

Amended filing due to 2013 audit adjustments.



QUARTERLY STATEMENT

AS OF MARCH 31, 2014
OF THE CONDITION AND AFFAIRS OF THE

HealthSpan Inc

NAIC Group Code 00000 (Current Period) , 00000 (Prior Period) NAIC Company Code 15284 Employer's ID Number 31-1431434

Organized under the Laws of Ohio , State of Domicile or Port of Entry Ohio

Country of Domicile United States

Licensed as business type: Life, Accident & Health [] Property/Casualty [] Hospital, Medical & Dental Service or Indemnity []
 Dental Service Corporation [] Vision Service Corporation [] Health Maintenance Organization []
 Other [] Is HMO Federally Qualified? Yes [] No []

Incorporated/Organized 07/30/2013 Commenced Business 07/30/2013

Statutory Home Office 225 Pictoria Dr STE 320 , Cincinnati, OH, US 45246
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 225 Pictoria Dr STE 320 Cincinnati, OH, US 45246 513-551-1400
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 225 Pictoria Dr STE 320 Cincinnati, OH, US 45246
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 4600 McAuley Place Cincinnati, OH, US 45242 513-981-5300
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Web Site Address N/A

Statutory Statement Contact Griffin E Hurd 513-981-6264
(Name) (Area Code) (Telephone Number) (Extension)
gehurd@health-partners.org 513-981-6118
(E-Mail Address) (FAX Number)

OFFICERS

Name	Title	Name	Title
<u>Kenneth C Page</u>	<u>President</u>	<u>Deborah S Bloomfield</u>	<u>Treasurer</u>
<u>Robert Campbell</u>	<u>Secretary</u>		

OTHER OFFICERS

DIRECTORS OR TRUSTEES

<u>R Jeffrey Copeland</u>	<u>Kenneth C Page</u>	<u>Molly Seals</u>	<u>Deborah Bloomfield PhD, CPA</u>
<u>Robert Campbell</u>	<u>Allan Calonge</u>		

State of Ohio

County of Hamilton

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The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Kenneth C Page Deborah S Bloomfield
 President Treasurer

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

- b. If no:
1. State the amendment number 3
 2. Date filed 09/26/2014
 3. Number of pages attached _____

Subscribed and sworn to before me this _____ day of _____, _____