

HEALTH QUARTERLY STATEMENT

AS OFSeptember 30, 2002

OF THE CONDITION AND AFFAIRS OF THE

SummaCare, Inc.

NAIC Group Code	3259	NAIC Company Code	95202	Employer's ID Number	34-1726655
	(Current Period)		(Prior Period)		
Organized under the Laws of	Ohio	State of Domicile or Port of Entry	Ohio		
Country of Domicile	United States				
Licensed as business type:	Life, Accident & Health[ ] Dental Service Corporation[ ] Other[ ]	Property/Casualty[ ] Vision Service Corporation[ ] Is HMO Federally Qualified? Yes[X] No[ ]	Hospital, Medical & Dental Service or Indemnity[ ] Health Maintenance Organization[X]		
Date Incorporated or Organized	10/23/1992	Date Commenced Business	03/01/1993		
Statutory Home Office	10 North Main Street	Akron, OH 44308			
	(Street and Number)	(City, or Town, State and Zip Code)			
Main Administrative Office	10 North Main Street	(330)996-8410 x			
	(Street and Number)	(Area Code) (Telephone Number)			
	Akron, OH 44308	Akron, OH 44309-3620			
	(City or Town, State and Zip Code)	(City, or Town, State and Zip Code)			
Mail Address	P.O. Box 3620	(330)996-8489 x			
	(Street and Number or P.O. Box)	(Area Code) (Telephone Number) (Extension)			
Primary Location of Books and Records	10 North Main Street	(330)996-8489 x			
	(Street and Number)	(Area Code) (Telephone Number) (Extension)			
	Akron, OH 44309	(330)996-8553 x			
	(City, or Town, State and Zip Code)	(Area Code) (Telephone Number) (Extension)			
Internet Website Address					
Statutory Statement Contact	Marilyn Christine Anglin	(330)996-8489 x			
	(Name)	(Area Code) (Telephone Number) (Extension)			
	anglinm@summacare.com	(330)996-8553 x			
	(E-Mail Address)	(Fax Number)			
Policyowner Relations Contact					
		(Street and Number)			
		(City, or Town, State and Zip Code)			
		(Area Code) (Telephone Number) (Extension)			

OFFICERS

President	Martin Paul Hauser
Secretary	C. Michael Rutherford
Treasurer	C. Michael Rutherford

VICE PRESIDENTS

Claude Maurius Vincenti	Ernest Edward Humbert
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DIRECTORS OR TRUSTEES

Thomas Francis Bear	Thomas Clifford Deveny	Thomas Gene Knoll
Vincent Hadar Johnson Jr.	Jeffrey Scott Kline	Ann Amer Brennan
Thomas Joseph Strauss	Dale Patterson Murphy	Walter Neil Mirapaul
C. Michael Rutherford	J. B. Silvers	Bernett L. Williams
Richard A. Merolla		

State of	Ohio
County of	USA 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)
Martin Paul Hauser	Claude Maurius Vincenti	Ernest Edward Humbert
(Printed Name)	(Printed Name)	(Printed Name)
President	Senior Vice President, COO	Vice President, CFO

Subscribed and sworn to before me this	a. Is this an original filing?	Yes[X] No[ ]
day of , 2002	b. If no,	
	1. State the amendment number	
	2. Date filed	
	3. Number of pages attached	

(Notary Public Signature)

ASSETS

		Current Period			Prior Year
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets	Net Admitted Assets
1.	Bonds .....	14,750,748		14,750,748	9,490,385
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) .....	48,527	48,527	(a).....	
4.2	Properties held for the production of income (less \$..... encumbrances) .....				
4.3	Properties held for sale (less \$..... encumbrances) .....				
5.	Cash (\$.....5,792,322) and short-term investments (\$.....470,504) .....	6,262,827		6,262,827	21,375,068
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) .....	21,062,102	48,527	21,013,575	30,865,453
10.	Accident and health premiums due and unpaid .....	10,963,803	101,815	10,861,988	9,083,864
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 .....	35,600		35,600	140,180
15.	Amounts due from parent, subsidiaries and affiliates .....	1,262,093		1,262,093	624,911
16.	Amounts receivable relating to uninsured accident and health plans .....				
17.	Furniture and equipment .....	491,716	491,716		
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 .....	3,504,209	3,046,406	457,803	497,837
21.	Other nonadmitted assets .....				
22.	Aggregate write-ins for other than invested assets .....	1,672,338	503,416	1,168,922	2,402,490
23.	Total assets (Lines 9 plus 10 through 22) .....	38,991,861	4,191,880	34,799,981	43,614,735
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.	Other Receivables .....	357,377		357,377	1,214,703
2202.	Prepaid expenses .....	280,912	280,912		19,269
2203.	Goodwill .....	222,504	222,504		
2298.	Summary of remaining write-ins for Line 22 from overflow page .....	811,545		811,545	1,168,518
2299.	TOTALS (Lines 2201 through 2203 plus 2298) (Line 22 above) .....	1,672,338	503,416	1,168,922	2,402,490

(a) \$..... 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) .....	4,966,479		4,966,479	3,399,602
2.	Accrued medical incentive pool and bonus payments .....				
3.	Unpaid claims adjustment expenses .....	135,939		135,939	68,767
4.	Aggregate policy reserves .....				
5.	Aggregate claim reserves .....				
6.	Premiums received in advance .....	10,781,759		10,781,759	19,476,853
7.	General expenses due or accrued .....	612,594		612,594	1,887,438
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 .....				
10.	Borrowed money (including \$..... current) and interest thereon \$..... (including \$..... current) .....				
11.	Amounts due to parent, subsidiaries and affiliates .....	540,715		540,715	2,514,696
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) .....	1,583,799		1,583,799	
18.	Total liabilities (Lines 1 to 17) .....	18,621,285		18,621,285	27,347,356
19.	Common capital stock .....	X X X	X X X	570	570
20.	Preferred capital stock .....	X X X	X X X	100	100
21.	Gross paid in and contributed surplus .....	X X X	X X X	12,017,044	11,948,443
22.	Surplus notes .....	X X X	X X X		
23.	Aggregate write-ins for other surplus funds .....	X X X	X X X		
24.	Unassigned funds (surplus) .....	X X X	X X X	4,160,982	4,318,266
25.	Less treasury stock, at cost:	X X X	X X X		
25.1	..... shares common (value included in Line 19 \$.....)	X X X	X X X		
25.2	..... shares preferred (value included in Line 20 \$.....)	X X X	X X X		
26.	Total capital and surplus (Lines 19 to 24, Less 25) .....	X X X	X X X	16,178,696	16,267,379
27.	Total liabilities, capital and surplus (Lines 18 and 26) .....	X X X	X X X	34,799,981	43,614,735
DETAILS OF WRITE-INS					
1701.	Payroll liability .....	271,321		271,321	
1702.	City tax liability .....	9,337		9,337	
1703.	Other accrued liabilities .....	1,303,141		1,303,141	
1798.	Summary of remaining write-ins for Line 17 from overflow page .....				
1799.	TOTALS (Lines 1701 through 1703 plus 1798) (Line 17 above) .....	1,583,799		1,583,799	
2301	.....	X X X	X X X		
2302	.....	X X X	X X X		
2303	.....	X X X	X X X		
2398.	Summary of remaining write-ins for Line 23 from overflow page .....	X X X	X X X		
2399.	TOTALS (Lines 2301 through 2303 plus 2398) (Line 23 above) .....	X X X	X X X		

**STATEMENT OF REVENUE AND EXPENSES**

		Current Year to Date		Prior Year
		1 Uncovered	2 Total	3 Total
1.	Member Months .....	X X X .....	835,280	977,318
2.	Net premium income .....	X X X .....	186,903,370	205,624,255
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 .....	2,922,150	2,098,996
7.	TOTAL REVENUES (Lines 2 to 6) .....	X X X .....	189,825,520	207,723,251
<b>Medical and Hospital:</b>				
8.	Hospital/medical benefits .....		135,729,427	149,208,534
9.	Other professional services .....		27,635,634	27,421,799
10.	Outside referrals .....			
11.	Emergency room and out-of-area .....		1,487,522	1,736,661
12.	Prescription drugs .....			
13.	Aggregate write-ins for other medical and hospital .....			
14.	Incentive pool and withhold adjustments .....			
15.	Subtotal (Lines 8 to 14) .....		164,852,583	178,366,994
<b>LESS:</b>				
16.	Net reinsurance recoveries .....			
17.	Total medical and hospital (Lines 15 minus 16) .....		164,852,583	178,366,994
18.	Claims adjustment expenses .....			
19.	General administrative expenses .....		23,821,585	25,557,511
20.	Increase in reserves for accident and health contracts .....			
21.	Total underwriting deductions (Lines 17 through 20) .....		188,674,168	203,924,505
22.	Net underwriting gain or (loss) (Lines 7 minus 21) .....	X X X .....	1,151,352	3,798,746
23.	Net investment income earned .....		491,277	658,009
24.	Net realized capital gains or (losses) .....			
25.	Net investment gains or (losses) (Lines 23 plus 24) .....		491,277	658,009
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 .....		50,176	88,399
28.	Net income or (loss) before federal income taxes (Lines 22 plus 25 plus 26 plus 27) .....		1,692,805	4,545,154
29.	Federal and foreign income taxes incurred .....	X X X .....	112,500	1,785,000
30.	Net income (loss) (Lines 28 minus 29) .....	X X X .....	1,580,305	2,760,154
<b>DETAILS OF WRITE-INS</b>				
0601.	Administrative Services revenue .....	X X X .....	2,922,150	2,096,510
0602.	.....	X X X .....		
0603.	Gain/loss on disposal of asset .....	X X X .....		2,486
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 .....	2,922,150	2,098,996
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.	COB and Subrogation .....		50,176	88,399
2702.	Network Access fees .....			
2703	.....			
2798.	Summary of remaining write-ins for Line 27 from overflow page .....			
2799.	TOTALS (Lines 2701 through 2703 plus 2798) (Line 27 above) .....		50,176	88,399

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1	2
		Current Year to Date	Prior Year
CAPITAL & SURPLUS ACCOUNT			
31.	Capital and surplus prior reporting year .....	16,267,379	11,611,866
GAINS AND LOSSES TO CAPITAL & SURPLUS			
32.	Net income or (loss) from Line 30 .....	1,580,305	2,760,154
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 .....	(88,455)	962,000
37.	Change in nonadmitted assets .....	(1,649,171)	264,418
38.	Change in unauthorized reinsurance .....		
39.	Change in treasury stock .....		
40.	Change in surplus notes .....		
41.	Cumulative effect of changes in accounting principles .....		(1,116,059)
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 .....	68,601	1,785,000
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 .....	38	
46.	Net change in capital and surplus (Lines 32 to 45) .....	(88,682)	4,655,513
47.	Capital and surplus end of reporting period (Line 31 plus 46) .....	16,178,697	16,267,379
DETAILS OF WRITE-INS			
4501.	GAAP Pushdown entry @ 12/31 .....		
4502.	Misc. adj. ....	38	
4503.	.....		
4598.	Summary of remaining write-ins for Line 45 from overflow page .....		
4599.	TOTALS (Lines 4501 through 4503 plus 4598) (Line 45 above) .....	38	

CASH FLOW

		1	2
		Current	Prior
		Year To Date	Year
Cash from Operations			
1.	Premiums and revenues collected net of reinsurance .....	176,429,893	208,690,507
2.	Claims and claims adjustment expenses .....	163,168,357	175,055,603
3.	General administrative expenses paid .....	23,806,148	25,712,385
4.	Other underwriting income (expenses) .....		(416,799)
5.	Cash from underwriting (Line 1 minus Line 2 minus Line 3 plus Line 4) .....	(10,544,612)	7,505,720
6.	Net investment income .....	589,100	594,743
7.	Other income (expenses) .....	3,897,439	1,149,468
8.	Federal and foreign income taxes (paid) recovered .....	156,018	(1,191,000)
9.	Net cash from operations (Lines 5 to 8) .....	(5,902,055)	8,058,931
Cash from Investments			
10.	Proceeds from investments sold, matured or repaid:		
10.1	Bonds .....	50,000	100,000
10.2	Stocks .....		
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) .....	50,000	100,000
11.	Cost of investments acquired (long-term only):		
11.1	Bonds .....	5,375,008	4,497,984
11.2	Stocks .....		
11.3	Mortgage loans .....		
11.4	Real estate .....		
11.5	Other invested assets .....		
11.6	Miscellaneous applications .....	10,964	
11.7	TOTAL investments acquired (Lines 11.1 to 11.6) .....	5,385,972	4,497,984
12.	Net cash from investments (Line 10.8 minus Line 11.7) .....	(5,335,972)	(4,397,984)
Cash from Financing and Miscellaneous Sources			
13.	Cash provided:		
13.1	Surplus notes, capital and surplus paid in .....	362,119	1,785,000
13.2	Net transfers from affiliates .....	(1,973,981)	683,424
13.3	Borrowed funds received .....	(1,648,921)	264,418
13.4	Other cash provided .....	23,703	932,335
13.5	TOTAL (Lines 13.1 to 13.4) .....	(3,237,080)	3,665,177
14.	Cash applied:		
14.1	Dividends to stockholders paid .....		
14.2	Net transfers to affiliates .....	637,182	
14.3	Borrowed funds repaid .....		
14.4	Other applications .....	(48)	1,116,059
14.5	TOTAL (Lines 14.1 to 14.4) .....	637,134	1,116,059
15.	Net cash from financing and miscellaneous sources (Line 13.5 minus Line 14.5) .....	(3,874,214)	2,549,118
RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS			
16.	Net change in cash and short-term investments (Line 9 plus Line 12 plus Line 15) .....	(15,112,241)	6,210,065
17.	Cash and short-term investments:		
17.1	Beginning of period .....	21,375,068	15,165,002
17.2	End of period (Line 16 plus Line 17.1) .....	6,262,827	21,375,067

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	86,296		42,437				1,916	12,369	29,574	
2. First Quarter .....	91,064		43,101				5,095	11,887	30,981	
3. Second Quarter .....	92,660		42,851				5,146	11,825	32,838	
4. Third Quarter .....	97,023		46,248				5,340	11,638	33,797	
5. Current Year .....										
6. Current Year Member Months .....	835,280		394,378				46,520	105,795	288,587	
Total Member Ambulatory Encounters for Period:										
7. Physician .....	115,194		42,602					32,444	40,148	
8. Non-Physician .....	76,515		36,403					23,481	16,631	
9. Total .....	191,709		79,005					55,925	56,779	
10. Hospital Patient Days Incurred .....	39,279		8,436				836	21,549	8,458	
11. Number of Inpatient Admissions .....	8,495		2,267				233	3,490	2,505	
12. Premiums Collected .....	176,429,893		73,276,378				7,148,974	55,665,782	40,338,759	
13. Premiums Earned .....	186,903,369		72,053,290				7,767,820	62,157,307	44,924,952	
14. Amount Paid for Provision of Health Care Services .....	163,168,358		62,828,209				6,711,787	54,847,655	38,780,707	
15. Amount Incurred for Provision of Health Care Services .....	164,852,583		63,749,060				7,475,161	54,847,655	38,780,707	

**CLAIMS PAYABLE (Reported and Unreported)**

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 days	Over 120 Days	Total
0199999 Individually Listed Claims Payable .....	.....	.....	.....	.....	.....	.....
0299999 Aggregate Accounts Not Individually Listed - Uncovered .....	.....	.....	.....	.....	.....	.....
0399999 Aggregate Accounts Not Individually Listed - Covered .....	2,309,479	761,000	453,000	382,000	1,061,000	4,966,479
0499999 Subtotals .....	2,309,479	761,000	453,000	382,000	1,061,000	4,966,479
0599999 Unreported claims and other claim reserves .....						.....
0699999 Total Amounts Withheld .....						.....
0799999 Total Claims Payable .....						4,966,479
0899999 Accrued Medical Incentive Pool .....						.....

**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 & Medical) .....	2,994,000	59,834,210	403,000	3,693,845	3,397,000	3,293,342
2.	Medicare Supplement .....						
3.	Dental only .....						
4.	Vision only .....						
5.	Federal Employees Health Benefits Plan Premiums ..	113,000	6,598,787		869,634	113,000	106,261
6.	Title XVIII - Medicare .....		54,847,655				
7.	Title XIX - Medicaid .....		38,780,707				
8.	Other .....						
9.	Subtotal .....	3,107,000	160,061,359	403,000	4,563,479	3,510,000	3,399,603
10.	Medical incentive pools, accruals and disbursements ..						
11.	TOTALS .....	3,107,000	160,061,359	403,000	4,563,479	3,510,000	3,399,603

# 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] N/A[ ]
- 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?  
If yes attach an organizational chart.

Yes[ ] No[X]
- 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	2	3
Name of Entity	NAIC Company Code	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?  
If yes, attach an explanation.

Yes[ ] No[X] N/A[ ]
- 7.1 State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/1997
- 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.

12/31/1997
- 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).

12/31/1998
- 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 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 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?  
If no, attach a description with this statement.

Yes[ ] No[X] N/A[ ]
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[ ] No[X]
- 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

- 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	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 .....	58,346	61,745	54,957	51,325
2.	Increase (decrease) by adjustment .....	3,399	(6,788)	(6,430)	(22,835)
3.	Cost of acquired .....				
4.	Cost of additions to and permanent improvements .....				29,857
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 .....	61,745	54,957	48,527	58,347
9.	Total valuation allowance .....				
10.	Subtotal (Lines 8 plus 9) .....	61,745	54,957	48,527	58,347
11.	Total nonadmitted amounts .....	61,745	54,957	48,527	58,346
12.	Statement value, current period (Page 2, real estate lines, current period) .....				1

**SCHEDULE B - VERIFICATION**

		1	2	3	4
		First Quarter Current Year	Second Quarter Current Year	Third Quarter Current Year	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**

		1	2	3	4
Description		First Quarter Current Year	Second Quarter Current Year	Third Quarter Current Year	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
<b>BONDS</b>								
1. Class 1 .....	14,778,612			(27,864)	14,439,343	14,778,612	14,750,748	9,490,385
2. Class 2 .....								
3. Class 3 .....								
4. Class 4 .....								
5. Class 5 .....								
6. Class 6 .....								
7. TOTAL Bonds .....	14,778,612			(27,864)	14,439,343	14,778,612	14,750,748	9,490,385
<b>PREFERRED STOCK</b>								
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 .....	14,778,612			(27,864)	14,439,343	14,778,612	14,750,748	9,490,385

**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 .....	470,504	X X X .....	470,504	2,580	.....

**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 .....	462,045	620,282	464,600	473,307
2. Cost of short-term investments acquired .....	5,249,751	214,541	205,904	4,539,229
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 .....	5,091,514	370,223	200,000	4,550,491
7. Book/adjusted carrying value, current period .....	620,282	464,600	470,504	462,045
8. Total valuation allowance .....				
9. Subtotals (Lines 7 plus 8) .....	620,282	464,600	470,504	462,045
10. Total nonadmitted amounts .....				
11. Statement value (Lines 9 minus 10) .....	620,282	464,600	470,504	462,045
12. Income collected during period .....	6,664	3,342	2,580	
13. Income earned during period .....	6,664	3,342	2,580	

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

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

**SCHEDULE S - CEDED REINSURANCE**

**Showing all new reinsurers-Current Year to Date**

1 NAIC Company Code	2 Federal ID Number	3  Name of Reinsurer	4  Location	5 Is Insurer Authorized? (Yes or No)
------------------------------	------------------------------	----------------------------	-------------------	---

**Life and annuity - affiliates**

90611 .....	41-1366075 .....	Allianz Life Ins Co Of North Amer .....	Minneapolis, Minnesota .....	Yes[X] No[ ] .....
.....	.....	.....	.....	Yes[ ] No[X] .....

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	72,053,291	62,157,307	44,924,952	7,767,820
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	72,053,291	62,157,307	44,924,952	7,767,820
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**  
No

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

Explanation:

Bar Code:



OVERFLOW PAGE FOR WRITE-INS

ASSETS

		Current Period			Prior Year
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets	Net Admitted Assets
0897.	Summary of remaining write-ins for Line 8 (Lines 0804 through 0896) .....	.....	.....	.....	.....
2204.	Income tax receivable .....	.....	.....	.....	..... 415,722
2205.	Deferred tax asset .....	..... 811,545	.....	..... 811,545	..... 752,796
2297.	Summary of remaining write-ins for Line 22 (Lines 2204 through 2296) .....	..... 811,545	.....	..... 811,545	..... 1,168,518

**E01      Schedule A Part 2..... NONE**

**E01      Schedule A Part 3..... NONE**

**E02      Schedule B Part 1..... NONE**

**E02      Schedule B Part 2..... NONE**

**E03      Schedule BA Part 1..... NONE**

**E03      Schedule BA Part 2 ..... NONE**

**E04      Schedule D Part 3..... NONE**

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	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
CUSIP Identification	Description	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Book/Adjusted Carrying Value at Disposal Date	Increase (Decrease) by Adjustment	Increase (Decrease) by Foreign Exchange Adjustment	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) On Disposal	Interest on Bonds Received During Year	Dividends on Stocks Received During Year	NAIC Desig- nation (a)
<b>Bonds - U.S. Governments</b>																
.....	NONE .....	.....	.....	... X X X ...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.... X X X .....	.....
0399999	Subtotal - Bonds - U.S. Governments .....				.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.... X X X .....	.. X X X .
6099997	Subtotal - Bonds - Part 4 .....				.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.... X X X .....	.. X X X .
6099998	Summary Item for Bonds Bought and Sold This Quarter .....				.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.... X X X .....	.. X X X .
6099999	Subtotal - Bonds .....				.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.... 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**

1			Month End Depository Balances			Book Balance at End of Each Month During Current Quarter			8
			2	3	4	5	6	7	
						First Month	Second Month	Third Month	
Depository			Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date				*
<b>open depositories</b>									
First Merit .....	Akron, Ohio .....		1.190	2,953		2,627,542	128,026	1,128,829	
First Merit .....	Akron, Ohio .....					7,862,723	17,054,542	4,663,493	
First Merit .....	Akron, Ohio .....								
First Merit .....	Akron, Ohio .....								
First Merit .....	Akron, Ohio .....								
First Merit .....	Akron, Ohio .....								
First Merit .....	Akron, Ohio .....								
First Merit .....	Akron, Ohio .....								
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	2,953		10,490,265	17,182,568	5,792,322	
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	2,953		10,490,265	17,182,568	5,792,322	
0499999 Cash in Company's Office .....			X X X	X X X	X X X				
0599999 Total Cash .....			X X X	2,953		10,490,265	17,182,568	5,792,322	

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