Amended Statement Cover

Hometown Health Plan originally filed the statement based upon the opinion of our auditors concerning nonadmitted assets. Since then, the auditors have decided that the full amount of reinsurance receivable is now entirely admitted. We are resubmitting all forms and schedules that have been affected as a result of this change.

Additionally, Hometown Health Plan did not originally submit the state required schedules with appropriate barcodes. The revised hard copy filing now includes the appropriately coded state filing pages.

95195200220100100 2002 Document Code: 201

ANNUAL STATEMENT

For the Year Ending December 31, 2002

OF THE CONDITION AND AFFAIRS OF THE

HOMETOWN HEALTH PLAN

NAIC Group Code 3058 (Current Period) , 0000 (Prior Period) NAIC Company Code 95195 Employer's ID Number 34-1523541

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[ ] Propery/Casualty[ ] Hospital, Medical & Dental Service or Indemnity[ ]
Dental Service Corporation[ ] Vision Service Corporation[ ] Health Maintenance Organization[X]
Other[ ] Is HMO Federally Qualified? Yes[ ] No[X]

Date Incorporated or Organized 08/14/1986 Date Commenced Business 01/01/1987

Statutory Home Office 100 Lillian Gish Blvd., Suite 301 (Street and Number) , Massillon, OH 44647 (City, or Town, State and Zip Code)

Main Administrative Office 100 Lillian Gish Blvd., Suite 301 (Street and Number)
Massillon, OH 44647 (City or Town, State and Zip Code) (877)236-2289 (Area Code) (Telephone Number)

Mail Address 100 Lillian Gish Blvd., P.O. Box 4816 (Street and Number or P.O. Box) , Massillon, OH 44648 (City, or Town, State and Zip Code)

Primary Location of Books and Records 100 Lillian Gish Blvd., Suite 301 (Street and Number)
Massillon, OH 44647 (City, or Town, State and Zip Code) (877)236-2289 (Area Code) (Telephone Number)

Internet Website Address www.hometownhealthnet.com

Statement Contact John F. Strah (Name) (330)834-2203 (Area Code)(Telephone Number)(Extension)
JStrah@Hometownhealthnet.com (E-Mail Address) (330)834-2040 (Fax Number)

Policyowner Relations Contact 100 Lillian Gish Blvd., P.O. Box 4816 (Street and Number)
Massillon, OH 44648 (City, or Town, State and Zip Code) (877)236-2289 (Area Code) (Telephone Number)(Extension)

OFFICERS

President	William C. Epling
Secretary	Richard J. Streck M.D.
Treasurer	John F. Strah

VICE PRESIDENTS

DIRECTORS OR TRUSTEES

Michael Gallucci
William C. Epling
Thomas Stover M.D.
Alan J. Bleyer
Ramon Martinez #
Clifford Isroff
Calvin Warren Jr. M.D.
J. Gregory Feczko D.O.
Richard J. Streck M.D.

State of Ohio
County of Stark 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)
William C. Epling	Richard J. Streck, M.D.	John F. Strah
(Printed Name)	(Printed Name)	(Printed Name)
President	Secretary	Treasurer

a. Is this an original filing? Yes[ ] No[X]
b. If no, 1. State the amendment number 1
2. Date filed 03/28/2003
3. Number of pages attached 9

Subscribed and sworn to before me this 28th day of March , 2003

(Notary Public Signature)