



# QUARTERLY STATEMENT

AS OF JUNE 30, 2013  
OF THE CONDITION AND AFFAIRS OF THE

## Humana Health Plan, Inc.

NAIC Group Code 0119 (Current Period), 0119 (Prior Period) NAIC Company Code 95885 Employer's ID Number 61-1013183

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

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

Incorporated/Organized 08/23/1982 Commenced Business 09/23/1983

Statutory Home Office 321 West Main Street - 12th Floor, Louisville, KY, US 40202  
 (Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 321 West Main Street - 12th Floor, Louisville, KY, US 40202 502-580-1000  
 (Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

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

Primary Location of Books and Records 321 West Main Street - 12th Floor, Louisville, KY, US 40202 502-580-1000  
 (Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Web Site Address www.humana.com

Statutory Statement Contact Natalie Peak 502-580-8331  
 (Name) (Area Code) (Telephone Number) (Extension)

DOIINQUIRIES@humana.com 502-580-2099  
 (E-mail Address) (FAX Number)

### OFFICERS

Name	Title	Name	Title
Bruce Dale Broussard	President & CEO	Joan Olliges Lenahan	VP & Corporate Secretary
James Harry Bloem	Sr. VP, CFO & Treasurer	Jonathan Albert Canine	Appointed Actuary

### OTHER OFFICERS

Randa Lynn Anderson-Stice	Reg.Pres. - Sr. Prod/Central Reg.	George Grant Bauernfeind	Vice President
Elizabeth Diane Bierbower	Pres., Employer Group Segment	Jeffrey Bergin Bringardner	Market President - Kentucky
John Ellis Brown	VP - Medicare Service Operations	John Gregory Catron	VP & Chief Compliance Officer
Steven James DeRaleau #	President, HumanaONE	Peter James Edwards	VP-HealthcareServicesSegment
Mark Sobhi El-Tawil	VP & Div. Leader - Western Div.	Jeffrey Carl Fernandez	Reg.Pres.-Sr.Prod/Gulf States Reg
Michael Paul Franks	Reg.Pres.-Sr.Prod/Desert Pacific Region	Roy Goldman Ph.D	VP & Chief Actuary
Gary Edward Goldstein M.D.	VP & Div. Leader - Central Div.	Morris Curt Howell	Market President-NV/AZ/UT
Paul Francis Kraemer	Regional CEO - East Region	Charles Frederic Lambert III	Vice President
Brian Phillip LeClaire	Sr.VP&Chief Service&Info Officer	Thomas Joseph Liston	President, Retail Segment
Clarence Evans Looney	Market President - Tennessee	Kenneth Scott Malcolmson	Regional CEO - West Region
Heidi Suzanne Margulis	Sr. Vice President	Kevin Ross Meriwether	VP & Div. Leader - Eastern Div.
Khalid Nazir	Vice President	Daniel Joseph Oftedahl	Market President - Great Plains
Timothy Patrick O'Rourke	RegPres-SrProd/Great Lakes Reg	Bruce Devereau Perkins	Pres.,Healthcare Services Seg.
Bruno Roger Piquin #	VP & Div. Leader - Northern Div.	George Renaudin	VP & Div. Leader - Southern Div.
Richard Donald Remmers	VP, Employer Group Segment	Oraida Maria Roman	RegPresSrProd/IntermountainReg
Larry Dale Savage	Regional CEO - Midwest Region	Debra Anne Smith	VP-Sr.Prod Strategy & Prod Dev
Pattie Dale Tye	President, Large Group	Joseph Christopher Ventura	Assistant Corporate Secretary
Timothy Alan Wheatley	VP - Senior Products	Ralph Martin Wilson	Vice President

### DIRECTORS OR TRUSTEES

James Harry Bloem	Bruce Dale Broussard	James Elmer Murray
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State of Kentucky

County of Jefferson

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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.

Bruce Dale Broussard  
President & CEO

Joan Olliges Lenahan  
VP & Corporate Secretary

James Harry Bloem  
Sr. VP, CFO & Treasurer

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

Subscribed and sworn to before me this  
8th day of August, 2013

Myra Carpenter, Notary Public  
August 9, 2013

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**ASSETS**

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	486,460,371		486,460,371	468,096,042
2. Stocks:				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....	31,504,012		31,504,012	31,508,729
3. Mortgage loans on real estate:				
3.1 First liens .....	27,600,000		27,600,000	27,600,000
3.2 Other than first liens .....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ ..... encumbrances) .....			0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....			0	0
4.3 Properties held for sale (less \$ ..... encumbrances) .....			0	0
5. Cash (\$ .....(10,860,648) ), cash equivalents (\$ .....8,999,970 ) and short-term investments (\$ ..... 21,933,102 ) .....	20,072,424		20,072,424	21,576,719
6. Contract loans (including \$ ..... premium notes) .....			0	0
7. Derivatives .....			0	0
8. Other invested assets .....	0		0	0
9. Receivables for securities .....	500,000		500,000	0
10. Securities lending reinvested collateral assets .....			0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	566,136,807	0	566,136,807	548,781,490
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	4,444,989		4,444,989	4,168,134
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	73,287,312	918,359	72,368,953	15,361,821
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....			0	0
15.3 Accrued retrospective premiums .....	51,204,222		51,204,222	24,985,232
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....			0	0
16.2 Funds held by or deposited with reinsured companies .....			0	0
16.3 Other amounts receivable under reinsurance contracts .....			0	0
17. Amounts receivable relating to uninsured plans .....	13,968,776	75,844	13,892,932	17,986,955
18.1 Current federal and foreign income tax recoverable and interest thereon .....	8,022,822		8,022,822	10,200,662
18.2 Net deferred tax asset .....	65,754,489	56,681,243	9,073,246	9,073,246
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....	107,434	54,438	52,996	88,910
21. Furniture and equipment, including health care delivery assets (\$ .....0 ) .....	5,303,307	5,303,307	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....	28,192,505		28,192,505	0
24. Health care (\$ .....28,498,857 ) and other amounts receivable .....	30,519,759		30,519,759	14,562,349
25. Aggregate write-ins for other than invested assets .....	104,690,087	102,257,077	2,433,010	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	951,632,509	165,290,268	786,342,241	645,208,799
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27) .....	951,632,509	165,290,268	786,342,241	645,208,799
<b>DETAILS OF WRITE-INS</b>				
1101. ....			0	0
1102. ....			0	0
1103. ....			0	0
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) .....	0	0	0	0
2501. Goodwill .....	89,495,055	89,495,055	0	0
2502. Prepaid Commissions .....	10,698,143	10,698,143	0	0
2503. Federal Contingency Reserves .....	2,433,010	0	2,433,010	0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	2,063,879	2,063,879	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) .....	104,690,087	102,257,077	2,433,010	0

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ .....20,584,192 reinsurance ceded).....	315,766,015	13,924,699	329,690,714	248,969,854
2. Accrued medical incentive pool and bonus amounts .....	1,151,575		1,151,575	1,387,294
3. Unpaid claims adjustment expenses .....	8,383,116		8,383,116	4,620,707
4. Aggregate health policy reserves including the liability of \$ .....8,182,258 for medical loss ratio rebate per the Public Health Service Act.....	39,881,114		39,881,114	33,851,417
5. Aggregate life policy reserves .....			0	0
6. Property/casualty unearned premium reserve .....			0	0
7. Aggregate health claim reserves .....	192,511	8,489	201,000	205,000
8. Premiums received in advance .....	12,659,638		12,659,638	14,143,527
9. General expenses due or accrued .....	10,573,793		10,573,793	10,658,735
10.1 Current federal and foreign income tax payable and interest thereon (including \$ ..... on realized gains (losses)) .....			0	0
10.2 Net deferred tax liability.....			0	0
11. Ceded reinsurance premiums payable .....	167,991		167,991	167,352
12. Amounts withheld or retained for the account of others .....			0	20,044
13. Remittances and items not allocated .....	5,443,386		5,443,386	2,528,969
14. Borrowed money (including \$ ..... current) and interest thereon \$ ..... (including \$ ..... current) .....			0	0
15. Amounts due to parent, subsidiaries and affiliates .....			0	979,245
16. Derivatives.....			0	0
17. Payable for securities .....			0	0
18. Payable for securities lending .....			0	0
19. Funds held under reinsurance treaties (with \$ .....0 authorized reinsurers, \$ .....0 unauthorized reinsurers and \$ .....0 certified reinsurers).....	20,428,327		20,428,327	0
20. Reinsurance in unauthorized and certified (\$ ..... ) companies .....			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates .....			0	0
22. Liability for amounts held under uninsured plans .....	38,148,114		38,148,114	15,310,174
23. Aggregate write-ins for other liabilities (including \$ .....690,672 current) .....	690,672	0	690,672	4,424,705
24. Total liabilities (Lines 1 to 23).....	453,486,252	13,933,188	467,419,440	337,267,023
25. Aggregate write-ins for special surplus funds .....	XXX	XXX	0	0
26. Common capital stock .....	XXX	XXX	2,248,000	2,248,000
27. Preferred capital stock .....	XXX	XXX		0
28. Gross paid in and contributed surplus .....	XXX	XXX	476,255,377	476,255,377
29. Surplus notes .....	XXX	XXX		0
30. Aggregate write-ins for other than special surplus funds .....	XXX	XXX	0	0
31. Unassigned funds (surplus) .....	XXX	XXX	(159,580,576)	(170,561,601)
32. Less treasury stock, at cost:				
32.1 ..... shares common (value included in Line 26 \$ ..... ) .....	XXX	XXX		0
32.2 ..... shares preferred (value included in Line 27 \$ ..... ) .....	XXX	XXX		0
33. Total capital and surplus (Lines 25 to 31 minus Line 32) .....	XXX	XXX	318,922,801	307,941,776
34. Total liabilities, capital and surplus (Lines 24 and 33) .....	XXX	XXX	786,342,241	645,208,799
<b>DETAILS OF WRITE-INS</b>				
2301. Medicare Risk Adjustment Payable.....	462,697	0	462,697	4,146,938
2302. Deferred Lease Credits.....	223,955	0	223,955	271,348
2303. Accrued Other.....	4,020	0	4,020	6,419
2398. Summary of remaining write-ins for Line 23 from overflow page .....	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above) .....	690,672	0	690,672	4,424,705
2501. ....	XXX	XXX		0
2502. ....	XXX	XXX		0
2503. ....	XXX	XXX		0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) .....	XXX	XXX	0	0
3001. ....	XXX	XXX		0
3002. ....	XXX	XXX		0
3003. ....	XXX	XXX		0
3098. Summary of remaining write-ins for Line 30 from overflow page .....	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above) .....	XXX	XXX	0	0

## STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months.....	XXX	3,384,743	2,766,776	5,619,511
2. Net premium income (including \$ 0 non-health premium income).....	XXX	1,851,241,263	1,492,550,728	3,000,472,810
3. Change in unearned premium reserves and reserve for rate credits .....	XXX	(2,332,526)	(4,376,816)	(8,163,449)
4. Fee-for-service (net of \$ 0 medical expenses) .....	XXX	0	0	0
5. Risk revenue .....	XXX	0	0	0
6. Aggregate write-ins for other health care related revenues .....	XXX	0	0	2,427
7. Aggregate write-ins for other non-health revenues .....	XXX	0	0	0
8. Total revenues (Lines 2 to 7) .....	XXX	1,848,908,737	1,488,173,912	2,992,311,788
<b>Hospital and Medical:</b>				
9. Hospital/medical benefits .....	63,831,201	1,394,291,946	1,088,175,403	2,226,427,949
10. Other professional services .....		4,532,887	4,210,288	4,769,587
11. Outside referrals .....			0	0
12. Emergency room and out-of-area .....	2,410,960	35,383,462	33,075,519	62,910,575
13. Prescription drugs .....		178,580,491	145,018,384	265,180,000
14. Aggregate write-ins for other hospital and medical .....	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts .....			292,071	476,197
16. Subtotal (Lines 9 to 15) .....	66,242,161	1,612,788,786	1,270,771,665	2,559,764,308
<b>Less:</b>				
17. Net reinsurance recoveries .....		46,945,313	352	443
18. Total hospital and medical (Lines 16 minus 17) .....	66,242,161	1,565,843,473	1,270,771,313	2,559,763,865
19. Non-health claims (net).....			0	0
20. Claims adjustment expenses, including \$ 81,024,809 cost containment expenses.....		100,511,230	79,544,587	168,321,705
21. General administrative expenses.....		185,745,911	139,796,102	302,032,654
22. Increase in reserves for life and accident and health contracts (including \$ 0 increase in reserves for life only).....		2,551,272	2,584,868	12,001,855
23. Total underwriting deductions (Lines 18 through 22) .....	66,242,161	1,854,651,886	1,492,696,870	3,042,120,079
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	XXX	(5,743,149)	(4,522,958)	(49,808,291)
25. Net investment income earned .....		8,273,052	7,136,163	14,654,432
26. Net realized capital gains (losses) less capital gains tax of \$ 247,399 .....		459,456	972,107	1,273,183
27. Net investment gains (losses) (Lines 25 plus 26) .....	0	8,732,508	8,108,270	15,927,615
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ ) (amount charged off \$ )] .....			0	0
29. Aggregate write-ins for other income or expenses .....	0	339,026	6,279	9,818
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) .....	XXX	3,328,385	3,591,591	(33,870,858)
31. Federal and foreign income taxes incurred .....	XXX	9,012,423	5,632,347	(4,979,093)
32. Net income (loss) (Lines 30 minus 31) .....	XXX	(5,684,038)	(2,040,756)	(28,891,765)
<b>DETAILS OF WRITE-INS</b>				
0601. ....	XXX	0	0	2,427
0602. ....	XXX	0	0	0
0603. ....	XXX	0	0	0
0698. Summary of remaining write-ins for Line 6 from overflow page .....	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above) .....	XXX	0	0	2,427
0701. ....	XXX		0	0
0702. ....	XXX		0	0
0703. ....	XXX		0	0
0798. Summary of remaining write-ins for Line 7 from overflow page .....	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above) .....	XXX	0	0	0
1401. ....			0	0
1402. ....			0	0
1403. ....			0	0
1498. Summary of remaining write-ins for Line 14 from overflow page .....	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above) .....	0	0	0	0
2901. Enrollment Fees.....		332,942	0	0
2902. Miscellaneous Income.....		6,084	6,279	9,818
2903. ....				
2998. Summary of remaining write-ins for Line 29 from overflow page .....	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above) .....	0	339,026	6,279	9,818

**STATEMENT OF REVENUE AND EXPENSES (Continued)**

	1	2	3
	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
<b>CAPITAL &amp; SURPLUS ACCOUNT</b>			
33. Capital and surplus prior reporting year.....	307,941,776	265,477,101	265,477,101
34. Net income or (loss) from Line 32 .....	(5,684,038)	(2,040,756)	(28,891,765)
35. Change in valuation basis of aggregate policy and claim reserves .....	0	0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ .....0	(24,488)	826,596	553,953
37. Change in net unrealized foreign exchange capital gain or (loss) .....	0	0	0
38. Change in net deferred income tax .....	0	0	1,103,584
39. Change in nonadmitted assets .....	16,689,551	3,779,450	4,748,039
40. Change in unauthorized and certified reinsurance .....	0	0	0
41. Change in treasury stock .....	0	0	0
42. Change in surplus notes .....	0	0	0
43. Cumulative effect of changes in accounting principles .....	0	0	1,846,160
44. Capital Changes:			
44.1 Paid in .....	0	0	0
44.2 Transferred from surplus (Stock Dividend) .....	0	0	0
44.3 Transferred to surplus .....	0	0	0
45. Surplus adjustments:			
45.1 Paid in .....	0	0	60,000,000
45.2 Transferred to capital (Stock Dividend) .....	0	0	0
45.3 Transferred from capital .....	0	0	0
46. Dividends to stockholders .....	0	0	0
47. Aggregate write-ins for gains or (losses) in surplus .....	0	2,425,099	3,104,704
48. Net change in capital and surplus (Lines 34 to 47) .....	10,981,025	4,990,389	42,464,675
49. Capital and surplus end of reporting period (Line 33 plus 48)	318,922,801	270,467,490	307,941,776
<b>DETAILS OF WRITE-INS</b>			
4701. Correction of prior period.....	0	2,425,099	2,425,099
4702. Tax Correction.....	0	0	679,605
4703. ....	0	0	0
4798. Summary of remaining write-ins for Line 47 from overflow page .....	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	2,425,099	3,104,704

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**CASH FLOW**

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance.....	1,766,468,822	1,660,291,409	3,002,479,496
2. Net investment income .....	10,586,811	9,016,749	18,142,414
3. Miscellaneous income .....	0	0	2,427
4. Total (Lines 1 to 3) .....	1,777,055,633	1,669,308,158	3,020,624,337
5. Benefit and loss related payments .....	1,487,913,604	1,198,599,805	2,507,693,751
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	255,893,155	205,223,930	472,198,963
8. Dividends paid to policyholders .....	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... 247,399 tax on capital gains (losses).....	7,081,982	(4,995,164)	977,615
10. Total (Lines 5 through 9) .....	1,750,888,741	1,398,828,571	2,980,870,329
11. Net cash from operations (Line 4 minus Line 10) .....	26,166,892	270,479,587	39,754,008
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	113,783,977	65,129,382	106,023,522
12.2 Stocks .....	0	0	0
12.3 Mortgage loans .....	0	0	0
12.4 Real estate .....	0	0	0
12.5 Other invested assets .....	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	2,847	(1,662)	(2,306)
12.7 Miscellaneous proceeds .....	0	1	1
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	113,786,824	65,127,721	106,021,217
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	134,054,683	121,224,038	222,516,064
13.2 Stocks .....	0	0	0
13.3 Mortgage loans .....	0	0	0
13.4 Real estate .....	0	0	0
13.5 Other invested assets .....	0	0	0
13.6 Miscellaneous applications .....	500,000	1,958,623	2
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	134,554,683	123,182,661	222,516,066
14. Net increase (or decrease) in contract loans and premium notes .....	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) .....	(20,767,859)	(58,054,940)	(116,494,849)
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes .....	0	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	0	60,000,000
16.3 Borrowed funds .....	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	0	0	0
16.5 Dividends to stockholders .....	0	0	0
16.6 Other cash provided (applied).....	(6,903,328)	(23,595,814)	(614,426)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6).....	(6,903,328)	(23,595,814)	59,385,574
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(1,504,295)	188,828,833	(17,355,267)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	21,576,719	38,931,986	38,931,986
19.2 End of period (Line 18 plus Line 19.1) .....	20,072,424	227,760,819	21,576,719

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year .....	476,778	29,829	183,104	.0	4,838	17,741	22,271	218,995	.0	.0
2. First Quarter .....	561,059	32,288	182,729	.0	8,368	17,254	21,320	280,075	19,025	.0
3. Second Quarter .....	567,846	33,982	183,161	.0	9,288	20,388	21,058	283,765	16,204	.0
4. Third Quarter .....	.0									
5. Current Year	0									
6. Current Year Member Months	3,384,743	194,865	1,101,060	0	51,231	105,714	127,982	1,685,361	118,530	0
Total Member Ambulatory Encounters for Period:										
7. Physician .....	1,967,427	41,580	406,839			.0	87,931	1,301,864	129,213	.0
8. Non-Physician .....	1,936,094	33,528	342,872			0	42,739	1,404,627	112,328	0
9. Total	3,903,521	75,108	749,711	0	0	0	130,670	2,706,491	241,541	0
10. Hospital Patient Days Incurred	653,031	4,553	69,759				3,141	569,432	6,146	
11. Number of Inpatient Admissions	134,020	975	17,203				1,218	113,344	1,280	
12. Health Premiums Written (a).....	1,902,248,038	29,392,252	358,609,880	1,793	491,514	2,177,557	62,825,180	1,398,263,497	50,466,620	19,745
13. Life Premiums Direct.....	.0									
14. Property/Casualty Premiums Written .....	.0									
15. Health Premiums Earned .....	1,899,915,512	29,159,731	357,284,423	1,793	491,514	2,177,557	62,405,832	1,397,908,297	50,466,620	19,745
16. Property/Casualty Premiums Earned .....	.0									
17. Amount Paid for Provision of Health Care Services .....	1,518,154,861	18,442,379	274,106,187	2,059	361,162	1,516,411	54,843,934	1,142,523,235	26,359,390	104
18. Amount Incurred for Provision of Health Care Services	1,612,788,786	19,372,219	274,435,077	18,137	361,162	1,585,181	58,482,835	1,211,607,494	46,927,179	(498)

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 1,398,263,497

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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)						
DUAL DCODEH (HOSPITAL)	19,690					19,690
12TH STREET COVINGTON DIALYSIS	4,854					4,854
ABINGDON HEALTH AND REHAB CENTER	2,027					2,027
ABRAHAM LINCOLN MEMORIAL HOSPITAL	13,635	2,173				15,809
ACCREDO HEALTH GROUP	5,390					5,390
ACCREDO HEALTH GROUP INC	2,782					2,782
ACH BERGAN	48,096	12,520				60,615
ACH IMMANUEL	21,748					21,748
ACH IMMANUEL PSYCH	2,026					2,026
ACH IMMANUEL REHAB	8,950					8,950
ACH LAKESIDE	52,164					52,164
ACH MEM HOSP SCHUYLER		2,329				2,329
ACH MIDLANDS	43,933					43,933
ADAM C GOLD MD	46,241					46,241
ADVANCE CARE LLC	2,621					2,621
ADVANCED DIAGNOSTIC IMAGING		2,719				2,719
ADVANCED HOME CARE	3,278					3,278
ADVENTIST BOLINGBROOK HOSPITAL	32,203					32,203
ADVENTIST GLEN OAKS HOSPITAL	2,602				5,867	8,468
ADVENTIST HINSDALE HOSPITAL	52,695		5,650		2,170	60,514
ADVENTIST LA GRANGE MEMORIAL	25,871	14,424				40,296
ADVOCATE CONDELL MEDICAL CTR	10,092	5,096				15,188
ADVOCATE GOOD SAMARITAN	62,687				5,374	68,061
ADVOCATE GOOD SHEPHERD HOSPITAL	6,887					6,887
ADVOCATE HOME HEALTH SERVICES	2,421					2,421
ADVOCATE HOME HEALTH SERVICE	3,046					3,046
ADVOCATE ILLINOIS MASONIC	32,977	2,993			16,087	52,057
ADVOCATE LUTHERAN GENERAL HOSPITAL	49,889				5,107	54,996
ADVOCATE SHERMAN HOSPITAL	61,374	5,239	3,237		4,584	74,433
ADVOCATE SOUTH SUBURBAN	7,383					7,383
ADVOCATE SOUTH SUBURBAN HOSPITAL	32,407				7,382	39,789
ADVOCATE SW AMBULATORY SURGERY CENTER	5,368					5,368
ADVOCATE TRINITY HOSPITAL	82,016	7,254			14,710	103,980
AIBIOTECH LLC	8,000					8,000
AIKEN MEDICAL CENTER AURORA PA	4,862					4,862
AIR EVAC EMS INC	5,146					5,146
AKASH AHUJA MD	3,656					3,656
ALAN M SCARROW MD	2,495					2,495
ALAN MOSKOWITZ MD		3,080				3,080
ALDEN DES PLAINES REHAB	2,151				2,584	4,734
ALDEN NORTH SHORE REHAB	2,334					2,334
ALDEN TOWN MANOR REHAB	4,520					4,520
ALEGENT BERGAN MERCY MED CTR		6,891				6,891
ALEGENT CREIGHTON HEALTH CREIGHTON	28,371					28,371
ALEXIAN BROTHERS BEHAVIORAL	5,960					5,960
ALEXIAN BROTHERS MEDICAL CTR	77,466	16,077			6,679	100,222
ALI A MADANI MD	3,818					3,818
ALL CHILDRENS HOSPITAL	50,806					50,806
ALL HEART HOME HEALTH AGENCY	4,265					4,265
ALL SAINTS MEDICAL CENTER	7,805					7,805
ALLEGIANCE SPECIALTY HOSPITAL	12,422					12,422
ALLEN L COHN MD	6,298					6,298
ALLEN T MIKHAIL MD	2,380					2,380
ALLIANCE FAMILY SERVICES HOME		2,375				2,375
ALLIANCE HOME HEALTH	6,331	3,607				9,939

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
ALPHA HEALTH & REHAB OF GREER.....	3,226					3,226
ALTA VISTA REGIONAL HOSPITAL.....	8,412	3,569				11,980
ALTERNACARE INFUSION PHARMACY.....	6,972					6,972
ALVIN CRAWFORD.....					3,852	3,852
AMERICAN CLINICAL SOLUTIONS.....	4,401					4,401
AMERICAN MEDICAL RESPONSE.....	5,063					5,063
AMERICAN MEDICAL RESPONSE.....	3,136					3,136
AMERICAN NEUROMONITORING ASSOCIATES.....	2,866					2,866
AMERITOX LTD.....	2,217					2,217
AMISUB OF SOUTH CAROLINA.....	51,587					51,587
AMOL N RAKKAR MD.....	5,215					5,215
ANCA NASTASA.....					2,026	2,026
ANDERSON DIALYSIS CLINIC.....	9,881					9,881
ANDERSON HOSPITAL.....					5,278	5,278
ANDREI DAMIAN.....	6,387					6,387
ANDREW J STINGO MD.....	2,068					2,068
ANDREW PALMER.....	2,559					2,559
ANDREW RINGER.....		2,758				2,758
ANESTHESIA ASSOC CDA.....	2,789					2,789
ANESTHESIA ASSOCIATES OF CINCINNATI INC.....	10,293	3,568				13,861
ANESTHESIA ASSOCIATES OF LOUISVILLE.....	2,655					2,655
ANESTHESIA ASSOCIATES OF LOUISVILLE PSC.....	4,158					4,158
ANESTHESIA ASSOC OF KCPC.....	6,064					6,064
ANESTHESIA CONSULTANTS OF INDIANA.....	2,620					2,620
ANESTHESIOLOGY ASSOCIATES PSC.....	8,967					8,967
ANGELO P MALAMIS MD.....	2,647					2,647
ANIMAS DIABETES CARE.....	5,208					5,208
ANMED HEALTH.....	279,223	20,868				300,091
ANMED HEALTH MEDICAL CENTER.....	10,662					10,662
ANMED HEALTH MEDICUS SURG CTR.....	5,614					5,614
ANN TUTTLE.....					3,024	3,024
ANTHONY GUANCIALE.....				2,470		2,470
ANTHONY PHILLIPS.....	3,331					3,331
APPLE RIDGE HEALTH AND REHABILITATION.....	2,208					2,208
APRIA HEALTHCARE INC.....	6,087					6,087
AR DHHS.....	2,048					2,048
ARA SOUTH LABURNUM DIALYSIS.....	8,771					8,771
ARIA HEALTH.....		4,993				4,993
ARIZONA CENTER FOR NEUROSURGERY.....	7,871					7,871
ARIZONA HEART ANESTHESIA PLLC.....	2,061					2,061
ARKANSAS HEART HOSPITAL.....	36,570	6,303				42,873
ARMIN OSKOU EI.....		3,381				3,381
ARROWHEAD HOSPITAL.....	47,684					47,684
A UNABLE TO UPDATE PROVIDER INFO.....					41,397	41,397
ARVIND AHUJA.....	12,993					12,993
ASHLEY HEALTH AND REHAB.....	2,706					2,706
ASHOK K MEHTA MD.....	8,000					8,000
ASHTON COURT CARE AND REHABILITATION.....	2,172					2,172
ASHTON PLACE HEALTH AND REHAB.....	14,046	2,702				16,748
ASSOCIATED SURGICAL GROUPS.....	2,132					2,132
ASSURERX HEALTH INC.....	2,435	6,471				8,906
ASTORIA PLACE LIVING & REHAB.....	3,769					3,769
ATHENS LIMESTONE HOSPITAL.....	34,912	23,665				58,577
ATHENS REGIONAL MEDICAL CENTER.....	3,525					3,525
ATHENS REHABILITATION CENTER.....	2,867					2,867
ATLANTIC ANESTHESIA INC GROUP.....	5,690					5,690

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
AUBURN SURGICAL CENTER	4,900					4,900
AUDRAIN MEDICAL CENTER	2,407	2,075				4,482
AURORA BAYCARE MEDICAL CENTER					2,453	2,453
AURORA BEHAVIORAL HEALTH SYSTEM	5,110				2,405	7,515
AURORA CHICAGO LAKESHORE HOSPITAL			4,503			4,503
AURORA HEALTH CARE METRO INC	16,680					16,680
AURORA MEDICAL CENTER GRAFTON LLC	21,623					21,623
AURORA MEDICAL CENTER OSHKOSH	7,673					7,673
AURORA MEMORIAL HOSPITAL OF BURLINGTON	8,237					8,237
AURORA WEST ALLIS MEMORIAL HOSPITAL	32,250					32,250
AUSTIN T WELSH MD	7,148					7,148
AUTUMN CARE OF SUFFOLK		2,775				2,775
AUTUMN HEIGHTS	2,767					2,767
AUTUMN HILL INC	5,153					5,153
AVALON HEALTH AND REHAB	3,620					3,620
AVENTURA HOSPITAL AND MEDICAL CENTER			3,893			3,893
AVENUE CARE CENTER INC	4,725					4,725
AVISTA ADVENTIST HOSPITAL	2,428					2,428
AYA HAMAQ SAKAMOTO	2,310					2,310
BALLARD CARE AND REHABILITATION		4,061				4,061
BALLARD NURSING CENTER	2,886					2,886
BANNER BAYWOOD MEDICAL	61,874	8,249			10,442	80,564
BANNER BAYWOOD RHODES REHAB			11,210			11,210
BANNER BEHAVIORIAL HEALTH HOSPITAL		2,076				2,076
BANNER BOSWELL MEDICAL CENTER	134,727	9,606				144,333
BANNER CANYON SPRINGS SURGERY		2,248				2,248
BANNER DEL E WEBB MED CTR	7,792	13,450	5,176			26,417
BANNER DEL E WEBB MEDICAL CENTER	103,885	2,689				106,574
BANNER DEL E WEBB MEDICAL CENTER	2,088					2,088
BANNER DESERT MEDICAL	135,676	32,462		6,170	2,678	176,987
BANNER ESTRELLA MEDICAL	61,844					61,844
BANNER GATEWAY MEDICAL	80,416	59,501				139,916
BANNER GOOD SAM MEDICAL	166,681	33,580				200,261
BANNER HEART HOSPITAL	107,554	68,005				175,559
BANNER HOME CARE COLORADO	5,198					5,198
BANNER IRONWOOD MEDICAL	7,477					7,477
BANNER THUNDERBIRD MEDICAL	149,622	40,470		3,292		193,384
BAPTIST EASLEY HOSPITAL	79,799	13,575				93,373
BAPTIST EASTPOINT SURGICAL CENTER	2,462					2,462
BAPTIST HEALTH LA GRANGE	9,300					9,300
BAPTIST HEALTH LEXINGTON	50,047	16,147			31,283	97,476
BAPTIST HEALTH LOUISVILLE	73,085	7,782	2,067		95,727	178,661
BAPTIST HEALTH MADISONVILLE	2,609					2,609
BAPTIST HEALTH MEDICAL CENTER	238,518	31,120				269,638
BAPTIST HEALTH PADUCAH	2,253				18,408	20,661
BAPTIST HEALTH RICHMOND INC	21,262	4,698				25,960
BAPTIST HLTH MED CTR ARKADELPHIA	4,224					4,224
BAPTIST HOME HEALTH NETWORK	4,187					4,187
BAPTIST HOSPITAL	109,923					109,923
BAPTIST MEDICAL CENTER	7,538					7,538
BAPTIST MEMORIAL HOSPITAL MEMPHIS	14,306					14,306
BAPTIST MEMORIAL MED CTR NLR	45,769	2,208		10,381		58,358
BAPTIST REHAB INSTITUTE	13,811					13,811
BAPTIST ST ANTHONYS HEALTH SYSTEM					12,473	12,473
BARNES JEWISH HOSPITAL	94,090	48,619				142,709
BARNES JEWISH ST PETERS HOSPITAL	5,039					5,039

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

Aging Analysis of Unpaid Claims

1 Account	2	3	4	5	6	7
	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
BASIL CHERPELIS.....	2,203					2,203
BAXTER REG MED CENTER.....	43,098	7,495				50,593
BAY AREA MEDICAL CENTER.....				2,824		2,824
BAY MEDICAL CENTER SACRED HEART.....					43,642	43,642
BAY POINTE MEDICAL AND REHABILITATION.....	7,771					7,771
BAYADA HOME HEALTH CARE INC.....	7,931	2,205				10,136
BAYFRONT MEDICAL CENTER.....	2,063					2,063
BAYLOR UNIVERSITY MEDICAL CENTER.....					78,643	78,643
BAYSIDE HEALTH AND REHAB.....	3,606					3,606
BEACON WEST SURGERY CENTER.....	2,922					2,922
BEAUFONT HEALTH AND REHAB.....	4,337					4,337
BEDFORD MEMORIAL HOSPITAL.....	2,792					2,792
BELÉN MEADOWS HEALTHCARE.....	5,229					5,229
BELLEVUE MEDICAL CENTER.....	13,473					13,473
BELLIN MEMORIAL HOSPITAL INC.....	3,565					3,565
BELTON REGIONAL MEDICAL CENTER.....	13,169					13,169
BENCHMARK HEALTHCARE OF MONETT.....		3,974				3,974
BENCHMARK HEALTHCARE OF RAYTOWN.....	5,663					5,663
BENJAMIN A LAMPERT MD.....	2,535					2,535
BENJAMIN KNOX.....	2,395					2,395
BENTON COUNTY DIALYSIS CENTER.....	2,338					2,338
BERKSHIRE HEALTH AND REHAB.....	2,582					2,582
BERNADETTE WANG ASHRAF.....			2,600			2,600
BETH ISRAEL MEDICAL CENTER.....		14,452				14,452
BETHANY AT PACIFIC.....	2,979					2,979
BETHANY AT SILVER LAKE.....	3,623					3,623
BETHESDA HOSPITAL INC.....	158,335					158,335
BETTY P YEH MD.....	2,572					2,572
BEVERLY DIALYSIS.....	8,286					8,286
BIG SPRING CARE CENTER.....	4,550					4,550
BIG SPRINGS SPECIALTY CARE CENTER.....	6,055					6,055
BILOXI REGIONAL MEDICAL CENTER.....	2,553					2,553
BIO MEDICAL APPLICATIONS.....	2,904					2,904
BIORX LLC.....					2,237	2,237
BIRDMONT HEALTH CARE LLC.....	5,217					5,217
BJC HOME CARE SERVICES.....		2,830				2,830
BLOUNT MEMORIAL HOSPITAL.....	2,059					2,059
BLUE RIDGE SURGERY CENTER.....	5,350					5,350
BLUE RIVER REHABILITATION CTR.....	7,183					7,183
BLUE VALLEY HOSPITAL INC.....	3,338					3,338
BLUEGRASS CARE & REHAB CENTER.....	2,186					2,186
BLUEMOUND DIALYSIS.....	3,883					3,883
BLUEMOUND SURGERY CENTER LLC.....	3,506					3,506
BLUFFTON REGIONAL MEDICAL CENTER.....	2,478					2,478
BMA AUDUBON.....	13,782	23,163				36,945
BMA LEES SUMMIT.....	9,226					9,226
BMA OF KANSAS CITY.....	9,633					9,633
BMA S LOUISVILLE.....		8,507	3,522			12,028
BMH TIPTON.....					9,738	9,738
BOLINGBROOK DIALYSIS.....	17,743	17,879	2,366			37,988
BON SECOURS DEPAUL MEDICAL CENTER.....	131,361	130,128				261,489
BON SECOURS HOME CARE.....	2,299					2,299
BON SECOURS HOSPICE.....	2,071	2,510				4,581
BON SECOURS HR RODMAN HOME.....	2,784					2,784
BON SECOURS MEMORIAL REGIONAL.....	309,337	33,695				343,032

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

Aging Analysis of Unpaid Claims

1 Account	Aging Analysis of Unpaid Claims					
	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
BON SECOURS ST FRANCIS HEALTH	398,972	26,289			49,501	474,761
BON SECOURS ST FRANCIS XAVIER			2,285			2,285
BONNER GENERAL HOSPITAL	10,245					10,245
BOO G LOW MD	9,034					9,034
BOONE HOSPITAL CENTER	21,726					21,726
BOONEVILLE COMMUNITY HOSPITAL	18,550					18,550
BOSTON HEART LAB CORP		3,091				3,091
BOSTON HEART LAB CORPORATION	4,967					4,967
BOULDER COMMUNITY HOSPITAL	15,836	35,451			28,788	80,076
BRADFORD HEALTH SERVICES	5,680	6,293				11,973
BRADFORD HOUSE NURSING AND REHAB	3,412					3,412
BRANDON J SCOTT	3,359					3,359
BRANDON REGIONAL HOSPITAL	48,253					48,253
BRANSON DIALYSIS LLC	5,908					5,908
BRENT GABRIEL					3,103	3,103
BRENTON R COGER MD		2,910				2,910
BRENTWOOD NORTH HEALTHCARE	4,502					4,502
BRENTWOOD SUBACUTE HEALTHCARE					2,276	2,276
BRIAN MANNION	2,410					2,410
BRIAN MCCALL		2,830				2,830
BRIAN THORNTON		3,061				3,061
BRIAN WILLIS	3,358					3,358
BRIARWOOD HEALTH CARE CENTER	2,676					2,676
BRIDGEWAY	5,239					5,239
BRISTOL HOME HEALTH SERVICES	2,010					2,010
BRISTOL REG MED CTR	125,035	52,433				177,468
BROOK HOSPITAL DUPONT		6,960				6,960
BROOK HOSPITAL	14,290					14,290
BROOKSTONE VILLAGE INC	5,375					5,375
BROOKHAVEN MANOR	2,350					2,350
BROOKWOOD MEDICAL CENTER	76,031	5,709				81,740
BRUCE W PORTERFIELD MD	3,436					3,436
BRYAN MEDICAL CENTER EAST	17,425					17,425
BYRAM HEALTHCARE CENTERS	2,381					2,381
CANCER CENTERS EASTSIDE GMH DEPT	4,542					4,542
CANCER CENTERS FARIS GMH DEPT	9,811	16,566				26,377
CANCER CENTERS SENECA GMH DEPT				4,969		4,969
CANNON MEMORIAL HOSPITAL	30,515			2,554		33,069
CANTEBURY NURSING AND REHAB CENTER	3,400					3,400
CANYON TRANSITIONAL REHABILITATION	3,901					3,901
CAPE FEAR VALLEY MEDICAL CTR	3,915					3,915
CAPITAL REGION MEDICAL CENTER	3,266					3,266
CARDINAL HILL REHABILITATION HOSPITAL	5,641					5,641
CARDIOVASCULAR SURGERY SVCS	3,008					3,008
CARE CENTER CAMAS INC	2,783					2,783
CARILION FRANKLIN MEMORIAL	2,136					2,136
CARILION GILES COMMUNITY HOSPITAL	4,339					4,339
CARILION NEW RIVER VALLEY MEDICAL	14,231	2,959				17,190
CARILION ROANOKE MEMORIAL HOSPITAL	177,088	20,191				197,279
CARL STOPPER		4,785				4,785
CARMEL HILLS HEALTHCARE	2,175					2,175
CAROLINA DIALYSIS CARRBORO					21,062	21,062
CAROLINA HOSPITAL SYSTEM				10,564		10,564
CAROLINAS GASTROENTEROLOGY CENTER	2,044					2,044
CAROLINAS MEDICAL CENTER PINEVIEW	6,832					6,832

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

Aging Analysis of Unpaid Claims

1 Account	2	3	4	5	6	7
	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
CARONDELET HOME CARE SERVICES.....	3,000	2,003				5,003
CARONDELET MANOR.....	8,926					8,926
CARONDELET ST JOSEPHS HOSPITAL.....	86,763	15,601				102,364
CARONDELET ST MARYS HOSPITAL.....	60,149	3,523				63,672
CARTER COOPER.....	2,279					2,279
CASCADE VALLEY HOSPITAL.....	2,110					2,110
CASS REGIONAL MEDICAL CENTER.....	51,972					51,972
CASTLETON HEALTH CARE CENTER.....	3,385					3,385
CATHOLIC HEALTH PARTNERS SVS.....	3,349					3,349
CATHY C LUO MD.....	3,417					3,417
CCS MEDICAL.....	3,509					3,509
CEDAR LAKE VILLAGE.....	3,998					3,998
CENSEOHEALTH LLC.....	10,530					10,530
CENTENE MANAGEMENT CORP.....	11,449					11,449
CENTENNIAL HILLS HOSPITAL MEDICAL.....					19,463	19,463
CENTENNIAL PEAKS HOSPITAL.....	3,947					3,947
CENTERPOINT AMB SURGERY.....	3,414					3,414
CENTERPOINT MEDICAL CENTER.....	222,331	5,043				227,373
CENTERPOINTE HOSPITAL WEST COUNTY.....	2,725		2,959			5,684
CENTRAL DUPAGE DIALYSIS CENTER.....	10,262					10,262
CENTRAL DUPAGE HOSPITAL.....	122,546	11,059				133,605
CENTRAL LOUISIANA SURGICAL HOSPITAL.....				11,301		11,301
CENTRAL MISSISSIPPI MEDICAL CENTER.....	7,358					7,358
CENTRAL TAMPA DIALYSIS.....		6,004				6,004
CHAD E HARTLEY MD.....	2,224					2,224
CHAD J PRUSMACK MD.....	2,535					2,535
CHAD PRUSMACK.....	2,605					2,605
CHANDLER REGIONAL HOSPITAL.....	27,925	12,275			65,575	105,775
CHARLES CAWLEY III.....					12,692	12,692
CHARLES CRAWFORD III.....		7,095				7,095
CHARLES HANEY.....	2,189					2,189
CHARLES STRADER JR.....					2,344	2,344
CHARLES W TAYLOR MD.....	3,901					3,901
CHERYL HARDENBROOK MD.....	2,277					2,277
CHESAPEAKE GENERAL HOSPITAL.....	15,809	7,264				23,073
CHESTNUT HILL.....		2,576				2,576
CHEYENNE MOUNTAIN CARE AND REHAB.....	3,780					3,780
CHHEANY W UNG MD.....		2,949				2,949
CHICAGO DE PT REV CFD EMS.....	3,072					3,072
CHICAGO NEUROLOGICAL SURGERY.....	7,074					7,074
CHILDRENS ANESTHESIA ASSOCIATES INC.....	2,480					2,480
CHILDRENS HOME HEALTH CARE SERVICES.....	5,117				14,402	19,519
CHILDRENS HOSPITAL.....	64,815	7,626			2,178	74,619
CHILDRENS HOSPITAL MEDICAL CENTER.....	189,244	3,433	11,267		144,611	348,555
CHILDRENS HOSPITAL MEDICAL CENTER LAB.....					2,245	2,245
CHILDRENS HOSPITAL OF WISCONSIN.....	19,867					19,867
CHILDRENS MERCY HOSPITAL.....	3,741				7,755	11,496
CHIPPENHAM & JOHNSTON WILLIS.....	96,498	102,171	5,768			204,438
CHOA AT WEBB BRIDGE RADIOLOGY CENTER.....	3,630					3,630
CHOPRA SHAILEND.....	4,122					4,122
CHRIS RIDGE PREMIER CARE AND REHAB.....	5,740					5,740
CHRIST HOSPITAL.....	86,737	5,598		39,070	51,618	183,022
CHRIST MED CENTER.....	257,270	16,573		2,048	43,243	319,134
CHRIST SPINE SURGERY CENTER.....	18,909					18,909
CHRISTIAN CHURCH HOMES OF KY.....	2,750					2,750
CHRISTIAN G ZIMMERMAN MD.....				3,473		3,473

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
CHRISTIAN HEALTH AND REHABILITATION.....	28,960	3,058				32,019
CHRISTIAN HEALTH CENTER WEST.....	2,548					2,548
CHRISTIAN HOSPITAL.....	2,288					2,288
CHRISTINE MUNSON.....	2,578					2,578
CHRISTOPHER EAST HLTH CARE CTR.....	5,387					5,387
CHRISTOPHER KELSCH.....	2,397					2,397
CHRISTOPHER LANNOTTI.....		2,016				2,016
CHRISTUS ST MICHAEL HOSPITAL.....	66,331	17,510				83,841
CINCINNATI VAMC.....	6,472					6,472
CITIZENS MEMORIAL HEALTH CARE.....	4,531					4,531
CITIZENS MEMORIAL HOSPITAL.....	45,073	9,046	4,848			58,967
CLARIAN HEALTH NORTH LLC.....	16,846					16,846
CLARIAN HEALTH WEST LLC.....	4,084					4,084
CLARK MEMORIAL HOSPITAL.....	27,963	7,729	6,953		2,595	45,240
CLARK REGIONAL MEDICAL CENTER.....	23,241					23,241
CLERMONT COUNTY DIALYSIS.....	2,415					2,415
CLEVELAND CLINIC.....	13,298					13,298
CLEVELAND CLINIC HOSPITAL.....	104,251					104,251
CLINCH RIVER DIALYSIS.....					2,795	2,795
CLINTON HEALTHCARE AND REHAB CENTER.....	3,249					3,249
COLONIAL SPRINGS REHAB.....	3,477					3,477
COLORADO OTOLARYNGOLOGY ASSOCIATES.....	2,110					2,110
COLUMBIA LOS ROBLES HOSP MEDICAL CTR.....	11,119					11,119
COLUMBIA ST MARYS CSM OZAUKEE PHARMACY.....	4,081					4,081
COLUMBIA ST MARYS HOSPITAL MILWAUKEE INC.....	8,002				4,370	12,372
COMMONWEALTH ANESTHESIA ASSOCIATES.....	2,089					2,089
COMMUNITY HOME HEALTH SERVICES.....	3,228					3,228
COMMUNITY HOSPITAL ANDERSON.....	10,646	2,008				12,653
COMMUNITY HOSPITAL OF LAGRANGE.....	3,523					3,523
COMMUNITY HOSPITAL OF NOBLE COUNTY.....	28,895					28,895
COMMUNITY HOSPITALS OF IN INC.....	101,497	8,267	4,525	5,310		119,600
COMMUNITY MEDICAL CTR OF IZARD.....	2,005					2,005
CONCORD NURSING & REHABILITATION.....	4,024					4,024
CONCORDIA HEALTH AND REHAB LLC.....	3,355	5,361				8,716
CONTINENTAL NURSING & REHAB.....	6,750	2,850				9,600
CONWAY HEALTHCARE & REHAB CTR.....	3,343					3,343
COOPER COUNTY MEM HOSPITAL.....		2,780				2,780
COOSA VALLEY MEDICAL CENTER.....	9,485					9,485
COPLEY MEMORIAL HOSPITAL.....	119,811	35,718				155,529
COPPER QUEEN COMMUNITY HOSPITAL.....	8,367	2,062				10,429
CORAM ALTERNATE SITE SERVICES.....	8,798	3,749				12,547
CORAM HEALTHCARE.....	2,231					2,231
CORAM HEALTHCARE CAROLINA HOME.....	26,351					26,351
CORAM HEALTHCARE OF ALABAMA.....	7,207					7,207
CORNERSTONE HOSPITAL OF SOUTHERN IN.....	67,964					67,964
COVENTRY CARES KY.....	2,399					2,399
COVINGTON COURT HEALTH.....	6,414					6,414
COX MEDICAL CENTER BRANSON.....	44,636	6,085				50,722
CRAIG A KUHNS MD.....	3,234					3,234
CRAWFORD HEALTHCARE AND REHABILITATION.....	4,809					4,809
CRESTWOOD MEDICAL CENTER.....	34,527		3,590			38,118
CROWNE HEALTH CARE OF MOBILE.....	9,829					9,829
CROWNE HEALTH CARE OF SPRINGHILL.....	4,522					4,522
CULLMAN REGIONAL MEDICAL CTR.....	8,840					8,840
CUMBERLAND HEIGHTS FOUNDATION INC.....		3,630				3,630
CURASCRIPPT SP SPECIALTY PHARMACY INC.....		5,850				5,850

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

Aging Analysis of Unpaid Claims

1 Account	Aging Analysis of Unpaid Claims					
	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
CURATORS OF THE UNIVERSITY MISSOURI.....	5,077					5,077
CUSHING MEMORIAL HOSPITAL.....	6,896					6,896
CYBERKNIFE CENTERS OF TAMPA BAY.....	24,490					24,490
DALLAS COUNTY.....	8,200					8,200
DANIEL C FARRELL MD.....	2,436					2,436
DANIEL DRENNAN.....	7,088					7,088
DANIEL H WHITE MD.....	3,532					3,532
DARON C PRAETZEL DDS.....	3,540					3,540
DAVID A VINCENT MD.....	10,091					10,091
DAVID ARGO.....	2,282					2,282
DAVID BADGER MD.....	2,800					2,800
DAVID H HARPOLE MD.....	3,002					3,002
DAVID HAUGE.....	4,914					4,914
DAVID L HEADLEY.....	2,128					2,128
DAVID MORALES.....			6,360			6,360
DAVID MOSIER.....	2,152					2,152
DAVID NIEMANN.....	3,687					3,687
DAVID SUN.....	2,034					2,034
DAWEI LU MD.....	2,385	2,785				5,171
DAY SURGERY FACILITIES.....					50,411	50,411
DAYSRING HEALTH & REHAB.....	4,052					4,052
DCA BERWYN.....	16,513					16,513
DCA CRESTWOOD.....	6,014					6,014
DCA OF ASHLAND LLC.....	9,676					9,676
DCA OF CINCINNATI LLC.....	22,158					22,158
DCH REGIONAL MED CTR.....	7,905					7,905
DCH REGIONAL MEDICAL CENTER.....	12,280					12,280
DEACONESS HOSPITAL.....					11,991	11,991
DEACONESS HOSPITAL INC.....	196,308	14,921				211,230
DECATUR GENERAL HOSPITAL.....	12,638	33,758	7,825			54,220
DEHLI DIALYSIS.....	2,372					2,372
DEKALB MEMORIAL HOSPITAL.....	9,044					9,044
DELMAR GARDENS OF LENEXA.....	3,974					3,974
DELNOR COMMUNITY HOSPITAL.....	11,612					11,612
DENNIS W DUNNING MD.....	2,490					2,490
DENVER HEALTH MEDICAL CENTER.....	2,769	112,495				115,264
DEPAUL HEALTH CENTER.....	56,420					56,420
DEQUEEN MEDICAL CENTER.....	9,369					9,369
DEQUINCY HOME HEALTH.....	2,142					2,142
DERLIS MARTINO MD.....		2,947				2,947
DESERT COVE NURSING CENTER.....	6,229					6,229
DESERT SPRINGS HOSPITAL MEDICAL.....	56,300				77,648	133,948
DESERT SPRINGS HOSPITAL MEDICAL CENTER.....					8,243	8,243
DESERT VIEW REGIONAL MEDICAL CENTER.....					5,171	5,171
DEVINDER SINGH.....	2,212					2,212
DIALYSIS CLINIC INC.....	10,428	4,527		10,295		25,250
DIALYSIS CTRS OF AMERICA.....	4,613					4,613
DIALYSIS CTRS OF AMERICA PRAIRIE.....	30,635					30,635
DIALYSIS SVS WILLOWBROOK.....	10,511					10,511
DIAMOND HEALTH & REHAB OF SIMPSON.....	7,338					7,338
DIANE VANDERLIN.....		2,210				2,210
DIEGO J BEDOYA MD.....	2,644					2,644
DIRECT DIALYSIS.....	6,845					6,845
DIRK FRANZEN.....	14,966					14,966
DMG PAIN MANAGEMENT SURGERY.....	42,778			10,448		53,226
DMG SURGICAL CENTER LLC.....	3,017					3,017

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

Aging Analysis of Unpaid Claims

1 Account	2	3	4	5	6	7
	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
DOCTORS HOSPITAL AT RENAISSANCE.....	3,300					3,300
DONALD D BEAHM MD.....		4,755				4,755
DONALD POLANSKY.....	3,715					3,715
DOUGLAS FLORA.....	2,434					2,434
DOUGLAS J LONG.....	2,895					2,895
DOUGLAS REZNICK.....			2,001			2,001
DOWNERS GROVE DIALYSIS CENTER.....	17,134					17,134
DRAKE CENTER LLC.....	19,115					19,115
DREYER AMBULATORY SURGERY.....	2,286					2,286
DSI AVONDALE RENAL CENTER.....	15,356	17,352				32,708
DSI DENHAM SPRINGS.....					2,198	2,198
DSI EASLEY RENAL CENTER.....	38,105					38,105
DSI LOUISVILLE RENAL CENTER.....	36,633					36,633
DSI NORTHEAST PHOENIX RENAL CENTER.....	12,580					12,580
DSI NORWOOD RENAL CENTER.....	26,006					26,006
DSI SCOTTSDALE RENAL CENTER.....	11,823					11,823
DUKE UNIVERSITY HEALTH SYSTEM.....	17,224					17,224
DUPAGE MEDICAL GROUP LTD.....	2,085					2,085
DUPONT HOSPITAL.....	18,252					18,252
EAGLE HIGHLANDS SURGERY CENTER.....	4,964	3,717				8,681
EAST CAMPUS SURGERY CENTER LLC.....	4,168					4,168
EAST TAMPA DIALYSIS.....	3,207					3,207
E UNABLE TO UPDATE PROVIDER INFO.....				39,306		39,306
EASTGATE DIALYSIS.....	2,816					2,816
EDGE PARK MEDICAL SUPPLIES.....	5,077					5,077
EDINBURG REGIONAL MEDICAL CENTER.....		30,587				30,587
EDWARD BROUN.....	5,358					5,358
EDWARD HOSPITAL.....	97,376	5,375		3,151		105,902
EDWARD PRIMKA III.....	2,868					2,868
EDWARD REECE.....					2,829	2,829
EDWARD WHITE HOSPITAL INC.....					11,064	11,064
EHSAN SAFARI DO.....	2,160					2,160
ELIZABETH JACKSON.....	2,146					2,146
ELIZABETH PIERCY.....	2,540					2,540
ELMHURST MEMORIAL HOSPITAL.....	5,446	33,135	4,589			43,170
ELMHURST OUTPATIENT SURGERY.....		2,548				2,548
EMERALD SURGICAL CENTER.....	2,400					2,400
EMERITUS AT ROSLYN.....	4,376					4,376
EMERITUS AT SAN DIMAS.....	2,816					2,816
EMORY UNIVERSITY HOSPITAL.....	23,098					23,098
EMPI INC.....	3,083					3,083
ENDOSCOPY CENTER OF ARKANSAS.....	3,117					3,117
ENDOSCOPY SURG CTR OF LEX CLINIC.....	19,618	2,666				22,285
ENVOY OF STRATFORD HILLS.....		4,408				4,408
EPHRAIM MCDOWELL REG MED CTR.....		2,890				2,890
ERASMO PASSARO.....	2,065					2,065
ERIC PIFEL.....	2,300		2,836			5,136
ERIC S SCHAEFER MD.....	7,236					7,236
ESSEX NURSING AND REHABILITATION.....	4,905					4,905
ESTES PARK MEDICAL CENTER.....	2,282					2,282
ESTIL STRAWN.....		2,150				2,150
EUCLID HOSPITAL.....		3,364				3,364
EUGENIO VARGAS.....	2,427					2,427
EUREKA SPRINGS HOSPITAL.....	3,079					3,079
EVANGELICAL HOSPITAL CORP.....	5,813				31,752	37,565

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
EVANSVILLE SURGERY CENTER.....	4,253					4,253
EVERETT CARE AND REHABILITATION.....	20,944					20,944
EVERETT TRANSITIONAL CARE SERVICES.....	44,290					44,290
EVERGREEN AT TACOMA LLC.....	8,680					8,680
EVERGREEN HEALTHCARE CENTER.....	2,504				3,312	5,816
EVERGREEN HOME HEALTH.....	2,706	4,786				7,492
EVERGREENHEALTH MEDICAL CENTER.....	4,429					4,429
EXCELSIOR SPRINGS MEDICAL CTR.....	2,132					2,132
EXEMPLA LUTHERAN MEDICAL CENTER.....					18,538	18,538
EXEMPLA LUTHERAN MEDICAL CTR.....	20,126					20,126
FABIAN CARBALLO MADRIGAL.....		3,022				3,022
FAIRHOPE HEALTH AND REHAB LLC.....	3,799	2,097				5,896
FAIRMONT CARE CENTER.....					4,293	4,293
FAIRVIEW HOSPITAL.....	10,516					10,516
FAYETTE COMMUNITY HOSPITAL.....		2,983				2,983
FAYETTEVILLE HEALTH & REHAB.....	3,263					3,263
FELLOWSHIP HEALTH & REHAB.....	11,086					11,086
FERNANDO TECHY MD.....	9,456					9,456
FIANNA HILLS NURSING AND REHAB.....	2,308					2,308
FIRSTHEALTH MOORE REGIONAL HOSPITAL.....			8,341			8,341
FL AHCA.....	5,389					5,389
FLAGET MEMORIAL HOSPITAL.....	5,645				2,890	8,536
FLAGLER HOSPITAL.....		4,935				4,935
FLAGSTAFF MEDICAL CENTER.....	6,900					6,900
FLORIDA CANCER SPECIALISTS.....	5,884					5,884
FLORIDA HOSPITAL CARROLLWOOD.....	9,027					9,027
FLORIDA HOSPITAL CELEBRATION HEALTH.....	9,791					9,791
FLORIDA HOSPITAL TAMPA.....	62,245			5,881	68,664	136,791
FLORIDA OR THOPAEDIC INSTITUTE.....	3,939		4,474			8,413
FLORIDA ORTHOPAEDIC INST SURG CTR LLC.....					4,723	4,723
FLORIDA ORTHOPAEDIC INSTITUTE.....	14,608	16,488			5,670	36,766
FLOYD MEMORIAL HOSPITAL.....	46,259	6,045				52,303
FMC DIALYSIS SERVICES OAK RIDGE.....	2,857					2,857
FMC DIALYSIS SERVICES.....	12,181					12,181
FMC DIALYSIS SERVICES YAVAPAI.....	5,870					5,870
FMC DIALYSIS SVS CONGRESS PKWY.....	10,136					10,136
FMC LOUISVILLE NORTHEAST.....	16,689	6,497				23,186
FMC MASONIC HOMES.....	8,813	16,010				24,823
FMC OLDHAM COUNTY.....	6,890					6,890
FMC UPMC PENN HILLS.....	2,113					2,113
FMS SOUTHWEST LOUISVILLE.....	3,475	8,218				11,693
FOREST FAIR DIALYSIS.....	13,566					13,566
FOREST VILLA NURSING & REHAB.....		2,389				2,389
FORSYTH NURSING & REHAB.....		2,035				2,035
FORT HAMILTON HOSPITAL.....					2,672	2,672
FORT LAUDERDALE HOSPITAL.....	3,016					3,016
FRANCISCAN ST ELIZABETH LAFAYETTE.....			6,556			6,556
FRANCISCAN ST FRANCIS HEALTH.....	14,195					14,195
FRANCISCAN ST JAMES HTLH MICHIGAN.....	10,085					10,085
FRANCISCAN ST MARGARET HEALTH.....	41,651					41,651
FRANCISCAN ST MARGARET HLTH.....	41,831					41,831
FRANK J HUX DO.....			2,739			2,739
FRANKLIN WOODS COMMUNITY HOSPITAL.....					42,584	42,584
FRAZIER REHAB INSTITUTE.....	12,879					12,879
FREEDOM PLAZA CARE CENTER.....	4,076					4,076

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
FREEMAN HOSPITAL.....	85,359	9,318			56,630	151,307
FREEMAN HOSPITAL EAST CAMPUS.....	21,330	3,682			3,682	28,694
FREEMAN NEOSHO HOSPITAL.....	21,688	2,395				24,083
FREEMONT MEMORIAL HOSPITAL.....	3,892					3,892
FREMONT AREA MEDICAL CENTER.....	2,907					2,907
FRESENIUS MEDICAL CARE BOWLING.....			2,374			2,374
FRESENIUS MEDICAL CARE CHATHAM.....	25,293					25,293
FRESENIUS MEDICAL CARE ENDEAVOR.....	12,616					12,616
FRESENIUS MEDICAL CARE LOMBARD.....	9,226					9,226
FRESENIUS MEDICAL CARE MIDWAY.....	6,027					6,027
FRESENIUS MEDICAL CARE RIVER.....	11,999					11,999
FRESENIUS MEDICAL CARE STEGER.....	7,948					7,948
FRESNO COMMUNITY HOSPITAL.....	14,636					14,636
FROEDTERT MEMORIAL LUTHERAN HOSPITAL.....	66,478			4,104	5,071	75,653
FT SANDERS REGIONAL MEDICAL CENTER.....	52,033	2,992				55,025
GAFFNEY HMA LLC.....	3,208					3,208
GARDEN TERRACE ALZHEIMERS CTR.....	7,157					7,157
GARDEN TERRACE OVERLAND PARK.....	4,727					4,727
GARFIELD KIDNEY CENTER LLC.....	5,118					5,118
GARY GHISELLI.....	12,060					12,060
GARY MOSKOVITZ.....	4,472					4,472
GASTON MEMORIAL HOSPITAL.....	4,635					4,635
GATEWAY ANESTHESIA ASSOCIATES.....	7,538					7,538
GATEWAY FOUNDATION INC.....	2,360					2,360
GATEWAY REGIONAL MED CTR.....	8,889					8,889
GENERAL PHYSICIAN SERVICES.....	221,105	13,693	2,801			237,600
GENEVA NURSING AND REHABILITATION.....		4,025				4,025
GENOMIC HEALTH INC.....	2,574					2,574
GENTIVA HEALTH SERVICES.....	2,119					2,119
GENTIVA HEALTH SVCS.....	4,878	2,083				6,961
GEORGE E FREY.....	7,111					7,111
GERALD L ROLLINS MD.....	2,126					2,126
GGNSC INDEPENDENCE II LLC.....	3,002					3,002
GILBERT HOSPITAL.....	3,915	3,468				7,382
GINGER A FENTER PT.....	11,175					11,175
GISELE J GIRAULT MD.....		2,609				2,609
GLENN M AMUNDSON MD.....		2,076				2,076
GLENVIEW TERRACE NURSING CTR.....	2,164				3,183	5,347
GOLDEN LIVINGCENTER-BATTLEFIEL.....	2,595					2,595
GOLDEN LIVINGCENTER-CAMELOT.....	2,175					2,175
GOLDEN LIVINGCENTER-HILLCREEK.....	2,903					2,903
GOLDEN LIVINGCENTER-NEW HAVEN.....	7,481					7,481
GOLDEN LIVINGCENTER-OMAHA.....	3,841					3,841
GOLDEN LIVINGCENTER-PARKWAY.....		2,303				2,303
GOLDEN RIDGE SURGERY CENTER.....	3,653					3,653
GOLDEN VALLEY MEMORIAL.....	5,547					5,547
GOOD SAMARITAN HOSPITAL.....	289,604	4,288			8,900	302,792
GOOD SAMARITAN REGIONAL.....	2,464					2,464
GOTTLIEB MEMORIAL HOSPITAL.....	78,282	10,429				88,711
GOTTLIEB PHARMACY PROF BLDG.....		2,749				2,749
GRANBY HOUSE.....	2,952					2,952
GREATER FLORIDA ANESTHESIOLOGISTS.....	5,737					5,737
GREATER FLORIDA ANESTHESIOLOGISTS LLC.....	3,299					3,299
GREENVILLE CO EMERG AMB SERVICES.....	3,012					3,012
GREENVILLE HOSPITAL SYSTEM.....					11,550	11,550
GREENVILLE MEMORIAL HOSPITAL.....	138,034	53,718	45,791			237,542

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STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

Aging Analysis of Unpaid Claims

1 Account	2	3	4	5	6	7
	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
GREENVILLE MEMORIAL MEDICAL	34,136	18,528				52,664
GREENVILLE RADIOLOGY PA	324,407	98,146				422,554
GREER MEMORIAL HOSPITAL	32,005					32,005
GREG FAHRENBACH	2,407					2,407
GREGORY HOWES	2,220					2,220
GREGORY NAZAR	2,425					2,425
GREGORY ZENNI		2,728				2,728
GREYSTONE HEALTH CARE CENTER	3,106					3,106
GROSSNICKLE EYE SURGERY CENTER	2,939					2,939
GROVE HILL MEMORIAL HOSPITAL	10,857	4,798				15,655
GROVE NORTH LIVING & REHAB CTR					3,516	3,516
GROVE OF LA GRANGE LIVING	2,047					2,047
GSS - MESA GOOD SHEPHERD	5,572					5,572
GSS-OLATHE		2,923				2,923
GUARDIAN ANESTHESIA ASSOCIATES	5,775					5,775
GULF BREEZE HOSPITAL					15,741	15,741
GULF TO BAY ANESTHESIOLOGY ASSOCIATES	4,040	2,908				6,948
GURURAU SUDARSHAN	2,560					2,560
HALIFAX MEDICAL CENTER		5,017				5,017
HAMBURG DIALYSIS					11,066	11,066
HAMPTON ROADS SPECIALTY HOSPITAL	70,187					70,187
HANCOCK REGIONAL HOSPITAL		3,331				3,331
HANDMAKER JEWISH SERVICES	3,230					3,230
HANGER PROSTHETICS & ORTHOTICS	2,608					2,608
HANOVER HEALTH AND REHAB	9,470	5,168				14,638
HARBOR PLASTIC SURGERY CENTER	5,823					5,823
HARBORVIEW MED CTR	11,369					11,369
HARBOUR POINTE MEDICAL	7,188					7,188
HARLAN ARH	5,842	4,061				9,903
HARLINGEN DIALYSIS	7,249	5,272				12,521
HARLINGEN MEDICAL CENTER				18,167		18,167
HARMONY NURSING & REHAB CENTER	4,472					4,472
HARMONY SURGERY CENTER LLC	3,520					3,520
HARRISON MEMORIAL HOSPITAL	12,943					12,943
HART ROAD PAIN AND SPINE INSTITUTE	4,497					4,497
HAVASU REGIONAL MEDICAL CENTER	189,648	64,648				254,296
HAVEN SENIOR HORIZON	14,084		2,826			16,910
HAYWOOD REGIONAL MEDICAL CTR	7,109					7,109
HAZARD ARH REGIONAL MEDICAL CENTER					4,570	4,570
HAZEL CREST RENAL CENTER	16,543					16,543
HEALTH & HOSPITAL CORPORATION	4,380					4,380
HEALTH CARE CENTER AT RICHMOND	6,849					6,849
HEALTH CHOICE AZ	4,885					4,885
HEALTH DIAGNOSTIC LABORATORY	18,761		3,201			21,962
HEALTH DIAGNOSTIC LABORATORY INC	22,372	53,890	31,094	3,115		110,471
HEALTH PARTNERS HOME CARE INC	3,574					3,574
HEALTHONE AIRLIFE	4,597	4,447				9,044
HEALTHSOUTH LAKESHORE REHABILITATION	4,519					4,519
HEALTHSOUTH OF EAST TN INC		4,333				4,333
HEALTHSOUTH REHAB HOSPITAL	2,659					2,659
HEALTHSOUTH REHAB INSTITUTE	4,514					4,514
HEALTHSOUTH REHABILITATION HOSPITAL	12,222	4,508			7,589	24,318
HEALTHSOUTH SCOTTSDALE REHAB	9,952					9,952
HEARTLAND OF MADEIRA	3,001					3,001
HEAVEN SENT BY HOMETOWN HEALTH	3,211					3,211
HENKINS NEUROSURGERY PA			2,398			2,398

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STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

Aging Analysis of Unpaid Claims

1 Account	2	3	4	5	6	7
	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
HENNEPIN HEALTHCARE SYSTEM INC.....	2,737					2,737
HENRICO DOCTORS HOSPITAL.....	51,212				66,694	117,906
HENRICO HEALTH & REHAB.....	5,214					5,214
HERITAGE CLUB AT GREENWOOD.....	2,405					2,405
HGA HOMECARE LLC.....	4,763					4,763
HIDDEN LAKE CARE CENTER.....	3,539					3,539
HIGHLAND HEALTHCARE AND REHAB.....	11,612					11,612
HIGHLANDS BEHAVIORAL HEALTH SYSTEM.....			5,890			5,890
HIGHLANDS MEDICAL CENTER.....	4,501					4,501
HIGHLINE HOME HEALTH.....	2,496					2,496
HIGHLINE MEDICAL CENTER.....	35,956					35,956
HILEL SWERDLIN.....	2,017					2,017
HILLCREST HEALTH & REHAB.....	9,493					9,493
HILLCREST MEDICAL CENTER.....	22,426	4,125				26,551
HILLCREST MEMORIAL HOSPITAL.....	7,798					7,798
HILLHAVEN.....					11,857	11,857
HINES VAMC.....	5,910					5,910
HOLMES REGIONAL MEDICAL CENTER INC.....			31,346			31,346
HOLSTON ANESTHESIA ASSOCIATES.....	5,629					5,629
HOLSTON VALLEY MED CTR.....	73,985	55,664				129,648
HOLY CROSS HOSPITAL.....	39,447	6,491				45,938
HOLY FAMILY MEDICAL CENTER.....	48,750					48,750
HOME IV SPECIALISTS.....	2,157					2,157
HOMESTEAD REHABILITATION CENTER.....	2,599					2,599
HOOPER CARE CENTER.....	3,246					3,246
HOSANNA HEALTH & REHAB OF PIEDMONT.....	11,580	2,018				13,598
HOSPITAL SPEC SURGERY.....	12,031					12,031
HOSPITALIS TS OF AR.....	3,221					3,221
HOT SPRING COUNTY MEDICAL.....	8,607					8,607
HOT SPRINGS DIALYSIS.....	6,142					6,142
HOWARD MEMORIAL HOSPITAL.....	3,146					3,146
HUNTINGTON MEMORIAL HOSPITAL.....	4,205					4,205
HUNTSVILLE HOSP BEHAVIOR CTR.....					3,382	3,382
HUNTSVILLE HOSPITAL.....	332,871	24,984	3,686			361,540
HURON VALLEY SINAI HOSPITAL.....	10,174					10,174
IDAHO ELKS REHABILITATION HOSPITAL.....	2,498					2,498
IJAZ MAHMOOD MD.....	6,546					6,546
ILLINOIS DEPT OF PUBLIC AID.....	2,021					2,021
INDIAN CREEK HEALTH CARE CTR.....	3,035					3,035
INDIAN MEADOWS HEALTHCARE CENTER.....	10,232					10,232
INDIAN PATH MEDICAL CENTER.....	21,148	81,295				102,443
INDIAN PATH MEDICAL CENTER SKI.....	15,072					15,072
INDIANA EMERGENCY SOLUTIONS.....	2,166					2,166
INDIANA UNIVERSITY HEALTH.....	23,827					23,827
INDIANAPOLIS ENDOSCOPY CENTER.....	2,109					2,109
INFIRMARY WEST - LTAC.....	6,521					6,521
INFUSION PARTNERS OF LEXINGTON.....	2,199					2,199
INGALLS MEMORIAL HOSPITAL.....	15,371	8,440				23,812
INOVA LOUDOUN HOSPITAL.....	3,145					3,145
INTEGRIS BAPTIST MED CTR OF OK.....	22,890					22,890
INTEGRIS BAPTIST REGIONAL HEALTH.....	2,335					2,335
INTEGRITY HOME CARE.....	3,682					3,682
INTERIM HEALTHCARE.....	3,184					3,184
INTERIM HEALTHCARE OF GREENVILLE.....	13,088	7,953				21,041
INTERIM HEALTHCARE OF KC INC.....	4,376	2,920				7,296
INTERMOUNTAIN HOSPITAL.....		13,306	5,238			18,544

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

Aging Analysis of Unpaid Claims

1 Account	2	3	4	5	6	7
	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
ISAM A ABDEL KARIM MD.....	3,646	2,930				6,577
JACKSON MEDICAL CENTER.....		2,207				2,207
JACKSON PARK DIALYSIS CENTER.....	9,682					9,682
JACKSON PARK HOSPITAL.....	35,147					35,147
JACKSON.....		2,097				2,097
JAGDEEP SODHI.....	3,383					3,383
JAIDEEP CHUNDURI.....	3,323					3,323
JAMES BAILEY IV.....	3,152					3,152
JAMES C HIGGINBOTHAM PA.....	2,236					2,236
JAMES HANNIGAN.....	2,041					2,041
JAMES MAGUIRE JR.....		2,208				2,208
JAMES RIVER CARE AND REHAB CENTER.....	7,759					7,759
JAMES Y CHOI MD.....	4,837					4,837
JAMESTOWN NURSING AND REHAB LLC.....	6,166					6,166
JANAKIRAMAN SUBRAMANIAN.....					4,876	4,876
JARED CARTER PA.....	2,071					2,071
JARROD LITTLE.....					2,010	2,010
JARVIS EARL.....	2,258					2,258
JASON A MONTONE DO.....	4,856	2,155				7,011
JASON A SALGANICK MD.....	4,442					4,442
JASON MAZZA.....		2,692				2,692
JAWEED SAYEED MD.....	2,230					2,230
JEFFERSON REGIONAL MEDICAL CENTER.....	32,791	23,646				56,437
JEFFERSON REGIONAL MEDICAL CTR.....	6,782					6,782
JEFFERY STAMBOUGH.....	4,421					4,421
JEFFREY A KREMPEC MD.....	2,221					2,221
JEFFREY ALFORD.....					3,056	3,056
JEFFREY J LAURENT MD.....	2,212					2,212
JEFFREY K CHAPMAN MD.....	3,170					3,170
JEROME H GOLDSCHMIDT MD.....	2,843					2,843
JERRY PENIX.....			6,459			6,459
JEWISH HOSPITAL SHELBYVILLE.....	4,753					4,753
JEWISH HOSPITAL INC.....	251,926	229,587			4,545	486,058
JEWISH HOSPITAL LLC.....					11,981	11,981
JEWISH HOSPITAL OUTPATIENT CARE CENTER.....	2,263					2,263
JEWISH HOSPITAL SHELBYVILLE.....	2,594					2,594
JEWISH HOSPITAL/ST MARYS HEALTH.....	31,101	5,850				36,951
JH STROGER HOSPITAL OF COOK.....	9,230					9,230
JOE A CATES MD.....	2,450					2,450
JOHN C LINCOLN HOSPITAL DEER.....	128,485	18,397				146,882
JOHN C LINCOLN HOSPITAL NORTH.....	163,080	165,413				328,493
JOHN C WALKER MD.....	2,267					2,267
JOHN CHEN.....	2,463					2,463
JOHN EHTESHAMI.....	4,575					4,575
JOHN H YORK.....	6,431					6,431
JOHN HARPING.....		2,011				2,011
JOHN I WILLIAMS MD.....	4,167					4,167
JOHN JOSEPH.....	2,372					2,372
JOHN KNOX VILLAGE.....	3,463	2,079				5,542
JOHN KNOX VILLAGE HOME HEALTH.....	4,334			2,470		6,804
JOHN L BIBB MD.....	3,103					3,103
JOHN MATTERN.....	6,612					6,612
JOHN RANDOLPH MEDICAL CENTER.....	56,160	15,129				71,289
JOHNATHAN E FULLER MD.....	5,870					5,870
JOHNSON CITY MED CTR HOSP INC.....		18,164				18,164

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

Aging Analysis of Unpaid Claims

1 Account	Aging Analysis of Unpaid Claims					
	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
JOHNSON MEMORIAL HOSPITAL.....	2,326					2,326
JOHNSTON MEMORIAL HOSPITAL.....	27,230	8,701				35,930
JON NIEWOLNY.....		11,067				11,067
JONATHAN BASKIN.....	4,785					4,785
JONATHAN HEISTEIN.....		2,317				2,317
JONATHAN J CARMOUCHE MD.....	3,213					3,213
JONATHAN M BRIDGES MD.....	2,939					2,939
JONATHAN P CRITES MD.....	2,524					2,524
JORDAN GRABEL.....			2,710			2,710
JORDAN VALLEY MEDICAL CENTER.....	7,850					7,850
JOSEPH A GREENLEE III MD.....	2,226					2,226
JOSEPH BAUM.....	19,236					19,236
JOSEPH T BECK MD.....	3,044					3,044
JOSHUA C SWEANEY.....		2,008				2,008
JOSHUA H ABRAMS.....		3,771				3,771
JUSTIN H PIASECKI MD.....	4,540					4,540
K FON HUANG MD.....	2,033					2,033
KAMEL PATEL MD.....	4,653					4,653
KANSAS CITY ORTHOPAEDIC INSTITUTE.....	5,989					5,989
KANSAS HEART HOSPITAL.....	8,412					8,412
KANSAS MEDICAL CENTER LLC.....	15,258					15,258
KAREN HENRICHS.....	4,047					4,047
KATTULLE EATON.....	5,467					5,467
KAYE E DAVIS MD.....	2,780					2,780
KCI USA INC.....	4,911					4,911
KEARY WILLIAMS JR.....	2,320					2,320
KEITH A NORVILL.....	4,033					4,033
KEITH MYRICK.....	2,805					2,805
KELLE LOVAS.....		3,279				3,279
KEMP SURGERY CENTER.....	15,053	2,379				17,432
KEN SMITH.....	2,728					2,728
KENNETH COX.....	2,286					2,286
KENNETH D WILLIS MD.....	7,218					7,218
KENNETH FINKELSTEIN.....	5,480					5,480
KENNETH JACOBSON.....	4,047					4,047
KENNEY ORTHOPEDICS.....	2,143					2,143
KENT DIFIORE.....			7,086			7,086
KENT NEW.....	2,734					2,734
KENT SAUTER.....	3,950					3,950
KENTUCKIANA MEDICAL CENTER.....	7,678					7,678
KENTUCKY KDMS.....					4,516	4,516
KENTUCKY RIVER MEDICAL CENTER.....		4,797				4,797
KETAN SHAH.....			2,325			2,325
KETTERING MEDICAL CENTER.....	16,902					16,902
KEVIN M JACKSON MD.....	2,844					2,844
KEVIN VARNER.....	2,703					2,703
KH SEATTLE NORTHGATE.....	2,666					2,666
KIDNEY DISEASE CENTER.....	8,506	2,916				11,422
KIDNEY SERVICES OF WEST CENTRAL OH.....	17,187					17,187
KIERNAN EXTENDED CARE.....					20,592	20,592
KIMBER L EUBANKS MD.....	2,806					2,806
KINDRED HOSPITAL LAS VEGAS.....	27,567					27,567
KINDRED HOSPITAL LAS VEGAS.....		8,715				8,715
KINDRED TRANSITIONAL CARE.....	3,910					3,910
KINDRED TRANSITIONAL CARE.....	36,345					36,345
KINGMAN REGIONAL MEDICAL CENTER.....	102,099	10,339				112,438

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

Aging Analysis of Unpaid Claims

1 Account	2	3	4	5	6	7
	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
KIRAN TURAGA.....	3,159					3,159
KOOTENAI MEDICAL CENTER.....	77,913					77,913
KOSAIR CHILDRENS HOSPITAL.....	39,780	7,048			55,047	101,875
KOSCIUSKO COMMUNITY HOSPITAL.....	107,582					107,582
KURT HIRSHORN.....	2,129					2,129
L E COX MEDICAL CENTERS.....	141,322	18,844				160,165
LA ESTANCIA NURSING.....	3,784					3,784
LA SOLANA CARE AND REHAB INC.....	4,281					4,281
LABCORP OF AMERICA HOLDINGS.....	9,358					9,358
LAFAYETTE REGIONAL HEALTH CTR.....	7,628	4,899				12,526
LAGRANGE HOME DIALYSIS CNTR.....	9,226					9,226
LAKE AVENUE DIALYSIS.....	12,256					12,256
LAKE HEARN DIALYSIS.....					3,688	3,688
LAKE VILLA DIALYSIS.....	2,424					2,424
LAKEVIEW VILLAGE INC.....	29,200					29,200
LAKWOOD HEALTHCARE CENTER.....	4,650					4,650
LARGO MEDICAL CENTER.....		3,676				3,676
LARRY KESTIN.....	3,504					3,504
LAS FUENTES CARE CENTER.....	4,196					4,196
LAS PALMAS MEDICAL CENTER.....		6,513				6,513
LAS PALOMAS CARE AND REHABILITATION.....	2,153					2,153
LAS VEGAS RENAL CENTER.....		24,986				24,986
LASER SPINE INSTITUTE LLC.....				7,163		7,163
LASER SPINE SURGICAL CENTER.....				7,559		7,559
LAURA K TIRPAK PA.....	3,013					3,013
LAUREL BAYE HC OF GREENVILLE.....	3,489					3,489
LAUREL WARWICKE.....	9,382					9,382
LAURIE L CHEN MD.....	5,725					5,725
LAWRENCE BRENNAN.....	4,345					4,345
LAWRENCE MEMORIAL HOSPITAL.....		2,075				2,075
LAWRENCE MENDELSON MD.....		4,241				4,241
LCC OF ELKHORN.....	6,011					6,011
LCC OF KANSAS CITY.....	2,219					2,219
LEE MANOR NURSING HOME.....	2,753					2,753
LEES SUMMIT MEDICAL CENTER.....	92,268					92,268
LEESBURG REGIONAL MEDICAL CENTER.....	3,483					3,483
LEGACY EMANUEL HOSPITAL.....				5,481		5,481
LEGACY HEALTHCARE INC.....	2,713					2,713
LEGACY SALMON CREEK HOSPITAL.....	8,389					8,389
LEHIGH REGIONAL MEDICAL CTR.....	11,915					11,915
LENEXA DIALYSIS.....	19,468	4,528	3,872			27,868
LEON RAVVIN.....	2,640					2,640
LEWIS GALE MEDICAL CENTER.....	28,170	15,895				44,065
LEWIS MEMORIAL CHRISTIAN.....	4,262					4,262
LEXINGTON CLINIC AMBULATORY SURGERY.....	6,754					6,754
L UNABLE TO UPDATE PROVIDER INFO.....					3,634	3,634
LEXINGTON COUNTRY PLACE.....	3,836					3,836
LEXINGTON HC CNT CHICAGO RIDGE.....		2,055				2,055
LEXINGTON HC CNTR BLOOMINGDALE.....	4,588					4,588
LEXINGTON MEDICAL CENTER.....	8,498					8,498
LEXINGTON SURGERY CTR LTD.....	2,478					2,478
LIBERTY DIALYSIS.....	2,855					2,855
LIBERTY DIALYSIS HAMMOND LLC.....	31,115					31,115
LIBERTY HOSPITAL.....	35,614					35,614
LIFE CARE CENTER LITTLETON.....	12,615					12,615
LIFE CARE CENTER.....	5,979					5,979

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STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
LIFE CARE CENTER OF BOISE	4,022					4,022
LIFE CARE CENTER OF GRAY	5,514					5,514
LIFE CARE CENTER OF PUYALLUP	18,208					18,208
LIFE CARE CENTER OF S MOUNTAIN	7,383					7,383
LIFE CARE CTR OF COLUMBIA SC	2,289					2,289
LIFECARE CENTER OF COLORADO SPRNGS					3,677	3,677
LIFECARE CENTERS OF LAS VEGAS		3,735				3,735
LIFECARE CNTR PARADISE VALLEY	3,545					3,545
LIFEPOINT HOSPITAL HOLDINGS	15,360					15,360
LIFEPOINT HOSPITALS HOLDINGS	2,822					2,822
LINCARE INC	2,020					2,020
LINDEN OAKS HOSPITAL		6,333				6,333
LINDNER CENTER OF HOPE	16,214					16,214
LING MA	3,488					3,488
LINKIA LLC	5,622					5,622
LITTLE CO OF MARY HOSPITAL	40,335	4,194			7,384	51,912
LITTLE COMPANY OF MARY HOSPITAL	4,451		2,434			6,885
LITTLETON ADVENTIST HOSPITAL	147,659					147,659
LLANFAIR RETIREMENT COMMUNITY		2,328				2,328
LONESOME PINE HOSPITAL	44,187	4,907				49,094
LONGMONT SURGERY CENTER	3,571					3,571
LONGMONT UNITED HOSPITAL	2,839	6,111				8,950
LONNIE E LOUTZENHISER MD	9,246					9,246
LOOP RENAL CENTER	37,826				10,171	47,997
LORENZO F MUNOZ MD	2,306					2,306
LOUISIANA MEDICAL CENTER				4,754		4,754
LOVELACE HOSP DOWNTOWN	3,032					3,032
LOVELACE HOSP WESTSIDE	2,015					2,015
LOVELACE HOSP WOMENS	5,973					5,973
LOVELACE HOSPITAL DOWNTOWN		5,295				5,295
LOYOLA UNIVERSITY MED CTR	29,373	29,291			3,642	62,306
LUCY CORR VILLAGE	2,770					2,770
LUTHERAN GENERAL HOSPITAL	14,638					14,638
LUTHERAN HOSPITAL	118,894	52,125				171,019
LUTHERAN LIFE VILLAGES	2,227	2,650				4,877
LYNWOOD NURSING HOME	12,167					12,167
MACNEAL HOSPITAL	320,589	33,006	7,174		124,446	485,216
MADAN KANDULA	2,901					2,901
MADELEINE VILLA INC	7,200					7,200
MAGNOLIA MANOR ROCK HILL	4,859					4,859
MAGNOLIA PLACE AT SPARTANBURG	12,174					12,174
MAGNOLIA PLACE GREENVILLE	2,432					2,432
MAGNOLIA SQUARE NURSING AND REHAB		3,350				3,350
MAHASKA COUNTY HOSPITAL	3,798					3,798
MANAGEMENT AND NETWORK SERVICE	58,219	4,221				62,440
MANISH BHANDARI	11,354					11,354
MANOR CARE OF GIG HARBOR	6,313					6,313
MANOR CARE OF HINSDALE IL LLC	5,252					5,252
MANOR CARE OF HOMEWOOD IL LLC	2,090					2,090
MANOR CARE OF OAK LAWN WEST LLC	12,897	3,626				16,522
MANOR CARE OF PALOS HEIGHTS	4,459					4,459
MANOR CARE OF TACOMA	3,549					3,549
MANOR CARE OF WILMETTE IL LLC					3,694	3,694
MANORCARE HEALTH SERVICES	5,146					5,146
MANORCARE HEALTH SERVICES LLC	6,704					6,704
MANORCARE HEALTH SERVICES TUCSON	5,900					5,900

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
MANORCARE OF LYNWOOD.....	2,260					2,260
MANORCARE OF NAPERVILLE IL LLC.....	13,720	3,332				17,053
MANORCARE OF SOUTH HOLLAND LLC.....	6,797					6,797
MAPLE CREST CARE CENTRE.....	4,881					4,881
MARC GALLOWAY.....					2,476	2,476
MARC LAZZARO.....	3,376					3,376
MARIANJOY REHABILITATION HOSPITAL.....	4,399					4,399
MARICOPA HEALTH SYSTEM.....	5,161	21,433				26,594
MARICOPA, SOUTHWEST.....	5,571					5,571
MARIN GENERAL HOSPITAL.....	29,368					29,368
MARION REGIONAL HOSPITAL.....	2,679					2,679
MARK B DEKUTOSKI MD.....	4,148					4,148
MARK B KERNER MD.....	2,740			2,855		5,594
MARK CHARIKER.....	3,425					3,425
MARK HAMMOND.....					2,075	2,075
MARK M TUNGESVIK MD.....	2,139					2,139
MARK WICHMAN.....		5,077				5,077
MARSHALL I PICKENS HOSPITAL.....	3,191	9,506				12,698
MARTHA JEFFERSON HOSPITAL.....	19,460					19,460
MARY ALBERS.....		6,661			6,685	13,346
MARY BLACK MEMORIAL HOSPITAL.....	40,930					40,930
MARY IMMACULATE HOSPITAL.....	57,833	17,120				74,953
MARYVALE HOSPITAL.....		12,209				12,209
MARYVIEW MEDICAL CENTER.....	157,735	2,062	3,786			163,584
MASONIC HEALTH CARE CENTER.....	2,682					2,682
MATHEW A NICHOLLS MD.....		2,646				2,646
MATHEW NICHOLLS.....					2,620	2,620
MATTHEW M THOMPSON MD.....	5,188					5,188
MAUI MEMORIAL MEDICAL CENTER.....	2,167					2,167
MAX STEUER.....	4,558					4,558
MAYFAIR MANOR.....	2,519					2,519
MAYO CLINIC ARIZONA.....	19,332					19,332
MAYTHA J SHOFNER LCSW.....	5,000					5,000
MAZEN K ABUAWAD MD.....	10,415					10,415
MAZEN KHATTAB MD.....	3,234					3,234
MCCULLOUGH HYDE MEMORIAL HOSPITAL.....	10,703					10,703
MCGUFFEY HEALTHCARE.....	3,866					3,866
MCHS ARLINGTON HEIGHTS.....	6,842					6,842
MCKEE MEDICAL CENTER.....	9,093					9,093
MD ANDERSON CANCER CENTER.....	7,672					7,672
MEADOWBROOK OF NAPERVILLE.....	4,320					4,320
MEADOWBROOK REHABILITATION HOSPITAL.....	20,284					20,284
MEADOWVIEW REGIONAL MEDICAL CENTER.....					14,906	14,906
MECKLENBURG HEALTH CARE CENTER.....	2,764					2,764
MED CARE DIABETIC & MED SUPPLIES INC.....		3,235				3,235
MED PROFESSIONALS FOR HH CARE.....	2,414					2,414
MEDICAL CENTER OF AURORA.....	102,223	11,306				113,529
MEDICAL CENTER OF MCKINNEY.....	3,797	3,131				6,928
MEDICAL CENTER OF THE ROCKIES.....	95,021	5,012				100,032
MEDICAL CENTER S ARKANSAS.....	30,235					30,235
MEDICAL HEIGHTS SURGERY CENTER.....	7,849					7,849
MEDICAL RESORT AT FIESTA PARK.....	2,934					2,934
MEDICAL TRANSPORT LLC.....	3,410					3,410
MEMORIAL COMMUNITY HOSPITAL.....		3,774				3,774
MEMORIAL HEALTH SYSTEM.....	298,483				35,048	333,532
MEMORIAL HOSPITAL AT GULFPORT.....	3,166					3,166

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STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
MEMORIAL HOSPITAL JACKSONVILLE.....	13,759					13,759
MEMORIAL HOSPITAL OF SOUTH BEND.....		3,228	5,709			8,937
MEMORIAL HOSPITAL WEST.....					4,266	4,266
MEMORIAL MEDICAL CENTER.....	5,084	6,278				11,362
MEMORIAL REGIONAL HOSPITAL.....	23,512					23,512
MENORAH MEDICAL CENTER.....	127,699	21,981				149,680
MERCY AIR SERVICE INC.....	7,136					7,136
MERCY GILBERT MEDICAL CENTER.....	68,596	4,401				72,997
MERCY HOME CARE.....	20,562	6,820				27,383
MERCY HOSPITAL & MEDICAL CTR.....	45,625	3,315	9,621			58,560
MERCY HOSPITAL ANDERSON.....	26,006					26,006
MERCY HOSPITAL AURORA.....	11,815	2,290				14,105
MERCY HOSPITAL BERRYVILLE.....	13,076					13,076
MERCY HOSPITAL CARTHAGE.....	6,241					6,241
MERCY HOSPITAL CASSVILLE.....	12,559					12,559
MERCY HOSPITAL CLERMONT.....	2,103					2,103
MERCY HOSPITAL FAIRFIELD.....	18,744					18,744
MERCY HOSPITAL FORT SMITH.....	178,837				6,415	185,252
MERCY HOSPITAL HOT SPRINGS.....	63,577	3,638				67,215
MERCY HOSPITAL JOPLIN.....	5,084	5,639				10,723
MERCY HOSPITAL LEBANON.....	16,278	8,140				24,419
MERCY HOSPITAL NORTHWEST ARKANSAS.....	165,382	2,012				167,394
MERCY HOSPITAL OF FOLSOM.....	7,052					7,052
MERCY HOSPITAL SPRINGFIELD.....	555,229	13,454			8,376	577,058
MERCY HOSPITAL ST LOUIS.....	13,894					13,894
MERCY HOSPITAL WALDRON.....	17,846					17,846
MERCY HOSPITAL WESTERN HILLS.....	3,201					3,201
MERCY MEDICAL CENTER DES MOINES.....		2,117				2,117
MERITER HOSPITAL INC.....	47,757					47,757
METHODIST HOSPITAL.....	12,897					12,897
METHODIST HOSPITALS.....	4,652					4,652
METHODIST MEDICAL CENTER.....	10,395					10,395
METRO SOUTH MEDICAL CENTER.....	33,656					33,656
METRO SPECIALTY SURGERY CENTER LLC.....		20,641				20,641
METROPOLITAN NEUROSURGERY GROUP LLC.....	13,580					13,580
MICHAEL A BOXER.....	9,689					9,689
MICHAEL A FINN MD.....	2,255					2,255
MICHAEL BRESTICKER.....	3,970					3,970
MICHAEL CASEY JR.....	3,389					3,389
MICHAEL E FEIGN.....	4,624					4,624
MICHAEL E LEE MD.....	3,350					3,350
MICHAEL EILERMAN.....	3,757					3,757
MICHAEL J JOHNSON MD.....	3,050					3,050
MICHAEL KASPER.....					4,691	4,691
MICHAEL MILLER.....		3,000				3,000
MICHAEL P CASKEY MD.....	3,717					3,717
MICHAEL RUTTER.....			5,230			5,230
MICHAEL S CHANG MD.....	4,778					4,778
MICHAEL S STEINBERG MD.....	3,234					3,234
MICHAEL T CASNELLIE MD.....	2,154					2,154
MICHAEL TJARKSEN.....	3,042					3,042
MICHAEL TYNER.....	2,100					2,100
MICHELLE ANDREWS.....	2,338					2,338
MID AMERICA SURGERY INSTITUTE.....	5,949					5,949
MIDLAND MEMORIAL HOSPITAL.....	2,709					2,709

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

Aging Analysis of Unpaid Claims

1 Account	2	3	4	5	6	7
	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
MIDWEST SURGICAL HOSPITAL LLC.....	4,028					4,028
MILES BURKE.....	3,335					3,335
MILES GRAIVIER.....					4,254	4,254
MILLERS MERRY MANOR.....	7,559					7,559
MILLIKEN FAMILY CLINIC.....	2,959					2,959
MINERAL AREA REGIONAL MEDICAL.....	16,075					16,075
MINIMED DISTRIBUTION CORP.....	5,113					5,113
MISSION PALMS OF MESA HEALTH.....	5,309					5,309
MISSOURI BAPTIST MEDICAL CENTER.....	3,231					3,231
MLADEN DJURASOVIC.....	3,865					3,865
MOBILE INFIRMARY MEDICAL CENTER.....	6,237					6,237
MOBILE INFIRMARY MEDICAL CNTR.....	92,730	6,419				99,149
MOBILE MED CARE.....	8,233					8,233
MOBILE SURGERY CENTER.....	3,879					3,879
MOHAB FOAD.....	2,593					2,593
MOHAMED S DAHODWALA MD.....	2,326					2,326
MOHAMMED F HASSAN MD.....	2,252					2,252
MONIQUE CHANG MD.....	2,099					2,099
MORRISTOWN HAMBLEN HOSPITAL.....					15,729	15,729
MORTON PLANT HOSPITAL.....	8,554				3,950	12,505
MOUNT CARMEL NEW ALBANY.....					5,467	5,467
MOUNT SINAI HOSPITAL.....	62,717	4,470				67,188
MOUNTAIN STATES HEALTH ALLIANCE.....	53,896					53,896
MOUNTAIN VIEW CARE CENTER.....	5,728					5,728
MOUNTAIN VIEW HOSPITAL.....	83,248	399,114				482,362
MOUNTAIN VISTA MEDICAL CENTER.....	106,033	12,698		3,258		121,989
MOUNTAIN VISTA ORTHOPAEDIC SURGERY.....	2,318					2,318
MT GRAHAM REGIONAL MEDICAL CENTER.....	4,308					4,308
MUHAMMAD S GHANI MD.....	4,905					4,905
MULTICARE AUBURN MEDICAL CENTER.....	29,501	3,684				33,185
MULTICARE GOOD SAMARITAN HOME.....	4,798	5,015				9,813
MUNSTER MEDICAL RESEARCH FOUNDATION.....	19,325					19,325
NADER KREIT.....					2,890	2,890
NANSEMOND POINTE REHAB.....	12,136					12,136
NAPERVILLE DIALYSIS CENTER.....	27,229					27,229
NARCONON FREEDOM CENTER.....		3,000				3,000
NARENDER R GORUKANTI MD.....	17,663					17,663
NATCHEZ COMMUNITY HOSPITAL.....		2,124				2,124
NATIONAL JEWISH HEALTH.....	3,653					3,653
NATIONAL PARK MEDICAL CENTER.....	93,706	5,451				99,157
NATIONAL SEATING & MOBILITY.....				8,204		8,204
NATIONWIDE CHILDRENS HOSPITAL.....			3,352			3,352
NAZARETH LIVING CENTER.....	3,822					3,822
NE PORTLAND RENAL CENTER.....	2,553					2,553
NEBRASKA HEART HOSPITAL.....	4,996					4,996
NEBRASKA METHODIST HOSPITAL.....	116,432	4,951				121,383
NEBRASKA SKILLED NURSING & REHAB.....	5,421					5,421
NEBRASKA SPINE HOSPITAL LLC.....	10,786					10,786
NEENA S SZUCH MD.....	2,121					2,121
NEOMEDICA.....	7,163					7,163
NEOMEDICA HAZEL CREST.....	17,517					17,517
NEOMEDICA EVERGREEN PARK.....	37,046					37,046
NEOMEDICA HOFFMAN ESTATES.....	11,203					11,203
NEOMEDICA SOUTH CHICAGO.....	10,812					10,812
NEW HAVEN CARE AND REHAB CENTER.....	3,690					3,690
NEW SUMMERFIELD HEALTH & REHAB.....	2,914					2,914

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
NEWPORT NEWS NURSING & REHAB.....	2,012					2,012
NEWTON MEDICAL CENTER.....	22,056	8,419				30,475
NHC HEALTHCARE ANDERSON.....	10,443					10,443
NHC HEALTHCARE BRISTOL.....	21,140			4,664		25,804
NHC HEALTHCARE GREENVILLE.....	11,584					11,584
NHC HEALTHCARE MAULDIN.....	10,547					10,547
NICOLE HINIKER.....		4,463				4,463
NNA OF PADUCAH LLC.....					7,011	7,011
NO KANSAS HOSPITAL HOME HEALTH.....	3,372					3,372
NORFOLK HEALTH & REHABILITATION.....	5,156					5,156
NORMAN REGIONAL HOSPITAL.....	7,299					7,299
NORTH ARKANSAS REG MED CNTR.....	2,046					2,046
NORTH ARKANSAS REGIONAL MEDICAL.....	76,616	3,201				79,816
NORTH AVENUE DIALYSIS CENTER.....	13,900					13,900
NORTH BALDWIN INFIRMARY.....	13,619					13,619
NORTH CAMPUS SURGERY CENTER LLC.....	2,064					2,064
NORTH CENTRAL BAPTIST HOSPITAL.....					12,385	12,385
NORTH COLORADO MEDICAL CENTER.....	156,104					156,104
NORTH DENVER ANESTHESIA PC.....	2,162					2,162
NORTH FLORIDA SURGICAL PAVILION.....					3,539	3,539
NORTH HILLS DIALYSIS CENTER.....	4,780					4,780
NORTH HILLS SURGERY CENTER.....	5,059					5,059
NORTH KANSAS CITY HOSPITAL.....	344,468	32,218			4,605	381,291
NORTH METRO MEDICAL CENTER.....	16,660					16,660
NORTH SUBURBAN MEDICAL CENTER.....	33,836					33,836
NORTH WEST HEALTHCARE CENTER.....	6,922					6,922
NORTHEASTERN CENTER INC.....	5,893					5,893
NORTHERN COLORADO ANESTHESIA PLLC.....	4,409					4,409
NORTHERN COLORADO LONG TERM.....	30,712					30,712
NORTHERN COLORADO REHABILITATION.....	5,032					5,032
NORTHERN ILLINOIS RETINA LTD.....	3,894					3,894
NORTHRIDGE VILLAGE NURSING.....	4,005					4,005
NORTHSHORE UNIVERSITY HEALTHSYSTEMS.....	34,367	11,537				45,904
NORTHSIDE FORSYTH.....	2,848					2,848
NORTHSIDE HOSPITAL.....	2,251	2,344				4,595
NORTHWEST COMMUNITY HOSPITAL.....	47,524	7,483				55,007
NORTHWEST EYE SPECIALISTS PLLC.....	2,519					2,519
NORTHWEST HOSPITAL AND MEDICAL.....	58,720	6,315				65,034
NORTHWEST KIDNEY DISEASE CENTER.....	7,940					7,940
NORTHWEST MEDICAL CENTER.....	62,731	16,500				79,231
NORTHWEST MEDICAL SPECIALTIES.....	2,396					2,396
NORTHWEST SPECIALTY HOSPITAL.....	8,706					8,706
NORTHWESTERN LAKE FOREST HOSPITAL.....	10,063					10,063
NORTHWESTERN MEMORIAL HOSPITAL.....	32,057	8,711				40,769
NORTON AUDUBON HOSPITAL.....	235,600	25,177	29,062		11,262	301,102
NORTON BROWNSBORO HOSPITAL.....	97,500		4,280		75,952	177,732
NORTON COMMUNITY HOSPITAL.....	2,908					2,908
NORTON HEALTHCARE PAVILION.....					3,048	3,048
NORTON HOSPITAL INC.....	203,065					203,065
NORTON HOSPITALS INC.....	39,923	28,222	100,422			168,566
NORTON SUBURBAN HOSPITAL.....	140,814				3,305	144,119
NORWEGIAN AMERICAN HOSPITAL.....	3,825					3,825
NORWOOD DIALYSIS.....	2,162					2,162
NW AR HOSP BENTONVILLE.....	10,958					10,958
NW MED CTR WILLOW CREEK WOMENS.....	219,853	30,594	7,292			257,740
NY PRESBYTERIAN HOSPITAL.....	13,275					13,275

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
OACM AMBULATORY SURGICAL CENTER.....	3,880					3,880
OAK HEALTH CARE INVESTORS.....	3,668					3,668
OAKMONT EAST.....	9,176					9,176
OAKMONT WEST.....	10,979					10,979
OCONEE MEDICAL CENTER.....	22,794	5,335				28,130
OHIO STATE UNIV HOSPITALS.....	28,787					28,787
OKLAHOMA SPINE HOSPITAL.....	3,729					3,729
OKLAHOMA SURGICAL HOSPITAL LLC.....	7,051					7,051
OLATHE DIALYSIS.....	15,821					15,821
OLATHE MEDICAL CENTER.....		5,698				5,698
OLATHE MEDICAL CENTER INC.....	120,617	2,333				122,950
OMH LILA DOYLE NURSING.....	5,496					5,496
ORA PLLC.....	18,413					18,413
OREGON HEALTH & SCIENCE UNIVERSITY.....	4,901					4,901
ORO VALLEY HOSPITAL.....	52,304		8,559			60,863
ORTHOPAEDIC HOSPITAL AT PARKVILLE.....	12,970					12,970
ORTHOPEDIC & SPORTS SURGERY CENTER.....		4,506				4,506
OSCAR CASTELLANOS.....					2,617	2,617
OSF SAINT FRANCIS MEDICAL CENTER.....	38,581	2,819			3,857	45,257
OSSIAN HEALTH AND REHABILITATION.....	4,334					4,334
OUACHITA COUNTY MEDICAL CENTER.....	9,949					9,949
OUACHITA NURSING & REHAB CTR.....	13,961					13,961
OUR LADY OF BELLEFONTE HOSPITAL INC.....	4,618					4,618
OUR LADY OF PEACE.....	31,235	2,922				34,157
OUR LADY OF THE RESURRECTION.....	64,612					64,612
OVERLAKE HOSPITAL MEDICAL.....		3,138				3,138
OVERLAND PARK NURSING & REHAB.....	9,952					9,952
OVERLAND PARK REGIONAL MEDICAL.....	399,003	9,124				408,126
OWENSBORO MEDICAL HEALTH SYSTEM.....					4,385	4,385
OZARK DIALYSIS SERVICES COX MO.....	2,630					2,630
OZARKS COMMUNITY HOSPITAL.....		5,814				5,814
PA PETERSON CENTER FOR HEALTH.....	2,126					2,126
PACIFIC NEUROMONITORING ASSOCIATES.....	3,235					3,235
PAFFORD EMS MEDICAL SERVICES.....	3,267					3,267
PALM VIEW REHAB & CARE CENTER.....	8,542					8,542
PALMETTO HEALTH ALLIANCE.....	53,989	12,001				65,989
PALMETTO HEALTH BAPTIST.....	39,038				2,044	41,082
PALMS OF PASADENA HOSPITAL.....					2,536	2,536
PALO VERDE MENTAL HEALTH.....	4,805		2,193			6,999
PALOS COMMUNITY HOSPITAL.....	26,550	2,120				28,670
PANHANDLE ANESTHESIOLOGIST INC.....					7,561	7,561
PARADISE VALLEY HOSPITAL.....	30,567					30,567
PARHAM HEALTH CARE AND REHAB.....	3,231					3,231
PARK ROSE CARE CENTER.....	4,481					4,481
PARK WEST CARE CENTER.....	2,443					2,443
PARKER ADVENTIST HOSPITAL.....	42,332					42,332
PARKLAND HEALTH AND HOSPITAL SYSTEM.....					7,797	7,797
PARKLAND HEALTH CENTER.....	4,929					4,929
PARKMOOR VILLAGE HEALTHCARE.....	4,572					4,572
PARKRIDGE MEDICAL CENTER INC.....	9,939					9,939
PARKVIEW HEALTH CARE FACILITY.....	2,972					2,972
PARKVIEW HOSPITAL INC.....	207,880	37,611	8,885			254,376
PARKVIEW MEDICAL CENTER.....	11,865	4,308				16,173
PARKWAY MEDICAL CENTER.....	4,324					4,324
PARKWAY REHABILITATION.....	6,080					6,080
PARKWEST MEDICAL CENTER.....	36,452					36,452

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

Aging Analysis of Unpaid Claims

1 Account	Aging Analysis of Unpaid Claims					
	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
PARKWEST MEDICAL CENTER PENINSULA.....	2,054					2,054
PATEWOOD MEMORIAL HOSPITAL.....	50,808	5,581				56,389
PATIENT AIDS INC.....	4,185					4,185
PATRICK W HOGAN.....	2,910					2,910
PATRICK WARD.....		4,175				4,175
PATRIOTS COLONY AT WILLIAMSBURG.....	2,584					2,584
PAUL JOHNSON.....	2,341					2,341
PAUL M ARNOLD MD.....	3,572					3,572
PAUL MILLER.....		3,279				3,279
PAUL SAPHIER MD.....	6,210					6,210
PAUL STANTON.....		6,223				6,223
PAUL STANTON.....	8,947					8,947
PAUL WEISMAN.....	2,318					2,318
PAULA KASUBOSKI.....				2,006		2,006
PAULINE WARFIELD LEWIS CENTER.....	3,198					3,198
PEACEHEALTH SOUTHWEST MEDICAL.....	79,464					79,464
PEACHTREE ORTHOPAEDIC SURGERY CENTER.....	3,415				2,406	5,821
PENROSE HOSPITAL.....	24,978					24,978
PENROSE ST FRANCIS.....					25,747	25,747
PERSONAL TOUCH HOME CARE.....	3,150					3,150
PHGY LLC DBA GOLDEN YEARS.....		12,386				12,386
PHILIP THEODOSPOULOS.....	4,080					4,080
PHILIP YAZBAK.....		2,210				2,210
PHILLIP FALENDER.....		2,593				2,593
PHILLIP JAMES MD.....	17,184					17,184
PHILLIP M FALENDER PAC.....	2,684					2,684
PHILLIP TIBBS.....	2,992					2,992
PHOENIX BAPTIST HOSPITAL AND MEDICAL.....	114,241					114,241
PHOENIX BAPTIST HOSPITAL.....					5,469	5,469
PHOENIX CHILDRENS HOSPITAL.....	73,510	43,045				116,555
PHT JACKSON MEMORIAL HOSPITAL.....	19,433					19,433
PHYSICIANS ANESTHESIA SERVICES INC GROUP.....	3,632					3,632
PHYSICIANS BEHAVIORAL HOSPITAL.....		25,525				25,525
PHYSICIANS CHOICE LABORATORY.....	3,456					3,456
PHYSICIANS MEDICAL CENTER.....	6,132					6,132
PHYSICIANS SPECIALTY HOSPITAL.....					3,325	3,325
PHYSICIANS SURGERY CTR OF KNOXVILLE.....					4,490	4,490
PIEDMONT HOSPITAL.....				37,675		37,675
PIKEVILLE MEDICAL CENTER INC.....	2,065	4,588				6,653
PINES NURSING.....	2,299					2,299
PINNACLE RIDGE.....	4,017	4,766	4,468			13,251
PLAINFIELD RENAL CENTER.....	13,245					13,245
PLANO SPECIALTY HOSPITAL.....		8,394				8,394
PLANT CITY DIALYSIS.....	9,138					9,138
PLATTE VALLEY MEDICAL CENTER.....	29,621					29,621
PLAZA HEALTHCARE.....	8,922					8,922
PLAZA MANOR.....	8,366					8,366
POPLAR BLUFF REGIONAL MEDICAL.....	2,177					2,177
PORTER ADVENTIST HOSPITAL.....	16,375	4,361				20,736
PORTLAND ADVENTIST MEDICAL CENTER.....	14,729					14,729
POUDRE VALLEY HOSPITAL.....	54,953	5,450				60,403
PRASAD V GOURINENI MD.....	10,270					10,270
PREFERRED HOME HEALTH CARE.....	2,025					2,025
PRESBYTERIAN HOME HEALTH.....	5,580					5,580
PRESBYTERIAN HOME OF SOUTH CAROLINA.....		2,518				2,518
PRESBYTERIAN HOSPITAL.....	60,860				16,725	77,585

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
PRESBYTERIAN HOSPITAL ACUTE CARE		26,216				26,216
PRESBYTERIAN RR EMERG CTR					4,211	4,211
PRESBYTERIAN RUST MED CTR	6,663					6,663
PRESBYTERIAN ST LUKES MED CTR	7,111	14,785			5,377	27,273
PRESBYTERIAN ST LUKES MEDICAL	10,575	17,988				28,563
PRINCETON BAPTIST MED CENTER	13,617					13,617
PROFESSIONAL MEDICAL TRANSPORT	2,622					2,622
PROFESSIONAL SURGICAL SERVICES	4,774					4,774
PROMISE HOSPITAL OF PHOENIX		23,433				23,433
PROVENA COR MARIAE CENTER	4,087	2,540				6,627
PROVENA MCAULEY MANOR	25,781	10,707				36,488
PROVENA MERCY MED CENTER	200,199					200,199
PROVENA MERCY MEDICAL CENTER	21,770					21,770
PROVENA SACRED HEART HOME	3,031					3,031
PROVENA ST ANNE CENTER	6,396					6,396
PROVENA ST JOSEPH HOSPITAL					2,675	2,675
PROVENA ST JOSEPH MEDICAL CNT	74,306		9,115		4,921	88,342
PROVENA ST MARYS HOSPITAL	2,648	41,512	2,328			46,488
PROVENA VILLA FRANCISCAN	3,363					3,363
PROVIDENCE HOLY FAMILY HOSPITAL	2,368					2,368
PROVIDENCE HOSPICE AND HOMECARE	4,359	3,709				8,068
PROVIDENCE HOSPITAL	161,620	31,313		74,403		267,336
PROVIDENCE MEDICAL CENTER	244,684					244,684
PROVIDENCE MOUNT ST VINCENT	4,472					4,472
PROVIDENCE PLACE	11,480					11,480
PROVIDENCE REGIONAL MEDICAL	204,562	9,307				213,869
PROVIDENCE REGIONAL MEDICAL CENTER	3,628	13,972				17,600
PROVIDENCE RETIREMENT HOME	4,609					4,609
PROVIDENCE ST PETER HOSPITAL		10,936				10,936
PROVIDENCE ST VINCENT MEDICAL	7,972					7,972
PROVIDENCE WA ANESTHESIA SERVICES	5,221					5,221
PROVIDER NOT AVAILABLE					6,028	6,028
PSG SERVICES DBA INTERIM HEALTH	3,028					3,028
PUEBLO MEDICAL INVESTORS LLC	2,987					2,987
PUGET SOUND KIDNEY CENTER		6,490				6,490
PUNEET BHALLA MD	7,395					7,395
PURSHOTAM D SAWLANI MD	3,775					3,775
QHG OF ENTERPRISE INC	3,103					3,103
QUALIFIED EMERGENCY SPECIALISTS	2,346					2,346
QUAPAW CARE AND REHABILITATION	2,279					2,279
QUEST DIAGNOSTICS	10,817					10,817
QUEST DIAGNOSTICS	3,033					3,033
QUILLEN REHAB	13,589					13,589
RADIOLOGY LTD	3,692					3,692
RAI CENTRE WEST SPRINGFIELD	11,372					11,372
RAI SOUTH CHURCH SMITHFIELD	9,369					9,369
RAINIER VISTA CARE CENTER	17,825					17,825
RAMASWAMY GOVINDAN MD	2,880					2,880
RANCH					4,780	4,780
RANDALL DRYER	3,900					3,900
RANDALL JOHNSON	8,831					8,831
RANDOLPH LOPEZ		3,179				3,179
RANJIT K GOUDAR MD	2,816					2,816
RAPID CITY REGIONAL HOSPITAL	4,702					4,702
RAPPAHANNOCK GENERAL HOSPITAL		3,544				3,544

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
RAY COUNTY MEMORIAL HOSPITAL	2,635					2,635
RAYMOND W GRUNDMAYER III MD	3,844					3,844
RCG CLARKSDALE	2,442	6,105				8,547
RCG MARYVALE	16,491					16,491
RCG MERRIONETTE PARK	28,754					28,754
RCG VILLA PARK	7,045					7,045
RCCCI EAST PEORIA	2,986	10,036				13,022
RECOVERY PLACE INC				2,961		2,961
RECOVERY WORKS DRUG AND ALCOHOL	10,355					10,355
REGENCY AT RENTON	2,149					2,149
REGENCY HOSP NW ARKANSAS	19,964					19,964
REGIONAL MED CTR AT MEMPHIS		2,438				2,438
REGIONAL MEDICAL CENTER AT MEMPHIS	9,140					9,140
RENAISSANCE AT MIDWAY					5,298	5,298
RENAL CARE GROUP WICHITA	12,438	11,771				24,209
RENAL CTR MOUNTAIN HOME	15,221		5,743			20,964
RESCARE HOMECARE LOUISVILLE	11,925					11,925
RESEARCH MEDICAL CENTER	566,910	51,519			44,756	663,185
RESEARCH PSYCHIATRIC CENTER	6,204	3,601				9,805
RESURRECTION HOSPITAL	12,068				57,601	69,668
RESURRECTION MED CENTER REHAB	7,566					7,566
RESURRECTION MEDICAL CENTER	95,155	15,840		3,778	12,897	127,670
RESURRECTION NURSING & REHAB	9,603					9,603
RICH MOUNTAIN NURSING REHAB	4,630					4,630
RICHARD A CARDONE MD	5,594					5,594
RICHARD ASSING					2,086	2,086
RICHARD FREE	2,427					2,427
RICHARD K ROSENBERG	7,123					7,123
RICHARD WASSERMAN			2,531			2,531
RICHARD WILLIAMS		2,101				2,101
RICHMOND AMBULANCE AUTHORITY	2,260					2,260
RICHMOND COMMUNITY HOSPITAL	62,957	11,247				74,204
RICKY J PLACIDE MD	3,135					3,135
RIDGE BEHAVIORAL HEALTH SYSTEM	2,277					2,277
RIDGECREST	5,265					5,265
RIGHTSOURCE	29,655					29,655
RIVER MEDICAL INC	3,617					3,617
RIVER OAKS HOSPITAL	2,707		2,647	13,489		18,843
RIVER POINTE REHABILITATION	2,030					2,030
RIVER VALLEY DIALYSIS	8,502					8,502
RIVERSIDE BEHAVIORAL HLTH CTR		3,991	5,466			9,456
RIVERSIDE MEDICAL CENTER	4,192					4,192
RIVERSIDE METHODIST HOSPITAL			13,154			13,154
RIVERSIDE REGIONAL MEDICAL CENTER	70,715	2,114				72,829
RIVERSIDE REHABILITATION CENTER	4,111					4,111
RIVERVIEW HEALTH INSTITUTE					8,395	8,395
RIVERVIEW HOSPITAL HOME CARE	6,927					6,927
ROANOKE CARLILION CLINIC HOME CARE	5,355					5,355
ROBERT A COONEY MD	2,770					2,770
ROBERT BOHINSKI	6,063	3,886				9,949
ROBERT GRAHAM MD		2,027				2,027
ROBERT JOTTE	2,393					2,393
ROBERT KLICKOVICH		2,033				2,033
ROBERT M JOTTE MD PHD	4,898					4,898
ROBERT M LAPORTE MD	5,525					5,525
ROBERT M RIFKIN	2,669					2,669

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
ROBERT P BRUCE MD.....		4,634				4,634
ROCKFORD MEMORIAL HOSPITAL.....	52,150		12,955			65,105
ROCKY MOUNTAIN ENDOSCOPY CENTER.....	2,344					2,344
ROCKY MOUNTAIN GAMMA KNIFE CTR.....	3,893					3,893
ROCKY MOUNTAIN HOLDINGS.....	9,796					9,796
ROGER A RAY MD.....		4,976				4,976
ROGER C PEACE HOSPITAL REHABILITATION.....	18,893					18,893
ROGER D SUNG MD.....	10,963					10,963
ROGER LYON.....	2,861	3,003				5,864
ROGER SUNG.....		10,372				10,372
ROGERS MEMORIAL HOSPITAL.....	3,294					3,294
ROKEYA BEGUM AKHTAR MD.....					67,401	67,401
ROLANDO PUNO.....	4,994	2,067				7,062
RONALD HESS.....	2,154					2,154
RONALD J RUSZKOWSKI MD.....	2,196					2,196
ROSE DELIMA HOSPITAL.....					30,427	30,427
ROSE MEDICAL CENTER.....	21,064					21,064
ROSELAND COMMUNITY.....	3,485					3,485
ROSEWOOD CARE CENTER OF JOLIET.....				2,007		2,007
ROSEWOOD CARE CENTER OF ROCKFORD.....	2,967					2,967
ROSEWOOD HEALTH AND REHAB CENTER.....	11,574					11,574
ROSS KERNS.....				6,360		6,360
ROTECH OXY GEN MEDICAL EQUIPMENT.....	3,135					3,135
ROTECH OXYGEN AND MEDICAL EQUIPMENT.....	2,879					2,879
RSVP HOMECARE INC.....	2,372					2,372
RUFFOLO HOOPER AND ASSOCIATES.....	3,122					3,122
RURAL METRO CORPORATION.....	3,058					3,058
RUSH COPLEY MEDICAL CENTER.....	18,978					18,978
RUSH OAK PARK HOSPITAL.....	13,112					13,112
RUSH UNIVERSITY MEDICAL CTR.....	24,300	6,078				30,379
RUSSELL COUNTY MEDICAL CENTER.....	6,522	11,554				18,075
RUSSELL COUNTY MEDICAL CTR.....	4,688					4,688
RYAN M GASSER MD.....	4,623					4,623
S BALDWIN REGIONAL MEDICAL CTR.....	24,353	7,605				31,958
SAAD HEALTHCARE SERVICES INC.....	38,860	5,752				44,612
SACRED HEART HOME HEALTH CARE.....	2,377					2,377
SACRED HEART MEDICAL CENTER.....	54,838					54,838
SAINT ALPHONSUS REGIONAL MEDICAL.....	24,187	3,286				27,473
SAINT JOSEPH BEREAS.....	2,424					2,424
SAINT JOSEPH EAST.....	22,840	3,177				26,018
SAINT JOSEPH HEALTH SYSTEM.....	6,960		7,607		13,896	28,463
SAINT JOSEPH HOSPITAL.....	66,954	4,880				71,834
SAINT JOSEPH JESSAMINE.....	4,468					4,468
SAINT JOSEPH LONDON.....				7,062		7,062
SAINT JOSEPH REGIONAL MEDICAL.....	11,211					11,211
SAINT LUKES MEDICAL CENTER.....	20,372					20,372
SAINT MARYS HOSPITAL.....	209,340	40,319				249,658
SAINTS MARY & ELIZABETH MEDICAL.....	28,528		4,223		3,326	36,077
SAINTS MARY AND ELIZABETH HOSPITAL.....	16,464	11,933				28,397
SAKTI CHAKRABARTI.....	4,313					4,313
SALLY HEBERT.....					2,879	2,879
SALT LAKE REGIONAL MEDICAL CENTER.....		2,638				2,638
SAMUEL GUBBELS.....	2,606					2,606
SAN DIEGO HOSPITAL ASSOCIATES.....	2,967					2,967
SAN MARCOS TREATMENT CENTER.....		2,400				2,400
SANDI K LAM MD.....	7,157					7,157

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
SANDPIPER HEALTHCARE AND REHAB.....	5,673					5,673
SANDRA R VALAITIS MD.....	2,148					2,148
SANJEEV K PRADHAN MD.....	3,630					3,630
SARASOTA MEMORIAL HOSPITAL.....	9,024					9,024
SC DEPARTMENT OF HEALTH.....	2,244					2,244
SCOTT AND WHITE MEMORIAL HOSPITAL.....					3,460	3,460
SCOTT J CROSS MD.....	2,293					2,293
SCOTT R LUALLIN MD.....	5,629					5,629
SCOTT VAN VALIN.....		2,259				2,259
SCOTTSDALE HERITAGE COURT.....	4,099					4,099
SCRIPPS MEMORIAL HOSPITAL LA JOLLA.....	19,448					19,448
SCOTTSDALE HEALTH.....	50,761	2,881				53,642
SCOTTSDALE HEALTH.....	130,277	23,468				153,745
SCOTTSDALE HEALTH.....	93,424	11,585				105,010
SEASONS HOSPICE INC.....			2,865			2,865
SEATTLE CANCER CARE ALLIANCE.....	3,417					3,417
SELECT SPECIALTY HOSPITAL.....	48,992				6,447	55,439
SELECT SPECIALTY HOSPITAL DENVER.....		24,402				24,402
SELECT SPECIALTY HOSPITAL.....	2,948					2,948
SENSORY TESTING SYSTEMS LLC.....	2,001					2,001
SENTARA CAREPLEX HOSPITAL.....	94,535					94,535
SENTARA HOME CARE SERVICES.....	15,028					15,028
SENTARA LEIGH HOSPITAL.....	34,817					34,817
SENTARA NORFOLK GENERAL HOSPITAL.....	80,370	19,565				99,935
SENTARA NURSING CENTER.....	28,639					28,639
SENTARA OBICI HOSPITAL.....	19,655					19,655
SENTARA PRINCESS ANNE HOSPITAL.....	22,828					22,828
SENTARA VIRGINIA BEACH GENERAL.....	37,478			2,764		40,242
SENTARA WMSBURG REGIONAL.....	2,081					2,081
SENTRA NORFOLK GENERAL.....	13,562					13,562
SEPEHR B SANI MD.....			7,749			7,749
SEQUENOM CMM.....	3,314	2,762				6,076
SET SHAHBABIAN.....	3,078					3,078
SETON MEDICAL CENTER.....	6,931					6,931
SHAH SIDDIQI.....		9,609				9,609
SHANDS UF.....				2,773		2,773
SHARON M ONDREYCO MD.....	7,846					7,846
SHAWN B CLARK MD.....	4,902					4,902
SHAWNEE GARDENS HEALTHCARE.....	2,238					2,238
SHAWNEE MISSION MEDICAL CENTER.....	32,160					32,160
SHAWNEE MISSION MEDICAL CTR.....	8,967			16,310		25,277
SHEBOYGAN DIALYSIS.....					2,393	2,393
SHELBY BAPTIST MEDICAL CENTER.....	12,713					12,713
SHELTERING ARMS HOSPITAL.....	3,267					3,267
SHERMAN WEST COURT.....	9,131					9,131
SHILOH NURSING AND REHAB LLC.....	3,906					3,906
SHYAM M SHRIDHARANI MD.....		8,931				8,931
SIERRA VISTA REGIONAL HEALTH CARE.....	7,615					7,615
SIERRA VISTA REGIONAL HLTH CTR.....	33,837	2,385				36,222
SIGNATURE HEALTHCARE.....	6,431					6,431
SIGNATURE HEALTHCARE.....	4,298					4,298
SILAS E LUCAS MD.....	3,128					3,128
SILOAM SPRINGS REGIONAL HOSPITAL.....	25,146					25,146
SILVER CROSS HOSPITAL.....	21,568					21,568
SILVERTON HOME TRAINING DIALYSIS CENTER.....	5,506					5,506
SIMHA KUKUNOORU.....					2,062	2,062

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
SKAGIT VALLEY HOSPITAL.....	32,249					32,249
SKY RIDGE MEDICAL CENTER.....	46,205					46,205
SKY RIDGE SURGERY CENTER LP.....	6,943					6,943
SLOBODAN STANISIC.....				2,682	2,691	5,373
SMI IMAGING LLC.....	2,197					2,197
SMYTH COUNTY COMMUNITY HOSPITAL.....	12,820					12,820
SNEHAL DAMLE MD.....	10,788					10,788
SOHA MOUSA.....	2,902					2,902
SOLARI HOSPICE CARE LLC.....					4,027	4,027
SONORA BEHAVIORAL HEALTH.....	3,497					3,497
SONORA QUE ST LABORATORIES.....	8,577					8,577
SOUND SHORE MED CTR LAB.....	4,033					4,033
SOUTH BAY HOSPITAL.....		2,507				2,507
SOUTH CENTRAL KANSAS REG MED.....	3,866	3,371				7,237
SOUTH FLORIDA BAPTIST HOSPITAL.....	4,471					4,471
SOUTH HOLLAND RENAL CENTER.....	13,773					13,773
SOUTH SHORE HOSPITAL.....	23,519		4,781			28,300
SOUTH SIDE DIALYSIS CENTER.....	12,284					12,284
SOUTH SUBURBAN KIDNEY GROUP.....	28,507					28,507
SOUTH TEXAS SPINE AND SURGICAL.....			8,440			8,440
SOUTHEASTERN EMERGENCY PHYSICIANS INC.....		3,140				3,140
SOUTHERN HILLS HOSPITAL.....	96,747					96,747
SOUTHERN INDIANA REHABILITATION.....	3,249	2,152				5,401
SOUTHERN KENTUCKY REHABILITATION.....	2,400					2,400
SOUTHLAND HOME HEALTH.....	4,644					4,644
SOUTHSIDE REGIONAL MEDICAL CTR.....	5,572	43,097				48,669
SOUTHWEST KIDNEY DAVITA DIALYSIS.....		10,193				10,193
SOUTHWEST ORTHOPEDIC AND SPINE.....	7,035					7,035
SOWJANYA NAGABHIRAVA MD.....	4,324					4,324
SPALDING AT AURORA.....		17,195				17,195
SPARKS PREMIERCARE LLC.....	3,348					3,348
SPARKS REGIONAL MEDICAL CENTER.....	154,494	11,557	9,025			175,075
SPARTANBURG REGIONAL MED CTR.....	33,357	6,432				39,789
SPECIALTY HEALTHCARE & REHAB CENTER.....	4,791					4,791
SPECTRUM HOME HEALTH AGENCY.....	8,982					8,982
SPRING HILL MANOR.....	2,120					2,120
SPRING RIVER CHRISTIAN VILLAGE.....	3,265					3,265
SPRING VALLEY HOSPITAL MEDICAL.....		30,977			91,184	122,161
SPRINGHILL MEMORIAL HOSPITAL.....	36,032					36,032
SPRINGTREE HEALTH AND REHAB.....	2,079					2,079
SPRINGWOODS BEHAVIORAL HEALTH.....	5,090	6,501	2,342			13,933
SSC SENECA OPERATING COMPANY.....	5,825					5,825
SSM HEALTH CARE ST LOUIS.....					4,884	4,884
SSM SELECT REHAB ST LOUIS LLC.....	11,667	11,337				23,004
SSM ST CLARE HEALTH CENTER.....	8,664					8,664
SSM ST JOSEPH HEALTH CENTER.....	39,215	2,828	2,876			44,920
ST ALEXIUS MEDICAL CENTER.....	23,515	36,877				60,392
ST ALPHONSUS NAMP.....	16,232					16,232
ST ANTHONY HOSPITAL.....	30,913	4,295	5,214			40,421
ST ANTHONY MEDICAL CENTER.....	185,354	3,907				189,261
ST ANTHONY NORTH HOSPITAL.....	34,037					34,037
ST ANTHONYS HEALTH CENTER.....	25,236	2,025				27,261
ST ANTHONYS HOSPITAL.....	15,385			3,086		18,471
ST ANTHONYS MEDICAL CENTER.....	18,163		2,548			20,710
ST BARNABAS MEDICAL CENTER.....	2,499					2,499
ST BARNABAS NURSING HOME.....	4,117					4,117

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
ST BENEDICT NURSING & REHAB.....					2,496	2,496
ST BERNARDS REGIONAL MED CNTR.....	6,014	3,098				9,112
ST CATHERINE HOSPITAL.....	3,299					3,299
ST CLAIRE MEDICAL CENTER.....	15,608					15,608
ST CLARE HOSPITAL.....	66,703					66,703
ST DAVIDS HOSPITAL.....					72,354	72,354
ST DOMINIC JACKSON MEMORIAL HOSPITAL.....					6,136	6,136
ST ELIZABETH HEALTHCARE.....	141,100	8,487	14,135	3,804	5,266	172,792
ST ELIZABETH REGIONAL MED CTR.....	6,580					6,580
ST ELIZABETHS HOSPITAL.....	14,701					14,701
ST FRANCIS EASTSIDE.....	136,614					136,614
ST FRANCIS HOMECARE.....	2,544	3,555				6,099
ST FRANCIS HOSP MEDICAL CNTR.....	30,269					30,269
ST FRANCIS HOSP OF EVANSTON.....	67,406	2,297				69,702
ST FRANCIS HOSPITAL.....	48,316		7,477			55,793
ST FRANCIS MEDICAL CENTER.....	161,879	54,705				216,585
ST FRANCIS REHAB CENTER.....		8,986				8,986
ST JOHN HEALTHCARE AND REHABILITATION.....	2,559					2,559
ST JOHN HOSPITAL OF THE HOSPITAL.....		3,062				3,062
ST JOHNS HOSPITAL.....	41,451					41,451
ST JOSEPH HOSPITAL.....	49,018	5,967	2,663			57,649
ST JOSEPH HOSPITAL WEST.....	14,053					14,053
ST JOSEPH MEDICAL CENTER.....	36,325					36,325
ST JOSEPH REGIONAL HEALTH CTR.....	16,721					16,721
ST JOSEPHS HOSP AND MED CTR.....	31,075				10,446	41,521
ST JOSEPHS HOSPITAL.....	3,024					3,024
ST JOSEPHS HOSPITAL INC.....	2,150					2,150
ST JOSEPHS HOSPITAL OF ATLANTA INC.....					9,318	9,318
ST JOSEPHS MEDICAL CENTER.....	231,565	14,265				245,830
ST LOUIS UNIV HOSPITAL.....	46,702					46,702
ST LOUIS UNIVERSITY HOSPITAL.....	8,629	7,462				16,091
ST LUKES BEHAVIORAL HOSPITAL LLC.....	11,512		6,548			18,060
ST LUKES EAST HOSPITAL.....	20,550					20,550
ST LUKES HOSPITAL OF KANSAS.....	83,773				5,721	89,493
ST LUKES HOSPITAL OF KANSAS CITY.....	16,674				21,360	38,034
ST LUKES MEDICAL CENTER.....	63,039					63,039
ST LUKES NORTHLAND HOSPITAL.....	9,833					9,833
ST LUKES REGIONAL MEDICAL CENTER.....	57,273	40,328				97,601
ST MARY CORWIN MEDICAL CENTER.....	23,333					23,333
ST MARY S HEALTH CENTER.....	38,433	74,244				112,676
ST MARYS HOSPITAL SISTERS.....		11,224				11,224
ST MARYS MANOR.....	19,155					19,155
ST MARYS MEDICAL CENTER.....	169,058	21,523			6,173	196,754
ST MARYS OZAUKEE.....	2,065					2,065
ST MARYS REGIONAL MEDICAL CTR.....	10,775					10,775
ST MATTHEW LUTHERAN HOME.....					2,260	2,260
ST MATTHEWS SURGERY CENTER LLC.....	2,032					2,032
ST NICHOLAS HOSPITAL.....	10,448					10,448
ST PAULS HOUSE & HEALTH CARE.....					4,115	4,115
ST ROSE DOMINICAN HOSPITAL.....	13,888					13,888
ST ROSE DOMINICAN HOSPITAL.....	25,077					25,077
ST ROSE DOMINICAN HOSPITAL.....	22,545					22,545
ST ROSE DOMINICAN SIENA HOSPITAL.....					37,517	37,517
ST TAMMANY PARISH HOSPITAL.....	14,020					14,020
ST THOMAS MORE HOSPITAL.....	15,828					15,828

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
ST VINCENT HEALTH SYSTEM.....	71,199	7,204				78,403
ST VINCENT HOSPITAL.....	15,652	54,693				70,345
ST VINCENT HOSPITAL AND HEALTH.....					91,922	91,922
ST VINCENT MEDICAL CTR NORTH.....	11,595					11,595
ST VINCENT ST CLAIR.....	10,305					10,305
ST VINCENTS BIRMINGHAM.....	45,226					45,226
ST VINCENTS EAST.....	49,282		7,906			57,188
ST VINCENTS MED CTR SOUTHSIDE.....					14,571	14,571
STANFORD MEDICAL CENTER.....	4,133					4,133
STATE OF I DAHO DHW.....	3,839					3,839
STEPHAN B ROSENFELD MD.....	3,178					3,178
STEPHEN L CURTIN MD.....		2,350				2,350
STEPHEN NORD.....					2,734	2,734
STEVE EDWARDS.....					2,499	2,499
STEVEN B WILKINSON MD.....		2,980				2,980
STEVEN K GUDEMAN MD.....	7,061					7,061
STEVEN KIM MD.....	4,623					4,623
STEVEN P KIEFER MD.....	2,765					2,765
STEVEN SANDERS.....	3,152					3,152
STORMONT VAIL REG HEALTH CARE.....	14,196					14,196
STUART T JARRELL MD.....	3,264					3,264
STURGIS HOSPITAL.....		2,287				2,287
SUCAI BI MD.....	3,762					3,762
SUJATHA NALLAPAREDDY MD.....	2,128					2,128
SUMMER HOUSE.....	4,068					4,068
SUMMERLIN HOSPITAL MED CTR LLC.....					22,992	22,992
SUMMERLIN HOSPITAL MEDICAL CENTER.....	3,001	18,728			4,475	26,204
SUMMERLIN HOSPITAL MEDICAL CENTER.....		9,047		5,261		14,309
SUMMIT HEALTHCARE.....	7,717					7,717
SUMMIT HOME HEALTH CARE INC.....	2,114					2,114
SUMMIT MEDICAL CENTER.....	32,880					32,880
SUMON BHATTACHARJEE.....	2,578					2,578
SUN CITY HEALTH & REHAB CENTER.....	4,719					4,719
SUN RADIOLOGY PC.....		2,800				2,800
SUNGHOOON LEE MD.....		5,817	3,417			9,233
SUNIL NAYAK.....	4,326					4,326
SUNRISE HOSPITAL AND MEDICAL CENTER.....	326,974				10,150	337,124
SUPERIOR A IR GROUND AMB SERVICES.....	3,983					3,983
SURESH VELAGAPUDI MD.....	2,563					2,563
SURGERY CENTER OF THE ROCKIES.....	2,434					2,434
SURGICAL SPECIALTY HOSPITAL.....	9,479					9,479
SURGICARE OF WICHITA MD.....		3,069				3,069
SURGICENTER OF GREATER MILWAUKEE LLC.....		2,611				2,611
SURGICENTERS OF AMERICA LP.....	6,482					6,482
SUSAN B ALLEN DIALYSIS CENTER.....	10,253					10,253
SUSAN B ALLEN MEMORIAL HOSPITAL.....	7,718					7,718
SUTTER ROSEVILLE HOSPITAL.....	6,929					6,929
SUZANNE MCCLURE.....				2,279		2,279
SWEDISH CHERRY HILL.....	18,018					18,018
SWEDISH COVENANT HOSPITAL.....	93,935	28,653	310,251		38,447	471,285
SWEDISH EDMONDS.....	20,014	31,432				51,447
SWEDISH MEDICAL CENTER.....	251,733		37,047	2,625	32,046	323,451
SWEDISH MEDICAL CENTER FIRST.....	13,601					13,601
SWEDISH FIRST HILL.....	70,625	3,169				73,794
SWEETWATER HOSPITAL ASSOCIATES.....	2,378					2,378
SWVMHI.....		4,255				4,255

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
SYCAMORE SHOALS GERO PSYCH.....	8,599					8,599
SYLACAUGA HEALTH AND REHAB SERVICES.....	6,452					6,452
T H C LAS VEGAS.....					24,651	24,651
TABLEROCK HEALTHCARE.....					2,102	2,102
TACOMA GENERAL ALLENMORE.....	322,127					322,127
TAKE SHAPE PLASTIC SURGERY.....		2,551				2,551
TAMPA GENERAL HOSPITAL.....	57,667					57,667
TARA CHRISTENSEN TOURTILLOTT.....	3,898	5,077				8,975
TEAM VISION SURGERY CENTER.....	2,020					2,020
TELOS RESIDENTIAL TREATMENT LLC.....		2,730				2,730
TENNOVA HEALTHCARE.....	81,139	12,667	4,366		2,611	100,783
TERRACE AT SOLARBRON.....	2,344					2,344
TEXAS CHILDRENS HOSPITAL.....	37,067					37,067
TEXAS HEALTH ARLINGTON MEMORIAL HOSPITAL.....	5,244					5,244
TEXAS HEALTH HARRIS METHODIST.....	31,133					31,133
THC CHICAGO.....	22,466					22,466
THE BIRMINGHAM SURGERY CENTER.....	5,830					5,830
THE BISHOP SPENCER PLACE INC.....	4,224					4,224
THE CAROLINA CENTER.....	18,819	5,400	11,400			35,619
THE CHRIST HOSPITAL APOTHECARY.....					14,504	14,504
THE CLAREMONT OF HANOVER PRK.....	6,600					6,600
THE COMMUNITY HOSPITAL ASSOCIATES.....			28,369			28,369
THE COTTAGES AT BRUSHY CREEK.....	4,422					4,422
THE FORUM AT PUBLO NORTE.....			3,245			3,245
THE GREENS AT CREEKSIDE.....	4,968					4,968
THE HEART HOSPITAL AT DEACONES.....	39,828					39,828
THE HORSHAM CLINIC.....		3,248				3,248
THE LUTHERAN HOME.....	2,040					2,040
THE MAPLES AT HAR BER MEADOWS.....	3,039					3,039
THE MAPLES HEALTH AND REHAB.....	5,111					5,111
THE METHODIST HOSPITAL.....	5,117					5,117
THE NEBRASKA MEDICAL CENTER.....	99,213	12,426				111,639
THE NEW WOODLAND MANOR.....	2,497					2,497
THE NEWPORT.....	3,454					3,454
THE ORTHOPAEDIC HOSPITAL.....	13,442					13,442
THE PAVILION AT WILLIAMSBURG.....	2,652					2,652
THE QUARTERS AT DES PERES.....	3,686					3,686
THE RECTOR AND VISITORS.....	8,986	7,872				16,858
THE SWEET LIFE AT BROOKDALE PLLC.....	16,433					16,433
THE SWEET LIFE AT ROSEHILL.....	23,343					23,343
THE UNIVERSITY OF ARIZONA MEDICAL.....	13,442	7,552				20,994
THE VANCOUVER CLINIC AMBULATORY.....	2,058					2,058
THE WILLOUGH AT NAPLES.....	2,607					2,607
THH ACQUISITION LLC.....	2,808					2,808
THI OF KANSAS.....		18,941				18,941
THOMAS BOLAND.....					2,390	2,390
THOMAS DOERS.....	14,207					14,207
THOMAS ESSMAN.....	3,705					3,705
THOMAS FLORACK.....	2,101					2,101
THOMAS GABRIEL.....		2,015				2,015
THOMAS HOSPITAL.....	31,050	13,210				44,260
THOMAS PERLEWITZ.....	2,973					2,973
TIMBERLAKE CARE CENTER.....	2,395					2,395
TIMOTHY A BURD MD.....	3,198					3,198
TIMOTHY J AVERION MAHLOCH MD.....	3,209					3,209
TIMOTHY MURPHY.....				2,499		2,499

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
TJ SAMSON COMMUNITY HOSPITAL.....					2,753	2,753
TODD A LUFT PAC.....		4,368				4,368
TODD HARBACH.....	5,380					5,380
TODD M BERTOCH MD.....	2,288					2,288
TONY L CHIEN.....	2,345					2,345
TORREY PINES REHABILITATION HOSPITAL.....					8,433	8,433
TOURO INFIRMARY HOSPITAL.....	11,753					11,753
TOWN AND COUNTRY HOSPITAL.....	3,311					3,311
TRANSITIONAL CARE CENTER.....					7,354	7,354
TRANSITIONAL HOSP CORP OF NV.....					8,493	8,493
TRASK SURGERY CENTER.....	9,034					9,034
TREATMENT CTR OF PALM BEACHES.....					2,793	2,793
TRIHEALTH HOSPITAL INC.....	8,293					8,293
TRINITY MEDICAL CENTER.....	42,753	22,158				64,910
TRINITY MISSION OF ROCKY.....	10,061					10,061
TRINITY NURSING AND REHAB CENTER.....					3,047	3,047
TRINITY SURGERY CENTER.....					3,342	3,342
TRUMAN MED CTR HOSP HILL.....	17,336	5,603	2,689			25,628
TRUMAN MEDICAL CENTER LAKEWOOD.....	30,801	6,253				37,054
TUCSON MEDICAL CENTER.....	118,922				20,969	139,891
TUCSON SURGERY CENTER.....	5,325					5,325
TWINBROOK NURSING HOME.....	4,809					4,809
TWO RIVERS PSYCHIATRIC HOSPITAL.....	3,325		3,278			6,603
TWO RIVERS PSYCHIATRIC HOSPITAL INC.....	6,036					6,036
TX MEDICAID & HC PARTNER.....	3,183					3,183
TYLERS RETREAT AT IRON BRIDGE.....	5,262					5,262
U OF L HOSPITAL AND JAMES GRAHM BROWN.....	42,429					42,429
U OF U STANSBURY HLTH CTR.....	7,095					7,095
U W MEDICAL CENTER.....	7,587	34,399				41,986
UAMS HOSPITAL.....	87,710				4,826	92,536
UAMS RADIATION ONCOLOGY.....	7,792					7,792
UCSF MEDICAL CENTER.....		2,655				2,655
UHS OF RIDGE.....	4,807					4,807
UIC MEDICINE.....	16,814	2,531				19,345
UK HEALTHCARE HOSPITAL.....	49,385	11,848			8,069	69,303
UK HEALTHCARE HOSPITALS.....			2,647			2,647
UMDC DEPARTMENT OF NEUROLOGICAL SURGERY.....	2,012					2,012
UNION HOSPITAL INC.....	16,656					16,656
UNITED HOSPITAL.....	6,782					6,782
UNITED HOSPITAL SYSTEM INC.....	9,665					9,665
UNITED SEA TING AND MOBILITY.....	5,517					5,517
UNITY HOSPITAL.....	3,876					3,876
UNIV OF IOWA HOSPITAL AND CLINICS.....	5,273					5,273
UNIV OF MIAMI HOSPITAL AND CLINICS.....		14,276				14,276
UNIV OF TENNESSEE MEDICAL CENTER.....	30,074	13,839	3,661		12,355	59,929
UNIVERSITY HEALTH SYSTEM.....					3,073	3,073
UNIVERSITY HEIGHTS HEALTH.....	4,493					4,493
UNIVERSITY HOSPITAL.....	96,531	5,060	15,321		12,659	129,571
UNIVERSITY MEDICAL CENTER.....	401,402		49,056	6,312	3,613	460,382
UNIVERSITY OF ALABAMA HOSPITAL.....	126,486					126,486
UNIVERSITY OF CHICAGO MED CTR.....	46,794	68,541			9,688	125,022
UNIVERSITY OF COLORADO HOSPITAL.....	97,272					97,272
UNIVERSITY OF COLORADO HOSPITAL.....	4,286					4,286
UNIVERSITY OF ILLINOIS MED CTR.....	295,676	3,902			3,369	302,947
UNIVERSITY OF KANSAS HOSPITAL.....	454,787	75,902				530,689
UNIVERSITY OF KANSAS HOSPITAL AUTHORITY.....	11,468	13,131			6,927	31,525

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STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
UNIVERSITY OF KENTUCKY HOSPITAL.....	63,123	10,989			11,596	85,708
UNIVERSITY OF LOUISVILLE HOSPITAL.....	90,991				21,382	112,373
UNIVERSITY OF MIAMI HOSPITAL.....		2,811				2,811
UNIVERSITY OF MINNESOTA MEDICAL.....	5,952					5,952
UNIVERSITY OF MISSOURI HEALTH.....	41,286	5,590				46,875
UNIVERSITY OF TN MEDICAL CTR.....	5,989					5,989
UNIVERSITY PARK HEALTH AND REHAB.....	3,150					3,150
UNM HEALTH SCIENCES CENTER.....	145,711	74,993	5,826	46,975		273,504
UNM SANDOVAL REGIONAL MEDICAL.....	9,999		3,041			13,040
UROSURGICAL CENTER OF RICHMOND.....		2,340				2,340
USA MEDICAL CENTER.....	27,585					27,585
USF ENDOSCOPY CENTER.....	2,567					2,567
USRC BOLINGBROOK LLC.....	12,953	59,431				72,384
VALIANT D TAN MD.....	4,908					4,908
VALLEY ANE STH CONSULTANTS PLLC.....	4,713					4,713
VALLEY GENERAL HOSPITAL RECOVERY.....	8,025	5,069				13,094
VALLEY HEALTHCARE & REHAB CTR.....	5,701					5,701
VALLEY HOSPITAL MEDICAL CENTER.....	134,998				6,170	141,168
VALLEY MEDICAL CENTER.....	41,563					41,563
VALLEY RANCH NURSING & REHAB.....	2,596					2,596
VALLEY GENERAL HOSPITAL RECOVERY.....	2,458					2,458
VALLEY VIEW MEDICAL CTR.....	12,618					12,618
VANCOUVER HEALTH AND REHABILITATION.....	12,224					12,224
VANDERBILT UNIV MED CTR.....	59,025					59,025
VANDERBILT UNIVERSITY MEDICAL CENTER.....	55,092				5,261	60,353
VANGUARD HEALTH SYSTEM.....	35,912	10,187			8,502	54,601
VCU HEALTH SYSTEM.....	50,537					50,537
VERDE VALLEY MEDICAL CENTER.....	4,287	28,637				32,924
VERDE VISTA CARE AND REHAB INC.....	3,104					3,104
VIA CHRISTI REGIONAL MEDICAL.....	6,491		2,820			9,311
VIA CHRISTI REHABILITATION CENTER.....	17,481					17,481
VIA CHRISTI ST FRANCIS CAMPUS.....	63,456	6,085	2,010		12,135	83,686
VIBRA HOSPITAL OF FORT WAYNE.....	42,950					42,950
VILLA MANOR CARE NURSING CTR.....	5,860					5,860
VILLA OF WENTZVILLE.....	9,576					9,576
VILLA SAINT JOSEPH.....	2,806					2,806
VILLAGE HOSPITAL.....	3,994					3,994
VILLAGE NORTH HEALTH CENTER.....		2,092	9,310			11,402
VILLAGES OF JACKSON CREEK.....	15,586	3,332				18,917
VINCENT SAMMARCO.....		2,330				2,330
VIRGINIA BEACH HEALTHCARE.....	9,446					9,446
VIRGINIA BEACH PSYCHIATRIC CENTER.....			2,600			2,600
VIRGINIA DEPT MED.....	5,027					5,027
VISITING NURSE ASSOCIATION.....	5,556					5,556
VISTA HEALTH.....	9,875					9,875
VISTA MEDICAL CENTER EAST.....	32,710				2,021	34,731
VNA HEALTH CARE.....	2,123					2,123
WADLEY REGIONAL MED CTR.....	32,535					32,535
WADLEY REGIONAL MEDICAL.....					4,734	4,734
WADLEY REGIONAL MEDICAL CENTER.....	20,026					20,026
WAHID HANNA.....					2,076	2,076
WALGREENS INFUSION SERVICES.....	39,352	3,283				42,635
WALKER BAPTIST MEDICAL CENTER.....	3,712					3,712
WALNUT GROVE MANAGEMENT LLC.....	3,400					3,400
WASHINGTON CENTER.....	7,357					7,357
WASHINGTON REG MED CENTER.....	175,274		33,327			208,601

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
WATERSHED TREATMENT CENTER			2,360			2,360
WATERTOWN MEMORIAL HOSPITAL	11,105					11,105
WAUKEGAN RENAL CENTER	8,226					8,226
WAUKESHA MEMORIAL HOSPITAL	25,606				2,524	28,130
WELLBOUND OF AUSTIN			2,897			2,897
WELLSTONE REGIONAL HOSPITAL	5,808					5,808
WESLEY MEDICAL CENTER	104,163				51,526	155,689
WESLEY REHABILITATION HOSPITAL	15,329					15,329
WEST CHESTER MEDICAL	12,676					12,676
WEST JOHN	2,393					2,393
WEST MARKHAM	4,630					4,630
WEST SUBURBAN HOSP DIALYSIS	23,569					23,569
WEST SUBURBAN MEDICAL CENTER	16,050	7,608			2,947	26,605
WEST VALLEY HOSPITAL MEDICAL CENTER	72,662					72,662
WEST VALLEY MEDICAL CENTER INC	15,586	7,681				23,267
WESTERN ARIZONA REGIONAL MEDICAL	114,359	2,979				117,337
WESTERN HILLS DIALYSIS	18,120					18,120
WESTERN MISSOURI MED CENTER	69,410					69,410
WESTERN MISSOURI MEDICAL CENTER		5,589				5,589
WESTLAKE HOSPITAL	5,343	7,395				12,738
WESTLAKE LLC			3,282			3,282
WESTRIDGE GARDENS NURSING	13,335					13,335
WESTVIEW HOSPITAL	27,078					27,078
WHEATON FRANCISCAN INC	14,887					14,887
WHITE COUNTY MEDICAL CENTER	29,117					29,117
WHITE OAK DIALYSIS	11,499					11,499
WHITE OAK HOME TRAINING	2,587					2,587
WHITE OAK MANOR ROCK HILL	3,004					3,004
WHITE OAK NURSING & REHABILITATION	2,850					2,850
WHITE RIVER MEDICAL CENTER	20,947	16,426				37,373
WHITESBURG GARDENS HEALTH CARE	2,949					2,949
WILLIAM CAMP					4,227	4,227
WILLIAM DEFOOR JR	2,154					2,154
WILLIAM J BOSE MD	3,183					3,183
WILLIAM M JACOBSEN MD		3,680				3,680
WILLIAM ROSE III		2,204				2,204
WILLIAM S COBB MD	2,913					2,913
WILLIAM SMITH	4,100					4,100
WILLIAM TOBLER	7,068					7,068
WILLOW CREEK DIALYSIS	11,024					11,024
WINDMILL NURSING PAVILLION		2,844				2,844
WINNIE RUO MD		2,426				2,426
WINTON ROAD DIALYSIS	18,759					18,759
WISHARD MEMORIAL HOSPITAL	8,135				2,697	10,831
WITHAM MEMORIAL HOSPITAL	5,838					5,838
WK PIERREMONT HEALTH CENTER		3,961				3,961
WOMEN AND INFANTS HOSP RHODE ISLAND	3,473					3,473
WOODLAND DIALYSIS CENTER	9,411	8,303				17,714
WRMC HOME HEALTH		5,606				5,606
XIAOQI SUN	3,444					3,444
YAVAPAI REGIONAL MEDICAL CENTER	18,652					18,652
YUMA REGIONAL MEDICAL CENTER	121,222	5,391				126,613
ZAHEED HASSAN MD	7,646					7,646
0199999 Individually listed claims unpaid	36,803,670	6,098,938	1,228,226	444,795	3,184,736	47,760,365
0299999 Aggregate accounts not individually listed-uncovered	2,074,630	336,600	70,566	27,268	275,875	2,784,939
0399999 Aggregate accounts not individually listed-covered	2,292,954	244,327	101,603	69,073	2,014,163	4,722,120

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**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
0499999 Subtotals	41,171,254	6,679,865	1,400,395	541,136	5,474,774	55,267,424
0599999 Unreported claims and other claim reserves	XXX	XXX	XXX	XXX	XXX	295,007,482
0699999 Total amounts withheld	XXX	XXX	XXX	XXX	XXX	
0799999 Total claims unpaid	XXX	XXX	XXX	XXX	XXX	350,274,906
0899999 Accrued medical incentive pool and bonus amounts	XXX	XXX	XXX	XXX	XXX	1,151,575

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**UNDERWRITING AND INVESTMENT EXHIBIT**  
**ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE**

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
	1	2	3	4		
	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid Dec. 31 of Prior Year	On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) .....	52,432,672	239,145,680	2,199,586	59,553,647	54,632,258	58,281,161
2. Medicare Supplement .....					.0	.0
3. Dental only .....	142,744	1,373,668	10,056	227,937	152,800	169,223
4. Vision only .....		361,162		.0	.0	.0
5. Federal Employees Health Benefits Plan .....	12,798,338	45,642,795	3,396,564	9,684,180	16,194,902	11,111,958
6. Title XVIII - Medicare .....	158,845,887	989,870,821	10,664,273	244,155,456	169,510,160	179,611,895
7. Title XIX - Medicaid .....					.0	.0
8. Other health .....	103	.0	15	.0	118	617
9. Health subtotal (Lines 1 to 8).....	224,219,744	1,276,394,126	16,270,494	313,621,220	240,490,238	249,174,853
10. Health care receivables (a) .....	.0	15,487,258	.0	.0	.0	.0
11. Other non-health .....	.0	.0	.0	.0	.0	.0
12. Medical incentive pools and bonus amounts .....	.0	235,720		1,151,575	.0	1,387,294
13. Totals (Lines 9-10+11+12)	224,219,744	1,261,142,587	16,270,494	314,772,795	240,490,238	250,562,147

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(a) Excludes \$ .....9,261,826 loans or advances to providers not yet expensed.

**STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.**

**NOTES TO THE FINANCIAL STATEMENTS**

1. Summary of Significant Accounting Policies

A. Accounting Practices

The financial statements of the Company are presented on the basis of accounting practices prescribed or permitted by the Kentucky Department of Insurance.

The Kentucky Department of Insurance recognizes only statutory accounting practices prescribed or permitted by the state of Kentucky for determining and reporting the financial condition and results of operations of an insurance Company, for determining its solvency under the Kentucky Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of Kentucky. The Commissioner of Insurance has the right to permit other specific practices that deviate from prescribed practices. No deviations exist.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the state of Kentucky is shown below:

	State of Domicile	2013	2012
Net (Loss)			
1. Humana Health Plan, Inc. Kentucky basis	KY	\$ (5,684,038)	\$ (28,891,765)
2. State Prescribed Practices that increase/(decrease) NAIC SAP	KY	-	-
3. State Permitted Practices that increase/(decrease) NAIC SAP	KY	-	-
4. NAIC SAP	KY	\$ (5,684,038)	\$ (28,891,765)
Surplus			
5. Humana Health Plan, Inc. Kentucky basis	KY	\$ 318,922,801	\$ 307,941,776
6. State Prescribed Practices that increase/(decrease) NAIC SAP	KY	-	-
7. State Permitted Practices that increase/(decrease) NAIC SAP	KY	-	-
8. NAIC SAP	KY	\$ 318,922,801	\$ 307,941,776

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. These estimates are based on knowledge of current events and anticipated future events, and accordingly, actual results could differ from those estimates.

C. Accounting Policy

Premiums are reported as earned in the period in which members are entitled to receive services, and are net of retroactive membership adjustments. Retroactive membership adjustments result from enrollment changes not yet processed, or not yet reported by an employer group or the government. Premiums received prior to such period are recorded as advance premiums.

Benefits incurred and loss adjustment expenses include claim payments, capitation payments, pharmacy costs net of rebates, allocations of certain centralized expenses, legal and administrative costs to settle claims, and various other costs incurred to provide health insurance coverage to members, as well as estimates of future payments to hospitals and others for medical care provided prior to the date of the statements of admitted assets, liabilities and surplus. Capitation payments represent monthly contractual fees disbursed to participating primary care physicians, and other providers who are responsible for providing medical care to members. Pharmacy costs represent payments for members' prescription drug benefits, net of rebates from drug manufacturers.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments include investments mainly in U.S. Government obligations with a maturity of twelve months or less from the date of purchase. Short-term investments are recorded at amortized cost. The carrying value of short-term investments approximates fair value due to the short-term maturities of the investments.
- (2)-(4) Investments are valued and classified in accordance with methods prescribed by the NAIC. Bonds with an NAIC rating of 1 or 2 are carried at amortized cost, with all other bonds being recorded at the lower of amortized cost or fair value; redeemable preferred stocks are carried at amortized cost; and non-redeemable preferred stocks are carried at fair value.

The Company regularly evaluates investment securities for impairment. For all securities other than loan-backed and structured securities, the Company considers factors affecting the investee, factors affecting the industry the investee operates within, and general debt and equity market trends. The Company also considers the length of time an investment's fair value has been below carrying value, the near term prospects for recovery to carrying value, and the Company's intent and ability to hold the investment until maturity or market recovery is realized. If and when a determination is made that a decline in fair value below the cost basis is other-than-temporary, the related investment is written down to its estimated fair value through earnings.

Amortization of bond premium or discount is computed using the scientific interest method.

## STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

### NOTES TO THE FINANCIAL STATEMENTS

Income from investments is recorded on an accrual basis. For the purpose of determining realized gains and losses, the cost of securities sold is based upon specific identification. Investment income due and accrued over 90 days past due is nonadmitted.

- (5) The Company estimates the fair value of its investments in mortgage loans on real estate using a discounted cash flow method based on rating, maturity and future income when compared to the expected yield for mortgages having similar characteristics. The rating for mortgages in good standing is based on property type, location, market conditions, occupancy, debt service coverage, loan to value, caliber of tenancy, borrower and payment record. Problem mortgages are priced to reflect their monetary value to the Company, considering such things as the degree of default, whether or not the payments are still being made, interest rate, maturity and operating performance of the underlying collateral.
- (6) For loan backed and structured securities where the securities fair value is less than the amortized cost, the Company considers several factors to determine if the security's impairment is other-than-temporary. If the Company has the intent to sell the security or if the Company does not have the intent and ability to retain the security until recovery of its fair value, the related investment is written down to its estimated fair value through earnings. If, however, the Company has the intent and ability to retain the security until recovery of its fair value, the Company considers factors affecting the investee, factors affecting the industry the investee operates within, and general debt and equity market trends. The Company also considers the length of time an investment's fair value has been below carrying value and the near term prospects for recovery to carrying value. If the determination is made, based on these factors, that the Company does expect to recover the entire amortized cost of the security, then an other-than-temporary impairment has not occurred. If, however, the determination is made that the Company does not expect to recover the entire amortized cost of the security based on the factors noted above, the Company recognizes a realized loss in earnings for the non-interest related decline. No loss is recognized for the interest impairment.
- (7) The Company accounts for its investments in subsidiaries using the audited statutory equity method of accounting.
- (8) The Company accounts for its investments in joint ventures, partnerships, and LLC's using the audited statutory equity method of accounting.
- (9) Not Applicable.
- (10)-(11) The estimates of future medical benefit payments are developed using actuarial methods and assumptions based upon claim payment patterns, medical cost inflation, historical development such as claim inventory levels and claim receipt patterns, and other relevant factors. Corresponding administrative costs to process outstanding claims are estimated and accrued. Estimates of future payments relating to services incurred in the current and prior periods are continually reviewed by management and adjusted as necessary.

The Company assesses the profitability of its contracts for providing health insurance coverage to its members when current operating results or forecasts indicate probable future losses. The Company records a premium deficiency liability in current operations to the extent that the sum of expected future medical costs, claim adjustment expenses and maintenance costs exceed related future premiums. Investment income is not contemplated in the calculation of the premium deficiency liability.

Management believes the Company's benefits payable and loss adjustment expense are adequate to cover future claims and loss adjustment expense payments required, however, such estimates are based on knowledge of current events and anticipated future events and, therefore, the actual liability could differ from the amounts provided.

- (12) Real estate held for production of income is carried at depreciated cost.

Equipment is stated at cost less accumulated depreciation. Depreciation expense is computed using the straight-line method over estimated useful lives generally ranging from three to five years. Improvements to leased facilities are depreciated over the shorter of the remaining lease term or the anticipated life of the improvement.

The Company recognizes an asset or liability for the deferred tax consequences of temporary differences between the tax bases of assets or liabilities and their reported amounts in the financial statements. The temporary differences will result in taxable or deductible amounts in future years when the reported amounts of the assets or liabilities are recovered or settled.

- (13) The Company estimates anticipated Pharmacy Rebate Receivables using the analysis of historical recovery patterns.

#### 2. Accounting Changes and Corrections of Errors

The Company adopted the provisions of SSAP No. 101 *Income Taxes A Replacement of SSAP10R and SSAP 10* in 2012. SSAP 101 provides new requirements for tax loss contingencies and the calculation and admissibility of deferred tax assets. The difference between the recalculated amounts as of January 1, 2012, and the amount actually reported in the prior year financial statements is treated as a change in accounting principle in accordance with SSAP 3 *Accounting Changes and Correction Errors*. The cumulative effect of this change in accounting principle resulted in a \$1,846,160 increase in surplus.

In 2012, the Company determined that certain shared administrative contra expenses related to another Humana subsidiary had been improperly allocated in 2011. This resulted in a \$2,425,099 overstatement of the 2011 administrative expenses for the Company. The error had no impact on net admitted assets or total liabilities at December 31, 2011.

Consistent with SSAP 3 *Accounting Changes and Corrections of Errors*, the prior period expense was recorded as an adjustment to surplus on line 47 of the capital and surplus account rollforward. There is no tax impact in this adjustment. The adjustment is 0.08 percent of earned premiums and 7.16 percent of pretax earnings.

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

NOTES TO THE FINANCIAL STATEMENTS

In 2012, the Company determined that the 2011 and prior deferred tax provisions included certain items that were not realizable in one year. This error resulted in a \$679,605 understatement of both the 2011 net admitted deferred tax asset and ending capital surplus. The error had no impact on total liabilities or net income at December 31, 2011. Consistent with SSAP 3, an adjustment to surplus has been recorded in the fourth quarter of 2012 as an aggregate write-in on line 47 of the capital and surplus account rollforward. The adjustment is 0.11% of earned premiums and 7.16% of pretax earnings.

3. Business Combinations and Goodwill

A. Statutory Purchase Method

Not Applicable.

B. Statutory Merger

Not Applicable.

C. Assumption Reinsurance

Not Applicable.

D. Impairment Loss

Not Applicable.

4. Discontinued Operations

Not Applicable.

5. Investments

A. Mortgage Loans, Including Mezzanine Real Estate Loans

- (1) The maximum and minimum lending rates for the mortgage loan in 2013 were 1.13 percent and 1.4 percent.
- (2) During 2012 the Company did not reduce interest rates of the mortgage loan.
- (3) The maximum percentage of the loan to the value of the security at any time of the loan, exclusive of insured or guaranteed or purchase-money mortgages was 100 percent.

	<u>Current Year</u>	<u>Prior Year</u>
(4) As of year end, the Company held mortgages with interest more than 180 days past due with a recorded investment, excluding accrued interest	\$ -	\$ -
a. Total interest due on mortgages with interest more than 180 days past due	\$ -	\$ -
(5) Taxes, assessments and any amounts advanced and not included in the mortgage loan total	\$ -	\$ -
(6) Current year impaired loans with a related allowance for credit losses	\$ -	\$ -
a. Related allowance for credit losses	\$ -	\$ -
(7) Impaired Mortgage loans without an allowance for credit losses	\$ -	\$ -
(8) Average recorded investment in impaired loans	\$ -	\$ -
(9) Interest income recognized during the period the loans were impaired	\$ -	\$ -
(10) Amount of interest income recognized on a cash basis during the period the loans were impaired	\$ -	\$ -
(11) Allowance for credit losses:		
a. Balance at beginning of period	\$ -	\$ -
b. Additions charged to operations	\$ -	\$ -
c. Direct write-downs charged against the allowances	\$ -	\$ -
d. Recoveries of amounts previously charged off	\$ -	\$ -
e. Balance at end of period	\$ -	\$ -
(12) Not Applicable.		

B. Debt Restructuring

Not Applicable.

C. Reverse Mortgages

Not Applicable.

D. Loan-Backed Securities

- (1) Not Applicable.
- (2) Not Applicable.
- (3) Not Applicable.

(4) The Company does not have any investments in an other-than-temporary impairment position at June 30, 2013.

Gross unrealized losses and related fair value of temporarily impaired securities that have been in a continuous unrealized loss position were as follows at June 30, 2013:

(a) The aggregate amount of unrealized losses:		
1. Less than 12 Months	\$	4,364,324
2. 12 Months or Longer	\$	68,018

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

NOTES TO THE FINANCIAL STATEMENTS

(b) The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months	\$ 99,907,110
2. 12 Months or Longer	\$ 1,886,508

(5) The unrealized losses at June 30, 2013 were primarily due to increases in market interest rates and tighter liquidity conditions in the current markets than when the securities were purchased. All issuers of securities trading at an unrealized loss remain current on all contractual payments and the Company believes it is probable that all amounts due according to the contractual terms of the debt securities are collectible. After taking into account these and other factors, including the severity of the decline and the Company's ability and intent to hold these securities until recovery or maturity, the Company determined the unrealized losses on these investment securities were temporary and, as such, no impairment was required.

E. Repurchase Agreements and/or Securities Lending Transactions

(1) The Company has no repurchase agreements or securities lending transactions.

(2) The Company has not pledged any of its assets as collateral.

(3-5) Not Applicable.

F. Real Estate

Not Applicable.

G. Low-Income Housing Tax Credits (LIHTC)

Not Applicable.

6. Joint Ventures, Partnerships and Limited Liability Companies

A. The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10.0 percent of its admitted assets.

B. The Company did not recognize any impairment write down for its investments in Joint Ventures, Partnerships and Limited Liability Companies during the statement periods.

7. Investment Income

A. Due and accrued income was excluded from surplus on the following basis:

All investment income due and accrued with amounts that are over 90 days past due with the exception of mortgage loan default.

B. The total amount excluded was \$0.

8. Derivative Instruments

Not Applicable.

9. Income Taxes

No material change since year-end December 31, 2012.

10. Information Concerning Parent, Subsidiaries and Affiliates

A.-F. The Company has a management contract with Humana and other related parties whereby the Company is provided with medical and executive management, information systems, claims processing, billing and enrollment, and telemarketing and other services as required by the Company. Management fees charged to operations for the years ended December 31, 2012 and 2011 were approximately \$400.6 million and \$375.6 million respectively. As a part of this agreement, Humana makes cash disbursements on behalf of the Company which includes, but is not limited to, medical related items, general and administrative expenses, commissions and payroll. Humana is reimbursed by the Company weekly, based upon historical pattern of amounts and timing. Each month, these estimates are adjusted to ultimately settle upon actual disbursements made on behalf of the Company. The Company continues to be primarily liable for any outstanding payments made on behalf of the Company, should Humana not be able to fulfill its obligations. No dividends were paid by the Company. At June 30, 2013, the Company reported \$28.2 million due from Humana Inc. Amounts due to or from parent are generally settled within 30 days.

G. Not Applicable.

H. Not Applicable.

I. Not Applicable.

J. Not Applicable.

K. Not Applicable.

L. Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

11. Debt

A. Debt Including Capital Notes

The Company has no debentures outstanding.

The Company has no capital notes outstanding.

The Company does not have any reverse repurchase agreements.

B. Federal Home Loan Bank (FHLB) Agreements

The Company does not have any FHLB agreements.

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plans

Not Applicable.

B. Defined Contribution Plans

Not Applicable.

C. Multiemployer Plans

Not Applicable.

D. Consolidated/Holding Company Plans

No material change since year-end December 31, 2012.

E. Post Employment Benefits and Compensated Absences

Not Applicable.

F. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not Applicable

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

1) The Company has \$1 par value common stock with 5,000,000 shares authorized and 2,248,000 shares issued and outstanding.

2) The Company has no preferred stock outstanding.

3-5) Dividends are noncumulative and are paid as determined by the Board of Directors. Dividends are subject to the approval of the Department of Insurance if such dividend distribution exceeds the lesser of the Company's prior year net operating profits or 10 percent of policyholders surplus funds derived from realized net operating profits.

Within the limitations above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.

No dividends were paid as of June 30, 2013.

6) There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.

7) Not Applicable.

8) Not Applicable.

9) Not Applicable.

10) The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$(24,488).

11) Not Applicable.

12) Not Applicable.

13) Not Applicable.

14. Contingencies

A. Contingent Commitments

Not Applicable.

B. Assessments

Not Applicable.

C. Gain Contingencies

Not Applicable.

D. Claims related extra contractual obligation and bad faith losses stemming from lawsuits

Not Applicable.

**STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.**

**NOTES TO THE FINANCIAL STATEMENTS**

E. All Other Contingencies

During the ordinary course of business, the Company is subject to pending and threatened legal actions. Management of the Company does not believe that any of these actions will have a material adverse effect on the Company's surplus, results of operations or cash flows. However, the likelihood or outcome of current or future legal proceedings cannot be accurately predicted, and they could adversely affect the Company's surplus, results of operations and cash flows.

The Company is not aware of any other material contingent liabilities as of June 30, 2013.

15. Leases

No material change since year-end December 31, 2012.

16. Information about Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

The Company has no investment in Financial Instruments with Off- Balance Sheet Risk or Concentrations of Credit Risk.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

Not Applicable.

B. Transfer and Servicing of Financial Assets

Not Applicable.

C. Wash Sales

Not Applicable.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. ASO Plans

The gain from operations from Administrative Services Only (ASO) uninsured plans and the uninsured portion of partially insured plans was as follows during the quarter ended June 30, 2013:

	ASO Uninsured Plans		Uninsured Portion of Partially Insured Plans		Total ASO	
a. Net reimbursement for administrative expenses (including administrative fees) in excess of actual expenses	\$	22,584,383	\$	-	\$	22,584,383
b. Total net other income or expenses (including interest paid to or received from plans)	\$	647,823	\$	-	\$	647,823
c. Net gain or (loss) from operations	\$	23,232,205	\$	-	\$	23,232,205
d. Total claim payment volume	\$	739,762,405	\$	-	\$	739,762,405

B. ASC Plans

Not Applicable.

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract

- a. The Company records no revenue explicitly attributable to the cost share and reinsurance components of administered Medicare products.
- b. As of June 30, 2013, the Company has recorded a receivable from CMS of \$6.4 million related to the cost share and reinsurance components of administered Medicare products. The Company does not have any additional receivables greater than 10.0 percent of the Company's accounts receivable from uninsured Accident & Health Plans or \$10,000.
- c. As no revenue is recorded in connection with the cost share and reinsurance components of the Company's Medicare contracts, the Company has recorded no allowances and reserves for adjustment of recorded revenues and receivables.
- d. The Company has made no adjustment to revenue resulting from audit of receivables related to revenues recorded in the prior period.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not Applicable.

**STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.**

**NOTES TO THE FINANCIAL STATEMENTS**

20. Fair Value Measurements

A. (1) The fair value of financial assets at June 30, 2013 were as follows:

	Level 1	Level 2	Level 3	Total
Assets				
Tax-exempt municipal bonds	\$ -	\$ 800,880	\$ -	\$ 800,880
Corporate debt securities	-	34,948	-	34,948
Total invested assets	\$ -	\$ 835,828	\$ -	\$ 835,828

(2) Rollforward of Level 3 Items

Not Applicable.

(3) There were no fair value measurements using significant unobservable inputs. The Company reports transfers between fair value hierarchy levels at the end of the reporting period. There were no transfers between the fair value hierarchy levels between December 31, 2012 and June 30, 2013.

(4) Fair value of actively traded debt securities are based on quoted market prices. Fair value of other debt securities are based on quoted market prices of identical or similar securities or based on observable inputs like interest rates generally using a market valuation approach, or, less frequently, an income valuation approach and are generally classified as Level 2. The Company generally obtains one quoted price for each security from a third party pricing service. These prices are generally derived from recently reported trades for identical or similar securities, including adjustments through the reporting date based upon observable market information. When quoted prices are not available, the third party pricing service may use quoted market prices of comparable securities or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include benchmark yields, reported trades, credit spreads, broker quotes, default rates and prepayment speeds.

The Company is responsible for the determination of fair value and as such, the Company performs analysis on the prices received from the third party pricing service to determine whether the prices are reasonable estimates of fair value. The Company's analysis includes a review of monthly price fluctuations as well as a quarterly comparison of the prices received from the pricing service to prices reported by the Company's third party investment advisor. Based on the Company's internal price verification procedures and review of fair value methodology documentation provided by the third party pricing service, there were no material adjustments to the prices obtained from the third party pricing service during the year ended June 30, 2013.

(5) Derivative Fair Values

Not Applicable.

B. Other Fair Value Disclosures

Not Applicable.

C. Fair Values for All Financial Instruments by Levels 1,2 and 3

Not Applicable.

D. Financial Instruments for which Not Practicable to Estimate Fair Values

Not Applicable.

21. Other Items

A. Extraordinary Items

Not Applicable.

B. Troubled Debt Restructuring: Debtors

Not Applicable.

C. Other Disclosures

Not Applicable.

D. Disclose the nature of any portion of the balance that is reasonably possible to be uncollectible for assets covered by SSAP No. 6, Uncollected Premium Balances, Bill Receivable for Premiums, and Amounts Due From Agents and Brokers, SSAP No. 47, Uninsured Plans, or SSAP No. 66, Retrospectively Rated Contracts.

Not Applicable.

E. Business Interruption Insurance Recoveries

Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

F. State Transferable and Non-transferable Tax Credits

Not Applicable.

G. Subprime Mortgage Related Risk Exposure

(1) The Company consults with its external investment managers to assess its subprime mortgage related risk exposure. Certain characteristics are utilized to determine if a mortgage-backed security has subprime exposure. The main characteristics reviewed when determining this are the collateral and structure of the security, the loan purpose, loan documentation, occupancy, geographical location, loan size and type. Subprime mortgage borrowers typically have lower credit scores, lower loan balances and higher loan-to-values than other conforming loans. Management's practices include reviewing quantitative and qualitative credit models that analyze loan-level collateral composition, historical underwriter performance trends, the impact of macroeconomic factors, and issuer risks; as well as reviewing the estimation of security cash flows and monthly model calibrations.

(2) Direct exposure through investments in sub-prime mortgage loans.

The Company has no direct exposure through investment to sub-prime mortgage loans.

(3) Direct exposure through other investments:

- a. Residential mortgage backed securities – No substantial exposure noted.
- b. Collateralized debt obligations – No substantial exposure noted.
- c. Structured Securities (including principal protected notes) – No substantial exposure noted.
- d. Debt Securities of companies with significant sub-prime exposure – No substantial exposure noted.
- e. Equity securities of companies with significant sub-prime exposure – No substantial exposure noted.
- f. Other Assets – No substantial exposure noted.

(4) Underwriting exposure to sub-prime mortgage risk through Mortgage Guaranty coverage, Financial Guaranty coverage, Directors and Officers liability coverage, or Errors and Omissions liability coverage.

Not Applicable.

Classification of mortgage related securities is primarily based on information from outside data services, including rating agency actions. When considering our exposure, the Company evaluated the percentage of full documentation loans, percent of owner occupied properties, FICO scores, average margin for ARM loans, percent of loans with prepayment penalties, the existence of non-traditional underwriting standards, among other factors.

22. Events Subsequent

The Company is not aware of any events occurring subsequent to the close of the books for this statement which may have a material effect on its financial condition. Subsequent events have been considered through August 12, 2013 for the statutory statement issued on August 12, 2013.

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 – General Interrogatories

(1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10.0 percent or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?

Yes ( ) No (X)

If yes, give full details.

(2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10.0 percent or controlled directly or indirectly by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business?

Yes ( ) No (X)

If yes, give full details.

Section 2 – Ceded Reinsurance Report – Part A

(1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits?

Yes ( ) No (X)

- a. If yes, what is the estimated amount of the aggregate reduction in surplus of a unilateral cancellation by the reinsurer as of the date of this statement, for those agreements in which cancellation results in a net obligation is not presently accrued? Where necessary, the reporting entity may consider the current or anticipated experience of the business reinsured in making this estimate. \$0
- b. What is the total amount of reinsurance credits taken, whether as an asset or as a reduction of liability, for these agreements in this statement? \$0

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

NOTES TO THE FINANCIAL STATEMENTS

- (2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes ( ) No (X)

If yes, give full details.

Section 3 – Ceded Reinsurance Report – Part B

- (1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. \$0

- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement?

Yes ( ) No (X)

If yes, what is the amount of reinsurance credits, whether an asset or a reduction of liability, taken for such new agreements or amendments? \$0

B. Uncollectible Reinsurance

Not Applicable.

C. Commutation of Ceded Reinsurance

Not Applicable.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

- A. The Company estimates accrued retrospective premium adjustments for its Medicare business through a mathematical approach using an algorithm based upon settlement procedures defined by contracts with CMS.
- B. The Company records accrued retrospective premium as an adjustment to earned premiums.
- C. The amount of net premiums written by the Company at June 30, 2013 that are subject to retrospective rating features was \$51.2 million, or 2.77 percent. No other net premiums written by the Company are subject to retrospective rating features.
- D. Medical loss ratio rebates required pursuant to the Public Health Service Act.

	Individual	Small Group Employer	Large Group Employer	Other Categories with rebates	Total
Prior Reporting Year:					
Medical loss ratio rebates incurred	\$ 21,153	\$ 4,456,831	\$ 3,639,829	\$ -	\$ 8,117,813
Medical loss ratio rebates paid	-	7,190,399	6,161,317	-	13,351,716
Medical loss rebates unpaid	30,852	4,331,398	1,881,804	-	6,244,054
Plus reinsurance assumed amounts	-	-	-	-	-
Less reinsurance ceded amounts	-	-	-	-	-
Rebates unpaid net of reinsurance	-	-	-	-	6,244,054

Current Reporting Year-to-date:					
Medical loss ratio rebates incurred	\$ 193,388	\$ 529,045	\$ 1,215,760	\$ -	\$1,938,203
Medical loss ratio rebates paid	-	-	-	-	-
Medical loss rebates unpaid	224,251	4,860,443	3,097,564	-	8,182,258
Plus reinsurance assumed amounts	-	-	-	-	-
Less reinsurance ceded amounts	-	-	-	-	-
Rebates unpaid net of reinsurance	-	-	-	-	8,182,258

25. Change in Incurred Claims and Claim Adjustment Expenses

Reserves as of December 31, 2012 were \$251.3 million. As of June 30, 2013, \$226.2 million has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$16.4 million as a result of reestimation of unpaid claims and claim adjustment expenses principally on the commercial HMO and PPO books of business. Therefore, there has been a \$8.8 million favorable prior-year development since December 31, 2012. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims. The Company has no retrospectively rated policies.

26. Intercompany Pooling Arrangements

Not Applicable.

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

NOTES TO THE FINANCIAL STATEMENTS

27. Structured Settlements

The Company has no structured settlements.

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimate Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More than 181 Days after Billing
6/30/2013	\$ 19,291,477	\$ 19,291,477	\$ -	\$ -	\$ -
3/31/2013	\$ 23,419,618	\$ 23,419,618	\$ 23,419,618	\$ -	\$ -
12/31/2012	\$ 7,060,992	\$ 7,060,992	\$ 7,060,992	\$ -	\$ -
9/30/2012	\$ 16,969,271	\$ 16,969,271	\$ 14,974,086	\$ 1,995,185	\$ -
6/30/2012	\$ 17,988,759	\$ 17,988,759	\$ 14,805,257	\$ 3,183,502	\$ -
3/31/2012	\$ 14,796,155	\$ 14,796,155	\$ 5,911,727	\$ 8,884,428	\$ -
12/31/2011	\$ 6,238,730	\$ 6,238,730	\$ 6,238,730	\$ -	\$ -
9/30/2011	\$ 6,145,560	\$ 6,145,560	\$ 6,145,560	\$ -	\$ -
6/30/2011	\$ 7,248,706	\$ 7,248,706	\$ 7,248,706	\$ -	\$ -
3/31/2011	\$ 6,319,618	\$ 6,319,618	\$ 6,319,618	\$ -	\$ -

B. Risk Sharing Receivables

Risk Sharing receivables include estimated recoveries on plan to plan and state to plan adjustments attributable to benefits paid for Medicare beneficiaries. These estimated recoveries from other Medicare carriers and state Medicaid plans are recorded based upon reported overpayments, adjusted for historical recovery patterns.

29. Participating Policies

The Company has no participating policies.

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves \$ 7,680,000
2. Date of the most recent evaluation of this liability June 30, 2013
3. Was anticipated investment income utilized in the calculation? Yes ( ) No ( X )

The Company did recognize the time value of money by discounting future losses at an annual interest rate of 0.10 percent.

31. Anticipated Salvage and Subrogation

Not Applicable.

# GENERAL INTERROGATORIES

## PART 1 - COMMON INTERROGATORIES GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? ..... Yes  No
- 1.2 If yes, has the report been filed with the domiciliary state? ..... Yes  No
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... Yes  No
- 2.2 If yes, date of change: .....

- 3.1 Have there been any substantial changes in the organizational chart since the prior quarter end? ..... Yes  No

3.2 If the response to 3.1 is yes, provide a brief description of those changes.  
.....

- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes  No

4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? ..... Yes  No  NA   
If yes, attach an explanation.

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. .... 12/31/2008

6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. .... 12/31/2008

6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). .... 12/20/2010

6.4 By what department or departments?  
Kentucky Department of Insurance.....

6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? ..... Yes  No  NA

6.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes  No  NA

7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? ..... Yes  No

7.2 If yes, give full information:  
.....

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?..... Yes  No

8.2 If response to 8.1 is yes, please identify the name of the bank holding company.  
.....

8.3 Is the company affiliated with one or more banks, thrifts or securities firms?..... Yes  No

8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

**GENERAL INTERROGATORIES**

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... Yes [X] No [ ]
- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
  - (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
  - (c) Compliance with applicable governmental laws, rules and regulations;
  - (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
  - (e) Accountability for adherence to the code.

9.11 If the response to 9.1 is No, please explain:  
.....

- 9.2 Has the code of ethics for senior managers been amended? ..... Yes [ ] No [X]

9.21 If the response to 9.2 is Yes, provide information related to amendment(s).  
.....

- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [ ] No [X]

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).  
.....

**FINANCIAL**

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [X] No [ ]

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... \$ .....28,192,505

**INVESTMENT**

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) ..... Yes [ ] No [X]

11.2 If yes, give full and complete information relating thereto:  
.....

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: ..... \$ .....0

13. Amount of real estate and mortgages held in short-term investments: ..... \$ .....0

- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? ..... Yes [X] No [ ]

14.2 If yes, please complete the following:

	1	2
	Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21 Bonds .....	\$ .....0	\$ .....0
14.22 Preferred Stock .....	\$ .....0	\$ .....0
14.23 Common Stock .....	\$ .....31,508,729	\$ .....31,504,012
14.24 Short-Term Investments .....	\$ .....0	\$ .....0
14.25 Mortgage Loans on Real Estate .....	\$ .....0	\$ .....0
14.26 All Other .....	\$ .....0	\$ .....0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$ .....31,508,729	\$ .....31,504,012
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above .....	\$ .....0	\$ .....0

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? ..... Yes [ ] No [X]

- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes [ ] No [ ]

If no, attach a description with this statement.

**GENERAL INTERROGATORIES**

- 16 For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ .....0
  - 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ .....0
  - 16.3 Total payable for securities lending reported on the liability page \$ .....0

17. Excluding items in Schedule E – Part 3 – Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*? ..... Yes  No

17.1 For all agreements that comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, complete the following:

1 Name of Custodian(s)	2 Custodian Address
JP Morgan Chase.....	4 Metro Tech Center.....
.....	16th Floor Mail Code: NY1-C5121.....
.....	Brooklyn, NY 11245.....
.....	Attn: Barbara J. Walsh.....

17.2 For all agreements that do not comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? ..... Yes  No

17.4 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

17.5 Identify all investment advisors, broker/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
107105.00.....	Blackrock, Inc.....	40 East 52nd Street.....
.....	.....	New York, NY 10022.....

18.1 Have all the filing requirements of the *Purposes and Procedures Manual* of the NAIC Securities Valuation Office been followed? ..... Yes  No

18.2 If no, list exceptions:  
N/A.....

5) A Global Amendment to replace Schedule C of the Service Center Services Agreement #194R between HHP (recipient) and HIC (provider) was filed to WI on 06.10.2013 and approved on 06.24.2013.

## GENERAL INTERROGATORIES

### PART 2 - HEALTH

1.	Operating Percentages:		
	1.1 A&H loss percent.....	89.2	%
	1.2 A&H cost containment percent .....	4.4	%
	1.3 A&H expense percent excluding cost containment expenses.....	11.1	%
	2.1 Do you act as a custodian for health savings accounts?.....	Yes [ ]	No [X]
	2.2 If yes, please provide the amount of custodial funds held as of the reporting date.....	\$	0
	2.3 Do you act as an administrator for health savings accounts?.....	Yes [ ]	No [X]
	2.4 If yes, please provide the balance of the funds administered as of the reporting date.....	\$	0



STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS**

Current Year to Date - Allocated by States and Territories

States, Etc.	1 Active Status	Direct Business Only							9 Deposit-Type Contracts	
		2 Accident & Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 Federal Employees Health Benefits Program Premiums	6 Life & Annuity Premiums & Other Considerations	7 Property/Casualty Premiums	8 Total Columns 2 Through 7		
1. Alabama	AL	L	57,169	57,846,897	0	0			57,904,066	
2. Alaska	AK	N	0	0	0	0			0	
3. Arizona	AZ	L	20,156,458	124,175,239	0	0			144,331,697	
4. Arkansas	AR	L	427,406	105,370,506	0	0			105,797,912	
5. California	CA	N	0	0	0	0			0	
6. Colorado	CO	L	39,925,140	53,841,137	0	0			93,766,277	
7. Connecticut	CT	N	0	0	0	0			0	
8. Delaware	DE	N	0	0	0	0			0	
9. Dist. Columbia	DC	N	0	0	0	0			0	
10. Florida	FL	N	0	0	0	0			0	
11. Georgia	GA	N	0	0	0	0			0	
12. Hawaii	HI	N	0	0	0	0			0	
13. Idaho	ID	L	126,588	14,350,974	0	0			14,477,562	
14. Illinois	IL	L	64,179,054	187,794,827	0	43,818,733			295,792,614	
15. Indiana	IN	L	8,827,696	44,948,897	0	0			53,776,593	
16. Iowa	IA	N	0	0	0	0			0	
17. Kansas	KS	L	1,875,695	78,560,853	0	15,405,695			95,842,243	
18. Kentucky	KY	L	216,581,235	46,672,916	50,466,620	3,312,560			317,033,331	
19. Louisiana	LA	N	0	0	0	0			0	
20. Maine	ME	N	0	0	0	0			0	
21. Maryland	MD	N	0	0	0	0			0	
22. Massachusetts	MA	N	0	0	0	0			0	
23. Michigan	MI	N	0	0	0	0			0	
24. Minnesota	MN	N	0	0	0	0			0	
25. Mississippi	MS	N	0	0	0	0			0	
26. Missouri	MO	L	1,612,541	146,169,458	0	3,199			147,785,198	
27. Montana	MT	N	0	0	0	0			0	
28. Nebraska	NE	L	37,045	17,057,962	0	0			17,095,007	
29. Nevada	NV	L	1,868,939	244,617,929	0	0			246,486,868	
30. New Hampshire	NH	N	0	0	0	0			0	
31. New Jersey	NJ	N	0	0	0	0			0	
32. New Mexico	NM	L	43,133	14,893,786	0	0			14,936,919	
33. New York	NY	N	0	0	0	0			0	
34. North Carolina	NC	N	0	0	0	0			0	
35. North Dakota	ND	N	0	0	0	0			0	
36. Ohio	OH	N	0	0	0	0			0	
37. Oklahoma	OK	N	0	0	0	0			0	
38. Oregon	OR	N	0	0	0	0			0	
39. Pennsylvania	PA	N	0	0	0	0			0	
40. Rhode Island	RI	N	0	0	0	0			0	
41. South Carolina	SC	L	198,755	72,714,464	0	0			72,913,219	
42. South Dakota	SD	N	0	0	0	0			0	
43. Tennessee	TN	L	34,272,909	0	0	284,993			34,557,902	
44. Texas	TX	N	0	0	0	0			0	
45. Utah	UT	N	0	0	0	0			0	
46. Vermont	VT	N	0	0	0	0			0	
47. Virginia	VA	L	89,493	139,638,852	0	0			139,728,345	
48. Washington	WA	L	413,485	49,608,800	0	0			50,022,285	
49. West Virginia	WV	L	0	0	0	0			0	
50. Wisconsin	WI	N	0	0	0	0			0	
51. Wyoming	WY	N	0	0	0	0			0	
52. American Samoa	AS	N	0	0	0	0			0	
53. Guam	GU	N	0	0	0	0			0	
54. Puerto Rico	PR	N	0	0	0	0			0	
55. U.S. Virgin Islands	VI	N	0	0	0	0			0	
56. Northern Mariana Islands	MP	N	0	0	0	0			0	
57. Canada	CAN	N	0	0	0	0			0	
58. Aggregate other alien	OT	XXX	0	0	0	0	0	0	0	0
59. Subtotal	XXX		390,692,741	1,398,263,497	50,466,620	62,825,180	0	0	1,902,248,038	0
60. Reporting entity contributions for Employee Benefit Plans	XXX								0	
61. Total (Direct Business)	(a) 18		390,692,741	1,398,263,497	50,466,620	62,825,180	0	0	1,902,248,038	0
<b>DETAILS OF WRITE-INS</b>										
58001	XXX									
58002	XXX									
58003	XXX									
58998 Summary of remaining write-ins for Line 58 from overflow page	XXX		0	0	0	0	0	0	0	0
58999 Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX		0	0	0	0	0	0	0	0

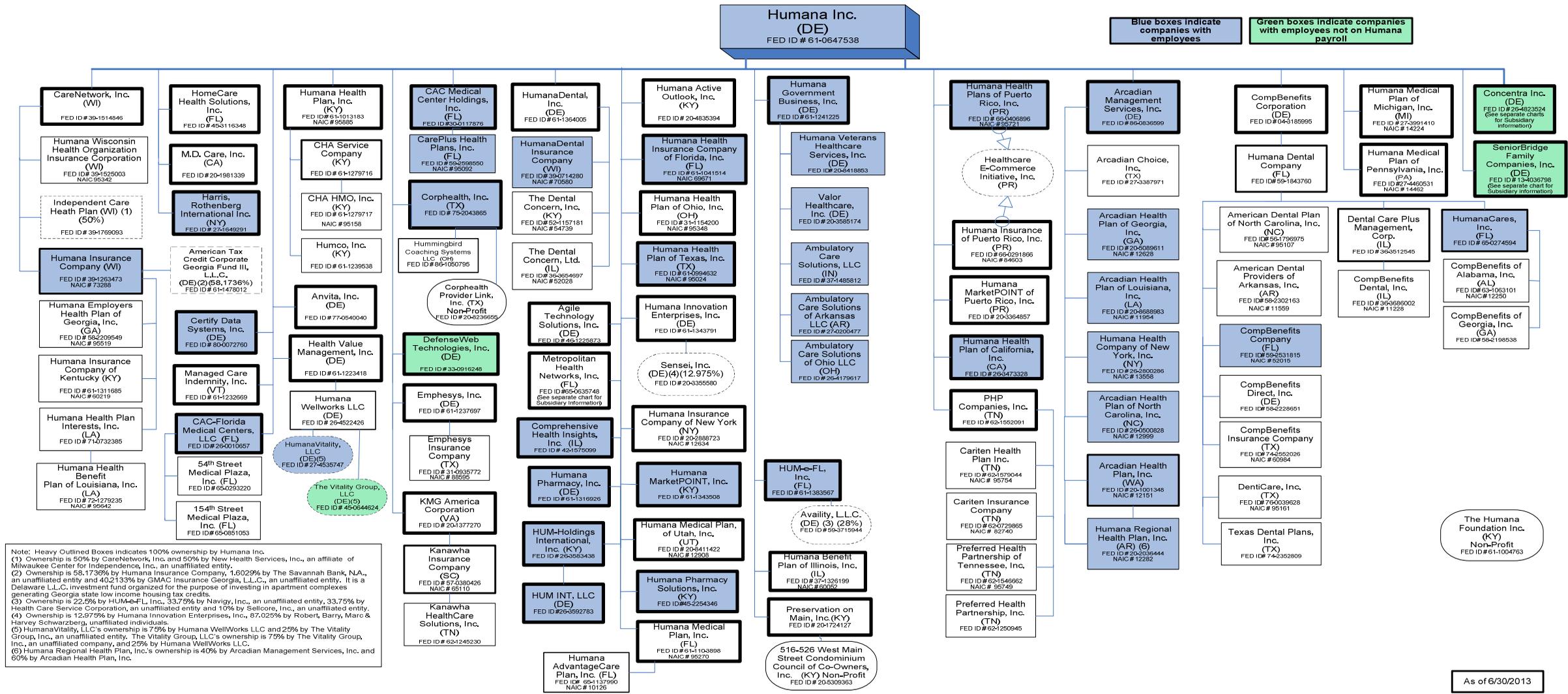
(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and other Alien.

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

15

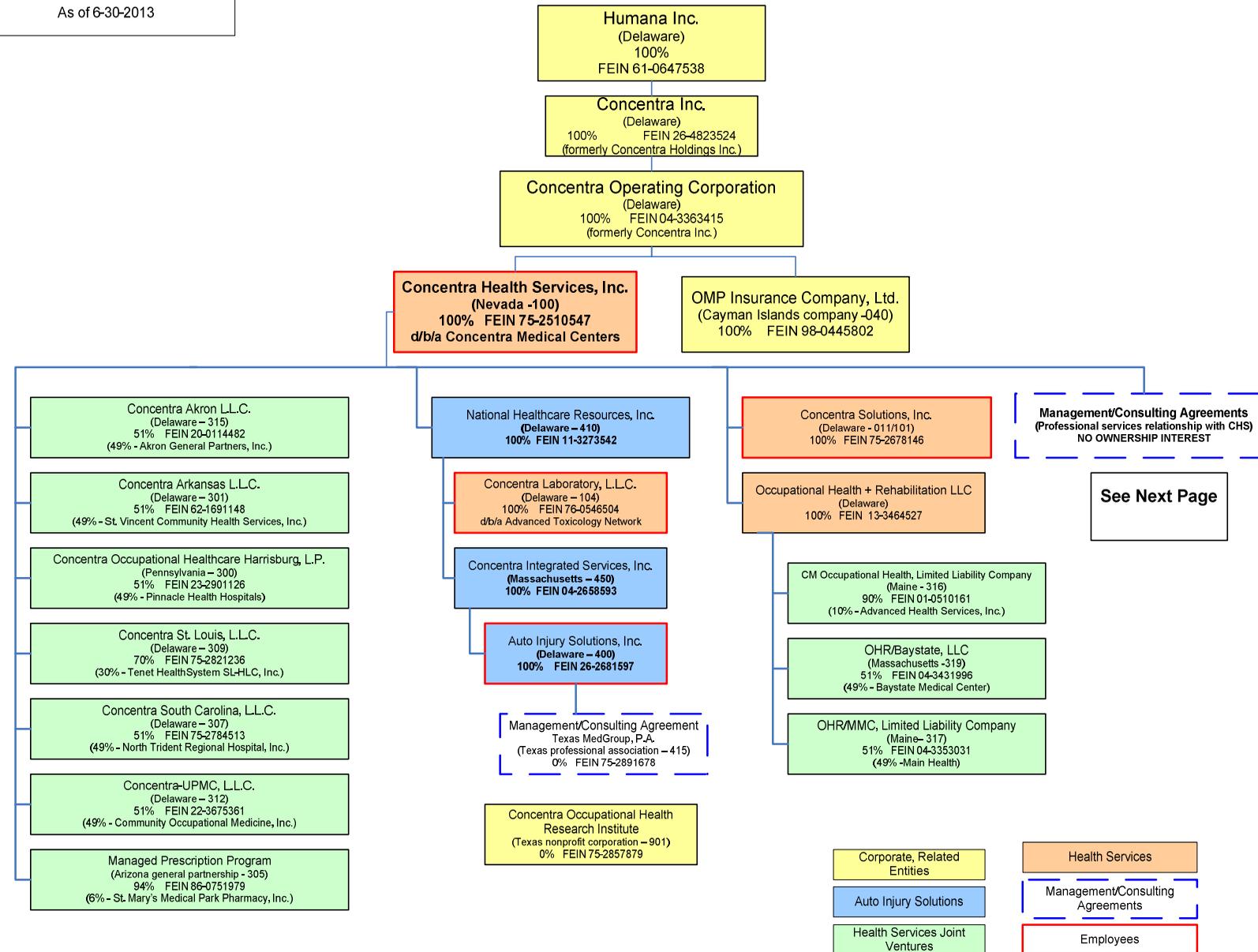


# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

As of 6-30-2013

15.1



STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

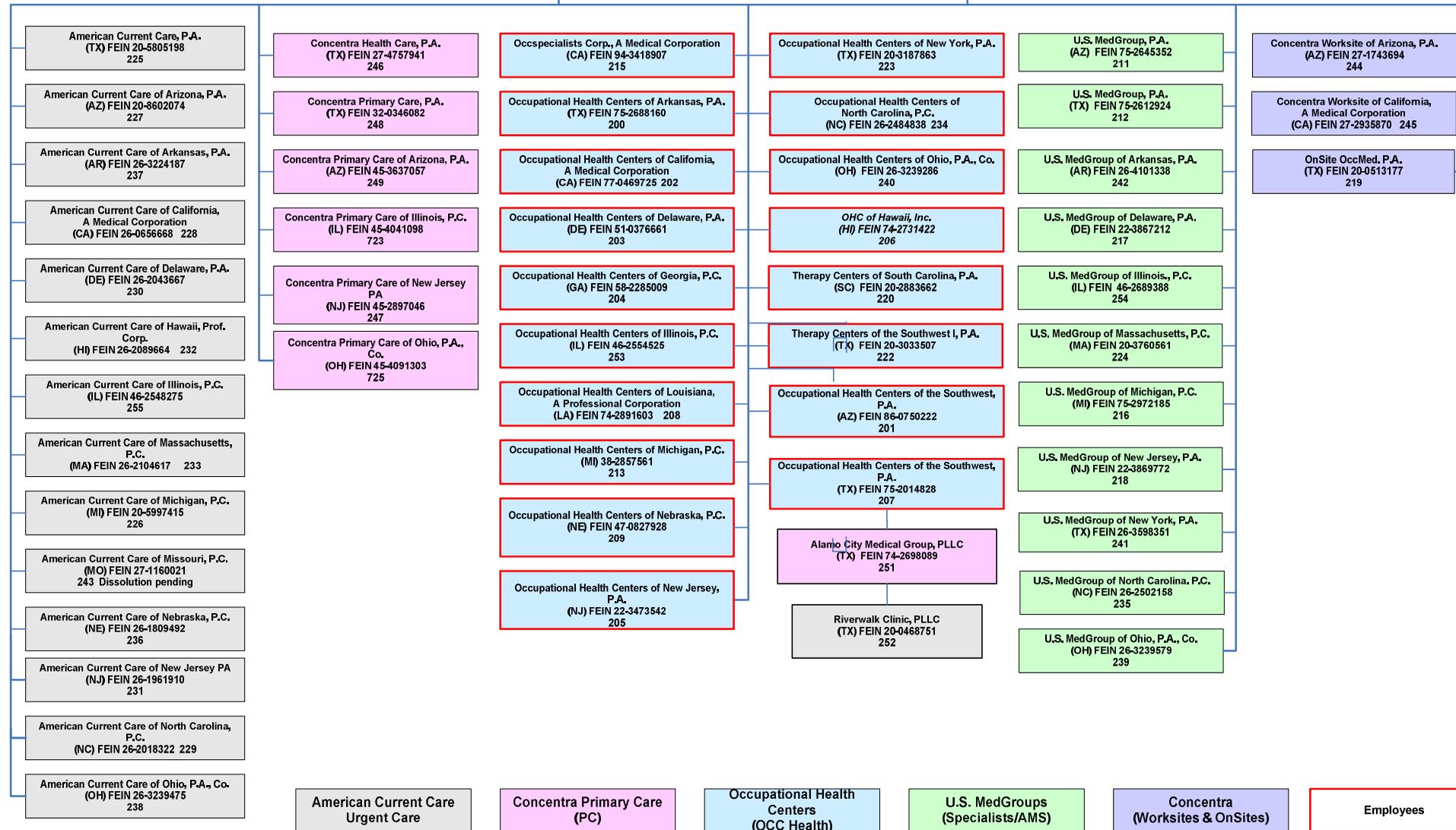
**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

As of 6-30-2013

Management/Consulting Agreements  
 (Professional services relationship with CHS)

NO OWNERSHIP INTEREST

15.2



American Current Care Urgent Care    Concentra Primary Care (PC)    Occupational Health Centers (OCC Health)    U.S. MedGroups (Specialists/AMS)    Concentra (Worksites & OnSites)    Employees

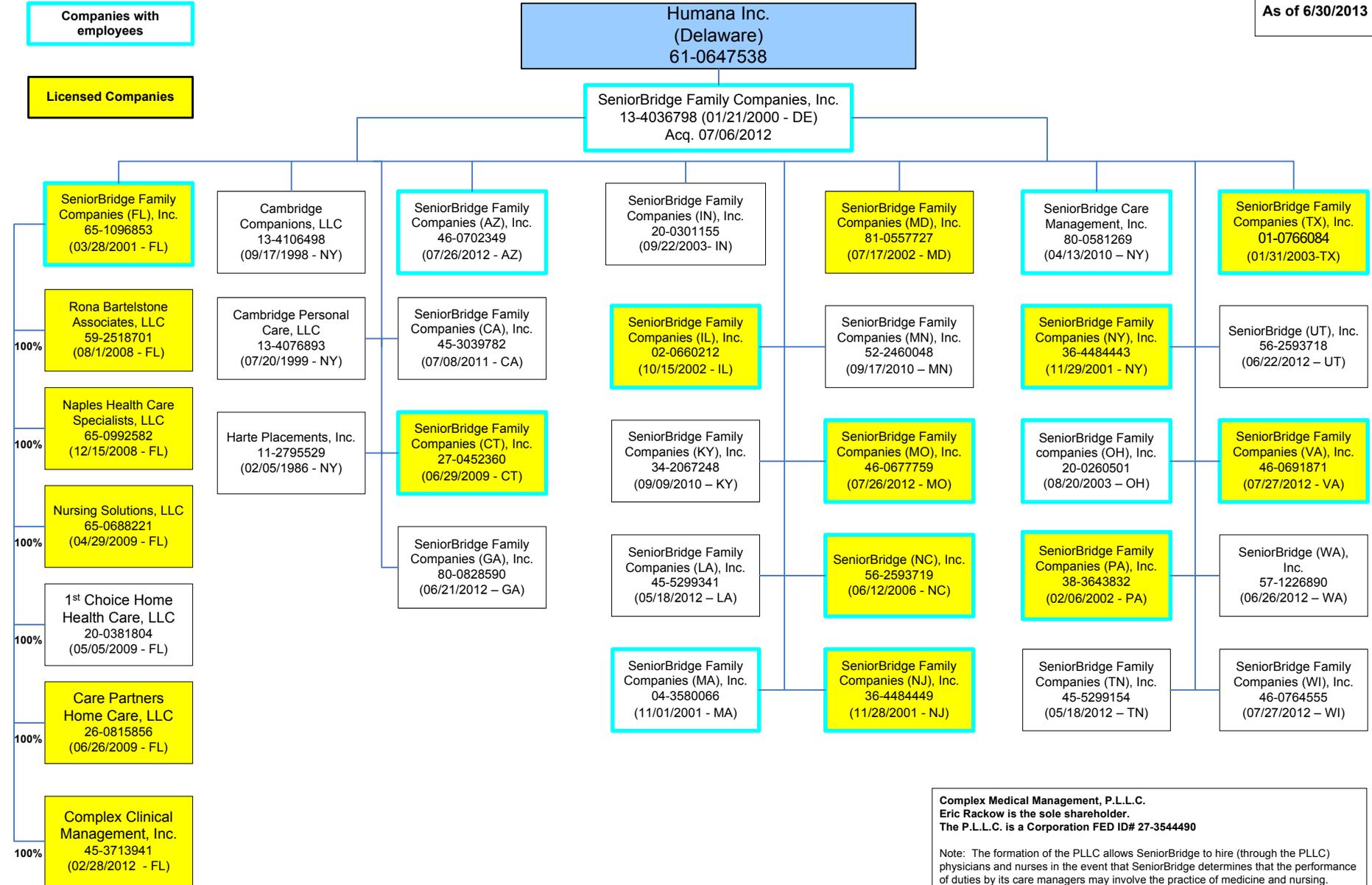
**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

As of 6/30/2013

Companies with employees

Licensed Companies

15.3

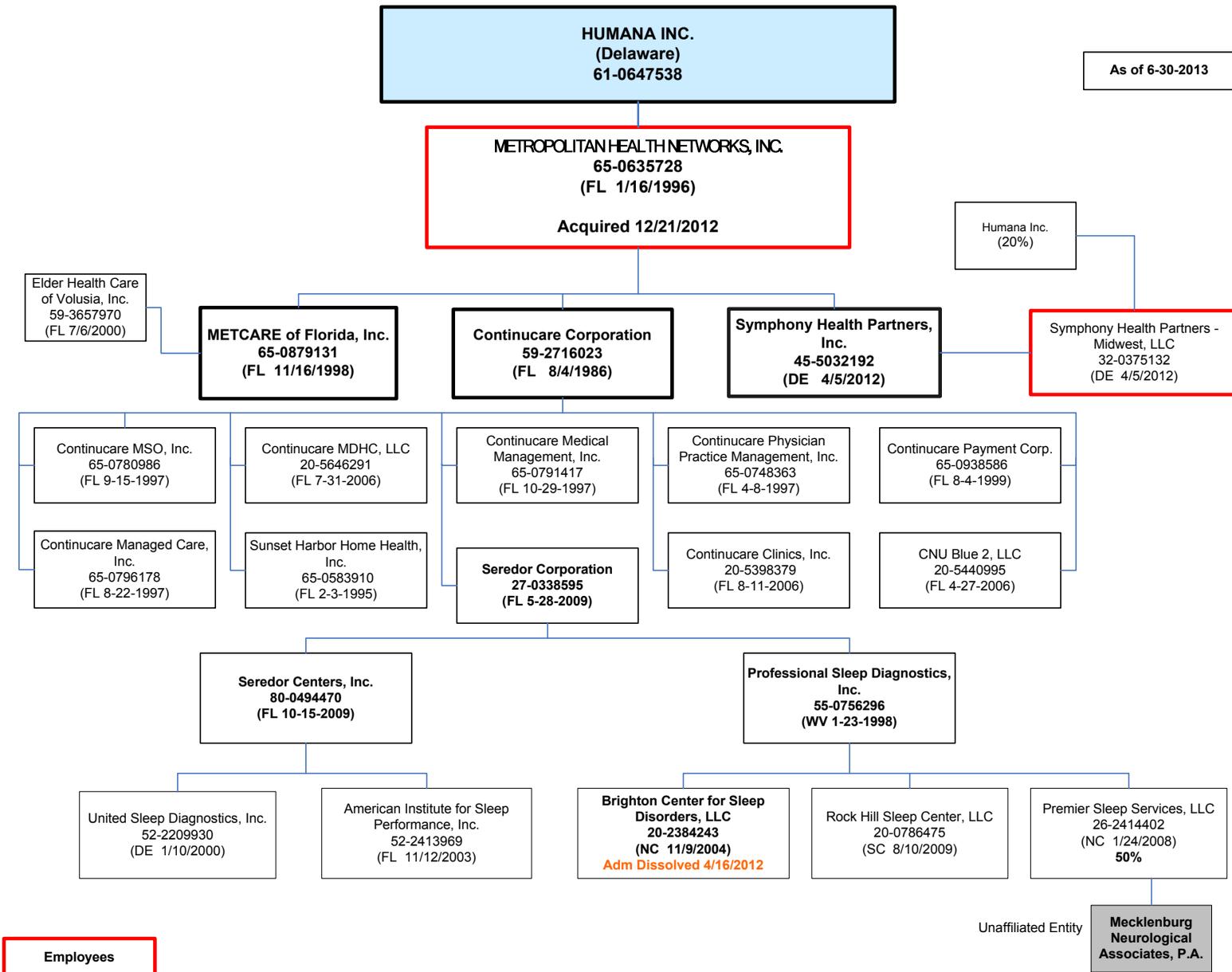


**Complex Medical Management, P.L.L.C.**  
 Eric Rackow is the sole shareholder.  
 The P.L.L.C. is a Corporation FED ID# 27-3544490

Note: The formation of the PLLC allows SeniorBridge to hire (through the PLLC) physicians and nurses in the event that SeniorBridge determines that the performance of duties by its care managers may involve the practice of medicine and nursing. **This arrangement between SeniorBridge and the PLLC only applies to its operations within New York State.**

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

15.4



STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, 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)	Name 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)	*
00119	Humana Inc	00000	39-1514846				CareNetwork, Inc.	WI	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	95885	61-1013183				Humana Health Plan, Inc.	KY	OTH	Humana Inc	Ownership	100.0	Humana Inc	.19
00119	Humana Inc	73288	39-1263473				Humana Insurance Company	WI	IA	CareNetwork, Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	95519	58-2209549				Humana Employers Health Plan of GA, Inc.	GA	IA	Humana Insurance Company	Ownership	100.0	Humana inc	.0
00119	Humana Inc	60219	61-1311685				Humana Insurance Company of Kentucky	KY	IA	Humana Insurance Company	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	54739	52-1157181				The Dental Concern, Inc.	KY	IA	HumanaDental, Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	52028	36-3654697				The Dental Concern, Ltd.	IL	IA	HumanaDental, Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	95342	39-1525003				Humana Wisc. Health Org. Ins. Corp.	WI	IA	CareNetwork, Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	61-1223418				Health Value Management, Inc.	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	69671	61-1041514				Humana Health Ins. Co. of Florida, Inc.	FL	IA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	95348	31-1154200				Humana Health Plan of Ohio, Inc.	OH	IA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	95024	61-0994632				Humana Health Plan of Texas, Inc.	TX	IA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	95270	61-1103898				Humana Medical Plan, Inc.	FL	IA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	61-1241225				Humana Government Business, Inc.	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	61-1232669				Managed Care Indemnity, Inc.	VT	IA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	61-1343508				Humana MarketPOINT, Inc.	KY	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	61-1239538				Humco, Inc.	KY	DS	Humana Health Plan, Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	95721	66-0406896				Humana Health Plans of Puerto Rico, Inc.	PR	IA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	84603	66-0291866				Humana Insurance of Puerto Rico, Inc.	PR	IA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	61-1364005				HumanaDental, Inc.	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	70580	39-0714280				HumanaDental Insurance Company	WI	IA	HumanaDental, Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	61-1237697				Empheysis, Inc.	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	88595	31-0935772				Empheysis Insurance Company	TX	IA	Empheysis, Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	61-0647538			NYSE	Humana Inc	DE	UDP	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	61-1316926				Humana Pharmacy, Inc.	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	61-1383567				HUM-e-FL, Inc.	FL	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	42-1575099				Comprehensive Health Insights, Inc.	IL	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	71-0732385				Humana Health Plan Interests, Inc.	LA	NIA	Humana Insurance Company	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	95642	72-1279235				Humana Health Benefit Plan of LA, Inc.	LA	IA	Humana Health Plan Interests, Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	61-1343791				Humana Innovation Enterprises, Inc.	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	20-1724127				Preservation on Main, Inc.	KY	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	26-0010657				CAC-Florida Medical Centers, LLC	FL	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	95092	59-2598550				CarePlus Health Plans, Inc.	FL	IA	CPHP Holdings, Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	75-2043865				Corphealth, Inc.	TX	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, 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)	Name 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)	*
00119	Humana Inc	00000	30-0117876				CAC Medical Center Holdings, Inc	FL	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	61-1478012				American Tax Credit Corp GA Fund III, LLC	DE	OTH	See Footnote 1	Other	0.0	Humana Inc	.1
00119	Humana Inc	00000	59-3715944				Availity, L.L.C	DE	OTH	See Footnote 2	Board of Directors	0.0	Humana Inc	.2
00119	Humana Inc	00000	61-1279716				CHA Service Company	KY	DS	Humana Health Plan, Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	95158	61-1279717				CHA HMO, Inc	KY	DS	CHA Service Company	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	20-2620891				Healthcare E-Commerce Initiative, Inc	PR	OTH	See Footnote 4	Other	0.0	Humana Inc	.4
00119	Humana Inc	00000	20-4835394				Humana Active Outlook, Inc	KY	NIA	Humana Inc	Ownership	100.0	Humana Inc	.4
00119	Humana Inc	00000	39-1769093				Independent Care Health Plan	WI	OTH	See Footnote 5	Other	100.0	Humana Inc	.5
00119	Humana Inc	00000	20-3355580				Sensei, Inc	DE	OTH	See Footnote 6	Other	0.0	Humana Inc	.6
00119	Humana Inc	00000	20-5309363				515-526W MainSt CondoCouncil of Co-Owners	KY	NIA	Preservation on Main, Inc	Ownership	100.0	Humana Inc	.6
00119	Humana Inc	00000	20-8236655				Corphealth Provider Link, Inc	TX	NIA	Corphealth, Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	33-0916248				DefenseWeb Technologies, Inc	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	12634	20-2888723				Humana Insurance Company of New York	NY	IA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	20-3364857				Humana MarketPOINT of Puerto Rico, Inc	PR	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	12908	20-8411422				Humana Medical Plan of Utah, Inc	UT	IA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	20-8418853				Humana Veterans Healthcare Services, Inc	DE	NIA	Humana Government Business, Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	95107	56-1796975				American Dental Plan of N. C., Inc	NC	IA	Humana Dental Company	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	11559	58-2302163				American Dental Providers of Ark., Inc	AR	IA	Humana Dental Company	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	52015	59-2531815				CompBenefits Company	FL	IA	Humana Dental Company	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	04-3185995				CompBenefits Corporation	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	59-1843760				Humana Dental Company	FL	NIA	CompBenefits Corporation	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	11228	36-3686002				CompBenefits Dental, Inc	IL	IA	Dental Care Plus Management Corporation	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	58-2228851				CompBenefits Direct, Inc	DE	NIA	Humana Dental Company	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	60984	74-2552026				CompBenefits Insurance Company	TX	IA	Humana Dental Company	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	12250	63-1063101				CompBenefits of Alabama, Inc	AL	IA	HumanaCares, Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	58-2198538				CompBenefits of Georgia, Inc	GA	IA	HumanaCares, Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	36-3512545				Dental Care Plus Management Corp	IL	NIA	Humana Dental Company	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	95161	76-0039628				DentiCare, Inc	TX	IA	Humana Dental Company	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	62-1245230				Kanawha HealthCare Solutions, Inc	TN	IA	Kanawha Insurance Company	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	65110	57-0380426				Kanawha Insurance Company	SC	IA	KMG America Corporation	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	20-1377270				KMG America Corporation	VA	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	65-0274594				HumanaCares, Inc	FL	NIA	Humana Dental Company	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	74-2352809				Texas Dental Plans, Inc	TX	IA	Humana Dental Company	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	95754	62-1579044				Cariten Health Plan Inc	TN	IA	PHP Companies, Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	82740	62-0729865				Cariten Insurance Company	TN	IA	PHP Companies, Inc	Ownership	100.0	Humana Inc	.0

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, 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)	Name 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)	*
00119	Humana Inc	10126	65-1137990				Humana AdvantageCare Plan, Inc.	FL	IA	Humana Medical Plan, Inc.	Ownership	100.0	Humana Inc	0
00119	Humana Inc	60052	37-1326199				Humana Benefit Plan of Illinois, Inc	IL	IA	Humana Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	26-3473328				Humana Health Plan of California, Inc	CA	IA	Humana Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	62-1552091				PHP Companies, Inc	TN	NIA	Humana Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	95749	62-1546662				Preferred Hlth Partnership of Tenn., Inc	TN	IA	PHP Companies, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	62-1250945				Preferred Health Partnership, Inc	TN	NIA	PHP Companies, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	26-4522426				Humana WellWorks LLC	DE	NIA	Health Value Management, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	26-4823524				Concentra Inc	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	14224	27-3991410				Humana Medical Plan of Michigan, Inc	MI	IA	Humana Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	14462	27-4660531				Humana Medical Plan of Pennsylvania, Inc	PA	IA	Humana Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	86-1050795				Hummingbird Coaching Systems LLC	OH	NIA	Corphealth, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	86-1050795				The Vitality Group, LLC	DE	OTH	See Footnote 7	Ownership	25.0	Humana Inc	7
00119	Humana Inc	00000	27-4535747				HumanaVitality, LLC	DE	OTH	See Footnote 7	Ownership	75.0	Humana Inc	7
00119	Humana Inc	00000	45-2254346				Humana Pharmacy Solutions, Inc	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	7
00119	Humana Inc	00000	45-3116348				HomeCare Health Solutions, Inc	FL	NIA	Humana Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	20-1981339				M.D. Care, Inc	CA	IA	Humana Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	77-0540040				Anvita, Inc	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	27-3387971				Arcadian Choice, Inc	TX	NIA	Arcadian Management Services, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	12628	20-5089611				Arcadian Health Plan of Georgia, Inc	GA	IA	Arcadian Management Services, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	11954	20-8688983				Arcadian Health Plan of Louisiana, Inc	LA	IA	Arcadian Management Services, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	13558	26-2800286				Arcadian Health Plan of New York, Inc	NY	IA	Arcadian Management Services, Inc	Ownership	100.0	Humana Inc	17
00119	Humana Inc	12999	26-0500828				Arcadian Heath Plan of North Carolina, Inc	NC	IA	Arcadian Management Services, Inc	Ownership	100.0	Humana Inc	17
00119	Humana Inc	12151	20-1001348				Arcadian Health Plan, Inc	WA	IA	Arcadian Management Services, Inc	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	86-0836599				Arcadian Management Services, Inc	DE	NIA	Arcadian Management Services, Inc	Ownership	100.0	Humana Inc	17
00119	Humana Inc	12282	20-2036444				Humana Regional Health Plan, Inc	AR	IA	Arcadian Management Services, Inc./Arcadia Health Plan, Inc	Ownership	100.0	Humana Inc	18
00119	Humana Inc	00000	20-3585174				Valor Healthcare, Inc	DE	NIA	Humana Government Business, Inc	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	27-1649291				Harris, Rothenberg International Inc	NY	NIA	Humana Inc	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	13-4036798				SeniorBridge Family Companies, Inc	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	17

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STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, 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)	Name 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)	*
00119	Humana Inc	00000	27-0200477				Ambulatory Care Solutions of Arkansas LLC	AR	NIA	Humana Government Business, Inc.	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	26-4179617				Ambulatory Care Solutions of Ohio LLC	OH	NIA	Humana Government Business, Inc.	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	37-1485812				Ambulatory Care Solutions, LLC	IN	NIA	Humana Government Business, Inc.	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	65-0293220				54th Street Medical Plaza, Inc.	FL	NIA	CAC-Florida Medical Centers, LLC	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	65-0851053				154th Street Medical Plaza, Inc.	FL	NIA	CAC-Florida Medical Centers, LLC	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	46-1225873				Agile Technology Solutions, Inc.	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	80-0072760				Certify Data Systems, Inc.	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	8
00119	Humana Inc	00000	26-3583438				HUM-Holdings International, Inc.	KY	NIA	Humana Inc	Ownership	100.0	Humana Inc	
00119	Humana Inc	00000	26-3592783				HUM INT, LLC	DE	NIA	HUM-Holdings International, Inc.	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	20-8602074				American Current Care of Arizona, P.A.	AZ	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	26-3224187				American Current Care of Arkansas, P.A.	AR	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	26-0656668				Amer Current Care of CA, A Med. Corp.	CA	NIA	See Footnote 17	Board of Directors	100.0	Humana Inc	17
00119	Humana Inc	00000	26-2043667				American Current Care of DE, P.A.	DE	NIA	See Footnote 17	Board of Directors	100.0	Humana Inc	17
00119	Humana Inc	00000	26-2089664				American Current Care of HI, Prof. Corp.	HI	NIA	See Footnote 17	Board of Directors	100.0	Humana Inc	17
00119	Humana Inc	00000	26-2104617				American Current Care of MA, P.C.	MA	NIA	See Footnote 17	Board of Directors	100.0	Humana Inc	17
00119	Humana Inc	00000	20-5997415				American Current Care of Michigan, P.C.	MI	NIA	See Footnote 17	Board of Directors	100.0	Humana Inc	17
00119	Humana Inc	00000	27-1160021				American Current Care of Missouri, P.C.	MO	NIA	See Footnote 17	Board of Directors	100.0	Humana Inc	17
00119	Humana Inc	00000	26-1809492				American Current Care of Nebraska, P.C.	NE	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	26-1961910				American Current Care of New Jersey PA	NJ	NIA	See Footnote 17	Board of Directors	100.0	Humana Inc	17
00119	Humana Inc	00000	26-2018322				American Current Care of NC, P.C.	NC	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	26-3239475				American Current Care of Ohio, P.A., Co	OH	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	20-5805198				American Current Care, P.A.	TX	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	26-2681597				Auto Injury Solutions, Inc.	DE	NIA	Concentra Integrated Services, Inc.	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	01-0510161				CM Occupational Health, L.L.C.	ME	NIA	See Footnote 8	Joint Venture	0.0	Humana Inc	8
00119	Humana Inc	00000	20-0114482				Concentra Akron, L.L.C.	DE	NIA	See Footnote 9	Joint Venture	100.0	Humana Inc	9

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STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, 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)	Name 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)	*
00119	Humana Inc	00000	62-1691148				Concentra Arkansas, L.L.C	DE	NIA	See Footnote 10	Joint Venture	0.0	Humana Inc	10
00119	Humana Inc	00000	75-2510547				Concentra Health Services, Inc.	NV	NIA	Concentra Operating Corporation	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	26-4823524				Concentra Inc	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	04-3363415				Concentra Operating Corporation	DE	NIA	Concentra Inc	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	04-2658593				Concentra Integrated Services, Inc	MA	NIA	National Healthcare Resources, Inc	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	76-0546504				Concentra Laboratory, L.L.C	DE	NIA	National Healthcare Resources, Inc	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	75-2857879				Concentra Occ Health Research Institute	TX	NIA	Concentra Health Services, Inc	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	23-2901126				Concentra Occ Healthcare Harrisburg, L.P	PA	NIA	See Footnote 11	Joint Venture	0.0	Humana Inc	11
00119	Humana Inc	00000	75-2678146				Concentra Solutions, Inc	DE	NIA	Concentra Health Services, Inc	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	75-2784513				Concentra South Carolina, L.L.C	DE	NIA	See Footnote 12	Joint Venture	0.0	Humana Inc	12
00119	Humana Inc	00000	75-2821236				Concentra St. Louis, L.L.C	DE	NIA	See Footnote 13	Joint Venture	0.0	Humana Inc	13
00119	Humana Inc	00000	27-1743694				Concentra Worksite of Arizona, P.A	AZ	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	27-2935870				Concentra Worksite of CA, A Med. Corp.	CA	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	22-3675361				Concentra-UPMC, L.L.C	DE	NIA	See Footnote 14	Joint Venture	0.0	Humana Inc	14
00119	Humana Inc	00000	86-0751979				Managed Prescription Program	AZ	NIA	Concentra Health Services, Inc	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	11-3273542				National Healthcare Resources, Inc	DE	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	94-3418907				Occspecialists Corp., A Medical Corp	CA	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	75-2688160				Occupational Health Centers of AR, P.A.	TX	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	77-0469725				Occ Health Centers of CA, A Med. Corp.	CA	NIA	See Footnote 17	Board of Directors	100.0	Humana Inc	17
00119	Humana Inc	00000	51-0376661				Occupational Health Centers of DE, P.A.	DE	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	58-2285009				Occupational Health Centers of GA, P.C.	GA	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	74-2891603				Occ Health Centers of LA, A Prof. Corp.	LA	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	38-2857561				Occupational Health Centers of MI, P.C.	MI	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	47-0827928				Occupational Health Centers of NE, P.C.	NE	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	22-3473542				Occupational Health Centers of NJ, P.A.	NJ	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	20-3187863				Occupational Health Centers of NY, P.A.	TX	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, 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)	Name 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)	*
00119	Humana Inc	00000	26-2484838				Occupational Health Centers of NC, P.C.	NC	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	26-3239286				Occ Health Centers of OH, P.A., Co.	OH	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	86-0750222				Occ Health Centers of the Southwest, P.A.	AZ	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	75-2014828				Occ Health Centers of the Southwest, P.A.	TX	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	74-2731442				OHC of Hawaii, Inc.	HI	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	04-3353031				OHR/Baystate, LLC	MA	NIA	See Footnote 15	Joint Venture	0.0	Humana Inc	15
00119	Humana Inc	00000	04-3353031				OHR/MMC, Limited Liability Company	ME	NIA	See Footnote 16	Joint Venture	100.0	Humana Inc	16
00119	Humana Inc	00000	98-0445802				OMP Insurance Company, Ltd.	TX	NIA	Concentra Operating Corporation	Ownership	100.0	Humana Inc	17
00119	Humana Inc	00000	20-0513177				OnSite OccMed, P.A.	TX	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	20-2883662				Therapy Centers of South Carolina, P.A.	SC	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	20-3033507				Therapy Centers of the Southwest I, P.A.	TX	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	26-4101338				U.S. MedGroup of Arkansas, P.A.	AR	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	22-3867212				U.S. MedGroup of Delaware, P.A.	DE	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	20-3760561				U.S. MedGroup of Massachusetts, P.C.	MA	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	75-2972185				U.S. MedGroup of Michigan, P.C.	MI	NIA	See Footnote 17	Board of Directors	100.0	Humana Inc	17
00119	Humana Inc	00000	22-3869772				U.S. MedGroup of New Jersey, P.A.	NJ	NIA	See Footnote 17	Board of Directors	100.0	Humana Inc	17
00119	Humana Inc	00000	26-3598351				U.S. MedGroup of New York, P.A.	TX	NIA	See Footnote 17	Board of Directors	100.0	Humana Inc	17
00119	Humana Inc	00000	26-2502158				U.S. MedGroup of North Carolina, P.C.	NC	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	26-3239579				U.S. MedGroup of Ohio, P.A., Co.	OH	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	75-2612924				U.S. MedGroup, P.A.	TX	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	75-2645352				U.S. MedGroup, P.A.	AZ	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	13-3464527				Occupational Health + Rehabilitation LLC	DE	NIA	Concentra Health Services, Inc.	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	27-4757941				Concentra Health Care, P.A.	TX	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	32-0346082				Concentra Primary Care, P.A.	TX	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17

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STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, 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)	Name 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)	*
00119	Humana Inc	00000	45-2897046				Concentra Primary Care of New Jersey PA	NJ	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	75-2891678				Texas MedGroup, P.A.	TX	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	45-3637057				Concentra Primary Care of Arizona, PA	AZ	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	45-4041098				Concentra Primary Care of Illinois, P.C	IL	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	45-4091303				Concentra Primary Care of Ohio, P.A., Co	OH	NIA	See Footnote 17	Board of Directors	0.0	Humana Inc	17
00119	Humana Inc	00000	46-2548275				American Current Care of Illinois, P.C	IL	NIA	See Footnote 17	Other	0.0	Humana Inc	17
00119	Humana Inc	00000	46-2554525				Occupational Health Centers of Illinois, P.C	IL	NIA	See Footnote 17	Other	0.0	Humana Inc	17
00119	Humana Inc	00000	46-2689388				U.S. MedGroup of Illinois, P.C.	IL	NIA	See Footnote 17	Other	0.0	Humana Inc	17
00119	Humana Inc	00000	74-2698089				Alamo City Medical Group, PLLC	TX	NIA	See Footnote 17	Other	0.0	Humana Inc	17
00119	Humana Inc	00000	20-0468751				Riverwalk Clinic, PLLC	TX	NIA	See Footnote 17	Other	0.0	Humana Inc	17
00119	Humana Inc	00000	13-4036798				SeniorBridge Family Companies, Inc.	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	65-1096853				SeniorBridge Family Companies (FL), Inc.	FL	NIA	SeniorBridge Family Companies, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	46-0702349				SeniorBridge Family Companies (AZ), Inc.	AZ	NIA	SeniorBridge Family Companies, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	45-3039782				SeniorBridge Family Companies (CA), Inc.	CA	NIA	SeniorBridge Family Companies, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	27-0452360				SeniorBridge Family Companies (CT), Inc.	CT	NIA	SeniorBridge Family Companies, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	80-0828590				SeniorBridge Family Companies (GA), Inc.	GA	NIA	SeniorBridge Family Companies, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	20-0301155				SeniorBridge Family Companies (IN), Inc.	IN	NIA	SeniorBridge Family Companies, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	02-0660212				SeniorBridge Family Companies (IL), Inc.	IL	NIA	SeniorBridge Family Companies, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	34-2067248				SeniorBridge Family Companies (KY), Inc.	KY	NIA	SeniorBridge Family Companies, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	45-5299341				SeniorBridge Family Companies (LA), Inc.	LA	NIA	SeniorBridge Family Companies, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	04-3580066				SeniorBridge Family Companies (MA), Inc.	MA	NIA	SeniorBridge Family Companies, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	81-0557727				SeniorBridge Family Companies (MD), Inc.	MD	NIA	SeniorBridge Family Companies, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	52-2460048				SeniorBridge Family Companies (MN), Inc.	MN	NIA	SeniorBridge Family Companies, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	46-0677759				SeniorBridge Family Companies (MO), Inc.	MO	NIA	SeniorBridge Family Companies, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	56-2593719				SeniorBridge (NC), Inc.	NC	NIA	SeniorBridge Family Companies, Inc	Ownership	100.0	Humana Inc	0

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, 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)	Name 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)	*
00119	Humana Inc	00000	36-4484449				SeniorBridge Family Companies (NJ), Inc.	NJ	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	36-4484443				SeniorBridge Family Companies (NY), Inc.	NY	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	20-0260501				SeniorBridge Family Companies (OH), Inc.	OH	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	38-3643832				SeniorBridge Family Companies (PA), Inc.	PA	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	45-5299154				SeniorBridge Family Companies (TN), Inc.	TN	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	01-0766084				SeniorBridge Family Companies (TX), Inc.	TX	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	56-2593718				SeniorBridge (UT), Inc.	UT	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	46-0691871				SeniorBridge Family Companies (VA), Inc.	VA	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	57-1226890				SeniorBridge (WA), Inc.	WA	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	46-0764555				SeniorBridge Family Companies (WI), Inc.	WI	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	80-0581269				SeniorBridge Care Management, Inc.	NY	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	13-4106498				Cambridge Companions, LLC	NY	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	13-4076893				Cambridge Personal Care, LLC	NY	NIA	SeniorBridge Family Companies, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	59-2518701				Rona Bartelstone Associates, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	65-0992582				Naples Health Care Specialists, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	65-0688221				Nursing Solutions, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	20-0381804				1st Choice Home Health Care, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	26-0815856				Care Partners Home Care, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	45-3713941				Complex Clinical Management, Inc.	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	11-2795529				Harte Placements, Inc.	NY	NIA	SeniorBridge Family Companies (NY), Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	65-0635728				Metropolitan Health Networks, Inc.	FL	NIA	Humana Inc	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	65-0879131				METCARE of Florida, Inc.	FL	NIA	Metropolitan Health Networks, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	59-2716023				Continuicare Corporation	FL	NIA	Metropolitan Health Networks, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	45-5032192				Symphony Health Partners, Inc.	DE	NIA	Metropolitan Health Networks, Inc.	Ownership	100.0	Humana Inc	.0
00119	Humana Inc	00000	65-0780986				Continuicare MSO, Inc.	FL	NIA	Continuicare Corporation	Ownership	100.0	Humana Inc	.0

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, 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)	Name 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)	*
00119	Humana Inc	00000	20-5646291				Continuicare MDHC, LLC	FL	NIA	Continuicare Corporation	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	27-0338595				Seredor Corporation	FL	NIA	Continuicare Corporation	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	65-0791417				Continuicare Medical Management, Inc.	FL	NIA	Continuicare Corporation	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	32-0375132				Symphony Health Partners - Midwest, LLC	DE	NIA	80% Symphony Health Partners, Inc. / 20% Humana Inc	Ownership	0.0		20
00119	Humana Inc	00000	80-0494470				Seredor Centers, Inc	FL	NIA	Seredor Corporation	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	55-0756296				Professional Sleep Diagnostics, Inc.	WV	NIA	Seredor Corporation	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	52-2209930				United Sleep Diagnostics, Inc.	DE	NIA	Seredor Centers, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	52-2413969				American Institute for Sleep Performance, Inc.	FL	NIA	Seredor Centers, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	20-2384243				Brighton Center for Sleep Disorders, LLC	NC	NIA	Professional Sleep Diagnostics, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	20-0786475				Rock Hill Sleep Center, LLC	SC	NIA	Professional Sleep Diagnostics, Inc	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	26-2414402				Premier Sleep Services, LLC	NC	NIA	Professional Sleep Diagnostics, Inc	Ownership	0.0		21
00119	Humana Inc	00000	65-0748363				Continuicare Physician Practice Management, Inc.	FL	NIA	Continuicare Corporation	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	65-0938586				Continuicare Payment Corp.	FL	NIA	Continuicare Corporation	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	20-5398379				Continuicare Clinics, Inc.	FL	NIA	Continuicare Corporation	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	20-5440995				CNU Blue 2, LLC	FL	NIA	Continuicare Corporation	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	65-0796178				Continuicare Managed Care, Inc.	FL	NIA	Continuicare Corporation	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	65-0583910				Sunset Harbor Home Health, Inc.	FL	NIA	Continuicare Corporation	Ownership	100.0	Humana Inc	0
00119	Humana Inc	00000	59-3657970				Elder Health Care of Volusia, Inc.	FL	NIA	METCARE of Florida, Inc.	Ownership	100.0	Humana Inc	0

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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	Green Ribbon Health, L.L.C., a Delaware limited liability company, was formed on December 14, 2004 to enter into a joint venture with Humana Innovation Enterprises, Inc. and Pfizer Health Solutions, Inc. to implement the Centers for Medicare and Medicaid Disease Management Program. Humana Innovation Enterprises, Inc., a subsidiary of Humana Inc., is a Member with a 50% ownership interest and Pfizer Health Solutions, Inc., a subsidiary of Pfizer, Inc. is a Member with a 50% ownership interest.
4	Healthcare E-Commerce Initiative, Inc., a Puerto Rico non-profit corporation, formed for the purpose of promoting an electronic bill processing and other e-commerce transactions to the providers of health care services in Puerto Rico. This is a joint venture with 5 members including Cooperativa de Seguros de Vida de Puerto Rico, Inc., La Cruz Azul de Puerto Rico, Inc., Medical Card System, Inc., MMM Healthcare, Inc. and Humana Insurance of Puerto Rico, Inc. jointly with Humana Health Plans of Puerto Rico, Inc. Each of the 5 members has an equal vote.

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

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

Asterisk	Explanation
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	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.
9	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.
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.
17	Professional Services Relationship/Agreement with Concentra health Services, Inc.
18	Ownership is 60% Arcadian Health Plan, Inc., 40% Arcadian Management Services, Inc.
19	Reporting company.
20	Ownership is 80% Symphony Health Partners, Inc. and 20% Humana Inc. of Symphony Health Partners Midwest, LLC.
21	Premier Sleep Services, LLC (50% is owned by an unaffiliated entity) and 50% is owned by Professional Sleep Diagnostics, Inc. which itself is owned 100% by Seredor Corporation, which itself is owned 100% by Continucare Corporation, which is owned 100% by Metropolitan Health Networks, Inc., which is owned 100% by Humana Inc.

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

RESPONSE

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

.....NO.....

**Explanation:**

1. This type of business is not written.

**Bar Code:**

1.   
9 5 8 8 5 2 0 1 3 3 6 5 0 0 0 0 2

**OVERFLOW PAGE FOR WRITE-INS**

MQ002 Additional Aggregate Lines for Page 02 Line 25.

\*ASSETS

	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
2504. Deposits.....	1,886,253	1,886,253	0	0
2505. Prepaid Expenses.....	177,626	177,626	0	0
2597. Summary of remaining write-ins for Line 25 from Page 02	2,063,879	2,063,879	0	0

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**SCHEDULE A – VERIFICATION**

Real Estate

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		0
2.2 Additional investment made after acquisition .....		0
3. Current year change in encumbrances .....		0
4. Total gain (loss) on disposals .....		0
5. Deduct amounts received on disposals .....		0
6. Total foreign exchange change in book/adjusted carrying value .....		0
7. Deduct current year's other than temporary impairment recognized .....		0
8. Deduct current year's depreciation .....		0
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8) .....	0	0
10. Deduct total nonadmitted amounts .....	0	0
11. Statement value at end of current period (Line 9 minus Line 10) .....	0	0

**NONE**

**SCHEDULE B – VERIFICATION**

Mortgage Loans

	1 Year To Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year .....	27,600,000	27,600,000
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		0
2.2 Additional investment made after acquisition .....		0
3. Capitalized deferred interest and other .....		0
4. Accrual of discount .....		0
5. Unrealized valuation increase (decrease) .....		0
6. Total gain (loss) on disposals .....		0
7. Deduct amounts received on disposals .....		0
8. Deduct amortization of premium and mortgage interest points and commitment fees .....		0
9. Total foreign exchange change in book value/recorded investment excluding accrued interest .....		0
10. Deduct current year's other than temporary impairment recognized .....		0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) .....	27,600,000	27,600,000
12. Total valuation allowance .....		0
13. Subtotal (Line 11 plus Line 12) .....	27,600,000	27,600,000
14. Deduct total nonadmitted amounts .....	0	0
15. Statement value at end of current period (Line 13 minus Line 14) .....	27,600,000	27,600,000

**SCHEDULE BA – VERIFICATION**

Other Long-Term Invested Assets

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		0
2.2 Additional investment made after acquisition .....		0
3. Capitalized deferred interest and other .....		0
4. Accrual of discount .....		0
5. Unrealized valuation increase (decrease) .....		0
6. Total gain (loss) on disposals .....		0
7. Deduct amounts received on disposals .....		0
8. Deduct amortization of premium and depreciation .....		0
9. Total foreign exchange change in book/adjusted carrying value .....		0
10. Deduct current year's other than temporary impairment recognized .....		0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) .....	0	0
12. Deduct total nonadmitted amounts .....	0	0
13. Statement value at end of current period (Line 11 minus Line 12) .....	0	0

**NONE**

**SCHEDULE D – VERIFICATION**

Bonds and Stocks

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	499,604,771	384,650,176
2. Cost of bonds and stocks acquired .....	134,054,683	222,516,063
3. Accrual of discount .....	64,545	104,926
4. Unrealized valuation increase (decrease) .....	(24,486)	852,238
5. Total gain (loss) on disposals .....	704,008	1,961,048
6. Deduct consideration for bonds and stocks disposed of .....	113,783,978	106,023,522
7. Deduct amortization of premium .....	2,655,160	4,456,158
8. Total foreign exchange change in book/adjusted carrying value .....		0
9. Deduct current year's other than temporary impairment recognized .....		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	517,964,383	499,604,771
11. Deduct total nonadmitted amounts .....	0	0
12. Statement value at end of current period (Line 10 minus Line 11) .....	517,964,383	499,604,771

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**SCHEDULE D - PART 1B**

Showing the Acquisitions, Dispositions and Non-Trading Activity  
During the Current Quarter for all Bonds and Preferred Stock by Rating Class

	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. Class 1 (a).....	451,075,308	1,577,375,676	1,626,554,440	(1,207,130)	451,075,308	400,689,414	.0	393,144,328
2. Class 2 (a).....	104,571,931	4,628,645	4,517,180	(1,678,473)	104,571,931	103,004,923	.0	102,086,381
3. Class 3 (a).....	10,273,556		478,787	1,468,508	10,273,556	11,263,277	.0	10,252,920
4. Class 4 (a).....	2,436,017			(189)	2,436,017	2,435,828	.0	2,441,430
5. Class 5 (a).....	.0				.0	.0	.0	.0
6. Class 6 (a).....	0				0	0	0	0
7. Total Bonds	568,356,812	1,582,004,321	1,631,550,407	(1,417,284)	568,356,812	517,393,442	0	507,925,059
<b>PREFERRED STOCK</b>								
8. Class 1.....	.0				.0	.0	.0	.0
9. Class 2.....	.0				.0	.0	.0	.0
10. Class 3.....	.0				.0	.0	.0	.0
11. Class 4.....	.0				.0	.0	.0	.0
12. Class 5.....	.0				.0	.0	.0	.0
13. Class 6.....	0				0	0	0	0
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	568,356,812	1,582,004,321	1,631,550,407	(1,417,284)	568,356,812	517,393,442	0	507,925,059

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$ .....30,933,072 ; NAIC 2 \$ .....0 ;  
NAIC 3 \$ .....0 ; NAIC 4 \$ .....0 ; NAIC 5 \$ .....0 ; NAIC 6 \$ .....0

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**SCHEDULE DA - PART 1**

## Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
9199999	21,933,102	XXX	21,933,102	2,606	0

**SCHEDULE DA - VERIFICATION**

## Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	8,380,057	25,697,990
2. Cost of short-term investments acquired .....	1,098,608,808	1,877,946,425
3. Accrual of discount .....		0
4. Unrealized valuation increase (decrease).....		0
5. Total gain (loss) on disposals .....		0
6. Deduct consideration received on disposals .....	1,085,055,763	1,895,264,358
7. Deduct amortization of premium.....		0
8. Total foreign exchange change in book/adjusted carrying value.....		0
9. Deduct current year's other than temporary impairment recognized.....		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	21,933,102	8,380,057
11. Deduct total nonadmitted amounts.....		0
12. Statement value at end of current period (Line 10 minus Line 11)	21,933,102	8,380,057

Schedule DB - Part A - Verification

**NONE**

Schedule DB - Part B - Verification

**NONE**

Schedule DB - Part C - Section 1

**NONE**

Schedule DB - Part C - Section 2

**NONE**

Schedule DB - Verification

**NONE**

**SCHEDULE E - VERIFICATION**

(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	31,448,958	20,399,889
2. Cost of cash equivalents acquired .....	1,971,859,037	2,826,416,348
3. Accrual of discount .....	37,125	62,047
4. Unrealized valuation increase (decrease) .....		0
5. Total gain (loss) on disposals.....	2,848	(2,306)
6. Deduct consideration received on disposals .....	1,994,347,998	2,815,427,020
7. Deduct amortization of premium .....		0
8. Total foreign exchange change in book/adjusted carrying value .....		0
9. Deduct current year's other than temporary impairment recognized .....		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	8,999,970	31,448,958
11. Deduct total nonadmitted amounts .....		0
12. Statement value at end of current period (Line 10 minus Line 11)	8,999,970	31,448,958

Schedule A - Part 2

**NONE**

Schedule A - Part 3

**NONE**

Schedule B - Part 2

**NONE**

Schedule B - Part 3

**NONE**

Schedule BA - Part 2

**NONE**

Schedule BA - Part 3

**NONE**

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

**SCHEDULE D - PART 3**

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation or Market Indicator (a)
<b>Bonds - U.S. Governments</b>									
912828-EE-6	UNITED STATES TREASURY GOVERNMENT		04/30/2013	NOMURA SECURITIES		332,192	300,000	6,191	1
912828-PJ-3	US TREASURY N/B GOVERNMENT		04/16/2013	NOMURA SECURITIES		257,013	250,000	1,303	1
<b>0599999 - Bonds - U.S. Governments</b>						589,205	550,000	7,494	XXX
<b>Bonds - U.S. States, Territories and Possessions</b>									
040654-VE-2	ARIZONA ST TRANSN BRD HWY REV MUNI		04/12/2013	PIPER JAFFREY		2,283,084	1,800,000	19,500	1FE
05914F-NR-7	BALTIMORE COUNTY MUNI		04/12/2013	MERRILL LYNCH		3,727,530	3,000,000	52,083	1FE
199491-6U-0	COLUMBUS OHIO MUNI		04/12/2013	WELLS FARGO		3,828,030	3,000,000	25,833	1FE
235219-DT-6	DALLAS TEX MUNI		04/12/2013	MORGAN STANLEY		3,740,670	3,000,000	25,833	1FE
866407-F6-1	SUMNER COUNTY TENN MUNI		04/12/2013	TD SECURITIES		3,619,350	3,000,000	56,667	1FE
<b>1799999 - Bonds - U.S. States, Territories and Possessions</b>						17,198,664	13,800,000	179,916	XXX
<b>Bonds - U.S. Political Subdivisions of States, Territories and Possessions</b>									
442403-GW-5	HOUSTON TEX INDPT SCH DIST MUNI		04/12/2013	WELLS FARGO		3,185,300	2,500,000	21,875	1FE
546593-AE-4	L&J CNTY KY - JEWISH ST. MARYS		06/12/2013	J.P. MORGAN		3,156,590	2,575,000	57,830	1FE
<b>2499999 - Bonds - U.S. Political Subdivisions of States, Territories and Possessions</b>						6,341,890	5,075,000	79,705	XXX
<b>Bonds - U.S. Special Revenue</b>									
303820-8E-7	FAIRFAX COUNTY VA MUNI		04/12/2013	BARCLAYS CAPITAL		3,844,590	3,000,000	34,583	1FE
303891-XV-2	FAIRFAX CNTY VA WTR AUTH WTR MUNI		04/12/2013	WELLS FARGO		3,859,035	3,100,000	6,889	1FE
3138EK-GE-9	FNMA 30YR TBA FNMA		06/07/2013	MERRILL LYNCH		3,929,588	3,784,136	4,415	1
3138W1-40-7	FED NTL MTG ASSO 30YR		04/03/2013	CITIGROUP GLOBAL MARKETS INC		6,986,521	6,748,734	5,624	1
3138WP-JE-5	FNMA 15YR		04/09/2013	MORGAN STANLEY		8,358,125	8,000,000	8,333	1
3138WU-5W-9	FED NTL MTG ASSO FNMA		06/07/2013	BARCLAYS CAPITAL		1,143,313	1,100,000	1,283	1
<b>3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Government and Their Political Subdivisions</b>						28,121,172	25,732,870	61,127	XXX
<b>Bonds - Industrial and Miscellaneous (Unaffiliated)</b>									
224044-AG-2	COX COMMUNICATIONS CORPORATE		04/24/2013	WELLS FARGO		4,628,645	3,500,000	99,337	2FE
<b>3899999 - Bonds - Industrial and Miscellaneous (Unaffiliated)</b>						4,628,645	3,500,000	99,337	XXX
<b>8399997 - Subtotals - Bonds - Part 3</b>						56,879,576	48,657,870	427,579	XXX
<b>8399999 - Subtotals - Bonds</b>						56,879,576	48,657,870	427,579	XXX
<b>9999999 Totals</b>						56,879,576	XXX	427,579	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues .....

STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's (Amortization)/Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)
<b>Bonds - U.S. Governments</b>																					
313463-ZB-9...	FEDERAL HOME LOAN MTGE CO AGCY FTST		04/15/2013	NOMURA SECURITIES		3,024,300	3,000,000	3,073,800	3,042,885		(21,586)		(21,586)		3,021,298		3,002	3,002	64,000	07/31/2019	1FE
313560-PP-2...	FED NTL MTG ASSO AGCY FTST		04/15/2013	CITIGROUP GLOBAL MARKETS INC		7,368,375	7,350,000	7,350,000	7,350,000				0		7,350,000		18,375	18,375	42,058	09/20/2017	1FE
313560-RL-9...	FED NTL MTG ASSO AGCY FTST		04/15/2013	NOMURA SECURITIES		3,497,725	3,500,000	3,499,300	3,499,293		44		44		3,499,337		(1,612)	(1,612)	25,166	10/29/2019	1FE
36202E-VP-1...	GOVERNMENT NATIONAL MORTGAGE GNMA		06/20/2013	MBS PAYDOWN		507,932	507,932	511,503	508,521		(589)		(589)		507,932			0	12,636	08/01/2038	1
912828-HY-9...	UNITED STATES TREASURY GOVERNMENT		04/30/2013	VARIOUS		300,000	300,000	301,313	300,078		(78)		(78)		300,000			0	9,375	04/30/2013	1
<b>0599999 - Bonds - U.S. Governments</b>						14,698,332	14,657,932	14,735,916	14,700,777	0	(22,209)	0	(22,209)	0	14,678,567	0	19,765	19,765	153,235	XXX	XXX
<b>Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions</b>																					
31288D-U8-0...	FREDDIE MAC FHLMC		06/01/2013	MBS PAYDOWN		270	270	279	270				0		270			0	7	12/01/2032	1
31286P-TZ-6...	FED NTL MTG ASSO FNMA		06/01/2013	MBS PAYDOWN		5,502	5,502	5,671	5,517		(15)		(15)		5,502			0	127	01/01/2017	1
3128M1-CR-8...	FHLMC PC GOLD		06/01/2013	MBS PAYDOWN		140,378	140,378	148,932	141,598		(1,220)		(1,220)		140,378			0	2,928	04/01/2021	1
3128M1-LB-3...	COMB 15YR FGOLD		06/01/2013	MBS PAYDOWN		123,358	123,358	130,875	124,401		(1,043)		(1,043)		123,358			0	2,576	12/01/2020	1
3128M1-NZ-8...	FHLMC FGOLD 15YR		06/01/2013	MBS PAYDOWN		149,134	149,134	158,222	150,380		(1,246)		(1,246)		149,134			0	3,085	12/01/2020	1
3128M1-PJ-2...	FHLMC FGOLD 15YR GIANT		06/01/2013	MBS PAYDOWN		71,737	71,737	76,109	72,336		(599)		(599)		71,737			0	1,497	05/01/2021	1
3128M1-R7-6...	FHLMC FGOLD 15YR GIANT		06/01/2013	MBS PAYDOWN		112,926	112,926	119,808	113,882		(956)		(956)		112,926			0	2,347	05/01/2021	1
3128M1-SY-6...	FHLMC FGOLD 30 YR		06/01/2013	MBS PAYDOWN		69,565	69,565	73,804	70,198		(633)		(633)		69,565			0	1,469	12/01/2021	1
3128M6-P2-8...	FNMA FGOLD 15YR GIANT		06/01/2013	MBS PAYDOWN		129,703	129,703	131,137	129,891		(188)		(188)		129,703			0	3,253	06/01/2038	1
3128MB-N7-8...	FHLMC FGOLD 15YR FNMA		06/01/2013	MBS PAYDOWN		36,551	36,551	38,778	36,862		(311)		(311)		36,551			0	729	12/01/2021	1
3128PY-WA-8...	FGOLD 15YR FNMA		04/30/2013	VARIOUS		7,796,340	7,412,914	7,744,179	7,742,447		(24,885)		(24,885)		7,717,561		78,779	78,779	83,781	05/01/2027	1
3128PY-Y3-2...	FGOLD 15YR FNMA		06/01/2013	MBS PAYDOWN		22,248	22,248	23,266	22,314		(66)		(66)		22,248			0	280	04/01/2027	1
312942-NM-3...	FGOLD 30 YR FNMA		06/01/2013	MBS PAYDOWN		242,642	242,642	248,746	243,426		(784)		(784)		242,642			0	4,487	09/01/2040	1
312971-BM-5...	FGOLD 15YR FHLMC		06/01/2013	MBS PAYDOWN		123,179	123,179	130,685	124,069		(890)		(890)		123,179			0	2,793	04/01/2020	1
312971-C0-5...	FGOLD 15YR FHLMC		06/01/2013	MBS PAYDOWN		28,518	28,518	30,256	28,913		(395)		(395)		28,518			0	592	04/01/2020	1
312971-F0-2...	FGOLD 15YR FHLMC		06/01/2013	MBS PAYDOWN		340,661	340,661	361,421	343,333		(2,672)		(2,672)		340,661			0	7,073	04/01/2020	1
312971-MS-0...	FGOLD 15YR FHLMC		06/01/2013	MBS PAYDOWN		50,808	50,808	53,904	51,289		(481)		(481)		50,808			0	1,007	05/01/2020	1
312972-DX-7...	FGOLD 15YR FHLMC		06/01/2013	MBS PAYDOWN		51,774	51,774	54,929	52,085		(311)		(311)		51,774			0	1,054	04/01/2020	1
312972-EK-4...	FGOLD 15YR FHLMC		06/01/2013	MBS PAYDOWN		49,043	49,043	52,032	49,397		(354)		(354)		49,043			0	1,032	04/01/2020	1
312972-GT-3...	FGOLD 15YR FHLMC		06/01/2013	MBS PAYDOWN		168,513	168,513	178,781	171,750		(3,237)		(3,237)		168,513			0	3,133	04/01/2020	1
312972-GZ-9...	FGOLD 15YR FHLMC		06/01/2013	MBS PAYDOWN		16,198	16,198	17,185	16,579		(381)		(381)		16,198			0	338	04/01/2020	1
3132HR-NC-0...	FEDERAL HOME LOAN MTGE CO FHLMC		06/01/2013	MBS PAYDOWN		267,149	267,149	277,793			(164)		(164)		267,149			0	2,664	01/01/2043	1
31336W-CP-2...	FGOLD 15YR FHLMC		06/01/2013	MBS PAYDOWN		55,301	55,301	58,670	55,785		(484)		(484)		55,301			0	1,128	10/01/2020	1
31371K-NX-5...	FED NTL MTG ASSO FNMA		06/01/2013	MBS PAYDOWN		26,517	26,517	27,443	26,588		(70)		(70)		26,517			0	603	05/01/2017	1
3138EE-HB-8...	FED NTL MTG ASSO 30YR FNMA		06/01/2013	MBS PAYDOWN		164,379	164,379	174,466	164,999		(620)		(620)		164,379			0	2,810	06/01/2042	1
3138EK-G7-4...	FANNIE MAE FNMA		06/01/2013	MBS PAYDOWN		355,953	355,953	376,587			(244)		(244)		355,953			0	2,310	08/01/2042	1
3138EK-GK-5...	FED NTL MTG ASSO FNMA		06/27/2013	VARIOUS		1,857,037	1,768,724	1,912,433	1,919,072		(16,131)		(16,131)		1,902,941		(45,905)	(45,905)	37,292	09/01/2042	1

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STATEMENT AS OF JUNE 30, 2013 OF THE Humana Health Plan, Inc.

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22	
										11	12	13	14	15								
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's (Amortization)/Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)	
3138LV-2K-8...	FED NTL MTG ASSO 30YR	FNMA	06/01/2013	MBS PAYDOWN		128,032	128,032	135,714	128,200		(168)		(168)		128,032			.0	1,966	07/01/2042	1	
3138LY-6U-6...	FED NTL MTG ASSO 15YR	FNMA	04/09/2013	VARIOUS		3,744,245	3,589,977	3,710,578	3,716,435		(11,570)		(11,570)		3,704,865		39,381	39,381	33,616	07/01/2027	1	
3138M3-OH-0...	FED NTL MTG ASSO 15YR	FNMA	04/09/2013	VARIOUS		3,960,192	3,797,719	3,949,628	3,949,292		(8,392)		(8,392)		3,940,899		19,292	19,292	35,544	07/01/2027	1	
3138W1-40-7...	FED NTL MTG ASSO 30YR	FNMA	06/01/2013	MBS PAYDOWN		64,994	64,994	67,284			(11)		(11)		64,994			.0	257	03/01/2043	1	
3138WP-JE-5...	FNMA 15YR		06/01/2013	VARIOUS		2,679,994	2,567,494	2,682,430			2,735		2,735		2,682,163		(2,168)	(2,168)	5,075	04/01/2028	1	
31392G-UZ-6...	FED NTL MTG ASSO 94: HQ	FNMA	06/01/2013	MBS PAYDOWN		103,818	103,818	109,658	104,731		(913)		(913)		103,818			.0	1,906	01/25/2018	1	
31396A-MX-9...	FEDERAL HOME LOAN MTGE CO FHLMC		06/01/2013	MBS PAYDOWN		44,466	44,466	45,651	44,573		(107)		(107)		44,466			.0	1,016	09/01/2035	1	
31398V-TM-8...	CMO		06/01/2013	VARIOUS		4,863,598	4,723,270	5,059,619	5,043,376		(31,825)		(31,825)		5,011,551		(147,953)	(147,953)	89,264	02/01/2039	1	
31406Y-4E-7...	FNMA 30YR		06/01/2013	MBS PAYDOWN		51,940	51,940	54,456	52,443		(503)		(503)		51,940			.0	1,022	05/01/2035	1	
31410F-Z2-4...	FED NTL MTG ASSO 15YR	FNMA	06/01/2013	MBS PAYDOWN		95,772	95,772	94,395	95,624		148		148		95,772			.0	1,990	07/01/2020	1	
31415W-PB-3...	FNMA 30YR		06/01/2013	MBS PAYDOWN		513,576	513,576	547,781	520,076		(6,500)		(6,500)		513,576			.0	11,553	11/01/2038	1	
31416B-4X-3...	FED NTL MTG ASSO 15YR	FNMA	06/01/2013	MBS PAYDOWN		968,043	968,043	1,038,074	978,393		(10,351)		(10,351)		968,043			.0	22,361	01/01/2022	1	
31416W-LC-4...	FED NTL MTG ASSO 30YR	FNMA	06/24/2013	VARIOUS		22,561,721	21,447,099	22,341,845	22,297,652		(120,725)		(120,725)		22,176,926		384,795	384,795	536,349	07/01/2040	1	
31418W-QP-8...	FNMA		06/01/2013	MBS PAYDOWN		106,258	106,258	111,521	107,002		(744)		(744)		106,258			.0	1,798	08/01/2025	1	
462590-JD-3...	IOWA STUDENT LN LIQUIDITY CORP		06/03/2013	CALLED SECURITY at 100.000		470,000	470,000	470,000	470,000				.0		470,000			.0	10,869	12/01/2019	1FE	
<b>3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions</b>						52,812,033	50,656,103	53,025,025	49,365,178	0	(247,306)	0	(247,306)	0	52,485,812	0	326,221	326,221	924,981	XXX	XXX	
<b>Bonds - Industrial and Miscellaneous (Unaffiliated)</b>																						
05946X-BV-4...	BANK OF AMERICA FDG CO 2003-1		06/20/2013	CALLED SECURITY at 100.000		807	807	824	822		(15)		(15)		807			.0	21	05/20/2033	1FM	
15189Y-AB-2...	CENTERPOINT ENERGY INC CORPORATE		04/01/2013	MATURITY		400,000	400,000	461,432	405,178		(5,178)		(5,178)		400,000			.0	15,750	04/01/2013	2FE	
21079U-AB-1...	CONTINENTAL AIRLINES CORPORATE		05/10/2013	CALLED SECURITY at 100.000		45,829	45,829	48,121	47,378		(1,549)		(1,549)		45,829			.0	2,120	05/10/2017	3FE	
22025Y-AK-6...	CORRECTIONS CORPORATION OF AMERICA		04/04/2013	CALLED SECURITY at 102.000		280,500	275,000	290,469	285,419		(544)		(544)		284,875		(4,375)	(4,375)	7,282	06/01/2017	3FE	
247361-ZH-4...	DELTA AIR LINES INC CORPORATE		05/23/2013	CALLED SECURITY at 100.000		144,048	144,048	144,048	144,048				.0		144,048			.0	3,565	11/23/2019	2FE	
34529F-AD-9...	FORD MOTOR CREDIT ABS FTST		06/01/2013	MBS PAYDOWN		225,509	225,509	240,299	226,524		(1,015)		(1,015)		225,509			.0	4,149	11/15/2014	1FE	
46629G-AE-8...	JP MORGAN COM MTG 2006-CIBC16		06/12/2013	CALLED SECURITY at 100.000		26,847	26,847	26,980	26,972		(125)		(125)		26,847			.0	745	05/01/2045	1FM	
50075N-AY-0...	KRAFT FOODS INC CORPORATE		05/08/2013	MATURITY		1,425,000	1,425,000	1,421,167	1,424,525		475		475		1,425,000			.0	18,703	05/08/2013	2FE	
57772K-AA-9...	MAXIM INTEGRATED PRODUCTS INC CORPORATE		06/14/2013	MATURITY		700,000	700,000	699,132	699,845		155		155		700,000			.0	12,075	06/14/2013	2FE	
74432N-AA-0...	PRUDENTIAL COVERED TRUST SESI LLC		04/01/2013	CALLED SECURITY at 100.000		345,500	345,500	345,500	345,500				.0		345,500			.0	5,177	09/30/2015	2FE	
78412F-AF-1...	CORPORATE		05/24/2013	CALLED SECURITY at 100.000		38,000	38,000	37,426	37,871		36		36		37,907		93	93	1,255	06/01/2014	3FE	
795770-AN-6...	SALTON SEA FUNDING CORP CORPORATE		05/30/2013	CALLED SECURITY at 100.000		2,573	2,573	2,888	2,738		(165)		(165)		2,573			.0	96	11/30/2018	2FE	
807066-AG-0...	SCHOLASTIC CORP CORPORATE		04/15/2013	MATURITY		90,000	90,000	78,413	89,351		649		649		90,000			.0	2,250	04/15/2013	3FE	
88732J-AK-4...	TIME WARNER CORPORATE		06/24/2013	WELLS FARGO		1,500,960	1,500,000	1,533,255	1,503,868		(3,809)		(3,809)		1,500,060		900	900	91,967	07/01/2013	2FE	
90345K-AA-8...	US AIRWAYS GROUP INC CORPORATE		04/22/2013	CALLED SECURITY at 100.000		20,175	20,175	20,175	20,175				.0		20,175			.0	630	10/22/2024	3FE	
<b>3899999 - Bonds - Industrial and Miscellaneous (Unaffiliated)</b>						5,245,748	5,239,288	5,350,129	5,260,214	0	(11,085)	0	(11,085)	0	5,249,130	0	(3,382)	(3,382)	165,785	XXX	XXX	
<b>8399997 - Subtotals - Bonds - Part 4</b>						72,756,113	70,553,323	73,111,070	69,326,169	0	(280,600)	0	(280,600)	0	72,413,509	0	342,604	342,604	1,244,001	XXX	XXX	
<b>8399999 - Subtotals - Bonds</b>						72,756,113	70,553,323	73,111,070	69,326,169	0	(280,600)	0	(280,600)	0	72,413,509	0	342,604	342,604	1,244,001	XXX	XXX	
<b>9999999 Totals</b>						72,756,113	XXX	73,111,070	69,326,169	0	(280,600)	0	(280,600)	0	72,413,509	0	342,604	342,604	1,244,001	XXX	XXX	

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues .....

EO5.1

Schedule DB - Part A - Section 1

**NONE**

Schedule DB - Part B - Section 1

**NONE**

Schedule DB - Part D - Section 1

**NONE**

Schedule DB - Part D - Section 2

**NONE**

Schedule DL - Part 1

**NONE**

Schedule DL - Part 2

**NONE**



