



QUARTERLY STATEMENT

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

WellCare of Maine, Inc.

NAIC Group Code	01295	01295	NAIC Company Code	16344	Employer's ID Number	82-3114517
	(Current Period)	(Prior Period)				
Organized under the Laws of	Maine		State of Domicile or Port of Entry	Maine		
Country of Domicile	United States					
Licensed as business type:	Life, Accident & Health []		Property/Casualty []	Hospital, Medical & Dental Service or Indemnity []		
	Dental Service Corporation []		Vision Service Corporation []	Health Maintenance Organization [X]		
	Other []			Is HMO Federally Qualified? Yes [] No [X]		
Incorporated/Organized	10/16/2017		Commenced Business	01/01/2019		
Statutory Home Office	110 Main Street, 5th Floor		Saco, ME, US 04072			
	(Street and Number)		(City or Town, State, Country and Zip Code)			
Main Administrative Office	7700 Forsyth Boulevard		St. Louis, MO, US 63105		314-725-4477	
	(Street and Number)		(City or Town, State, Country and Zip Code)		(Area Code) (Telephone Number)	
Mail Address	8725 Henderson Road		Tampa, FL, US 33634			
	(Street and Number or P.O. Box)		(City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	7700 Forsyth Boulevard		St. Louis, MO, US 63105		314-725-4477	
	(Street and Number)		(City or Town, State, Country and Zip Code)		(Area Code) (Telephone Number)	
Internet Web Site Address	www.centene.com					
Statutory Statement Contact	Kimberly Bringhurst		813-206-2725			
	(Name)		(Area Code) (Telephone Number) (Extension)			
	kimberly.bringhurst@centene.comm		813-675-2899			
	(E-Mail Address)		(FAX Number)			

OFFICERS

Name	Title	Name	Title
Judi Ellen Neveux	President	James Edward Snyder III	Treasurer and Vice President
Kendra Louise Archer	Secretary and Vice President	Tricia Lynn Dinkelman	Vice President of Tax

OTHER OFFICERS

Benjamin Mark Craig	Assistant Secretary		

DIRECTORS OR TRUSTEES

Judi Ellen Neveux	Benjamin Mark Craig		
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State of
County of ss

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

Judi Ellen Neveux President	James Edward Snyder III Treasurer and Vice President	Kendra Louise Archer Secretary and Vice President
Subscribed and sworn to before me this _____ day of _____,		a. Is this an original filing? Yes [X] No []
_____		b. If no:
		1. State the amendment number _____
		2. Date filed _____
		3. Number of pages attached _____

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1	2	3	
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	28,757,739		28,757,739	29,555,770
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$9,281,908), cash equivalents (\$15,619,544) and short-term investments (\$0)	24,901,452		24,901,452	14,561,798
6. Contract loans (including \$premium notes)			0	0
7. Derivatives	0		0	0
8. Other invested assets	0		0	0
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	53,659,191	0	53,659,191	44,117,568
13. Title plants less \$charged off (for Title insurers only)			0	0
14. Investment income due and accrued	273,874		273,874	200,212
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection			0	0
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 (\$13,447,990) and contracts subject to redetermination (\$)	13,447,990		13,447,990	8,594,064
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers			0	0
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans	9,198,201		9,198,201	3,172,326
18.1 Current federal and foreign income tax recoverable and interest thereon			0	0
18.2 Net deferred tax asset	3,969,219	2,899,185	1,070,034	1,593,231
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software			0	0
21. Furniture and equipment, including health care delivery assets (\$)			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates	6,349,401		6,349,401	697,298
24. Health care (\$5,226,090) and other amounts receivable	6,734,097	1,508,007	5,226,090	5,917,293
25. Aggregate write-ins for other-than-invested assets	429,024	429,024	0	25,782
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	94,060,997	4,836,216	89,224,781	64,317,774
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	94,060,997	4,836,216	89,224,781	64,317,774
DETAILS OF WRITE-INS				
1101.			0	0
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0
2501. Other non-admitted assets (prepaids)	429,024	429,024	0	0
2502. State and other tax recoverable			0	25,782
2503.			0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	429,024	429,024	0	25,782

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ reinsurance ceded).....	20,086,598		20,086,598	13,591,834
2. Accrued medical incentive pool and bonus amounts	3,606,730		3,606,730	2,238,876
3. Unpaid claims adjustment expenses	199,813		199,813	142,175
4. Aggregate health policy reserves including the liability of \$ for medical loss ratio rebate per the Public Health Service Act.....	29,343,640		29,343,640	20,528,800
5. Aggregate life policy reserves			0	0
6. Property/casualty unearned premium reserve			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance	5,665		5,665	2,255
9. General expenses due or accrued	486,213		486,213	336,635
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))	984,690		984,690	163,673
10.2 Net deferred tax liability.....			0	0
11. Ceded reinsurance premiums payable			0	0
12. Amounts withheld or retained for the account of others			0	0
13. Remittances and items not allocated			0	0
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current)			0	0
15. Amounts due to parent, subsidiaries and affiliates	51,032		51,032	0
16. Derivatives.....			0	0
17. Payable for securities			0	0
18. Payable for securities lending			0	0
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers)			0	0
20. Reinsurance in unauthorized and certified (\$) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans	10,318,826		10,318,826	4,576,861
23. Aggregate write-ins for other liabilities (including \$ current)	155,256	0	155,256	2,161
24. Total liabilities (Lines 1 to 23).....	65,238,463	0	65,238,463	41,583,270
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX	1,000	1,000
27. Preferred capital stock	XXX	XXX		0
28. Gross paid in and contributed surplus	XXX	XXX	17,612,150	14,612,150
29. Surplus notes	XXX	XXX		0
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	6,373,168	8,121,354
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 \$)	XXX	XXX		0
32.2 shares preferred (value included in Line 27 \$)	XXX	XXX		0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	23,986,318	22,734,504
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	89,224,781	64,317,774
DETAILS OF WRITE-INS				
2301. State income tax payable.....	133,725		133,725	0
2302. Unclaimed property payable.....	21,531		21,531	2,161
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	155,256	0	155,256	2,161
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	0	0
3001.	XXX	XXX		0
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months.....	XXX	72,344	45,928	93,292
2. Net premium income (including \$ non-health premium income).....	XXX	114,607,505	66,438,537	128,712,108
3. Change in unearned premium reserves and reserve for rate credits	XXX		417,926	417,926
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	114,607,505	66,856,463	129,130,034
Hospital and Medical:				
9. Hospital/medical benefits		70,528,486	44,560,094	90,353,093
10. Other professional services		1,691,354	1,431,244	2,643,460
11. Outside referrals			0	0
12. Emergency room and out-of-area		7,111,827	3,679,249	8,290,744
13. Prescription drugs		14,309,254	4,524,478	7,093,462
14. Aggregate write-ins for other hospital and medical.....	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts.....		2,294,617	3,015,525	1,220,177
16. Subtotal (Lines 9 to 15)	0	95,935,538	57,210,590	109,600,936
Less:				
17. Net reinsurance recoveries			0	0
18. Total hospital and medical (Lines 16 minus 17)	0	95,935,538	57,210,590	109,600,936
19. Non-health claims (net).....			0	0
20. Claims adjustment expenses, including \$56,781 cost containment expenses.....		946,353	610,126	1,104,527
21. General administrative expenses.....		13,953,489	9,815,429	19,311,400
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only).....		4,301,651	(5,677,397)	2,403,610
23. Total underwriting deductions (Lines 18 through 22)	0	115,137,031	61,958,748	132,420,473
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(529,526)	4,897,715	(3,290,439)
25. Net investment income earned		778,978	723,293	1,529,313
26. Net realized capital gains (losses) less capital gains tax of \$.....(1,301)		(4,895)	(1,380)	(3,637)
27. Net investment gains (losses) (Lines 25 plus 26)	0	774,083	721,913	1,525,676
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$18,955)]		(18,955)	(15,747)	(31,422)
29. Aggregate write-ins for other income or expenses	0	(57,143)	0	805
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	168,459	5,603,881	(1,795,380)
31. Federal and foreign income taxes incurred	XXX	992,301	(38,824)	85,265
32. Net income (loss) (Lines 30 minus 31)	XXX	(823,842)	5,642,705	(1,880,645)
DETAILS OF WRITE-INS				
0601.	XXX			
0602.	XXX			
0603.	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX	0	0	0
0701.	XXX			
0702.	XXX			
0703.	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)	XXX	0	0	0
1401.				
1402.				
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	0	0	0	0
2901. Fines and penalties.....		(57,143)		
2902. Miscellaneous income - litigation settlement.....				805
2903.				
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	(57,143)	0	805

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.....	22,734,504	25,063,874	25,063,874
34. Net income or (loss) from Line 32	(823,842)	5,642,705	(1,880,645)
35. Change in valuation basis of aggregate policy and claim reserves	0	0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$	0	0	0
37. Change in net unrealized foreign exchange capital gain or (loss)	0	0	0
38. Change in net deferred income tax	1,031,688	(1,192,224)	344,608
39. Change in nonadmitted assets	(1,956,032)	(101,827)	(793,333)
40. Change in unauthorized and certified reinsurance	0	0	0
41. Change in treasury stock	0	0	0
42. Change in surplus notes	0	0	0
43. Cumulative effect of changes in accounting principles	0	0	0
44. Capital Changes:			
44.1 Paid in	0	0	0
44.2 Transferred from surplus (Stock Dividend)	0	0	0
44.3 Transferred to surplus	0	0	0
45. Surplus adjustments:			
45.1 Paid in	3,000,000	0	0
45.2 Transferred to capital (Stock Dividend)	0	0	0
45.3 Transferred from capital	0	0	0
46. Dividends to stockholders	0	0	0
47. Aggregate write-ins for gains or (losses) in surplus	0	0	0
48. Net change in capital and surplus (Lines 34 to 47)	1,251,814	4,348,654	(2,329,370)
49. Capital and surplus end of reporting period (Line 33 plus 48)	23,986,318	29,412,528	22,734,504
DETAILS OF WRITE-INS			
4701.			
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	0	0

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance.....	114,270,178	68,476,656	129,986,242
2. Net investment income	786,580	769,104	1,730,712
3. Miscellaneous income		0	0
4. Total (Lines 1 to 3)	115,056,758	69,245,760	131,716,954
5. Benefit and loss related payments	87,542,991	54,460,323	108,289,880
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	15,052,633	8,987,048	19,804,582
8. Dividends paid to policyholders		0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses).....	169,983	1,522,106	1,215,430
10. Total (Lines 5 through 9)	102,765,607	64,969,477	129,309,892
11. Net cash from operations (Line 4 minus Line 10)	12,291,151	4,276,283	2,407,062
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	2,558,229	946,301	1,916,904
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds		0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	2,558,229	946,301	1,916,904
13. Cost of investments acquired (long-term only):			
13.1 Bonds	1,847,658	1,178,759	2,488,698
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	0	0
13.6 Miscellaneous applications	0	0	1
13.7 Total investments acquired (Lines 13.1 to 13.6)	1,847,658	1,178,759	2,488,699
14. Net increase/(decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	710,571	(232,458)	(571,795)
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
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities		0	0
16.5 Dividends to stockholders	0	0	0
16.6 Other cash provided (applied).....	(2,662,068)	3,884,774	1,027,957
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6).....	(2,662,068)	3,884,774	1,027,957
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)	10,339,654	7,928,599	2,863,224
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	14,561,798	11,698,574	11,698,574
19.2 End of period (Line 18 plus Line 19.1)	24,901,452	19,627,172	14,561,798

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non- Health
Total Members at end of:														
1. Prior Year	8,091	.0	.0	.0	.0	.0	.0	8,091	.0	.0	.0	.0	.0	.0
2. First Quarter	12,124	.0	.0	.0	.0	.0	.0	12,124	.0	.0	.0	.0	.0	.0
3. Second Quarter	12,412	.0	.0	.0	.0	.0	.0	12,412	.0	.0	.0	.0	.0	.0
4. Third Quarter	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. Current Year	0													
6. Current Year Member Months	72,344							72,344						
Total Member Ambulatory Encounters for Period:														
7. Physician	57,386							57,386						
8. Non-Physician	39,420							39,420						
9. Total	96,806	0	0	0	0	0	0	96,806	0	0	0	0	0	0
10. Hospital Patient Days Incurred	13,259							13,259						
11. Number of Inpatient Admissions	1,763							1,763						
12. Health Premiums Written (a).....	114,607,505							114,607,505						
13. Life Premiums Direct	.0													
14. Property/Casualty Premiums Written	.0													
15. Health Premiums Earned	114,607,505							114,607,505						
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services	88,072,920							88,072,920						
18. Amount Incurred for Provision of Health Care Services	95,935,537							95,935,537						

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 114,607,505

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

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims unpaid (Reported)						
0199999 Individually listed claims unpaid	.0	.0	.0	.0	.0	.0
0299999 Aggregate accounts not individually listed-uncovered						.0
0399999 Aggregate accounts not individually listed-covered	2,391,436	3,882	4,984		281,277	2,681,579
0499999 Subtotals	2,391,436	3,882	4,984	0	281,277	2,681,579
0599999 Unreported claims and other claim reserves	xxx	xxx	xxx	xxx	xxx	17,405,019
0699999 Total amounts withheld	xxx	xxx	xxx	xxx	xxx	
0799999 Total claims unpaid	xxx	xxx	xxx	xxx	xxx	20,086,598
0899999 Accrued medical incentive pool and bonus amounts	xxx	xxx	xxx	xxx	xxx	3,606,730

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) individual					.0	.0
2. Comprehensive (hospital and medical) group					.0	.0
3. Medicare Supplement					.0	.0
4. Vision only					.0	.0
5. Dental only					.0	.0
6. Federal Employees Health Benefits Plan					.0	.0
7. Title XVIII - Medicare	12,093,431	81,786,823	1,705,354	18,381,245	13,798,785	13,591,835
8. Title XIX - Medicaid					.0	.0
9. Credit A&H					.0	.0
10. Disability income					.0	.0
11. Long-term care					.0	.0
12. Other health					.0	.0
13. Health subtotal (Lines 1 to 12).....	12,093,431	81,786,823	1,705,354	18,381,245	13,798,785	13,591,835
14. Health care receivables (a)		6,734,097			.0	.0
15. Other non-health					.0	.0
16. Medical incentive pools and bonus amounts	803,159	123,604	1,745,632	1,861,099	2,548,791	2,238,877
17. Totals (Lines 13-14+15+16)	12,896,590	75,176,330	3,450,986	20,242,344	16,347,576	15,830,712

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

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

NOTES TO FINANCIAL STATEMENT

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of WellCare of Maine, Inc. (the “Company”), domiciled in the State of Maine, are presented on the basis of accounting practices prescribed or permitted by the State of Maine Department of Professional & Financial Regulation Bureau of Insurance, (the “Department”).

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

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

	SSAP #	F/S Page	F/S Line #	2025	2024
NET INCOME					
1 Company state basis (Page 4, Line 32, Columns 2 & 4)	xxx	4	32	\$ (823,842)	\$ (1,880,645)
2 State Prescribed Practices that are an increase/(decrease) from NAIC SAP: None	—	—	—	-	-
3 State Permitted Practices that are an increase/(decrease) from NAIC SAP: None	—	—	—	-	-
4 NAIC SAP (1-2-3=4)	xxx	xxx	xxx	<u>\$ (823,842)</u>	<u>\$ (1,880,645)</u>
SURPLUS					
5 Company state basis (Page 3, Line 33, Columns 3 & 4)	xxx	3	33	\$ 23,986,318	\$ 22,734,504
6 State Prescribed Practices that are an increase/(decrease) from NAIC SAP: None	—	—	—	-	-
7 State Permitted Practices that are an increase/(decrease) from NAIC SAP: None	—	—	—	-	-
8 NAIC SAP (5-6-7=8)	xxx	xxx	xxx	<u>\$ 23,986,318</u>	<u>\$ 22,734,504</u>

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

C. Accounting Policy - No significant change.

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

2. Accounting Changes and Corrections of Errors

No significant change.

3. Business Combinations and Goodwill

No significant change.

4. Discontinued Operations

No significant change.

5. Investments

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

B. Debt Restructuring - No significant change.

C. Reverse Mortgages - No significant change.

D. Loan-Backed Securities

1. Prepayment assumptions for loan-backed securities were obtained from Reuters.

2. The Company has no other-than-temporary impairment (“OTTI”) to recognize.

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

NOTES TO FINANCIAL STATEMENT

3. The Company has not recognized OTTI based on cash flow analysis.

4. All impaired securities (fair value is less than cost or amortized cost) for which an OTTI has not been recognized in earnings as a realized loss (including securities with a recognized OTTI for non-interest related declines when a non-recognized interest related impairment remains):

a. The aggregate amount of unrealized losses:

1.Less than 12 Months	\$	7,292
2.12 Months or Longer	\$	881,653

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

1.Less than 12 Months	\$	643,929
2.12 Months or Longer	\$	4,477,558

5. For any security in an unrealized loss position, the Company assesses whether it intends to sell the security or if it is more likely than not that the Company will be required to sell the security before recovery of the amortized cost basis for reasons such as liquidity, contractual or regulatory purposes. If the security meets this criterion, the decline in fair value is other-than-temporary and is recorded in earnings.

The Company does not intend to sell these securities prior to maturity; therefore, there is no indication of OTTI related to these securities.

For loan-backed securities in an unrealized loss position, management further evaluates whether the collection of all cash flow is probable. Management utilizes the prospective adjustment method to evaluate the present value of future cash flow. For those loan-back and structured securities (NAIC designated 1 or 2) where management has determined that collection of all contractual cash flow 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 flow.

E. The Company's policy for dollar repurchase agreements require a minimum of 100% of the fair value of securities purchases agreements to be maintained as collateral. There were no dollar repurchase arrangements outstanding for the period June 30, 2025.

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

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

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

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

J. Real Estate - No significant change.

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

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

M. Working Capital Finance Investments - None

N. Offsetting and Netting of Assets and Liabilities - None

O. 5* GI Securities - No significant change.

P. Short Sales - No significant change.

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

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

6. Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

NOTES TO FINANCIAL STATEMENT

7. Investment Income

No significant change.

8. Derivative Instruments

None

9. Income Taxes

No significant change.

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

No significant change.

F. Guarantees on Undertakings for the Benefit of an Affiliate -

The Company has a Parental Guaranty, dated March 12, 2018, by WellCare Health Plans, Inc. delivered to the Maine Bureau of Insurance that guarantees that the Company will maintain capital and surplus at a level no less than the greater of the product of its authorized control level risk-based capital and 4.0 or the minimum requirements for capital and surplus.

11. Debt

A. Debt - No significant change.

B. Federal Home Loan Bank Agreements - None

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

None

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

No significant change.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments - No significant change.

B. Assessments - No significant change.

C. Gain Contingencies - No significant change.

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

E. Joint and Several Liabilities - No significant change.

F. All Other Contingencies - No significant change.

15. Leases

No significant change.

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

No significant change.

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

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

B. Transfer and Servicing of Financial Assets - None

C. Wash Sales - None

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

No significant change.

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

NOTES TO FINANCIAL STATEMENT

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

No significant change.

20. Fair Value Measurements

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

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

1. The following table summarizes fair value measurements by level at June 30, 2025, for assets and liabilities measured at fair value.

Description of each class of asset or liability	Level 1	Level 2	Level 3	(NAV)	Total
a. Assets at fair value					
Cash, cash equivalents and short-term investments	\$ 24,901,452	\$ -	\$ -	\$ -	\$ 24,901,452
Bonds					
Issuer credit obligations	\$ -	\$ -	\$ -	\$ -	\$ -
Asset-backed securities	-	-	-	-	-
Total Bonds	\$ -	\$ -	\$ -	\$ -	\$ -
Common stock					
Parent, subsidiaries and affiliates	\$ -	\$ -	\$ -	\$ -	\$ -
Total Common stock	\$ -	\$ -	\$ -	\$ -	\$ -
Derivatives assets	\$ -	\$ -	\$ -	\$ -	\$ -
Total Derivatives assets	\$ -	\$ -	\$ -	\$ -	\$ -
Separate account assets	\$ -	\$ -	\$ -	\$ -	\$ -
Total assets at fair value	<u>\$ 24,901,452</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 24,901,452</u>
b. Liabilities at fair value					
Separate account liabilities					
Total liabilities at fair value	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

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 June 30, 2025, for all financial instruments:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Cash and cash equivalents	\$ 24,901,452	\$ 24,901,452	\$ 24,901,452	\$ -	\$ -	\$ -	\$ -
Issuer credit obligations	16,845,098	17,663,132	121,491	16,723,608	-	-	-
Asset-backed securities	10,317,324	11,094,607	-	10,317,324	-	-	-
Total Investments	<u>\$ 52,063,874</u>	<u>\$ 53,659,191</u>	<u>\$ 25,022,943</u>	<u>\$ 27,040,932</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

D. Unable to Estimate Fair Value - None

E. Assets Measured at Net Asset Value - None

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

NOTES TO FINANCIAL STATEMENT

21. Other Items

A. Extraordinary Items - No significant change.

B. Troubled Debt Restructuring - No significant change.

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

D. Business Interruption Insurance Recoveries - No significant change.

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

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

G. Retained Assets - No significant change.

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

I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy - No significant change.

22. Events Subsequent

The Company recorded an additional cash capital contribution of \$3,000,000 from The WellCare Management Group, Inc. on its Q2 2025 statement as a Type I subsequent event in accordance with Statutory Statement of Accounting Principles No. 72, paragraph 8. The Department was given prior notification of the capital contribution.

In connection with the preparation of the statutory-basis financial statements, the Company evaluated subsequent events after the statutory-basis statements of admitted assets, liabilities, and capital and surplus date of June 30, 2025, through August 11, 2025, which was the date the statutory-basis financial statements were issued.

23. Reinsurance

No significant change.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

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

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

25. Change in Incurred Claims Expenses

A. Reserves for unpaid claims as of December 31, 2024 were \$15,830,711. As of June 30, 2025, \$12,896,591 has been paid for incurred claims attributable to insured events of prior years. Reserves remaining for prior years are now \$3,450,985 as a result of re-estimation of unpaid claims. Therefore, there has been \$516,865 unfavorable prior-year development since December 31, 2024. The increase or decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

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

26. Intercompany Pooling Arrangements

No significant change.

27. Structured Settlements

No significant change.

28. Health Care Receivables

No significant change.

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

NOTES TO FINANCIAL STATEMENT

29. Participating Policies

No significant change.

30. Premium Deficiency Reserves

The following table summarizes the Company’s premium deficiency reserves as of June 30, 2025:

1. Liability carried for premium deficiency reserves	\$	16,445,214
2. Date of most recent evaluation of this liability		July 31, 2025
3. Was anticipated investment income utilized in the calculation?		No

31. Anticipated Salvage and Subrogation

No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

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

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes ☐ No ☒ NA ☐
If yes, attach an explanation.
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2022
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2022
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).
- 6.4 By what department or departments?
Maine Department of Professional & Financial Regulation Bureau of Insurance
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes ☐ No ☐ NA ☒
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes ☐ No ☐ NA ☒
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes ☐ No ☒
- 7.2 If yes, give full information:
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes ☐ No ☒
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes ☐ No ☒
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

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

- 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: \$ 3,000,000

GENERAL INTERROGATORIES

INVESTMENT

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

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

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

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

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

14.2 If yes, please complete the following:

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

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

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] NA [X]
If no, attach a description with this statement.

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

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

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	2
Name of Custodian(s)	Custodian Address
US BANK.....	555 S. W. OAK STREET, PORTLAND, OR 97204.....

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	2	3
Name(s)	Location(s)	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	2	3	4
Old Custodian	New Custodian	Date of Change	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. This includes both primary and sub-advisors. For assets that are managed internally by employees of the reporting entity, note as such. [...that have access to the investment accounts"; "...handle securities"]

1	2
Name of Firm or Individual	Affiliation
Wellington Management Company LLP.....	U.....

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's invested assets? Yes [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 invested 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	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
106595.....	Wellington Management Company LLP.....	549300YHP12TEZNL CX41.....	SEC.....	

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

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

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

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

Has the reporting entity self-designated 5GI securities?..... Yes [] No [X]

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

- a. The security was either:

GENERAL INTERROGATORIES

- i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or
- ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
- b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
- c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is shown on a current private letter rating, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
- d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.

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

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

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?..... Yes [] No [X]

GENERAL INTERROGATORIES
PART 2 - HEALTH

1.

Operating Percentages:

1.1 A&H loss percent

87.5 %

1.2 A&H cost containment percent

0.0 %

1.3 A&H expense percent excluding cost containment expenses

13.0 %

2.1

Do you act as a custodian for health savings accounts?

Yes ☐ No ☒

2.2

If yes, please provide the amount of custodial funds held as of the reporting date

\$

2.3

Do you act as an administrator for health savings accounts?

Yes ☐ No ☒

2.4

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

\$

3.

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

Yes ☐ No ☒

3.1

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

Yes ☐ No ☒

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

[illegible]

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories										
States, Etc.	1	Direct Business Only								
	Active Status (a)	2	3	4	5	6	7	8	9	10
		Accident & Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Plan Premiums	Life & Annuity Premiums & Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
1. Alabama	AL	N							.0	
2. Alaska	AK	N							.0	
3. Arizona	AZ	N							.0	
4. Arkansas	AR	N							.0	
5. California	CA	N							.0	
6. Colorado	CO	N							.0	
7. Connecticut	CT	N							.0	
8. Delaware	DE	N							.0	
9. Dist. Columbia	DC	N							.0	
10. Florida	FL	N							.0	
11. Georgia	GA	N							.0	
12. Hawaii	HI	N							.0	
13. Idaho	ID	N							.0	
14. Illinois	IL	N							.0	
15. Indiana	IN	N							.0	
16. Iowa	IA	N							.0	
17. Kansas	KS	N							.0	
18. Kentucky	KY	N							.0	
19. Louisiana	LA	N							.0	
20. Maine	ME	L	114,607,505						114,607,505	
21. Maryland	MD	N							.0	
22. Massachusetts	MA	N							.0	
23. Michigan	MI	N							.0	
24. Minnesota	MN	N							.0	
25. Mississippi	MS	N							.0	
26. Missouri	MO	N							.0	
27. Montana	MT	N							.0	
28. Nebraska	NE	N							.0	
29. Nevada	NV	N							.0	
30. New Hampshire	NH	N							.0	
31. New Jersey	NJ	N							.0	
32. New Mexico	NM	N							.0	
33. New York	NY	N							.0	
34. North Carolina	NC	N							.0	
35. North Dakota	ND	N							.0	
36. Ohio	OH	N							.0	
37. Oklahoma	OK	N							.0	
38. Oregon	OR	N							.0	
39. Pennsylvania	PA	N							.0	
40. Rhode Island	RI	N							.0	
41. South Carolina	SC	N							.0	
42. South Dakota	SD	N							.0	
43. Tennessee	TN	N							.0	
44. Texas	TX	N							.0	
45. Utah	UT	N							.0	
46. Vermont	VT	N							.0	
47. Virginia	VA	N							.0	
48. Washington	WA	N							.0	
49. West Virginia	WV	N							.0	
50. Wisconsin	WI	N							.0	
51. Wyoming	WY	N							.0	
52. American Samoa	AS	N							.0	
53. Guam	GU	N							.0	
54. Puerto Rico	PR	N							.0	
55. U.S. Virgin Islands	VI	N							.0	
56. Northern Mariana Islands	MP	N							.0	
57. Canada	CAN	N							.0	
58. Aggregate other alien	OT	XXX	.0	.0	.0	.0	.0	.0	.0	.0
59. Subtotal	XXX	.0	114,607,505	.0	.0	.0	.0	.0	114,607,505	.0
60. Reporting entity contributions for Employee Benefit Plans	XXX								.0	
61. Total (Direct Business)	XXX	0	114,607,505	0	0	0	0	0	114,607,505	0
DETAILS OF WRITE-INS										
58001.	XXX									
58002.	XXX									
58003.	XXX									
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX	0	0	0	0	0	0	0	0	.0

(a) Active Status Counts

1. L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG1

2. R – Registered – Non-domiciled RRGs0

3. E – Eligible – Reporting entities eligible or approved to write surplus lines in the state0
4. Q – Qualified – Qualified or accredited reinsurer0

5. N – None of the above – Not allowed to write business in the state.....56

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Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group-Part 1 Organizational Chart

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

	California Health and Wellness Plan									46-0907261	CA	
	Western Sky Community Care, Inc.									45-5583511	NM	16351
	Tennessee Total Care, Inc.									26-1849394	TN	
	SilverSummit Healthplan, Inc.									20-4761189	NV	16143
	University Health Plans, Inc.									22-3292245	NJ	
	Agate Resources, Inc.									20-0483299	OR	
	Trillium Community Health Plan, Inc.									42-1694349	OR	12559
	Nebraska Total Care, Inc.									47-5123293	NE	15902
	Pennsylvania Health & Wellness, Inc.									47-5340613	PA	16041
	Ambetter Health of Pennsylvania, Inc.									33-3859301	PA	
	Sunshine Health Community Solutions, Inc.									47-5667095	VA	15927
	Buckeye Health Plan Community Solutions, Inc.									47-5664342	OH	16112
	Arkansas Health & Wellness Health Plan, Inc.									81-1282251	AR	16130
	Arkansas Total Care Holding Company, LLC (49%)									38-4042368	DE	
	Arkansas Total Care, Inc.									82-2649097	AR	16256
	Bridgeway Health Solutions, LLC									20-4980875	DE	
	Bridgeway Health Solutions of Arizona, Inc.									20-4980818	AZ	16310
	Celtic Group, Inc.									36-2979209	DE	
	Celtic Insurance Company									06-0641618	IL	80799
	Ambetter of Magnolia Inc.									35-2525384	MS	15762
	Ambetter of Peach State Inc.									36-4802632	GA	15729
	Ambetter Health of Louisiana, Inc.									92-3523808	LA	17514
	Novasys Health, Inc.									27-2221367	DE	
	Centene Management Company LLC									39-1864073	WI	
	Illinois Health Practice Alliance, LLC (50%)									82-2761995	DE	
	Lifeshare Management Group, LLC									46-2798132	NH	
	Envolve Holdings, LLC									22-3889471	DE	
	Cenpatico Behavioral Health, LLC									68-0461584	CA	

Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group-Part 1 Organizational Chart

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

		Envolve, Inc.									37-1788565	DE	
		Envolve Benefit Options, Inc.									61-1846191	DE	
			Envolve Vision Benefits, Inc.								20-4730341	DE	
				Envolve Vision of Texas, Inc.							75-2592153	TX	95302
				Envolve Vision, Inc.							20-4773088	DE	
				Envolve Vision of Florida, Inc.							65-0094759	FL	
				Envolve Total Vision, Inc.							20-4861241	DE	
				Envolve Dental, Inc.							46-2783884	DE	
				Envolve Dental of Florida, Inc.							81-2969330	FL	
				Envolve Dental of Texas, Inc.							81-2796896	TX	16106
				Centene Pharmacy Services, Inc.							77-0578529	DE	
				MeridianRx, LLC							27-1339224	MI	
				Specialty Therapeutic Care Holdings, LLC							27-3617766	DE	
				Presonyx, Inc.							80-0856383	DE	
				AcariaHealth, Inc.							45-2780334	DE	
				AcariaHealth Pharmacy #14, Inc.							27-1599047	CA	
				AcariaHealth Pharmacy #11, Inc.							20-8192615	TX	
				AcariaHealth Pharmacy #12, Inc.							27-2765424	NY	
				AcariaHealth Pharmacy #13, Inc.							26-0226900	CA	
				AcariaHealth Pharmacy, Inc.							13-4262384	CA	
				Homescripts.Com, LLC							27-3707698	MI	
				Foundation Care LLC (80%)							20-0873587	MO	
				AcariaHealth Pharmacy #26, Inc.							20-8420512	DE	
				Health Net, LLC							47-5208076	DE	
				Health Net of California, Inc.							95-4402957	CA	
				Health Net Life Insurance Company							73-0654885	CA	66141
				Health Net Life Reinsurance Company							98-0409907	CJ	
				MEB Ventures II, LLC							83-1570018	DE	

Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group-Part 1 Organizational Chart

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

			BLR Properties, LLC (80%)							83-1576137	DE	
		Managed Health Network, LLC								95-4117722	DE	
			Managed Health Network							95-3817988	CA	
			MHN Services, LLC							95-4146179	CA	
		Health Net Federal Services, LLC								68-0214809	DE	
			Network Providers, LLC							88-0357895	DE	
		Health Net Health Plan of Oregon, Inc.								93-1004034	OR	95800
		Health Net Community Solutions, Inc.								54-2174068	CA	NA
		Health Net of Arizona, Inc.								36-3097810	AZ	95206
		Health Net Community Solutions of Arizona, Inc.								81-1348826	AZ	15895
	Centene Health Plan Holdings, Inc.									82-1172163	DE	
		Ambetter of North Carolina, Inc.								82-5032556	NC	16395
		Carolina Complete Health Holding Company Partnership (80%)								82-2699483	DE	
			Carolina Complete Health, Inc.							82-2699332	NC	16526
	New York Quality Healthcare Corporation									82-3380290	NY	16352
		WellCare of Connecticut, Inc.								06-1405640	CT	95310
	Community Medical Holdings Corp.									47-4179393	DE	
		Access Medical Acquisition, LLC								46-3485489	DE	
			Access Medical Group of North Miami Beach, LLC							45-3191569	FL	
			Access Medical Group of Miami, LLC							45-3191719	FL	
			Access Medical Group of Hialeah, LLC							45-3192283	FL	
			Access Medical Group of Westchester, LLC							45-3199819	FL	
			Access Medical Group of Opa-Locka, LLC							45-3505196	FL	
			Access Medical Group of Perrine, LLC							45-3192955	FL	
			Access Medical Group of Florida City, LLC							45-3192366	FL	
			Access Medical Group of Tampa, LLC							82-1737078	FL	
			Access Medical Group of Tampa II, LLC							82-1750978	FL	
			Access Medical Group of Tampa III, LLC							82-1773315	FL	

Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group-Part 1 Organizational Chart

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

			Access Medical Group of Lakeland, LLC						84-2750188	FL	
			Access Medical Group of Pembroke Pines, LLC						88-2251274	FL	
			Access Medical Group of Margate, LLC						88-2263310	FL	
			Access Medical Group of Riverview, LLC						88-2284518	FL	
			Access Medical Group of Kendall, LLC						92-0235557	FL	
			Access Medical Group of Lauderdale Lakes, LLC						92-0261029	FL	
			Access Medical Group of Sand Lake, LLC						33-2792794	FL	
			Access Medical Group of Miami Medicare, LLC						39-2435871	FL	
			Access Medical Group of Hillsborough Peds, LLC						39-2463326	FL	
	Interpreta Holdings, Inc. (80.1%)								82-4883921	DE	
		Interpreta, Inc.							46-5517858	DE	
	Next Door Neighbors, LLC								32-2434596	DE	
		Next Door Neighbors, Inc.							83-2381790	DE	
			Centene Venture Company Alabama Health Plan, Inc.						84-3707689	AL	16771
			Centene Venture Company Illinois						83-2425735	IL	16505
			Centene Venture Company Kansas						83-2409040	KS	16528
			Centene Venture Company Florida						83-2434596	FL	16499
			Centene Venture Company Indiana, Inc.						84-3679376	IN	16773
			Centene Venture Company Tennessee						84-3724374	TN	16770
			Centene Venture Insurance Company Texas						86-1543217	TX	16990
			Centene Venture Company Michigan						83-2446307	MI	16613
	Comprehensive Health Management, LLC								59-3547616	FL	
	WellCare Health Plans, Inc.								83-4405939	DE	
		WCG Health Management, Inc.							04-3669698	DE	
			The WellCare Management Group, Inc.						14-1647239	NY	
			WellCare of Mississippi, Inc.						81-5442932	MS	16329
			WellCare of Virginia, Inc.						82-0664467	VA	
			WellCare of Oklahoma, Inc.						81-3299281	OK	16117

Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group-Part 1 Organizational Chart

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

				WellCare Health Insurance Company of Nevada, Inc.					84-3731013	NV	
				WellCare Health Insurance of the Southwest, Inc.					84-3739752	AZ	16692
				WellCare of Georgia, Inc.					20-2103320	GA	10760
				WellCare of Texas, Inc.					20-8058761	TX	12964
				WellCare of South Carolina, Inc.					32-0062883	SC	11775
				WellCare Health Plans of New Jersey, Inc.					20-8017319	NJ	13020
				WellCare of Pennsylvania, Inc.					81-1631920	PA	
				WellCare Health Plans of Massachusetts, Inc.					84-3547689	MA	16970
				WellCare Health Insurance Company of Oklahoma, Inc.					84-4449030	OK	16752
				WellCare Health Plans of Missouri, Inc.					84-3907795	MO	16753
				WellCare Prescription Insurance, Inc.					20-2383134	AZ	10155
				WellCare Health Insurance of Hawaii, Inc.					84-4664883	HI	17002
				WellCare Health Plans of Rhode Island, Inc.					84-4627844	RI	16766
				WellCare of Illinois, Inc.					84-4649985	IL	16765
				Rhythm Health Tennessee, Inc.					45-5154364	TN	16533
				WellCare Health Insurance of New York, Inc.					11-3197523	NY	10884
				Ohana Health Plan, Inc.					27-0386122	HI	
				WellCare of Indiana, Inc.					83-2840051	IN	
				America's 1st Choice California Holdings, LLC					45-3236788	FL	
				WellCare of California, Inc.					20-5327501	CA	
				WellCare Health Insurance of Tennessee, Inc.					83-2276159	TN	16532
				WellCare of New Hampshire, Inc.					83-2914327	NH	16515
				WellCare Health Plans of Vermont, Inc.					83-2255514	VT	16514
				WellCare Health Insurance of Connecticut, Inc.					83-2126269	CT	16513
				WellCare of Washington, Inc.					83-2069308	WA	16571
				WellCare Health Plans of Kentucky, Inc.					47-0971481	KY	15510
				WellCare of Alabama, Inc.					82-1301128	AL	16239
				WellCare of Maine, Inc.					82-3114517	ME	16344

Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group-Part 1 Organizational Chart

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

				Harmony Health Systems, Inc.						22-3391045	NJ	
				Harmony Health Plan, Inc.						36-4050495	IL	11229
				WellCare Health Insurance Company of Kentucky, Inc.						36-6069295	KY	64467
				WellCare Health Insurance of Arizona, Inc.						86-0269558	AZ	83445
				WellCare Health Insurance of North Carolina, Inc.						83-3493160	NC	16548
				WellCare Health Insurance Company of Louisiana, Inc.						83-3333918	LA	16788
				WellCare of Missouri Health Insurance Company, Inc.						83-3525830	MO	16512
				One Care by Care1st Health Plan of Arizona, Inc.						06-1742685	AZ	
				WellCare Health Insurance Company of Washington, Inc.						83-3166908	WA	16570
				WellCare of North Carolina, Inc.						82-5488080	NC	16547
				WellCare Health Insurance Company of America						82-4247084	AR	16343
				WellCare National Health Insurance Company						82-5127096	TX	16342
				WellCare Health Insurance Company of New Hampshire, Inc.						83-3091673	NH	16516
				Wellcare Health Insurance Company of New Jersey, Inc.						84-4709471	NJ	16789
				WellCare of Michigan Holding Company						26-4004578	MI	
				Meridian Health Plan of Michigan, Inc.						38-3253977	MI	52563
				Meridian Health Plan of Illinois, Inc.						20-3209671	IL	13189
				Sunshine State Health Plan, Inc. (50%)						20-8937577	FL	13148
				Universal American Corp.						27-4683816	DE	
				Universal American Holdings, LLC						45-1352914	DE	
				American Progressive Life and Health Insurance Company of New York						13-1851754	NY	80624
				Heritage Health Systems, Inc.						62-1517194	TX	
				SelectCare of Texas, Inc.						62-1819658	TX	10096
				Heritage Health Systems of Texas, Inc.						76-0459857	TX	
	QCA Health Plan, Inc.									71-0794605	AR	95448
	Qualchoice Life and Health Insurance Company, Inc.									71-0386640	AR	70998
	District Community Care, Inc.									84-4119570	DC	16814
	Oklahoma Complete Health Holding Company, LLC									86-2318658	OK	

Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group-Part 1 Organizational Chart

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

		Oklahoma Complete Health, Inc.									81-3121527	OK	16904
		RI Health & Wellness, Inc.									86-2694770	RI	
		Delaware First Health, Inc.									88-3410060	DE	
		Delaware First Health Complete, Inc.									88-4145615	DE	
		Magellan Health, Inc.									58-1076937	DE	
		Magellan Pharmacy Services, Inc.									47-5588795	DE	
			Magellan Behavioral Health of New Jersey, LLC								52-2310906	NJ	12632
			Magellan Health Services of California, Inc. - Employer Services								95-2868243	CA	
		Magellan Healthcare, Inc.									52-2135463	DE	
			Human Affairs International of California								93-0999350	CA	
			Magellan Complete Care of Louisiana, Inc.								46-4188169	LA	15550
			Magellan Behavioral Health of Florida, Inc.								20-1919978	FL	
			Magellan Health Services of Arizona, Inc.								20-1728452	AZ	
			Magellan Health Services of New Mexico, Inc.								85-0420095	NM	
			Magellan of Idaho, LLC								85-4065417	ID	
			Magellan Complete Care of Pennsylvania, Inc.								46-4457706	PA	15924
			Magellan Life Insurance Company								57-0724249	DE	97292
			Merit Behavioral Care Corporation								22-3236927	DE	
			Magellan Providers of Texas, Inc.								76-0513383	TX	
			Magellan Behavioral Health of Pennsylvania, Inc.								23-2759528	PA	47019
			Magellan Behavioral of Michigan, Inc.								52-1946167	MI	
			Magellan of Maryland, LLC								92-0642038	MD	
		Magnolia Joint Venture Holding Company, Inc.									92-0679069	DE	
		Ambetter Health of Texas, Inc.									33-1995487	TX	
		Ambetter Health of Florida, Inc.									33-2010592	FL	

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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? (Yes/No)	*
01295.....	Centene Corporation.....	00000.....	42-1406317.....		0001071739.....	New York Stock Exchange.....	Centene Corporation..... Bankers Reserve Life Insurance Company of Wisconsin.....	DE.....	UIP.....	Shareholders/Board of Directors.....	Shareholders/Board of Directors.....	100.0.....	Centene Corporation..... Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	71013.....	39-0993433.....				Health Plan Real Estate Holding, Inc.....	WI.....	IA.....	Centene Corporation..... Bankers Reserve Life Insurance Company of Wisconsin.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Peach State Health Plan, Inc..... Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Centene Corporation..... Peach State Health Plan, Inc.....	Ownership.....	17.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	YES.....	0.....
01295.....	Centene Corporation.....	12315.....	20-3174593.....				Iowa Total Care, Inc..... Buckeye Community Health Plan, Inc.....	GA.....	IA.....	Centene Corporation..... Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Peach State Health Plan, Inc.....	Ownership.....	21.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	YES.....	0.....
01295.....	Centene Corporation.....	15713.....	46-4829006.....				Health Plan Real Estate Holding, Inc.....	IA.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	11834.....	32-0045282.....				Health Plan Real Estate Holding, Inc.....	OH.....	IA.....	Centene Corporation..... Buckeye Community Health Plan, Inc.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Absolute Total Care, Inc..... Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Centene Corporation..... Absolute Total Care, Inc.....	Ownership.....	18.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	YES.....	0.....
01295.....	Centene Corporation.....	12959.....	20-5693998.....				Coordinated Care Corporation..... Health Plan Real Estate Holding, Inc.....	SC.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Healthy Washington Holdings, Inc..... Coordinated Care of Washington, Inc.....	MO.....	NIA.....	Centene Corporation..... Coordinated Care of Washington, Inc.....	Ownership.....	1.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	YES.....	0.....
01295.....	Centene Corporation.....	95831.....	39-1821211.....				Managed Health Services Insurance Corp..... Health Plan Real Estate Holding, Inc.....	IN.....	IA.....	Centene Corporation..... Managed Health Services Insurance Corp.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Superior HealthPlan, Inc..... Health Plan Real Estate Holding, Inc.....	OH.....	NIA.....	Centene Corporation..... Superior HealthPlan, Inc.....	Ownership.....	15.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	YES.....	0.....
01295.....	Centene Corporation.....	00000.....	46-5523218.....				Healthy Louisiana Holdings LLC..... Louisiana Healthcare Connections, Inc.....	DE.....	NIA.....	Centene Corporation..... Healthy Louisiana Holdings LLC.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	15352.....	46-2578279.....				Magnolia Health Plan Inc.....	WA.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	96822.....	39-1678579.....				Sunshine Health Holding LLC.....	WI.....	IA.....	Centene Corporation..... Managed Health Services Insurance Corp.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Sunshine State Health Plan, Inc.....	MO.....	NIA.....	Centene Corporation..... Sunshine Health Holding LLC.....	Ownership.....	2.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	YES.....	0.....
01295.....	Centene Corporation.....	95647.....	74-2770542.....					TX.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....					MO.....	NIA.....	Superior HealthPlan, Inc.....	Ownership.....	21.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	YES.....	0.....
01295.....	Centene Corporation.....	00000.....	27-0916294.....					DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	13970.....	27-1287287.....					LA.....	IA.....	Healthy Louisiana Holdings LLC.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	13923.....	20-8570212.....					MS.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	26-0557093.....					FL.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation..... Centene Corporation..... Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	13148.....	20-8937577.....					FL.....	IA.....	Sunshine Health Holding LLC.....	Ownership.....	50.0.....	Centene Corporation.....	NO.....	0.....

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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? (Yes/No)	*
01295.....	Centene Corporation.....	00000.....	45-5070230.....				Healthy Missouri Holding, Inc.....	MO.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	14218.....	45-2798041.....				Home State Health Plan, Inc.....	MO.....	IA.....	Healthy Missouri Holding, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	46-2860967.....				Health Plan Real Estate Holding, Inc.....	MO.....	NIA.....	Home State Health Plan, Inc.....	Ownership.....	5.0.....	Centene Corporation.....	YES.....	0.....
01295.....	Centene Corporation.....	14345.....	45-3276702.....				Sunflower State Health Plan, Inc.....	KS.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	14226.....	45-4792498.....				Granite State Health Plan, Inc.....	NH.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	46-0907261.....				California Health and Wellness Plan.....	CA.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	16351.....	45-5583511.....				Western Sky Community Care, Inc.....	NM.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	26-1849394.....				Tennessee Total Care, Inc.....	TN.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	16143.....	20-4761189.....				SilverSummit Healthplan, Inc.....	NV.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	22-3292245.....				University Health Plans, Inc.....	NJ.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	20-0483299.....				Agate Resources, Inc.....	OR.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	12559.....	42-1694349.....				Trillium Community Health Plan, Inc.....	OR.....	IA.....	Agate Resources, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	15902.....	47-5123293.....				Nebraska Total Care, Inc.....	NE.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	16041.....	47-5340613.....				Pennsylvania Health & Wellness, Inc.....	PA.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	33-3859301.....				Ambetter Health of Pennsylvania, Inc.....	PA.....	NIA.....	Pennsylvania Health & Wellness, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	15927.....	47-5667095.....				Sunshine Health Community Solutions, Inc.....	VA.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	16112.....	47-5664342.....				Buckeye Health Plan Community Solutions, Inc.....	OH.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	16130.....	81-1282251.....				Arkansas Health & Wellness Health Plan, Inc.....	AR.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	38-4042368.....				Arkansas Total Care Holding Company, LLC.....	DE.....	NIA.....	Arkansas Health & Wellness Health Plan, Inc.....	Ownership.....	49.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	16256.....	82-2649097.....				Arkansas Total Care, Inc.....	AR.....	IA.....	Arkansas Total Care Holding Company, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	20-4980875.....				Bridgeway Health Solutions, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	16310.....	20-4980818.....				Bridgeway Health Solutions of Arizona Inc.....	AZ.....	IA.....	Bridgeway Health Solutions, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	36-2979209.....				Celtic Group, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	80799.....	06-0641618.....				Celtic Insurance Company.....	IL.....	IA.....	Celtic Group, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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? (Yes/No)	*
01295.....	Centene Corporation.....	15762.....	35-2525384.....	.....	.....	.....	Ambetter of Magnolia Inc.....	MS.....	IA.....	Celtic Insurance Company.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	15729.....	36-4802632.....	.....	.....	.....	Ambetter of Peach State Inc.....	GA.....	IA.....	Celtic Insurance Company.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	17514.....	92-3523808.....	.....	.....	.....	Ambetter Health of Louisiana, Inc.....	LA.....	IA.....	Celtic Group, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	27-2221367.....	.....	.....	.....	Novasys Health, Inc.....	DE.....	NIA.....	Celtic Group, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	39-1864073.....	.....	.....	.....	Centene Management Company LLC.....	WI.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	82-2761995.....	.....	.....	.....	Illinois Health Practice Alliance, LLC.....	DE.....	NIA.....	Centene Management Company LLC.....	Ownership.....	50.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	46-2798132.....	.....	.....	.....	Lifeshare Management Group, LLC.....	NH.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	22-3889471.....	.....	.....	.....	Envolve Holdings, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	68-0461584.....	.....	.....	.....	Cenpatico Behavioral Health, LLC.....	CA.....	NIA.....	Envolve Holdings, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	37-1788565.....	.....	.....	.....	Envolve, Inc.....	DE.....	NIA.....	Envolve Holdings, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	61-1846191.....	.....	.....	.....	Envolve Benefits Options, Inc.....	DE.....	NIA.....	Envolve Holdings, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	20-4730341.....	.....	.....	.....	Envolve Vision Benefits, Inc.....	DE.....	NIA.....	Envolve Benefits Options, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	95302.....	75-2592153.....	.....	.....	.....	Envolve Vision of Texas, Inc.....	TX.....	IA.....	Envolve Vision Benefits, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	20-4773088.....	.....	.....	.....	Envolve Vision, Inc.....	DE.....	NIA.....	Envolve Vision Benefits, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	65-0094759.....	.....	.....	.....	Envolve Vision of Florida, Inc.....	FL.....	NIA.....	Envolve Vision Benefits, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	20-4861241.....	.....	.....	.....	Envolve Total Vision, Inc.....	DE.....	NIA.....	Envolve Vision Benefits, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	46-2783884.....	.....	.....	.....	Envolve Dental, Inc.....	DE.....	NIA.....	Envolve Benefits Options, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	81-2969330.....	.....	.....	.....	Envolve Dental of Florida, Inc.....	FL.....	NIA.....	Envolve Dental, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	16106.....	81-2796896.....	.....	.....	.....	Envolve Dental of Texas, Inc.....	TX.....	IA.....	Envolve Dental, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	77-0578529.....	.....	.....	.....	Centene Pharmacy Services, Inc.....	DE.....	NIA.....	Envolve Holdings, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	27-1339224.....	.....	.....	.....	MeridianRx, LLC.....	MI.....	NIA.....	Centene Pharmacy Services, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	27-3617766.....	.....	.....	.....	Specialty Therapeutic Care Holdings, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	80-0856383.....	.....	.....	.....	Presonyx, Inc.....	DE.....	NIA.....	Specialty Therapeutic Care Holdings, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....
01295.....	Centene Corporation.....	00000.....	45-2780334.....	.....	.....	.....	AcariaHealth, Inc.....	DE.....	NIA.....	Specialty Therapeutic Care Holdings, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	.0.....

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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? (Yes/No)	*
01295.....	Centene Corporation.....	00000.....	27-1599047.....				AcariaHealth Pharmacy #14, Inc.....	CA.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	20-8192615.....				AcariaHealth Pharmacy #11, Inc.....	TX.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	27-2765424.....				AcariaHealth Pharmacy #12, Inc.....	NY.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	26-0226900.....				AcariaHealth Pharmacy #13, Inc.....	CA.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	13-4262384.....				AcariaHealth Pharmacy, Inc.....	CA.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	27-3707698.....				HomeScripts.com, LLC.....	MI.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	20-0873587.....				Foundation Care LLC.....	MO.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	80.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	20-8420512.....				AcariaHealth Pharmacy #26, Inc.....	DE.....	NIA.....	AcariaHealth, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	47-5208076.....				Health Net, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	95-4402957.....				Health Net of California, Inc.....	CA.....	NIA.....	Health Net, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	66141.....	73-0654885.....				Health Net Life Insurance Company.....	CA.....	IA.....	Health Net of California, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	98-0409907.....				Health Net Life Reinsurance Company.....	CYM.....	NIA.....	Health Net of California, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	83-1570018.....				MEB Ventures II, LLC.....	DE.....	NIA.....	Health Net of California, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	83-1576137.....				BLR Properties, LLC.....	DE.....	NIA.....	MEB Ventures II, LLC.....	Ownership.....	80.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	95-4117722.....				Managed Health Network, LLC.....	DE.....	NIA.....	Health Net, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	95-3817988.....				Managed Health Network.....	CA.....	NIA.....	Managed Health Network, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	95-4146179.....				MHN Services, LLC.....	CA.....	NIA.....	Managed Health Network, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	68-0214809.....				Health Net Federal Services, LLC.....	DE.....	NIA.....	Health Net, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	88-0357895.....				Network Providers, LLC.....	DE.....	NIA.....	Health Net Federal Services, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	95800.....	93-1004034.....				Health Net Health Plan of Oregon, Inc.....	OR.....	IA.....	Health Net, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	54-2174068.....				Health Net Community Solutions, Inc.....	CA.....	NIA.....	Health Net, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	95206.....	36-3097810.....				Health Net of Arizona, Inc.....	AZ.....	IA.....	Health Net, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	15895.....	81-1348826.....				Health Net Community Solutions of Arizona, Inc.....	AZ.....	IA.....	Health Net, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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? (Yes/No)	*
01295.....	Centene Corporation.....	00000.....	82-1172163.....				Centene Health Plan Holdings, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	16395.....	82-5032556.....				Ambetter of North Carolina, Inc.....	NC.....	IA.....	Centene Health Plan Holdings, Inc.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	82-2699483.....				Carolina Complete Health Holding Company Partnership.....	DE.....	NIA.....	Centene Health Plan Holdings, Inc.....	Ownership.....	80.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	16526.....	82-2699332.....				Carolina Complete Health, Inc.....	NC.....	IA.....	Carolina Complete Health Holding Company Partnership.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	16352.....	82-3380290.....				New York Quality Healthcare Corporation.....	NY.....	IA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	95310.....	06-1405640.....				WellCare of Connecticut, Inc.....	CT.....	IA.....	New York Quality Healthcare Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	47-4179393.....				Community Medical Holdings Corp.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	46-3485489.....				Access Medical Acquisition, LLC.....	DE.....	NIA.....	Community Medical Holdings Corp.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	45-3191569.....				Access Medical Group of North Miami Beach, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	45-3191719.....				Access Medical Group of Miami, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	45-3192283.....				Access Medical Group of Hialeah, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	45-3199819.....				Access Medical Group of Westchester, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	45-3505196.....				Access Medical Group of Opa-Locka, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	45-3192955.....				Access Medical Group of Perrine, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	45-3192366.....				Access Medical Group of Florida City, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	82-1737078.....				Access Medical Group of Tampa, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	82-1750978.....				Access Medical Group of Tampa II, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	82-1773315.....				Access Medical Group of Tampa III, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	84-2750188.....				Access Medical Group of Lakeland, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	88-2251274.....				Access Medical Group of Pembroke Pines, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	88-2263310.....				Access Medical Group of Margate, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	88-2284518.....				Access Medical Group of Riverview, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	92-0235557.....				Access Medical Group of Kendall, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....
01295.....	Centene Corporation.....	00000.....	92-0261029.....				Access Medical Group of Lauderdale Lakes, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0.....	Centene Corporation.....	NO.....	0.....

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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? (Yes/No)	*
01295.....	Centene Corporation.....	00000.....	33-2792794.....				Access Medical Group of Sand Lake, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	39-2435871.....				Access Medical Group of Miami Medicare, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	39-2463326.....				Access Medical Group of Hillsborough Peds, LLC.....	FL.....	NIA.....	Access Medical Acquisition, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	82-4883921.....				Interpreta Holdings, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	80.1	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	46-5517858.....				Interpreta, Inc.....	DE.....	NIA.....	Interpreta Holdings, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	32-2434596.....				Next Door Neighbors, LLC.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	83-2381790.....				Next Door Neighbors, Inc.....	DE.....	NIA.....	Next Door Neighbors, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16771.....	84-3707689.....				Centene Venture Company Alabama Health Plan, Inc.....	AL.....	IA.....	Next Door Neighbors, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16505.....	83-2425735.....				Centene Venture Company Illinois.....	IL.....	IA.....	Next Door Neighbors, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16528.....	83-2409040.....				Centene Venture Company Kansas.....	KS.....	IA.....	Next Door Neighbors, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16499.....	83-2434596.....				Centene Venture Company Florida.....	FL.....	IA.....	Next Door Neighbors, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16773.....	84-3679376.....				Centene Venture Company Indiana, Inc.....	IN.....	IA.....	Next Door Neighbors, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16770.....	84-3724374.....				Centene Venture Company Tennessee.....	TN.....	IA.....	Next Door Neighbors, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16990.....	86-1543217.....				Centene Venture Insurance Company Texas.....	TX.....	IA.....	Next Door Neighbors, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16613.....	83-2446307.....				Centene Venture Company Michigan.....	MI.....	IA.....	Next Door Neighbors, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	59-3547616.....				Comprehensive Health Management, LLC.....	FL.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	83-4405939.....				WellCare Health Plans, Inc.....	DE.....	UIP.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	04-3669698.....				WCG Health Management, Inc.....	DE.....	UIP.....	WellCare Health Plans, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	14-1647239.....				The WellCare Management Group, Inc.....	NY.....	UDP.....	WCG Health Management, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16329.....	81-5442932.....				WellCare of Mississippi, Inc.....	MS.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	82-0664467.....				WellCare of Virginia, Inc.....	VA.....	NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16117.....	81-3299281.....				WellCare of Oklahoma, Inc.....	OK.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	84-3731013.....				WellCare Health Insurance Company of Nevada, Inc.....	NV.....	NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16692.....	84-3739752.....				WellCare Health Insurance of the Southwest, Inc.....	AZ.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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? (Yes/No)	*
01295.....	Centene Corporation.....	10760.....	20-2103320.....				WellCare of Georgia, Inc.....	GA.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	12964.....	20-8058761.....				WellCare of Texas, Inc.....	TX.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	11775.....	32-0062883.....				WellCare of South Carolina, Inc.....	SC.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	13020.....	20-8017319.....				WellCare Health Plans of New Jersey, Inc.....	NJ.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	81-1631920.....				WellCare of Pennsylvania, Inc.....	PA.....	NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16970.....	84-3547689.....				WellCare Health Plans of Massachusetts, Inc.....	MA.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16752.....	84-4449030.....				WellCare Health Insurance Company of Oklahoma, Inc.....	OK.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16753.....	84-3907795.....				WellCare Health Plans of Missouri, Inc.....	MO.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	10155.....	20-2383134.....				WellCare Prescription Insurance, Inc.....	AZ.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	17002.....	84-4664883.....				WellCare Health Insurance of Hawaii, Inc.....	HI.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16766.....	84-4627844.....				WellCare Health Plans of Rhode Island, Inc.....	RI.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16765.....	84-4649985.....				WellCare of Illinois, Inc.....	IL.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16533.....	45-5154364.....				Rhythm Health Tennessee, Inc.....	TN.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	10884.....	11-3197523.....				WellCare Health Insurance of New York, Inc.....	NY.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	27-0386122.....				Ohana Health Plan, Inc.....	HI.....	NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	83-2840051.....				WellCare of Indiana, Inc.....	IN.....	NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	45-3236788.....				America's 1st Choice California Holdings, LLC.....	FL.....	NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	20-5327501.....				WellCare of California, Inc.....	CA.....	NIA.....	America's 1st Choice California Holdings, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16532.....	83-2276159.....				WellCare Health Insurance of Tennessee, Inc.....	TN.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16515.....	83-2914327.....				WellCare of New Hampshire, Inc.....	NH.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16514.....	83-2255514.....				WellCare Health Plans of Vermont, Inc.....	VT.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16513.....	83-2126269.....				WellCare Health Insurance of Connecticut, Inc.....	CT.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16571.....	83-2069308.....				WellCare of Washington, Inc.....	WA.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	15510.....	47-0971481.....				WellCare Health Plans of Kentucky, Inc.....	KY.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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? (Yes/No)	*
01295.....	Centene Corporation.....	16239.....	82-1301128.....	.....	.....	.....	WellCare of Alabama, Inc.....	AL.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	16344.....	82-3114517.....	.....	.....	.....	WellCare of Maine, Inc.....	ME.....	RE.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	00000.....	22-3391045.....	.....	.....	.....	Harmony Health Systems Inc.....	NJ.....	NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	11229.....	36-4050495.....	.....	.....	.....	Harmony Health Plan, Inc.....	IL.....	IA.....	Harmony Health Systems Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	64467.....	36-6069295.....	.....	.....	.....	WellCare Health Insurance Company of Kentucky, Inc.....	KY.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	83445.....	86-0269558.....	.....	.....	.....	WellCare Health Insurance of Arizona, Inc.....	AZ.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	16548.....	83-3493160.....	.....	.....	.....	WellCare Health Insurance of North Carolina, Inc.....	NC.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	16788.....	83-3333918.....	.....	.....	.....	WellCare Health Insurance Company of Louisiana, Inc.....	LA.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	16512.....	83-3525830.....	.....	.....	.....	WellCare of Missouri Health Insurance Company, Inc.....	MO.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	00000.....	06-1742685.....	.....	.....	.....	One Care by Care1st Health Plans of Arizona, Inc.....	AZ.....	NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	16570.....	83-3166908.....	.....	.....	.....	WellCare Health Insurance Company of Washington, Inc.....	WA.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	16547.....	82-5488080.....	.....	.....	.....	WellCare of North Carolina, Inc.....	NC.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	16343.....	82-4247084.....	.....	.....	.....	WellCare Health Insurance Company of America.....	AR.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	16342.....	82-5127096.....	.....	.....	.....	WellCare National Health Insurance Company.....	TX.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	16516.....	83-3091673.....	.....	.....	.....	WellCare Health Insurance Company of New Hampshire, Inc.....	NH.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	16789.....	84-4709471.....	.....	.....	.....	Wellcare Health Insurance Company of New Jersey, Inc.....	NJ.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	00000.....	26-4004578.....	.....	.....	.....	WellCare of Michigan Holding Company.....	MI.....	NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	52563.....	38-3253977.....	.....	.....	.....	Meridian Health Plan of Michigan, Inc.....	MI.....	IA.....	WellCare of Michigan Holding Company.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	13189.....	20-3209671.....	.....	.....	.....	Meridian Health Plan of Illinois, Inc.....	IL.....	IA.....	WellCare of Michigan Holding Company.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	13148.....	20-8937577.....	.....	.....	.....	Sunshine State Health Plan, Inc.....	FL.....	IA.....	The WellCare Management Group, Inc.....	Ownership.....	50.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	00000.....	27-4683816.....	.....	.....	.....	Universal American Corp.....	DE.....	NIA.....	The WellCare Management Group, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	00000.....	45-1352914.....	.....	.....	.....	Universal American Holdings, LLC.....	DE.....	NIA.....	Universal American Corp.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0
01295.....	Centene Corporation.....	80624.....	13-1851754.....	.....	.....	.....	American Progressive Life and Health Insurance Company of New York.....	NY.....	IA.....	Universal American Holdings, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	0

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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? (Yes/No)	*
01295.....	Centene Corporation.....	00000.....	62-1517194.....				Heritage Health Systems, Inc.....	TX.....	NIA.....	Universal American Holdings, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	10096.....	62-1819658.....				SelectCare of Texas, Inc.....	TX.....	IA.....	Heritage Health Systems, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	76-0459857.....				Heritage Health Systems of Texas, Inc.....	TX.....	NIA.....	Heritage Health Systems, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	95448.....	71-0794605.....				QCA Healthplan, Inc.....	AR.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	70998.....	71-0386640.....				Qualchoice Life and Health Insurance Company.....	AR.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16814.....	84-4119570.....				District Community Care Inc.....	DC.....	IA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	86-2318658.....				Oklahoma Complete Health Holding Company, LLC.....	OK.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	16904.....	81-3121527.....				Oklahoma Complete Health Inc.....	OK.....	IA.....	Oklahoma Complete Health Holding Company, LLC.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	86-2694770.....				RI Health & Wellness, Inc.....	RI.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	88-3410060.....				Delaware First Health, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	88-4145615.....				Delaware First Health Complete, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	58-1076937.....				Magellan Health, Inc.....	DE.....	NIA.....	Centene Corporation.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	47-5588795.....				Magellan Pharmacy Services, Inc.....	DE.....	NIA.....	Magellan Health, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	12632.....	52-2310906.....				Magellan Behavioral Health of New Jersey, LLC.....	NJ.....	IA.....	Magellan Pharmacy Services, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	95-2868243.....				Magellan Health Services of California, Inc. - Employer Services.....	CA.....	NIA.....	Magellan Pharmacy Services, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	52-2135463.....				Magellan Healthcare, Inc.....	DE.....	NIA.....	Magellan Health, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	93-0999350.....				Human Affairs International of California.....	CA.....	NIA.....	Magellan Healthcare, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	15550.....	46-4188169.....				Magellan Complete Care of Louisiana, Inc.....	LA.....	IA.....	Magellan Healthcare, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	20-1919978.....				Magellan Behavioral Health of Florida, Inc.....	FL.....	NIA.....	Magellan Healthcare, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	20-1728452.....				Magellan Health Services of Arizona, Inc.....	AZ.....	NIA.....	Magellan Healthcare, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	85-0420095.....				Magellan Health Services of New Mexico, Inc.....	NM.....	NIA.....	Magellan Healthcare, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	00000.....	85-4065417.....				Magellan of Idaho, LLC.....	ID.....	NIA.....	Magellan Healthcare, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0
01295.....	Centene Corporation.....	15924.....	46-4457706.....				Magellan Complete Care of Pennsylvania, Inc.....	PA.....	IA.....	Magellan Healthcare, Inc.....	Ownership.....	100.0	Centene Corporation.....	NO.....	.0

16.9

Asterisk	Explanation
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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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

Explanation:

Bar Code:

1.



16344202536500002

OVERFLOW PAGE FOR WRITE-INS

SCHEDULE A – VERIFICATION

Real Estate

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

SCHEDULE B – VERIFICATION

Mortgage Loans

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

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets

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

SCHEDULE D – VERIFICATION

Bonds and Stocks

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	29,555,771	29,171,053
2. Cost of bonds and stocks acquired	1,847,658	2,488,698
3. Accrual of discount	34,471	68,625
4. Unrealized valuation increase/(decrease)		0
5. Total gain (loss) on disposals	(6,196)	(4,604)
6. Deduct consideration for bonds and stocks disposed of	2,558,229	1,916,904
7. Deduct amortization of premium	115,735	251,098
8. Total foreign exchange change in book/adjusted carrying value		0
9. Deduct current year's other-than-temporary impairment recognized		0
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees		0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	28,757,740	29,555,771
12. Deduct total nonadmitted amounts	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	28,757,740	29,555,771

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

SCHEDULE D - PART 1B

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
ISSUER CREDIT OBLIGATIONS (ICO)								
1. NAIC 1 (a).....	11,580,423	121,913	120,000	694,476	11,580,423	12,276,811	0	10,895,146
2. NAIC 2 (a).....	6,373,767		247,541	(739,905)	6,373,767	5,386,321	0	8,046,789
3. NAIC 3 (a).....	1,002,687		1,010,000	7,313	1,002,687	0	0	0
4. NAIC 4 (a).....	0				0	0	0	0
5. NAIC 5 (a).....	0				0	0	0	0
6. NAIC 6 (a).....	0				0	0	0	0
7. Total ICO	18,956,876	121,913	1,377,541	(38,116)	18,956,876	17,663,132	0	18,941,935
ASSET-BACKED SECURITIES (ABS)								
8. NAIC 1	11,151,936	200,000	263,922	6,593	11,151,936	11,094,607	0	10,613,835
9. NAIC 2	0				0	0	0	0
10. NAIC 3	0				0	0	0	0
11. NAIC 4	0				0	0	0	0
12. NAIC 5	0				0	0	0	0
13. NAIC 6	0				0	0	0	0
14. Total ABS.....	11,151,936	200,000	263,922	6,593	11,151,936	11,094,607	0	10,613,835
PREFERRED STOCK								
15. NAIC 1	0				0	0	0	0
16. NAIC 2	0				0	0	0	0
17. NAIC 3	0				0	0	0	0
18. NAIC 4	0				0	0	0	0
19. NAIC 5	0				0	0	0	0
20. NAIC 6	0				0	0	0	0
21. Total Preferred Stock.....	0	0	0	0	0	0	0	0
22. Total ICO, ABS & Preferred Stock	30,108,812	321,913	1,641,464	(31,522)	30,108,812	28,757,739	0	29,555,770

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

Schedule DA - Part 1

NONE

Schedule DA - Verification

NONE

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

SCHEDULE E – PART 2 – VERIFICATION
(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	2,425,151	3,088,645
2. Cost of cash equivalents acquired	108,998,683	126,750,372
3. Accrual of discount		0
4. Unrealized valuation increase/(decrease)		0
5. Total gain (loss) on disposals.....		0
6. Deduct consideration received on disposals	95,804,290	127,413,866
7. Deduct amortization of premium		0
8. Total foreign exchange change in book/adjusted carrying value		0
9. Deduct current year's other-than-temporary impairment recognized		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	15,619,544	2,425,151
11. Deduct total nonadmitted amounts		0
12. Statement value at end of current period (Line 10 minus Line 11)	15,619,544	2,425,151

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE

E04

E04

E04

E04

E05

E05

E05

E05

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

SCHEDULE D - PART 4

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

1 CUSIP Identifi- cation	2 Description	3 Disposal Date	4 Name of Purchaser	5 Number of Shares of Stock	6 Consideration	7 Par Value	8 Actual Cost	9 Prior Year Book/Adjusted Carrying Value	Change in Book/Adjusted Carrying Value					15 Book/ Adjusted Carrying Value at Disposal Date	16 Foreign Exchange Gain (Loss) on Disposal	17 Realized Gain (Loss) on Disposal	18 Total Gain (Loss) on Disposal	19 Bond Interest/Stock Dividends Received During Year	20 Stated Contractual Maturity Date	21 NAIC Designation, NAIC Desig. Modifier and SVO Administrative Symbol
									10 Unrealized Valuation Increase/ (Decrease)	11 Current Year's (Amortization)/ Accretion	12 Current Year's Other-Than- Temporary Impairment Recognized	13 Total Change in B./A.C.V. (10+11-12)	14 Total Foreign Exchange Change in B./A.C.V.							
29375N-AB-1	EFF 232 A2 - ABS	.06/20/2025	Paydown	XXX	19,576	19,576	19,573	19,575		2		2		19,576		0	0	448	.04/22/2030	1.A FE
1519999999 - Asset-Backed Securities - Non-Financial Asset-Backed Securities – Practical Expedient - Lease-Backed Securities – Practical Expedient (Unaffiliated)					19,576	19,576	19,573	19,575	0	2	0	2	0	19,576	0	0	0	448	XXX	XXX
1889999999 - Subtotal - Asset-Backed Securities (Unaffiliated)					263,533	263,533	259,925	250,291	0	5,079	0	5,079	0	263,922	0	(389)	(389)	3,217	XXX	XXX
1909999997 - Subtotals - Asset-Backed Securities - Part 4					263,533	263,533	259,925	250,291	0	5,079	0	5,079	0	263,922	0	(389)	(389)	3,217	XXX	XXX
1909999999 - Subtotals - Asset-Backed Securities					263,533	263,533	259,925	250,291	0	5,079	0	5,079	0	263,922	0	(389)	(389)	3,217	XXX	XXX
2009999999 - Subtotals - Issuer Credit Obligations and Asset-Backed Securities					1,637,533	1,637,533	1,698,150	1,634,243	0	(1,331)	0	(1,331)	0	1,641,464	0	(3,931)	(3,931)	20,279	XXX	XXX

E05.1

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DB - Part E

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

STATEMENT AS OF JUNE 30, 2025 OF THE WellCare of Maine, Inc.

SCHEDULE E - PART 1 - CASH

[illegible]

SCHEDULE E - PART 2 - CASH EQUIVALENTS

[illegible]