

Refiling Actuarial Certification due to wording changes and the addition of Change in Appointed Actuary letter.



ANNUAL STATEMENT
FOR THE YEAR ENDING DECEMBER 31, 2013
OF THE CONDITION AND AFFAIRS OF THE

HealthSpan Integrated Care

NAIC Group Code	00000	,	00601	NAIC Company Code	95204	Employer's ID Number	34-0922268
	(Current Period)		(Prior Period)				
Organized under the Laws of	Ohio			State of Domicile or Port of Entry	Ohio		
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 [X] No []						
Incorporated/Organized	03/29/1962			Commenced Business	10/27/1976		
Statutory Home Office	1001 Lakeside Ave. Suite 1200			,	Cleveland, OH, US 44114-1153		
	(Street and Number)				(City or Town, State, Country and Zip Code)		
Main Administrative Office	1001 Lakeside Ave. Suite 1200						
	Cleveland, OH, US 44114-1153				216-621-5600		
	(City or Town, State, Country and Zip Code)				(Area Code) (Telephone Number)		
Mail Address	1001 Lakeside Ave. Suite 1200			,	Cleveland, OH, US 44114-1153		
	(Street and Number or P.O. Box)				(City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	1001 Lakeside Ave. Suite 1200						
	(Street and Number)						
	Cleveland, OH, US 44114-1153				216-621-5600		
	(City or Town, State, Country and Zip Code)				(Area Code) (Telephone Number) (Extension)		
Internet Web Site Address	HealthSpan.org						
Statutory Statement Contact	William Trexler			,	216-479-5116		
	(Name)				(Area Code) (Telephone Number) (Extension)		
	WLTrexler@healthspan.org				216-623-8793		
	(E-Mail Address)				(Fax Number)		

OFFICERS

Name	Title	Name	Title
Kenneth Page	President (effective 10/1/2013)	Dave Nowiski	Treasurer
Robert Campbell	Secretary (effective 10/1/2013)		

OTHER OFFICERS

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DIRECTORS OR TRUSTEES

Evan M. Benjamin MD (effective 10/1/2013)	Michael D. Connelly JD, FACHE (effective 10/1/2013)	Cathleen P. Eldridge (effective 10/1/2013)	Geraldine M. Hoyler CSC, CPA (effective 10/1/2013)
David C. Leach MD (effective 10/1/2013)	Joel A. Levine JD (effective 10/1/2013)	James C. Patton CPA (effective 10/1/2013)	Katherine W. Vestal PhD (effective 10/1/2013)
Gloria Ysai-Diaz (effective 10/1/2013)			

State of OH
County of Cuyahoga

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.

Kenneth Page President (effective 10/1/2013)	Dave Nowiski Treasurer	
Subscribed and sworn to before me this day of ,		a. Is this an original filing? Yes [] No [X] b. If no: 1. State the amendment number 1 2. Date filed 06/04/2014 3. Number of pages attached 5