minus 17) | 0 | 327,030,855 | 148,753,046 | 602,359,034 |
| 19. Non-health claims (net)..... | | | 0 | 0 |
| 20. Claims adjustment expenses, including \$ 964,746 cost containment expenses..... | | 19,078,280 | 9,422,721 | 14,051,303 |
| 21. General administrative expenses..... | | 97,043,449 | 39,902,186 | 152,768,088 |
| 22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only)..... | | | (30,214) | (120,853) |
| 23. Total underwriting deductions (Lines 18 through 22) | 0 | 443,152,584 | 198,047,739 | 769,057,572 |
| 24. Net underwriting gain or (loss) (Lines 8 minus 23) | XXX | 56,384,607 | 19,720,907 | 12,836,262 |
| 25. Net investment income earned | | 1,375,800 | 333,337 | 2,474,118 |
| 26. Net realized capital gains (losses) less capital gains tax of \$ (25,121) | | (46,654) | 29,258 | 51,071 |
| 27. Net investment gains (losses) (Lines 25 plus 26) | 0 | 1,329,146 | 362,595 | 2,525,189 |
| 28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$ (2,483,186))] | | (2,483,186) | (1,204,985) | (5,525,501) |
| 29. Aggregate write-ins for other income or expenses | 0 | 225,345 | 179,924 | 857,906 |
| 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 | 55,455,912 | 19,058,441 | 10,693,856 |
| 31. Federal and foreign income taxes incurred | XXX | 18,816,209 | 7,480,621 | 8,734,518 |
| 32. Net income (loss) (Lines 30 minus 31) | XXX | 36,639,703 | 11,577,820 | 1,959,338 |
| DETAILS OF WRITE-INS | | | | |
| 0601. | XXX | | 0 | 0 |
| 0602. | XXX | | 0 | 0 |
| 0603. | XXX | | 0 | 0 |
| 0698. Summary of remaining write-ins for Line 6 from overflow page | XXX | 0 | 0 | 0 |
| 0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above) | XXX | 0 | 0 | 0 |
| 0701. | XXX | | 0 | 0 |
| 0702. | XXX | | 0 | 0 |
| 0703. | XXX | | 0 | 0 |
| 0798. Summary of remaining write-ins for Line 7 from overflow page | XXX | 0 | 0 | 0 |
| 0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above) | XXX | 0 | 0 | 0 |
| 1401. | | | 0 | 0 |
| 1402. | | | 0 | 0 |
| 1403. | | | 0 | 0 |
| 1498. Summary of remaining write-ins for Line 14 from overflow page | 0 | 0 | 0 | 0 |
| 1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above) | 0 | 0 | 0 | 0 |
| 2901. Network rental income..... | | 284,629 | 279,994 | 1,134,852 |
| 2902. Annuity income..... | | (59,284) | (100,070) | (276,946) |
| 2903. | | | 0 | 0 |
| 2998. Summary of remaining write-ins for Line 29 from overflow page | 0 | 0 | 0 | 0 |
| 2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above) | 0 | 225,345 | 179,924 | 857,906 |

STATEMENT OF REVENUE AND EXPENSES (Continued)

| | 1 | 2 | 3 |
|---|-------------------------|-----------------------|------------------------------------|
| | Current Year To Date | Prior Year To Date | Prior Year Ended December 31 |
| CAPITAL & SURPLUS ACCOUNT | | | |
| 33. Capital and surplus prior reporting year..... | 53,251,897 | 38,188,792 | 38,188,792 |
| 34. Net income or (loss) from Line 32 | 36,639,703 | 11,577,820 | 1,959,338 |
| 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 \$ 13,582 | 13,097,268 | 5,161,419 | 12,517,389 |
| 37. Change in net unrealized foreign exchange capital gain or (loss) | | 0 | 0 |
| 38. Change in net deferred income tax | (7,355,947) | (1,050,815) | 11,880,449 |
| 39. Change in nonadmitted assets | 19,248,622 | 3,049,865 | (23,294,071) |
| 40. Change in unauthorized and certified reinsurance | 0 | 0 | 0 |
| 41. Change in treasury stock | | 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 | 12,000,000 |
| 45.2 Transferred to capital (Stock Dividend) | 0 | 0 | 0 |
| 45.3 Transferred from capital | | 0 | 0 |
| 46. Dividends to stockholders | | 0 | 0 |
| 47. Aggregate write-ins for gains or (losses) in surplus | 0 | 0 | 0 |
| 48. Net change in capital and surplus (Lines 34 to 47) | 61,629,646 | 18,738,289 | 15,063,105 |
| 49. Capital and surplus end of reporting period (Line 33 plus 48) | 114,881,543 | 56,927,081 | 53,251,897 |
| DETAILS OF WRITE-INS | | | |
| 4701. | | 0 | 0 |
| 4702. | | 0 | 0 |
| 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 |

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

CASH FLOW

| | 1 Current Year To Date | 2 Prior Year To Date | 3 Prior Year Ended December 31 |
|---|------------------------------|----------------------------|--------------------------------------|
| Cash from Operations | | | |
| 1. Premiums collected net of reinsurance..... | 684,816,522 | 244,291,832 | 1,080,884,981 |
| 2. Net investment income | 1,362,306 | 504,842 | 2,414,047 |
| 3. Miscellaneous income | 284,629 | 279,994 | 1,132,930 |
| 4. Total (Lines 1 to 3) | 686,463,457 | 245,076,667 | 1,084,431,958 |
| 5. Benefit and loss related payments | 225,499,168 | 47,039,383 | 499,040,408 |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts..... | | 0 | 0 |
| 7. Commissions, expenses paid and aggregate write-ins for deductions | 34,439,593 | 1,085,995 | 215,644,853 |
| 8. Dividends paid to policyholders | | 0 | 0 |
| 9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)..... | 147 | 2,505,516 | 20,556,465 |
| 10. Total (Lines 5 through 9) | 259,938,908 | 50,630,894 | 735,241,726 |
| 11. Net cash from operations (Line 4 minus Line 10) | 426,524,549 | 194,445,774 | 349,190,232 |
| Cash from Investments | | | |
| 12. Proceeds from investments sold, matured or repaid: | | | |
| 12.1 Bonds | 13,744,598 | 1,800,692 | 14,568,641 |
| 12.2 Stocks | 0 | 0 | 0 |
| 12.3 Mortgage loans | 0 | 0 | 0 |
| 12.4 Real estate | 0 | 0 | 0 |
| 12.5 Other invested assets | 0 | 0 | 179,725 |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments | 0 | 0 | 3,000 |
| 12.7 Miscellaneous proceeds | 15,139,275 | 0 | 1 |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7) | 28,883,873 | 1,800,692 | 14,751,367 |
| 13. Cost of investments acquired (long-term only): | | | |
| 13.1 Bonds | 80,417,145 | 1,863,791 | 151,703,036 |
| 13.2 Stocks | 0 | 0 | 6,500,000 |
| 13.3 Mortgage loans | 0 | 0 | 0 |
| 13.4 Real estate | 0 | 0 | 0 |
| 13.5 Other invested assets | 912,860 | 60,000 | 60,000 |
| 13.6 Miscellaneous applications | 0 | 35,644 | 1 |
| 13.7 Total investments acquired (Lines 13.1 to 13.6) | 81,330,005 | 1,959,434 | 158,263,037 |
| 14. Net increase (or decrease) in contract loans and premium notes | 0 | 0 | 0 |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) | (52,446,132) | (158,742) | (143,511,670) |
| Cash from Financing and Miscellaneous Sources | | | |
| 16. Cash provided (applied): | | | |
| 16.1 Surplus notes, capital notes | 0 | 0 | 0 |
| 16.2 Capital and paid in surplus, less treasury stock..... | 0 | 0 | 12,000,000 |
| 16.3 Borrowed funds | 0 | 0 | 0 |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities | 0 | 0 | 0 |
| 16.5 Dividends to stockholders | 0 | 0 | 0 |
| 16.6 Other cash provided (applied)..... | 0 | 0 | (2,736,203) |
| 17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)..... | 0 | 0 | 9,263,797 |
| RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS | | | |
| 18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) | 374,078,417 | 194,287,032 | 214,942,359 |
| 19. Cash, cash equivalents and short-term investments: | | | |
| 19.1 Beginning of year..... | 239,737,937 | 24,795,578 | 24,795,578 |
| 19.2 End of period (Line 18 plus Line 19.1) | 613,816,354 | 219,082,610 | 239,737,937 |

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

| | 1 Total | Comprehensive (Hospital & Medical) | | 4 Medicare Supplement | 5 Vision Only | 6 Dental Only | 7 Federal Employees Health Benefits Plan | 8 Title XVIII Medicare | 9 Title XIX Medicaid | 10 Other |
|---|-------------|---------------------------------------|------------|-----------------------------|---------------------|---------------------|--|------------------------------|----------------------------|-------------|
| | | 2 Individual | 3 Group | | | | | | | |
| Total Members at end of: | | | | | | | | | | |
| 1. Prior Year | 250,937 | 248,551 | .0 | 2,215 | .0 | .0 | .0 | .0 | .0 | .171 |
| 2. First Quarter | 660,213 | 657,903 | .0 | 2,139 | .0 | .0 | .0 | .0 | .0 | .171 |
| 3. Second Quarter | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 4. Third Quarter | .0 | | | | | | | | | |
| 5. Current Year | 0 | | | | | | | | | |
| 6. Current Year Member Months | 1,886,666 | 1,879,674 | | 6,479 | | | | | | 513 |
| Total Member Ambulatory Encounters for Period: | | | | | | | | | | |
| 7. Physician | 1,861,242 | 1,861,242 | | | | | | | | |
| 8. Non-Physician | 1,788,348 | 1,788,348 | | | | | | | | |
| 9. Total | 3,649,590 | 3,649,590 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 10. Hospital Patient Days Incurred | 39,123 | 39,123 | | | | | | | | |
| 11. Number of Inpatient Admissions | 8,183 | 8,183 | | | | | | | | |
| 12. Health Premiums Written (a)..... | 504,373,843 | 502,336,284 | | 2,037,559 | | | | | | |
| 13. Life Premiums Direct..... | 14,275 | | | | | | | | | 14,275 |
| 14. Property/Casualty Premiums Written | .0 | | | | | | | | | |
| 15. Health Premiums Earned | 504,373,843 | 502,336,284 | | 2,037,559 | | | | | | |
| 16. Property/Casualty Premiums Earned | .0 | | | | | | | | | |
| 17. Amount Paid for Provision of Health Care Services | 227,398,229 | 227,398,229 | | | | | | | | |
| 18. Amount Incurred for Provision of Health Care Services | 331,242,461 | 331,242,461 | | | | | | | | |

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 0

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT
ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

| Line of Business | Claims Paid Year to Date | | Liability End of Current Quarter | | 5 Claims Incurred in Prior Years (Columns 1 + 3) | 6 Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year |
|---|--|---|---|---|---|--|
| | 1 On Claims Incurred Prior to January 1 of Current Year | 2 On Claims Incurred During the Year | 3 On Claims Unpaid Dec. 31 of Prior Year | 4 On Claims Incurred During the Year | | |
| 1. Comprehensive (hospital and medical) | 81,796,483 | 145,541,408 | 20,935,595 | 200,354,879 | 102,732,078 | 107,255,508 |
| 2. Medicare Supplement | | | | | .0 | .0 |
| 3. Dental only | | | | | .0 | .0 |
| 4. Vision only | | | | | .0 | .0 |
| 5. Federal Employees Health Benefits Plan | | | | | .0 | .0 |
| 6. Title XVIII - Medicare | | | | | .0 | .0 |
| 7. Title XIX - Medicaid | | | | | .0 | .0 |
| 8. Other health | | | | | .0 | .0 |
| 9. Health subtotal (Lines 1 to 8)..... | 81,796,483 | 145,541,408 | 20,935,595 | 200,354,879 | 102,732,078 | 107,255,508 |
| 10. Health care receivables (a) | | 3,105,424 | | 11,913,535 | .0 | .0 |
| 11. Other non-health | | | | | .0 | .0 |
| 12. Medical incentive pools and bonus amounts | | 58,692 | 618,265 | 610,931 | 618,265 | 610,931 |
| 13. Totals (Lines 9-10+11+12) | 81,796,483 | 142,494,676 | 21,553,860 | 189,052,275 | 103,350,343 | 107,866,439 |

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

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

- A. The statutory financial statements of Celtic Insurance Company (the Company) are presented on the basis of accounting practices prescribed or permitted by the Illinois Department of Insurance.

The State of Illinois requires that insurance companies domiciled in the state of Illinois prepare their statutory-basis financial statements in accordance with the National Associate of Insurance Commissioners (NAIC) Accounting Practices and Procedures (AP&P) Manual subject to any deviations prescribed or permitted by the State of Illinois Insurance Commissioner. The Illinois Department of Insurance has adopted the NAIC AP&P manual with no significant prescribed differences affecting the Company.

| | SSAP # | F/S Page | F/S Line # | 3/31/2017 | 12/31/2016 |
|--|-----------|-------------|---------------|-----------------------|----------------------|
| NET INCOME | | | | | |
| (1) Celtic Insurance Company state basis (Page 4, Line 32, Columns 2 & 4) | N/A | N/A | N/A | \$ 36,639,703 | \$ 1,959,338 |
| (2) State Prescribed Practices that are an increase/(decrease) NAIC SAP: | N/A | N/A | N/A | | |
| (3) State Permitted Practices that are an increase/(decrease) NAIC SAP: | N/A | N/A | N/A | | |
| (4) NAIC SAP (1-2-3=4) | N/A | N/A | N/A | <u>\$ 36,639,703</u> | <u>\$ 1,959,338</u> |
| SURPLUS | | | | | |
| (5) Celtic Insurance Company state basis (Page 3, Line 33, Columns 3 & 4) | N/A | N/A | N/A | \$ 114,881,543 | \$ 53,251,897 |
| (6) State Prescribed Practices that are an increase/(decrease) NAIC SAP: | N/A | N/A | N/A | | |
| (7) State Permitted Practices that are an increase/(decrease) NAIC SAP: | N/A | N/A | N/A | | |
| (8) NAIC SAP (5-6-7=8) | N/A | N/A | N/A | <u>\$ 114,881,543</u> | <u>\$ 53,251,897</u> |

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

The preparation of the statutory financial statements in conformity with accounting practices prescribed or permitted by the Illinois Department of Insurance requires management to make estimates and assumptions that affect the reported amounts of admitted assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the statutory financial statements and the reported amounts of revenue and expenses during the periods then ended. Actual results could differ from those estimates.

- C. Significant Accounting Policies

- 1) Cash, Cash Equivalents, and Short-Term Investments

Cash, cash equivalents, and short-term investments are carried at cost, which approximates fair value. Short-term investments include securities purchased within 12 months or less of maturity date.

- 2) Bonds

Investment grade bonds (NAIC designations 1 or 2) not backed by other loans are valued at amortized cost using the scientific (constant yield) method. Bonds containing call provisions, except "make whole" call provisions, are amortized to the call or maturity value/date which produces the lowest asset value (yield to worst). Bonds which are below investment grade (NAIC designation 3 to 6) are carried at the lower of amortized cost or fair value.

- 3) Common Stock

The Company has minor interests in subsidiary insurance companies that do not exceed 10% of admitted assets. The Company carries these interests based on the underlying audited statutory capital and surplus of the investees.

- 4) Preferred Stock

The Company holds no preferred stocks.

- 5) Mortgage Loans

The Company holds no mortgage loans.

- 6) Loan-Backed Securities

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

- 7) Investments in Subsidiaries, Controlled, and Affiliated Entities

The Company has no investments in non-insurance company subsidiaries, controlled and affiliated companies.

NOTES TO FINANCIAL STATEMENTS

8) Investments in Joint Ventures, Partnerships, and Limited Liability Companies

The Company has a minor interest in a joint venture that does not exceed 10% of admitted assets. The Company carries this interests based on the underlying audited GAAP equity of the investee.

9) Derivatives

The Company holds no derivatives.

10) Premium Deficiency Reserve

The Company reviews expectations regarding the profitability of contracts in force to determine whether a premium deficiency reserve is required. The Company considers anticipated investment income when calculating its premium deficiency reserves.

The adequacy of reserve requirements is continually reviewed by management, with any reductions in the reserve being recorded as a beneficial effect in the statement of revenue and expenses.

11) Claims Unpaid & Unpaid Claims Adjustment Expenses

Claims unpaid and unpaid claims adjustment expenses include amounts determined from claims estimates, loss reports, and an amount, based on experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amounts to be adequate, the ultimate liabilities may be in excess of or less than the amounts reported. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.

12) Changes to the Capitalization Policy

There have been no changes to the capitalization policy.

13) Pharmaceutical Rebates

Pharmaceutical rebates are based on actual pharmaceutical claims experience.

14) Premium Revenue

Premiums are generally received in the month for which coverage applies and income from such premiums is recorded as earned during the period in which the Company is obligated to provide services to members. Premiums collected in advance of the month for which coverage applies are deferred and recorded as unearned premium revenue.

15) Investment Income Due and Accrued

The Company recognizes investment income when earned. The Company records receivables for investment income earned as of the reporting date but not paid to the Company until subsequent to the reporting date. The Company performs an evaluation of the receivables to determine whether impairment exists.

16) Reclassifications

Certain reclassifications have been made to prior year amounts to conform to current year presentation.

17) Events Subsequent

The Company evaluated subsequent events through May 15, 2017, the date the statutory financial statements were available to be issued. Refer to Note 22 for further discussion of material events which occurred subsequent to the reporting date.

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

The Company has no material changes in accounting principles or corrections of errors.

3. Business Combinations and Goodwill

A. Statutory Purchase Method – None

B. Statutory Merger – None

NOTES TO FINANCIAL STATEMENTS

C. Assumption Reinsurance

The Company had no goodwill associated with assumption reinsurance transactions.

D. Impairment Loss – None

4. Discontinued Operations – None

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans – None

B. Debt Restructuring – None

C. Reverse Mortgages – None

D. Loan-Backed Securities

- 1) The source used to determine prepayment assumptions for all loan-backed securities for the Company was S&P Capital IQ.
- 2) There were no securities within the scope of this statement with a recognized other-than-temporary impairment.
- 3) Not applicable
- 4) All impaired securities (fair value is less than cost or amortized) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest impairment remains):
 - a. The aggregate amount of unrealized losses:
 - i. Less than 12 months (\$119,274)
 - ii. 12 months or longer (\$182)
 - b. The aggregate related fair value of securities with unrealized losses:
 - i. Less than 12 months \$12,049,748
 - ii. 12 months or longer \$85,202
- 5) For any security in an unrealized loss position, the Company assesses whether it intends to sell the security or if it is more likely than not that the Company will be required to sell the security before recovery of the amortized cost basis for reasons such as liquidity, contractual, or regulatory purposes. If the security meets this criterion, the decline in fair value is other than temporary and is recorded in earnings.

For loan-backed securities in an unrealized loss position, management further evaluates whether the collection of all cash flows is probable. Management utilizes the prospective adjustment method to evaluate the present value of future cash flows. For those loan-back and structured securities (NAIC designated 1 or 2) where management has determined that collection of all contractual cash flows is not probable, the securities are considered other-than-temporarily impaired to the extent amortized cost is greater than the present value of future cash flows.

E. Repurchase Agreements and/or Securities Lending Transactions – None

F. Real Estate – None

G. Investments in Low-Income Housing Tax Credits (LIHTC) – None

H. Restricted Assets

| Restricted Asset Category | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|--|---|---|----------------------------------|---|---|---|--|
| | Total Gross (Admitted & Nonadmitted) Restricted from Current Year | Total Gross (Admitted & Nonadmitted) Restricted from Prior Year | Increase/ (Decrease) (1 minus 2) | Total Current Year Nonadmitted Restricted | Total Current Year Restricted (1 minus 4) | Gross (Admitted & Nonadmitted) Restricted to Total Assets (a) | Admitted Restricted to Total Admitted Assets (b) |
| a. Subject to contractual obligation for which liability is not shown | | | | | | | |
| b. Collateral held under security lending agreements | | | | | | | |
| c. Subject to repurchase agreements | | | | | | | |
| d. Subject to reverse repurchase agreements | | | | | | | |
| e. Subject to dollar repurchase agreements | | | | | | | |
| f. Subject to dollar reverse repurchase agreements | | | | | | | |
| g. Placed under option contracts | | | | | | | |
| h. Letter stock or securities restricted as to sale - excluding FHLB capital stock | | | | | | | |
| i. FHLB capital stock | | | | | | | |
| j. On deposit with states | \$ 2,477,785 | \$ 2,478,301 | \$ (516) | \$ - | \$ 2,477,785 | 0.2% | 0.2% |
| k. On deposit with other regulatory bodies | | | | | | | |
| l. Pledged collateral to FHLB (including assets backing funding agreements) | | | | | | | |
| m. Pledged as collateral not captured in other categories | | | | | | | |
| n. Other restricted assets | | | | | | | |
| o. Total Restricted Assets | \$ 2,477,785 | \$ 2,478,301 | \$ (516) | \$ - | \$ 2,477,785 | 0.2% | 0.2% |

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

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

NOTES TO FINANCIAL STATEMENTS

- I. Working Capital Finance Investments – None
- J. Offsetting and Netting of Assets and Liabilities – None
- K. Structured Notes – None
- L. 5* Securities – None

6. Joint Ventures, Partnerships, and Limited Liability Companies

- A. The Company has no investments in joint ventures, partnerships, and limited liability companies that exceed 10% of its admitted assets.
- B. The Company did not recognize any impairment write down for its investment in joint ventures, partnerships, and limited liability companies during the reporting periods.

7. Investment Income

- A. Investment income due and accrued with amounts greater than 90 days past due are excluded from statutory surplus.
- B. No amounts were excluded.

8. Derivative Instruments – None

9. Income Taxes

A. Components of deferred tax assets (DTAs) and deferred tax liabilities (DTLs):

The net deferred tax asset at December 31, 2016 and the change from the prior year are comprised of the following components:

| (1) DTA/DTL Components | 2017 | | | 2016 | | | Change | | |
|--|--------------|-------------|--------------|---------------|-------------|---------------|----------------|-----------|----------------|
| | Description | Ordinary | Capital | Total | Ordinary | Capital | Total | Ordinary | Capital |
| (a) Gross deferred tax assets | \$ 8,656,249 | \$ 69,090 | \$ 8,725,339 | \$ 16,025,197 | \$ 55,508 | \$ 16,080,705 | \$ (7,368,948) | \$ 13,582 | \$ (7,355,366) |
| (b) Statutory valuation allowance adjustment | - | - | - | - | - | - | - | - | - |
| (c) Adjusted gross deferred tax assets | 8,656,249 | 69,090 | 8,725,339 | 16,025,197 | 55,508 | 16,080,705 | (7,368,948) | 13,582 | (7,355,366) |
| (d) Deferred tax assets nonadmitted | - | - | - | - | - | - | - | - | - |
| (e) Net admitted deferred tax assets | 8,656,249 | 69,090 | 8,725,339 | 16,025,197 | 55,508 | 16,080,705 | (7,368,948) | 13,582 | (7,355,366) |
| (f) Deferred tax liabilities | (14,290) | (132,077) | (146,367) | (13,709) | (118,495) | (132,204) | (581) | (13,582) | (14,163) |
| (g) Net admitted deferred tax asset/(Net deferred tax liability) | \$ 8,641,959 | \$ (62,987) | \$ 8,578,972 | \$ 16,011,488 | \$ (62,987) | \$ 15,948,501 | \$ (7,369,529) | \$ - | \$ (7,369,529) |

(2) Admission calculation components:

The amounts of admitted adjusted gross deferred tax assets admitted under each component of SSAP No. 101 are as follows:

| Description | 2017 | | | 2016 | | | Change | | |
|---|--------------|-------------|--------------|---------------|-------------|---------------|----------------|----------|----------------|
| | Ordinary | Capital | Total | Ordinary | Capital | Total | Ordinary | Capital | Total |
| Admission calculation under ¶11.a.-¶11.c. | | | | | | | | | |
| (a) FIT recoverable by loss carryback [¶11.a.] | \$ 9,308,228 | \$ - | \$ 9,308,228 | \$ 16,025,198 | \$ - | \$ 16,025,198 | \$ (6,716,970) | \$ - | \$ (6,716,970) |
| (b) Expected to be realized [¶11.b.] (lessor of i. or ii.) | - | - | - | - | - | - | - | - | - |
| 1. Expected to be realized [¶11.b.i.] | - | - | - | - | - | - | - | - | - |
| 2. Surplus limitation [¶11.b.ii.] | 6,700,939 | - | 6,700,939 | - | - | - | - | - | - |
| (c) DTL offset [¶11.c.] | - | 69,090 | 69,090 | - | 55,508 | 55,508 | - | 13,582 | 13,582 |
| (d) Total admitted under ¶11.a.-11.c. | 9,308,228 | 69,090 | 9,377,318 | 16,025,198 | 55,508 | 16,080,706 | (6,716,970) | 13,582 | (6,703,388) |
| Deferred tax liabilities | (14,290) | (132,077) | (146,367) | (13,709) | (118,495) | (132,204) | (581) | (13,582) | (14,163) |
| Net admitted deferred tax asset/liability under ¶11.a.-¶11.c. | \$ 9,293,938 | \$ (62,987) | \$ 9,230,951 | \$ 16,011,489 | \$ (62,987) | \$ 15,948,502 | \$ (6,717,551) | \$ - | \$ (6,717,551) |

(3) Information used in expected to be realized calculation [¶11.b.]

The information used in the expected to be realized calculation consists of the following:

| (a) Authorized control level risk-based capital ratio without net deferred tax assets | 2017 | 2016 |
|---|---------------|---------------|
| | 356% | 141% |
| (b) Adjusted capital and surplus | \$ 44,672,923 | \$ 37,303,395 |

(4) Impact of tax planning strategies:

| Description | 2017 | | | 2016 | | | Change | | |
|--|------------------------------|--|--------------|--------------|---------|-----------------|----------|---------|--------|
| | Ordinary | Capital | Total | Ordinary | Capital | Total | Ordinary | Capital | Total |
| Adjusted gross DTAs - Amount (Memo Entry) | \$ 2,150,243 | \$ 0 | \$ 2,150,243 | \$ 2,150,243 | \$ 0 | \$ 2,150,243.00 | \$ 0 | \$ - | \$ 0 |
| Adjusted gross DTAs - Percentage | 24.64% | 0.00% | 24.64% | 13.37% | 0.00% | 13.37% | 11.27% | 0.00% | 11.27% |
| (a) Net admitted DTAs - Amount (Memo Entry) | \$ 2,150,243 | \$ 0 | \$ 2,150,243 | \$ 2,150,243 | \$ 0 | \$ 2,150,243.00 | \$ 0 | \$ - | \$ 0 |
| (b) Net admitted DTAs - Percentage | 25.06% | 0.00% | 25.06% | 13.48% | 0.00% | 13.48% | 11.58% | 0.00% | 11.58% |
| (c) Did the company avail itself of a tax planning strategy involving reinsurance? [check box] | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | | | | | | | |

B. Temporary differences for which DTLs have not been established:

Not applicable

C. Current tax and change in deferred tax:

(1) Current income taxes incurred consist of the following major components:

| Description | 2017 | 2016 |
|--|---------------|--------------|
| (a) Current federal income tax expense | \$ 18,791,090 | \$ 8,795,790 |
| (b) Foreign Taxes | - | - |
| (c) Subtotal | 18,791,090 | 8,795,790 |
| (d) Tax on capital gains/(losses) | - | - |
| (e) Utilization of capital loss carryforwards | - | - |
| (f) Other, including prior year underaccrual (overaccrual) | - | (33,774) |
| (g) Federal and foreign income taxes incurred | \$ 18,791,090 | \$ 8,762,016 |

(2) Deferred income tax assets and liabilities consist of the following major components:

| DTAs Resulting From Book/Tax Differences In | December 31, 2017 | December 31, 2016 | Change |
|---|-------------------|-------------------|----------------|
| | (a) Ordinary | | |
| (1) Discounting of unpaid losses and LAE | \$ (47,602) | \$ 310,818 | \$ (358,420) |
| (2) Unearned premiums | 3,046,234 | 3,127,689 | (81,455) |
| (3) Policyholder reserves | - | - | - |
| (4) Investments | - | - | - |
| (5) Deferred acquisition costs | - | - | - |
| (6) Policyholder dividends accrued | 122,220 | 63,683 | 58,537 |
| (7) Fixed assets | - | - | - |
| (8) Accrued expenditures | 13,740 | 5,599 | 8,141 |
| (9) Marketplace reinsurance fee | - | - | - |
| (10) Nonadmitted assets | 3,422,413 | 10,159,431 | (6,737,018) |
| (11) Net operating loss carryforward | - | - | - |
| (12) Tax credit carryforward | - | - | - |
| (13) Allowance for doubtful accounts | 1,070,760 | 2,150,243 | (1,079,483) |
| (14) Contingent benefit reserve | - | - | - |
| (15) Premium deficiency reserve | 207,734 | 207,734 | - |
| (16) Guarantee Fund Assessment | 820,750 | - | 820,750 |
| (99) Gross ordinary DTAs | 8,656,249 | 16,025,197 | (7,368,948) |
| (b) Statutory valuation adjustment adjustment - ordinary | - | - | - |
| (c) Nonadmitted ordinary DTAs (-) | - | - | - |
| (d) Admitted ordinary DTAs | \$ 8,656,249 | \$ 16,025,197 | \$ (7,368,948) |
| (e) Capital | | | |
| (1) Investments | - | - | - |
| (2) Net capital loss carryforward | - | - | - |
| (3) Real estate | - | - | - |
| (4) Other (separately disclose items >5%) | 69,090 | 55,508 | 13,582 |
| Unrealized capital losses | - | - | - |
| (99) Gross capital DTAs | 69,090 | 55,508 | 13,582 |
| (f) Statutory valuation adjustment adjustment - capital (-) | - | - | - |
| (g) Nonadmitted capital DTAs (-) | - | - | - |
| (h) Admitted capital DTAs | \$ 69,090 | \$ 55,508 | \$ 13,582 |

NOTES TO FINANCIAL STATEMENTS

| (3) | DTLs Resulting From Book/Tax Differences In | December 31, 2017 | December 31, 2016 | Change |
|------|---|-------------------|-------------------|----------------|
| (a) | Ordinary | | | |
| (1) | Investments | \$ (2,091) | \$ (2,091) | \$ - |
| (2) | Fixed assets | - | - | - |
| (3) | Prepaid expenses | (12,199) | (11,618) | (581) |
| (4) | Policyholder reserves/salvage and subrogation | - | - | - |
| (5) | Other (separately disclose items >5%) | - | - | - |
| (99) | Ordinary DTLs | \$ (14,290) | \$ (13,709) | \$ (581) |
| (b) | Capital | | | |
| (1) | Investments | - | - | - |
| (2) | Real estate | - | - | - |
| (3) | Other (separately disclose items >5%) | - | - | - |
| | Unrealized capital gains | (132,077) | (118,495) | (13,582) |
| (99) | Capital DTLs | \$ (132,077) | \$ (118,495) | \$ (13,582) |
| (c) | DTLs | \$ (146,367) | \$ (132,204) | \$ (14,163) |
| (4) | Net deferred tax assets/liabilities | \$ 8,578,972 | \$ 15,948,501 | \$ (7,369,529) |

The change in deferred income taxes reported in surplus before consideration of nonadmitted assets are comprised of the following components:

| | December 31, 2017 | December 31, 2016 | Change |
|---|-------------------|-------------------|----------------|
| Total deferred tax assets | \$ 8,725,339 | \$ 16,080,705 | \$ (7,355,366) |
| Total deferred tax liabilities | (146,367) | (132,204) | (14,163) |
| Net deferred tax assets/liabilities | 8,578,972 | 15,948,501 | (7,369,529) |
| Statutory valuation allowance adjustment (*see explanation below) | - | - | - |
| Net deferred tax assets/liabilities after SVA | 8,578,972 | 15,948,501 | (7,369,529) |
| Tax effect of unrealized gains/(losses) | 132,078 | 118,496 | 13,582 |
| Change in net deferred income tax [(charge)/benefit] | \$ 8,711,050 | \$ 16,066,997 | \$ (7,355,947) |

*Statutory valuation allowance

The valuation allowance adjustment to gross deferred tax assets as of December 31, 2017 and 2016 was \$0 and \$0, respectively. The net change in the total valuation allowance for the years ended December 31, 2017 was a decrease of (\$0).

D. Reconciliation of federal income tax rate to actual effective rate:

The Company's income tax incurred and change in deferred income tax differs from the amount obtained by applying the federal statutory rate of 35% to income before income taxes as follows:

| Description | 2017 | Effective Tax Rate | 2016 | Effective Tax Rate |
|---|---------------|--------------------|----------------|--------------------|
| Income Before Taxes | \$ 55,430,777 | | \$ 10,721,345 | |
| Statutory tax rate | 35% | | 35% | |
| Expected income tax benefit at 35% statutory tax rate | 19,400,772 | 35.00% | 3,752,471 | 35.00% |
| Tax-Exempt Interest | (61,101) | -0.11% | (136,956) | -1.28% |
| Meals & Entertainment, Etc. | 0 | 0.00% | 18,935 | 0.18% |
| ACA fee | 0 | 0.00% | 1,201,008 | 11.20% |
| Stock compensation excess tax benefit | 0 | 0.00% | (57,020) | -0.53% |
| Statutory Valuation Allowance Adjustment | 0 | 0.00% | 0 | 0.00% |
| Interest maintenance reserve | 0 | 0.00% | 0 | 0.00% |
| 162(m)(6) limitation | 70,000 | 0.13% | 365,890 | 3.41% |
| Deferred Taxes on Nonadmitted Assets | 6,737,018 | 12.15% | (8,254,690) | -76.99% |
| Other, Including Prior Year True-Up | 348 | 0.00% | (8,072) | -0.08% |
| Total | \$ 26,147,037 | 47.17% | \$ (3,118,435) | -29.09% |
| Federal income taxed incurred [expense/(benefit)] | \$ 18,791,090 | 33.90% | \$ 8,762,016 | 81.72% |
| Tax on capital gains/(losses) | 0 | 0.00% | 0 | 0.00% |
| Change in net deferred income tax [charge/(benefit)] | 7,355,947 | 13.27% | (11,880,451) | -110.81% |
| Total statutory income taxes | \$ 26,147,037 | 47.17% | \$ (3,118,435) | -29.09% |

E. Carryforwards, recoverable taxes, and IRC §6603 deposits:

As of December 31, 2016, the Company had no net operating loss or tax credit carryforwards available to tax purposes.

The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

The following is income tax expense for 2015 and 2016 that is available for recoupment in the event of future net losses:

| Year | Ordinary | Capital | Total |
|-------|---------------|---------|---------------|
| 2016 | \$ 8,795,790 | \$ - | \$ 8,795,790 |
| 2017 | 18,791,090 | - | 18,791,090 |
| Total | \$ 27,586,880 | \$ - | \$ 27,586,880 |

Deposits admitted under IRC § 6603

None

F. The Company and Centene Corporation are members of an affiliated group that files a consolidated federal income tax return. Consolidated federal income tax liability is allocated among the members of the group under the provisions of a tax sharing agreement. The members of the tax sharing agreement group are:

Ambetter of Magnolia Inc.
Ambetter of Peach State Inc.

The method of allocation among companies is subject to a written agreement whereby allocation is made primarily on a separate company basis using the percentage method pursuant to provisions of IRC Sections 1502 and 1552 and Treasury Regulations 1.1502 and 1.1552. This percentage method allocates a tax asset (i.e. intercompany receivable) for any benefit derived by the consolidated group for the member's losses or credits that offset consolidated taxable income. In accordance with the tax sharing agreement, each member shall pay to Parent or receive from the Parent the amount of tax liability or benefit reported on each member's proforma federal income tax return within 90 days of the date Parent files its consolidated federal income tax return.

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

A, B, C, F, G. The Company is a wholly owned subsidiary of Celtic Group, Inc., which is a wholly owned subsidiary of Centene Corporation.

During 2017 and 2016, Centene Management Company, LLC, a wholly owned subsidiary of Centene Corporation, provided data, claims processing, case management, care coordination, and general management services to the Company. Medical and administrative expenses included \$74,264,985 and \$115,805,562 for such services during the periods ended March 31, 2017 and December 31, 2016, respectively.

Cenpatco Behavioral Health, LLC, an ultimately wholly owned subsidiary of Centene Corporation, provides managed behavioral health services to the Company. Medical expenses included \$12,398,541 and \$26,878,157 for such services for the periods ended March 31, 2017 and December 31, 2016, respectively.

Involve Dental, Inc., an ultimately wholly owned subsidiary of Centene Corporation, provides dental benefits management services to the Company. Medical expenses included \$1,020,799 and \$1,373,928 for such services for the periods ended March 31, 2017 and December 31, 2016, respectively.

Involve PeopleCare, Inc., an ultimately wholly owned subsidiary of Centene Corporation, provides nurse-line triage and health management services to the Company. Medical expenses included \$2,256,378 and \$5,618,339 for such services for the periods ended March 31, 2017 and December 31, 2016, respectively.

Involve Pharmacy Solutions, Inc., an ultimately wholly owned subsidiary of Centene Corporation, provides pharmacy benefits management services to the Company. Medical and administrative expenses included \$81,636,287 and \$145,395,096 for such services for the periods ended March 31, 2017 and December 31, 2016, respectively.

Involve Vision, Inc., an ultimately wholly owned subsidiary of Centene Corporation, provides managed vision services to the Company. Medical expenses included \$4,836,458 and \$7,804,708 for such services for the periods ended March 31, 2017 and December 31, 2016, respectively.

NOTES TO FINANCIAL STATEMENTS

Novasys Health, Inc., an ultimately wholly owned subsidiary of Centene Corporation, provides third party administrative services and network access to the Company. Administrative expenses included \$323,430 and \$709,769 for such services for the periods ended March 31, 2017 and December 31, 2016, respectively.

U.S. Medical Management, LLC, an ultimately wholly owned subsidiary of Centene Corporation, provides in-home health benefits management services to the Company. Medical expenses included (\$120,616) and \$439,319 for such services for the periods ended March 31, 2017 and December 31, 2016, respectively.

California Health and Wellness Plan, a wholly owned subsidiary of Centene Corporation, obtains network access services from the Company. Revenues included \$284,629 and \$1,134,852 for such services for the periods ended March 31, 2017 and December 31, 2016, respectively.

- D. Included in the Company's balance sheet at March 31, 2017 were receivables and/or payables due from/due to parent, subsidiaries and affiliates of:

| Affiliated Entity | 03/31/2017 Receivable | 03/31/2017 (Payable) |
|-------------------------------------|--------------------------|-------------------------|
| Ambetter of Magnolia Inc. | \$ 9,686,888 | \$ - |
| Ambetter of Peach State Inc. | 13,328,553 | - |
| California Health and Wellness Plan | 379,506 | - |
| Celtic Group, Inc. | 416,415 | - |
| Centene Corporation | - | (768,509) |
| Centene Management Company, LLC | 2,759,158 | - |
| Envolve Dental, Inc. | 784,949 | - |
| Novasys Health, Inc. | - | (541,948) |

All balances are settled subsequent to the reporting date per the terms of the related contracts.

- E. None

- H. None

- I. The Company owns a 100% interest in Ambetter of Magnolia Inc. and Ambetter of Peach State Inc. which are both insurance subsidiaries valued at audited statutory capital and surplus, neither of which exceed 10% of the admitted assets of the Company.

- J. None

- K. None

- L. None

- M. The Company only holds 8bi SCA investments; as such, not applicable.

- N. The audited statutory capital and surplus of the Company's insurance subsidiaries do not reflect a departure from the NAIC AP&P.

11. Debt – None

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences, and Other Postretirement Benefit Plans – None

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

- 1) The Company had 250,000 \$10 par value common shares authorized, issued and outstanding at March 31, 2017.
- 2) The Company had no preferred stock outstanding.
- 3) Dividends are paid as determined by the Board of Directors with the approval of the Illinois Department of Insurance, so long as the Company meets or exceeds minimum surplus requirements.
- 4) None
- 5) Within the limitations of Note C above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.
- 6) There were no restrictions placed on the Company's statutory surplus.
- 7) Not applicable
- 8) None
- 9) The increase in the special surplus fund from December 31, 2016 is due to health insurance issuers not being required to pay the fees under section 9010 of the Affordable Care Act based on business written in 2016.

NOTES TO FINANCIAL STATEMENTS

- 10) The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses was \$26,939,434.
- 11) The Company did not issue any surplus debentures or similar obligations.
- 12) There have been no quasi-reorganizations.
- 13) There have been no quasi-reorganizations.

14. Liabilities, Contingencies, and Assessments

- A. Contingent Commitments – None
- B. Assessments – None
- C. Gain Contingencies – None
- D. Claims Related to Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits – None
- E. Joint and Several Liabilities – None
- F. All Other Contingencies

Various lawsuits against the Company have arisen in the normal course of business. Contingent liabilities arising from litigation, income taxes, and other matters are not considered material in relation to the statutory financial position of the Company.

The Company recognized impairment charges of \$2,483,186 and \$5,525,501 related to member premium receivables outstanding at March 31, 2017 and December 31, 2016, respectively. The \$1,042,834 and \$944,256 of member premium receivables recognized at March 31, 2017 and December 31, 2016, respectively, have a reasonable possibility that they will be deemed uncollectible.

15. Leases – None

16. Information About Financial Instruments With Off-Balance-Sheet Risk and Financial Instruments with Concentrations of Credit Risk – None

17. Sale, Transfer, and Servicing of Financial Assets and Extinguishments of Liabilities – None

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans – None

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators – None

20. Fair Value Measurements

A. Assets Measured at Fair Value on a Recurring Basis

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. |

The following table summarizes fair value measurements by level at March 31, 2017 for admitted assets and liabilities measured at fair value on a recurring basis:

NOTES TO FINANCIAL STATEMENTS

| Description for each class of asset or liability | (Level 1) | (Level 2) | (Level 3) | Total |
|--|----------------|--------------|-----------|----------------|
| a. Assets at fair value | | | | |
| Cash, Cash Equivalents, and Short-Term Investments | \$ 609,799,805 | \$ - | \$ - | \$ 609,799,805 |
| Perpetual Preferred stock | | | | |
| Industrial and Misc | \$ - | \$ - | \$ - | \$ - |
| Parent, Subsidiaries and Affiliates | - | - | - | - |
| Total Perpetual Preferred Stocks | \$ - | \$ - | \$ - | \$ - |
| Bonds | | | | |
| U.S. Governments | \$ - | \$ - | \$ - | \$ - |
| Industrial and Misc | - | 4,016,548 | - | 4,016,548 |
| Hybrid Securities | - | - | - | - |
| Parent, Subsidiaries and Affiliates | - | - | - | - |
| Total Bonds | \$ - | \$ 4,016,548 | \$ - | \$ 4,016,548 |
| Common Stocks | | | | |
| Industrial and Misc | \$ - | \$ - | \$ - | \$ - |
| Parent, Subsidiaries and Affiliates | - | - | - | - |
| Total Common Stocks | \$ - | \$ - | \$ - | \$ - |
| Derivative assets | | | | |
| Interest rate contracts | \$ - | \$ - | \$ - | \$ - |
| Foreign exchange contracts | - | - | - | - |
| Credit contracts | - | - | - | - |
| Commodity futures contracts | - | - | - | - |
| Commodity forward contracts | - | - | - | - |
| Total Derivatives | \$ - | \$ - | \$ - | \$ - |
| Separate account assets | \$ - | \$ - | \$ - | \$ - |
| Total assets at fair value | \$ 609,799,805 | \$ 4,016,548 | \$ - | \$ 613,816,353 |
| b. Liabilities at fair value | | | | |
| Derivative liabilities | \$ - | \$ - | \$ - | \$ - |
| Total liabilities at fair value | \$ - | \$ - | \$ - | \$ - |

The following table summarizes fair value measurements by level at December 31, 2016 for admitted assets and liabilities measured at fair value on a recurring basis:

| Description for each class of asset or liability | (Level 1) | (Level 2) | (Level 3) | Total |
|--|----------------|--------------|-----------|----------------|
| a. Assets at fair value | | | | |
| Cash, Cash Equivalents, and Short-Term Investments | \$ 236,886,199 | \$ - | \$ - | \$ 236,886,199 |
| Perpetual Preferred stock | | | | |
| Industrial and Misc | \$ - | \$ - | \$ - | \$ - |
| Parent, Subsidiaries and Affiliates | - | - | - | - |
| Total Perpetual Preferred Stocks | \$ - | \$ - | \$ - | \$ - |
| Bonds | | | | |
| U.S. Governments | \$ - | \$ 2,636,254 | \$ - | \$ 2,636,254 |
| Industrial and Misc | - | 215,484 | - | 215,484 |
| Hybrid Securities | - | - | - | - |
| Parent, Subsidiaries and Affiliates | - | - | - | - |
| Total Bonds | \$ - | \$ 2,851,738 | \$ - | \$ 2,851,738 |
| Common Stocks | | | | |
| Industrial and Misc | \$ - | \$ - | \$ - | \$ - |
| Parent, Subsidiaries and Affiliates | - | - | - | - |
| Total Common Stocks | \$ - | \$ - | \$ - | \$ - |
| Derivative assets | | | | |
| Interest rate contracts | \$ - | \$ - | \$ - | \$ - |
| Foreign exchange contracts | - | - | - | - |
| Credit contracts | - | - | - | - |
| Commodity futures contracts | - | - | - | - |
| Commodity forward contracts | - | - | - | - |
| Total Derivatives | \$ - | \$ - | \$ - | \$ - |
| Separate account assets | \$ - | \$ - | \$ - | \$ - |
| Total assets at fair value | \$ 236,886,199 | \$ 2,851,738 | \$ - | \$ 239,737,937 |
| b. Liabilities at fair value | | | | |
| Derivative 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 March 31, 2017 for all financial instruments:

| Type of Financial Instrument | Aggregate Fair Value | Admitted Assets | (Level 1) | (Level 2) | (Level 3) | Not Practicable (Carrying Value) |
|---|----------------------|-----------------|----------------|-------------|-----------|----------------------------------|
| Cash, cash equivalents and short-term investments | \$ 609,799,805 | \$ 609,799,805 | \$ 609,799,805 | \$ - | \$ - | \$ - |
| Bonds | 268,769,888 | 269,974,869 | 17,260,640 | 251,509,248 | - | - |

The following table summarizes fair value measurements by level at December 31, 2016 for all financial instruments:

| Type of Financial Instrument | Aggregate Fair Value | Admitted Assets | (Level 1) | (Level 2) | (Level 3) | Not Practicable (Carrying Value) |
|---|----------------------|-----------------|----------------|-------------|-----------|----------------------------------|
| Cash, cash equivalents and short-term investments | \$ 236,886,199 | \$ 236,886,199 | \$ 236,886,199 | \$ - | \$ - | \$ - |
| Bonds | 199,921,406 | 202,638,362 | 12,418,451 | 187,502,955 | - | - |

21. Other Items

A. Unusual or Infrequent Items – None

B. Troubled Debt Restructuring: Debtors – None

NOTES TO FINANCIAL STATEMENTS

- C. Other Disclosures – None
- D. Business Interruption Insurance Recoveries – None
- E. State Transferable and Non-Transferable Tax Credits – None
- F. Subprime-Mortgage-Related Risk Exposure – None
- G. Retained Assets – None
- H. Insurance-Linked Securities (ILS) Contracts – None

22. Events Subsequent

Type I – Recognized Subsequent Events – None

Type II – Nonrecognized Subsequent Events

| | <u>Current Year</u> | <u>Prior Year</u> |
|--|---------------------|-------------------|
| A. Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the Federal Affordable Care Act (YES/NO)? | Yes | |
| B. ACA fee assessment payable for the upcoming year | \$ 10,740,050 | \$ - |
| C. ACA fee assessment paid | - | 3,431,450 |
| D. Premium written subject to ACA 9010 assessment | 499,537,191 | 781,893,834 |
| E. Total Adjusted Capital before surplus adjustment | 53,251,897 | |
| F. Total Adjusted Capital after surplus adjustment | 42,511,847 | |
| G. Authorized Control Level | 26,432,039 | |
| H. Would reporting the ACA assessment as of March 31, 2017 have triggered an RBC action level (YES/NO)? | No | |

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 – General Interrogatories

1) No

2) No

Section 2 – Ceded Reinsurance Report – Part A

1) No

2) No

Section 3 – Ceded Reinsurance Report – Part B

1) \$0

2) No

B. Uncollectible Reinsurance – None

C. Commutation of Ceded Reinsurance – None

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation – None

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

- A. The Company estimates accrued retrospective premiums for its comprehensive individual health insurance business in accordance with the regulations put forth in Title 45 of the Code of Federal Regulations Part 153, Subpart F for the ACA Risk Corridors program and Title 45 of the Code of Federal Regulations Part 158 for the ACA MLR Rebate Program.
- B. The Company records accrued retrospective premiums through written premium.
- C. The amount of net premiums written by the Company for the periods ended March 31, 2017 and December 31, 2016 which were subject to retrospective rating features was \$499,537,191 and \$781,893,834, respectively, which represented 100% of the total net premiums written.

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

NOTES TO FINANCIAL STATEMENTS

D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act

| | 1 Individual | 2 Small Group Employer | 3 Large Group Employer | 4 Other Categories with Rebates | 5 Total |
|---|-----------------|------------------------------|---------------------------------|--|--------------|
| Prior Reporting Year | | | | | |
| (1) Medical loss ratio rebates incurred | \$ 3,112,246 | \$ - | \$ - | \$ - | \$ 3,112,246 |
| (2) Medical loss ratio rebates paid | 784,875 | - | - | - | 784,875 |
| (3) Medical loss ratio rebates unpaid | 9,348,047 | - | - | - | 9,348,047 |
| (4) Plus reinsurance assumed amounts | XXX | XXX | XXX | XXX | - |
| (5) Less reinsurance ceded amounts | XXX | XXX | XXX | XXX | - |
| (6) Rebates unpaid net of reinsurance | XXX | XXX | XXX | XXX | \$ 9,348,047 |
| Current Reporting Year-to-Date | | | | | |
| (7) Medical loss ratio rebates incurred | \$ (590,820) | \$ - | \$ - | \$ - | \$ (590,820) |
| (8) Medical loss ratio rebates paid | - | - | - | - | - |
| (9) Medical loss ratio rebates unpaid | 8,757,227 | - | - | - | 8,757,227 |
| (10) Plus reinsurance assumed amounts | XXX | XXX | XXX | XXX | - |
| (11) Less reinsurance ceded amounts | XXX | XXX | XXX | XXX | - |
| (12) Rebates unpaid net of reinsurance | XXX | XXX | XXX | XXX | \$ 8,757,227 |

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

| | | |
|----|---|-------------|
| 1. | Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk-sharing provisions (YES/NO)? | Yes |
| 2. | Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year | |
| | a) Permanent ACA Risk Adjustment Program | |
| | Assets | |
| | 1) Premium adjustments receivable due to ACA Risk Adjustment | \$ - |
| | Liabilities | |
| | 2) Risk adjustment user fees payable for ACA Risk Adjustment | 755,520 |
| | 3) Premium adjustments payable due to ACA Risk Adjustment | 488,913,446 |
| | Operations (Revenue & Expense) | |
| | 4) Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk adjustment | 210,581,980 |
| | 5) Reported in expenses as ACA risk adjustment user fees (incurred/paid) | 263,194 |
| | b) Transitional ACA Reinsurance Program | |
| | Assets | |
| | 1) Amounts recoverable for claims paid due to ACA Reinsurance | 18,441,064 |
| | 2) Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability) | 900,007 |
| | 3) Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance | - |
| | Liabilities | |
| | 4) Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premiums | 287,525 |
| | 5) Ceded reinsurance premiums payable due to ACA Reinsurance | 1,150,099 |
| | 6) Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance | - |
| | Operations (Revenue & Expense) | |
| | 7) Ceded reinsurance premiums due to ACA Reinsurance | 1,150,099 |
| | 8) Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments | 2,799,093 |
| | 9) ACA Reinsurance contributions - not reported as ceded premium | 287,525 |
| | c) Temporary ACA Risk Corridors Program | |
| | Assets | |
| | 1) Accrued retrospective premium due to ACA Risk Corridors | - |
| | Liabilities | |
| | 2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors | 10,777,369 |
| | Operations (Revenue & Expense) | |
| | 3) Effect of ACA Risk Corridors on net premium income | 1,582,811 |
| | 4) Effect of ACA Risk Corridors on change in reserves for rate credits | - |

3) Roll-Forward of Prior year ACA Risk-Sharing Provisions

| | Accrued During the Prior Year on Business Written Before Dec 31 of the Prior Year | | Received or Paid as of the Current Year on Business Written Before Dec 31 of the Prior Year | | Differences | | Adjustments | | Unsettled Balances as of the Reporting Date | | |
|---|---|---------------|---|-------------|-------------|---------------|-------------|---------------|---|------------|---------------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| | | | | | | | | | | | Receivable |
| a. Permanent ACA Risk Adjustment Program | | | | | | | | | | | |
| 1. Premium adjustments receivable | - | - | - | - | - | - | - | - | A | - | - |
| 2. Premium adjustments (payable) | - | (278,331,464) | - | - | - | (278,331,464) | - | (210,581,982) | B | - | (488,913,446) |
| 3. Subtotal ACA Permanent Risk Adjustment Program | - | (278,331,464) | - | - | - | (278,331,464) | - | (210,581,982) | | - | (488,913,446) |
| b. Transitional ACA Reinsurance Program | | | | | | | | | | | |
| 1. Amounts recoverable for claims paid | 16,314,715 | - | 1,548,606 | - | 14,766,109 | - | 3,674,955 | - | C | 18,441,064 | - |
| 2. Amounts recoverable for claims unpaid (contra liability) | - | 2,093,126 | - | - | - | 2,093,126 | - | (1,193,119) | D | - | 900,007 |
| 3. Amounts receivable relating to uninsured plans | - | - | - | - | - | - | - | - | E | - | - |
| 4. Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium | - | (1,437,624) | - | - | - | (1,437,624) | - | - | F | - | (1,437,624) |
| 5. Ceded reinsurance premiums payable | - | (5,750,496) | - | (5,750,496) | - | - | - | - | G | - | - |
| 6. Liability for amounts held under uninsured plans | - | - | - | - | - | - | - | - | H | - | - |
| 7. Subtotal ACA Transitional Reinsurance Program | 16,314,715 | (5,094,994) | 1,548,606 | (5,750,496) | 14,766,109 | 655,502 | 3,674,955 | (1,193,119) | | 18,441,064 | (537,617) |
| c. Temporary ACA Risk Corridors Program | | | | | | | | | | | |
| 1. Accrued retrospective premium | - | - | - | - | - | - | - | - | I | - | - |
| 2. Reserve for rate credits or policy experience rating refunds | - | (9,194,557) | - | - | - | (9,194,557) | - | (1,582,811) | J | - | (10,777,368) |
| 3. Subtotal ACA Risk Corridors Program | - | (9,194,557) | - | - | - | (9,194,557) | - | (1,582,811) | | - | (10,777,368) |
| d. Total for ACA Risk Sharing Provisions | 16,314,715 | (292,621,015) | 1,548,606 | (5,750,496) | 14,766,109 | (286,870,519) | 3,674,955 | (213,357,912) | | 18,441,064 | (500,228,431) |

NOTES TO FINANCIAL STATEMENTS

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

| | Accrued During the Prior Year on Business Written Before Dec 31 of the Prior Year | | Received or Paid as of the Current Year on Business Written Before Dec 31 of the Prior Year | | Differences | | Adjustments | | Unsettled Balances as of the Reporting Date | | |
|---|---|-------------|---|------------|-----------------------------------|-----------------------------------|---------------|---------------|---|---|--------------|
| | 1 | 2 | 3 | 4 | Prior Year | Prior Year | To Prior | To Prior Year | Cumulative Balance from Prior Years (Col 1 - 3 + 7) | Cumulative Balance from Prior Years (Col 2 - 4 + 8) | |
| | | | | | Accrued Less Payments (Col 1 - 3) | Accrued Less Payments (Col 2 - 4) | Year Balances | Balances | | | |
| Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | Ref | Receivable | (Payable) | |
| a. 2014 | | | | | | | | | | | |
| 1. Accrued retrospective premium | - | - | - | - | - | - | - | - | A | - | - |
| 2. Reserve for rate credits or policy experience rating refunds | - | - | - | - | - | - | - | - | B | - | - |
| b. 2015 | | | | | | | | | | | |
| 1. Accrued retrospective premium | - | - | - | - | - | - | - | - | C | - | - |
| 2. Reserve for rate credits or policy experience rating refunds | - | - | - | - | - | - | - | - | D | - | - |
| c. 2016 | | | | | | | | | | | |
| 1. Accrued retrospective premium | - | - | - | - | - | - | - | - | E | - | - |
| 2. Reserve for rate credits or policy experience rating refunds | - | (9,194,557) | - | - | - | (9,194,557) | - | (1,582,811) | F | - | (10,777,368) |
| d. Total for Risk Corridors | - | (9,194,557) | - | - | - | (9,194,557) | - | (1,582,811) | | - | (10,777,368) |

5) ACA Risk Corridors Receivable as of Reporting Date – None

25. Change in Incurred Claims and Claims Adjustment Expenses

Claims unpaid at December 31, 2016 was approximately \$107.3 million. As of March 31, 2017, approximately \$81.8 million had been paid for claims incurred attributable to insured events of prior years. Claims unpaid remaining for prior years was approximately \$21.5 million as a result of re-estimation of unpaid claims on the Company's accident and health line of insurance resulting in approximately \$4.5 million favorable prior year development during the period ended March 31, 2017. This change is generally the result of ongoing analysis of recent loss development trends. Original estimates are adjusted as additional information becomes known.

26. Intercompany Pooling Arrangements – None

27. Structured Settlements – Not applicable

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

| Quarter | Estimated Pharmacy Rebates as Reported on Statutory Financial Statements | Pharmacy Rebates as Billed or Otherwise Confirmed | Actual Rebates Received Within 90 Days of Billing | Actual Rebates Received Within 91 to 180 Days of Billing | Actual Rebates Received More Than 180 Days After Billing |
|------------|--|---|---|--|--|
| 3/31/2017 | \$ 7,008,462 | \$ 7,008,462 | \$ - | \$ - | \$ - |
| 12/31/2016 | 3,618,700 | 3,618,700 | - | - | - |
| 9/30/2016 | 3,150,981 | 3,150,981 | - | - | 3,172,643 |
| 6/30/2016 | 2,130,328 | 2,130,328 | - | - | 1,580,628 |
| 3/31/2016 | 1,942,131 | 1,942,131 | - | - | 1,504,799 |
| 12/31/2015 | 701,430 | 701,430 | - | - | 647,501 |
| 9/30/2015 | 653,232 | 653,232 | - | - | 607,536 |
| 6/30/2015 | 557,569 | 557,569 | - | - | 404,656 |
| 3/31/2015 | 513,371 | 513,371 | - | - | 448,836 |
| 12/31/2014 | 168,740 | 168,740 | - | - | 168,740 |
| 9/30/2014 | 125,117 | 125,117 | - | - | 125,117 |
| 6/30/2014 | 84,830 | 84,830 | - | - | 84,830 |
| 3/31/2014 | 37,097 | 37,097 | - | - | 37,097 |

B. Risk-Sharing Receivables – None

29. Participating Policies – None

30. Premium Deficiency Reserves

- | | |
|---|-------------------|
| 1) Liability carried for premium deficiency reserves | \$593,527 |
| 2) Date of the most recent evaluation of this liability | December 31, 2016 |
| 3) Was anticipated investment income utilized in the calculation? | Yes [X] No [] |

31. Anticipated Salvage and Subrogation – None

GENERAL INTERROGATORIES

**PART 1 - COMMON INTERROGATORIES
GENERAL**

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

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

- 5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] NA []
If yes, attach an explanation.
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made.12/31/2014
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.12/31/2009
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).06/22/2011
- 6.4 By what department or departments?
Illinois Department of Insurance.....
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [X] No [] NA []
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] NA []
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 7.2 If yes, give full information:
.....
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?..... Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
.....
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms?..... Yes [] No [X]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

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

GENERAL INTERROGATORIES

9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes No

(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 (c) Compliance with applicable governmental laws, rules and regulations;
 (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 (e) Accountability for adherence to the code.

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

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

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

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

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

FINANCIAL

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

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$416,415

INVESTMENT

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

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

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

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

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

14.2 If yes, please complete the following:

| | 1 | 2 |
|---|---|--|
| | Prior Year-End Book/Adjusted Carrying Value | Current Quarter Book/Adjusted Carrying Value |
| 14.21 Bonds | \$ | \$ |
| 14.22 Preferred Stock | \$ | \$ |
| 14.23 Common Stock | \$26,338,338 | \$39,408,639 |
| 14.24 Short-Term Investments | \$ | \$ |
| 14.25 Mortgage Loans on Real Estate | \$ | \$ |
| 14.26 All Other | \$ | \$ |
| 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)..... | \$26,338,338 | \$39,408,639 |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above | \$ | \$ |

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

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

If no, attach a description with this statement.

GENERAL INTERROGATORIES

- 16 For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$0
 - 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$0
 - 16.3 Total payable for securities lending reported on the liability page \$0

17. Excluding items in Schedule E – Part 3 – Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*? Yes [X] No []

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

| 1 Name of Custodian(s) | 2 Custodian Address |
|--|---|
| Brown Brothers Harriman Trust Company..... | 140 Broadway, New York, NY 10005..... |
| Wells Fargo Clearing Services, LLC..... | One North Jefferson Ave, St. Louis, MO 63103..... |

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No [X]

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

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

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

| 1 Name of Firm or Individual | 2 Affiliation |
|---------------------------------|------------------|
| Brown Brothers Harriman..... | U..... |
| Wells Capital Management..... | U..... |
| Wells Fargo Securities..... | U..... |

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) manage more than 10% of the reporting entity's assets? Yes [X] No []

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's assets? Yes [] No [X]

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

| 1 Central Registration Depository Number | 2 Name of Firm or Individual | 3 Legal Entity Identifier (LEI) | 4 Registered With | 5 Investment Management Agreement (IMA) Filed |
|---|---------------------------------|------------------------------------|----------------------|--|
| 104487..... | Brown Brothers Harriman..... | | FINRA..... | NO..... |
| 104973..... | Wells Capital Management..... | 549300B3H21002L85190..... | SEC..... | NO..... |
| 126292..... | Wells Fargo Securities..... | VYVVKR63DVZZN70PB21..... | SEC..... | NO..... |

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

18.2 If no, list exceptions:

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:
- | | |
|--|--------|
| 1.1 A&H loss percent..... | 65.7 % |
| 1.2 A&H cost containment percent | 0.2 % |
| 1.3 A&H expense percent excluding cost containment expenses..... | 23.1 % |
- 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..... \$ _____

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

| States, Etc. | 1 Active Status | Direct Business Only | | | | | | | 9 Deposit-Type Contracts | |
|---|--------------------|---------------------------------|---------------------------|-------------------------|---|---|---------------------------------|--------------------------------|-----------------------------|----|
| | | 2 Accident & Health Premiums | 3 Medicare Title XVIII | 4 Medicaid Title XIX | 5 Federal Employees Health Benefits Program Premiums | 6 Life & Annuity Premiums & Other Considerations | 7 Property/Casualty Premiums | 8 Total Columns 2 Through 7 | | |
| 1. Alabama | AL | L | .974 | | | | | | .974 | |
| 2. Alaska | AK | L | 30,691 | | | | 437 | | 31,128 | |
| 3. Arizona | AZ | L | 3,740 | | | | 968 | | 4,708 | |
| 4. Arkansas | AR | L | 91,090,639 | | | | 185 | | 91,090,824 | |
| 5. California | CA | L | 8,659 | | | | | | 8,659 | |
| 6. Colorado | CO | L | 4,140 | | | | | | 4,140 | |
| 7. Connecticut | CT | L | 31,517 | | | | (6) | | 31,511 | |
| 8. Delaware | DE | L | | | | | | | 0 | |
| 9. Dist. Columbia | DC | L | 5,173 | | | | 70 | | 5,243 | |
| 10. Florida | FL | L | 172,281,619 | | | | 1,004 | | 172,282,623 | |
| 11. Georgia | GA | L | 96,271 | | | | 81 | | 96,352 | |
| 12. Hawaii | HI | L | | | | | | | 0 | |
| 13. Idaho | ID | L | 21,676 | | | | 30 | | 21,706 | |
| 14. Illinois | IL | L | 23,451,465 | | | | | | 23,451,465 | |
| 15. Indiana | IN | L | 49,590,449 | | | | 825 | | 49,591,274 | |
| 16. Iowa | IA | L | 92,676 | | | | 247 | | 92,923 | |
| 17. Kansas | KS | L | 7,737 | | | | | | 7,737 | |
| 18. Kentucky | KY | L | 5,467 | | | | | | 5,467 | |
| 19. Louisiana | LA | L | 3,267 | | | | | | 3,267 | |
| 20. Maine | ME | L | 11,027 | | | | 784 | | 11,811 | |
| 21. Maryland | MD | L | 17,441 | | | | | | 17,441 | |
| 22. Massachusetts | MA | L | 5,362 | | | | 188 | | 5,550 | |
| 23. Michigan | MI | L | 5,668 | | | | | | 5,668 | |
| 24. Minnesota | MN | L | 6,692 | | | | | | 6,692 | |
| 25. Mississippi | MS | L | 9,652 | | | | | | 9,652 | |
| 26. Missouri | MO | L | 21,939 | | | | 171 | | 22,110 | |
| 27. Montana | MT | L | 2,062 | | | | | | 2,062 | |
| 28. Nebraska | NE | L | 22,142 | | | | 916 | | 23,058 | |
| 29. Nevada | NV | L | 774 | | | | | | 774 | |
| 30. New Hampshire | NH | L | 24,692,055 | | | | 30 | | 24,692,085 | |
| 31. New Jersey | NJ | L | 5,045 | | | | | | 5,045 | |
| 32. New Mexico | NM | L | 251,293 | | | | | | 251,293 | |
| 33. New York | NY | L | 8,988 | | | | 1,267 | | 10,255 | |
| 34. North Carolina | NC | L | 3,821 | | | | | | 3,821 | |
| 35. North Dakota | ND | L | 15,191 | | | | | | 15,191 | |
| 36. Ohio | OH | L | 33,157 | | | | 750 | | 33,907 | |
| 37. Oklahoma | OK | L | 5,602 | | | | 36 | | 5,638 | |
| 38. Oregon | OR | L | 776 | | | | | | 776 | 54 |
| 39. Pennsylvania | PA | L | 32,341 | | | | | | 32,341 | |
| 40. Rhode Island | RI | L | 1,124 | | | | | | 1,124 | |
| 41. South Carolina | SC | L | 26,853 | | | | 1,337 | | 28,190 | |
| 42. South Dakota | SD | L | 10,565 | | | | 77 | | 10,642 | |
| 43. Tennessee | TN | L | 13,355 | | | | 1,340 | | 14,695 | |
| 44. Texas | TX | L | 142,390,915 | | | | 1,764 | | 142,392,679 | |
| 45. Utah | UT | L | 2,298 | | | | | | 2,298 | |
| 46. Vermont | VT | L | 24,803 | | | | 1,223 | | 26,026 | |
| 47. Virginia | VA | L | 6,703 | | | | | | 6,703 | |
| 48. Washington | WA | L | 6,334 | | | | | | 6,334 | |
| 49. West Virginia | WV | L | 3,800 | | | | 349 | | 4,149 | |
| 50. Wisconsin | WI | L | 7,396 | | | | | | 7,396 | |
| 51. Wyoming | WY | L | 2,509 | | | | 202 | | 2,711 | |
| 52. American Samoa | AS | N | | | | | | | 0 | |
| 53. Guam | GU | N | | | | | | | 0 | |
| 54. Puerto Rico | PR | N | | | | | | | 0 | |
| 55. U.S. Virgin Islands | VI | N | | | | | | | 0 | |
| 56. Northern Mariana Islands | MP | N | | | | | | | 0 | |
| 57. Canada | CAN | N | | | | | | | 0 | |
| 58. Aggregate other alien | OT | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 59. Subtotal | XXX | | 504,373,843 | 0 | 0 | 0 | 14,275 | 0 | 504,388,118 | 54 |
| 60. Reporting entity contributions for Employee Benefit Plans | XXX | | | | | | | | 0 | |
| 61. Total (Direct Business) | (a) 51 | | 504,373,843 | 0 | 0 | 0 | 14,275 | 0 | 504,388,118 | 54 |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 58001 | XXX | | | | | | | | | |
| 58002 | XXX | | | | | | | | | |
| 58003 | XXX | | | | | | | | | |
| 58998 Summary of remaining write-ins for Line 58 from overflow page | XXX | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 58999 Totals (Lines 58001 through 58003 plus 58998) (Line 58 above) | XXX | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and other Alien.

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

PART 1 - ORGANIZATIONAL CHART

| | | | |
|--|------------|----|-------|
| Centene Corporation | 42-1406317 | DE | |
| Bankers Reserve Life Insurance Company of Wisconsin | 39-0993433 | WI | 71013 |
| Health Plan Real Estate Holding, Inc (17%) | 46-2860967 | MO | |
| Peach State Health Plan, Inc | 20-3174593 | GA | 12315 |
| Health Plan Real Estate Holding, Inc (21%) | 46-2860967 | MO | |
| Iowa Total Care, Inc | 46-4829006 | IA | 15713 |
| Buckeye Community Health Plan, Inc | 32-0045282 | OH | 11834 |
| Health Plan Real Estate Holding, Inc (13%) | 46-2860967 | MO | |
| Absolute Total Care, Inc | 20-5693998 | SC | 12959 |
| Health Plan Real Estate Holding, Inc (1%) | 46-2860967 | MO | |
| Physicians Choice, LLC | 59-3807546 | SC | |
| PhyTrust of South Carolina LLC | 65-1206841 | FL | |
| Coordinated Care Corporation d/b/a Managed Health Services | 39-1821211 | IN | 95831 |
| Health Plan Real Estate Holding, Inc (15%) | 46-2860967 | MO | |
| Healthy Washington Holdings, Inc | 46-5523218 | DE | |
| Coordinated Care of Washington, Inc | 46-2578279 | WA | 15352 |
| Managed Health Services Insurance Corp | 39-1678579 | WI | 96822 |
| Health Plan Real Estate Holding, Inc (2%) | 46-2860967 | MO | |
| Hallmark Life Insurance Co | 86-0819817 | AZ | 60078 |
| Superior HealthPlan, Inc | 74-2770542 | TX | 95647 |
| Health Plan Real Estate Holding, Inc (21%) | 46-2860967 | MO | |
| Healthy Louisiana Holdings LLC | 27-0916294 | DE | |
| Louisiana Healthcare Connections, Inc | 27-1287287 | LA | 13970 |
| Magnolia Health Plan Inc | 20-8570212 | MS | 13923 |
| IlliniCare Health Plan, Inc | 27-2186150 | IL | 14053 |
| Health Plan Real Estate Holding, Inc (5%) | 46-2860967 | MO | |
| Sunshine Health Holding LLC | 26-0557093 | FL | |
| Sunshine State Health Plan, Inc | 20-8937577 | FL | 13148 |
| Access Health Solutions LLC | 56-2384404 | FL | |
| Kentucky Spirit Health Plan, Inc | 45-1294925 | KY | 14100 |
| Healthy Missouri Holding, Inc (95%) | 45-5070230 | MO | |
| Home State Health Plan, Inc | 45-2798041 | MO | 14218 |
| Health Plan Real Estate Holding, Inc (5%) | 46-2860967 | MO | |
| Sunflower State Health Plan, Inc | 45-3276702 | KS | 14345 |
| Granite State Health Plan, Inc | 45-4792498 | NH | 14226 |
| Bridgeway Advantage Solutions, Inc | 46-4195563 | AZ | 15447 |
| California Health and Wellness Plan | 46-0907261 | CA | |
| Fidelis SecureCare of Michigan, Inc. | 30-0312489 | MI | 10769 |
| SilverSummit Healthplan, Inc. | 20-4761189 | NV | 16143 |
| Agate Resources, Inc. | 20-0483299 | OR | |
| Lane Individual Practice Association, Inc. | 93-1198219 | OR | |

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

| | | | |
|---|------------|----|-------|
| Trillium Community Health Plan, Inc. (60%) | 42-1694349 | OR | 12559 |
| Trillium Community Health Plan, Inc. (40%) | 42-1694349 | OR | 12559 |
| Agate Properties, LLC | 26-4475075 | OR | |
| Independent Professional Services, LLC | 93-1198376 | OR | |
| Nebraska Total Care, Inc. | 47-5123293 | NE | 15902 |
| Pennsylvania Health & Wellness, Inc. | 47-5340613 | PA | 16041 |
| Superior HealthPlan Community Solutions, Inc. | 47-5664832 | TX | 15912 |
| Sunshine Health Community Solutions, Inc. | 47-5667095 | FL | 15927 |
| Buckeye Health Plan Community Solutions, Inc. | 47-5664342 | OH | |
| Arkansas Health & Wellness Health Plan, Inc. | 81-1282251 | AR | 16130 |
| Healthy Oklahoma Holdings, Inc. | 81-2788043 | DE | |
| Oklahoma Complete Health Inc. | 81-3121527 | OK | |
| Bridgeway Health Solutions, LLC | 20-4980875 | DE | |
| Bridgeway Health Solutions of Arizona Inc. | 20-4980818 | AZ | |
| Celtic Group, Inc | 36-2979209 | DE | |
| Celtic Insurance Company | 06-0641618 | IL | 80799 |
| Ambetter of Magnolia Inc | 35-2525384 | MS | 15762 |
| Ambetter of Peach State Inc. | 36-4802632 | GA | 15729 |
| Novasys Health, Inc | 27-2221367 | DE | |
| CeltiCare Health Plan Holdings LLC | 26-4278205 | DE | |
| CeltiCare Health Plan of Massachusetts, Inc. | 26-4818440 | MA | 13632 |
| Centene Management Company LLC | 39-1864073 | WI | |
| CMC Real Estate Co. LLC | 20-0057283 | DE | |
| Centene Center LLC | 26-4094682 | DE | |
| Centene Center II, LLC | 47-5156015 | DE | |
| CMC Hanley, LLC | 46-4234827 | MO | |
| Forhan, LLC | 47-2914561 | MO | |
| Hanley-Forsyth, LLC | 37-1766939 | MO | |
| GPT Acquisition LLC | 45-5431787 | DE | |
| Clayton Property Investment LLC | 45-4372065 | DE | |
| LSM Holdco, Inc. | 46-2794037 | DE | |
| Lifeshare Management Group, LLC | 46-2798132 | NH | |
| CCTX Holdings, LLC | 20-2074217 | DE | |
| Centene Company of Texas, LP (1%) | 74-2810404 | TX | |
| Centene Holdings, LLC | 20-2074277 | DE | |
| Centene Company of Texas, LP (99%) | 74-2810404 | TX | |
| MHS Travel & Charter, Inc | 43-1795436 | WI | |
| Health Care Enterprises, LLC | 46-4855483 | DE | |
| Envolve Holdings, Inc. | 22-3889471 | DE | |
| Cenpatico Behavioral Health, LLC | 68-0461584 | CA | |
| CBHSP Arizona, Inc | 86-0782736 | AZ | |

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

| | | | |
|--|------------|-----|-------|
| Cenpatico of California, Inc | 47-2595704 | CA | |
| Integrated Mental Health Mgmt, LLC | 74-2892993 | TX | |
| Integrated Mental Health Services | 74-2785494 | TX | |
| Cenpatico Behavioral Health of Arizona, LLC | 20-1624120 | AZ | |
| Cenpatico of Arizona Inc. (80%) | 80-0879942 | AZ | 14704 |
| Envolve, Inc. | 37-1788565 | DE | |
| AHA Administrative Services, LLC | 47-4545413 | AL | |
| Envolve - New York, Inc. | 47-3454898 | NY | |
| Massachusetts Total Care Holding Company, LLC | 81-5366207 | DE | |
| Massachusetts Total Care, Inc. | 81-5220756 | MA | |
| Envolve PeopleCare, Inc. | 06-1476380 | DE | |
| LiveHealthier, Inc. | 47-2516714 | DE | |
| Envolve Benefits Options, Inc. | 20-4730341 | DE | |
| Envolve Captive Insurance Company, Inc. | 36-4520004 | SC | |
| Envolve Vision of Texas, Inc. | 75-2592153 | TX | 95302 |
| Envolve Vision, Inc | 20-4773088 | DE | |
| Envolve Vision of Florida, Inc | 65-0094759 | FL | |
| Envolve Total Vision, Inc. | 20-4861241 | DE | |
| Envolve Vision of New York, Inc. | 06-1635519 | NY | |
| Envolve Dental, Inc. | 46-2783884 | DE | |
| Envolve Dental of Florida, Inc. | 81-2969330 | FL | |
| Envolve Dental of Texas, Inc. | 81-2796896 | TX | 16106 |
| Envolve Pharmacy Solutions, Inc. | 77-0578529 | DE | |
| LBB Industries, Inc | 76-0511700 | TX | |
| RX Direct, Inc | 75-2612875 | TX | |
| US Script IPA, LLC | 46-2307356 | NY | |
| Casenet LLC | 90-0636938 | DE | |
| Casenet S.R.O. | Foreign | CZE | |
| Centurion Group, Inc | 61-1450727 | DE | |
| Centurion LLC (51%) | 90-0766502 | DE | |
| Centurion of Arizona, LLC | 81-4228054 | AZ | |
| Centurion of Vermont, LLC | 47-1686283 | VT | |
| Centurion of Mississippi, LLC | 47-2967381 | MS | |
| Centurion of Tennessee, LLC | 30-0752651 | TN | |
| Massachusetts Partnership for Correctional Healthcare, LLC | 61-1696004 | MA | |
| Centurion of Minnesota, LLC | 46-2717814 | MN | |
| Centurion Correctional Healthcare of New Mexico, LLC | 81-1161492 | NM | |
| Centurion of Florida, LLC | 81-0687470 | FL | |
| Centurion of Illinois, LLC | 81-3007264 | IL | |
| Centurion of Maryland, LLC | 81-4938030 | MD | |
| Centurion of Philadelphia, LLC | 81-5429405 | PA | |

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

PART 1 - ORGANIZATIONAL CHART

| | | |
|--|------------|----|
| Specialty Therapeutic Care Holdings, LLC | 27-3617766 | DE |
| Specialty Therapeutic Care, LP (99.99%) | 73-1698808 | TX |
| Specialty Therapeutic Care, GP, LLC | 73-1698807 | TX |
| Specialty Therapeutic Care, LP (0.01%) | 73-1698808 | TX |
| Specialty Therapeutic Care West, LLC | 26-2624521 | TX |
| AcariaHealth Solutions, Inc. | 80-0856383 | DE |
| AcariaHealth, Inc. | 45-2780334 | DE |
| AcariaHealth Pharmacy #14, Inc | 27-1599047 | CA |
| AcariaHealth Pharmacy #11, Inc | 20-8192615 | TX |
| AcariaHealth Pharmacy #12, Inc | 27-2765424 | NY |
| AcariaHealth Pharmacy #13, Inc | 26-0226900 | CA |
| AcariaHealth Pharmacy, Inc | 13-4262384 | CA |
| HomeScripts.com, LLC | 27-3707698 | MI |
| New York Rx, Inc. | 20-8235695 | NY |
| U.S. Medical Management Holdings, Inc | 27-0275614 | DE |
| U.S. Medical Management, LLC (20%) | 38-3153946 | DE |
| U.S. Medical Management, LLC (48%) | 38-3153946 | DE |
| RMED, LLC | 31-1733889 | FL |
| IAH of Florida, LLC | 47-2138680 | FL |
| Heritage Home Hospice, LLC | 51-0581762 | MI |
| Grace Hospice of Austin, LLC | 20-2827613 | MI |
| ComfortBrook Hospice, LLC | 20-1530070 | OH |
| Comfort Hospice of Texas, LLC | 20-4996551 | MI |
| Grace Hospice of San Antonio, LLC | 20-2827526 | MI |
| Grace Hospice of Grand Rapids, LLC | 45-0679248 | MI |
| Grace Hospice of Indiana, LLC | 45-0634905 | MI |
| Grace Hospice of Virginia, LLC | 45-5080637 | MI |
| Comfort Hospice of Missouri, LLC | 45-5080567 | MI |
| Grace Hospice of Colorado, LLC | 45-5080675 | MI |
| Grace Hospice of Wisconsin, LLC | 46-1708834 | MI |
| Grace Hospice of Illinois, LLC | 81-5129923 | IL |
| Seniorcorps Peninsula, LLC | 26-4435532 | VA |
| R&C Healthcare, LLC | 33-1179031 | TX |
| A N J, LLC | 20-0927034 | TX |
| Pinnacle Senior Care of Missouri, LLC | 46-0861469 | MI |
| Country Style Health Care, LLC | 03-0556422 | TX |
| Phoenix Home Health Care, LLC | 14-1878333 | DE |
| Traditional Home Health Services, LLC | 75-2635025 | TX |
| Family Nurse Care, LLC | 38-2751108 | MI |
| Family Nurse Care II, LLC | 20-5108540 | MI |
| Family Nurse Care of Ohio, LLC | 20-3920947 | MI |

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

| | | | |
|---|------------|----|-------|
| Pinnacle Senior Care of Wisconsin, LLC | 46-4229858 | WI | |
| Pinnacle Senior Care of Indiana, LLC | 81-1565426 | MI | |
| Pinnacle Home Care, LLC | 76-0713516 | TX | |
| North Florida Health Services, Inc | 59-3519060 | FL | |
| Pinnacle Sr. Care of Kalamazoo, LLC | 47-1742728 | MI | |
| Hospice DME Company, LLC | 46-1734288 | MI | |
| Rapid Respiratory Services, LLC | 20-4364776 | DE | |
| USMM Accountable Care Network, LLC | 46-5730959 | DE | |
| USMM Accountable Care Partners, LLC | 46-5735993 | DE | |
| USMM Accountable Care Solutions, LLC | 46-5745748 | DE | |
| USMM ACO, LLC | 45-4165480 | MI | |
| USMM ACO Florida, LLC | 45-4157180 | MI | |
| USMM ACO North Texas, LLC | 45-4154905 | MI | |
| Health Net, Inc. | 47-5208076 | DE | |
| Health Net of California, Inc. | 95-4402957 | CA | |
| Health Net Life Insurance Company | 73-0654885 | CA | 66141 |
| Health Net Life Reinsurance Company | 98-0409907 | CJ | |
| Health Net of California Real Estate Holdings, Inc. | 54-2174069 | CA | |
| Managed Health Network, LLC | 95-4117722 | DE | |
| Managed Health Network | 95-3817988 | CA | |
| MHN Services, LLC | 95-4146179 | CA | |
| MHN Services IPA, Inc. | 13-4027559 | NY | |
| Health Net Federal Services, LLC | 68-0214809 | DE | |
| MHN Government Services LLC | 42-1680916 | DE | |
| MHN Global Services, Inc. | 51-0589404 | DE | |
| MHN Government Services-Belgium, Inc. | 80-0852000 | DE | |
| MHN Government Services-Djibouti, Inc. | 90-0889816 | DE | |
| MHN Government Services-Germany, Inc. | 80-0852008 | DE | |
| MHN Government Services-Guam, Inc. | 90-0889803 | DE | |
| MHN Government Services-International, Inc. | 90-0889825 | DE | |
| MHN Government Services-Italy, Inc. | 80-0852019 | DE | |
| MHN Government Services-Japan, Inc. | 46-1038058 | DE | |
| MHN Government Services-Puerto Rico, Inc. | 90-0889815 | DE | |
| MHN Government Services-Turkey, Inc. | 90-0889824 | DE | |
| MHN Government Services-United Kingdom, Inc. | 90-0889833 | DE | |
| Network Providers, LLC (10%) | 88-0357895 | DE | |
| Health Net Preferred Providers, LLC | 61-1388903 | DE | |
| Health Net Veterans, LLC | 35-2490375 | DE | |
| Network Providers, LLC (90%) | 88-0357895 | DE | |
| Health Net of the Northeast, LLC (25%) | 06-1116976 | DE | |
| North Region Providers, LLC | n/a | DE | |

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

| | | | |
|--|------------|-----|-------|
| Health Net of the Northeast, LLC (75%) | 06-1116976 | DE | |
| QualMed, Inc. | 84-1175468 | DE | |
| QualMed Plans for Health of Colorado, Inc. | 84-0975985 | CO | |
| Health Net Health Plan of Oregon, Inc. | 93-1004034 | OR | 95800 |
| HSI Advantage Health Holdings, Inc. | 23-2867299 | DE | |
| QualMed Plans for Health of Western Pennsylvania, Inc. | 23-2867300 | PA | |
| Pennsylvania Health Care Plan, Inc. | 25-1516632 | PA | |
| Health Net Services Inc. | 94-3037822 | DE | |
| Health Net Community Solutions, Inc. | 54-2174068 | CA | |
| Health Net of Arizona, Inc. | 36-3097810 | AZ | 95206 |
| Health Net One Payment Services, Inc. | 54-2153100 | DE | |
| Health Net of Pennsylvania, LLC | n/a | PA | |
| QualMed Plans for Health of Pennsylvania, Inc. | 23-2456130 | PA | |
| FH Surgery Limited, Inc. | 68-0390434 | CA | |
| Foundation Health Facilities, Inc. | 68-0390438 | CA | |
| FH Assurance Company | 98-0150604 | CJ | |
| Health Net Pharmaceutical Services | 68-0295375 | CA | |
| Health Net of Arizona Administrative Services, Inc. | 86-0660443 | AZ | |
| Health Net Community Solutions of Arizona, Inc. | 81-1348826 | AZ | 15895 |
| National Pharmacy Services Inc. | 84-1301249 | DE | |
| Integrated Pharmacy Systems, Inc. (90%) | 23-2789453 | PA | |
| FH Surgery Centers Inc. | 68-0390435 | CA | |
| Greater Sacramento Surgery Center LP (66%) | 68-0343818 | CA | |
| Health Net Access, Inc. | 46-2616037 | AZ | |
| MHS Consulting, International, Inc | 20-8630006 | DE | |
| PRIMEROSALUD, S.L. | Foreign | ESP | |
| Centene UK Limited | Foreign | UK | |
| The Practice (Group) Limited (75%) | Foreign | UK | |
| Centene Health Plan Holdings, Inc. | Pending | DE | |

15.5

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|---------------------|-------------------|------------|--------------|------------|--|--|----------------------|----------------------------------|--|--|--|--|----------------------------------|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Required? (Y/N) | * |
| 01295 | Centene Corporation | 00000 | 42-1406317 | | 0001071739 | New York Stock Exchange | Centene Corporation | DE | UDP | Shareholders/Board of Directors | Shareholders/Board of Directors | 100.0 | Shareholders/Board of Directors | N | 0 |
| 01295 | Centene Corporation | 71013 | 39-0993433 | | | | Bankers Reserve Life Insurance Company of Wisconsin | WI | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 46-2860967 | | | | Health Plan Real Estate Holding, Inc. | MO | NIA | Insurance Company of Wisconsin | Ownership | 17.0 | Centene Corporation | Y | 0 |
| 01295 | Centene Corporation | 12315 | 20-3174593 | | | | Peach State Health Plan, Inc. | GA | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 46-2860967 | | | | Health Plan Real Estate Holding, Inc. | MO | NIA | Peach State Health Plan, Inc. | Ownership | 21.0 | Centene Corporation | Y | 0 |
| 01295 | Centene Corporation | 15713 | 46-4829006 | | | | Iowa Total Care, Inc. | IA | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 11834 | 32-0045282 | | | | Buckeye Community Health Plan, Inc. | OH | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 46-2860967 | | | | Health Plan Real Estate Holding, Inc. | MO | NIA | Buckeye Community Health Plan, Inc. | Ownership | 13.0 | Centene Corporation | Y | 0 |
| 01295 | Centene Corporation | 12959 | 20-5693998 | | | | Absolute Total Care, Inc. | SC | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 46-2860967 | | | | Health Plan Real Estate Holding, Inc. | MO | NIA | Absolute Total Care, Inc. | Ownership | 1.0 | Centene Corporation | Y | 0 |
| 01295 | Centene Corporation | 00000 | 59-3807546 | | | | Physicians Choice, LLC | SC | NIA | Absolute Total Care, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 65-1206841 | | | | PhyTrust of South Carolina LLC | FL | NIA | Absolute Total Care, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 95831 | 39-1821211 | | | | Coordinated Care Corporation d/b/a Managed Health Services | IN | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 46-2860967 | | | | Health Plan Real Estate Holding, Inc. | MO | NIA | Coordinated Care Corporation d/b/a Managed Health Services | Ownership | 15.0 | Centene Corporation | Y | 0 |
| 01295 | Centene Corporation | 00000 | 46-5523218 | | | | Healthy Washington Holdings, Inc. | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 15352 | 46-2578279 | | | | Coordinated Care of Washington, Inc. | WA | IA | Healthy Washington Holdings, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 96822 | 39-1678579 | | | | Managed Health Services Insurance Corp. | WI | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 46-2860967 | | | | Health Plan Real Estate Holding, Inc. | MO | NIA | Managed Health Services Insurance Corp. | Ownership | 2.0 | Centene Corporation | Y | 0 |
| 01295 | Centene Corporation | 60078 | 86-0819817 | | | | Hallmark Life Insurance Co. | AZ | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 95647 | 74-2770542 | | | | Superior HealthPlan, Inc. | TX | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 46-2860967 | | | | Health Plan Real Estate Holding, Inc. | MO | NIA | Superior HealthPlan, Inc. | Ownership | 21.0 | Centene Corporation | Y | 0 |
| 01295 | Centene Corporation | 00000 | 27-0916294 | | | | Healthy Louisiana Holdings LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 13970 | 27-1287287 | | | | Louisiana Healthcare Connections, Inc. | LA | IA | Healthy Louisiana Holdings LLC | Ownership | 100.0 | Centene Corporation | N | 0 |

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|---------------------|-------------------|------------|--------------|-----|--|---|----------------------|----------------------------------|--|--|--|--|----------------------------------|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Required? (Y/N) | * |
| 01295 | Centene Corporation | 13923 | 20-8570212 | | | | Magnolia Health Plan Inc | MS | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 14053 | 27-2186150 | | | | IlliniCare Health Plan, Inc | IL | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 46-2860967 | | | | Health Plan Real Estate Holding, Inc | MO | NIA | IlliniCare Health Plan, Inc | Ownership | 5.0 | Centene Corporation | Y | 0 |
| 01295 | Centene Corporation | 00000 | 26-0557093 | | | | Sunshine Health Holding LLC | FL | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 13148 | 20-8937577 | | | | Sunshine State Health Plan, Inc | FL | IA | Sunshine Health Holding LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 56-2384404 | | | | Access Health Solutions LLC | FL | NIA | Sunshine Health Holding LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 14100 | 45-1294925 | | | | Kentucky Spirit Health Plan, Inc | KY | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 45-5070230 | | | | Healthy Missouri Holding, Inc | MO | NIA | Centene Corporation | Ownership | 95.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 14218 | 45-2798041 | | | | Home State Health Plan, Inc | MO | IA | Healthy Missouri Holding, Inc | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 46-2860967 | | | | Health Plan Real Estate Holding, Inc | MO | NIA | Home State Health Plan, Inc | Ownership | 5.0 | Centene Corporation | Y | 0 |
| 01295 | Centene Corporation | 14345 | 45-3276702 | | | | Sunflower State Health Plan, Inc | KS | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 14226 | 45-4792498 | | | | Granite State Health Plan, Inc | NH | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 15447 | 46-4195563 | | | | Bridgeway Advantage Solutions, Inc | AZ | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 46-0907261 | | | | California Health and Wellness Plan | CA | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 10769 | 30-0312489 | | | | Fidelis SecureCare of Michigan, Inc | MI | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 16143 | 20-4761189 | | | | SilverSummit Healthplan, Inc | NV | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 20-0483299 | | | | Agate Resources, Inc | OR | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 93-1198219 | | | | Lane Individual Practice Association, Inc | OR | NIA | Agate Resources, Inc | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 12559 | 42-1694349 | | | | Trillium Community Health Plan, Inc | OR | IA | Lane Individual Practice Association, Inc | Ownership | 60.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 12559 | 42-1694349 | | | | Trillium Community Health Plan, Inc | OR | IA | Agate Resources, Inc | Ownership | 40.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 26-4475075 | | | | Agate Properties, LLC | OR | NIA | Agate Resources, Inc | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 93-1198376 | | | | Independent Professional Services, LLC | OR | NIA | Agate Resources, Inc | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 15902 | 47-5123293 | | | | Nebraska Total Care, Inc | NE | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 16041 | 47-5340613 | | | | Pennsylvania Health & Wellness, Inc | PA | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|---------------------|-------------------|------------|--------------|-----|--|---|----------------------|----------------------------------|--|--|--|--|----------------------------------|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Required? (Y/N) | * |
| 01295 | Centene Corporation | 15912 | 47-5664832 | | | | Superior HealthPlan Community Solutions, Inc. | TX | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 15927 | 47-5667095 | | | | Sunshine Health Community Solutions, Inc. | FL | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 47-5664342 | | | | Buckeye Health Plan Community Solutions, Inc. | OH | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 16130 | 81-1282251 | | | | Arkansas Health & Wellness Health Plan, Inc. | AR | IA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 81-2788043 | | | | Healthy Oklahoma Holdings, Inc. | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 81-3121527 | | | | Oklahoma Complete Health Inc. | OK | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 20-4980875 | | | | Bridgeway Health Solutions, LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 20-4980818 | | | | Bridgeway Health Solutions of Arizona Inc. | AZ | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 36-2979209 | | | | Celtic Group, Inc. | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 80799 | 06-0641618 | | | | Celtic Insurance Company | IL | IA | Celtic Group, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 15762 | 35-2525384 | | | | Ambetter of Magnolia Inc. | MS | IA | Celtic Insurance Company | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 15729 | 36-4802632 | | | | Ambetter of Peach State Inc. | GA | IA | Celtic Insurance Company | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 27-2221367 | | | | Novasys Health, Inc. | DE | NIA | Celtic Group, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 26-4278205 | | | | CeltiCare Health Plan Holdings LLC | DE | NIA | Celtic Group, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 13632 | 26-4818440 | | | | CeltiCare Health Plan of Massachusetts, Inc. | MA | IA | CeltiCare Health Plan Holdings LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 39-1864073 | | | | Centene Management Company LLC | WI | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 20-0057283 | | | | CMC Real Estate Co. LLC | DE | NIA | Centene Management Company LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 26-4094682 | | | | Centene Center LLC | DE | NIA | CMC Real Estate Co. LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 47-5156015 | | | | Centene Center II, LLC | DE | NIA | CMC Real Estate Co. LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 46-4234827 | | | | CMC Hanley, LLC | MO | NIA | CMC Real Estate Co. LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 47-2914561 | | | | Forhan, LLC | MO | NIA | CMC Real Estate Co. LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 37-1766939 | | | | Hanley-Forsyth, LLC | MO | NIA | CMC Real Estate Co. LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 45-5431787 | | | | GPT Acquisition LLC | DE | NIA | CMC Real Estate Co. LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 45-4372065 | | | | Clayton Property Investment LLC | DE | NIA | GPT Acquisition LLC | Ownership | 100.0 | Centene Corporation | N | 0 |

16.2

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|---------------------|-------------------|------------|--------------|-----|--|---|----------------------|----------------------------------|--|--|--|--|----------------------------------|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Required? (Y/N) | * |
| 01295 | Centene Corporation | 00000 | 46-2794037 | | | | LSM Holdco, Inc | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 46-2798132 | | | | Lifeshare Management Group, LLC | NH | NIA | LSM Holdco, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 20-2074217 | | | | CCTX Holdings, LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 74-2810404 | | | | Centene Company of Texas, LP | TX | NIA | CCTX Holdings, LLC | Ownership | 1.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 20-2074277 | | | | Centene Holdings, LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 74-2810404 | | | | Centene Company of Texas, LP | TX | NIA | Centene Holdings, LLC | Ownership | 99.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 43-1795436 | | | | MHS Travel & Charter, Inc | WI | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 46-4855483 | | | | Health Care Enterprises, LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 22-3889471 | | | | Involve Holdings, Inc | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 68-0461584 | | | | Cenpatico Behavioral Health, LLC | CA | NIA | Involve Holdings, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 86-0782736 | | | | CBHSP Arizona, Inc | AZ | NIA | Cenpatico Behavioral Health, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 47-2595704 | | | | Cenpatico of California, Inc | CA | NIA | Cenpatico Behavioral Health, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 74-2892993 | | | | Integrated Mental Health Mgmt, LLC | TX | NIA | Cenpatico Behavioral Health, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 74-2785494 | | | | Integrated Mental Health Services | TX | NIA | Integrated Mental Health Mgmt, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 20-1624120 | | | | Cenpatico Behavioral Health of Arizona, LLC | AZ | NIA | Cenpatico Behavioral Health, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 14704 | 80-0879942 | | | | Cenpatico of Arizona Inc | AZ | IA | Cenpatico Behavioral Health of Arizona, LLC | Ownership | 80.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 37-1788565 | | | | Involve, Inc | DE | NIA | Involve Holdings, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 47-4545413 | | | | AHA Administrative Services, LLC | AL | NIA | Involve, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 47-3454898 | | | | Involve - New York, Inc | NY | NIA | Involve, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 81-5366207 | | | | Massachusetts Total Care Holding Company, LLC | DE | NIA | Involve, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 81-5220756 | | | | Massachusetts Total Care, Inc | MA | NIA | Massachusetts Total Care Holding Company, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 06-1476380 | | | | Involve PeopleCare, Inc | DE | NIA | Involve Holdings, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 47-2516714 | | | | LiveHealthier, Inc | DE | NIA | Involve PeopleCare, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |

16.3

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|---------------------|-------------------|------------|--------------|-----|--|---|----------------------|----------------------------------|--|--|--|--|----------------------------------|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Required? (Y/N) | * |
| 01295 | Centene Corporation | 00000 | 20-4730341 | | | | Envolve Benefits Options, Inc. | DE | NIA | Envolve Holdings, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 36-4520004 | | | | Envolve Captive Insurance Company, Inc. | SC | NIA | Envolve Benefit Options, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 95302 | 75-2592153 | | | | Envolve Vision of Texas, Inc. | TX | IA | Envolve Benefit Options, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 20-4773088 | | | | Envolve Vision, Inc. | DE | NIA | Envolve Benefit Options, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 65-0094759 | | | | Envolve Vision of Florida, Inc. | FL | NIA | Envolve Benefit Options, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 20-4861241 | | | | Envolve Total Vision, Inc. | DE | NIA | Envolve Benefit Options, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 06-1635519 | | | | Envolve Vision of New York, Inc. | NY | NIA | Envolve Benefit Options, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 46-2783884 | | | | Envolve Dental, Inc. | DE | NIA | Envolve Benefit Options, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 81-2969330 | | | | Envolve Dental of Florida, Inc. | FL | NIA | Envolve Dental, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 81-2796896 | | | | Envolve Dental of Texas, Inc. | TX | NIA | Envolve Dental, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 77-0578529 | | | | Envolve Pharmacy Solutions, Inc. | DE | NIA | Envolve Holdings, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 76-0511700 | | | | LBB Industries, Inc. | TX | NIA | Envolve Pharmacy Solutions, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 75-2612875 | | | | RX Direct, Inc. | TX | NIA | Envolve Pharmacy Solutions, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 46-2307356 | | | | US Script IPA, LLC. | NY | NIA | Envolve Pharmacy Solutions, Inc. | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 90-0636938 | | | | Casenet LLC. | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | | | | | Casenet S.R.O. | CZE | NIA | Casenet LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 61-1450727 | | | | Centurion Group, Inc. | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 90-0766502 | | | | Centurion LLC. | DE | NIA | Centurion Group, Inc. | Ownership | 51.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 81-4228054 | | | | Centurion of Arizona, LLC. | AZ | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 47-1686283 | | | | Centurion of Vermont, LLC. | VT | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 47-2967381 | | | | Centurion of Mississippi, LLC. | MS | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 30-0752651 | | | | Centurion of Tennessee, LLC. | TN | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 61-1696004 | | | | Massachusetts Partnership for Correctional Healthcare, LLC. | MA | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 46-2717814 | | | | Centurion of Minnesota, LLC. | MN | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | 0 |

16.4

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|---------------------|-------------------|------------|--------------|-----|--|--|----------------------|----------------------------------|--|--|--|--|----------------------------------|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Required? (Y/N) | * |
| 01295 | Centene Corporation | 00000 | 81-1161492 | | | | Centurion Correctional Healthcare of New Mexico, LLC | NM | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 81-0687470 | | | | Centurion of Florida, LLC | FL | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 81-3007264 | | | | Centurion of Illinois, LLC | IL | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 81-4938030 | | | | Centurion of Maryland, LLC | MD | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 81-5429405 | | | | Centurion of Philadelphia, LLC | PA | NIA | Centurion LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 27-3617766 | | | | Specialty Therapeutic Care Holdings, LLC | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 73-1698808 | | | | Specialty Therapeutic Care, LP | TX | NIA | Specialty Therapeutic Care Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 73-1698807 | | | | Specialty Therapeutic Care, GP, LLC | TX | NIA | Specialty Therapeutic Care Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 73-1698808 | | | | Specialty Therapeutic Care, LP | TX | NIA | Specialty Therapeutic Care, GP, LLC | Ownership | .0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 26-2624521 | | | | Specialty Therapeutic Care West, LLC | TX | NIA | Specialty Therapeutic Care, LP | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 80-0856383 | | | | AcariaHealth Solutions, Inc | DE | NIA | Specialty Therapeutic Care Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 45-2780334 | | | | AcariaHealth, Inc | DE | NIA | Specialty Therapeutic Care Holdings, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 27-1599047 | | | | AcariaHealth Pharmacy #14, Inc | CA | NIA | AcariaHealth, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 20-8192615 | | | | AcariaHealth Pharmacy #11, Inc | TX | NIA | AcariaHealth, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 27-2765424 | | | | AcariaHealth Pharmacy #12, Inc | NY | NIA | AcariaHealth, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 26-0226900 | | | | AcariaHealth Pharmacy #13, Inc | CA | NIA | AcariaHealth, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 13-4262384 | | | | AcariaHealth Pharmacy, Inc | CA | NIA | AcariaHealth, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 27-3707698 | | | | HomeScripts.com, LLC | MI | NIA | AcariaHealth, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 20-8235695 | | | | New York Rx, Inc | NY | NIA | AcariaHealth, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 27-0275614 | | | | U.S. Medical Management Holdings, Inc | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 38-3153946 | | | | U.S. Medical Management, LLC | DE | NIA | U.S. Medical Management Holdings, Inc | Ownership | 20.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 38-3153946 | | | | U.S. Medical Management, LLC | DE | NIA | Centene Corporation | Ownership | 48.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 31-1733889 | | | | RMED, LLC | FL | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 47-2138680 | | | | IAH of Florida, LLC | FL | NIA | RMED, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |

16.5

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|---------------------|-------------------|------------|--------------|-----|--|---|----------------------|----------------------------------|--|--|--|--|----------------------------------|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Required? (Y/N) | * |
| 01295 | Centene Corporation | 00000 | 51-0581762 | | | | Heritage Home Hospice, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 20-2827613 | | | | Grace Hospice of Austin, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 20-1530070 | | | | ComfortBrook Hospice, LLC | OH | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 20-4996551 | | | | Comfort Hospice of Texas, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 20-2827526 | | | | Grace Hospice of San Antonio, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 45-0679248 | | | | Grace Hospice of Grand Rapids, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 45-0634905 | | | | Grace Hospice of Indiana, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 45-5080637 | | | | Grace Hospice of Virginia, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 45-5080567 | | | | Comfort Hospice of Missouri, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 45-5080675 | | | | Grace Hospice of Colorado, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 46-1708834 | | | | Grace Hospice of Wisconsin, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 81-5129923 | | | | Grace Hospice of Illinois, LLC | IL | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 26-4435532 | | | | Seniorcorps Peninsula, LLC | VA | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 33-1179031 | | | | R&C Healthcare, LLC | TX | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 20-0927034 | | | | A N J, LLC | TX | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 46-0861469 | | | | Pinnacle Senior Care of Missouri, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 03-0556422 | | | | Country Style Health Care, LLC | TX | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 14-1878333 | | | | Phoenix Home Health Care, LLC | DE | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 75-2635025 | | | | Traditional Home Health Services, LLC | TX | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 38-2751108 | | | | Family Nurse Care, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 20-5108540 | | | | Family Nurse Care II, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 20-3920947 | | | | Family Nurse Care of Ohio, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 46-4229858 | | | | Pinnacle Senior Care of Wisconsin, LLC | WI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 81-1565426 | | | | Pinnacle Senior Care of Indiana, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |

16.6

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|---------------------|-------------------|------------|--------------|-----|--|--|----------------------|----------------------------------|--|--|--|--|----------------------------------|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Required? (Y/N) | * |
| 01295 | Centene Corporation | 00000 | 76-0713516 | | | | Pinnacle Home Care, LLC | TX | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 59-3519060 | | | | North Florida Health Services, Inc | FL | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 47-1742728 | | | | Pinnacle Sr. Care of Kalamazoo, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 46-1734288 | | | | Hospice DME Company, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 20-4364776 | | | | Rapid Respiratory Services, LLC | DE | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 46-5730959 | | | | USMM Accountable Care Network, LLC | DE | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 46-5735993 | | | | USMM Accountable Care Partners, LLC | DE | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 46-5745748 | | | | USMM Accountable Care Solutions, LLC | DE | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 45-4165480 | | | | USMM ACO, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 45-4157180 | | | | USMM ACO Florida, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 45-4154905 | | | | USMM ACO North Texas, LLC | MI | NIA | U.S. Medical Management, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 47-5208076 | | | | Health Net, Inc | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 95-4402957 | | | | Health Net of California, Inc | CA | NIA | Health Net, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 66141 | 73-0654885 | | | | Health Net Life Insurance Company | CA | IA | Health Net of California, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 98-0409907 | | | | Health Net Life Reinsurance Company | CYM | NIA | Health Net of California, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 54-2174069 | | | | Health Net of California Real Estate Holdings, Inc | CA | NIA | Health Net of California, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 95-4117722 | | | | Managed Health Network, LLC | DE | NIA | Health Net, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 95-3817988 | | | | Managed Health Network | CA | NIA | Managed Health Network, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 95-4146179 | | | | MHN Services, LLC | CA | NIA | Managed Health Network, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 13-4027559 | | | | MHN Services IPA, Inc | NY | NIA | MHN Services, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 68-0214809 | | | | Health Net Federal Services, LLC | DE | NIA | Health Net, Inc | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 42-1680916 | | | | MHN Government Services LLC | DE | NIA | Health Net Federal Services, LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 51-0589404 | | | | MHN Global Services, Inc | DE | NIA | MHN Government Services LLC | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 80-0852000 | | | | MHN Government Services-Belgium, Inc | DE | NIA | MHN Government Services LLC | Ownership | 100.0 | Centene Corporation | N | .0 |

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|---------------------|-------------------|------------|--------------|-----|--|---|----------------------|----------------------------------|--|--|--|--|----------------------------------|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Required? (Y/N) | * |
| 01295 | Centene Corporation | 00000 | 90-0889816 | | | | MHN Government Services-Djibouti, Inc | DE | NIA | MHN Government Services LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 80-0852008 | | | | MHN Government Services-Germany, Inc | DE | NIA | MHN Government Services LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 90-0889803 | | | | MHN Government Services-Guam, Inc | DE | NIA | MHN Government Services LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 90-0889825 | | | | MHN Government Services-International, Inc | DE | NIA | MHN Government Services LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 80-0852019 | | | | MHN Government Services-Italy, Inc | DE | NIA | MHN Government Services LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 46-1038058 | | | | MHN Government Services-Japan, Inc | DE | NIA | MHN Government Services LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 90-0889815 | | | | MHN Government Services-Puerto Rico, Inc | DE | NIA | MHN Government Services LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 90-0889824 | | | | MHN Government Services-Turkey, Inc | DE | NIA | MHN Government Services LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 90-0889833 | | | | MHN Government Services-United Kingdom, Inc | DE | NIA | MHN Government Services LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 88-0357895 | | | | Network Providers, LLC | DE | NIA | MHN Government Services LLC | Ownership | 10.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 61-1388903 | | | | Health Net Preferred Providers, LLC | DE | NIA | Health Net Federal Services, LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 35-2490375 | | | | Health Net Veterans, LLC | DE | NIA | Health Net Federal Services, LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 88-0357895 | | | | Network Providers, LLC | DE | NIA | Health Net Federal Services, LLC | Ownership | 90.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 06-1116976 | | | | Health Net of the Northeast, LLC | DE | NIA | Network Providers, LLC | Ownership | 25.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | | | | | North Region Providers, LLC | DE | NIA | Health Net Federal Services, LLC | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 06-1116976 | | | | Health Net of the Northeast, LLC | DE | NIA | Health Net, Inc | Ownership | 75.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 84-1175468 | | | | QualMed, Inc | DE | NIA | Health Net, Inc | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 84-0975985 | | | | QualMed Plans for Health of Colorado, Inc | CO | NIA | QualMed, Inc | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 95800 | 93-1004034 | | | | Health Net Health Plan of Oregon, Inc | OR | IA | QualMed, Inc | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 23-2867299 | | | | HSI Advantage Health Holdings, Inc | DE | NIA | Health Net, Inc | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 23-2867300 | | | | QualMed Plans for Health of Western Pennsylvania, Inc | PA | NIA | HSI Advantage Health Holdings, Inc | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 25-1516632 | | | | Pennsylvania Health Care Plan, Inc | PA | NIA | HSI Advantage Health Holdings, Inc | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 94-3037822 | | | | Health Net Services Inc | DE | NIA | Health Net, Inc | Ownership | 100.0 | Centene Corporation | N | 0 |
| 01295 | Centene Corporation | 00000 | 54-2174068 | | | | Health Net Community Solutions, Inc | CA | NIA | Health Net, Inc | Ownership | 100.0 | Centene Corporation | N | 0 |

16.8

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|---------------------|-------------------|------------|--------------|-----|--|---|----------------------|----------------------------------|--|--|--|--|----------------------------------|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Required? (Y/N) | * |
| 01295 | Centene Corporation | 95206 | 36-3097810 | | | | Health Net of Arizona, Inc. | AZ | IA | Health Net, Inc. | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 54-2153100 | | | | Health Net One Payment Services, Inc. | DE | NIA | Health Net, Inc. | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | | | | | Health Net of Pennsylvania, LLC. | PA | NIA | Health Net, Inc. | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 23-2456130 | | | | QualMed Plans for Health of Pennsylvania, Inc. | PA | NIA | Health Net, Inc. | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 68-0390434 | | | | FH Surgery Limited, Inc. | CA | NIA | Health Net, Inc. | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 68-0390438 | | | | Foundation Health Facilities, Inc. | CA | NIA | Health Net, Inc. | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 98-0150604 | | | | FH Assurance Company. | CYM | NIA | Health Net, Inc. | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 68-0295375 | | | | Health Net Pharmaceutical Services | CA | NIA | Health Net, Inc. | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 86-0660443 | | | | Health Net of Arizona Administrative Services, Inc. | AZ | NIA | Health Net, Inc. | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 15895 | 81-1348826 | | | | Health Net Community Solutions of Arizona, Inc. | AZ | IA | Health Net, Inc. | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 84-1301249 | | | | National Pharmacy Services Inc. | DE | NIA | Health Net, Inc. | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 23-2789453 | | | | Integrated Pharmacy Systems, Inc. | PA | NIA | National Pharmacy Services Inc. | Ownership | 90.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 68-0390435 | | | | FH Surgery Centers Inc. | CA | NIA | Health Net, Inc. | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 68-0343818 | | | | Greater Sacramento Surgery Center LP | CA | NIA | FH Surgery Centers Inc. | Ownership | 66.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 46-2616037 | | | | Health Net Access, Inc. | AZ | NIA | Health Net, Inc. | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | 20-8630006 | | | | MHS Consulting, International, Inc. | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | | | | | PRIMEROSALUD, S.L. | ESP | NIA | MHS Consulting, International, Inc. | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | | | | | Centene UK Limited. | GBR | NIA | MHS Consulting, International, Inc. | Ownership | 100.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | | | | | The Practice (Group) Limited. | GBR | NIA | Centene UK Limited. | Ownership | 75.0 | Centene Corporation | N | .0 |
| 01295 | Centene Corporation | 00000 | | | | | Centene Health Plan Holdings, Inc. | DE | NIA | Centene Corporation | Ownership | 100.0 | Centene Corporation | N | .0 |

16.9

| Asterisk | Explanation |
|----------|-------------|
| | |

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

RESPONSE

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

.....NO.....

Explanation:

1.

Bar Code:

1. 
8 0 7 9 9 2 0 1 7 3 6 5 0 0 0 0 1

OVERFLOW PAGE FOR WRITE-INS

MQ003 Additional Aggregate Lines for Page 03 Line 23.

*LIAB

| | 1 Covered | 2 Uncovered | 3 Total | 4 Total |
|---|--------------|----------------|------------|------------|
| 2304. State income tax payable..... | 1,390,470 | | 1,390,470 | 150,606 |
| 2305 | | | 0 | 0 |
| 2397. Summary of remaining write-ins for Line 23 from Page 03 | 1,390,470 | 0 | 1,390,470 | 150,606 |

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

SCHEDULE A – VERIFICATION

Real Estate

| | 1 Year To Date | 2 Prior Year Ended December 31 |
|--|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value, December 31 of prior year | 0 | 0 |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | 0 |
| 2.2 Additional investment made after acquisition | | 0 |
| 3. Current year change in encumbrances | | 0 |
| 4. Total gain (loss) on disposals | | 0 |
| 5. Deduct amounts received on disposals | | 0 |
| 6. Total foreign exchange change in book/adjusted carrying value | | 0 |
| 7. Deduct current year's other-than-temporary impairment recognized | | 0 |
| 8. Deduct current year's depreciation | | 0 |
| 9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8) | 0 | 0 |
| 10. Deduct total nonadmitted amounts | 0 | 0 |
| 11. Statement value at end of current period (Line 9 minus Line 10) | 0 | 0 |

NONE

SCHEDULE B – VERIFICATION

Mortgage Loans

| | 1 Year To Date | 2 Prior Year Ended December 31 |
|---|-------------------|--------------------------------------|
| 1. Book value/recorded investment excluding accrued interest, December 31 of prior year | 0 | 0 |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | 0 |
| 2.2 Additional investment made after acquisition | | 0 |
| 3. Capitalized deferred interest and other | | 0 |
| 4. Accrual of discount | | 0 |
| 5. Unrealized valuation increase (decrease) | | 0 |
| 6. Total gain (loss) on disposals | | 0 |
| 7. Deduct amounts received on disposals | | 0 |
| 8. Deduct amortization of premium and mortgage interest points and commitment fees | | 0 |
| 9. Total foreign exchange change in book value/recorded investment excluding accrued interest | | 0 |
| 10. Deduct current year's other-than-temporary impairment recognized | | 0 |
| 11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) | 0 | 0 |
| 12. Total valuation allowance | | 0 |
| 13. Subtotal (Line 11 plus Line 12) | 0 | 0 |
| 14. Deduct total nonadmitted amounts | 0 | 0 |
| 15. Statement value at end of current period (Line 13 minus Line 14) | 0 | 0 |

NONE

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets

| | 1 Year To Date | 2 Prior Year Ended December 31 |
|--|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value, December 31 of prior year | 1,269,429 | 1,332,726 |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | 0 |
| 2.2 Additional investment made after acquisition | 912,860 | 60,000 |
| 3. Capitalized deferred interest and other | | 0 |
| 4. Accrual of discount | | 0 |
| 5. Unrealized valuation increase (decrease) | 38,808 | 56,428 |
| 6. Total gain (loss) on disposals | | 0 |
| 7. Deduct amounts received on disposals | | 179,725 |
| 8. Deduct amortization of premium and depreciation | | 0 |
| 9. Total foreign exchange change in book/adjusted carrying value | | 0 |
| 10. Deduct current year's other-than-temporary impairment recognized | | 0 |
| 11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7+8+9-10) | 2,221,097 | 1,269,429 |
| 12. Deduct total nonadmitted amounts | 0 | 0 |
| 13. Statement value at end of current period (Line 11 minus Line 12) | 2,221,097 | 1,269,429 |

SCHEDULE D – VERIFICATION

Bonds and Stocks

| | 1 Year To Date | 2 Prior Year Ended December 31 |
|---|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year | 226,124,967 | 70,748,622 |
| 2. Cost of bonds and stocks acquired | 80,417,145 | 158,203,036 |
| 3. Accrual of discount | 15,408 | 43,821 |
| 4. Unrealized valuation increase (decrease) | 13,072,042 | 12,480,712 |
| 5. Total gain (loss) on disposals | (71,775) | 75,570 |
| 6. Deduct consideration for bonds and stocks disposed of | 13,744,598 | 14,568,641 |
| 7. Deduct amortization of premium | 446,229 | 858,153 |
| 8. Total foreign exchange change in book/adjusted carrying value | | 0 |
| 9. Deduct current year's other-than-temporary impairment recognized | | 0 |
| 10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) | 305,366,960 | 226,124,967 |
| 11. Deduct total nonadmitted amounts | 0 | 0 |
| 12. Statement value at end of current period (Line 10 minus Line 11) | 305,366,960 | 226,124,967 |

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

SCHEDULE D - PART 1B

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

| NAIC Designation | 1 Book/Adjusted Carrying Value Beginning of Current Quarter | 2 Acquisitions During Current Quarter | 3 Dispositions During Current Quarter | 4 Non-Trading Activity During Current Quarter | 5 Book/Adjusted Carrying Value End of First Quarter | 6 Book/Adjusted Carrying Value End of Second Quarter | 7 Book/Adjusted Carrying Value End of Third Quarter | 8 Book/Adjusted Carrying Value December 31 Prior Year |
|-----------------------------------|---|--|--|---|---|--|---|---|
| BONDS | | | | | | | | |
| 1. NAIC 1 (a)..... | 155,758,206 | 61,980,044 | 11,268,300 | (638,394) | 205,831,556 | 0 | 0 | 155,758,206 |
| 2. NAIC 2 (a)..... | 42,921,147 | 18,437,101 | 2,283,072 | 207,458 | 59,282,634 | 0 | 0 | 42,921,147 |
| 3. NAIC 3 (a)..... | 312,271 | | | 1,860 | 314,131 | 0 | 0 | 312,271 |
| 4. NAIC 4 (a)..... | 795,000 | | 265,000 | | 530,000 | 0 | 0 | 795,000 |
| 5. NAIC 5 (a)..... | 0 | | | | 0 | 0 | 0 | 0 |
| 6. NAIC 6 (a)..... | 0 | | | | 0 | 0 | 0 | 0 |
| 7. Total Bonds | 199,786,624 | 80,417,145 | 13,816,372 | (429,076) | 265,958,321 | 0 | 0 | 199,786,624 |
| PREFERRED STOCK | | | | | | | | |
| 8. NAIC 1..... | 0 | | | | 0 | 0 | 0 | 0 |
| 9. NAIC 2..... | 0 | | | | 0 | 0 | 0 | 0 |
| 10. NAIC 3..... | 0 | | | | 0 | 0 | 0 | 0 |
| 11. NAIC 4..... | 0 | | | | 0 | 0 | 0 | 0 |
| 12. NAIC 5..... | 0 | | | | 0 | 0 | 0 | 0 |
| 13. NAIC 6..... | 0 | | | | 0 | 0 | 0 | 0 |
| 14. Total Preferred Stock..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 15. Total Bonds & Preferred Stock | 199,786,624 | 80,417,145 | 13,816,372 | (429,076) | 265,958,321 | 0 | 0 | 199,786,624 |

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$370,864,206 ; NAIC 2 \$;
NAIC 3 \$; NAIC 4 \$; NAIC 5 \$; NAIC 6 \$

S102

SCHEDULE DA - PART 1

Short-Term Investments

| | 1 | 2 | 3 | 4 | 5 |
|---------|---------------------------------|-----------|-------------|------------------------------------|--|
| | Book/Adjusted Carrying Value | Par Value | Actual Cost | Interest Collected Year To Date | Paid for Accrued Interest Year To Date |
| 9199999 | 370,864,206 | XXX | 370,863,144 | 24,563 | 16,091 |

SCHEDULE DA - VERIFICATION

Short-Term Investments

| | 1 | 2 |
|--|--------------|---------------------------------|
| | Year To Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year..... | 67,190,646 | 10,229,576 |
| 2. Cost of short-term investments acquired | 950,374,945 | 1,239,219,118 |
| 3. Accrual of discount | | 0 |
| 4. Unrealized valuation increase (decrease)..... | | 0 |
| 5. Total gain (loss) on disposals | | 3,000 |
| 6. Deduct consideration received on disposals | 646,696,213 | 1,182,252,958 |
| 7. Deduct amortization of premium..... | 5,172 | 8,090 |
| 8. Total foreign exchange change in book/adjusted carrying value..... | | 0 |
| 9. Deduct current year's other-than-temporary impairment recognized..... | | 0 |
| 10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)..... | 370,864,206 | 67,190,646 |
| 11. Deduct total nonadmitted amounts..... | | 0 |
| 12. Statement value at end of current period (Line 10 minus Line 11) | 370,864,206 | 67,190,646 |

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

SCHEDULE E - VERIFICATION

(Cash Equivalents)

| | 1 Year To Date | 2 Prior Year Ended December 31 |
|---|----------------------|--------------------------------------|
| 1. Book/adjusted carrying value, December 31 of prior year..... | 0 | 799,977 |
| 2. Cost of cash equivalents acquired | 105,784,854 | 79,809,591 |
| 3. Accrual of discount | 4,142 | 34 |
| 4. Unrealized valuation increase (decrease) | | 0 |
| 5. Total gain (loss) on disposals..... | | 0 |
| 6. Deduct consideration received on disposals | 78,800,000 | 80,580,000 |
| 7. Deduct amortization of premium | | 29,602 |
| 8. Total foreign exchange change in book/adjusted carrying value | | 0 |
| 9. Deduct current year's other than temporary impairment recognized | | 0 |
| 10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) | 26,988,996 | 0 |
| 11. Deduct total nonadmitted amounts | | 0 |
| 12. Statement value at end of current period (Line 10 minus Line 11) | 26,988,996 | 0 |

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

SCHEDULE BA - PART 2

Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter

| 1 CUSIP Identification | 2 Name or Description | 3 Location | | 5 Name of Vendor or General Partner | 6 NAIC Designation | 7 Date Originally Acquired | 8 Type and Strategy | 9 Actual Cost at Time of Acquisition | 10 Additional Investment Made After Acquisition | 11 Amount of Encumbrances | 12 Commitment for Additional Investment | 13 Percentage of Ownership |
|---|--------------------------------|---------------|-------|---|--------------------------|-------------------------------------|------------------------------|---|---|---------------------------------|--|-------------------------------------|
| | | City | State | | | | | | | | | |
| Joint, Partnership or Limited Liability Company Interests that have the Underlying Characteristics - Other - Unaffiliated | | | | | | | | | | | | |
| 000000-00-0... | HLM Venture Partners III, L.P. | Boston, | MA | Vincent J. Fabiani | | 02/10/2010 | 1 | 0 | 912,862 | 0 | 0 | 1.500 |
| 2199999 - Joint, Partnership or Limited Liability Company Interests that have the Underlying Characteristics - Other - Unaffiliated | | | | | | | | | | | | |
| | | | | | | | | 0 | 912,862 | 0 | 0 | XXX |
| 4499999 – Subtotals - Unaffiliated | | | | | | | | | | | | |
| | | | | | | | | 0 | 912,862 | 0 | 0 | XXX |
| 4599999 – Subtotals - Affiliated | | | | | | | | | | | | |
| | | | | | | | | 0 | 0 | 0 | 0 | XXX |
| 4699999 Totals | | | | | | | | | | | | |
| | | | | | | | | 0 | 912,862 | 0 | 0 | XXX |

E03

SCHEDULE BA - PART 3

Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter

| 1 CUSIP Identification | 2 Name or Description | 3 Location | | 5 Name of Purchaser or Nature of Disposal | 6 Date Originally Acquired | 7 Disposal Date | 8 Book/ Adjusted Carrying Value Less Encumbrances Prior Year | 9-14 Change in Book/Adjusted Carrying Value | | | | | | 15 Book/Adjusted Carrying Value Less Encumbrances on Disposal | 16 Consideration | 17 Foreign Exchange Gain (Loss) on Disposal | 18 Realized Gain (Loss) on Disposal | 19 Total Gain (Loss) on Disposal | 20 Investment Income |
|------------------------------------|-----------------------------|---------------|-------|---|-------------------------------------|-----------------------|--|--|---|--|--|--|--|---|---------------------|---|---|--|----------------------------|
| | | City | State | | | | | 9 Unrealized Valuation Increase (Decrease) | 10 Current Year's (Depreciation) or (Amortization)/ Accretion | 11 Current Year's Other Than Temporary Impairment Recognized | 12 Capitalized Deferred Interest and Other | 13 Total Change in B./A.C.V. (9+10-11+12) | 14 Total Foreign Exchange Change in B./A.C.V. | | | | | | |
| NONE | | | | | | | | | | | | | | | | | | | |
| 4499999 – Subtotals - Unaffiliated | | | | | | | | | | | | | | | | | | | |
| 4599999 – Subtotals - Affiliated | | | | | | | | | | | | | | | | | | | |
| 4699999 Totals | | | | | | | | | | | | | | | | | | | |

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|--|---------|---------------|------------------------------------|---------------------------|-------------|------------|---|--|
| CUSIP Identification | Description | Foreign | Date Acquired | Name of Vendor | Number of Shares of Stock | Actual Cost | Par Value | Paid for Accrued Interest and Dividends | NAIC Designation or Market Indicator (a) |
| Bonds - U.S. Governments | | | | | | | | | |
| 912828-U2-4 | UNITED STATES TREASURY | | 02/07/2017 | CHASE SECURITIES | | 833,103 | 865,000 | 4,158 | 1 |
| 0599999 - Bonds - U.S. Governments | | | | | | | | | |
| | | | | | | 833,103 | 865,000 | 4,158 | XXX |
| Bonds - U.S. States, Territories and Possessions | | | | | | | | | |
| 452151-3W-1 | ILLINOIS ST. | | 03/01/2017 | UBS PAINEWEBBER INC. | | 538,809 | 530,000 | 9,540 | 2FE |
| 1799999 - Bonds - U.S. States, Territories and Possessions | | | | | | | | | |
| | | | | | | 538,809 | 530,000 | 9,540 | XXX |
| Bonds - U.S. Political Subdivisions of States, Territories and Possessions | | | | | | | | | |
| 623040-JH-6 | MOUNT SAN ANTONIO CALIF CMNTY COLLEGE DI | | 03/23/2017 | RBC Dain Rauscher (US) | | 1,784,460 | 2,000,000 | | 1FE |
| 2499999 - Bonds - U.S. Political Subdivisions of States, Territories and Possessions | | | | | | | | | |
| | | | | | | 1,784,460 | 2,000,000 | 0 | XXX |
| Bonds - U.S. Special Revenue | | | | | | | | | |
| 13078H-AW-2 | CALIFORNIA STATEWIDE CMNTYS DEV AUTH POL | | 01/11/2017 | BARCLAYS CAPITAL INC FIXED INC. | | 1,000,000 | 1,000,000 | | 1FE |
| 130911-WD-8 | CALIFORNIA STATEWIDE CMNTYS DEV AUTH REV | | 03/27/2017 | WELLS FARGO SECURITIES LLC | | 4,000,000 | 4,000,000 | 1,899 | 1FE |
| 160853-MR-5 | CHARLOTTE-MECKLENBURG HOSP AUTH N C HEAL | | 03/23/2017 | JP MORGAN SECS INC. - FIXED INCOME | | 4,000,000 | 4,000,000 | 1,234 | 1FE |
| 167736-F3-6 | CHICAGO ILL WTR REV | | 03/06/2017 | CITIGROUP GLOBAL MARKETS/ALGO | | 673,698 | 600,000 | 10,667 | 1FE |
| 45200P-N7-8 | ILLINOIS HEALTH FACs AUTH REV | | 03/27/2017 | WELLS FARGO SECURITIES LLC | | 4,000,000 | 4,000,000 | 1,875 | 1FE |
| 544495-DY-7 | LOS ANGELES CALIF DEPT WTR & PWR REV | | 03/24/2017 | RBC CAPITAL MARKETS | | 5,300,000 | 5,300,000 | 1,430 | 1FE |
| 546398-6V-5 | LOUISIANA PUB FACs AUTH REV | | 03/09/2017 | RAYMOND JAMES/FI | | 451,962 | 415,000 | 5,937 | 2FE |
| 546398-6Y-9 | LOUISIANA PUB FACs AUTH REV | | 03/09/2017 | RAYMOND JAMES/FI | | 329,365 | 300,000 | 4,292 | 2FE |
| 546398-7C-6 | LOUISIANA PUB FACs AUTH REV | | 03/09/2017 | RAYMOND JAMES/FI | | 547,357 | 500,000 | 7,153 | 2FE |
| 57583U-B4-9 | MASSACHUSETTS ST DEV FIN AGY REV | | 03/27/2017 | U.S. BANK/MUNICIPAL | | 600,000 | 600,000 | 228 | 1FE |
| 57586E-HU-8 | MASSACHUSETTS ST HEALTH & EDL FACs AUTH | | 03/28/2017 | WELLS FARGO SECURITIES LLC | | 4,300,000 | 4,300,000 | 2,137 | 1FE |
| 613520-LC-7 | MONTGOMERY CNTY OHIO HOSP REV | | 03/23/2017 | BARCLAYS CAPITAL INC FIXED INC. | | 1,300,000 | 1,300,000 | 329 | 1FE |
| 644614-VP-1 | NEW HAMPSHIRE HEALTH & ED FACs AUTH REV | | 03/28/2017 | JP MORGAN SECS INC. - FIXED INCOME | | 1,500,000 | 1,500,000 | 653 | 1FE |
| 67756A-H9-6 | OHIO ST HIGHER EDL FAC COMMV REV | | 03/24/2017 | BARCLAYS CAPITAL INC FIXED INC. | | 2,800,000 | 2,800,000 | 943 | 1FE |
| 700387-DZ-3 | PARK CREEK MET DIST COLO REV | | 01/06/2017 | DAVIDSON (D.A.) & CO. INC. | | 827,470 | 730,000 | 2,028 | 2FE |
| 717825-NH-2 | PHILADELPHIA PA HOSPS & HIGHER ED FACs A | | 03/23/2017 | JP MORGAN SECS INC. - FIXED INCOME | | 4,000,000 | 4,000,000 | 1,326 | 1FE |
| 89602N-2B-9 | TRIBOROUGH BRDG & TUNL AUTH N Y REVS | | 03/24/2017 | WELLS FARGO SECURITIES LLC | | 4,300,000 | 4,300,000 | 1,451 | 1FE |
| 93978H-DD-4 | WASHINGTON ST HEALTH CARE FACs AUTH REV | | 03/27/2017 | WELLS FARGO SECURITIES LLC | | 4,000,000 | 4,000,000 | 1,893 | 1FE |
| 3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions | | | | | | | | | |
| | | | | | | 43,929,852 | 43,645,000 | 45,473 | XXX |
| Bonds - Industrial and Miscellaneous (Unaffiliated) | | | | | | | | | |
| 00772B-AP-6 | AERCAP IRELAND CAPITAL LTD | C | 03/02/2017 | BARCLAYS CAPITAL INC FIXED INC. | | 2,018,902 | 1,900,000 | 16,110 | 2FE |
| 035242-AL-0 | ANHEUSER-BUSCH INBEV FINANCE INC. | C | 03/23/2017 | MORGAN STANLEY & CO INC, NY | | 325,277 | 320,000 | 1,672 | 1FE |
| 04685A-2B-6 | ATHENE GLOBAL FUNDING | | 01/18/2017 | DEUTSCHE BANK SECURITIES, INC. | | 349,892 | 350,000 | | 1FE |
| 12479R-AD-9 | CAUTO 171 A1 - ABS | | 03/30/2017 | CREDIT SUISSE SECURITIES (USA) | | 524,848 | 525,000 | | 1FE |
| 166764-AR-1 | CHEVRON CORP | | 03/30/2017 | VARIOUS | | 1,374,913 | 1,375,000 | 2,322 | 1FE |
| 172967-JW-2 | CITIGROUP INC. | | 03/31/2017 | MORGAN STANLEY & CO INC, NY | | 1,535,875 | 1,530,000 | 5,939 | 2FE |
| 191216-BS-8 | COCA-COLA CO. | | 03/24/2017 | VARIOUS | | 1,874,777 | 1,885,000 | 20,934 | 1FE |
| 23305Y-AL-3 | DBUBS 11LC3 C - CMBS | | 02/01/2017 | Adjustment | | | | (36) | 1FM |
| 24422E-TF-6 | JOHN DEERE CAPITAL CORP. | | 03/29/2017 | BARCLAYS CAPITAL INC FIXED INC. | | 583,823 | 579,000 | 3,486 | 1FE |
| 29103D-AF-3 | EMERA US FINANCE LP | | 01/17/2017 | Unknown | | 349,698 | 350,000 | 840 | 2FE |
| 316770-BD-0 | FIFTH THIRD BANK | | 03/30/2017 | WELLS FARGO SECURITIES LLC | | 1,513,925 | 1,505,000 | 3,955 | 1FE |
| 33829T-AA-4 | FIVE CORNERS FUNDING TRUST | | 03/30/2017 | VARIOUS | | 1,654,533 | 1,555,000 | 26,532 | 2FE |
| 38148L-AE-6 | GOLDMAN SACHS GROUP INC. | | 03/30/2017 | CREDIT SUISSE SECURITIES (USA) | | 1,316,042 | 1,300,000 | 17,875 | 1FE |
| 391164-AH-3 | GREAT PLAINS ENERGY INC. | | 03/06/2017 | Goldman Sachs | | 2,398,176 | 2,400,000 | | 2FE |
| 39154T-AM-0 | GALC 171 C - ABS | | 02/07/2017 | BANC OF AMERICA SECURITIES LLC | | 349,980 | 350,000 | | 1FE |
| 42217K-BF-2 | HEALTH CARE REIT INC. | | 03/03/2017 | BAIRD, ROBERT W., & COMPANY IN | | 2,286,608 | 2,250,000 | 24,250 | 2FE |
| 44106M-AR-3 | HOSPITALITY PROPERTIES TRUST | | 01/10/2017 | CITIGROUP GLOBAL MARKETS INC. | | 263,159 | 260,000 | 910 | 2FE |
| 46636V-AM-8 | JPMCC 11C5 B - CMBS | | 01/01/2017 | Adjustment | | | | 35 | 1FE |
| 571748-AW-2 | MARSH & MCGLENNAN COMPANIES INC. | | 03/31/2017 | WELLS FARGO SECURITIES LLC | | 1,194,705 | 1,185,000 | 1,934 | 1FE |
| 59156R-BB-3 | METLIFE INC. | | 03/02/2017 | PERSHING LLC | | 2,681,175 | 2,500,000 | 24,873 | 1FE |
| 59217G-BP-3 | METROPOLITAN LIFE GLOBAL FUNDING I | | 03/28/2017 | BARCLAYS CAPITAL INC FIXED INC. | | 998,246 | 1,005,000 | 9,324 | 1FE |
| 687846-AD-7 | OSCAR 171 A3 - ABS | D | 03/15/2017 | THE BANK OF NEW YORK/MIZUHO SE | | 444,920 | 445,000 | | 1FE |
| 771196-BE-1 | ROCHE HOLDINGS INC. | C | 03/24/2017 | VARIOUS | | 1,306,668 | 1,270,000 | 21,154 | 1FE |
| 78471D-AA-5 | SCLP 161 A - ABS | | 03/01/2017 | Goldman Sachs | | 494 | | 1 | 1FE |
| 830505-AR-4 | SKANDINAVISKA ENSKILDA BANKEN AB PUBL | C | 03/24/2017 | JPM HSBGSI | | 931,209 | 930,000 | 949 | 1FE |
| 85208N-AA-8 | SPRINTS 161 A1 - ABS | | 03/10/2017 | VARIOUS | | 1,307,250 | 1,300,000 | 9,436 | 2FE |
| 85771P-AN-2 | STATOIL ASA | C | 03/28/2017 | VARIOUS | | 1,566,304 | 1,505,000 | 3,975 | 1FE |
| 89114Q-BG-2 | TORONTO-DOMINION BANK | | 03/17/2017 | BONY/TORONTO DOMINION SECURITI | | 251,586 | 255,000 | 2,484 | 1FE |
| 929089-AB-6 | VOYA FINANCIAL INC. | | 03/03/2017 | CHASE SECURITIES | | 2,262,740 | 2,300,000 | 19,355 | 2FE |

E04

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

| 1 CUSIP Identification | 2 Description | 3 Foreign | 4 Date Acquired | 5 Name of Vendor | 6 Number of Shares of Stock | 7 Actual Cost | 8 Par Value | 9 Paid for Accrued Interest and Dividends | 10 NAIC Designation or Market Indicator (a) |
|---|------------------|--------------|--------------------|-----------------------------------|-----------------------------------|---------------------|----------------|---|---|
| 959802-AU-3 | WESTERN UNION CO | | 03/28/2017 | JP MORGAN SECS INC - FIXED INCOME | | 1,665,197 | 1,655,000 | 2,563 | 2FE |
| 3899999 - Bonds - Industrial and Miscellaneous (Unaffiliated) | | | | | | 33,330,921 | 32,784,000 | 220,873 | XXX |
| 8399997 - Subtotals - Bonds - Part 3 | | | | | | 80,417,145 | 79,824,000 | 280,044 | XXX |
| 8399999 - Subtotals - Bonds | | | | | | 80,417,145 | 79,824,000 | 280,044 | XXX |
| 9999999 Totals | | | | | | 80,417,145 | XXX | 280,044 | XXX |

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues

E04.1

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

SCHEDULE D - PART 4

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Change in Book/Adjusted Carrying Value | | | | | 16 | 17 | 18 | 19 | 20 | 21 | 22 |
|---|---|---------|---------------|--|---------------------------|---------------|------------|-------------|---|--|---|---|--------------------------------------|--|---|--|----------------------------------|-------------------------------|--|----------------------------------|--|
| | | | | | | | | | | 11 | 12 | 13 | 14 | 15 | | | | | | | |
| CUSIP Identification | Description | Foreign | Disposal Date | Name of Purchaser | Number of Shares of Stock | Consideration | Par Value | Actual Cost | Prior Year Book/Adjusted Carrying Value | Unrealized Valuation Increase/(Decrease) | Current Year's (Amortization)/Accretion | Current Year's Other Than Temporary Impairment Recognized | Total Change in B./A.C.V. (11+12-13) | Total Foreign Exchange Change in B./A.C.V. | Book/Adjusted Carrying Value at Disposal Date | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Bond Interest/Stock Dividends Received During Year | Stated Contractual Maturity Date | NAIC Designation or Market Indicator (a) |
| Bonds - U.S. Political Subdivisions of States, Territories and Possessions | | | | | | | | | | | | | | | | | | | | | |
| 15136E-AF-1 | CENTENE PLAZA TRANSN DEV DIST MO TRANSN FORT WORTH TEX INDPT SCH DIST | | 03/01/2017 | Maturity @ 100.0 | | 265,000 | 265,000 | 265,000 | 265,000 | | | | | | 265,000 | | | | 8,414 | 03/01/2017 | 4 |
| 349460-4D-4 | | | 02/15/2017 | Maturity @ 100.0 | | 640,000 | 640,000 | 690,758 | 643,303 | | (3,303) | | (3,303) | | 640,000 | | | | 16,000 | 02/15/2017 | 1FE |
| 64966L-CJ-8 | NEW YORK N Y | | 01/25/2017 | JP MORGAN SECS INC., - FIXED INCOME | | 100,000 | 100,000 | 100,000 | 100,000 | | | | | | 100,000 | | | | 96 | 08/01/2038 | 1FE |
| 2499999 - Bonds - U.S. Political Subdivisions of States, Territories and Possessions | | | | | | 1,005,000 | 1,005,000 | 1,055,758 | 1,008,303 | 0 | (3,303) | 0 | (3,303) | 0 | 1,005,000 | 0 | 0 | 0 | 24,510 | XXX | XXX |
| Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions | | | | | | | | | | | | | | | | | | | | | |
| 01757L-FE-1 | ALLEN CNTY OHIO HOSP FACS REV | | 01/17/2017 | PERSHING LLC, JP MORGAN SECS INC., - FIXED INCOME | | 739,260 | 740,000 | 740,000 | 740,000 | | | | | | 740,000 | | (740) | (740) | 1,423 | 11/01/2035 | 1FE |
| 160853-MR-5 | CHARLOTTE-MECKLENBURG HOSP AUTH N C HEALTH ILLINOIS HEALTH FACS AUTH | | 03/30/2017 | | | 2,000,000 | 2,000,000 | 2,000,000 | 500,000 | | | | | | 2,000,000 | | | | 1,420 | 01/15/2038 | 1FE |
| 45200P-N7-8 | LOS ANGELES CALIF DEPT WTR & PWR REV | | 03/29/2017 | WELLS FARGO SECURITIES LLC | | 2,500,000 | 2,500,000 | 2,500,000 | | | | | | | 2,500,000 | | | | 1,279 | 06/01/2035 | 1FE |
| 544495-DY-7 | MASSACHUSETTS ST HEALTH & EDL FACS AUTH | | 03/31/2017 | RBC CAPITAL MARKETS, JP MORGAN SECS INC., - FIXED INCOME | | 1,800,000 | 1,800,000 | 1,800,000 | | | | | | | 1,800,000 | | | | 1,131 | 07/01/2035 | 1FE |
| 57585K-GP-7 | MONTGOMERY CNTY OHIO HOSP REV | | 03/22/2017 | BARCLAYS CAPITAL INC FIXED INC | | 100,000 | 100,000 | 100,000 | 100,000 | | | | | | 100,000 | | | | 137 | 11/01/2049 | 1FE |
| 613520-LC-7 | MONTGOMERY CNTY OHIO HOSP REV | | 03/03/2017 | BARCLAYS CAPITAL INC FIXED INC | | 700,000 | 700,000 | 700,000 | | | | | | | 700,000 | | | | 326 | 11/15/2039 | 1FE |
| 613520-LD-5 | NEW HAMPSHIRE HEALTH & ED FACS AUTH REV | | 01/25/2017 | JP MORGAN SECS INC., - FIXED INCOME | | 100,000 | 100,000 | 100,000 | 100,000 | | | | | | 100,000 | | | | 91 | 11/15/2045 | 1FE |
| 644614-VP-1 | NORTH HUDSON SEW AUTH N J GROSS REV LEAS | | 03/02/2017 | Southwest Securities, BARCLAYS CAPITAL INC FIXED INC | | 15,382 | 15,000 | 15,925 | 15,836 | | (42) | | (42) | | 15,794 | | (412) | (412) | 150 | 06/01/2020 | 1FE |
| 67756A-H9-6 | OHIO ST HIGHER EDL FAC COMM REV | | 01/25/2017 | BARCLAYS CAPITAL INC FIXED INC | | 100,000 | 100,000 | 100,000 | | | | | | | 100,000 | | | | 37 | 01/01/2043 | 1FE |
| 3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions | | | | | | 8,154,642 | 8,155,000 | 8,155,925 | 1,555,836 | 0 | (42) | 0 | (42) | 0 | 8,155,794 | 0 | (1,152) | (1,152) | 6,084 | XXX | XXX |
| Bonds - Industrial and Miscellaneous (Unaffiliated) | | | | | | | | | | | | | | | | | | | | | |
| 002480-AA-2 | AXIS-161-A - ABS | | 03/20/2017 | Paydown | | 44,740 | 44,740 | 44,737 | 44,737 | | | | 3 | | 44,740 | | | | 86 | 11/22/2021 | 1FE |
| 0258MO-DD-8 | AMERICAN EXPRESS CREDIT CORP | | 03/24/2017 | Maturity @ 100.0 | | 750,000 | 750,000 | 763,050 | 750,645 | | (645) | | (645) | | 750,000 | | | | 8,906 | 03/24/2017 | 1FE |
| 03523T-BN-7 | WORLDWIDE INC | | 03/23/2017 | JPM HSBCSI | | 325,023 | 325,000 | 325,390 | 325,047 | | (21) | | (21) | | 325,026 | | (4) | (4) | 3,141 | 07/15/2017 | 1FE |
| 05464P-AG-7 | AXIS 151 A2 - ABS | | 03/20/2017 | Paydown | | 21,848 | 21,848 | 21,847 | 21,851 | | (3) | | (3) | | 21,848 | | | | 36 | 03/20/2020 | 1FE |
| 12189P-AF-9 | THROUGH TRUST | | 01/02/2017 | Paydown | | 59,673 | 59,673 | 68,325 | 67,495 | | (7,822) | | (7,822) | | 59,673 | | | | | 01/02/2021 | 1FE |
| 125634-AG-0 | CLIF 131 NTS - ABS | | 03/18/2017 | Paydown | | 5,625 | 5,625 | 5,389 | 5,390 | | 235 | | 235 | | 5,625 | | | | 13 | 03/20/2028 | 1FE |
| 13975J-AJ-1 | AFIN 143 E - ABS | | 01/01/2017 | Adjustment | | | | | | | (1,125) | | (1,125) | | | | | | | 04/20/2023 | |
| 14313W-AC-6 | CARMX 151 A3 - ABS | | 03/15/2017 | Paydown | | 60,076 | 60,076 | 60,061 | 60,038 | | 38 | | 38 | | 60,076 | | | | 72 | 11/15/2019 | 1FE |
| 29103D-AD-8 | EMERA US FINANCE LP | | 01/17/2017 | Unknown | | 349,698 | 350,000 | 349,661 | 349,695 | | 3 | | 3 | | 349,698 | | | | 840 | 06/15/2021 | 2FE |
| 36193A-AA-6 | GSMS 13KING A - CMBS | | 03/01/2017 | Paydown | | 2,541 | 2,541 | 2,591 | 2,572 | | (31) | | (31) | | 2,541 | | | | 6 | 12/10/2027 | 1FM |
| 617446-C2-3 | MORGAN STANLEY | | 01/09/2017 | Maturity @ 100.0 | | 710,000 | 710,000 | 791,941 | 710,465 | | (465) | | (465) | | 710,000 | | | | 19,348 | 01/09/2017 | 1FE |
| 61756U-AE-1 | MSCI 071016 A4 - CMBS | | 03/01/2017 | Paydown | | 42,625 | 42,625 | 44,192 | 43,502 | | (876) | | (876) | | 42,625 | | | | 279 | 12/13/2049 | 1FM |
| 69335P-CB-9 | PFSFC-16B-A - ABS | | 02/01/2017 | Adjustment | | | | | | | (144) | | (144) | | | | | | | 10/15/2021 | 1FE |
| 771196-BA-9 | ROCHE HOLDINGS INC | | 03/27/2017 | HILLTOP SECURITIES | | 211,676 | 210,000 | 212,281 | 211,632 | | (144) | | (144) | | 211,488 | | 188 | 188 | 2,349 | 09/30/2019 | 1FE |
| 780099-CG-0 | ROYAL BANK OF SCOTLAND GROUP PLC | | 03/31/2017 | Maturity @ 99.867 | | 750,000 | 750,000 | 751,380 | 750,179 | | (179) | | (179) | | 750,000 | | | | 7,031 | 03/31/2017 | 2FE |
| 78448M-AD-9 | SMAT 151US A3A - ABS | | 03/14/2017 | Paydown | | 90,693 | 90,693 | 90,689 | 90,693 | | | | | | 90,693 | | | | 120 | 09/14/2018 | 1FE |
| 78471D-AA-5 | SCLP 161 A - ABS | | 03/25/2017 | Paydown | | 19,379 | 18,885 | 18,953 | 200,810 | | (74) | | (74) | | 18,885 | | 494 | 494 | (479) | 08/25/2025 | 1FE |
| 842400-GF-4 | SOUTHERN CALIFORNIA EDISON CO | | 02/01/2017 | Paydown | | 14,286 | 14,286 | 14,286 | 14,286 | | | | | | 14,286 | | | | | 02/01/2022 | 1FE |
| 87407P-AA-8 | TAL 131 A - ABS | | 03/20/2017 | Paydown | | 15,000 | 15,000 | 14,459 | 14,464 | | 536 | | 536 | | 15,000 | | | | 36 | 02/22/2038 | 1FE |
| 88167A-AE-1 | TEVA PHARMACEUTICAL FINANCE NETHERLANDS | | 02/07/2017 | CHASE SECURITIES | | 900,660 | 1,000,000 | 972,620 | 973,013 | | 286 | | 286 | | 973,299 | | (72,640) | (72,640) | 17,413 | 10/01/2026 | 2FE |
| 929043-AG-2 | VORNADO REALTY LP | | 01/01/2017 | Adjustment | | | | | | | (144) | | (144) | | | | | | | 01/15/2022 | 2FE |
| 959802-AR-0 | MORGAN STANLEY & CO INC, NY | | 03/28/2017 | Paydown | | 211,413 | 210,000 | 210,494 | 210,100 | | (26) | | (26) | | 210,075 | | 1,339 | 1,339 | 1,845 | 12/10/2017 | 2FE |
| 3899999 - Bonds - Industrial and Miscellaneous (Unaffiliated) | | | | | | 4,584,956 | 4,680,992 | 4,762,345 | 4,846,614 | 0 | (10,453) | 0 | (10,453) | 0 | 4,655,579 | 0 | (70,623) | (70,623) | 61,042 | XXX | XXX |
| 8399997 - Subtotals - Bonds - Part 4 | | | | | | 13,744,598 | 13,840,992 | 13,974,028 | 7,410,753 | 0 | (13,799) | 0 | (13,799) | 0 | 13,816,372 | 0 | (71,775) | (71,775) | 91,635 | XXX | XXX |
| 8399999 - Subtotals - Bonds | | | | | | 13,744,598 | 13,840,992 | 13,974,028 | 7,410,753 | 0 | (13,799) | 0 | (13,799) | 0 | 13,816,372 | 0 | (71,775) | (71,775) | 91,635 | XXX | XXX |
| 9999999 Totals | | | | | | 13,744,598 | 13,840,992 | 13,974,028 | 7,410,753 | 0 | (13,799) | 0 | (13,799) | 0 | 13,816,372 | 0 | (71,775) | (71,775) | 91,635 | XXX | XXX |

EO5

STATEMENT AS OF MARCH 31, 2017 OF THE CELTIC INSURANCE COMPANY

SCHEDULE D - PART 4

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Change in Book/Adjusted Carrying Value | | | | | 16 | 17 | 18 | 19 | 20 | 21 | 22 |
|----------------------|-------------|---------|---------------|-------------------|---------------------------|---------------|-----------|-------------|---|---|--|---|--------------------------------------|--|--|--|----------------------------------|-------------------------------|--|----------------------------------|--|
| | | | | | | | | | | 11 | 12 | 13 | 14 | 15 | | | | | | | |
| CUSIP Identification | Description | Foreign | Disposal Date | Name of Purchaser | Number of Shares of Stock | Consideration | Par Value | Actual Cost | Prior Year Book/Adjusted Carrying Value | Unrealized Valuation Increase/ (Decrease) | Current Year's (Amortization)/ Accretion | Current Year's Other Than Temporary Impairment Recognized | Total Change in B./A.C.V. (11+12-13) | Total Foreign Exchange Change in B./A.C.V. | Book/ Adjusted Carrying Value at Disposal Date | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Bond Interest/Stock Dividends Received During Year | Stated Contractual Maturity Date | NAIC Designation or Market Indicator (a) |

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

