



95429200220100100

HEALTH ANNUAL STATEMENT
FOR THE YEAR ENDING DECEMBER 31, 2002
OF THE CONDITION AND AFFAIRS OF THE

Genesis Health Plan

NAIC Group Code 1206 (Current Period) 1206 (Prior Period) NAIC Company Code 95429 Employer's ID Number 34-1819975

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

Country of Domicile

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

Date Incorporated or Organized: December 22, 1995 Date Commenced Business: January 1, 1996

Statutory Home Office: 2200 JEFFERSON AVE., 6TH FLOOR TOLEDO, OH 43624

Main Administrative Office: 2200 JEFFERSON AVE., 6TH FLOOR TOLEDO, OH 43624 419-241-6501

Mail Address: 2200 JEFFERSON AVE., 6TH FLOOR TOLEDO, OH 43624

Primary Location of Books and Records: 2200 JEFFERSON AVE., 6TH FLOOR TOLEDO, OH 43624 419-241-6501

Internet Website Address: n/a

Statement Contact: JEFFRIE REGO 419-251-6223

JEFFRIE_REGO@MHSNR.ORG 419-241-5441
(E-Mail Address) (Fax Number)

Policyowner Relations Contact: 2200 JEFFERSON AVE., 6TH FLOOR TOLEDO, OH 43624 419-241-6501

OFFICERS

PRESIDENT & CEO: THOMAS E. BEATY, JR.

Secretary:

CHIEF FINANCIAL OFFICER: RANDOLPH C. HOFFMAN

Actuary:

Vice-Presidents

MARK TUCKER, MD JOANNE VOLOVAR MARK LANCIANO ANDREW WEINTRAUB

DIRECTORS OR TRUSTEES

BRIAN LOCKWOOD JACK ELLIOTT THOMAS E. BEATY, JR. KAREN YACOBUCCI

State of OHIO
County of LUCAS 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.

(Signature) (Signature) (Signature)
THOMAS E. BEATY, JR. RANDOLPH C. HOFFMAN
(Printed Name) (Printed Name)
PRESIDENT & CEO Secretary CHIEF FINANCIAL OFFICER

Subscribed and sworn to before me this
28TH day of FEBRUARY, 2003

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

NONE **Schedule A - Part 1**

NONE **Schedule A - Part 2**

NONE **Schedule A - Part 3**

NONE **Schedule B - Part 1**

NONE **Schedule B - Part 2**

NONE	Schedule BA - Part 2
NONE	Schedule D - Part 1
NONE	Schedule D - Part 2 - Section 1
NONE	Schedule D - Part 2 - Section 2
NONE	Schedule D - Part 3
NONE	Schedule D - Part 4
NONE	Schedule D - Part 5
NONE	Schedule D - Part 6 - Section 1 and 2
NONE	Schedule DA - Part 1
NONE	Schedule DB - Part A - Section 1 and 2
NONE	Schedule DB - Part A - Section 3 and Part B - Section 1
NONE	Schedule DB - Part B - Section 2 and 3
NONE	Schedule DB - Part C - Section 1 and 2
NONE	Schedule DB - Part C - Section 3 and Part D - Section 1
NONE	Schedule DB - Part D - Section 2 and 3
NONE	Schedule DB - Part E - Section 1
NONE	Schedule DM

SCHEDULE E - PART 2 - SPECIAL DEPOSITS

1	2	3	4	5	6	7
Line Number	Type	Description of Deposit	Where Deposited and Purpose of Deposit	Par or Book Value	Statement Value (a)	Fair Value
	C	Certificate of Deposit	Toledo, Ohio - Key Bank; OH RSD by Ohio Revised Code	55,685	55,685	55,685
	C	Certificate of Deposit	Toledo, Ohio - Tri-City National Bank; OH RSD by Ohio Revised Code	361,326	361,326	361,326
	C	Certificate of Deposit	Toledo, Ohio - Tri-City National Bank; OH RSD by Ohio Revised Code	64,494	64,494	64,494
OH99999		OHIO		481,505	481,505	481,505
XX99999		Total - Special Deposits NOT held for the benefit of all Policyholders, Claimants, and Creditors of the Company		481,505	481,505	481,505
ZZ99999		Total - Special Deposits held for the benefit of all Policyholders, Claimants, and Creditors of the Company				
9999999		Totals		481,505	481,505	481,505

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(a) Including \$ 0 cash and short-term investments as defined in SSAP No. 2 of the NAIC Accounting Practices and Procedures Manual.

