



PROPERTY AND CASUALTY COMPANIES—ASSOCIATION EDITION

**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 (Street and Number)		COLUMBUS, OH, US 43215-3619 (City or Town, State, Country and Zip Code)			
Main Administrative Office	155 EAST BROAD STREET Suite 302 (Street and Number)		COLUMBUS, OH, US 43215-3619 (City or Town, State, Country and Zip Code)		614-255-4840-140 (Area Code) (Telephone Number)	
Mail Address	155 EAST BROAD STREET Suite 302 (Street and Number or P.O. Box)		COLUMBUS, OH, US 43215-3619 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	155 EAST BROAD STREET Suite 302 (Street and Number)		COLUMBUS, OH, US 43215-3619 (City or Town, State, Country and Zip Code)		614-255-4840-140 (Area Code) (Telephone Number)	
Internet Website Address	WWW.OHAINSURANCE.COM					
Statutory Statement Contact	Ralph E Burnheimer (Name)		614-255-4840-140 (Area Code) (Telephone Number) (Extension)			
	rburnheimer@ohainsurance.com (E-mail Address)		614-255-4839 (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

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? b. If no, 1. State the amendment number 2. Date filed 3. Number of pages attached	Yes [X] No [] 02/28/2014

Catherine M. Gorman Notary Public
March 7, 2014



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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0000	BUSINESS IN THE STATE OF Ohio		DURING THE YEAR 2013						NAIC Company Code 11841		
		Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11
Line of Business		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability	5,536,176	5,299,745		2,097,230	3,920,083	1,521,423	11,318,765	1,002,025	1,493,772	4,643,861	399,147	5,903
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability - Occurrence												
17.2 Other Liability - Claims-Made	2,788,877	2,817,122		528,240	750,000	(53,529)	118,863	(25,622)	26,597	1,164,738	201,072	2,974
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
30. Warranty												
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a)	8,325,053	8,116,867	0	2,625,470	4,670,083	(29,989)	21,971,079	1,011,641	1,328,405	5,835,196	600,220	8,877
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0 .

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0000	BUSINESS IN THE STATE OF Consolidated				DURING THE YEAR 2013				NAIC Company Code 11841			
		Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
Line of Business													
1. Fire		0	0	.0	0	0	0	0	.0	0	0	0	.0
2.1 Allied lines		0	0	.0	0	0	0	0	.0	0	0	0	.0
2.2 Multiple peril crop		0	0	.0	0	0	0	0	.0	0	0	0	.0
2.3 Federal flood		0	0	.0	0	0	0	0	.0	0	0	0	.0
3. Farmowners multiple peril		0	0	.0	0	0	0	0	.0	0	0	0	.0
4. Homeowners multiple peril		0	0	.0	0	0	0	0	.0	0	0	0	.0
5.1 Commercial multiple peril (non-liability portion)		0	0	.0	0	0	0	0	.0	0	0	0	.0
5.2 Commercial multiple peril (liability portion)		0	0	.0	0	0	0	0	.0	0	0	0	.0
6. Mortgage guaranty		0	0	.0	0	0	0	0	.0	0	0	0	.0
8. Ocean marine		0	0	.0	0	0	0	0	.0	0	0	0	.0
9. Inland marine		0	0	.0	0	0	0	0	.0	0	0	0	.0
10. Financial guaranty		0	0	.0	0	0	0	0	.0	0	0	0	.0
11. Medical professional liability	5,536,176	5,299,745	0	2,097,230	3,920,083	1,521,423	.11,318,765	1,002,025	1,493,772	4,643,861	399,147	5,903	
12. Earthquake		0	0	.0	0	0	0	0	0	0	0	0	.0
13. Group accident and health (b)		0	0	.0	0	0	0	0	0	0	0	0	.0
14. Credit A & H (group and individual)		0	0	.0	0	0	0	0	0	0	0	0	.0
15.1 Collectively renewable A & H (b)		0	0	.0	0	0	0	0	0	0	0	0	.0
15.2 Non-cancelable A & H (b)		0	0	.0	0	0	0	0	0	0	0	0	.0
15.3 Guaranteed renewable A & H (b)		0	0	.0	0	0	0	0	0	0	0	0	.0
15.4 Non-renewable for stated reasons only (b)		0	0	.0	0	0	0	0	0	0	0	0	.0
15.5 Other accident only		0	0	.0	0	0	0	0	0	0	0	0	.0
15.6 Medicare Title XVIII exempt from state taxes or fees		0	0	.0	0	0	0	0	0	0	0	0	.0
15.7 All other A & H (b)		0	0	.0	0	0	0	0	0	0	0	0	.0
15.8 Federal Employees Health Benefits Plan premium (b)		0	0	.0	0	0	0	0	0	0	0	0	.0
16. Workers' compensation		0	0	.0	0	0	0	0	0	0	0	0	.0
17.1 Other liability - Occurrence		0	0	.0	0	0	(53,529)	.118,863	0	(25,622)	.26,597	0	.0
17.2 Other Liability - Claims-Made	2,788,877	2,817,122	0	528,240	.750,000	(1,497,863)	10,533,451	.9,616	(139,745)	1,164,738	201,072	.2,974	
17.3 Excess workers' compensation		0	0	.0	0	0	0	0	0	0	0	0	.0
18. Products liability		0	0	.0	0	0	0	0	0	0	0	0	.0
19.1 Private passenger auto no-fault (personal injury protection)		0	0	.0	0	0	0	0	0	0	0	0	.0
19.2 Other private passenger auto liability		0	0	.0	0	0	0	0	0	0	0	0	.0
19.3 Commercial auto no-fault (personal injury protection)		0	0	.0	0	0	0	0	0	0	0	0	.0
19.4 Other commercial auto liability		0	0	.0	0	0	0	0	0	0	0	0	.0
21.1 Private passenger auto physical damage		0	0	.0	0	0	0	0	0	0	0	0	.0
21.2 Commercial auto physical damage		0	0	.0	0	0	0	0	0	0	0	0	.0
22. Aircraft (all perils)		0	0	.0	0	0	0	0	0	0	0	0	.0
23. Fidelity		0	0	.0	0	0	0	0	0	0	0	0	.0
24. Surety		0	0	.0	0	0	0	0	0	0	0	0	.0
26. Burglary and theft		0	0	.0	0	0	0	0	0	0	0	0	.0
27. Boiler and machinery		0	0	.0	0	0	0	0	0	0	0	0	.0
28. Credit		0	0	.0	0	0	0	0	0	0	0	0	.0
30. Warranty		0	0	.0	0	0	0	0	0	0	0	0	.0
34. Aggregate write-ins for other lines of business		0	0	.0	0	0	0	0	0	0	0	0	.0
35. TOTALS (a)	8,325,053	8,116,867	0	2,625,470	4,670,083	(29,989)	21,971,079	1,011,641	1,328,405	5,835,196	600,220	8,877	
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	.0	0	0	0	0	0	0	0	0	0	.0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	.0	0	0	0	0	0	0	0	0	0	.0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0 .

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products

.....0 and number of persons insured under indemnity only products

.....0

Schedule F - Part 1
NONE

Schedule F - Part 2
NONE

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 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Reinsurance Contracts Ceding 75% or More of Direct Premiums Written	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Cols. 15 - [16 + 17]	19 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commiss- sions	15 Cols. 7 thru 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers			
049999 - Total - Authorized - Affiliates - U.S. Non-Pool															0			0	
079999 - Total - Authorized - Affiliates - Other (Non-U.S.)															0			0	
089999 - Total - Authorized - Affiliates				0	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.. Platinum 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	
099999 - Authorized - Other U.S. Unaffiliated Insurers				1,240	14	2	488	11	3,827	615	180			5,137	1,002		4,135		
	Aspen Insurance UK Ltd.....	GBR		293				209	.5	1,226	.191	.45			.1,675	.304		1,372	
	Lloyd's Syndicate # 190 (FRW).....	GBR							.9		.1				.10	.5		.5	
	Lloyd's Syndicate # 435 (FDY).....	GBR		424				0		1,127	.178	.63			.1,367	.293		1,074	
	Lloyd's Syndicate # 566 (STN).....	GBR		267				0		.644	.119	.35			.798	.223		576	
	Lloyd's Syndicate # 1200 (HMA).....	GBR							.165		.28				.193	.47		.146	
	Lloyd's Syndicate # 1955 (BAR).....	GBR		172				0		.404	.85	.27			.516	.187		.329	
	Lloyd's Syndicate # 2000 (HAR).....	GBR						.98	.2	.67	.8				.175	.3		.173	
	Lloyd's Syndicate # 2001 (AML).....	GBR		129				0		.268	.59	.14			.341	.115		.226	
	Lloyd's Syndicate # 2003 (SJC).....	GBR		431				.68	.2	1,054	.198	.55			.1,378	.376		1,002	
	Lloyd's Syndicate # 2488 (AGM).....	GBR						.51	.1	.7	.1				.60	.8		.53	
	Lloyd's Syndicate # 2791 (MAP).....	GBR							.200	.23					.222	.3		.219	
	Lloyd's Syndicate # 2987 (BRT).....	GBR		.76						.221	.24	.14			.260	.25		.235	
	Lloyd's Syndicate # 4020 (ARK).....	GBR		379					.0	.874	.189	.45			.1,108	.388		.720	
	Lloyd's Syndicate # 4472 (LIB).....	GBR		461				147	.4	1,289	.230	.61			.1,731	.408		1,323	
	Hannover Ru.....	DEU							.77	.2	.46	.5				.0	.3	(3)	
	Montpelier Re.....	BMU													.130			.130	
129998 - Authorized - Other Non-U.S. Insurers (Under \$100,000)															0			0	
129999 - Authorized - Other Non-U.S. Insurers				2,632				651	16	7,600	1,339	359			9,965	2,387		7,578	
139999 - Total - Authorized				3,872	14	2	1,139	28	11,426	1,954	539	0	15,103	3,389	0	11,713	0		
179999 - Total - Unauthorized - Affiliates - U.S. Non-Pool															0			0	
209999 - Total - Unauthorized - Affiliates - Other (Non-U.S.)															0			0	
219999 - Total - Unauthorized - Affiliates				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
229998 - Unauthorized - Other U.S. Unaffiliated Insurers (Under \$100,000)															0			0	
	Paris Re.....	FRA								.91	.20				.111	.46		.65	
	Alea London Re.....	GBR							.39	.4					.44	.5		.39	
	Catlin Insurance Ltd.....	BMU		348				111	.3	1,033	.177	.48			.1,372	.307		1,064	
	QBE Reinsurance (Europe) Ltd.....	GBR							.29	.3					.32	.5		.27	
	American Safety Reinsurance Ltd.....	BMU		131	2	0		0	.218	.41	.18				.280	.83		197	
259998 - Unauthorized - Other Non-U.S. Insurers (Under \$100,000)															0			0	
259999 - Unauthorized - Other Non-U.S. Insurers				479	2	0	111	3	1,410	246	67				1,839	445		1,393	
269999 - Total - Unauthorized				479	2	0	111	3	1,410	246	67	0	1,839	445	0	1,393	0		
309999 - Total - Certified - Affiliates - U.S. Non-Pool															0			0	
339999 - Total - Certified - Affiliates - Other (Non-U.S.)															0			0	
349999 - Total Certified - Affiliates				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
359998 - Certified - Other U.S. Unaffiliated Insurers (Under \$100,000)															0			0	
389998 - Certified - Other Non-U.S. Insurers (under \$100,000)															0			0	
399999 - Total Certified				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
409999 - 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 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Reinsurance Contracts Ceding 75% or More of Direct Premiums Written	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									Reinsurance Payable	18 Net Amount Recoverable From Reinsurers Cols. 15 - [16 + 17]	19 Funds Held By Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Cols. 7 thru 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers		
4199999 - Total Protected Cells															0	0	0	
9999999 Totals						4,351	17	2	1,250	30	12,836	2,200	606	0	16,941	3,834	0	13,107

NOTE: Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by

A. 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

B. 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).....	1,730,855	461,304	Yes [] No [X]
2.	Aspen Insurance UK Ltd.....	1,675,419	293,484	Yes [] No [X]
3.	Odyssey American Reinsurance Corp.....	1,662,328	344,121	Yes [] No [X]
4.	Platinum Underwriters Reinsurance Inc.....	1,581,732	151,911	Yes [] No [X]
5.	Lloyd's syndicate # 2003 (SJC).....	1,378,106	430,922	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	5	6	7	8	9	10	11	12	13	
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Current	1 to 29 Days	30 - 90 Days	91 - 120 Days	Over 120 Days	Total Overdue Cois. 6 + 7 + 8 + 9	Total Due Cois. 5 + 10	Percentage Overdue Col. 10/Col. 11	Percentage more than 120 Days Overdue Col. 9/ Col. 11	
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 - Total - Authorized - Affiliates - Other (Non-U.S.)				0	0	0	0	0			0.0	0.0	
13-5616275 - 19453 - Transatlantic Reinsurance Company.....	NY								8				
75-1444207 - 30058 - SCOR Reinsurance Company.....	NY								8				
0999999 - Authorized - Other U.S. Unaffiliated Insurers									8				
1099999 - Authorized - Pools - Mandatory Pools									16		16	0.0	
1199999 - Authorized - Pools - Voluntary Pools									16		16	0.0	
1299999 - Authorized - Other Non-U.S. Insurers									16		16	0.0	
1399999 - Total - Authorized				0	0	0	0	0	16		16	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		0	0.0	
2199999 - Total - Unauthorized - Affiliates				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	
2599999 - Total - Unauthorized - Other Non-U.S. Insurers								2	2		2	0.0	
2699999 - Total - Unauthorized				0	0	0	0	0	2		2	0.0	
2799999 - Certified - Affiliates - U.S. Intercompany Pooling									2		2	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	
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		0	0.0	
3499999 - Total - Certified - Affiliates				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	
4099999 - Total - Authorized, Unauthorized and Certified				0	0	0	0	0	0		0	0.0	
4199999 - Total - Protected Cells				0	0	0	0	0	0		0	0.0	
9999999 Totals				0	0	0	0	0	19		19	0.0	

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

SCHEDULE F - PART 5

Provision for Unauthorized Reinsurance as of December 31, Current Year (000 OMITTED)

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Reinsurance Recoverable All Items Schedule F Part 3, Col. 15	6 Funds Held By Company Under Reinsurance Treaties	7 Letters of Credit	8 Issuing or Confirming Bank Reference Number (a)	9 Ceded Balances Payable	10 Miscellaneous Balances Payable	11 Trust Funds and Other Allowed Offset Items	12 Total Collateral and Offsets Allowed (Cols. 6+7+9+10+11 but not in Excess of Col. 5)	13 Provision for Unauthorized Reinsurance (Col. 5 Minus Col. 12)	14 Recoverable Paid Losses & LAE Expenses Over 90 Days past Due not in Dispute	15 20% of Amount in Col. 14	16 20% of Amount in Dispute Included in Column 5	17 Provision for Overdue Reinsurance (Col. 13 plus Col. 17 but not in Excess of Col. 5)	18 Total Provision for Reinsurance Ceded to Unauthorized Reinsurers
089999		089999 - Total - Affiliates		0	0	0	XXX	0	0	0	0	0	0	0	0	0	0
.AA-1320034.		Paris Re.....	FRA.	.111			.160	.1.	.46		.111	.44	.0	0	0	0	0
.AA-1120146.		Alea London Ltd.	GBR.	.44			.143	.2	.5		.44	.0	.0	0	0	0	0
.AA-3194161.		Catlin Insurance Co.	BMU.	.1,372			.1,607	.3	.307		.1,372	.0	.0	0	0	0	0
.AA-3194161.		QBE Reinsurance (Europe).....	GBR.	.32			.117	.4	.5		.32	.0	.0	0	0	0	0
.AA-3190795.		American Safety.....	BMU.	.280			.286	.5	.83		.280	.0	.0	0	0	0	0
1299999		1299999 - Other Non-U.S. Insurers		.1,839			2,313	XXX	.445		.1,839	.0	.0	0	0	0	0
1399999		1399999 - Total - Affiliates and Others		.1,839	0	2,313	XXX	.445	0	0	.1,839	.0	.0	0	0	0	0
1499999		1499999 - Total - Protected Cells					XXX				0	0	0	0	0	0	0
		99999999 Totals		1,839	0	2,313	XXX	.445	0	0	1,839	0	0	0	0	0	0

1. Amounts in dispute totaling \$0 are included in Column 5.
 2. Amounts in dispute totaling \$0 are excluded from Column 14.

(a)	Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
	1.	1.	21000021	Natixis.....	.160
	2.	1.	021000089.	Citibank.....	.143
	3.	1.	021000089.	Citibank.....	.1,607
	4.	1.	021000089.	Citibank.....	.117
	5.	1.	72000096	Comerica.....	.286

Schedule F - Part 6 SN 1
NONE

Schedule F - Part 6 SN1A Footnote Detail
NONE

Schedule F - Part 6 SN 2
NONE

Schedule F - Part 7
NONE

Schedule F - Part 8
NONE

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

SCHEDULE F - PART 9

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	41,169,837		41,169,837
2. Premiums and considerations (Line 15)	1,541,840		1,541,840
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	18,682		18,682
4 Funds held by or deposited with reinsured companies (Line 16.2).....	0		0
5. Other assets	905,152		905,152
6. Net amount recoverable from reinsurers		16,922,479	16,922,479
7. Protected cell assets (Line 27)	0		0
8. Totals (Line 28)	43,635,511	16,922,479	60,557,990
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	12,785,240	16,316,916	29,102,156
10. Taxes, expenses, and other obligations (Lines 4 through 8)	192,406		192,406
11. Unearned premiums (Line 9)	2,019,907	605,563	2,625,470
12. Advance premiums (Line 10)	49,200		49,200
13. Dividends declared and unpaid (Line 11.1 and 11.2)	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12)	3,834,428		3,834,428
15. Funds held by company under reinsurance treaties (Line 13)	0		0
16. Amounts withheld or retained by company for account of others (Line 14)	604,087		604,087
17. Provision for reinsurance (Line 16)	0		0
18. Other liabilities	269,000		269,000
19. Total liabilities excluding protected cell business (Line 26)	19,754,268	16,922,479	36,676,747
20. Protected cell liabilities (Line 27)	0		0
21. Surplus as regards policyholders (Line 37)	23,881,243	XXX	23,881,243
22. Totals (Line 38)	43,635,511	16,922,479	60,557,990

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? Yes [] No [X]

If yes, give full explanation:

Schedule H - Part 1

NONE

Schedule H - Part 2

NONE

Schedule H - Part 3

NONE

Schedule H - Part 4

NONE

Schedule H - Part 5

NONE

Schedule P - Part 1A - Home/Farm

NONE

Schedule P - Part 1B - Private Passenger

NONE

Schedule P - Part 1C - Comm Auto/Truck

NONE

Schedule P - Part 1D - Workers' Comp

NONE

Schedule P - Part 1E - Comm Multi Peril

NONE

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

**SCHEDULE P - PART 1F - SECTION 1 - MEDICAL PROFESSIONAL
LIABILITY - OCCURRENCE**

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0	
2. 2004	.98	.26	72	0	0	0	0	0	0	0	0	0	
3. 2005	.290	.87	203	0	0	0	0	0	0	0	0	0	
4. 2006	.615	.161	.454	0	0	1	0	.12	0	0	.13	1	
5. 2007	.291	.22	.269	0	0	0	0	0	0	0	0	0	
6. 2008	.240	.19	.221	0	0	0	0	0	0	0	0	0	
7. 2009	.155	.36	.120	0	0	.3	0	0	0	0	.3	0	
8. 2010	.600	.48	.552	1,025	500	148	.55	.32	0	0	651	.3	
9. 2011	.316	.25	.290	0	0	0	0	.4	0	0	.4	1	
10. 2012	.352	.28	.323	0	0	0	0	0	0	0	0	0	
11. 2013	198	16	182	0	0	7	0	13	0	0	20	1	
12. Totals	XXX	XXX	XXX	1,025	500	160	55	61	0	0	691	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding - Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	2	1	0	0	.1	0	0	0	0	.2	0
4.	0	0	8	3	0	0	.4	.1	1	0	0	.9	0
5.	0	0	7	3	0	0	.3	.1	1	0	0	.7	0
6.	0	0	11	4	0	0	.5	.1	1	0	0	12	0
7.	0	0	15	6	0	0	.8	.2	2	0	0	17	0
8.	0	0	117	.45	0	0	.59	.15	16	0	0	132	0
9.	0	0	.95	.34	0	0	.48	.10	13	0	0	111	0
10.	0	0	168	.56	0	0	.84	.16	23	0	0	203	0
11.	10	0	115	39	13	0	58	11	17	0	0	162	1
12.	10	0	539	191	13	0	270	57	74	0	0	657	1

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount		
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid	
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0	
2.	.1	0	.0	.06	.08	.05	0	0	0.0	0	0	
3.	.4	.1	.3	.13	.13	.13	0	0	0.0	.1	.1	
4.	.26	.4	.22	.43	.26	.49	0	0	0.0	.5	.4	
5.	.11	.4	.7	.38	.161	.28	0	0	0.0	.4	.3	
6.	.18	.6	.12	.75	.306	.55	0	0	0.0	.7	.5	
7.	.28	.8	.20	.178	.220	.166	0	0	0.0	.9	.8	
8.	1,398	615	.783	.232.8	1,279.7	141.7	0	0	0.0	.72	.60	
9.	.159	.44	.115	.504	.174.1	.39.7	0	0	0.0	.61	.50	
10.	.275	.72	.203	.78.3	.257.2	.62.8	0	0	0.0	.112	.91	
11.	232	50	182	117.0	312.5	100.0	0	0	0.0	86	.76	
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	358	299	

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

**SCHEDULE P - PART 1F - SECTION 2 - MEDICAL PROFESSIONAL
LIABILITY - CLAIMS-MADE**

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0	
2. 2004	1,873	531	1,342	0	0	17	0	315	0	0	332	1	
3. 2005	6,179	1,557	4,622	1,849	500	646	137	364	0	0	2,222	37	
4. 2006	8,396	2,032	6,364	3,042	760	957	.49	618	0	0	3,808	35	
5. 2007	8,234	2,130	6,104	2,731	800	1,400	133	561	0	0	3,759	47	
6. 2008	8,262	1,150	7,112	2,540	1,000	1,785	.92	528	0	0	3,762	38	
7. 2009	7,770	1,772	5,998	2,965	500	1,551	.55	663	0	0	4,625	61	
8. 2010	7,166	1,789	5,377	1,270	.25	680	3	596	0	0	2,518	57	
9. 2011	5,984	1,546	4,438	1,988	458	728	.80	492	0	0	2,670	43	
10. 2012	5,266	1,500	3,765	.522	.72	.261	.9	.391	0	0	1,093	29	
11. 2013	5,102	1,695	3,406	0	0	35	0	140	0	0	176	11	
12. Totals	XXX	XXX	XXX	16,909	4,115	8,060	558	4,669	0	0	24,965	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding - Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	10	0	0	0	0	0	0	0	10
5.	1,000	500	(20)	0	.22	11	0	0	46	0	0	537	1
6.	.525	0	(33)	4	163	0	.4	.2	.31	0	0	685	4
7.	.225	0	557	.265	.27	0	279	100	.49	0	0	.772	2
8.	.450	0	408	.330	200	0	217	154	.59	0	0	.850	5
9.	.900	0	1,031	.618	174	0	546	258	122	0	0	1,896	8
10.	.565	0	1,833	.773	219	3	939	265	162	0	0	2,678	15
11.	455	0	2,873	1,003	121	0	1,441	295	220	0	0	3,811	11
12.	4,120	500	6,649	2,993	936	14	3,426	1,073	689	0	0	11,240	47

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
							Loss	Expense			
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	.332	0	.332	.17.7	.0.0	24.8	0	0	0.0	0	0
3.	2,859	.637	2,222	.46.3	.40.9	.48.1	0	0	0.0	0	0
4.	4,627	.809	3,818	.55.1	.39.8	.60.0	0	0	0.0	0	10
5.	5,740	.1,445	4,296	.69.7	.67.8	.70.4	0	0	0.0	.480	57
6.	5,545	.1,098	4,447	.67.1	.95.4	.62.5	0	0	0.0	.489	196
7.	.6,316	.919	.5,397	.81.3	.51.9	.90.0	0	0	0.0	.517	.255
8.	3,880	.512	3,368	.54.1	.28.6	.62.6	0	0	0.0	.528	.322
9.	5,981	.1,414	4,567	.99.9	.91.5	.102.9	0	0	0.0	.1,312	.584
10.	4,892	.1,121	3,771	.92.9	.74.7	.100.2	0	0	0.0	.1,626	1,052
11.	5,285	1,298	3,987	103.6	76.6	117.0	0	0	0.0	2,325	1,487
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	7,277	3,964

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

**SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE,
AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)**

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0	
2. 2004	0	0	0	0	0	0	0	0	0	0	0	0	
3. 2005	0	0	0	0	0	0	0	0	0	0	0	0	
4. 2006	0	0	0	0	0	0	0	0	0	0	0	0	
5. 2007	0	0	0	0	0	0	0	0	0	0	0	0	
6. 2008	0	0	0	0	0	0	0	0	0	0	0	0	
7. 2009	0	0	0	0	0	0	0	0	0	0	0	0	
8. 2010	0	0	0	0	0	0	0	0	0	0	0	0	
9. 2011	0	0	0	0	0	0	0	0	0	0	0	0	
10. 2012	0	0	0	0	0	0	0	0	0	0	0	0	
11. 2013	0	0	0	0	0	0	0	0	0	0	0	0	
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	

NONE

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding - Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	0	0	0	0	0	0	0	0	0	0	0	0	0

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1.	XXX	XXX	XXX	XXX	XX	XX	0	0	XXX	0	0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

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

SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0	
2. 2004	0	0	0	0	0	0	0	0	0	0	0	0	
3. 2005	0	0	0	0	0	0	0	0	0	0	0	0	
4. 2006	0	0	0	0	0	0	0	0	0	0	0	0	
5. 2007	0	0	0	0	0	0	0	0	0	0	0	0	
6. 2008	0	0	0	0	0	0	0	0	0	0	0	0	
7. 2009	0	0	0	0	0	0	0	0	0	0	0	0	
8. 2010	179	2	177	700	700	77	77	0	0	0	0	0	
9. 2011	.66	.1	65	0	0	0	0	0	0	0	0	0	
10. 2012	.17	.1	16	0	0	0	0	0	0	0	0	0	
11. 2013	0	0	0	0	0	0	0	0	0	0	0	0	
12. Totals	XXX	XXX	XXX	700	700	77	77	0	0	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding - Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	.80	.80	0	0	11	.6	.4	0	0	.9	0
9.	0	0	.39	.39	0	0	.7	.3	.2	0	0	.5	0
10.	0	0	0	0	0	0	.9	(1)	0	0	0	10	0
11.	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	0	0	119	119	0	0	27	9	7	0	0	24	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	872	.863	.9	.4874	.47,712.2	5.2	0	0	0.0	0	.9
9.	48	.43	.5	.72.5	6,189.0	8.1	0	0	0.0	0	.5
10.	.9	(1)	10	.53.3	(39.0)	.61.3	0	0	0.0	0	10
11.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	24

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

SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	
2. 2004	0	0	0	0	0	0	0	0	0	0	0	0	
3. 2005	1,922	1,907	14	1	0	0	0	0	0	0	0	1	
4. 2006	3,796	3,526	270	4	0	14	0	11	0	0	0	29	
5. 2007	4,447	4,165	282	1,150	1,150	229	229	.3	0	0	0	1	
6. 2008	4,574	4,279	294	2,834	2,800	196	167	134	0	0	0	10	
7. 2009	4,489	4,059	.430	8	0	.5	0	.55	0	0	0	.68	
8. 2010	4,761	4,601	160	5	0	11	0	.25	0	0	0	.41	
9. 2011	4,533	4,337	196	2	0	0	0	.35	0	0	0	.37	
10. 2012	3,481	3,212	270	4	0	1	0	.37	0	0	0	.42	
11. 2013	2,817	2,626	191	0	0	9	0	38	0	0	0	47	
12. Totals	XXX	XXX	XXX	4,007	3,950	465	396	339	0	0	465	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding - Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	.60	.60	0	0	.7	.7	.3	0	0	.3	0
4.	0	0	.208	.208	0	0	.23	.23	10	0	0	10	0
5.	.750	.750	.387	.387	.17	.17	.43	.43	.54	0	0	.54	0
6.	0	0	.524	.524	0	0	.58	.58	.26	0	0	.26	0
7.	0	0	.824	.824	0	0	.92	.92	.41	0	0	.42	0
8.	0	0	.1,417	.1,415	0	0	.158	.158	.71	0	0	.74	0
9.	0	0	.1,973	.1,961	0	0	.223	.219	.99	0	0	.114	0
10.	.85	0	.2,070	.2,041	.20	0	.239	.229	.109	0	0	.253	.2
11.	45	0	2,190	2,114	26	0	.260	.234	.113	0	0	286	2
12.	880	750	9,653	9,533	62	17	1,102	1,061	526	0	0	864	4

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	.71	.67	.4	.3.7	.3.5	.27.7	0	0	0.0	0	.3
4.	.270	.231	.39	.7.1	.6.6	.14.5	0	0	0.0	0	.10
5.	2,632	2,575	.57	.59.2	.61.8	.20.3	0	0	0.0	0	.54
6.	3,772	3,549	.223	.82.5	.82.9	.75.9	0	0	0.0	0	.26
7.	1,025	.915	.110	.22.8	.22.5	.25.5	0	0	0.0	.1	.41
8.	1,688	.1,572	.115	.35.4	.34.2	.72.1	0	0	0.0	.2	.72
9.	2,331	.2,180	.151	.51.4	.50.3	.77.3	0	0	0.0	.12	.103
10.	2,564	.2,269	.295	.73.6	.70.7	.109.2	0	0	0.0	.115	.138
11.	2,682	.2,348	.334	.95.2	.89.4	.174.7	0	0	0.0	.121	.166
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	250	614

Schedule P - Part 1I - Special Property
NONE

Schedule P - Part 1J - Auto Physical
NONE

Schedule P - Part 1K - Fidelity/Surety
NONE

Schedule P - Part 1L - Other
NONE

Schedule P - Part 1M - International
NONE

Schedule P - Part 1N - Reinsurance A
NONE

Schedule P - Part 1O - Reinsurance B
NONE

Schedule P - Part 1P - Reinsurance C
NONE

Schedule P - Part 1R - Prod Liab Occur
NONE

Schedule P - Part 1R - Prod Liab Claims
NONE

Schedule P - Part 1S-Fin./Mtg. Guaranty
NONE

Schedule P - Part 1T - Warranty

NONE

Schedule P - Part 2A

NONE

Schedule P - Part 2B

NONE

Schedule P - Part 2C

NONE

Schedule P - Part 2D

NONE

Schedule P - Part 2E

NONE

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

SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013	11 One Year	12 Two Year
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	49	.31	.24	.13	.7	.4	.1	.1	.0	.0	.0	.0
3. 2005	XXX	115	.98	.57	.34	.20	.7	.5	.3	.2	(1)	(2)
4. 2006	XXX	XXX	259	162	.107	.68	.30	.18	.10	.9	(2)	(9)
5. 2007	XXX	XXX	XXX	.97	.72	.50	.24	.15	.8	.7	(2)	(8)
6. 2008	XXX	XXX	XXX	XXX	.86	.66	.39	.24	.14	.11	(3)	(13)
7. 2009	XXX	XXX	XXX	XXX	XXX	.65	.46	.35	.21	.18	(4)	(18)
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.347	.458	.779	.735	(44)	.277
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.169	.123	.99	(24)	(71)
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.226	.180	(46)	XXX
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.153	XXX	XXX
											12. Totals	(125)
												156

SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	886	.525	.343	.167	.15	.15	.17	.17	.17	.17	.0	.0
3. 2005	XXX	.2,977	.2,806	.2,758	.2,297	.2,137	.1,962	.1,970	.1,858	.1,858	.0	(112)
4. 2006	XXX	XXX	.4,159	.3,996	.3,474	.3,451	.3,401	.3,354	.3,200	(154)	(201)	
5. 2007	XXX	XXX	XXX	.4,122	.3,774	.4,387	.3,685	.3,498	.3,716	.3,689	(27)	.191
6. 2008	XXX	XXX	XXX	XXX	.4,324	.4,109	.4,607	.4,952	.4,615	.3,887	(728)	(1,065)
7. 2009	XXX	XXX	XXX	XXX	XXX	.4,977	.5,155	.4,773	.4,313	.4,685	.372	(88)
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.4,435	.4,088	.3,775	.2,713	(1,062)	(1,375)
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.4,205	.4,098	.3,953	(145)	(252)
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.3,120	.3,219	.99	XXX
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.3,627	XXX	XXX
											12. Totals	(1,645)
												(2,902)

**SCHEDULE P - PART 2G - SPECIAL LIABILITY
(OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)**

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2009	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX	XXX
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
											12. Totals	0
												0

SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2009	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
8. 2010	XXX	XXX	XXX	XXX	XXX	.0	.16	.13	.10	.5	(5)	(8)
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	.0	.6	.5	.3	(2)	(3)
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.14	.9	(4)	XXX
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX	XXX
											12. Totals	(11)
												(11)

SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	129	104	.62	.34	.11	.1	.1	.1	.1	.0	.0
4. 2006	XXX	XXX	255	.200	.129	.50	.18	.19	.18	.18	.0	.0
5. 2007	XXX	XXX	XXX	.265	.193	.67	.34	.26	.18	.0	(18)	(26)
6. 2008	XXX	XXX	XXX	XXX	.328	.225	.158	.161	.95	.63	(32)	(97)
7. 2009	XXX	XXX	XXX	XXX	XXX	.294	.173	.102	.60	.13	(47)	(89)
8. 2010	XXX	XXX	XXX	XXX	XXX	.232	.213	.100	.140	.19	(81)	(193)
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	.200	.140	.17	.17	(122)	(183)
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.178	.149	.29)	XXX	XXX
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.182	XXX	XXX	XXX
											12. Totals	(330)
												(589)

Schedule P - Part 2I

NONE

Schedule P - Part 2J

NONE

Schedule P - Part 2K

NONE

Schedule P - Part 2L

NONE

Schedule P - Part 2M

NONE

Schedule P - Part 2N

NONE

Schedule P - Part 2O

NONE

Schedule P - Part 2P

NONE

Schedule P - Part 2R - Prod Liab Occur

NONE

Schedule P - Part 2R - Prod Liab Claims

NONE

Schedule P - Part 2S

NONE

Schedule P - Part 2T

NONE

Schedule P - Part 3A

NONE

Schedule P - Part 3B

NONE

Schedule P - Part 3C

NONE

Schedule P - Part 3D

NONE

Schedule P - Part 3E

NONE

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

SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$'000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013		
1. Prior	000	0	0	0	0	0	0	0	0	0	.0	0
2. 2004	.0	0	0	0	0	0	0	0	0	0	.0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0	.0	0
4. 2006	XXX	XXX	1	1	1	1	1	1	1	1	.0	1
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0	.0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0	.0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	3	3	3	.0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	69	619	619	2	1
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	.0	.0	1
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	.0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	0	0

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior	000	0	0	0	0	0	0	0	0	0	.0	0
2. 2004	.0	13	.15	.15	.15	.15	.17	.17	.17	.17	.0	1
3. 2005	XXX	121	283	1,247	1,329	1,438	1,458	1,465	1,858	1,858	.7	30
4. 2006	XXX	XXX	.34	1,040	1,848	2,743	3,134	3,151	3,156	3,190	11	23
5. 2007	XXX	XXX	XXX	172	.594	1,943	2,982	3,100	3,165	3,198	.9	37
6. 2008	XXX	XXX	XXX	XXX	.154	.911	1,739	2,707	2,871	3,233	10	24
7. 2009	XXX	XXX	XXX	XXX	XXX	.385	.912	1,990	3,177	3,962	13	.46
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	100	.627	1,341	1,922	.8	.44
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.428	1,065	2,178	.4	.31
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.52	702	.0	.14
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	0	0

**SCHEDULE P - PART 3G - SPECIAL LIABILITY
(OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)**

1. Prior	000	0	0	0	0	0	0	0	0	0	XXX	XXX
2. 2004	.0	0	0	0	0	0	0	0	0	0	XXX	XXX
3. 2005	XXX	0	0	0	0	0	0	0	0	0	XXX	XXX
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0	XXX	XXX
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0	XXX	XXX
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0	XXX	XXX
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	XXX	XXX
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	XXX	XXX
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX	XXX
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	XXX
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

NONE

SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior	000	0	0	0	0	0	0	0	0	0	.0	0
2. 2004	.0	0	0	0	0	0	0	0	0	0	.0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0	.0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0	.0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0	.0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0	.0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	.0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	.0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	.0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	.0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	.0	0

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior	000	0	0	0	0	0	0	0	0	0	.0	0
2. 2004	.0	0	0	0	0	0	0	0	0	0	.0	0
3. 2005	XXX	0	1	1	1	1	1	1	1	1	.1	1
4. 2006	XXX	XXX	4	.18	.18	.18	.18	.18	.18	.18	.4	1
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0	.0	1
6. 2008	XXX	XXX	XXX	XXX	23	50	56	78	63	63	.7	3
7. 2009	XXX	XXX	XXX	XXX	XXX	3	9	12	12	12	.5	1
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	13	16	16	1	2
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2	2	2	2
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	.5	1	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9	0	0	1

Schedule P - Part 3I

NONE

Schedule P - Part 3J

NONE

Schedule P - Part 3K

NONE

Schedule P - Part 3L

NONE

Schedule P - Part 3M

NONE

Schedule P - Part 3N

NONE

Schedule P - Part 3O

NONE

Schedule P - Part 3P

NONE

Schedule P - Part 3R - Prod Liab Occur

NONE

Schedule P - Part 3R - Prod Liab Claims

NONE

Schedule P - Part 3S

NONE

Schedule P - Part 3T

NONE

Schedule P - Part 4A

NONE

Schedule P - Part 4B

NONE

Schedule P - Part 4C

NONE

Schedule P - Part 4D

NONE

Schedule P - Part 4E

NONE

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

SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	49	.31	24	.13	.7	4	.1	1	0	0
3. 2005	XXX	115	98	.57	.34	20	.7	.4	3	2
4. 2006	XXX	XXX	258	162	107	68	.29	.17	.10	.8
5. 2007	XXX	XXX	XXX	.97	.72	50	.24	.15	.8	.7
6. 2008	XXX	XXX	XXX	XXX	.86	66	.39	.24	.14	11
7. 2009	XXX	XXX	XXX	XXX	XXX	65	.46	.32	.18	15
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	254	.66	161	116
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.169	.123	.99
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.226	180
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	123

SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	842	444	.329	.152	.0	0	0	0	0	0
3. 2005	XXX	1,658	.658	.545	189	188	0	0	0	0
4. 2006	XXX	XXX	3,025	.1,042	429	.235	101	.52	.29	0
5. 2007	XXX	XXX	XXX	2,236	936	.193	244	.269	(9)	(20)
6. 2008	XXX	XXX	XXX	XXX	2,370	.736	166	(9)	.19	(34)
7. 2009	XXX	XXX	XXX	XXX	XXX	2,333	313	.239	.152	.472
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	2,381	.1,266	.489	.141
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.1,892	.1,048	.701
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.2,444	1,735
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,015

**SCHEDULE P - PART 4G - SPECIAL LIABILITY
(OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)**

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	.5
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	.3
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.14	.9
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	.3
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	16
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	174	40
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	102

Schedule P - Part 4I - Special Property
NONE

Schedule P - Part 4J
NONE

Schedule P - Part 4K
NONE

Schedule P - Part 4L
NONE

Schedule P - Part 4M
NONE

Schedule P - Part 4N
NONE

Schedule P - Part 4O
NONE

Schedule P - Part 4P
NONE

Schedule P - Part 4R - Prod Liab Occur
NONE

Schedule P - Part 4R - Prod Liab Claims
NONE

Schedule P - Part 4S
NONE

Schedule P - Part 4T

NONE

Schedule P - Part 5A- SN1

NONE

Schedule P - Part 5A- SN2

NONE

Schedule P - Part 5A- SN3

NONE

Schedule P - Part 5B- SN1

NONE

Schedule P - Part 5B- SN2

NONE

Schedule P - Part 5B- SN3

NONE

Schedule P - Part 5C- SN1

NONE

Schedule P - Part 5C- SN2

NONE

Schedule P - Part 5C- SN3

NONE

Schedule P - Part 5D- SN1

NONE

Schedule P - Part 5D- SN2

NONE

Schedule P - Part 5D- SN3

NONE

Schedule P - Part 5E- SN1

NONE

Schedule P - Part 5E- SN2

NONE

Schedule P - Part 5E- SN3

NONE

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

SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	2	2
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.1	.3	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.1	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	1	1	.1	1	1	1	1	1
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.1	.3	.3	.3
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.1	1	1
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

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

SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	1	5	6	6	6	6	7	7
4. 2006	XXX	XXX	0	4	6	10	11	11	11	11
5. 2007	XXX	XXX	XXX	1	2	3	7	9	9	9
6. 2008	XXX	XXX	XXX	XXX	.1	3	3	8	9	10
7. 2009	XXX	XXX	XXX	XXX	XXX	1	2	8	12	13
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	3	4	6	.8
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	2	.4
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	1	.1	0	0	0	0	0	0	0	0
3. 2005	XXX	19	11	7	.6	2	1	1	0	0
4. 2006	XXX	XXX	23	18	13	4	2	2	2	1
5. 2007	XXX	XXX	XXX	32	27	14	5	3	2	1
6. 2008	XXX	XXX	XXX	XXX	20	20	18	12	7	4
7. 2009	XXX	XXX	XXX	XXX	XXX	34	34	19	4	2
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	31	24	12	.5
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27	14	.8
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12	15
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	1	.1	1	1	.1	1	1	1	1	1
3. 2005	XXX	.26	34	.37	.37	.37	.37	.37	.37	.37
4. 2006	XXX	XXX	22	.35	.35	.35	.35	.35	.35	.35
5. 2007	XXX	XXX	XXX	.35	.46	.46	.46	.47	.47	.47
6. 2008	XXX	XXX	XXX	XXX	.22	.37	.38	.38	.38	.38
7. 2009	XXX	XXX	XXX	XXX	XXX	.41	.59	.61	.61	.61
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.35	.55	.57	.57
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.34	.43	.43
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	29
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11

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

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013
1. Prior	0	.0	0	0	.0	0	.0	0	0	0
2. 2004	0	.0	0	0	.0	0	.0	0	0	0
3. 2005	XXX	.0	1	1	.1	1	.1	1	1	1
4. 2006	XXX	XXX	.4	4	.4	4	.4	4	4	.4
5. 2007	XXX	XXX	XXX	0	.0	0	.0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	.4	6	6	6	7	7
7. 2009	XXX	XXX	XXX	XXX	XXX	4	.5	.5	.5	.5
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.0	1	1	1
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2	2
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013
1. Prior	0	.0	0	0	.0	0	.0	0	0	0
2. 2004	0	.0	0	0	.0	0	.0	0	0	0
3. 2005	XXX	.0	0	0	.0	0	.0	0	0	0
4. 2006	XXX	XXX	.1	0	.0	0	.0	0	0	0
5. 2007	XXX	XXX	XXX	0	.0	0	.0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	.6	3	.1	.1	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	2	.1	.0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.1	.2	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	.2
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013
1. Prior	0	.0	0	0	.0	0	.0	0	0	0
2. 2004	0	.0	0	0	.0	0	.0	0	0	0
3. 2005	XXX	.0	.2	2	.2	2	.2	.2	.2	.2
4. 2006	XXX	XXX	.4	5	.5	5	.5	.5	.5	.5
5. 2007	XXX	XXX	XXX	1	.1	1	.1	.1	.1	.1
6. 2008	XXX	XXX	XXX	XXX	10	10	10	10	10	10
7. 2009	XXX	XXX	XXX	XXX	XXX	6	.6	.6	.6	.6
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.1	.3	.3	.3
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.4	.4	.4
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	.3
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3

Schedule P - Part 5R- SN1A
NONE

Schedule P - Part 5R- SN2A
NONE

Schedule P - Part 5R- SN3A
NONE

Schedule P - Part 5R- SN1B
NONE

Schedule P - Part 5R- SN2B
NONE

Schedule P - Part 5R- SN3B
NONE

Schedule P - Part 5T- SN1
NONE

Schedule P - Part 5T- SN2
NONE

Schedule P - Part 5T- SN3
NONE

Schedule P - Part 6C - SN1
NONE

Schedule P - Part 6C - SN2
NONE

Schedule P - Part 6D - SN1

NONE

Schedule P - Part 6D - SN2

NONE

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SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P, Part 1)	0	0	0	0	0	0	0	0	0	0	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P, Part 1)	0	0	0	0	0	0	0	0	0	0	XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0.66	0.66
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0.17	0.17
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	66
13. Earned Premiums (Sch P, Part 1)	0	0	0	0	0	0	0	0	0	0	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0.1	0.1
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0.1	0.0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1
13. Earned Premiums (Sch P, Part 1)	0	0	0	0	0	0	0	0	0	0	XXX

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

SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	1,922	1,922	1,922	1,922	1,922	1,922	1,922	1,922	1,922	0
4. 2006	XXX	XXX	3,796	3,796	3,796	3,796	3,796	3,796	3,796	3,796	0
5. 2007	XXX	XXX	XXX	4,447	4,447	4,447	4,447	4,447	4,447	4,447	0
6. 2008	XXX	XXX	XXX	4,574	4,574	4,574	4,574	4,574	4,574	4,574	0
7. 2009	XXX	XXX	XXX	XXX	4,489	4,489	4,489	4,489	4,489	4,489	0
8. 2010	XXX	XXX	XXX	XXX	XXX	4,716	4,716	4,716	4,716	4,716	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	4,533	4,533	4,533	4,533	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,481	3,481	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,817	2,817	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,817
13. Earned Premiums (Sch P, Part 1)	0	1,922	3,796	4,447	4,574	4,489	4,761	4,533	3,481	2,817	XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	1,907	1,907	1,907	1,907	1,907	1,907	1,907	1,907	1,907	0
4. 2006	XXX	XXX	3,526	3,526	3,526	3,526	3,526	3,526	3,526	3,526	0
5. 2007	XXX	XXX	XXX	4,165	4,165	4,165	4,165	4,165	4,165	4,165	0
6. 2008	XXX	XXX	XXX	4,279	4,279	4,279	4,279	4,279	4,279	4,279	0
7. 2009	XXX	XXX	XXX	XXX	4,059	4,059	4,059	4,059	4,059	4,059	0
8. 2010	XXX	XXX	XXX	XXX	XXX	4,601	4,601	4,601	4,601	4,601	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	4,337	4,337	4,337	4,337	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,212	3,212	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,626	2,626	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,626
13. Earned Premiums (Sch P, Part 1)	0	1,907	3,526	4,165	4,279	4,059	4,601	4,337	3,212	2,626	XXX

SCHEDULE P - PART 6M - INTERNATIONAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P, Part 1)	0	0	0	0	0	0	0	0	0	0	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2004	2 2005	3 2006	4 2007	5 2008	6 2009	7 2010	8 2011	9 2012	10 2013	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P, Part 1)	0	0	0	0	0	0	0	0	0	0	XXX

Schedule P - Part 6N - SN1

NONE

Schedule P - Part 6N - SN2

NONE

Schedule P - Part 6O - SN1

NONE

Schedule P - Part 6O - SN2

NONE

Schedule P - Part 6R - SN1A

NONE

Schedule P - Part 6R - SN2A

NONE

Schedule P - Part 6R - SN1B

NONE

Schedule P - Part 6R - SN2B

NONE

Schedule P - Part 7A - Section 1

NONE

Schedule P - Part 7A - Section 2

NONE

Schedule P - Part 7A - Section 3

NONE

Schedule P - Part 7A - Section 4

NONE

Schedule P - Part 7A - Section 5

NONE

Schedule P - Part 7B - Section 1

NONE

Schedule P - Part 7B - Section 2

NONE

Schedule P - Part 7B - Section 3

NONE

Schedule P - Part 7B - Section 4

NONE

Schedule P - Part 7B - Section 5

NONE

Schedule P - Part 7B - Section 6

NONE

Schedule P - Part 7B - Section 7

NONE

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

SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.

1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost?

Yes [X] No []

If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:

1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)? 574,000

1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [X] No []

1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No [X]

1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [X] No [] N/A []

1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior		
1.602 2004.....		
1.603 2005.....		
1.604 2006.....		
1.605 2007.....		
1.606 2008.....		
1.607 2009.....		
1.608 2010.....		
1.609 2011.....		
1.610 2012.....		
1.611 2013.....		
1.612 Totals	0	0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No []

3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Answer: Yes [X] No []

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33.

Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5. What were the net premiums in force at the end of the year for:
(in thousands of dollars)

5.1 Fidelity	.....
5.2 Surety	.....

6. Claim count information is reported per claim or per claimant (indicate which)..... CLAIM
If not the same in all years, explain in Interrogatory 7.

7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [] No [X]

7.2 An extended statement may be attached.

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

**SCHEDULE T – PART 2
INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN**

Allocated By States and Territories

States, Etc.	Direct Business Only					
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama .....	.AL					0
2. Alaska .....	.AK					0
3. Arizona .....	.AZ					0
4. Arkansas .....	.AR					0
5. California .....	.CA					0
6. Colorado .....	.CO					0
7. Connecticut .....	.CT					0
8. Delaware .....	.DE					0
9. District of Columbia .....	.DC					0
10. Florida .....	.FL					0
11. Georgia .....	.GA					0
12. Hawaii .....	.HI					0
13. Idaho .....	.ID					0
14. Illinois .....	.IL					0
15. Indiana .....	.IN					0
16. Iowa .....	.IA					0
17. Kansas .....	.KS					0
18. Kentucky .....	.KY					0
19. Louisiana .....	.LA					0
20. Maine .....	.ME					0
21. Maryland .....	.MD					0
22. Massachusetts .....	.MA					0
23. Michigan .....	.MI					0
24. Minnesota .....	.MN					0
25. Mississippi .....	.MS					0
26. Missouri .....	.MO					0
27. Montana .....	.MT					0
28. Nebraska .....	.NE					0
29. Nevada .....	.NV					0
30. New Hampshire .....	.NH					0
31. New Jersey .....	.NJ					0
32. New Mexico .....	.NM					0
33. New York .....	.NY					0
34. North Carolina .....	.NC					0
35. North Dakota .....	.ND					0
36. Ohio .....	.OH					0
37. Oklahoma .....	.OK					0
38. Oregon .....	.OR					0
39. Pennsylvania .....	.PA					0
40. Rhode Island .....	.RI					0
41. South Carolina .....	.SC					0
42. South Dakota .....	.SD					0
43. Tennessee .....	.TN					0
44. Texas .....	.TX					0
45. Utah .....	.UT					0
46. Vermont .....	.VT					0
47. Virginia .....	.VA					0
48. Washington .....	.WA					0
49. West Virginia .....	.WV					0
50. Wisconsin .....	.WI					0
51. Wyoming .....	.WY					0
52. American Samoa .....	.AS					0
53. Guam .....	.GU					0
54. Puerto Rico .....	.PR					0
55. US Virgin Islands .....	.VI					0
56. Northern Mariana Islands .....	.MP					0
57. Canada .....	.CAN					0
58. Aggregate Other Alien .....	.OT					0
59. Totals		0	0	0	0	0

NONE

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

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

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

SCHEDULE Y
PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** 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.

	MARCH FILING	RESPONSES
1.	Will an actuarial opinion be filed by March 1?	.....YES.....
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	.....YES.....
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	.....YES.....
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	.....YES.....
	APRIL FILING	
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	.....YES.....
6.	Will Management's Discussion and Analysis be filed by April 1?	.....YES.....
7.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	.....YES.....
	MAY FILING	
8.	Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	.....SEE EXPLANATION.....
	JUNE FILING	
9.	Will an audited financial report be filed by June 1?	.....YES.....
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	.....YES.....
	AUGUST FILING	
11.	Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	.....YES.....
	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.	
	MARCH FILING	
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	.....SEE EXPLANATION.....
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	.....NO.....
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	.....NO.....
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	.....YES.....
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	.....NO.....
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	.....SEE EXPLANATION.....
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	.....YES.....
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	.....YES.....
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	.....SEE EXPLANATION.....
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
25.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	.....SEE EXPLANATION.....
26.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	.....SEE EXPLANATION.....
27.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	.....SEE EXPLANATION.....
	APRIL FILING	
28.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	.....NO.....
29.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	.....NO.....
30.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	.....NO.....
31.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	.....NO.....
32.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?	.....NO.....
	AUGUST FILING	
33.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	.....SEE EXPLANATION.....

Explanation:

8. Not Applicable

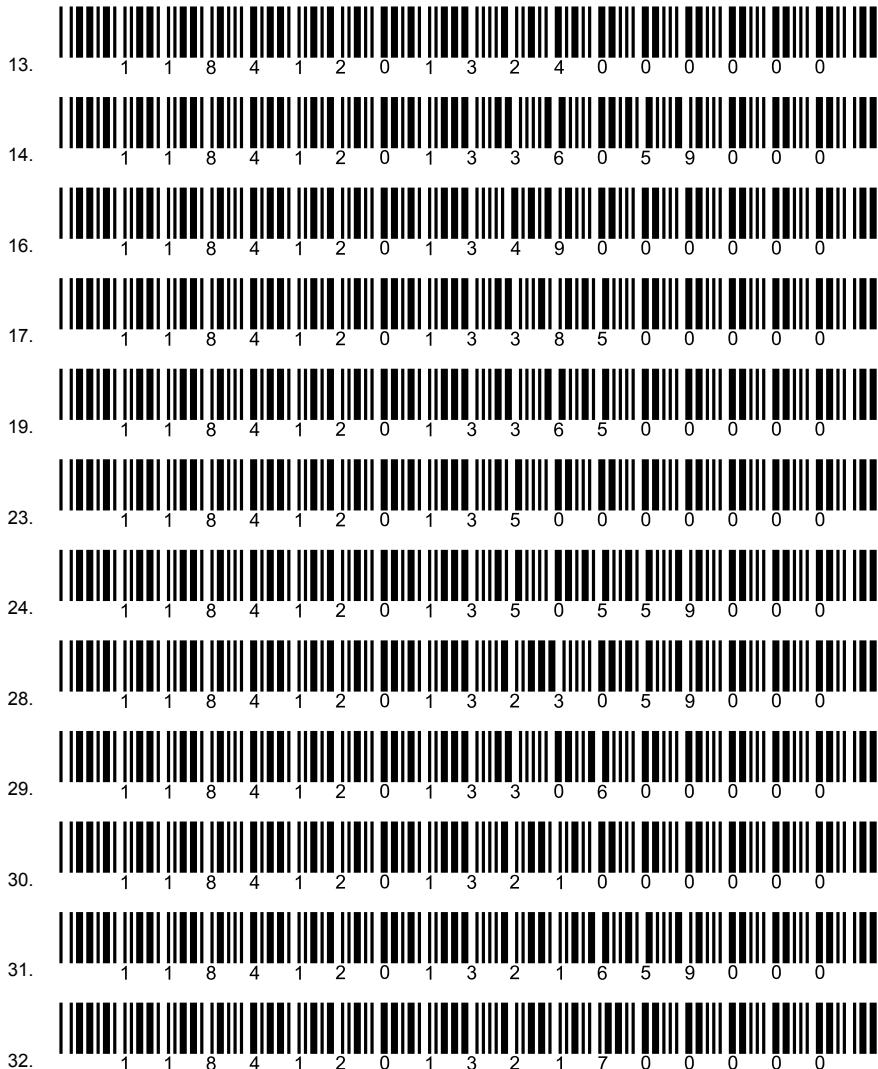
12. Not Required

13.

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHA INSURANCE SOLUTIONS, INC
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

14.
16.
17.
18. Not Required
19.
22. No Exceptions
23.
24.
25. N/A - No approval requested
26. N/A - No approval requested
27. N/A - No approval requested
28.
29.
30.
31.
32.
33. Not required.

Bar Code:



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHA INSURANCE SOLUTIONS, INC
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

OVERFLOW PAGE FOR WRITE-INS



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	
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	
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)		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
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		2,750,523	2,800,700	2,444,083	7	1,690,825	2,970,010	37
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
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)		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
59. Totals		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
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

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