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HEALTH QUARTERLY STATEMENT

AS OF March 31, 2002

OF THE CONDITION AND AFFAIRS OF THE

DELTA DENTAL PLAN OF OHIO, INC.

NAIC Group Code 0477 (Current Period), 0477 (Prior Period) NAIC Company Code 54402 Employer's ID Number 31-0685339

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

Country of Domicile

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

Date Incorporated or Organized 03/06/1960 Date Commenced Business 04/01/1964

Statutory Home Office 2500 Corporate Exchange Drive, Bldg 3, Suite 230 (Street and Number), Columbus, OH 43231-7601 (City, or Town, State and Zip Code)

Main Administrative Office 4100 Okemos Road (Street and Number)
Okemos, MI 48864 (City or Town, State and Zip Code) (517)349-6000 x (Area Code) (Telephone Number)

Mail Address P.O. Box 30416 (Street and Number or P.O. Box), Lansing, MI 48909-7916 (City, or Town, State and Zip Code)

Primary Location of Books and Records 4100 Okemos Road (Street and Number)
Okemos, MI 48864 (City, or Town, State and Zip Code) (517)349-6000 x (Area Code) (Telephone Number)

Internet Website Address http://ddpoh.com/

Statutory Statement Contact Richard A. Tomlinson (Name) (517)349-6000 x (Area Code)(Telephone Number)(Extension)
rtomlinson@ddpmi.com (E-Mail Address) (517)381-5572 x (Fax Number)

Policyowner Relations Contact (Street and Number)
(City, or Town, State and Zip Code) (Area Code) (Telephone Number)(Extension)

OFFICERS

President	Thomas J. Fleszar
Chairperson	Larry Metzger, D.D.S.
Secretary	James P. Hallan
Treasurer	Thomas P. Moore, II

VICE CHAIRPERSON

Jeffrey A. Keller

DIRECTORS OR TRUSTEES

Frank Buzaki, Jr.	Jack W. Gottschalk. D.D.S.
Penelope K. Majeske, Ph.D.	Thomas P. Moore, II
Ann M. Flermoen, D.D.S.	Laura O. Stearns
Colleen G. Vienna, D.D.S.	Lawrence D. Crawford, D.D.S.
Beach B. Hall	Jeffrey A. Keller
Larry Metzger, D.D.S.	Michael T. Schaeffer, D.D.S.
Kelly Jubb Scheiderer, RHIA, MHA	Steven B. Stratton
James P. Hallan	

State of Michigan
County of Ingham ss

The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of the said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manuals 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.

(Signature)	(Signature)	(Signature)
Thomas J. Fleszar	James P. Hallan	Thomas P. Moore, II
(Printed Name)	(Printed Name)	(Printed Name)
President	Secretary	Treasurer

Subscribed and sworn to before me this
_________ day of _________ , 2002

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

(Notary Public Signature)

ASSETS

		Current Period 1 Assets	Current Period 2 Nonadmitted Assets	Current Period 3 Net Admitted Assets	Prior Year 4 Net Admitted Assets
1.	Bonds	13,707,259		13,707,259	13,709,760
2.	Stocks:				
	2.1 Preferred stocks				
	2.2 Common stocks	1,773,060		1,773,060	1,743,800
3.	Mortgage loans on real estate:				
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less $................ encumbrances)			(a)	
	4.2 Properties held for the production of income (less $................ encumbrances)				
	4.3 Properties held for sale (less $................ encumbrances)				
5.	Cash ($.....(6,109,084)) and short-term investments ($......16,709,755)	10,600,670		10,600,670	10,559,778
6.	Other long-term invested assets				
7.	Receivable for securities				
8.	Aggregate write-ins for invested assets				
9.	Subtotal cash and invested assets (Lines 1 to 8)	26,080,989		26,080,989	26,013,338
10.	Accident and health premiums due and unpaid	4,344,584		4,344,584	1,765,771
11.	Health care receivables				
12.	Amounts recoverable from reinsurers				
13.	Net adjustment in assets and liabilities due to foreign exchange rates				
14.	Investment income due and accrued	237,954		237,954	309,991
15.	Amounts due from parent, subsidiaries and affiliates	16,608		16,608	219,828
16.	Amounts receivable relating to uninsured accident and health plans	6,768,189		6,768,189	6,471,695
17.	Furniture and equipment				
18.	Amounts due from agents				
19.	Federal and foreign income tax recoverable and interest thereon (including $................ net deferred tax asset)				
20.	Electronic data processing equipment and software				
21.	Other nonadmitted assets				
22.	Aggregate write-ins for other than invested assets	453,608		453,608	658,325
23.	Total assets (Lines 9 plus 10 through 22)	37,901,932		37,901,932	35,438,948
DETAILS OF WRITE-INS					
0801					
0802					
0803					
0898.	Summary of remaining write-ins for Line 8 from overflow page				
0899.	TOTALS (Lines 0801 through 0803 plus 0898) (Line 8 above)				
2201.	Stabilization Reserve Withhold	427,973		427,973	442,762
2202.	Other Miscellanous	25,635		25,635	215,563
2203.	Other Miscellaneous				
2298.	Summary of remaining write-ins for Line 22 from overflow page				
2299.	TOTALS (Lines 2201 through 2203 plus 2298) (Line 22 above)	453,608		453,608	658,325

(a) $................ health care delivery assets included in Line 4.1, Column 3.

LIABILITIES, CAPITAL AND SURPLUS

		Current Period 1 Covered	Current Period 2 Uncovered	Current Period 3 Total	Prior Year 4 Total
1.	Claims unpaid (less $................ reinsurance ceded)	7,762,000		7,762,000	7,831,000
2.	Accrued medical incentive pool and bonus payments				
3.	Unpaid claims adjustment expenses				
4.	Aggregate policy reserves				
5.	Aggregate claim reserves				
6.	Premiums received in advance	1,701,334		1,701,334	827,235
7.	General expenses due or accrued	1,308,758		1,308,758	1,354,454
8.	Federal and foreign income tax payable and interest thereon (including $................ on realized capital gains (losses) (including $................ net deferred tax liability)				
9.	Amounts withheld or retained for account of others	4,550,240		4,550,240	3,748,154
10.	Borrowed money (including $................ current) and interest thereon $................ (including $................ current)				
11.	Amounts due to parent, subsidiaries and affiliates	1,125,824		1,125,824	344,180
12.	Payable for securities				
13.	Funds held under reinsurance treaties with ($................ authorized reinsurers and $................ unauthorized reinsurers)				
14.	Reinsurance in unauthorized companies				
15.	Net adjustments in assets and liabilities due to foreign exchange rates				
16.	Liability for amounts held under uninsured accident and health plans	2,776,461		2,776,461	2,825,462
17.	Aggregate write-ins for other liabilities (including $.........107,161 current)	107,161		107,161	26,790
18.	Total liabilities (Lines 1 to 17)	19,331,778		19,331,778	16,957,275
19.	Common capital stock	XXX	XXX		
20.	Preferred capital stock	XXX	XXX		
21.	Gross paid in and contributed surplus	XXX	XXX	9,655,323	9,655,323
22.	Surplus notes	XXX	XXX	5,358,061	5,358,061
23.	Aggregate write-ins for other surplus funds	XXX	XXX	3,637	3,637
24.	Unassigned funds (surplus)	XXX	XXX	3,553,134	3,464,652
25.	Less treasury stock, at cost:	XXX	XXX		
	25.1 ... . shares common (value included in Line 19 $................)	XXX	XXX		
	25.2 ... . shares preferred (value included in Line 20 $................)	XXX	XXX		
26.	Total capital and surplus (Lines 19 to 24, Less 25)	XXX	XXX	18,570,155	18,481,673
27.	Total liabilities, capital and surplus (Lines 18 and 26)	XXX	XXX	37,901,933	35,438,948
DETAILS OF WRITE-INS					
1701.	0				
1702.	Accrued Interest on Surplus Note	107,161		107,161	26,790
1703					
1798.	Summary of remaining write-ins for Line 17 from overflow page				
1799.	TOTALS (Lines 1701 through 1703 plus 1798) (Line 17 above)	107,161		107,161	26,790
2301.	Assigned funds	XXX	XXX	3,637	3,637
2302		XXX	XXX		
2303		XXX	XXX		
2398.	Summary of remaining write-ins for Line 23 from overflow page	XXX	XXX		
2399.	TOTALS (Lines 2301 through 2303 plus 2398) (Line 23 above)	XXX	XXX	3,637	3,637

STATEMENT OF REVENUE AND EXPENSES

		Current Year to Date		Prior Year
		1 Uncovered	2 Total	3 Total
1.	Member Months	X X X	1,421,267	5,431,777
2.	Net premium income	X X X	25,529,240	101,626,901
3.	Change in unearned premium reserves and reserve for rate credits	X X X		
4.	Fee-for-service (net of $................ medical expenses)	X X X		
5.	Risk revenue	X X X		
6.	Aggregate write-ins for other health care related revenues	X X X		
7.	TOTAL REVENUES (Lines 2 to 6)	X X X	25,529,240	101,626,901
Medical and Hospital:				
8.	Hospital/medical benefits			
9.	Other professional services		23,475,911	90,871,309
10.	Outside referrals			
11.	Emergency room and out-of-area			
12.	Prescription drugs			
13.	Aggregate write-ins for other medical and hospital			
14.	Incentive pool and withhold adjustments			
15.	Subtotal (Lines 8 to 14)		23,475,911	90,871,309
LESS:				
16.	Net reinsurance recoveries			
17.	Total medical and hospital (Lines 15 minus 16)		23,475,911	90,871,309
18.	Claims adjustment expenses		904,663	4,390,735
19.	General administrative expenses		1,948,263	9,455,797
20.	Increase in reserves for accident and health contracts			
21.	Total underwriting deductions (Lines 17 through 20)		26,328,837	104,717,841
22.	Net underwriting gain or (loss) (Lines 7 minus 21)	X X X	(799,597)	(3,090,940)
23.	Net investment income earned		182,639	820,502
24.	Net realized capital gains or (losses)			(269,597)
25.	Net investment gains or (losses) (Lines 23 plus 24)		182,639	550,905
26.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered $................), (amount charged off $................)]			
27.	Aggregate write-ins for other income or expenses		643,544	3,927,119
28.	Net income or (loss) before federal income taxes (Lines 22 plus 25 plus 26 plus 27)		26,586	1,387,084
29.	Federal and foreign income taxes incurred	X X X		
30.	Net income (loss) (Lines 28 minus 29)	X X X	26,586	1,387,084
DETAILS OF WRITE-INS				
0601		X X X		
0602		X X X		
0603		X X X		
0698.	Summary of remaining write-ins for Line 6 from overflow page	X X X		
0699.	TOTALS (Lines 0601 through 0603 plus 0698) (Line 6 above)	X X X		
1301				
1302				
1303				
1398.	Summary of remaining write-ins for Line 13 from overflow page			
1399.	TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)			
2701.	Stabiliaztion Reserve Withhold		643,544	3,926,684
2702.	Miscellaneous Income			435
2703				
2798.	Summary of remaining write-ins for Line 27 from overflow page			
2799.	TOTALS (Lines 2701 through 2703 plus 2798) (Line 27 above)		643,544	3,927,119

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1 Current Year to Date	2 Prior Year
	CAPITAL & SURPLUS ACCOUNT		
31.	Capital and surplus prior reporting year	18,481,672	15,083,755
GAINS AND LOSSES TO CAPITAL & SURPLUS			
32.	Net income or (loss) from Line 30	26,586	1,387,084
33.	Change in valuation basis of aggregate policy and claim reserves		
34.	Net unrealized capital gains and losses	16,270	(24,213)
35.	Change in net unrealized foreign exchange capital gain or (loss)		
36.	Change in net deferred income tax		
37.	Change in nonadmitted assets	45,626	1,388,291
38.	Change in unauthorized reinsurance		
39.	Change in treasury stock		
40.	Change in surplus notes		
41.	Cumulative effect of changes in accounting principles		
42.	Capital Changes:		
	42.1 Paid in		
	42.2 Transferred from surplus (Stock Dividend)		
	42.3 Transferred to surplus		
43.	Surplus adjustments:		
	43.1 Paid in		646,756
	43.2 Transferred to capital (Stock Dividend)		
	43.3 Transferred from capital		
44.	Dividends to stockholders		
45.	Aggregate write-ins for gains or (losses) in surplus		
46.	Net change in capital and surplus (Lines 32 to 45)	88,482	3,397,918
47.	Capital and surplus end of reporting period (Line 31 plus 46)	18,570,154	18,481,673
DETAILS OF WRITE-INS			
4501			
4502			
4503			
4598.	Summary of remaining write-ins for Line 45 from overflow page		
4599.	TOTALS (Lines 4501 through 4503 plus 4598) (Line 45 above)		

CASH FLOW

		1 Current Year To Date	2 Prior Year
	Cash from Operations		
1.	Premiums and revenues collected net of reinsurance	23,528,032	100,289,120
2.	Claims and claims adjustment expenses	24,449,574	98,355,044
3.	General administrative expenses paid	1,993,959	8,631,505
4.	Other underwriting income (expenses)		
5.	Cash from underwriting (Line 1 minus Line 2 minus Line 3 plus Line 4)	(2,915,501)	(6,697,429)
6.	Net investment income	257,177	743,453
7.	Other income (expenses)	643,544	3,927,119
8.	Federal and foreign income taxes (paid) recovered		
9.	Net cash from operations (Lines 5 to 8)	(2,014,780)	(2,026,857)
	Cash from Investments		
10.	Proceeds from investments sold, matured or repaid:		
	10.1 Bonds		3,020,815
	10.2 Stocks		232,192
	10.3 Mortgage loans		
	10.4 Real estate		
	10.5 Other invested assets		
	10.6 Net gains or (losses) on cash and short-term investments		
	10.7 Miscellaneous proceeds		
	10.8 TOTAL investment proceeds (Lines 10.1 to 10.7)		3,253,007
11.	Cost of investments acquired (long-term only):		
	11.1 Bonds		5,815,970
	11.2 Stocks	12,992	1,159,859
	11.3 Mortgage loans		
	11.4 Real estate		
	11.5 Other invested assets		
	11.6 Miscellaneous applications		
	11.7 TOTAL investments acquired (Lines 11.1 to 11.6)	12,992	6,975,829
12.	Net cash from investments (Line 10.8 minus Line 11.7)	(12,992)	(3,722,822)
	Cash from Financing and Miscellaneous Sources		
13.	Cash provided:		
	13.1 Surplus notes, capital and surplus paid in		646,756
	13.2 Net transfers from affiliates	984,864	198,322
	13.3 Borrowed funds received		
	13.4 Other cash provided	1,083,799	5,056,222
	13.5 TOTAL (Lines 13.1 to 13.4)	2,068,663	5,901,300
14.	Cash applied:		
	14.1 Dividends to stockholders paid		
	14.2 Net transfers to affiliates		
	14.3 Borrowed funds repaid		
	14.4 Other applications		
	14.5 TOTAL (Lines 14.1 to 14.4)		
15.	Net cash from financing and miscellaneous sources (Line 13.5 minus Line 14.5)	2,068,663	5,901,300
	RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS		
16.	Net change in cash and short-term investments (Line 9 plus Line 12 plus Line 15)	40,891	151,621
17.	Cash and short-term investments:		
	17.1 Beginning of period	10,559,778	10,408,158
	17.2 End of period (Line 16 plus Line 17.1)	10,600,669	10,559,779

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3				Federal			
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	468,806					468,806				
2. First Quarter	475,192					475,192				
3. Second Quarter										
4. Third Quarter										
5. Current Year										
6. Current Year Member Months	1,421,267					1,421,267				
Total Member Ambulatory Encounters for Period:										
7. Physician										
8. Non-Physician										
9. Total										
10. Hospital Patient Days Incurred										
11. Number of Inpatient Admissions										
12. Premiums Collected	23,528,032					23,528,032				
13. Premiums Earned	25,529,240					25,529,240				
14. Amount Paid for Provision of Health Care Services	24,449,574					24,449,574				
15. Amount Incurred for Provision of Health Care Services	23,475,911					23,475,911				

CLAIMS PAYABLE (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
0199999 Individually Listed Claims Payable						
0299999 Aggregate Accounts Not Individually Listed - Uncovered						
0399999 Aggregate Accounts Not Individually Listed - Covered						
0499999 Subtotals						
0599999 Unreported claims and other claim reserves						7,762,000
0699999 Total Amounts Withheld						
0799999 Total Claims Payable						7,762,000
0899999 Accrued Medical Incentive Pool						

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

	Claims Paid Year to Date		Liability End of Current Quarter		5	6
Line of Business	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec.31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1+3)	Estimated Claim Reserve and Claim Liability Dec.31 of Prior Year
1. Comprehensive (Hospital & Medical)						
2. Medicare Supplement						
3. Dental only	6,164,970	17,379,341	1,155,000	6,607,000	7,319,970	7,831,000
4. Vision only						
5. Federal Employees Health Benefits Plan Premiums						
6. Title XVIII - Medicare						
7. Title XIX - Medicaid						
8. Other						
9. Subtotal	6,164,970	17,379,341	1,155,000	6,607,000	7,319,970	7,831,000
10. Medical incentive pools, accruals and disbursements						
11. TOTALS	6,164,970	17,379,341	1,155,000	6,607,000	7,319,970	7,831,000

Notes to Financial Statement

GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since the prior year end unless otherwise noted)

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1 Did the reporting entity implement any significant accounting policy changes which would require disclosure in the Notes to the Financial Statements? Yes[ ] No[X]

1.2 If yes, explain:

2.1 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[X]

2.2 If yes, has the report been filed with the domiciliary state? Yes[ ] No[X]

3.1 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[X]

3.2 If yes, date of change:
If not previously filed, furnish herewith a certified copy of the instrument as amended.

4. Have there been any substantial changes in the organizational since the prior quarter end? Yes[ ] No[X]
If yes attach an organizational chart.

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes[ ] No[X]

5.2 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
....	....	....

6. 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[X] N/A[ ]
If yes, attach an explanation.

7.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 09/30/2000

7.2 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. 09/30/2000

7.3 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). 09/04/2001

7.4 By what department or departments?
Ohio Department of Insurance

8.1 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? (You need not report an action, either formal or informal, if a confidentiality clause is part of the agreement.) Yes[ ] No[X]

8.2 If yes, give full information

GENERAL INTERROGATORIES (continued)

(Responses to these interrogatories should be based on changes that have occurred since prior year end unless otherwise noted.)

INVESTMENT

9.1 Has there been any changes in the reporting entity's own preferred or common stock? Yes[ ] No[X]
9.2 If yes, explain:

10.1 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 secuities under securities lending agreements.) Yes[ ] No[X]
10.2 If yes, give full and complete information relating thereto:

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

12. Amount of real estate and mortgages held in short-term investments: $

13.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes[ ] No[X]
13.2 If yes, please complete the following:

		1 Prior Year-End Statement Value	2 Current Quarter Statement Value
13.21	Bonds		
13.22	Preferred Stock		
13.23	Common Stock		
13.24	Short-Term Investments		
13.25	Mortgages, Loans or Real Estate		
13.26	All Other		
13.27	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 13.21 to 13.26)		
13.28	Total Investment in Parent included in Lines 13.21 to 13.26 above		
13.29	Receivable from Parent not included in Lines 13.21 to 13.26 above		

14.1 Does the reporting entity have any hedging transactions reported in Schedule DB? Yes[ ] No[X]
14.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes[ ] No[X]
If no, attach a description with this statement.

15. Excluding items in Schedule E, 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 Part 1 - General, Section IV, H-Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes[X] No[ ]
15.1 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
Standard Federal Bank	77 Monroe Center, Greand Rapids, MI 49501-1707

15.2 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)

15.3 Have there been any changes, including name changes, in the custodian(s) identified in 15.1 during the current year? Yes[ ] No[X]
15.4 If yes, give full and complete information relating thereto:

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

15.5 Identify all investment advisors, brokers/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

SCHEDULE A - VERIFICATION

		1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
1.	Book/adjusted carrying value, beginning of period				
2.	Increase (decrease) by adjustment				
3.	Cost of acquired				
4.	Cost of additions to and permanent improvements				
5.	Total profit (loss) on sales				
6.	Increase (decrease) by foreign exchange adjustment				
7.	Amount received on sales				
8.	Book/adjusted carrying value at end of current period				
9.	Total valuation allowance				
10.	Subtotal (Lines 8 plus 9)				
11.	Total nonadmitted amounts				
12.	Statement value, current period (Page 2, real estate lines, current period)				

NONE

SCHEDULE B - VERIFICATION

		1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
1.	Book/recorded investment excluding accrued interest on mortgages owned, beginning of period				
2.	Amount loaned during period:				
	2.1 Actual cost at time of acquisitions				
	2.2 Additional investment made after acquisitions				
3.	Accrual of discount and mortgage interest points and commitment fees				
4.	Increase (decrease) by adjustment				
5.	Total profit (loss) on sale				
6.	Amounts paid on account or in full during the period				
7.	Amortization of premium				
8.	Increase (decrease) by foreign exchange adjustment				
9.	Book value/recorded investment excluding accrued interest on mortgages owned at end of current period				
10.	Total valuation allowance				
11.	Subtotal (Lines 9 plus 10)				
12.	Total nonadmitted amounts				
13.	Statement value of mortgages owned at end of current period				

NONE

SCHEDULE BA - VERIFICATION

Other Invested Assets Included in Schedule BA

	Description	1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
1.	Book/adjusted carrying value of long-term invested assets owned, beginning of period				
2.	Cost of acquisitions during period:				
	2.1 Actual cost at time of acquisitions				
	2.2 Additional investment made after acquisitions				
3.	Accrual of discount				
4.	Increase (decrease) by adjustment				
5.	Total profit (loss) on sale				
6.	Amounts paid on account or in full during the period				
7.	Amortization of premium				
8.	Increase (decrease) by foreign exchange adjustment				
9.	Book/adjusted carrying value of long-term invested assets at end of current period				
10.	Total valuation allowance				
11.	Subtotal (Lines 9 plus 10)				
12.	Total nonadmitted amounts				
13.	Statement value of long-term invested assets at end of current period				

NONE

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 Statement Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Statement Value End of First Quarter	6 Statement Value End of Second Quarter	7 Statement Value End of Third Quarter	8 Statement Value December 31 Prior Year
BONDS								
1. Class 1	13,709,760			(2,501)	13,707,259			13,709,760
2. Class 2								
3. Class 3								
4. Class 4								
5. Class 5								
6. Class 6								
7. TOTAL Bonds	13,709,760			(2,501)	13,707,259			13,709,760
PREFERRED STOCK								
8. Class 1								
9. Class 2								
10. Class 3								
11. Class 4								
12. Class 5								
13. Class 6								
14. TOTAL Preferred Stock								
15. TOTAL Bonds & Preferred Stock	13,709,760			(2,501)	13,707,259			13,709,760

SCHEDULE DA - PART 1

Short - Term Investments Owned End of Current Quarter

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Amount of Interest Received Current Quarter	5 Paid for Accrued Interest
8099999. TOTALS	16,709,755	X X X	16,709,755	44,590	

SCHEDULE DA - PART 2 - Verification

Short-Term Investments Owned

		1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter CurrentYear	4 Prior Year Ended December 31
1.	Book/adjusted carrying value, beginning of period	10,701,240			
2.	Cost of short-term investments acquired	6,008,515			10,701,240
3.	Increase (decrease) by adjustment				
4.	Increase (decrease) by foreign exchange adjustment				
5.	Total profit (loss) on disposal of short-term investments				
6.	Consideration received on disposal of short-term investments				
7.	Book/adjusted carrying value, current period	16,709,755			10,701,240
8.	Total valuation allowance				
9.	Subtotals (Lines 7 plus 8)	16,709,755			10,701,240
10.	Total nonadmitted amounts				
11.	Statement value (Lines 9 minus 10)	16,709,755			10,701,240
12.	Income collected during period	44,590			323,747
13.	Income earned during period	44,590			323,747

16 Schedule DB Part F Section 1 . . . . NONE

17 Schedule DB Part F Section 2 . . . . NONE

18 Schedule S Ceded Reinsurance . . . . NONE

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

	State, Etc.		1 Guaranty Fund (Yes or No)	2 Is Insurer Licensed (Yes or No)	Direct Business Only Year-to-Date 3 Premiums	4 Medicare Title XVIII	5 Medicaid Title XIX	6 Federal Employees Health Benefits Program Premiums
1.	Alabama	AL	No	No				
2.	Alaska	AK	No	No				
3.	Arizona	AZ	No	No				
4.	Arkansas	AR	No	No				
5.	California	CA	No	No				
6.	Colorado	CO	No	No				
7.	Connecticut	CT	No	No				
8.	Delaware	DE	No	No				
9.	District of Columbia	DC	No	No				
10.	Florida	FL	No	No				
11.	Georgia	GA	No	No				
12.	Hawaii	HI	No	No				
13.	Idaho	ID	No	No				
14.	Illinois	IL	No	No				
15.	Indiana	IN	No	No				
16.	Iowa	IA	No	No				
17.	Kansas	KS	No	No				
18.	Kentucky	KY	No	No				
19.	Louisiana	LA	No	No				
20.	Maine	ME	No	No				
21.	Maryland	MD	No	No				
22.	Massachusetts	MA	No	No				
23.	Michigan	MI	No	No				
24.	Minnesota	MN	No	No				
25.	Mississippi	MS	No	No				
26.	Missouri	MO	No	No				
27.	Montana	MT	No	No				
28.	Nebraska	NE	No	No				
29.	Nevada	NV	No	No				
30.	New Hampshire	NH	No	No				
31.	New Jersey	NJ	No	No				
32.	New Mexico	NM	No	No				
33.	New York	NY	No	No				
34.	North Carolina	NC	No	No				
35.	North Dakota	ND	No	No				
36.	Ohio	OH	No	Yes	25,529,240			
37.	Oklahoma	OK	No	No				
38.	Oregon	OR	No	No				
39.	Pennsylvania	PA	No	No				
40.	Rhode Island	RI	No	No				
41.	South Carolina	SC	No	No				
42.	South Dakota	SD	No	No				
43.	Tennessee	TN	No	No				
44.	Texas	TX	No	No				
45.	Utah	UT	No	No				
46.	Vermont	VT	No	No				
47.	Virginia	VA	No	No				
48.	Washington	WA	No	No				
49.	West Virginia	WV	No	No				
50.	Wisconsin	WI	No	No				
51.	Wyoming	WY	No	No				
52.	American Samoa	AS	No	No				
53.	Guam	GU	No	No				
54.	Puerto Rico	PR	No	No				
55.	U.S. Virgin Islands	VI	No	No				
56.	Canada	CN	No	No				
57.	Aggregate other alien	OT	XXX	XXX				
58.	TOTAL (Direct Business)		XXX	(a) 1	25,529,240			
DETAILS OF WRITE-INS								
5701			XXX	XXX				
5702			XXX	XXX				
5703			XXX	XXX				
5798.	Summary of remaining write-ins for Line 57 from overflow page		XXX	XXX				
5799.	TOTALS (Lines 5701 through 5703 plus 5798) (Line 57 above)		XXX	XXX				

(a) Insert the number of yes responses except for Canada and Other Alien.

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

All insurer members of a Holding Company Group that has acquired and/or disposed of any domestic insurer (s) since filing the last annual or quarterly statement
shall prepare a common schedule for inclusion in each of the individual quarterly statements

PART 1 - ORGANIZATIONAL CHART

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

	RESPONSES
1. Will the SVO Compliance Certification be filed with this statement?	Yes

Explanation:

Bar Code:

OVERFLOW PAGE FOR WRITE-INS

ASSETS

	Current Period 1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets	Prior Year 4 Net Admitted Assets
0897. Summary of remaining write-ins for Line 8 (Lines 0804 through 0896)				
2204. 0				
2297. Summary of remaining write-ins for Line 22 (Lines 2204 through 2296)				

SCHEDULE D - PART 3

Showing All Long-Term Bonds and Stocks ACQUIRED During Current Quarter

1 CUSIP Identification	2 Description	3 Date Acquired	4 Name of Vendor	5 Number of Shares of Stock	6 Actual Cost	7 Par Value	8 Paid for Accrued Interest and Dividends	9 NAIC Designation (a)
6099998 Summary Item for Bonds Bought and Sold This Quarter								
6599998 Summary Item for Preferred Stock Bought and Sold This Quarter								
Common Stock - Industrial and Miscellaneous								
00141M747	AIM GROWTH SER BASIC VALUE FD CL A	01/14/2002	Undefined	54.210	1	X X X		L
128119401	Calamos Invt Tr New Conv Fd	01/07/2002	Undefined	110.320	2,044	X X X		L
360802102	AMERICAN FDS-FUNDAMTL INVTRS	03/20/2002	Undefined	34.080	899	X X X		L
68379A107	OPPENHEIMER CAPITAL APPREC-A	02/13/2002	Undefined	0.680	28	X X X		L
111111118	DELTA DENTAL INSURANCE COMPANY	11/09/1970	Undefined	166.000	10,020	X X X		u
6899999 Subtotal - Common Stock - Industrial and Miscellaneous					12,992	X X X		
7099997 Subtotal - Common Stock - Part 3					12,992	X X X		
7099998 Summary Item for Common Stock Bought and Sold This Quarter						X X X		
7099999 Subtotal - Common Stock					12,992	X X X		
7199999 Subtotal - Preferred and Common Stock					12,992	X X X		
7299999 Total - Bonds, Preferred and Common Stock					12,992	X X X		

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

SCHEDULE D - PART 4

Showing All Long-Term Bonds and Stocks Sold, Redeemed, or Otherwise Disposed of by the Company During the Current Quarter

1 CUSIP Identification	2 Description	3 Disposal Date	4 Name of Purchaser	5 Number of Shares of Stock	6 Consideration	7 Par Value	8 Actual Cost	9 Book/Adjusted Carrying Value at Disposal Date	10 Increase (Decrease) by Adjustment	11 Increase (Decrease) by Foreign Exchange Adjustment	12 Foreign Exchange Gain (Loss) on Disposal	13 Realized Gain (Loss) on Disposal	14 Total Gain (Loss) On Disposal	15 Interest on Bonds Received During Year	16 Dividends on Stocks Received During Year	17 NAIC Desig-nation (a)
6099998 Summary Item for Bonds Bought and Sold This Quarter															X X X	X X X
6599998 Summary Item for Preferred Stock Bought and Sold This Quarter														X X X		X X X
7099998 Summary Item for Common Stock Bought and Sold This Quarter						X X X								X X X		X X X
7199999 Subtotal - Preferred and Common Stock						X X X								X X X		X X X
7299999 Total - Bonds, Preferred and Common Stock						X X X										X X X

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

E06 Schedule DB Part A Section 1. . . . . NONE

E06 Schedule DB Part B Section 1. . . . . NONE

E07 Schedule DB Part C Section 1. . . . . NONE

E07 Schedule DB Part D Section 1. . . . . NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1			2	3	4	Book Balance at End of Each Month During Current Quarter			8
				Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	5	6	7	
Depository			Rate of Interest			First Month	Second Month	Third Month	*
open depositories									
Control Account	Michigan National Bank					639,925	363,348	454,666	
Certificate of Deposit	Bank One	07/16/2002				100,000	100,000	100,000	
General Claims Checking	Bank One					(15,823,693)	1,290,131	(6,312,838)	
Administration	Bank One					(1,052,320)	(76,061)	(275,457)	
Delta Care Lockbox	Bank One					(27,997)	(42,428)	(75,455)	
0199998 Deposits in .... depositories which do not exceed the allowable limit in any one depository (See Instructions) - open depositories			X X X						
0199999 Totals - Open Depositories			X X X			(16,164,085)	1,634,990	(6,109,084)	
0299998 Deposits in .... depositories which do not exceed the allowable limit in any one depository (See Instructions) - suspended depositories			X X X						
0299999 Totals - Suspended Depositories			X X X						
0399999 Total Cash On Deposit			X X X			(16,164,085)	1,634,990	(6,109,084)	
0499999 Cash in Company's Office			X X X	X X X	X X X				
0599999 Total Cash			X X X			(16,164,085)	1,634,990	(6,109,084)	

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