

**Amended Explanation Page**

Annual statement amendment to reflect correct fee for service amount and related tax impact.



ANNUAL STATEMENT  
For the Year Ended DECEMBER 31, 2014  
OF THE CONDITION AND AFFAIRS OF THE  
Catamaran Insurance of Ohio

NAIC Group Code	4771	4771	NAIC Company Code	69647	Employer's ID Number	31-0628424
	(Current Period)	(Prior Period)				
Organized under the Laws of	Ohio		State of Domicile or Port of Entry	Ohio		
Country of Domicile	United States of America					
Incorporated/Organized	10/19/1948		Commenced Business	12/05/1978		
Statutory Home Office	50 W. Broad Street, Suite 1800		Columbus , OH, US 43215			
	(Street and Number)		(City or Town, State, Country and Zip Code)			
Main Administrative Office	1600 McConnor Parkway					
	(Street and Number)					
	Schaumburg, IL, US 60173-6801		(800)282-3232			
	(City or Town, State, Country and Zip Code)		(Area Code) (Telephone Number)			
Mail Address	1600 McConnor Parkway		Schaumburg, IL, US 60173-6801			
	(Street and Number or P.O. Box)		(City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	1600 McConnor Parkway					
	(Street and Number)					
	Schaumburg, IL, US 60173-6801		(800)282-3232			
	(City or Town, State, Country and Zip Code)		(Area Code) (Telephone Number)			
Internet Website Address	www.catamaranrx.com					
Statutory Statement Contact	Mike Przybyla		(224)231-1848			
	(Name)		(Area Code)(Telephone Number)(Extension)			
	mike.przybyla@catamaranrx.com		(224)231-1915			
	(E-Mail Address)		(Fax Number)			

OFFICERS

Name	Title
Mark Alan Thierer	Chairman & President
Jeffrey Gary Park	Executive VP Finance, CFO & Treasurer
Clifford Elliot Berman	Secretary

OTHERS

DIRECTORS OR TRUSTEES

Mark Alan Thierer	Jeffrey Gary Park
Clifford Elliot Berman	John Henry Romza
Joel Saban	

State of	Illinois	
County of	DuPage	ss

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

(Signature)	(Signature)	(Signature)
Mark Alan Thierer	Jeffrey Gary Park	Clifford Elliot Berman
(Printed Name)	(Printed Name)	(Printed Name)
1.	2.	3.
Chairman & President	Executive VP Finance, CFO & Treasurer	Secretary
(Title)	(Title)	(Title)

Subscribed and sworn to before me this	a. Is this an original filing?	Yes[ ] No[X]
day of , 2015	b. If no,	1
	1. State the amendment number	
	2. Date filed	
	3. Number of pages attached	16

(Notary Public Signature)

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1	2	3
	As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
<b>ASSETS (Page 2, Column 3)</b>			
1. Cash and invested assets (Line 12) .....	18,524,606		18,524,606
2. Reinsurance (Line 16) .....			
3. Premiums and considerations (Line 15) .....			
4. Net credit for ceded reinsurance .....	X X X		
5. All other admitted assets (balance) .....	29,340,745		29,340,745
6. TOTAL Assets excluding Separate Accounts (Line 26) .....	47,865,352		47,865,352
7. Separate Account assets (Line 27) .....			
8. TOTAL Assets (Line 28) .....	47,865,352		47,865,352
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
9. Contract reserves (Lines 1 and 2 ) .....	0		0
10. Liability for deposit-type contracts (Line 3) .....			
11. Claim reserves (Line 4) .....			
12. Policyholder dividends/reserves (Lines 5 through 7) .....			
13. Premium & annuity considerations received in advance (Line 8) .			
14. Other contract liabilities (Line 9) .....	143,733		143,733
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount) .....			
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount) .....			
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount)			
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount) .....			
19. All other liabilities (balance) .....	26,507,762		26,507,762
20. TOTAL Liabilities excluding Separate Accounts (Line 26) .....	26,651,495		26,651,495
21. Separate Account liabilities (Line 27) .....			
22. TOTAL Liabilities (Line 28) .....	26,651,495		26,651,495
23. Capital & surplus (Line 38) .....	21,213,857	X X X	21,213,857
24. TOTAL Liabilities, capital and surplus (Line 39) .....	47,865,352		47,865,352
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
25. Contract reserves .....			
26. Claim reserves .....			
27. Policyholder dividends/reserves .....			
28. Premium & annuity considerations received in advance .....			
29. Liability for deposit-type contracts .....			
30. Other contract liabilities .....			
31. Reinsurance ceded assets .....			
32. Other ceded reinsurance recoverables .....			
33. TOTAL Ceded reinsurance recoverables .....			
34. Premiums and considerations .....			
35. Reinsurance in unauthorized companies .....			
36. Funds held under reinsurance treaties with unauthorized reinsurers .....			
37. Reinsurance with Certified Reinsurers .....			
38. Funds held under reinsurance treaties with certified reinsurers ...			
39. Other ceded reinsurance payables/offsets .....			
40. TOTAL Ceded reinsurance payable/offsets .....			
41. TOTAL Net credit for ceded reinsurance .....			