



HEALTH QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2002
OF THE CONDITION AND AFFAIRS OF THE

UDC Ohio, Inc.

NAIC Group Code	0019 <small>(Current Period)</small>	0019 <small>(Prior Period)</small>	NAIC Company Code	52022	Employer's ID Number	74-2609036
Organized under the Laws of	Ohio			State of Domicile or Port of Entry		Ohio
Country of Domicile	United States of America					
Licensed as business type:	Life, Accident & Health []		Property/Casualty []		Dental Service Corporation [X]	
	Vision Service Corporation []		Other []		Health Maintenance Organization []	
	Hospital, Medical & Dental Service or Indemnity []		Is HMO, Federally Qualified? Yes [] No [X]			
Incorporated	04/20/1990		Commenced Business		05/17/1990	
Statutory Home Office	24950 Country Club Boulevard, Suite 330 <small>(Street and Number)</small>			North Olmsted, OH 44070 <small>(City or Town, State and Zip Code)</small>		
Main Administrative Office	2323 Grand Boulevard <small>(Street and Number)</small>					
	Kansas City, MO 64108 <small>(City or Town, State and Zip Code)</small>		816-474-2345 <small>(Area Code) (Telephone Number)</small>			
Mail Address	2323 Grand Boulevard <small>(Street and Number or P.O. Box)</small>			Kansas City, MO 64108 <small>(City or Town, State and Zip Code)</small>		
Primary Location of Books and Records	2323 Grand Boulevard <small>(Street and Number)</small>					
	Kansas City, MO 64108 <small>(City or Town, State and Zip Code)</small>		816-474-2345 <small>(Area Code) (Telephone Number)</small>			
Internet Website Address	N/A					
Statement Contact	Gail Callahan <small>(Name)</small>			651-361-4449 <small>(Area Code) (Telephone Number) (Extension)</small>		
	 <small>(E-mail Address)</small>			651-361-5356 <small>(FAX Number)</small>		
Policyowner Relations Contact	 <small>(Street and Number)</small>					
	 <small>(City or Town, State and Zip Code)</small>			 <small>(Area Code) (Telephone Number) (Extension)</small>		

OFFICERS

President	Bradley Clifford Johnson	Secretary	Kenneth Dale Bowen
Vice President & Treasurer	Floyd Fitz-Hubert Chadee		

VICE PRESIDENTS

Floyd Fitz-Hubert Chadee	Daniel Joseph Galginaitis #	Gary Louis Lau #
--------------------------	-----------------------------	------------------

DIRECTORS OR TRUSTEES

Kenneth Dale Bowen	Bradley Clifford Johnson	Michael John Peninger
--------------------	--------------------------	-----------------------

State ofMissouri.....
County ofJackson.....

} ss

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.

Bradley Clifford Johnson President	Kenneth Dale Bowen Secretary	Floyd Fitz-Hubert Chadee Vice President & Treasurer
---------------------------------------	---------------------------------	--

Subscribed and sworn to before me this
_____ day of _____ October, 2002

Connie Turnipseed

03/07/2006

ASSETS

	Current Period			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets	4 Net Admitted Assets
1. Bonds	200,460		200,460	200,667
2. Stocks:				
2.1 Preferred stocks				
2.2 Common stocks				
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 (\$(9,842)) and short-term investments (\$1,630,702)	1,620,860		1,620,860	1,509,876
6. Other long-term invested assets				
7. Receivable for securities	4,200	4,200		
8. Aggregate write-ins for invested assets				
9. Subtotals, cash and invested assets (Lines 1 to 8)	1,825,520	4,200	1,821,320	1,710,543
10. Accident and health premiums due and unpaid	104,877		104,877	117,896
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	1,554		1,554	4,376
15. Amounts due from parent, subsidiaries and affiliates	108,102		108,102	
16. Amounts receivable relating to uninsured accident and health plans				
17. Furniture and equipment				
18. Amounts due from agents				
19. Federal and foreign income tax recoverable and interest thereon (including \$8,546 net deferred tax asset)	23,075	14,529	8,546	3,820
20. Electronic data processing equipment and software.....				
21. Other nonadmitted assets				
22. Aggregate write-ins for other than invested assets	135,448	135,448		
23. Total assets (Lines 9 plus 10 through 22)	2,198,576	154,177	2,044,399	1,836,635
DETAILS OF WRITE-INS				
0801.				
0802.				
0803.				
0898. Summary of remaining write-ins for Line 8 from overflow page				
0899. Totals (Lines 0801 thru 0803 plus 0898) (Line 8 above)				
2201. Prepaid Capitation.....	135,448	135,448		
2202.				
2203.				
2298. Summary of remaining write-ins for Line 22 from overflow page				
2299. Totals (Lines 2201 thru 2203 plus 2298) (Line 22 above)	135,448	135,448		

(a) \$0 health care delivery assets included in Line 4.1, Column 3

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ reinsurance ceded)	37,253	27,923	65,176	84,678
2. Accrued medical incentive pool and bonus payments				
3. Unpaid claims adjustment expenses				
4. Aggregate policy reserves	22,370		22,370	20,892
5. Aggregate claim reserves				
6. Premiums received in advance	23,576	0	23,576	27,548
7. General expenses due or accrued	0	26,593	26,593	30,925
8. Federal and foreign income tax payable and interest thereon (including \$ on realized capital gains (losses) (including \$ net deferred tax liability)	52,078		52,078	32,921
9. Amounts withheld or retained for the account of others	370		370	370
10. Borrowed money (including \$ current) and interest thereon \$ (including \$ current)				
11. Amounts due to parent, subsidiaries and affiliates				
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				
17. Aggregate write-ins for other liabilities (including \$ current)				142,490
18 Total liabilities (Lines 1 to 17).....	135,647	54,516	190,163	339,824
19. Common capital stock	XXX	XXX	100	100
20 Preferred capital stock	XXX	XXX		
21. Gross paid in and contributed surplus	XXX	XXX	865,513	865,513
22. Surplus notes	XXX	XXX		
23. Aggregate write-ins for other than special surplus funds	XXX	XXX		1
24. Unassigned funds (surplus)	XXX	XXX	988,623	631,197
25. Less treasury stock, at cost:				
25.1shares common (value included in Line 19) \$)	XXX	XXX		
25.2shares preferred (value included in Line 20) \$)	XXX	XXX		
26. Total capital and surplus (Lines 19 to 25)	XXX	XXX	1,854,236	1,496,811
27. Total liabilities, capital and surplus (Lines 18 and 26)	XXX	XXX	2,044,399	1,836,635
DETAILS OF WRITE-INS				
1701. Accounts Payable Protective.....			0	142,490
1702.				
1703.				
1798. Summary of remaining write-ins for Line 17 from overflow page				
1799. Totals (Lines 1701 thru 1703 plus 1798) (Line 17 above)				142,490
2301. Rounding.....	XXX	XXX		1
2302.	XXX	XXX		
2303.	XXX	XXX		
2398. Summary of remaining write-ins for Line 23 from overflow page	XXX	XXX		
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above)	XXX	XXX		1

STATEMENT OF REVENUE AND EXPENSES

	Current Year to Date		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months.....	XXX	294,264	445,229
2. Net premium income	XXX	2,561,483	3,784,646
3. Change in unearned premium reserves and reserve for rate credits	XXX	(1,478)	143,966
4. Fee-for-service (net of \$ medical expenses)	XXX		
5. Risk revenue	XXX		
6. Aggregate write-ins for other health care related revenues	XXX		
7. Total revenues (Lines 2 to 6)	XXX	2,560,005	3,928,612
Medical and Hospital:			
8. Hospital/medical benefits			
9. Other professional services	1,002	1,404,713	2,109,726
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)	1,002	1,404,713	2,109,726
Less:			
16. Net reinsurance recoveries			
17. Total medical and hospital (Lines 15 minus 16)	1,002	1,404,713	2,109,726
18. Claims adjustment expenses			
19. General administrative expenses.....	616,792	616,792	1,779,864
20. Increase in reserves for accident and health contracts			
21. Total underwriting deductions (Lines 17 through 20)	617,794	2,021,505	3,889,590
22. Net underwriting gain or (loss) (Lines 7 minus 21)	XXX	538,500	39,022
23. Net investment income earned		28,807	67,127
24. Net realized capital gains or (losses)			
25. Net investment gains or (losses) (Lines 23 plus 24)		28,807	67,127
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			10,166
28. Net income or (loss) before federal income taxes (Lines 22 plus 25 plus 26 plus 27)		567,307	116,315
29. Federal and foreign income taxes incurred	XXX	201,200	36,961
30. Net income (loss) (Lines 28 minus 29)	XXX	366,107	79,354
DETAILS OF WRITE-INS			
0601.	XXX		
0602.	XXX		
0603.	XXX		
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX		
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	XXX		
1301.			
1302.			
1303.			
1398. Summary of remaining write-ins for Line 13 from overflow page			
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)			
2701. Miscellaneous income.....			10,166
2702.			
2703.			
2798. Summary of remaining write-ins for Line 27 from overflow page			
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)			10,166

CAPITAL AND SURPLUS ACCOUNT

	1 Current Year to Date	2 Prior Year
CAPITAL AND SURPLUS ACCOUNT:		
31. Capital and surplus prior reporting period	1,496,811	1,398,052
GAINS AND LOSSES TO CAPITAL & SURPLUS:		
32. Net income or (loss) from Line 30	366,107	79,354
33. Change in valuation basis of aggregate policy and claim reserves		
34. Net unrealized capital gains and losses		
35. Change in net unrealized foreign exchange capital gain or (loss)		
36. Change in net deferred income tax	(2,908)	(8,679)
37. Change in nonadmitted assets	(5,774)	13,828
38. Change in unauthorized reinsurance		
39. Change in treasury stock		
40. Change in surplus notes		
41. Cumulative effect of changes in accounting principles		14,256
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		
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 & surplus (Lines 32 to 45)	357,425	98,759
47. Capital and surplus end of reporting period (Line 31 plus 46)	1,854,236	1,496,811
DETAILS OF WRITE-INS		
4501.		
4502.		
4503.		
4598. Summary of remaining write-ins for Line 45 from overflow page		
4599. Totals (Lines 4501 thru 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	2,570,530	3,827,190
2. Claims and claims adjustment expenses	1,424,215	2,128,007
3. General administrative expenses paid	621,124	1,807,420
4. Other underwriting income (expenses)		
5. Cash from underwriting (Line 1 minus Line 2 minus Line 3 plus Line 4)	525,191	(108,237)
6. Net investment income	31,836	67,439
7. Other income (expenses)		10,166
8. Federal and foreign income taxes (paid) recovered	(184,949)	(75,087)
9. Net cash from operations (Lines 5 to 8)	372,078	(105,719)
Cash from Investments		
10. Proceeds from investments sold, matured or repaid:		
10.1 Bonds		
10.2 Stocks	3,599,795	
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)	3,599,795	
11. Cost of investments acquired (long-term only):		
11.1 Bonds		
11.2 Stocks	3,599,795	
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)	3,599,795	
12. Net Cash from investments (Line 10.8 minus Line 11.7)	0	
Cash from Financing and Miscellaneous Sources		
13. Cash provided:		
13.1 Surplus notes, capital and surplus paid in		
13.2 Net transfers from affiliates		187,170
13.3 Borrowed funds received		
13.4 Other cash provided	(108,102)	198,832
13.5 Total (Lines 13.1 to 13.4)	(108,102)	386,002
14. Cash applied:		
14.1 Dividends to stockholders paid		
14.2 Net transfers to affiliates	152,992	
14.3 Borrowed funds repaid		
14.4 Other applications		
14.5 Total (Lines 14.1 to 14.4)	152,992	
15. Net cash from financing and miscellaneous sources (Line 13.5 minus Line 14.5)	(261,094)	386,002
RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS		
16. Net change in cash and short-term investments (Line 9 plus Line 12 plus Line 15)	110,984	280,283
17. Cash and short-term investments:		
17.1 Beginning of period	1,509,876	1,229,593
17.2 End of period (Line 16 plus Line 17.1)	1,620,860	1,509,876

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE UDC OHIO, 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	34,111					34,111				
2 First Quarter	33,953					33,953				
3 Second Quarter	32,033					32,033				
4. Third Quarter	31,180					31,180				
5. Current Year										
6 Current Year Member Months	294,264					294,264				
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	2,570,530					2,570,530				
13. Premiums Earned	2,560,005					2,560,005				
14. Amount Paid for Provision of Health Care Services	1,424,215					1,424,215				
15. Amount Incurred for Provision of Health Care Services	1,404,713					1,404,713				

CLAIMS PAYABLE (Reported and Unreported)

[illegible]

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 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		
1. Comprehensive (Hospital & Medical)						
2. Medicare Supplement						
3. Dental Only.....	25,769	1,398,446	464	64,712	26,233	84,678
4. Vision Only.....						
5. Federal Employees Health Benefits Plan Premiums						
6. Title XVIII - Medicare						
7. Title XIX - Medicaid.....						
8. Other						
9. Subtotal	25,769	1,398,446	464	64,712	26,233	84,678
10. Medical incentive pools, accruals and disbursements						
11. Totals	25,769	1,398,446	464	64,712	26,233	84,678

NOTES TO FINANCIAL STATEMENTS

The company did not have any wash sales during the current period.

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 []

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 chart 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 [X] No [] NA []
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. 12/31/2000

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. 12/31/2000

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). 01/12/2002

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

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

INVESTMENT

9.1 Has there been any change 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 securities 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 on 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 []

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
Marshall & Ilsley Trust Company.....	1000 N Water Street, Milwaukee, WI 53202.....
Bank One Safekeeping.....	100 North Broadway, Oklahoma City, OK 73102.....
Bank One Kentucky NA.....	416 West Jefferson St., Louisville, KY 40202.....

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

Explanation to interrogatory #6: Change to principals - Fortis is replacing Protective. The new administrative services agreement is between UDC Ohio, Inc. and Fortis Benefits Insurance Company and the new investment management agreement is between UDC Ohio, Inc. and Fortis, Inc.

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	NONE			
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)				

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	NONE			
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				

SCHEDULE BA - VERIFICATION

Other Invested Assets Included in Schedule BA

	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	NONE			
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				

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	1,827,933	1,633,183	1,629,884	(70)	200,599	1,827,933	1,831,162	532,667
2. Class 2								
3. Class 3								
4. Class 4								
5. Class 5								
6. Class 6								
7. Total Bonds	1,827,933	1,633,183	1,629,884	(70)	200,599	1,827,933	1,831,162	532,667
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 and Preferred Stock	1,827,933	1,633,183	1,629,884	(70)	200,599	1,827,933	1,831,162	532,667

SCHEDULE DA - PART 1

Short-Term Investments Owned End of Current Quarter					
	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Amount of Interest Received Current Quarter	Paid for Accrued Interest
8099999 Totals	1,630,702	XXX	1,630,702	79	

SCHEDULE DA - PART 2- Verification

Short-Term Investments Owned				
	1	2	3	4
	First Quarter Current Year	Second Quarter Current Year	Third Quarter Current Year	Prior Year Ended December 31
1. Book/adjusted carrying value, beginning of period	332,000	0	1,627,403	131,000
2. Cost of short-term investments acquired	686,000	1,627,403	1,633,183	31,171,000
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	1,018,000		1,629,884	30,970,000
7. Book/adjusted carrying value, current period	0	1,627,403	1,630,702	332,000
8. Total valuation allowance				
9. Subtotal (Lines 7 plus 8)	0	1,627,403	1,630,702	332,000
10. Total nonadmitted amounts				
11. Statement value (Lines 9 minus 10)	0	1,627,403	1,630,702	332,000
12. Income collected during period	904		326	4,238
13. Income earned during period	891	271	134	4,189

Schedule DB - Part F - Section 1

NONE

Schedule DB - Part F - Section 2

NONE

Schedule S

NONE

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

		1	2	Direct Business Only Year-to-Date			
				3	4	5	6
States, Etc.		Guaranty Fund (Yes or No)	Is Insurer Licensed? (Yes or No)	Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefit Program Premium
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	Yes	5,783			
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	2,555,700			
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) 2	2,561,483			
DETAILS OF WRITE-INS							
5701.							
5702.							
5703.							
5798. Summary of remaining write-ins for Line 57 from overflow page							
5799. Totals (Lines 5701 thru 5703 plus 5798)(Line 57 above)							

(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
PART 1 - ORGANIZATIONAL CHART

Fortis (SA/NV) and Fortis N.V.	Owns 100% of Fortis Utrecht	NETHERLANDS
Fortis Utrecht	Owns 75% of Fortis Insurance N.V.	NETHERLANDS
Fortis Bank S.A./N.V.	Owns 25% of Fortis Insurance N.V.	NETHERLANDS
Fortis Insurance N.V.	Owns 100% of Fortis, Inc.	FEI 39-1126612 - NV
Fortis, Inc.	Owns 1% of Dental Health Alliance, LLC Owns 100% of Core, Inc. Owns 100% of Dental Care Holdings, Inc. Owns 100% of Florida Office Corp. Owns 100% of First Fortis Life Insurance Company Owns 100% of Fortis Family, Inc. Owns 100% of Fortis Legacy Place, Inc. Owns 100% of Insureco, Inc. Owns 100% of Interfinancial Inc. Owns 100% of Jacksonville Apartments, Inc.	FEI 13-3830846 - DE FEI 04-2828817 - MA FEI 13-4195935 - DE FEI 13-3896525 - DE FEI 13-2699219; NAIC 81477 - NY FEI 58-2315775 - GA FEI 13-3882719 - DE FEI 33-0658229 - CA FEI 13-3036467 - GA FEI 13-3868664 -DE
Core, Inc.	Owns 100% of Disability Reinsurance Management Services, Inc. Owns 100% of SSDC, Corp.	FEI 01-0483086 - DE FEI 38-3357459 - DE
Dental Care Holdings, Inc.	Owns 100% of Denticare, Inc. (FL) Owns 100% of Denticare, Inc. (KY) Owns 100% of Denticare of Alabama, Inc. Owns 100% of Denticare of Arkansas, Inc. Owns 100% of Georgia Dental Plan, Inc. Owns 100% of International Dental Plans, Inc. Owns 100% of Fortis Benefits DentalCare of Wisconsin, Inc. Owns 100% of Fortis Benefits DentalCare of New Jersey, Inc. Owns 100% of UDC Dental California, Inc. dba United Dental Care of California Owns 100% of UDC Ohio, Inc. Owns 100% of United Dental Care, Inc. Owns 100% of United Dental Care Insurance Company Owns 100% of United Dental Care of Arizona, Inc. Owns 100% of United Dental Care of Colorado, Inc. Owns 100% of United Dental Care of Indiana, Inc. Owns 100% of United Dental Care of Michigan, Inc. Owns 100% of United Dental Care of Nebraska, Inc. Owns 100% of United Dental Care of New Mexico, Inc. Owns 100% of United Dental Care of Pennsylvania, Inc. Owns 100% of United Dental Care of Texas, Inc. Owns 100% of United Dental Care of Utah, Inc.	FEI 59-1652450; NAIC 52016 - FL FEI 59-2228719; NAIC 96200 - KY FEI 59-3063687 - AL FEI 73-1274686; NAIC 95813 - AK FEI 58-1909945 - GA FEI 59-2327793; NAIC 52011 - FL FEI 39-1586450; NAIC 95129 - WI FEI 52-1565653 - NJ FEI 33-0360239; NAIC 52031 - CA FEI 74-2609036; NAIC 52022 - OH FEI 63-1197769 - DE FEI 86-0538651; NAIC 97870 - AZ FEI 86-0517444; NAIC 47708 - AZ FEI 86-0631335; NAIC 52032 -CO FEI 31-1307814; NAIC 52034 - IN FEI 38-2833988 - MI FEI 47-0676044; NAIC 52033 - NE FEI 86-0384270; NAIC 47042 - NM FEI 75-2635406; NAIC 47014 - PA FEI 75-2076282; NAIC 95142 - TX FEI 75-2635404; NAIC 95450 - UT

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE UDC OHIO, Inc

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

United Dental Care, Inc.	Owns 100% of Denticare of Oklahoma, Inc. Owns 100% of UDC Life and Health Insurance Company Owns 100% of United Dental Care of Missouri, Inc.	FEI 73-1153844; NAIC 47023 - OK FEI 73-1394955; NAIC 65929 - OK FEI 75-2481527; NAIC 47044 - MO
Insureco, Inc.	Owns 100% of Insureco Services, Inc. Owns 100% of Assurant Reinsurance of Turks & Caicos, Ltd.	FEI 95-2698862 - CA TURKS & CAICOS
Insureco Services, Inc.	Owns 100% of Crown Valley Insurance Agency, Inc. Owns 100% of Crown Valley Insurance Agency of Florida, Inc. Owns 100% of Adjusco, Inc. (fka Insureco Adjusters, Inc.) Owns 100% of Insureco Agency & Insurance Services, Inc. (CA) Owns 100% of Insureco Agency & Insurance Services, Inc. (HI) Owns 100% of Insureco Agency & Insurance Services, Inc. (KY) Owns 100% of Insureco Agency & Insurance Services, Inc. (MA) Owns 100% of Insureco Agency & Insurance Services, Inc. (NV) Owns 100% of Insureco Agency & Insurance Services, Inc. (OH) Owns 100% of Insureco Agency & Insurance Services, Inc. (TX)	FEI 95-3089343 - CA FEI 58-1455734 - FL FEI 95-2818626 - CA FEI 95-3097622 - CA FEI 95-3990223 - HI FEI 31-1507410 - KY FEI 04-3373573 - MA FEI 88-0181942 - NV FEI 31-0161049 - OH FEI 74-2230714 - TX
Interfinancial Inc.	Owns 100% of American Security Insurance Company Owns 100% of Fortis Benefits Insurance Company Owns 100% of Fortis Insurance Company Owns 100% of John Alden Financial Corporation Owns 100% of United Family Life Insurance Company	FEI 58-1529575; NAIC 42978 - DE FEI 81-0170040; NAIC 70408 - MN FEI 39-0658730; NAIC 69477 - WI FEI 59-2840712 - DE FEI 13-3036472; NAIC 91693 - GA
American Security Insurance Company	Owns 100% of Standard Guaranty Insurance Company Owns 100% of Union Security Life Insurance Company	FEI 58-1529579; NAIC 42986 - DE FEI 58-1529581; NAIC 98884 - DE
Fortis Benefits Insurance Company	Owns 99% of Dental Health Alliance, LLC Owns 100% of Gala, Inc.	FEI 13-3830846 - DE FEI 63-1115291 - AL
John Alden Financial Corporation	Owns 100% of Houston National Life Insurance Company Owns 100% of JA Services, Inc.	FEI 74-2080029; NAIC 90379 - TX FEI 65-0040859 - DE
Houston National Life Insurance Company	Owns 100% of John Alden Life Insurance Company	FEI 41-0999752; NAIC 65080 - MN
John Alden Life Insurance Company	Owns 100% of Alden Risk Management Services, Inc. Owns 100% of North Star Marketing Corporation	FEI 59-2261315 - NV FEI 59-2394561 - OH
JA Services, Inc.	Owns 100% of John Alden Horizon Health, Inc. Owns 100% of John Alden Service Warranty Corporation Owns 100% of John Alden Service Warranty Corporation of Florida	FEI 65-0457005 - NV FEI 65-0362333 - DE FEI 65-0362330 - FL

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

United Family Life Insurance Company	Owns 100% of John Alden Systems Company	FEI 41-0946005 - MN
	Owns 100% of NSM Sales Corporation	FEI 65-0416844 - NV
American Memorial Life Insurance Company	Owns 100% of American Bankers Insurance Group	FEI 59-1985922- FL
	Owns 100% of American Memorial Life Insurance Company	FEI 46-0260270; NAIC 67989- SD
American Bankers Insurance Group, Inc.	Owns 100% of Rushmore National Life Insurance Company	FEI 46-0184173; NAIC 68586- SD
	Owns 100% of AB Warranty Company	FEI 65-0344416 - DE
	Owns 100% of American Association for Financial Institution Services	FEI 75-2337610 - TX
	Owns 100% of American Bankers Dominicana, S.A.	DOMINICAN REPUBLIC
	Owns 100% of American Bankers Capital, Inc.	FEI 59-2731675 - DE
	Owns 100% of American Bankers Financial Services, L.L.C.	FEI 38-3443906 - MI
	Owns 100% of American Bankers Insurance Company of Florida	FEI 59-0593886; NAIC 10111- FL
	Owns 100% of Assurant Services Ireland, Ltd.	IRELAND
	Owns 100% of American Bankers International Division, Inc.	FEI 66-0568288 - PR
	Owns 100% of American Bankers Life Assurance Company of Florida	FEI 59-0676017; NAIC 60275 - FL
	Owns 100% of American Bankers Management Company, Inc	FEI 65-0597010 - FL
	Owns 100% of American Bankers Sales Corporation, Inc.	FEI 59-1967729 - FL
	Owns 100% of American Reliable Insurance Company	FEI 41-0735002; NAIC 19615 - AZ
	Owns 100% of Assurant Group, Ltd.	UNITED KINGDOM
	Owns 100% of Assurant Membership Services, Inc.	CANADA
	Owns 100% of Assurant Services Denmark A/S	DENMARK
	Owns 100% of Bankers Atlantic Reinsurance Company	FEI 98-0152782 - TURKS & CAICOS
	Owns 100% of Computer Insurance Agency, Inc (CA)	FEI 31-1265003 - CA
	Owns 100% of Dominion Automobile Association	CANADA
	Owns 100% of Federal Warranty Service Corporation	FEI 36-3596362 - IL
	Owns 100% of Financial Exchange, Inc.	FEI 75-1391092 - TX
	Owns 100% of Guardian Investment Services, Inc.	FEI 59-2720545 - FL
	Owns 100% of MSDiversified Corp.	FEI 64-0660045 - MS
	Owns 100% of National Insurance Agency	FEI 59-1357775 - FL
	Owns 100% of PAS Financial Group, Inc.	FEI 75-2321226 - TX
	Owns 100% of Quail Roost Properties, Inc.	FEI 59-1414202 - FL
	Owns 100% of Roadgard Motor Club, Inc.	FEI 59-2192619 - FL
	Owns 100% of Safeware, The Insurance Agency, Inc. (OH)	FEI 31-1073966 - OH
	Owns 100% of Sureway, Inc.	FEI 59-1532747 - DE
	Owns 100% of Voyager Group, Inc.	FEI 59-1236556 - FL
	Owns 100% of Voyager Life and Health Insurance Company	FEI 58-1023083; NAIC 71196 - GA
	Owns 100% of Voyager Life Insurance Company	FEI 59-1090425; NAIC 66699 - GA
	Owns 100% of Voyager Service Warranties, Inc.	FEI 59-2675787 - FL
American Bankers Insurance Company of Florida	Owns 54% of Caydeaux Group, Ltd.	CAYMAN ISLANDS
	Owns 100% of American Bankers General Agency, Inc.	FEI 74-2135158 - TX
American Bankers International Division, Inc.	Owns 100% of EGC Management Corporation	FEI ; NAIC -
	Owns 1% of Assurant Services Brasil, Limitada	BRASIL

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

	Owns 1% of Assurant Brasil S.A. Owns 74% of Caribbean American Property Insurance Company Owns 100% of ABIG Holding de Espana, S.L. Owns 100% of Caribbean American Insurance Agency Company Owns 100% of Caribbean American Life Assurance Company	BRASIL FEI 66-0481184; NAIC 30590 - PR SPAIN FEI 66-0520042 - PR FEI 66-0448783; NAIC 73156 - PR
ABIG Holding de Espana, S.L.	Owns 99% of Assurant Services Brasil, Limitada Owns 99% of Assurant Brasil S.A. Owns 99% of American Bankers Argentina Compania de Seguros, S.A.	BRASIL BRASIL ARGENTINA
Assurant Brasil S.A.	Owns 100% of Assurant Seguradora S.A.	BRASIL
American Bankers Life Assurance Company of Florida	Owns 79% of Condeaux Life Insurance Company	FEI 86-0420893; NAIC 94625 - AZ
American Bankers Management Company, Inc.	Owns 100% of Consumer Assist Network Association, Inc.	FEI 65-0597011 - DE
American Reliable Insurance Company	Owns 100% of Caravanner Insurance, Inc. of Arizona	FEI - AZ
Assurant Group LTD	Owns 100% of Bankers Insurance Company, Ltd. Owns 100% of Bankers Life Assurance Company, Ltd.	UNITED KINGDOM UNITED KINGDOM
Bankers Insurance Company, Ltd.	Owns 100% of Bankers Insurance Service Company, Limited	UNITED KINGDOM
Caribbean American Life Assurance Company	Owns 26% of Caribbean American Property Insurance Company	FEI 66-0481184; NAIC 30590 - PR
Caydeaux Group, Ltd	Owns 100% of Caydeaux Insurance Company, Ltd. Owns 100% of Caydeaux Life Assurance Company, Ltd.	CAYMAN ISLANDS CAYMAN ISLANDS
EGC Management, Inc.	Controls thru a management agreement - Specialty Lloyds Insurance Company	FEI 74-2289453; NAIC 28843 - TX
Federal Warranty Service Corporation	Owns 100% of Federal Warranty Service	CANADA
Financial Exchange, Inc.	Attorney in fact for: Financial Insurance Exchange	FEI 75-1391093; NAIC 18570 - TX
Guardian Investment Services, Inc.	Owns 0.01% of American Bankers Argentina Compania de Seguros, S.A.	ARGENTINA
Gulf Atlantic Insurance Agency		

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

	Owns 100% of United Service Protection, Inc.	FEI 59-1794848 - FL
MSDiversified Corp.	Owns 100% of Gulf Atlantic Insurance Agency, Inc. Owns 61% of MS Casualty Insurance Co. Owns 100% of MS Financial Services, Inc. Owns 100% of MS Life Insurance Company Owns 100% of MS Loan Center, Inc. Owns 100% of United Service Protection Corporation	FEI 59-1608916 - FL FEI 64-0681628; NAIC 15008 - MS FEI 64-0779440 - MS FEI 86-0275686; NAIC 83380 - MS FEI 64-0847246 - MS FEI 64-0906751 - DE
MS Life Insurance Company	Owns 21% of Commerce National Insurance Co. Owns 79% of Life Insurance Company of Mississippi Owns 61% of MS Diversified Life Insurance Owns 39% of MS Casualty Insurance Co.	FEI 64-0759872; NAIC 82767 - MS FEI 64-0614963; NAIC 89133 - MS FEI 64-0740613; NAIC 78310 - MS FEI 64-0681628; NAIC 15008 - MS
Sureway, Inc.	Owns 100% of Guardian Travel, Inc.	FEI 59-2519974 - FL
United Service Protection Corporation	Owns 100% of United Services Protection Corporation	CANADA
Voyager Group Inc.	Owns 100% of Voyager American Insurance Company, Ltd. Owns 100% of Voyager Indemnity Insurance Company Owns 100% of Voyager Service Programs Inc. Owns 100% of Voyager Property and Casualty Insurance Company	FEI 65-0508336 - Turks & Caicos FEI 58-1455416; NAIC 40428 - GA FEI 59-3110220 - FL FEI 57-0665589; NAIC 35971 - SC

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 on "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 question.

RESPONSE

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

.....Yes.....

Explanation:

Bar Code:

OVERFLOW PAGE FOR WRITE-INS

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 1

NONE

Schedule B - Part 2

NONE

Schedule BA - Part 1

NONE

Schedule BA - Part 2

NONE

SCHEDULE D - PART 3

[illegible]

E04

SCHEDULE D - PART 4

[illegible]

E05

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE UDC OHIO, Inc

SCHEDULE E - PART 1 - CASH

[illegible]