



HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2013  
OF THE CONDITION AND AFFAIRS OF THE

Humana Health Plan of Ohio, Inc.

NAIC Group Code01190119NAIC Company Code95348Employer's ID Number31-1154200  
(Current)(Prior)

Organized under the Laws ofOhio, State of Domicile or Port of EntryOH

Country of DomicileUnited States of America

Licensed as business type:Health Maintenance Organization

Is HMO Federally Qualified? Yes [ X ] No [ ]

Incorporated/Organized08/19/1985Commenced Business03/10/1979

Statutory Home Office640 Eden Park DriveCincinnati , OH, US 45202-6056  
(Street and Number)(City or Town, State, Country and Zip Code)

Main Administrative Office640 Eden Park DriveCincinnati , OH, US 45202-6056513-784-5320  
(Street and Number)(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Mail AddressP.O. Box 740036Louisville , KY, US 40201-7436  
(Street and Number or P.O. Box)(City or Town, State, Country and Zip Code)

Primary Location of Books and Records640 Eden Park DriveCincinnati , OH, US 45202-6056513-784-5320  
(Street and Number)(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Internet Website Addresswww.humana.com

Statutory Statement ContactBrittany Ullrich502-580-8223  
(Name)(Area Code) (Telephone Number)

DOIINQUIRIES@humana.com502-580-2099  
(E-mail Address)(FAX Number)

OFFICERS

President & CEOBruce Dale BroussardSr. VP, CFO & TreasurerJames Harry Bloem-Resigned 12/31/2013

VP & Corporate SecretaryJoan Olliges LenahanAppointed ActuaryJonathan Albert Canine

OTHER

George Grant Bauernfeind Vice President	Elizabeth Diane Bierbower Pres, Employer Group Segment	John Gregory Catron VP & Chief Compliance Officer
Steven James DeRaleau # President, HumanaOne	Roy Goldman Ph.D VP & Chief Actuary	Charles Frederic Lambert, III Vice President
Brian Phillip LeClaire Sr VP & Chief Svc & Info Officer	Thomas Joseph Liston President-Retail Segment	Heidi Suzanne Margulis Sr. Vice President
	Bruce Devereau Perkins Pres, Healthcare Svcs Segment	Richard Donald Remmers VP, Employer Group Segment
Kevin Ross Meriwether # VP & Div Leader-Eastern Div	John Leslie Sinclair # Market President-Ohio	Debra Anne Smith # VP-Sr. Prod Strategy & Prod Dev
Larry Dale Savage Reg CEO-Midwest Region	Joseph Christopher Ventura Assistant Corporate Secretary	
Pattie Dale Tye President, Large Group		Timothy Alan Wheatley VP-Senior Products
Ralph Martin Wilson Vice President		

DIRECTORS OR TRUSTEES

James Harry Bloem-Resigned 12/31/2013

Bruce Dale Broussard

James Elmer Murray

State ofKentuckySS:

County ofJefferson

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.

Bruce Dale BroussardJoan Olliges LenahanAlan James Bailey  
President & CEOPresident & CEOPresident & CEO

VP & Corporate Secretary

Assistant Treasurer

Subscribed and sworn to before me this17th day ofFebruary, 2014

a. Is this an original filing? Yes [ X ] No [ ]

b. If no,

1. State the amendment number.....

2. Date filed .....

3. Number of pages attached.....

Michele Sizemore  
Notary Public  
January 3, 2015

## EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

[illegible]

EXHIBIT 3 - HEALTH CARE RECEIVABLES

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199998. Aggregate Pharmaceutical Rebate Receivables Not Individually Listed	1,636,448	0	0	18,229	18,229	1,636,448
0199999. Total Pharmaceutical Rebate Receivables	1,636,448	0	0	18,229	18,229	1,636,448
0299998. Aggregate Claim Overpayment Receivables Not Individually Listed	288,381	0	0	0	0	288,381
0299999. Total Claim Overpayment Receivables	288,381	0	0	0	0	288,381
0399998. Aggregate Loans and Advances to Providers Not Individually Listed	0	0	0	58,356	58,356	0
0399999. Total Loans and Advances to Providers	0	0	0	58,356	58,356	0
0499998. Aggregate Capitation Arrangement Receivables Not Individually Listed	0	0	0	0	0	0
0499999. Total Capitation Arrangement Receivables	0	0	0	0	0	0
0599998. Aggregate Risk Sharing Receivables Not Individually Listed	480	0	0	0	0	480
0599999. Total Risk Sharing Receivables	480	0	0	0	0	480
0699998. Aggregate Other Receivables Not Individually Listed	0	0	0	0	0	0
0699999. Total Other Receivables	0	0	0	0	0	0
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0799999 Gross health care receivables	1,925,309	0	0	76,585	76,585	1,925,309

EXHIBIT 3A - ANALYSIS OF HEALTH CARE RECEIVABLES COLLECTED AND ACCRUED

Type of Health Care Receivable	Health Care Receivables Collected During the Year		Health Care Receivables Accrued as of December 31 of Current Year		5  Health Care Receivables in Prior Years (Columns 1 + 3)	6  Estimated Health Care Receivables Accrued as of December 31 of Prior Year
	1  On Amounts Accrued Prior to January 1 of Current Year	2  On Amounts Accrued During the Year	3  On Amounts Accrued December 31 of Prior Year	4  On Amounts Accrued During the Year		
1. Pharmaceutical rebate receivables .....	1,297,116	5,089,152	0	1,654,676	1,297,116	1,284,221
2. Claim overpayment receivables .....	0	0	0	288,381	0	0
3. Loans and advances to providers .....	0	0	0	58,356	0	58,356
4. Capitation arrangement receivables .....	0	0	0	0	0	0
5. Risk sharing receivables .....	0	0	0	480	0	2,280
6. Other health care receivables.....	0	0	0	0	0	0
7. Totals (Lines 1 through 6)	1,297,116	5,089,152	0	2,001,893	1,297,116	1,344,857

Note that the accrued amounts in Columns 3, 4, and 6 are the total health care receivables, not just the admitted portion.

EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Unpaid (Reported)						
ACCESS ADVANTAGE LLC	3,013	0	0	0	0	3,013
ACCESS MEDIQUIP LLC	5,200	0	4,135	0	0	9,335
ACCREDITO HEALTH GROUP INC	6,821	0	0	0	0	6,821
ADENA HEALTH SYSTEM	10,841	0	0	0	0	10,841
AIR EVAC SERVICES IN	5,580	0	0	0	0	5,580
AMERIMED INC	6,578	0	0	0	0	6,578
ANDREWS ,MICHELLE MD	2,334	0	0	0	0	2,334
ANESTHESIA ASSOCIATE	6,550	0	0	0	0	6,550
ANESTHESIA ASSOCIATES OF CINCINNATI INC	9,386	660	0	0	252	10,298
ANESTHESIA GROUP PRA	3,760	0	0	0	0	3,760
ARAND ,ARTHUR G MD	2,550	0	0	0	0	2,550
ARBORS AT DELAWARE	2,651	0	0	0	0	2,651
ARGO ,DAVID BRENT MD	2,276	0	0	0	875	3,151
ATRIUM MEDICAL CENTE	53,704	0	0	0	0	53,704
ATRIUM MEDICAL CENTER	5,489	1,773	179	0	10,566	18,007
BAPTIST HEALTH LOUISVILLE	6,332	0	0	0	0	6,332
BEACON WEST SURGERY CENTER	3,000	0	0	0	0	3,000
BEAVERCREEK MEDICAL	27,432	0	0	0	0	27,432
BEERS WILLIAM	3,504	32	0	0	0	3,535
BELL ,JONATHAN W MD	2,001	0	0	0	0	2,001
BELTWAY SURGERY CENTERS LLC	2,478	0	0	0	0	2,478
BETHESDA HOSPITAL IN	6,847	695	0	0	0	7,542
BETHESDA HOSPITAL INC	144,086	20,126	10,416	0	750	175,378
BHANDARI ,MANISH S MD	29	0	4,029	0	0	4,058
BIOWORKS INC	814	1,209	0	0	0	2,023
BOURDAKOS MARIOS G	2,210	0	0	0	0	2,210
BRETHAUER STACY A	2,011	0	0	0	0	2,011
BROWN EDWARD R	2,709	0	0	0	0	2,709
CARESPRING	3,063	0	0	0	0	3,063
CARMEL SPECIALTY SURGERY CENTER	4,189	0	0	0	0	4,189
CASSANDRA JAMES	2,988	0	0	0	0	2,988
CASSIDY ,JAMES P DDS	2,007	0	0	0	0	2,007
CCS MEDICAL	1,662	764	0	0	100	2,527
CENTRAL DUPAGE HOSPITAL	16,823	0	0	0	0	16,823
CHA ,PETER S MD	3,374	0	0	0	3,182	6,557
CHILDRENS HOME HEALTH CARE SERVICES	22,091	0	0	0	0	22,091
CHILDRENS HOSPITAL DME	2,484	0	2,232	0	0	4,715
CHILDRENS HOSPITAL MEDICAL CENTER	315,906	8,138	5	0	34	324,084
CHILDRENS HOSPITAL MEDICAL CENTER LAB	7,027	109	65	0	1,304	8,505
CHRIST HOSPITAL	342,324	36,591	0	0	1,267	380,182
CHRIST SPINE SURGERY CENTER	44,316	0	0	0	0	44,316
CHUA ,CYNTHIA C MD	2,485	0	0	0	0	2,485
CINCINNATI CHILDRENS HOSPITAL MEDICAL CENTER	22,159	9,169	7,334	0	3,394	42,057
CITY OF CINCINNATI F	2,581	0	0	0	0	2,581
CLEVELAND CLINIC	178,645	20,006	0	0	0	198,651
CODY ,ROBERT L MD	14,265	0	1,353	0	0	15,617
COHEN ,PAUL L MD	3,475	0	0	0	0	3,475
CORNERSTONE MEDICAL SERVICES MIDWEST LLC	2,674	67	0	0	0	2,741
COVENANT VILLAGE OF	8,346	0	0	0	0	8,346
CURT ,BRADFORD A MD	3,755	0	0	0	0	3,755
DANKO ,MICHAEL D MD	2,335	0	0	0	0	2,335

EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
DEARBORN COUNTY HOSPITAL	18,255	667	0	0	0	18,922
DIPLOMAT PHARMACY	2,177	0	0	0	0	2,177
DOCTORS HOSPITAL	25,984	996	0	0	325	27,304
DOCTORS HOSPITAL OF TATTNALL	2,804	0	0	0	0	2,804
DOYLESTOWN HOSPITAL	3,383	0	0	0	0	3,383
DRAKE CENTER LLC	212	0	20,845	0	0	21,057
DUBLIN METHODIST HOS	9,677	0	0	0	0	9,677
DUBLIN SPRINGS	4,560	0	0	0	0	4,560
EASTERN STATE HSP	6,749	0	0	0	0	6,749
EMERGENCY CARE PHYSICIANS OF NO KY	1,639	414	0	0	0	2,053
EMERGENCY MEDICINE PHY OF HAMILTON COUNTY LTD	1,863	750	0	0	0	2,613
EMERGENCY PROFESSIONAL SERVICE	1,229	1,093	423	0	0	2,745
EMH REGIONAL HOME CA	2,663	0	0	0	0	2,663
EMH REGIONAL MEDICAL	13,193	3,823	0	0	0	17,016
EMH REGIONAL MEDICAL CENTER	2,943	0	0	0	0	2,943
ESSELL ,JAMES H MD	4,246	44	0	0	0	4,290
ESSELL JAMES H	3,976	0	0	0	0	3,976
EUCLID HOSPITAL	5,278	8,889	0	0	0	14,167
FAIRFIELD MEDICAL CE	23,457	0	0	0	0	23,457
FAIRVIEW HOSPITAL	19,478	0	0	0	0	19,478
FIRDAUS IRFAN	3,374	0	0	0	0	3,374
FLETCHER MICHAEL E	3,126	0	0	0	0	3,126
FLORA DOUGLAS B	5,800	2,629	0	0	0	8,429
FLORENCE PARK CARE C	5,153	0	0	0	0	5,153
FORT HAMILTON HOSPIT	8,441	2,006	0	0	0	10,447
FORT HAMILTON HOSPITAL	13,512	5,801	0	0	1,115	20,428
FORUM AT KNIGHTSBRID	2,653	0	0	0	0	2,653
FRANKFORT REG MED CTR	3,184	0	0	0	0	3,184
FRESENIUS MEDICAL CARE KINGS M	0	0	0	871	1,791	2,661
GALLOWAY ,MARC T MD	3,649	69	0	0	0	3,719
GENERAL PHYSICIAN SE	3,482	0	0	0	0	3,482
GLENBEIGH HOSPITAL	3,670	0	0	0	0	3,670
GOOD SAMARITAN HOSPI	61,950	3,378	0	0	0	65,327
GOOD SAMARITAN HOSPITAL	75,859	8,647	2,272	0	364	87,142
GRADY MEMORIAL HOSPI	13,579	333	0	0	0	13,912
GRANDVIEW HOSPITAL	5,862	3,781	0	0	0	9,643
GRANT MEDICAL CENTER	41,330	4,932	0	0	1,033	47,294
GROSINER ,MARK E DO	3,992	0	0	0	0	3,992
HAMILTON SURGERY CENTER LLC	3,527	0	0	0	0	3,527
HAND SURGERY CENTER	3,552	0	0	0	0	3,552
HANSEN KENDALL E	1,901	514	0	0	0	2,415
HASAN ,SAMER S MD PHD	5,727	0	0	0	0	5,727
HEALTH DIAGNOSTIC LABORATORY INC	443	564	614	0	2,965	4,586
HEARTLAND OF KETTERI	2,146	0	0	0	0	2,146
HEARTLAND OF MARION	3,821	0	0	0	0	3,821
HIGHBANKS CARE CENTE	2,377	0	0	0	0	2,377
HIGHLANDS HEALTHCARE	6,687	0	0	0	0	6,687
HOMEREACH HOMECARE	3,079	125	0	0	0	3,204
HOWES ,GREGORY A DO	0	3,496	0	0	0	3,496
HUGHES ,EDWARD N MD	0	0	0	0	4,964	4,964
IMWALLE ,LAUREN E MD	2,692	0	0	0	0	2,692

EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
INDIANA UNIVERSITY HEALTH	3,438	67	0	0	0	3,506
INGRAFFEA ,ADAM A MD	0	2,335	0	0	0	2,335
JEWISH HOME OF CINCI	4,597	0	0	0	0	4,597
JEWISH HOSPITAL LLC	78,731	13,051	0	0	3,045	94,827
JUDSON CARE CENTER	5,632	0	0	0	0	5,632
KELLY JOHN B	2,434	0	0	0	0	2,434
KETTERING MEDICAL CE	23,729	6,468	0	0	0	30,197
KETTERING MEDICAL CENTER	26,809	2,910	0	166	0	29,885
KETTERING MEDICAL CENTER SYCAMORE	9,779	498	0	0	0	10,277
KEYSTONE POINTE HEAL	2,679	0	0	0	0	2,679
KIDNEY AND HYPERTENS	3,130	138	0	0	0	3,268
KINDRED TRANSITIONAL	5,198	0	0	0	0	5,198
KIRSH ,GARY M MD	7,505	0	0	0	0	7,505
KREMCEK ,TIMOTHY MD	4,927	0	0	0	0	4,927
KUMAR DIALYSIS LLC	24,484	45,741	0	0	0	70,225
LABCORP OF AMERICA HOLDINGS	1,961	389	0	0	0	2,351
LAKE HOSPITAL SYSTEM	8,846	0	0	0	0	8,846
LAKEWOOD HOSPITAL	9,527	400	0	0	0	9,927
LAKEWOOD RANCH MEDICAL CENTER	2,234	0	0	0	0	2,234
LARKIN JOHN J	2,200	287	0	0	0	2,487
LIBERTY DIALYSIS KEN	8,567	0	0	0	0	8,567
LIBERTY DIALYSIS LLC	0	13,243	0	0	0	13,243
LICKING MEMORIAL HOS	3,255	65	0	0	0	3,320
LIED ,ALLISON E MD	2,110	0	0	0	0	2,110
LINDNER CENTER OF HOPE	4,556	484	0	0	0	5,040
LUKE TIMOTHY	0	0	11,797	0	0	11,797
LUTHERAN HOSPITAL	13,377	655	0	0	0	14,033
MANAGEMENT AND NETWO	45,666	0	0	0	0	45,666
MANNION BRIAN A	13,215	0	0	0	0	13,215
MANORCARE OF MAYFIEL	3,715	0	0	0	0	3,715
MARIN GENERAL HOSPITAL	3,777	0	0	0	0	3,777
MARYMOUNT HOSPITAL	9,110	0	0	0	0	9,110
MCCULLOUGH MARY ELLE	2,171	0	0	0	0	2,171
MCHS WILLOUGHBY	2,877	0	0	0	0	2,877
MED RIDE	3,983	0	0	0	0	3,983
MEDICAL CENTER AT BOWLING GREEN	14,414	0	0	0	0	14,414
MEDINA HOSPITAL	11,079	11,908	0	0	0	22,988
MERCY COMMUNITY REGI	37,753	15,721	0	0	0	53,474
MERCY EMERGENCY PHYSICIANS	2,572	598	0	0	0	3,169
MERCY HEALTH ANDERSO	1,037	4,800	0	0	0	5,837
MERCY HEALTH ANDERSON HOSPITAL	25,613	2,774	349	0	0	28,736
MERCY HEALTH CLERMON	7,608	5,624	0	0	0	13,232
MERCY HEALTH CLERMONT HOSPITAL	20,800	1,978	400	0	0	23,179
MERCY HEALTH FAIRFIE	1,545	707	170	0	0	2,422
MERCY HEALTH FAIRFIELD HOSPITAL	42,998	638	221	0	0	43,857
MERCY HEALTH WEST HOSPITAL	12,555	840	0	0	0	13,395
MERCY HOSPITAL MOUNT	7,825	0	0	0	0	7,825
MERCY HOSPITAL WESTERN HILLS	0	2,759	0	0	0	2,759
MERCY OCCUPATIONAL H	4,219	74	0	0	0	4,293
MERCY ST VINCENT NW	203,597	0	0	0	0	203,597
METHODIST HOSPITAL	4,063	0	0	0	0	4,063

EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
METHODIST MEDICAL CENTER .....	3,580	0	0	0	0	3,580
METROHEALTH MEDICAL .....	3,048	0	0	0	0	3,048
MIAMI VALLEY HOSPITA .....	5,331	0	0	0	0	5,331
MIAMI VALLEY HOSPITAL .....	10,103	696	0	0	0	10,799
MILLENIUM LABORATORI .....	2,386	282	0	0	0	2,667
MITCHELL JERRY W .....	10,095	0	0	0	0	10,095
MOTLEY III ,WILLIAM WALKER MD .....	2,141	0	0	0	0	2,141
MOUNT CARMEL EAST .....	23,232	2,284	0	0	0	25,516
MOUNT CARMEL HOME CA .....	7,370	0	0	0	0	7,370
MOUNT CARMEL MEDICAL .....	12,416	10,786	0	0	0	23,202
MOUNT CARMEL NEW ALB .....	3,393	0	0	0	0	3,393
MOUNT WASHINGTON CAR .....	3,642	0	0	0	0	3,642
NAC CDC EUCLID .....	2,860	0	0	0	0	2,860
NATIONAL CHURCH RESI .....	5,907	0	0	0	0	5,907
NEWARK HEALTHCARE CE .....	2,879	0	0	0	0	2,879
NITZ ,PAUL A MD .....	2,523	0	0	0	0	2,523
NOEL CURTIS R .....	2,003	0	0	0	0	2,003
NORTHWESTERN MEMORIAL HOSPITAL .....	6,290	0	0	0	0	6,290
NORTON AUDUBON HOSPITAL .....	2,448	0	0	0	0	2,448
OAKDALE COMMUNITY HOSPITAL .....	2,594	0	0	0	0	2,594
OHIO DJFS .....	14,680	102	0	0	0	14,782
OHIO HOSPITAL FOR PS .....	6,768	120	0	0	0	6,888
OHIO STATE UNIV .....	102,047	0	0	0	0	102,047
OHIO STATE UNIV HOSPITALS .....	4,392	0	232	0	0	4,624
ORCHARD VILLA .....	6,218	0	0	0	0	6,218
OTTERBEIN LEBANON RE .....	2,167	0	0	0	0	2,167
PALISADES MEDICAL CE .....	24,048	0	0	0	0	24,048
PASSPORT HEALTH PLAN .....	0	0	5,638	0	0	5,638
PATER ,LUKE E MD .....	6,090	719	0	0	0	6,809
PATIENT AIDS INC .....	1,902	731	0	0	0	2,634
PHYSICIANS ANESTHESIA SERVICES INC GROUP .....	2,535	738	847	0	1,500	5,620
PIONEER ANESTHESIA CONSULTANTS LLC .....	0	3,440	0	0	0	3,440
PLISKIN MARC J .....	2,160	0	0	0	0	2,160
PRATT ,DAVID MD .....	2,404	0	0	0	0	2,404
PREVEDELLO DANIEL M .....	5,111	0	0	0	0	5,111
PROVIDENCE PAVILION .....	4,122	300	0	0	0	4,422
QUALIFIED EMERGENCY .....	2,489	0	0	0	0	2,489
QUALIFIED EMERGENCY SPECIALISTS INC .....	6,500	1,349	0	0	0	7,849
QUEST DIAGNOSTICS .....	1,899	437	0	0	0	2,335
RADIOLOGY ASSOCIATES .....	3,174	542	0	0	0	3,716
RCHP WILMINGTON LLC .....	3,903	275	0	0	0	4,178
REDDEN BOROWSKI MICH .....	1,620	2,051	0	0	0	3,670
REGENCY MANOR REHABI .....	3,675	0	0	0	0	3,675
REHABCLINICS SPT INC .....	2,913	444	0	0	172	3,529
RISON ALLAN .....	2,105	0	0	0	0	2,105
RIVERSIDE METHODIST .....	32,678	21,121	0	0	0	53,799
RIVERSIDE SENIOR HEA .....	0	2,049	0	0	0	2,049
ROCKMILL REHABILITAT .....	3,853	0	0	0	0	3,853
RODWAY ,IAN P MD .....	2,319	0	0	0	147	2,466
RODWAY IAN P .....	0	2,015	0	0	0	2,015
ROHMILLER ,MICHAEL T MD .....	25	0	0	0	2,072	2,097



EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
ROLLER ,JASON R PA	0	3,376	0	0	0	3,376
ROSELLI ERIC E	6,149	0	0	0	0	6,149
RUTTER ,MICHAEL J MD	16,534	0	0	0	0	16,534
SACHS BRADLEY A	2,786	0	0	0	0	2,786
SACRED HEART HOSPITAL ON THE EMERALD COAST	3,527	0	0	0	0	3,527
SAINT JOSEPH HEALTH SYSTEM	1,109	904	0	0	0	2,013
SAMY ,RAVI N MD	2,090	0	0	0	0	2,090
SCHAUER PHILIP R	2,011	0	0	0	0	2,011
SCHEIDLER ,JOSEPH S DO	3,402	0	0	0	0	3,402
SELECT SPECIALTY HOS	0	19,406	0	0	0	19,406
SHNEKER BASSEL F	2,279	0	0	0	0	2,279
SILVERTON HOME TRAINING DIALYSIS CENTER	13,581	0	0	0	0	13,581
SOUTH POINTE HOSPITA	11,116	0	0	0	0	11,116
SOUTHVIEW HOSPITAL	11,582	1,314	0	0	895	13,791
SOUTHWEST GENERAL HE	2,505	0	0	0	0	2,505
SOUTHWEST OHIO AMBULATORY SURGERY CENTER LTD	2,197	0	0	0	0	2,197
SPRINGFIELD REGIONAL MEDICAL CENTER	4,897	220	0	0	0	5,117
SPRINGHILL MEMORIAL HOSPITAL	2,466	0	0	0	0	2,466
ST ANNS HOSPITAL	7,783	0	0	0	0	7,783
ST BERNARDINE MEDICAL CENTER	0	0	0	0	16,636	16,636
ST DAVIDS SOUTH AUST	4,083	0	0	0	0	4,083
ST ELIZABETH HEALTHC	144,460	26,024	0	0	0	170,484
ST ELIZABETH HEALTHCARE	66,882	12,751	0	0	1,463	81,096
ST FRANCIS MEDICAL CENTER	10,005	0	0	0	0	10,005
ST JOSEPHS HOSPITAL INC	4,586	0	0	0	0	4,586
ST LUKES HOSPITAL	2,037	0	0	0	0	2,037
ST VINCENT HOSPITAL AND HEALTH CARE CENTER	73,964	24,706	0	0	0	98,670
STANISIC ,SLOBODAN M MD	5,985	0	0	0	0	5,985
STEINBECK ,FREDERICK L DDS	2,180	0	0	0	0	2,180
SUMMA BARBERTON CITI	28,754	65,599	0	0	0	94,354
SUMMA HEALTH SYSTEMS	60,750	3,020	0	0	0	63,771
SUMMA WESTERN RESERV	914	21,822	0	0	0	22,736
SUMMIT SURGICAL CENTER	5,460	0	0	0	0	5,460
SYCAMORE GLEN HEALTH	3,527	0	0	0	0	3,527
TOLEDO HOSPITAL	37,490	0	0	0	0	37,490
TOTAL HOME HEALTH CA	3,591	0	2,360	0	0	5,951
TOURO INFIRMARY HOSPITAL	2,971	0	0	0	0	2,971
TRI STATE CENTERS FO	4,845	465	0	0	0	5,310
TRIHEALTH HOSPITAL I	8,664	716	0	0	0	9,381
TRIHEALTH HOSPITAL INC	15,742	0	0	0	0	15,742
UAMS HOSPITAL	4,205	0	78,071	0	0	82,276
UH REGIONAL HOSPITAL	9,987	0	0	0	0	9,987
UK HEALTHCARE HOSPITAL	2,196	143	0	0	0	2,339
UNABLE TO UPDATE PROVIDER INFORMATION ,A	814	1,222	0	0	0	2,036
UNITED SHOCKWAVE THERAPIES	0	2,750	0	0	0	2,750
UNIVERSITY HOSPITAL	165,293	7,655	42,463	0	52	215,463
UNIVERSITY OF TOLEDO MEDICAL CENTER	0	2,462	786	0	0	3,248
UROLOGY CENTER LLC	3,655	0	0	0	0	3,655
VERITAS LABORATORIES LLC	3,440	0	0	0	0	3,440
VILLA GEORGETOWN NUR	2,571	0	0	0	0	2,571
VILLASPRING C O CARE	12,356	0	0	0	0	12,356

EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
WALL ,ERIC J MD .....	1,849	3,589	0	0	0	5,438
WARD PATRICK J .....	2,470	0	0	0	0	2,470
WATERHOUSE ,DAVID M MD .....	2,204	56	0	0	0	2,261
WATERHOUSE DAVID M .....	4,767	0	0	0	0	4,767
WELLSPRING HEALTH CENTER .....	3,238	0	0	0	0	3,238
WEST CHESTER MEDICAL .....	67,229	2,647	182	0	400	70,458
WESTERN HILLS DIALYSIS .....	14,234	11,579	0	0	0	25,813
WHITE OAK HOME TRAINING .....	9,076	0	0	0	0	9,076
WINKELMANN ,JOHN C MD .....	1,175	1,775	0	0	0	2,950
WINKELMANN JOHN C .....	2,512	0	772	0	0	3,284
WOODS AT PARKSIDE .....	3,205	0	0	0	0	3,205
0199999. Individually listed claims unpaid	3,794,810	552,126	198,189	1,037	60,662	4,606,824
0299999. Aggregate accounts not individually listed- uncovered	0	0	0	0	0	0
0399999. Aggregate accounts not individually listed-covered	598,798	61,836	5,734	1,786	34,465	702,619
0499999. Subtotals	4,393,608	613,962	203,923	2,823	95,127	5,309,443
0599999. Unreported claims and other claim reserves						26,437,748
0699999. Total amounts withheld						0
0799999. Total claims unpaid						31,747,191
0899999 Accrued medical incentive pool and bonus amounts						0





## EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

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EXHIBIT 8 - FURNITURE, EQUIPMENT AND SUPPLIES OWNED

		1	2	3	4	5	6
Description		Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
1.	Administrative furniture and equipment .....	4,000,962	0	2,639,593	1,361,369	1,361,369	0
2.	Medical furniture, equipment and fixtures .....	11,586	0	1,589	9,997	9,997	0
3.	Pharmaceuticals and surgical supplies .....	0	0	0	0	0	0
4.	Durable medical equipment .....	0	0	0	0	0	0
5.	Other property and equipment	3,194,951	0	1,426,370	1,768,581	1,768,581	0
6.	Total	7,207,499	0	4,067,552	3,139,947	3,139,947	0



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Humana Health Plan of Ohio, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION 2. (LOCATION)

NAIC Group Code	BUSINESS IN THE STATE OF Indiana			DURING THE YEAR 2013							NAIC Company Code
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:											
1. Prior Year .....											
2. First Quarter .....											
3. Second Quarter .....											
4. Third Quarter .....											
5. Current Year											
6. Current Year Member Months											
Total Member Ambulatory Encounters for Year:											
7. Physician .....											
8. Non-Physician .....											
9. Total											
10. Hospital Patient Days Incurred											
11. Number of Inpatient Admissions											
12. Health Premiums Written (b) .....											
13. Life Premiums Direct											
14. Property/Casualty Premiums Written .....											
15. Health Premiums Earned.....											
16. Property/Casualty Premiums Earned											
17. Amount Paid for Provision of Health Care Services.....											
18. Amount Incurred for Provision of Health Care Services											

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products ..... .  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Humana Health Plan of Ohio, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Humana Health Plan of Ohio, Inc. 2. Cincinnati, OH

NAIC Group Code		BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
0119		Kentucky		2013							NAIC Company Code	
		Comprehensive (Hospital & Medical)									95348	
		1	2	3	4	5	6	7	8	9	10	
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:												
1. Prior Year	4,333	0	0	0	0	0	475	0	3,858	0	0	
2. First Quarter	5,029	0	0	0	0	0	161	0	4,868	0	0	
3. Second Quarter	5,022	0	0	0	0	0	80	0	4,942	0	0	
4. Third Quarter	5,293	0	0	0	0	0	239	0	5,054	0	0	
5. Current Year	5,463	0	0	0	0	0	259	0	5,204	0	0	
6. Current Year Member Months	62,061	0	0	0	0	0	2,312	0	59,749	0	0	
Total Member Ambulatory Encounters for Year:												
7. Physician	89,509	0	0	0	0	0	0	0	89,509	0	0	
8. Non-Physician	49,730	0	0	0	0	0	0	0	49,730	0	0	
9. Total	139,239	0	0	0	0	0	0	0	139,239	0	0	
10. Hospital Patient Days Incurred	13,012	0	0	0	0	0	0	0	13,012	0	0	
11. Number of Inpatient Admissions	1,743	0	0	0	0	0	0	0	1,743	0	0	
12. Health Premiums Written (b)	44,251,598	0	0	0	0	0	63,926	0	44,187,672	0	0	
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	0	
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	0	
15. Health Premiums Earned	44,251,598	0	0	0	0	0	63,926	0	44,187,672	0	0	
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	
17. Amount Paid for Provision of Health Care Services	39,654,955	0	0	0	0	0	3,133	0	39,651,822	0	0	
18. Amount Incurred for Provision of Health Care Services	40,650,530	0	0	0	0	0	9,693	0	40,640,837	0	0	

(a) For health business: number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0 .

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 44,187,672





ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Humana Health Plan of Ohio, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Humana Health Plan of Ohio, Inc. 2. Cincinnati, OH

NAIC Group Code		BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
0119		Ohio		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	95348	
			2	3								
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:												
1.	Prior Year .....	58,524	41	48,902	0	284	437	0	8,860	0	0	
2.	First Quarter .....	65,681	40	49,945	0	747	690	465	13,794	0	0	
3.	Second Quarter .....	66,493	38	50,047	0	806	910	475	14,217	0	0	
4.	Third Quarter .....	68,405	36	51,230	0	850	1,046	521	14,722	0	0	
5.	Current Year .....	69,874	36	51,850	0	889	1,127	569	15,403	0	0	
6.	Current Year Member Months	807,100	455	607,748	0	9,663	10,839	5,907	172,488	0	0	
Total Member Ambulatory Encounters for Year:												
7.	Physician .....	540,729	0	291,638	0	0	0	3,402	245,689	0	0	
8.	Non-Physician .....	246,555	0	99,495	0	0	0	1,392	145,668	0	0	
9.	Total .....	787,284	0	391,133	0	0	0	4,794	391,357	0	0	
10.	Hospital Patient Days Incurred	51,840	0	11,739	0	0	0	105	39,996	0	0	
11.	Number of Inpatient Admissions	7,534	0	2,351	0	0	0	26	5,157	0	0	
12.	Health Premiums Written (b) .....	323,074,833	307,700	185,816,294	0	93,388	259,581	2,028,602	134,569,316	0	(48)	
13.	Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	
14.	Property/Casualty Premiums Written .....	0	0	0	0	0	0	0	0	0	0	
15.	Health Premiums Earned .....	322,963,577	307,700	185,705,038	0	93,388	259,581	2,028,602	134,569,316	0	(48)	
16.	Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	
17.	Amount Paid for Provision of Health Care Services .....	257,755,275	1,109,885	137,578,729	0	70,784	155,693	1,824,926	117,015,201	0	57	
18.	Amount Incurred for Provision of Health Care Services	262,309,733	1,016,459	137,633,403	0	70,784	157,948	1,933,405	121,497,688	0	46	

(a) For health business: number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .  
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ ..... 134,569,316



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Humana Health Plan of Ohio, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Humana Health Plan of Ohio, Inc. 2. Cincinnati, OH

NAIC Group Code		BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
0119		Grand Total		2013							NAIC Company Code	
		Comprehensive (Hospital & Medical)									95348	
		1	2	3	4	5	6	7	8	9	10	
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:												
1.	Prior Year	62,857	41	48,902	0	284	912	0	12,718	0	0	
2.	First Quarter	70,710	40	49,945	0	747	851	465	18,662	0	0	
3.	Second Quarter	71,515	38	50,047	0	806	990	475	19,159	0	0	
4.	Third Quarter	73,698	36	51,230	0	850	1,285	521	19,776	0	0	
5.	Current Year	75,337	36	51,850	0	889	1,386	569	20,607	0	0	
6.	Current Year Member Months	869,161	455	607,748	0	9,663	13,151	5,907	232,237	0	0	
Total Member Ambulatory Encounters for Year:												
7.	Physician	630,238	0	291,638	0	0	0	3,402	335,198	0	0	
8.	Non-Physician	296,285	0	99,495	0	0	0	1,392	195,398	0	0	
9.	Total	926,523	0	391,133	0	0	0	4,794	530,596	0	0	
10.	Hospital Patient Days Incurred	64,852	0	11,739	0	0	0	105	53,008	0	0	
11.	Number of Inpatient Admissions	9,277	0	2,351	0	0	0	26	6,900	0	0	
12.	Health Premiums Written (b)	367,326,431	307,700	185,816,294	0	93,388	323,507	2,028,602	178,756,988	0	(48)	
13.	Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	
14.	Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	
15.	Health Premiums Earned	367,215,175	307,700	185,705,038	0	93,388	323,507	2,028,602	178,756,988	0	(48)	
16.	Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	
17.	Amount Paid for Provision of Health Care Services	297,410,230	1,109,885	137,578,729	0	70,784	158,826	1,824,926	156,667,023	0	57	
18.	Amount Incurred for Provision of Health Care Services	302,960,263	1,016,459	137,633,403	0	70,784	167,641	1,933,405	162,138,525	0	46	

(a) For health business: number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0 .

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 178,756,988

Schedule S - Part 1 - Section 2  
**N O N E**

Schedule S - Part 2  
**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Humana Health Plan of Ohio, Inc.

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4  Name of Company	5 Domiciliary Jurisdiction	6 Type	7 Premiums	8 Unearned Premiums (Estimated)	9 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
									10 Current Year	11 Prior Year		
0399999. Total General Account - Authorized U.S. Affiliates						0	0	0	0	0	0	0
0699999. Total General Account - Authorized Non-U.S. Affiliates						0	0	0	0	0	0	0
0799999. Total General Account - Authorized Affiliates						0	0	0	0	0	0	0
42307	13-3138390	10/01/2012	NAVIGATORS INSURANCE COMPANY	NY	SSL/A/I	154,545	0	0	0	0	0	0
88340	59-2859797	10/01/2013	HANNOVER LIFE REASSURANCE CO OF AMERICA	FL	SSL/A/I	31,575	0	0	0	0	0	0
10357	52-1952955	10/01/2013	PLATINUM UNDERWRITERS REINS INC	MD	SSL/A/I	54,539	0	0	0	0	0	0
0899999. General Account - Authorized U.S. Non-Affiliates						240,659	0	0	0	0	0	0
1099999. Total General Account - Authorized Non-Affiliates						240,659	0	0	0	0	0	0
1199999. Total General Account Authorized						240,659	0	0	0	0	0	0
1499999. Total General Account - Unauthorized U.S. Affiliates						0	0	0	0	0	0	0
1799999. Total General Account - Unauthorized Non-U.S. Affiliates						0	0	0	0	0	0	0
1899999. Total General Account - Unauthorized Affiliates						0	0	0	0	0	0	0
2199999. Total General Account - Unauthorized Non-Affiliates						0	0	0	0	0	0	0
2299999. Total General Account Unauthorized						0	0	0	0	0	0	0
2599999. Total General Account - Certified U.S. Affiliates						0	0	0	0	0	0	0
2899999. Total General Account - Certified Non-U.S. Affiliates						0	0	0	0	0	0	0
2999999. Total General Account - Certified Affiliates						0	0	0	0	0	0	0
3299999. Total General Account - Certified Non-Affiliates						0	0	0	0	0	0	0
3399999. Total General Account Certified						0	0	0	0	0	0	0
3499999. Total General Account Authorized, Unauthorized and Certified						240,659	0	0	0	0	0	0
3799999. Total Separate Accounts - Authorized U.S. Affiliates						0	0	0	0	0	0	0
4099999. Total Separate Accounts - Authorized Non-U.S. Affiliates						0	0	0	0	0	0	0
4199999. Total Separate Accounts - Authorized Affiliates						0	0	0	0	0	0	0
4499999. Total Separate Accounts - Authorized Non-Affiliates						0	0	0	0	0	0	0
4599999. Total Separate Accounts Authorized						0	0	0	0	0	0	0
4899999. Total Separate Accounts - Unauthorized U.S. Affiliates						0	0	0	0	0	0	0
5199999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates						0	0	0	0	0	0	0
5299999. Total Separate Accounts - Unauthorized Affiliates						0	0	0	0	0	0	0
5599999. Total Separate Accounts - Unauthorized Non-Affiliates						0	0	0	0	0	0	0
5699999. Total Separate Accounts Unauthorized						0	0	0	0	0	0	0
5999999. Total Separate Accounts - Certified U.S. Affiliates						0	0	0	0	0	0	0
6299999. Total Separate Accounts - Certified Non-U.S. Affiliates						0	0	0	0	0	0	0
6399999. Total Separate Accounts - Certified Affiliates						0	0	0	0	0	0	0
6699999. Total Separate Accounts - Certified Non-Affiliates						0	0	0	0	0	0	0
6799999. Total Separate Accounts Certified						0	0	0	0	0	0	0
6899999. Total Separate Accounts Authorized, Unauthorized and Certified						0	0	0	0	0	0	0
6999999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)						240,659	0	0	0	0	0	0
7099999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)						0	0	0	0	0	0	0
9999999 - Totals						240,659	0	0	0	0	0	0

Schedule S - Part 4  
**N O N E**

Schedule S - Part 4 - Bank Footnote  
**N O N E**

Schedule S - Part 5  
**N O N E**

Schedule S - Part 5 - Bank Footnote  
**N O N E**

SCHEDULE S - PART 6

Five Year Exhibit of Reinsurance Ceded Business (000 Omitted)

	1 2013	2 2012	3 2011	4 2010	5 2009
A. OPERATIONS ITEMS					
1. Premiums .....	241	183	174	130,109	242,816
2. Title XVIII - Medicare .....	0	0	0	0	0
3. Title XIX - Medicaid .....	0	0	0	0	0
4. Commissions and reinsurance expense allowance .....	0	0	0	0	0
5. Total hospital and medical expenses .....	(33)	2,572	0	107,378	201,320
B. BALANCE SHEET ITEMS					
6. Premiums receivable .....	0	0	0	0	0
7. Claims payable .....	0	0	0	0	18,373
8. Reinsurance recoverable on paid losses .....	0	520	0	0	0
9. Experience rating refunds due or unpaid .....	0	0	0	0	0
10. Commissions and reinsurance expense allowances due .....	0	0	0	0	0
11. Unauthorized reinsurance offset .....	0	0	0	0	0
12. Offset for reinsurance with Certified Reinsurers .....	0	0	XXX	XXX	XXX
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
13. Funds deposited by and withheld from (F) .....	0	0	0	0	0
14. Letters of credit (L) .....	0	0	0	0	0
15. Trust agreements (T) .....	0	0	0	0	0
16. Other (O) .....	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17. Multiple Beneficiary Trust .....	0	0	XXX	XXX	XXX
18. Funds deposited by and withheld from (F) .....	0	0	XXX	XXX	XXX
19. Letters of credit (L) .....	0	0	XXX	XXX	XXX
20. Trust agreements (T) .....	0	0	XXX	XXX	XXX
21. Other (O) .....	0	0	XXX	XXX	XXX

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	76,804,848	0	76,804,848
2. Accident and health premiums due and unpaid (Line 15) .....	5,182,872	0	5,182,872
3. Amounts recoverable from reinsurers (Line 16.1) .....	0	0	0
4. Net credit for ceded reinsurance .....	XXX	0	0
5. All other admitted assets (Balance) .....	8,746,793	(86,106)	8,660,687
6. Total assets (Line 28)	90,734,513	(86,106)	90,648,407
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
7. Claims unpaid (Line 1) .....	31,747,191	0	31,747,191
8. Accrued medical incentive pool and bonus payments (Line 2) .....	0	0	0
9. Premiums received in advance (Line 8) .....	3,218,552	0	3,218,552
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19 first inset amount plus second inset amount) .....	0	0	0
11. Reinsurance in unauthorized companies (Line 20 minus inset amount) .....	0	0	0
12. Reinsurance with Certified Reinsurers (Line 20 inset amount) .....	0	0	0
13. Funds held under reinsurance treaties with Certified Reinsurers (Line 19 third inset amount) .....	0	0	0
14. All other liabilities (Balance) .....	7,168,921	(86,106)	7,082,815
15. Total liabilities (Line 24) .....	42,134,664	(86,106)	42,048,558
16. Total capital and surplus (Line 33) .....	48,599,849	XXX	48,599,849
17. Total liabilities, capital and surplus (Line 34)	90,734,513	(86,106)	90,648,407
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
18. Claims unpaid .....	0		
19. Accrued medical incentive pool .....	0		
20. Premiums received in advance .....	0		
21. Reinsurance recoverable on paid losses .....	0		
22. Other ceded reinsurance recoverables .....	86,106		
23. Total ceded reinsurance recoverables .....	86,106		
24. Premiums receivable .....	0		
25. Funds held under reinsurance treaties with authorized and unauthorized reinsurers .....	0		
26. Unauthorized reinsurance .....	0		
27. Reinsurance with Certified Reinsurers .....	0		
28. Funds held under reinsurance treaties with Certified Reinsurers .....	0		
29. Other ceded reinsurance payables/offsets .....	86,106		
30. Total ceded reinsurance payables/offsets .....	86,106		
31. Total net credit for ceded reinsurance	0		

**SCHEDULE T - PART 2**  
**INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN**  
Allocated by States and Territories

States, Etc.		Direct Business Only				
		1	2	3	4	6
		Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Totals
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				
59.	Total					

NONE



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Humana Health Plan of Ohio, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0119	Humana Inc.	00000	65-0851053				154th Street Medical Plaza, Inc.	FL	NIA	CAC-Florida Medical Centers, LLC SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-0381804				1st Choice Home Health Care, LLC	FL	NIA		Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-5309363				515-526W MainSt CondoCouncil of Co-Owners	KY	NIA	Preservation on Main, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0293220				54th Street Medical Plaza, Inc.	FL	NIA	CAC-Florida Medical Centers, LLC	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	46-1225873				Agile Technology Solutions, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	27-0200477				Ambulatory Care Solutions of Arkansas LLC	AR	NIA	Humana Government Business, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-4179617				Ambulatory Care Solutions of Ohio LLC	OH	NIA	Humana Government Business, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	37-1485812				Ambulatory Care Solutions, LLC	IN	NIA	Humana Government Business, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95107	56-1796975				American Dental Plan of N. C., Inc.	NC	IA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	11559	58-2302163				American Dental Providers of Ark., Inc.	AR	IA	Humana Dental Company SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	45-3818750				American Eldercare of North Florida, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0380198				American Eldercare, Inc.	FL	NIA		Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1478012				American Tax Credit Corp GA Fund III, LLC	DE	OTH	See Footnote 1	Other	0.000	Humana Inc.	1
0119	Humana Inc.	00000	77-0540040				Anvita, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	27-3387971				Arcadian Choice, Inc.	TX	NIA	Arcadian Management Services, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12151	20-1001348				Arcadian Health Plan, Inc.	WA	IA	Arcadian Management Services, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	86-0836599				Arcadian Management Services, Inc.	DE	NIA	Arcadian Management Services, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-2681597				Auto Injury Solutions, Inc.	DE	NIA	Concentra Integrated Services, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	59-3715944				Availity, L.L.C.	DE	OTH	See Footnote 2	Board of Directors	0.000	Humana Inc.	2
0119	Humana Inc.	00000	30-0117876				CAC Medical Center Holdings, Inc.	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-0010657				CAC-Florida Medical Centers, LLC	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	13-4106498				Cambridge Companions, LLC	NY	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	13-4076893				Cambridge Personal Care, LLC	NY	NIA	SeniorBridge Family Companies, Inc. SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-0815856				Care Partners Home Care, LLC	FL	NIA		Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	39-1514846				CareNetwork, Inc.	WI	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95092	59-2598550				CarePlus Health Plans, Inc.	FL	IA	CPHP Holdings, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95754	62-1579044				Cariten Health Plan Inc.	TN	IA	PHP Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	82740	62-0729865				Cariten Insurance Company	TN	IA	PHP Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	80-0072760				Certify Data Systems, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95158	61-1279717				CHA HMO, Inc.	KY	IA	CHA Service Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1279716				CHA Service Company	KY	NIA	Humana Health Plan, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	01-0510161				CM Occupational Health, L.L.C.	ME	NIA	See Footnote 3	Joint Venture	0.000	Humana Inc.	3
0119	Humana Inc.	00000	20-5440995				CNU Blue 2, LLC	FL	NIA	Continuicare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	52015	59-2531815				CompBenefits Company	FL	IA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	04-3185995				CompBenefits Corporation	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	11228	36-3686002				CompBenefits Dental, Inc.	IL	IA	Dental Care Plus Management Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	58-2228851				CompBenefits Direct, Inc.	DE	NIA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	60984	74-2552026				CompBenefits Insurance Company	TX	IA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12250	63-1063101				CompBenefits of Alabama, Inc.	AL	IA	HumanaCares, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	58-2198538				CompBenefits of Georgia, Inc.	GA	IA	HumanaCares, Inc. SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	45-3713941				Complex Clinical Management, Inc.	FL	NIA		Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	42-1575099				Comprehensive Health Insights, Inc.	IL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-0114482				Concentra Akron, L.L.C.	DE	NIA	See Footnote 4	Joint Venture	100.000	Humana Inc.	4
0119	Humana Inc.	00000	62-1691148				Concentra Arkansas, L.L.C.	DE	NIA	See Footnote 10	Joint Venture	0.000	Humana Inc.	10
0119	Humana Inc.	00000	75-2510547				Concentra Health Services, Inc.	NV	NIA	Concentra Operating Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-4823524				Concentra Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
.0119	Humana Inc.	.00000	04-2658593				Concentra Integrated Services, Inc.	MA	NIA	National Healthcare Resources, Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	76-0546504				Concentra Laboratory, L.L.C.	DE	NIA	National Healthcare Resources, Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	75-2857879				Concentra Occ Health Research Institute	TX	NIA	Concentra Health Services, Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	23-2901126				Concentra Occ Healthcare Harrisburg, L.P.	PA	NIA	See Footnote 11	Joint Venture	0.000	Humana Inc.	11
.0119	Humana Inc.	.00000	04-3363415				Concentra Operating Corporation	DE	NIA	Concentra Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	75-2678146				Concentra Solutions, Inc.	DE	NIA	Concentra Health Services, Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	75-2784513				Concentra South Carolina, L.L.C.	DE	NIA	See Footnote 12	Joint Venture	0.000	Humana Inc.	12
.0119	Humana Inc.	.00000	75-2821236				Concentra St. Louis, L.L.C.	DE	NIA	See Footnote 13	Joint Venture	0.000	Humana Inc.	13
.0119	Humana Inc.	.00000	22-3675361				Concentra-UPMC, L.L.C.	DE	NIA	See Footnote 14	Joint Venture	0.000	Humana Inc.	14
.0119	Humana Inc.	.00000	59-2716023				Continucare Corporation	FL	NIA	Metropolitan Health Networks, Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	65-0796178				Continucare Managed Care, Inc.	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	20-5646291				Continucare MDHC, LLC	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	65-0791417				Continucare Medical Management, Inc.	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	65-0780986				Continucare MSO, Inc.	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	20-8236655				Corphealth Provider Link, Inc.	TX	NIA	Corphealth, Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	75-2043865				Corphealth, Inc.	TX	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	33-0916248				DefenseWeb Technologies, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	36-3512545				Dental Care Plus Management Corp.	IL	NIA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	95161	76-0039628				DentiCare, Inc.	TX	IA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	59-3657970				Elder Health Care of Volusia, Inc.	FL	NIA	METCARE of Florida, Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	88595	31-0935772				Emphesys Insurance Company	TX	IA	Emphesys, Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	61-1237697				Emphesys, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	27-1649291				Harris, Rothenberg International Inc.	NY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
										SeniorBridge Family Companies (NY), Inc.				
.0119	Humana Inc.	.00000	11-2795529				Harte Placements, Inc.	NY	NIA		Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	61-1223418				Health Value Management, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	45-3116348				HomeCare Health Solutions, Inc.	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	26-3592783				HUM INT, LLC	DE	NIA	HUM-Holdings International, Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	20-4835394				Humana Active Outlook, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.10126	65-1137990				Humana AdvantageCare Plan, Inc.	FL	IA	Humana Medical Plan, Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	60052	37-1326199				Humana Benefit Plan of Illinois, Inc.	IL	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	59-1843760				Humana Dental Company	FL	NIA	CompBenefits Corporation	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	95519	58-2209549				Humana Employers Health Plan of GA. Inc.	GA	IA	Humana Insurance Company	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	61-1241225				Humana Government Business, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	95642	72-1279235				Humana Health Benefit Plan of LA, Inc.	LA	IA	Humana Health Plan Interests, Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.13558	26-2800286				Humana Health Company of New York, Inc.	NY	IA	Arcadian Management Services, Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	69671	61-1041514				Humana Health Ins. Co. of Florida, Inc.	FL	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	71-0732385				Humana Health Plan Interests, Inc.	LA	NIA	Humana Insurance Company	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	26-3473328				Humana Health Plan of California, Inc.	CA	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	95348	31-1154200				Humana Health Plan of Ohio, Inc.	OH	RE	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	95024	61-0994632				Humana Health Plan of Texas, Inc.	TX	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	95885	61-1013183				Humana Health Plan, Inc.	KY	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	95721	66-0406896				Humana Health Plans of Puerto Rico, Inc.	PR	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	61-0647538			NYSE	Humana Inc.	DE	UDP		Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	61-1343791				Humana Innovation Enterprises, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	73288	39-1263473				Humana Insurance Company	WI	IA	CareNetwork, Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	60219	61-1311685				Humana Insurance Company of Kentucky	KY	IA	Humana Insurance Company	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	12634	20-2888723				Humana Insurance Company of New York	NY	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	84603	66-0291866				Humana Insurance of Puerto Rico, Inc.	PR	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	20-3364857				Humana MarketPOINT of Puerto Rico, Inc.	PR	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
.0119	Humana Inc.	.00000	61-1343508				Humana MarketPOINT, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0119	Humana Inc.	14224	27-3991410				Humana Medical Plan of Michigan, Inc.	MI	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	14462	27-4660531				Humana Medical Plan of Pennsylvania, Inc.	PA	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12908	20-8411422				Humana Medical Plan of Utah, Inc.	UT	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95270	61-1103898				Humana Medical Plan, Inc.	FL	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	45-2254346				Humana Pharmacy Solutions, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1316926				Humana Pharmacy, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12282	20-2036444				Humana Regional Health Plan, Inc.	AR	IA	Arcadian Management Services, Inc./Arcadia Health Plan, Inc.	Ownership	100.000	Humana Inc.	8
0119	Humana Inc.	00000	20-8418853				Humana Veterans Healthcare Services, Inc.	DE	NIA	Humana Government Business, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-4522426				Humana WellWorks LLC	DE	NIA	Health Value Management, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95342	39-1525003				Humana Wisc. Health Org. Ins. Corp.	WI	IA	CareNetwork, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0274594				HumanaCares, Inc.	FL	NIA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	70580	39-0714280				HumanaDental Insurance Company	WI	IA	HumanaDental, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1364005				HumanaDental, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	27-4535747				HumanaVitality, LLC	DE	OTH	See Footnote 7	Ownership	75.000	Humana Inc.	7
0119	Humana Inc.	00000	61-1239538				Humco, Inc.	KY	NIA	Humana Health Plan, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1383567				HUM-e-FL, Inc.	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-3583438				HUM-Holdings International, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	86-1050795				Hummingbird Coaching Systems LLC	OH	NIA	Corphealth, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	39-1769093				Independent Care Health Plan	WI	OTH	See Footnote 5	Other	100.000	Humana Inc.	5
0119	Humana Inc.	00000	62-1245230				Kanawha HealthCare Solutions, Inc.	TN	NIA	Kanawha Insurance Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	65110	57-0380426				Kanawha Insurance Company	SC	IA	KMG America Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-1377270				KMG America Corporation	VA	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-1981339				M.D. Care, Inc.	CA	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1232669				Managed Care Indemnity, Inc.	VT	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	86-0751979				Managed Prescription Program	AZ	NIA	Concentra Health Services, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0879131				METCARE of Florida, Inc.	FL	NIA	Metropolitan Health Networks, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0635728				Metropolitan Health Networks, Inc.	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0992582				Naples Health Care Specialists, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	11-3273542				National Healthcare Resources, Inc.	DE	NIA	Concentra Health Services, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0688221				Nursing Solutions, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	04-3353031				OHR/Baystate, LLC	MA	NIA	See Footnote 15	Joint Venture	0.000	Humana Inc.	15
0119	Humana Inc.	00000	04-3353031				OHR/MMC, Limited Liability Company	ME	NIA	See Footnote 16	Joint Venture	100.000	Humana Inc.	16
0119	Humana Inc.	00000	98-0445802				OMP Insurance Company, Ltd.	TX	NIA	Concentra Operating Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	62-1552091				PHP Companies, Inc.	TN	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	62-1250945				Preferred Health Partnership, Inc.	TN	NIA	PHP Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-1724127				Preservation on Main, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	56-2593719				SeniorBridge (NC), Inc.	NC	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	56-2593718				SeniorBridge (UT), Inc.	UT	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	57-1226890				SeniorBridge (WA), Inc.	WA	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	80-0581269				SeniorBridge Care Management, Inc.	NY	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	46-0702349				SeniorBridge Family Companies (AZ), Inc.	AZ	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	45-3039782				SeniorBridge Family Companies (CA), Inc.	CA	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	27-0452360				SeniorBridge Family Companies (CT), Inc.	CT	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-1096853				SeniorBridge Family Companies (FL), Inc.	FL	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	02-0660212				SeniorBridge Family Companies (IL), Inc.	IL	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-0301155				SeniorBridge Family Companies (IN), Inc.	IN	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	45-5299341				SeniorBridge Family Companies (LA), Inc.	LA	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	04-3580066				SeniorBridge Family Companies (MA), Inc.	MA	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.000	Humana Inc.	0

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Humana Health Plan of Ohio, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
...0119	Humana Inc. ....	...00000	81-0557727	.....	.....	.....	SeniorBridge Family Companies (MD), Inc. ....	MD.....	NIA.....	SeniorBridge Family Companies, Inc. ....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	...00000	46-0677759	.....	.....	.....	SeniorBridge Family Companies (MO), Inc. ....	MO.....	NIA.....	SeniorBridge Family Companies, Inc. ....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	...00000	36-4484449	.....	.....	.....	SeniorBridge Family Companies (NJ), Inc. ....	NJ.....	NIA.....	SeniorBridge Family Companies, Inc. ....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	...00000	36-4484443	.....	.....	.....	SeniorBridge Family Companies (NY), Inc. ....	NY.....	NIA.....	SeniorBridge Family Companies, Inc. ....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	...00000	20-0260501	.....	.....	.....	SeniorBridge Family Companies (OH), Inc. ....	OH.....	NIA.....	SeniorBridge Family Companies, Inc. ....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	...00000	38-3643832	.....	.....	.....	SeniorBridge Family Companies (PA), Inc. ....	PA.....	NIA.....	SeniorBridge Family Companies, Inc. ....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	...00000	01-0766084	.....	.....	.....	SeniorBridge Family Companies (TX), Inc. ....	TX.....	NIA.....	SeniorBridge Family Companies, Inc. ....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	...00000	46-0691871	.....	.....	.....	SeniorBridge Family Companies (VA), Inc. ....	VA.....	NIA.....	SeniorBridge Family Companies, Inc. ....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	...00000	13-4036798	.....	.....	.....	SeniorBridge Family Companies, Inc. ....	DE.....	NIA.....	Humana Inc. ....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	...00000	59-2518701	.....	.....	.....	SeniorBridge-Florida, LLC .....	FL.....	NIA.....	SeniorBridge Family Companies (FL), Inc. ....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	...00000	20-3355580	.....	.....	.....	Sensei, Inc. ....	DE.....	OTH.....	See Footnote 6 .....	Other.....	..0.000	Humana Inc. ....	....6
...0119	Humana Inc. ....	...00000	27-0338595	.....	.....	.....	Seredor Corporation .....	FL.....	NIA.....	Continucare Corporation .....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	...00000	32-0375132	.....	.....	.....	Symphony Health Partners - Midwest, LLC .....	DE.....	NIA.....	See Footnote 9 .....	Ownership.....	..0.000	Humana Inc. ....	....9
...0119	Humana Inc. ....	...00000	45-5032192	.....	.....	.....	Symphony Health Partners, Inc. ....	DE.....	NIA.....	Metropolitan Health Networks, Inc. ....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	...00000	74-2352809	.....	.....	.....	Texas Dental Plans, Inc. ....	TX.....	NIA.....	Humana Dental Company .....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	54739	52-1157181	.....	.....	.....	The Dental Concern, Inc. ....	KY.....	IA.....	HumanaDental, Inc. ....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	52028	36-3654697	.....	.....	.....	The Dental Concern, Ltd. ....	IL.....	IA.....	HumanaDental, Inc. ....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	...00000	86-1050795	.....	.....	.....	The Vitality Group, LLC .....	DE.....	OTH.....	See Footnote 7 .....	Ownership.....	..25.000	Humana Inc. ....	....7
...0119	Humana Inc. ....	...00000	20-3585174	.....	.....	.....	Valor Healthcare, Inc. ....	DE.....	NIA.....	Humana Government Business, Inc. ....	Ownership.....	..100.000	Humana Inc. ....	....0
...0119	Humana Inc. ....	...00000	86-0597187	.....	.....	.....	St. Mary's Medical Park Pharmacy, Inc. ....	AZ.....	NIA.....	Humana Pharmacy, Inc. ....	Ownership.....	..100.000	Humana Inc. ....	....0

Asterisk	Explanation
1 .....	American Tax Credit Corporate Georgia Fund III, L.L.C., a Delaware limited liability company, was formed on October 4, 2004 for the purpose of investing in apartment complexes generating Georgia state low income housing tax credits. Humana Insurance Company is a Member with a 58.1736% ownership interest. The Savannah Bank, N.A. is a Member with a 1.6029% ownership interest, GMAC Insurance Georgia, L.L.C. is a Member with a 40.2133% ownership interest and Paramount Properties, Inc. is the Managing Member with 0.01% ownership interest. ....
2 .....	Availity, L.L.C., a Delaware limited liability company, was formed by affiliates of Humana Inc. and Blue Cross and Blue Shield of Florida, Inc. to develop and operate an Internet site on the World Wide Web to permit health plans to communicate and engage in electronic transactions with health care service providers initially in the State of Florida. HUM-e-FL, Inc., a subsidiary of Humana Inc., is a Member with a 22.5% ownership interest. Navigy, Inc., a subsidiary of Blue Cross and Blue Shield of Florida, Inc., is a Member with a 33.75% ownership interest, Health Care Service Corporation, a Member, has a 33.75% ownership interest, and Sellcore, Inc., a subsidiary of WellPoint and a Member, has a 10% ownership interest. ....
3 .....	CM Occupational Health, Limited Liability Company is a Maine limited liability company. Occupational Health + Rehabilitation LLC has a 90% ownership interest and Advanced Health Services, Inc. has a 10% ownership interest. ....
4 .....	Concentra Akron, L.L.C. is a Delaware limited liability company. Concentra Health Services, Inc. has a 51% ownership interest and Akron General Partners, Inc. has a 49% ownership interest. ....
5 .....	Independent Care Health Plan, a Wisconsin corporation licensed as an HMO, operates an integrated, coordinated medical and social service managed care program for chronically disabled Medicaid recipients in Milwaukee, Wisconsin. CareNetwork, Inc. owns 50% of the company's stock. New Health Services, Inc. owns the other 50%. ....
6 .....	Sensei, Inc., a Delaware corporation, was incorporated on August 24, 2005 to enter into a joint venture with Humana Innovation Enterprises, Inc. and Card Guard AG, a Swiss corporation, dedicated to defining, building, and distributing the next generation of wireless health platforms. On December 12, 2008, Humana Innovation Enterprises, Inc. purchased all of Sensei, Inc.'s shares from Card Guard AG whereby Humana Innovation Enterprises, Inc. owned 100% of Sensei's issued and outstanding stock. On May 17, 2010, Robert Schwarzberg purchased 81% of Sensei's shares from Humana Innovation Enterprises, Inc., leaving the company with a 19% ownership interest. ....
7 .....	HumanaVitality, LLC, a Delaware limited liability company, was formed on January 3, 2011, and The Vitality Group, LLC, a Delaware limited liability company, was formed on February 15, 2011 through affiliates of Humana Inc. and Discovery Holdings Limited, a South African company, to offer Discovery's Vitality wellness and loyalty program to Humana members. Humana WellWorks LLC, a subsidiary of Humana Inc., owns 75% of HumanaVitality, LLC and 25% of The Vitality Group, LLC. The Vitality Group, Inc., a subsidiary of Discovery Holdings Limited, owns 25% of HumanaVitality, LLC and 75% of The Vitality Group, LLC. ....
8 .....	Ownership is 60% Arcadian Health Plan, Inc., 40% Arcadian Management Services, Inc. ....
9 .....	Ownership is 80% Symphony Health Partners, Inc. and 20% Humana Inc. of Symphony Health Partners Midwest, LLC. ....
10 .....	Concentra Arkansas, L.L.C. is a Delaware limited liability company. Concentra Health Services, Inc. has a 51% ownership interest and St. Vincent Community Health Services, Inc. has a 49% ownership interest. ....
11 .....	Concentra Occupational Healthcare Harrisburg, L.P. is a Delaware limited liability company. Concentra Health Services, Inc. has a 51% ownership interest and Pinnacle Health Hospitals has a 49% interest. ....
12 .....	Concentra South Carolina, L.L.C. is a Delaware limited liability company. Concentra Health Services, Inc. has a 51% ownership interest and North Trident Regional Hospital, Inc. has a 49% ownership interest. ....
13 .....	Concentra St. Louis, L.L.C. is a Delaware limited liability company. Concentra Health Services, Inc. has a 70% ownership interest and Tenet HealthSystem SL-HLC, Inc. has a 30% ownership interest. ....
14 .....	Concentra-UPMC, L.L.C. is a Delaware limited liability company. Concentra Health Services, Inc. has a 51% ownership interest and Community Occupational Medicine, Inc. has a 49% ownership interest. ....
15 .....	OHR/Baystate, LLC is a Massachusetts limited liability company. Occupational Health + Rehabilitation LLC has a 51% ownership interest and Bayside Medical Center has a 49% ownership interest. ....
16 .....	OHR/MMC, Limited Liability Company is a Main limited liability company. Occupational Health + Rehabilitation LLC has a 51% ownership interest and Maine Health has a 49% ownership interest. ....

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
88595	31-0935772	Emphesys Insurance Company	0	0	0	0	(18,694)	0	0	0	(18,694)	0
00000	61-0647538	Humana Inc.	1,052,000,000	(430,000,000)	0	0	1,864,201,602	0	0	0	2,486,201,602	0
73288	39-1263473	Humana Insurance Company	(265,000,000)	0	0	0	(609,635,534)	0	0	0	(874,635,534)	28,658,520
00000	26-3473328	Humana Health Plan of California, Inc.	0	30,000,000	0	0	(9,379,986)	0	0	0	20,620,014	0
65110	57-0380426	Kanawha Insurance Company	0	75,000,000	0	0	77,997,146	0	0	0	152,997,146	0
00000	62-1245230	Kanawha Healthcare Solutions, Inc.	0	0	0	0	5,693	0	0	0	5,693	0
60052	37-1326199	Humana Benefit Plan of Illinois, Inc.	(4,000,000)	0	0	0	(17,603,761)	0	0	0	(21,603,761)	0
10126	65-1137990	Humana AdvantageCare Plan, Inc.	(10,000,000)	0	0	0	(13,086,397)	0	0	0	(23,086,397)	0
54739	52-1157181	The Dental Concern, Inc.	(1,000,000)	0	0	0	(5,736,789)	0	0	0	(6,736,789)	0
70580	39-0714280	HumanaDental Insurance Company	0	0	0	0	(23,937,385)	0	0	0	(23,937,385)	0
52028	39-3654697	The Dental Concern, Ltd.	0	0	0	0	(104,809)	0	0	0	(104,809)	0
95348	31-1154200	Humana Health Plan of Ohio, Inc.	0	0	0	0	(36,593,716)	0	0	0	(36,593,716)	0
95342	39-1525003	Humana Wisc. Health Org. Ins. Corp.	0	0	0	0	(19,338,703)	0	0	0	(19,338,703)	0
00000	27-3991410	Humana Medical Plan of Michigan, Inc.	0	0	0	0	(315,476)	0	0	0	(315,476)	0
95519	58-2209549	Humana Employers Health Plan of GA. Inc.	0	70,000,000	0	0	(76,313,271)	0	0	0	(6,313,271)	0
95270	61-1103898	Humana Medical Plan, Inc.	(464,000,000)	0	0	0	(632,597,029)	0	0	0	(1,096,597,029)	0
69671	61-1041514	Humana Health Ins. Co. of Florida, Inc.	(50,000,000)	0	0	0	116,620,641	0	0	0	66,620,641	0
95754	62-1579044	Cariten Health Plan Inc.	0	0	0	0	(112,898,468)	0	0	0	(112,898,468)	0
95885	61-1013183	Humana Health Plan, Inc.	0	130,000,000	0	0	(473,599,235)	0	0	0	(343,599,235)	0
60219	61-1311605	Humana Insurance Company of Kentucky	0	20,000,000	0	0	(11,201,149)	0	0	0	8,798,851	(28,658,520)
95024	61-0994632	Humana Health Plan of Texas, Inc.	0	60,000,000	0	0	(51,872,748)	0	0	0	8,127,252	0
00000	66-0406896	Humana Health Plans of Puerto Rico, Inc.	0	0	0	0	22,337,272	0	0	0	22,337,272	0
00000	66-0291866	Humana Insurance of Puerto Rico, Inc.	0	0	0	0	(22,312,374)	0	0	0	(22,312,374)	0
00000	61-1232669	Managed Care Indemnity, Inc.	(20,000,000)	0	0	0	6,112,592	0	0	0	(13,887,408)	0
95642	72-1279235	Humana Health Benefit Plan of LA, Inc.	(81,500,000)	0	0	0	(176,650,711)	0	0	0	(258,150,711)	0
95092	59-2598550	CarePlus Health Plans, Inc.	(137,000,000)	25,000,000	0	0	(55,303,337)	0	0	0	(167,303,337)	0
00000	26-0010657	CAC-Florida Medical Centers, LLC	0	0	0	0	(54,085)	0	0	0	(54,085)	0
12634	20-2888723	Humana Insurance Company of New York	0	0	0	0	(21,609,154)	0	0	0	(21,609,154)	0
82740	62-0729865	Cariten Insurance Company	0	0	0	0	(40,391)	0	0	0	(40,391)	0
00000	20-1981339	M.D. Care, Inc.	0	0	0	0	(679,467)	0	0	0	(679,467)	0
00000	61-1343508	Humana Marketpoint, Inc.	0	0	0	0	516,221,563	0	0	0	516,221,563	0
00000	61-1316926	Humana Pharmacy, Inc.	0	0	0	0	(59,489,269)	0	0	0	(59,489,269)	0
00000	61-1239538	Humco, Inc.	0	0	0	0	0	0	0	0	0	0
00000	61-1383567	HUM-e-FL, Inc.	0	0	0	0	(2,395,360)	0	0	0	(2,395,360)	0
00000	75-2043865	Corphealth, Inc.	0	0	0	0	(14,521,903)	0	0	0	(14,521,903)	0
95158	61-1279717	CHA HMO, Inc.	0	0	0	0	(3,375,920)	0	0	0	(3,375,920)	0
00000	33-0916248	DefenseWeb Technologies, Inc.	0	0	0	0	(713,738)	0	0	0	(713,738)	0
00000	00-5893028	Humana Europe, Ltd.	0	0	0	0	0	0	0	0	0	0
12908	20-8411422	Humana Medical Plan of Utah, Inc.	0	0	0	0	(4,901,489)	0	0	0	(4,901,489)	0
00000	59-1843760	Humana Dental Company	0	0	0	0	4,071,258	0	0	0	4,071,258	0
95107	56-1796975	American Dental Plan of N. C., Inc.	0	0	0	0	(311,735)	0	0	0	(311,735)	0
11559	58-2302163	American Dental Providers of Ark., Inc.	0	0	0	0	(107,615)	0	0	0	(107,615)	0
52015	59-2531815	CompBenefits Company	0	0	0	0	(25,626,416)	0	0	0	(25,626,416)	0
00000	61-1241225	Humana Government Business, Inc.	0	0	0	0	(28,889,243)	0	0	0	(28,889,243)	0

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
00000	20-8418853	Humana Veterans Healthcare Services, Inc.	0	0	0	0	(5,673)	0	0	0	(5,673)	0
60984	74-2552026	CompBenefits Insurance Company	(4,000,000)	0	0	0	(24,208,135)	0	0	0	(28,208,135)	0
95161	76-0039628	DentiCare, Inc.	(1,000,000)	0	0	0	(10,600,787)	0	0	0	(11,600,787)	0
00000	36-3512545	Dental Care Plus Mangement, Corp.	0	0	0	0	(2,537,726)	0	0	0	(2,537,726)	0
11228	36-3686002	CompBenefits Dental, Inc.	(500,000)	0	0	0	(7,743,289)	0	0	0	(8,243,289)	0
00000	27-4460531	Humana Medical Plan of Pennsylvania, Inc.	0	0	0	0	14,448	0	0	0	14,448	0
12151	20-1001348	Arcadian Health Plan, Inc.	0	0	0	0	(8,202,283)	0	0	0	(8,202,283)	0
12282	20-2036444	Humana Regional Health Plan, Inc.	0	0	0	0	177,673	0	0	0	177,673	0
13558	26-2800286	Humana Health Company of New York, Inc.	0	20,000,000	0	0	(355,285)	0	0	0	19,644,715	0
12250	63-1063101	CompBenefits of Alabama, Inc.	0	0	0	0	(359,878)	0	0	0	(359,878)	0
00000	58-2198538	CompBenefits of Georgia, Inc.	0	0	0	0	(2,235,969)	0	0	0	(2,235,969)	0
00000	61-1237697	Emphesys, Inc.	0	0	0	0	320	0	0	0	320	0
00000	26-3583438	HUM-Holdings International, Inc.	0	0	0	0	(395,277)	0	0	0	(395,277)	0
00000	26-3592783	HUM INT, LLC	0	0	0	0	1,420	0	0	0	1,420	0
00000	26-4522426	Humana WellWorks LLC	0	0	0	0	0	0	0	0	0	0
00000	20-1377270	KMG America Corporation	0	0	0	0	85	0	0	0	85	0
00000	86-1050795	The Vitality Group, LLC	0	0	0	0	(59,249)	0	0	0	(59,249)	0
00000	62-1245230	Kanawha Healthcare Solutions	0	0	0	0	0	0	0	0	0	0
00000	27-4535747	HumanaVitality, LLC.	0	0	0	0	(15,076,096)	0	0	0	(15,076,096)	0
00000	45-2254346	Humana Pharmacy Solutions, Inc.	0	0	0	0	(3,361,689)	0	0	0	(3,361,689)	0
00000	62-1552091	PHP Companies Incorporated	0	0	0	0	113,834	0	0	0	113,834	0
00000	45-3116348	HomeCare Health Solutions, Inc.	0	0	0	0	12,572,415	0	0	0	12,572,415	0
00000	86-0836599	Arcadian Management Services, Inc.	0	0	0	0	5,456,533	0	0	0	5,456,533	0
00000	13-4036798	SeniorBridge Family Companies, Inc.	0	0	0	0	(56,102)	0	0	0	(56,102)	0
00000	42-1575099	Comprehensive Health Insights, Inc.	0	0	0	0	(710,288)	0	0	0	(710,288)	0
00000	77-0540040	Anvita, Inc.	0	0	0	0	8,086,481	0	0	0	8,086,481	0
00000	27-0452360	SeniorBridge Family Companies (CT), Inc.	0	0	0	0	(56,061)	0	0	0	(56,061)	0
00000	65-1096853	SeniorBridge Family Companies (FL), Inc.	0	0	0	0	(56,360)	0	0	0	(56,360)	0
00000	02-0660212	SeniorBridge Family Companies (IL), Inc.	0	0	0	0	(225,155)	0	0	0	(225,155)	0
00000	26-4823524	Concentra Inc.	0	0	0	0	(2,944,329)	0	0	0	(2,944,329)	0
00000	20-0301155	SeniorBridge Family Companies (IN), Inc.	0	0	0	0	(56,061)	0	0	0	(56,061)	0
00000	04-3580066	SeniorBridge Family Companies (MA), Inc.	0	0	0	0	(56,061)	0	0	0	(56,061)	0
00000	81-0557727	SeniorBridge Family Companies (MD), Inc.	0	0	0	0	(56,061)	0	0	0	(56,061)	0
00000	56-2593719	SeniorBridge (NC)	0	0	0	0	(56,061)	0	0	0	(56,061)	0
00000	36-4484449	SeniorBridge Family Companies (NJ), Inc.	0	0	0	0	(56,061)	0	0	0	(56,061)	0
00000	30-0117876	CAC Medical Center Holdings, Inc.	0	0	0	0	286,683	0	0	0	286,683	0
00000	80-0581269	SeniorBridge Care Management Inc.	0	0	0	0	(56,061)	0	0	0	(56,061)	0
00000	36-4484443	SeniorBridge Family Companies (NY), Inc.	0	0	0	0	(53,611)	0	0	0	(53,611)	0
00000	20-0260501	SeniorBridge Family Companies (OH), Inc.	0	0	0	0	(56,061)	0	0	0	(56,061)	0
00000	38-3643832	SeniorBridge Family Companies (PA), Inc.	0	0	0	0	(56,061)	0	0	0	(56,061)	0
00000	01-0766084	SeniorBridge Family Companies (TX), Inc.	0	0	0	0	(56,061)	0	0	0	(56,061)	0
00000	57-1226890	SeniorBridge (WA), Inc.	0	0	0	0	(56,061)	0	0	0	(56,061)	0
00000	27-1649291	Harris, Rothenberg International, Inc.	0	0	0	0	(515,461)	0	0	0	(515,461)	0

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
00000	20-3585174	Valor Healthcare, Inc.	0	0	0	0	(20)	0	0	0	(20)	0
00000	80-0072760	Certify Data Systems, Inc.	0	0	0	0	4,995,041	0	0	0	4,995,041	0
00000	26-4179617	Ambulatory Care Solutions of Ohio LLC	0	0	0	0	(7,419)	0	0	0	(7,419)	0
00000	20-3364857	Humana MarketPOINT of Puerto Rico, Inc.	0	0	0	0	0	0	0	0	0	0
00000	27-0200477	Ambulatory Care Solutions of AR, LLC	0	0	0	0	(5,256)	0	0	0	(5,256)	0
00000	39-1514846	CareNetwork, Inc.	0	0	0	0	186,682	0	0	0	186,682	0
00000	61-1223418	Health Value Management, Inc.	0	0	0	0	(12,507,554)	0	0	0	(12,507,554)	0
00000	20-8236655	Corphealth Provider Link, Inc.	0	0	0	0	0	0	0	0	0	0
00000	61-1364005	HumanaDental, Inc.	(14,000,000)	0	0	0	0	0	0	0	(14,000,000)	0
00000	61-1343791	Humana Innovation Enterprises, Inc.	0	0	0	0	(114)	0	0	0	(114)	0
00000	20-1724127	Preservation on Main Inc	0	0	0	0	64,389	0	0	0	64,389	0
00000	37-1485812	Ambulatory Care Solutions LLC	0	0	0	0	(31,292)	0	0	0	(31,292)	0
00000	61-1279716	CHA Service Company	0	0	0	0	0	0	0	0	0	0
00000	65-0293220	54th Street Medical Plaza, Inc.	0	0	0	0	85,130	0	0	0	85,130	0
00000	20-4835394	Humana Active Outlook, Inc.	0	0	0	0	0	0	0	0	0	0
00000	20-5309363	515-526W MainSt CondoCouncilofCo-Owners	0	0	0	0	0	0	0	0	0	0
00000	65-0851053	154th Street Medical Plaza, Inc.	0	0	0	0	75,755	0	0	0	75,755	0
00000	04-3185995	CompBenefits Corporation	0	0	0	0	(2,319)	0	0	0	(2,319)	0
00000	58-2228851	Compbenefits Direct	0	0	0	0	146	0	0	0	146	0
00000	74-2352809	Texas Dental Plans, Inc.	0	0	0	0	0	0	0	0	0	0
00000	45-3039782	SeniorBridge Family Companies (CA), Inc.	0	0	0	0	(56,061)	0	0	0	(56,061)	0
00000	45-5299341	SeniorBridge Family Companies (LA), Inc.	0	0	0	0	(56,058)	0	0	0	(56,058)	0
00000	56-2593718	SeniorBridge (UT), Inc.	0	0	0	0	0	0	0	0	0	0
00000	46-0702349	SeniorBridge Family Companies (AZ) Inc.	0	0	0	0	(56,061)	0	0	0	(56,061)	0
00000	46-0677759	SeniorBridge Family Companies (MO) Inc.	0	0	0	0	(52,135)	0	0	0	(52,135)	0
00000	46-0691871	SeniorBridge Family Companies (VA) Inc.	0	0	0	0	(51,874)	0	0	0	(51,874)	0
00000	20-2620891	Green Ribbon Health, LLC	0	0	0	0	0	0	0	0	0	0
00000	62-1250945	Preferred Health Partnership, Inc.	0	0	0	0	0	0	0	0	0	0
00000	45-3713941	Complex Clinical Management, Inc.	0	0	0	0	0	0	0	0	0	0
00000	65-0274594	HumanaCares, Inc.	0	0	0	0	(20,289,435)	0	0	0	(20,289,435)	0
00000	46-1225873	Agile Technology Solutions, Inc.	0	0	0	0	0	0	0	0	0	0
00000	45-3818750	American Eldercare of North Florida, LLC	0	0	0	0	(92,394)	0	0	0	(92,394)	0
00000	65-0380198	American Eldercare, Inc.	0	0	0	0	(12,950,752)	0	0	0	(12,950,752)	0
00000	86-0597187	St. Mary's Medical Park Pharmacy, Inc.	0	0	0	0	388,083	0	0	0	388,083	0
00000	75-2678146	Concentra Solutions, Inc.	0	0	0	0	10,534	0	0	0	10,534	0
00000	26-2681597	Auto Injury Solutions, Inc.	0	0	0	0	410	0	0	0	410	0
00000	75-2510547	Concentra Health Services, Inc.	0	0	0	0	(18,700)	0	0	0	(18,700)	0
00000	65-0635728	Metropolitan Health Networks, Inc.	0	0	0	0	(2,279,217)	0	0	0	(2,279,217)	0
00000	65-0879131	METCARE of Florida, Inc.	0	0	0	0	19,605	0	0	0	19,605	0
00000	45-5032192	Symphony Health Partners, Inc.	0	0	0	0	(9,028)	0	0	0	(9,028)	0
00000	32-0375132	Symphony Health Partners Midwest, LLC	0	0	0	0	(9,028)	0	0	0	(9,028)	0
00000	59-2716023	Continucare Corporation	0	0	0	0	90,408	0	0	0	90,408	0
00000	65-0791417	Continucare Medical Management, Inc.	0	0	0	0	399	0	0	0	399	0
00000	20-5646291	Continucare MDHC, LLC	0	0	0	0	(103,234)	0	0	0	(103,234)	0

SCHEDULE Y

PART 2 - SUMMARY OF INSURER’S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
00000	65-0780986	Continuicare MSO, Inc.	0	0	0	0	(9,028)	0	0	0	(9,028)	0
00000	27-0338595	Seredor Corporation	0	0	0	0	(72,592)	0	0	0	(72,592)	0
9999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Humana Health Plan of Ohio, 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.

		Responses
MARCH FILING		
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? .....	YES
2.	Will an actuarial opinion be filed 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 Management's Discussion and Analysis be filed by April 1? .....	YES
6.	Will the Supplemental Investment Risks Interrogatories be filed by April 1? .....	YES
7.	Will the Accident and Health Policy Experience Exhibit be filed by April 1? .....	
JUNE FILING		
8.	Will an audited financial report be filed by June 1? .....	YES
9.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? .....	YES

AUGUST FILING		
10.	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 annual 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		
11.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? .....	NO
12.	Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC? .....	NO
13.	Will the Supplemental Property/Casualty data due March 1 be filed with the state of domicile and the NAIC?.....	NO
14.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?.....	NO
15.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
16.	Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
17.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?.....	NO
18.	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? .....	NO
19.	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? .....	NO
20.	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?.....	NO
APRIL FILING		
21.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? .....	NO
22.	Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC? .....	NO
23.	Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC? .....	NO
24.	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
25.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? .....	NO
AUGUST FILING		
26.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? .....	YES

- Explanations:
11.

This type of business is not written.
12.

This type of business is not written.
13.

This type of business is not written.
14.

This type of business is not written.
15.

This type of business is not written.
16.

This type of business is not written.
17.

This type of business is not written.
18.

No relief will be requested.
19.

No relief will be requested.
20.

No relief will be requested.
21.

This type of business is not written.
22.










This type of business is not written.
23.

This type of business is not written.
24.

This type of business is not written.
25.




This type of business is not written.

Bar Codes:

11.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
12.	Life Supplement [Document Identifier 205]	
13.	Property/Casualty Supplement [Document Identifier 207]	
14.	SIS Stockholder Information Supplement [Document Identifier 420]	
15.	Participating Opinion for Exhibit 5 [Document Identifier 371]	
16.	Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370]	
17.	Medicare Part D Coverage Supplement [Document Identifier 365]	
18.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	
19.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Humana Health Plan of Ohio, Inc.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

20.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 <div>953482013226000000</div>
21.	Long-Term Care Experience Reporting Forms [Document Identifier 306]	 <div>953482013306000000</div>
22.	Life Supplement [Document Identifier 211]	 <div>953482013211000000</div>
23.	Property/Casualty Supplement Insurance Expense Exhibit [Document Identifier 213]	 <div>953482013213000000</div>
24.	Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]	 <div>953482013216000000</div>
25.	Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]	 <div>953482013217000000</div>

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