

NAIC Consistency / Texual issues

Pg's 14, 22, 23, 440, 455



ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2013
OF THE CONDITION AND AFFAIRS OF THE
OHA INSURANCE SOLUTIONS, INC

NAIC Group Code	0000	(Current Period)	0000	(Prior Period)	NAIC Company Code	11841	Employer's ID Number	41-2111662
Organized under the Laws of	Ohio				State of Domicile or Port of Entry			Ohio
Country of Domicile	United States							
Incorporated/Organized	10/17/2003				Commenced Business			01/01/2004
Statutory Home Office	155 EAST BROAD STREET Suite 302				COLUMBUS, OH, US 43215-3619			
	(Street and Number)				(City or Town, State, Country and Zip Code)			
Main Administrative Office	155 EAST BROAD STREET Suite 302				COLUMBUS, OH, US 43215-3619			614-255-4840-140
	(Street and Number)				(City or Town, State, Country and Zip Code)			(Area Code) (Telephone Number)
Mail Address	155 EAST BROAD STREET Suite 302				COLUMBUS, OH, US 43215-3619			
	(Street and Number or P.O. Box)				(City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	155 EAST BROAD STREET Suite 302				COLUMBUS, OH, US 43215-3619			614-255-4840-140
	(Street and Number)				(City or Town, State, Country and Zip Code)			(Area Code) (Telephone Number)
Internet Website Address	WWW.OHAINSURANCE.COM							
Statutory Statement Contact	Ralph E Burnheimer				614-255-4840-140			
	(Name)				(Area Code) (Telephone Number) (Extension)			
	rburnheimer@ohainsurance.com				614-255-4839			
	(E-mail Address)				(Fax Number)			

OFFICERS

Name	Title	Name	Title
Gregg L. Hanson #	Chair, Chief Executive Officer & President	Richard G. Hayes #	Vice President, Treasurer
Amy T. Irish #	Vice President, Assistant Treasurer & Secretary	Mary L. Ursul #	Senior Vice President

OTHER OFFICERS

Wayne T. Zack #	Senior Vice President	Bradley D Lonsberry #	Vice President
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DIRECTORS OR TRUSTEES

Gregg L. Hanson #	Richard G Hayes #	Mary L. Ursul #	Wayne T. Zack #
Bradley D. Lonsberry #			

State ofMA.....

County ofSuffolk..... 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.

Gregg L. Hanson Chair, Chief Executive Officer & President	Richard G. Hayes Treasurer, Vice President	Amy T. Irish Vice President, Asst Treasurer & Secretary
Subscribed and sworn to before me this 01 day of 03, 2014		a. Is this an original filing? Yes [X] No [] b. If no, 1. State the amendment number 2. Date filed 02/28/2014 3. Number of pages attached
Catherine M. Gorman Notary Public March 7, 2014		

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHA INSURANCE SOLUTIONS, INC

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (000 Omitted)

1	2	3	4	5	6	Reinsurance Recoverable On								Reinsurance Payable		18	19		
						7	8	9	10	11	12	13	14	15	16			17	
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Reinsurance Contracts Ceding 75% or More of Direct Premiums Written	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commis- sions	Cols. 7 thru 14 Totals	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable From Reinsurers Cols. 15 - [16 + 17]	Funds Held By Company Under Reinsurance Treaties	
0499999 - Total - Authorized - Affiliates - U.S. Non-Pool														0			0		
0799999 - Total - Authorized - Affiliates - Other (Non-U.S.)														0			0		
0899999 - Total - Authorized - Affiliates						0	0	0	0	0	0	0	0	0	0	0	0	0	0
47-0698507	23680	Odyssey American Reinsurance Corp.	CT		344			213	5	1,199	192	54		1,662	325		1,338		
52-1952955	10357	Platium Underwriters Reinsurance Inc.	MD		152			188	4	1,226	136	29		1,582	55		1,526		
13-5616275	19453	Transatlantic Reinsurance Company	NY		308	7	1	88	2	791	165	37		1,091	336		754		
13-3031176	38636	Partner Reinsurance Company of the US	NY					0	0	102	18			119	35		84		
42-0635534	15865	NCMIC Insurance Company	IA					0	0	71	17			88	27		62		
75-1444207	30058	SCOR Reinsurance Company	NY		326	7	1	0	0	361	74	45		488	183		305		
13-3138390	42307	Navigators Re	NY		109			0	0	78	14	15		107	40		66		
0999998 - Other U.S. Unaffil Insurers (Under \$100,000)														0			0		
0999999 - Authorized - Other U.S. Unaffiliated Insurers						1,240	14	2	488	11	3,827	615	180	5,137	1,002		4,135		
AA-1120337		Aspen Insurance UK Ltd.	GBR		293			209	5	1,226	191	45		1,675	304		1,372		
AA-1126190		Lloyd's Syndicate # 190 (FRW)	GBR							9	1			10	5		5		
AA-1126435		Lloyd's Syndicate # 435 (FDY)	GBR		424				0	1,127	178	63		1,367	293		1,074		
AA-1126566		Lloyd's Syndicate # 566 (STN)	GBR		267				0	644	119	35		798	223		576		
AA-1127200		Lloyd's Syndicate # 1200 (HMA)	GBR							165	28			193	47		146		
AA-1128000		Lloyd's Syndicate # 1955 (BAR)	GBR		172				0	404	85	27		516	187		329		
AA-1120084		Lloyd's Syndicate # 2000 (HAR)	GBR					98	2	67	8			175	3		173		
AA-1128001		Lloyd's Syndicate # 2001 (AML)	GBR		129				0	268	59	14		341	115		226		
AA-1128003		Lloyd's Syndicate # 2003 (SJC)	GBR		431			68	2	1,054	198	55		1,378	376		1,002		
AA-1128488		Lloyd's Syndicate # 2488 (AGM)	GBR					51	1	7	1			60	8		53		
AA-1128791		Lloyd's Syndicate # 2791 (MAP)	GBR							200	23			222	3		219		
AA-1128987		Lloyd's Syndicate # 2987 (BRT)	GBR		76					221	24	14		260	25		235		
AA-1128020		Lloyd's Syndicate # 4020 (ARK)	GBR		379				0	874	189	45		1,108	388		720		
AA-1126006		Lloyd's Syndicate # 4472 (LIB)	GBR		461			147	4	1,289	230	61		1,731	408		1,323		
AA-1340125		Hannover Ru.	DEU							0	0			0	3		(3)		
AA-3194129		Montpelier Re	BMU					77	2	46	5			130			130		
1299998 - Authorized - Other Non-U.S. Insurers (Under \$100,000)														0			0		
1299999 - Authorized - Other Non-U.S. Insurers						2,632		651	16	7,600	1,339	359		9,965	2,387		7,578		
1399999 - Total - Authorized						3,872	14	2	1,139	28	11,426	1,954	539	0	15,103	3,389	0	11,713	0
1799999 - Total - Unauthorized - Affiliates - U.S. Non-Pool														0			0		
2099999 - Total - Unauthorized - Affiliates - Other (Non-U.S.)														0			0		
2199999 - Total - Unauthorized - Affiliates						0	0	0	0	0	0	0	0	0	0	0	0	0	
2299998 - Unauthorized - Other U.S. Unaffiliated Insurers (Under \$100,000)														0			0		
AA-1320034		Paris Re	FRA							91	20			111	46		65		
AA-1120146		Alea London Re	GBR							39	4			44	5		39		
AA-3194161		Catlin Insurance Ltd.	BMU		348			111	3	1,033	177	48		1,372	307		1,064		
AA-1120481		QBE Reinsurance (Europe) Ltd.	GBE							29	3			32	5		27		
AA-3190795		American Safety Reinsurance Ltd.	BMU		131	2	0		0	218	41	18		280	83		197		
2599998 - Unauthorized - Other Non-U.S. Insurers (Under \$100,000)														0			0		
2599999 - Unauthorized - Other Non-U.S. Insurers						479	2	0	111	3	1,410	246	67	1,839	445		1,393		
2699999 - Total - Unauthorized						479	2	0	111	3	1,410	246	67	0	1,839	445	0	1,393	0
3099999 - Total - Certified - Affiliates - U.S. Non-Pool														0			0		
3399999 - Total - Certified - Affiliates - Other (Non-U.S.)														0			0		
3499999 - Total Certified - Affiliates						0	0	0	0	0	0	0	0	0	0	0	0	0	0
3599998 - Certified - Other U.S. Unaffiliated Insurers (Under \$100,000)														0			0		
3899998 - Certified - Other Non-U.S. Insurers (under \$100,000)														0			0		
3999999 - Total Certified						0	0	0	0	0	0	0	0	0	0	0	0	0	0
4099999 - Total Authorized, Unauthorized and Certified						4,351	17	2	1,250	30	12,836	2,200	606	0	16,941	3,834	0	13,107	0

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHA INSURANCE SOLUTIONS, INC

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (000 Omitted)																		
1	2	3	4	5	6	Reinsurance Recoverable On									Reinsurance Payable		18	19
						7	8	9	10	11	12	13	14	15	16	17		
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Reinsurance Contracts Ceding 75% or More of Direct Premiums Written	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commis- sions	Cols. 7 thru 14 Totals	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable From Reinsurers Cols. 15 - [16 + 17]	Funds Held By Company Under Reinsurance Treaties
4199999 - Total Protected Cells														0			0	
9999999 Totals					4,351	17	2	1,250	30	12,836	2,200	606	0	16,941	3,834	0	13,107	0

NOTE: Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000:

1

Name of Reinsurer

2

Commission Rate

3

Ceded Premium

1.

2.

3.

4.

5.

Report the five largest reinsurance recoverables reported in Column 15, due from any one reinsurer (based on the total recoverables, Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

1

Name of Reinsurer

2

Total Recoverables

3

Ceded Premiums

4

Affiliated

1.

Lloyd's Syndicate # 4472 (LIB).....1,730,855461,304 Yes [] No [X]

2.

Aspen Insurance UK Ltd.....1,675,419293,484 Yes [] No [X]

3.

Odyssey American Reinsurance Corp.....1,662,328344,121 Yes [] No [X]

4.

Platium Underwriters Reinsurance Inc.....1,581,732151,911 Yes [] No [X]

5.

Lloyd's syndicate # 2003 (SJC).....1,378,106430,922 Yes [] No [X]

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHA INSURANCE SOLUTIONS, INC

SCHEDULE F - PART 4

Aging of Ceded Reinsurance as of December 31, Current Year (000 Omitted)

1	2	3	4	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							12	13
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	5	Overdue					11	Percentage Overdue Col. 10/Col. 11	Percentage more Than 120 Days Overdue Col. 9 / Col. 11
				Current	6	7	8	9	10	Total Due Cols. 5 + 10		
0199999 - Authorized - Affiliates - U.S. Intercompany Pooling											0.0	0.0
0299999 - Authorized - Affiliates - U.S. Non-Pool - Captive											0.0	0.0
0399999 - Authorized - Affiliates - U.S. Non-Pool - Other											0.0	0.0
0499999 - Total - Authorized - Affiliates - U.S. Non-Pool									0	0	0.0	0.0
0599999 - Authorized - Affiliates - Other (Non-U.S.) - Captive											0.0	0.0
0699999 - Authorized - Affiliates - Other (Non-U.S.) - Other											0.0	0.0
0799999 - Total - Authorized - Affiliates - Other (Non-U.S.)									0	0	0.0	0.0
0899999 - Total - Authorized - Affiliates				0	0	0	0	0	0	0	0.0	0.0
13-5616275.....		19453.....Transatlantic Reinsurance Company.....	NY		8				8	8	100.0	0.0
75-1444207.....		30058.....SCOR Reinsurance Company.....	NY		8				8	8	100.0	0.0
0999999 - Authorized - Other U.S. Unaffiliated Insurers					16				16	16	100.0	0.0
1099999 - Authorized - Pools - Mandatory Pools											0.0	0.0
1199999 - Authorized - Pools - Voluntary Pools											0.0	0.0
1299999 - Authorized - Other Non-U.S. Insurers											0.0	0.0
1399999 - Total - Authorized				0	16	0	0	0	16	16	100.0	0.0
1499999 - Unauthorized - Affiliates - U.S. Intercompany Pooling											0.0	0.0
1599999 - Unauthorized - Affiliates - U.S. Non-Pool - Captive											0.0	0.0
1699999 - Unauthorized - Affiliates - U.S. Non-Pool - Other											0.0	0.0
1799999 - Total - Unauthorized - Affiliates - U.S. Non-Pool									0	0	0.0	0.0
1899999 - Unauthorized - Affiliates - Other (Non-U.S.) - Captive											0.0	0.0
1999999 - Unauthorized - Affiliates - Other (Non-U.S.) - Other											0.0	0.0
2099999 - Total - Unauthorized - Affiliates - Other (Non-U.S.)									0	0	0.0	0.0
2199999 - Total - Unauthorized - Affiliates				0	0	0	0	0	0	0	0.0	0.0
2299999 - Unauthorized - Other U.S. Unaffiliated Insurers											0.0	0.0
2399999 - Unauthorized - Pools - Mandatory Pools											0.0	0.0
2499999 - Unauthorized - Pools - Voluntary Pools											0.0	0.0
AA-3190795.....		American Safety Reinsurance Ltd.....	BMU		2	0			2	2	100.0	0.0
2599999 - Unauthorized - Other Non-U.S. Insurers					2	0			2	2	100.0	0.0
2699999 - Total - Unauthorized				0	2	0	0	0	2	2	100.0	0.0
2799999 - Certified - Affiliates - U.S. Intercompany Pooling											0.0	0.0
2899999 - Certified - Affiliates - U.S Non-Pool - Captive											0.0	0.0
2999999 - Certified - Affiliates - U.S Non-Pool - Other											0.0	0.0
3099999 - Total - Certified - Affiliates - U.S. Non-Pool									0	0	0.0	0.0
3199999 - Certified - Affiliates - Other (Non-U.S.) - Captive											0.0	0.0
3299999 - Certified - Affiliates - Other (Non-U.S.) - Other											0.0	0.0
3399999 - Total - Certified - Affiliates - Other (Non-U.S.)									0	0	0.0	0.0
3499999 - Total - Certified - Affiliates				0	0	0	0	0	0	0	0.0	0.0
3599999 - Certified - Other U.S. Unaffiliated Insurers											0.0	0.0
3699999 - Certified - Pools - Mandatory Pools											0.0	0.0
3799999 - Certified - Pools - Voluntary Pools											0.0	0.0
3899999 - Certified - Other Non-U.S. Insurers											0.0	0.0
3999999 - Total - Certified				0	0	0	0	0	0	0	0.0	0.0
4099999 - Total - Authorized, Unauthorized and Certified				0	19	0	0	0	19	19	100.0	0.0
4199999 - Total - Protected Cells									0	0	0.0	0.0
9999999 Totals				0	19	0	0	0	19	19	100.0	0.0

SUPPLEMENT FOR DECEMBER 31, 2013 OF THE OHA INSURANCE SOLUTIONS, INC

Designate the type of health care providers
reported on this page
Physicians

SUPPLEMENT "A" TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

States, Etc.		1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
				3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama	AL								
2. Alaska	AK								
3. Arizona	AZ								
4. Arkansas	AR								
5. California	CA								
6. Colorado	CO								
7. Connecticut	CT								
8. Delaware	DE								
9. District of Columbia	DC								
10. Florida	FL								
11. Georgia	GA								
12. Hawaii	HI								
13. Idaho	ID								
14. Illinois	IL								
15. Indiana	IN								
16. Iowa	IA								
17. Kansas	KS								
18. Kentucky	KY								
19. Louisiana	LA								
20. Maine	ME								
21. Maryland	MD								
22. Massachusetts	MA								
23. Michigan	MI								
24. Minnesota	MN								
25. Mississippi	MS								
26. Missouri	MO								
27. Montana	MT								
28. Nebraska	NE								
29. Nevada	NV								
30. New Hampshire	NH								
31. New Jersey	NJ								
32. New Mexico	NM								
33. New York	NY								
34. North Carolina	NC								
35. North Dakota	ND								
36. Ohio	OH	2,785,653	2,499,045	1,476,000	3	580,598	1,160,005	10	2,454,142
37. Oklahoma	OK								
38. Oregon	OR								
39. Pennsylvania	PA								
40. Rhode Island	RI								
41. South Carolina	SC								
42. South Dakota	SD								
43. Tennessee	TN								
44. Texas	TX								
45. Utah	UT								
46. Vermont	VT								
47. Virginia	VA								
48. Washington	WA								
49. West Virginia	WV								
50. Wisconsin	WI								
51. Wyoming	WY								
52. American Samoa	AS								
53. Guam	GU								
54. Puerto Rico	PR								
55. U.S. Virgin Islands	VI								
56. Northern Mariana Islands	MP								
57. Canada	CAN								
58. Aggregate other alien	OT	0	0	0	0	0	0	0	0
59. Totals		2,785,653	2,499,045	1,476,000	3	580,598	1,160,005	10	2,454,142
DETAILS OF WRITE-INS									
58001.									
58002.									
58003.									
58998.	Sum. of remaining write-ins for Line 58 from overflow page	0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	0	0	0	0	0	0	0	0



SUPPLEMENT FOR DECEMBER 31, 2013 OF THE OHA INSURANCE SOLUTIONS, INC

Designate the type of health care providers
reported on this page
Hospitals

SUPPLEMENT "A" TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

States, Etc.		1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
				3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama	AL								
2. Alaska	AK								
3. Arizona	AZ								
4. Arkansas	AR								
5. California	CA								
6. Colorado	CO								
7. Connecticut	CT								
8. Delaware	DE								
9. District of Columbia	DC								
10. Florida	FL								
11. Georgia	GA								
12. Hawaii	HI								
13. Idaho	ID								
14. Illinois	IL								
15. Indiana	IN								
16. Iowa	IA								
17. Kansas	KS								
18. Kentucky	KY								
19. Louisiana	LA								
20. Maine	ME								
21. Maryland	MD								
22. Massachusetts	MA								
23. Michigan	MI								
24. Minnesota	MN								
25. Mississippi	MS								
26. Missouri	MO								
27. Montana	MT								
28. Nebraska	NE								
29. Nevada	NV								
30. New Hampshire	NH								
31. New Jersey	NJ								
32. New Mexico	NM								
33. New York	NY								
34. North Carolina	NC								
35. North Dakota	ND								
36. Ohio	OH	2,750,523	2,800,700	2,444,083	7	1,690,825	2,970,010	37	4,734,607
37. Oklahoma	OK								
38. Oregon	OR								
39. Pennsylvania	PA								
40. Rhode Island	RI								
41. South Carolina	SC								
42. South Dakota	SD								
43. Tennessee	TN								
44. Texas	TX								
45. Utah	UT								
46. Vermont	VT								
47. Virginia	VA								
48. Washington	WA								
49. West Virginia	WV								
50. Wisconsin	WI								
51. Wyoming	WY								
52. American Samoa	AS								
53. Guam	GU								
54. Puerto Rico	PR								
55. U.S. Virgin Islands	VI								
56. Northern Mariana Islands	MP								
57. Canada	CAN								
58. Aggregate other alien	OT	0	0	0	0	0	0	0	0
59. Totals		2,750,523	2,800,700	2,444,083	7	1,690,825	2,970,010	37	4,734,607
DETAILS OF WRITE-INS									
58001.									
58002.									
58003.									
58998. Sum. of remaining write-ins for Line 58 from overflow page		0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)		0	0	0	0	0	0	0	0



SUPPLEMENT FOR DECEMBER 31, 2013 OF THE OHA INSURANCE SOLUTIONS, INC

Designate the type of health care providers reported on this page
Other Health Care Professionals

SUPPLEMENT "A" TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

States, Etc.		1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
				3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama	AL								
2. Alaska	AK								
3. Arizona	AZ								
4. Arkansas	AR								
5. California	CA								
6. Colorado	CO								
7. Connecticut	CT								
8. Delaware	DE								
9. District of Columbia	DC								
10. Florida	FL								
11. Georgia	GA								
12. Hawaii	HI								
13. Idaho	ID								
14. Illinois	IL								
15. Indiana	IN								
16. Iowa	IA								
17. Kansas	KS								
18. Kentucky	KY								
19. Louisiana	LA								
20. Maine	ME								
21. Maryland	MD								
22. Massachusetts	MA								
23. Michigan	MI								
24. Minnesota	MN								
25. Mississippi	MS								
26. Missouri	MO								
27. Montana	MT								
28. Nebraska	NE								
29. Nevada	NV								
30. New Hampshire	NH								
31. New Jersey	NJ								
32. New Mexico	NM								
33. New York	NY								
34. North Carolina	NC								
35. North Dakota	ND								
36. Ohio	OH								
37. Oklahoma	OK								
38. Oregon	OR								
39. Pennsylvania	PA								
40. Rhode Island	RI								
41. South Carolina	SC								
42. South Dakota	SD								
43. Tennessee	TN								
44. Texas	TX								
45. Utah	UT								
46. Vermont	VT								
47. Virginia	VA								
48. Washington	WA								
49. West Virginia	WV								
50. Wisconsin	WI								
51. Wyoming	WY								
52. American Samoa	AS								
53. Guam	GU								
54. Puerto Rico	PR								
55. U.S. Virgin Islands	VI								
56. Northern Mariana Islands	MP								
57. Canada	CAN								
58. Aggregate other alien	OT	0	0	0	0	0	0	0	0
59. Totals		0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS									
58001.									
58002.									
58003.									
58998.	Sum. of remaining write-ins for Line 58 from overflow page	0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	0	0	0	0	0	0	0	0



SUPPLEMENT FOR DECEMBER 31, 2013 OF THE OHA INSURANCE SOLUTIONS, INC

Designate the type of health care providers
reported on this page
Other Health Care Facilities

SUPPLEMENT "A" TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

States, Etc.		1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
				3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1.	Alabama	AL							
2.	Alaska	AK							
3.	Arizona	AZ							
4.	Arkansas	AR							
5.	California	CA							
6.	Colorado	CO							
7.	Connecticut	CT							
8.	Delaware	DE							
9.	District of Columbia	DC							
10.	Florida	FL							
11.	Georgia	GA							
12.	Hawaii	HI							
13.	Idaho	ID							
14.	Illinois	IL							
15.	Indiana	IN							
16.	Iowa	IA							
17.	Kansas	KS							
18.	Kentucky	KY							
19.	Louisiana	LA							
20.	Maine	ME							
21.	Maryland	MD							
22.	Massachusetts	MA							
23.	Michigan	MI							
24.	Minnesota	MN							
25.	Mississippi	MS							
26.	Missouri	MO							
27.	Montana	MT							
28.	Nebraska	NE							
29.	Nevada	NV							
30.	New Hampshire	NH							
31.	New Jersey	NJ							
32.	New Mexico	NM							
33.	New York	NY							
34.	North Carolina	NC							
35.	North Dakota	ND							
36.	Ohio	OH							
37.	Oklahoma	OK							
38.	Oregon	OR							
39.	Pennsylvania	PA							
40.	Rhode Island	RI							
41.	South Carolina	SC							
42.	South Dakota	SD							
43.	Tennessee	TN							
44.	Texas	TX							
45.	Utah	UT							
46.	Vermont	VT							
47.	Virginia	VA							
48.	Washington	WA							
49.	West Virginia	WV							
50.	Wisconsin	WI							
51.	Wyoming	WY							
52.	American Samoa	AS							
53.	Guam	GU							
54.	Puerto Rico	PR							
55.	U.S. Virgin Islands	VI							
56.	Northern Mariana Islands	MP							
57.	Canada	CAN							
58.	Aggregate other alien	OT	0	0	0	0	0	0	0
59.	Totals	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS									
58001.									
58002.									
58003.									
58998.	Sum. of remaining write-ins for Line 58 from overflow page	0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	0	0	0	0	0	0	0	0