

Amended Explanation Page

SummaCare, Inc

Amended Cover Page

12/31/13

SummaCare, Inc. has amended the 12/31/13 Annual Statement to reclassify its reinsurance contract with Middlebury Assurance Company on Schedule S as Affiliate - Non-U.S.-Captive at the request of the Ohio Department of Insurance.



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2013

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ANNUAL STATEMENT
For the Year Ending December 31, 2013
OF THE CONDITION AND AFFAIRS OF THE
SummaCare, Inc.

NAIC Group Code	3259 (Current Period)	3259 (Prior Period)	NAIC Company Code	95202	Employer's ID Number	34-1726655
Organized under the Laws of	Ohio		State of Domicile or Port of Entry		Ohio	
Country of Domicile	United States of America					
Licensed as business type:	Life, Accident & Health[] Dental Service Corporation[] Other[]	Property/Casualty[] Vision Service Corporation[] Is HMO Federally Qualified? Yes[] No[] N/A[X]	Hospital, Medical & Dental Service or Indemnity[] Health Maintenance Organization[X]			
Incorporated/Organized	10/23/1992		Commenced Business	03/01/1993		
Statutory Home Office	10 North Main Street (Street and Number)		Akron, OH, 44308 (City or Town, State, Country and Zip Code)			
Main Administrative Office	10 North Main Street Akron, OH, 44308 (Street and Number)		(330)996-8410 (Area Code) (Telephone Number)			
Mail Address	P.O. Box 3620 (Street and Number or P.O. Box)		Akron, OH, 44309-3620 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	10 North Main Street Akron, OH, 44308 (Street and Number)		(330)996-8410 (Area Code) (Telephone Number)			
Internet Website Address	SummaCare.com					
Statutory Statement Contact	Roy Douglas Hall (Name) hallroy@summacare.com (E-Mail Address)		(330)996-8410-62057 (Area Code)(Telephone Number)(Extension) (330)996-8553 (Fax Number)			

OFFICERS

Name	Title
Martin Paul Hauser	CEO
William Armstrong Powel III	Secretary
Thomas Gene Knoll	Chairman
Kathleen Tirbovich Geier	Vice Chairman
Judith Ann Macro	Assistant Secretary
James Edward McNutt	Assistant Treasurer
Brian Keith Derrick	Treasurer

OTHERS

Anne Armao, VP - Marketing and Product Development
 James Loveless, VP - Individual Product Line
 Donald Novosel, VP - Contracting & Network Development
 Claude Vincenti, President

Kevin Cavalier, VP - Sales
 Judith Macro, VP - Corporate Services, Compliance Officer
 Annette Ruby, VP - Health Services Management

Keith Johnson, VP - Third Party Administrator
 James McNutt, VP - Finance, CFO
 Mumtaz Ibrahim M.D., Chief Medical Officer

DIRECTORS OR TRUSTEES

Martin Paul Hauser
 Vincent Hadar Johnson Jr. M.D.
 Erik Newman Steele D.O. #
 Richard Allen Merolla
 Kenneth Eugene Berkovitz M.D.
 Richard Howard Marsh
 Rajiv Vishnu Taliwal M.D.

Thomas Gene Knoll
 Thomas Joseph Strauss
 John Byron Silvers Ph.D.
 Jay Curtis Williamson M.D.
 Bradley Hall Crombie M.D.
 Kathleen Tirbovich Geier
 James Ross McIlvaine #

State of Ohio
 County of Summit ss

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of the 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.

(Signature)
 Martin Paul Hauser
 (Printed Name)
 1.
 CEO
 (Title)

(Signature)
 Claude Maurius Vincenti
 (Printed Name)
 2.
 President
 (Title)

(Signature)
 James Edward McNutt
 (Printed Name)
 3.
 Vice President - Finance, CFO
 (Title)

Subscribed and sworn to before me this
 23rd day of April, 2014

a. Is this an original filing?
 b. If no, 1. State the amendment number
 2. Date filed
 3. Number of pages attached

Yes[] No[X]
 1
 04/23/2014
 1

(Notary Public Signature)

SCHEDULE S - PART 4**Reinsurance Ceded To Unauthorized Companies**

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Totals (Cols. 5 + 6 + 7)	9 Letters of Credit	10 Issuing or Confirming Bank Reference Number (a)	11 Trust Agreements	12 Funds Deposited by and Withheld from Reinsurers	13 Other	14 Miscellaneous Balances (Credit)	15 Sum of Cols. 9+11+12 +13+14 But Not in Excess of Col. 8
General Account - Accident and Health - Affiliates - Non-U.S. - Captive														
00000	AA-3770277	03/01/2013	MIDDLEBURY ASSUR CO								7,246			
1599999 Subtotal - General Account - Accident and Health - Affiliates - Non-U.S. - Captive									XXX		7,246			
1799999 Subtotal - General Account - Accident and Health - Affiliates - Non-U.S. - Total									XXX		7,246			
1899999 Total - General Account - Accident and Health - Affiliates									XXX		7,246			
2399999 Total - General Account									XXX		7,246			
3699999 Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2999999 and 3299999)									XXX		7,246			
9999999 Total (Sum of 2399999 and 3499999)									XXX		7,246			

(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