



ANNUAL STATEMENT

For the Year Ending December 31, 2002

OF THE CONDITION AND AFFAIRS OF THE

Paramount Health Care

NAIC Group Code	1212 <small>(Current Period)</small>	1212 <small>(Prior Period)</small>	NAIC Company Code	95189	Employer's ID Number	341549926
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[] Dental Service Corporation[] Other[]	Property/Casualty[] Vision Service Corporation[] Is HMO Federally Qualified? Yes[] No[X]	Hospital, Medical & Dental Service or Indemnity[] Health Maintenance Organization[X]			
Date Incorporated or Organized	04/22/1987		Date Commenced Business	01/01/1988		
Statutory Home Office	1901 Indian Wood Circle <small>(Street and Number)</small>		Maumee, OH 43537 <small>(City, or Town, State and Zip Code)</small>			
Main Administrative Office	1901 Indian Wood Circle <small>(Street and Number)</small>		Maumee, OH 43537 <small>(City or Town, State and Zip Code)</small>		(419)887-2500 <small>(Area Code) (Telephone Number)</small>	
Mail Address	1901 Indian Wood Circle <small>(Street and Number or P.O. Box)</small>		Maumee, OH 43537 <small>(City, or Town, State and Zip Code)</small>			
Primary Location of Books and Records	1901 Indian Wood Circle <small>(Street and Number)</small>		Maumee, OH 43537 <small>(City, or Town, State and Zip Code)</small>		(419)887-2500 <small>(Area Code) (Telephone Number)</small>	
Internet Website Address	www.paramounthealthcare.com					
Statement Contact	Jeff William Martin, Mr. <small>(Name)</small>		jeff.martin@promedica.org <small>(E-Mail Address)</small>		(419)887-2959 <small>(Area Code)(Telephone Number)(Extension)</small>	
Policyowner Relations Contact	1901 Indian Wood Circle <small>(Street and Number)</small>		Maumee, OH 43537 <small>(City, or Town, State and Zip Code)</small>		(419)887-2020 <small>(Area Code)(Telephone Number)(Extension)</small>	
	1901 Indian Wood Circle <small>(Street and Number)</small>		Maumee, OH 43537 <small>(City, or Town, State and Zip Code)</small>		(419)887-2525 <small>(Area Code) (Telephone Number)(Extension)</small>	

OFFICERS

President	John Charles Randolph Mr.
Secretary	Jeffrey Craig Kuhn Mr.
Treasurer	Kathleen S. Hanley Ms.
Chairman	Frederick Lurcott Yocum Mr.

VICE PRESIDENTS

Robert James Kolodgy Mr. Mark Henry Moser Mr.	Neeraj Kumar Kanwal Dr.
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DIRECTORS OR TRUSTEES

Alan William Brass Mr. Ronald Richard Langenderfer Mr. Harold Lee Dunn Mr. Robert Henry Hartwig Mr. Jane M. Miller Ms.	Harley Jay Kripke Mr. Christopher Kane Smitley Mr. Thomas Henry Gross Mr. Jeffrey Ray Lewis Mr. Randall Dean Oostra Mr. #
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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 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.

_____ <small>(Signature)</small> John Charles Randolph <small>(Printed Name)</small> President	_____ <small>(Signature)</small> Jeffery Craig Kuhn <small>(Printed Name)</small> Secretary	_____ <small>(Signature)</small> Robert James Kolodgy <small>(Printed Name)</small> Senior Vice President
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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	_____

Subscribed and sworn to before me this _____ day of _____, 2003

(Notary Public Signature)

EXHIBIT 3 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals	64,990					64,990
Group Subscribers:						
ODJFS	700,533	424,736	436,269			1,561,538
0299997 Subtotal - Group Subscribers:	700,533	424,736	436,269			1,561,538
0299998 Premium due and unpaid not individually listed	1,455,489	50,684	206,975			1,713,148
0299999 Total group	2,156,022	475,420	643,244			3,274,686
0399999 Premiums due and unpaid from Medicare entities						
0499999 Premiums due and unpaid from Medicaid entities						
0599999 Accident and health premiums due and unpaid (Page 2, Line 10) ..	2,221,012	475,420	643,244			3,339,676

EXHIBIT 4 - HEALTH CARE RECEIVABLES

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
Receivables not individually listed						
Express Scripts Receivable	250,944	271,549	261,990	251,247	251,247	784,483
Subrogation Receivable				1,406,916	1,406,916	
0499999 Total - Receivables not individually listed	10,000		312,000	1,234,992	1,234,992	322,000
0599999 Health care receivables	260,944	271,549	573,990	2,893,155	2,893,155	1,106,483

EXHIBIT 5 - CLAIMS PAYABLE (Reported and Unreported)

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
0299999 Aggregate Accounts Not Individually Listed - Uncovered						
0399999 Aggregate Accounts Not Individually Listed - Covered	12,209,829					12,209,829
0499999 Subtotals	12,209,829					12,209,829
0599999 Unreported claims and other claim reserves						28,837,946
0699999 Total Amounts Withheld						
0799999 Total Claims Payable						41,047,775
0899999 Accrued Medical Incentive Pool						

EXHIBIT 6 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1 Name of Affiliate	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	Admitted	
						7 Current	8 Non-Current
Individually listed receivables							
The Toledo Hospital	1,240,020	18,925	18,748	72,520	72,520	1,277,693	
Promedica Physicians Group	1,068,609					1,068,609	
0199999 Total - Individually listed receivables	2,308,629	18,925	18,748	72,520	72,520	2,346,302	
0299999 Receivables not individually listed	199,453	6,330	20,873	39,221	39,221	226,656	
0399999 Total gross amounts receivable	2,508,082	25,255	39,621	111,741	111,741	2,572,958	

EXHIBIT 7 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1 Affiliate	2 Description	3 Amount	4 Current	5 Non-Current
Individually listed payables				
The Toledo Hospital .....	.....	2,696,233	2,640,178	56,055
Paramount of Michigan .....	.....	1,404,818	1,404,818	
Paramount Physician Enterprise .....	.....	3,245,280	3,245,280	
Promedica Insurance Company .....	.....	918,074	918,074	
0199999 Total - Individually listed payables	X X X	8,264,405	8,208,350	56,055
0299999 Payables not individually listed	X X X	158,686	158,686	
0399999 Total gross payables	X X X	8,423,091	8,367,036	56,055

EXHIBIT 8 - PART 1 - SUMMARY OF TRANSACTIONS WITH PROVIDERS

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total	3 Total Members Covered	4 Column 3 as a % of Total	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups	77,966,443	19.195			29,650,163	48,316,280
2. Intermediaries						
3. All other providers						
4. Total capitation payments	77,966,443	19.195			29,650,163	48,316,280
Other Payments:						
5. Fee-for-service	13,773,330	3.391	X X X	X X X		13,773,330
6. Contractual fee payments	314,446,766	77.414	X X X	X X X	172,561,882	141,884,884
7. Bonus/withhold arrangements - fee-for-service			X X X	X X X		
8. Bonus/withhold arrangements - contractual fee payments			X X X	X X X		
9. Non-contingent salaries			X X X	X X X		
10. Aggregate cost arrangements			X X X	X X X		
11. All other payments			X X X	X X X		
12. Total other payments	328,220,096	80.805	X X X	X X X	172,561,882	155,658,214
13. Total (Line 4 plus Line 12)	406,186,539	100.000	X X X	X X X	202,212,045	203,974,494

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EXHIBIT 8 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

1 NAIC Code	2 Name of Intermediary	3 Capitation Paid	4 Average Monthly Capitation	5 Intermediary's Total Adjusted Capital	6 Intermediary's Authorized Control Level RBC
NONE					
9999999			X X X	X X X	X X X

EXHIBIT 9 - FURNITURE, EQUIPMENT AND SUPPLIES OWNED

	1	2	3	4	5	6
Description	Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
1. Administrative furniture and equipment	1,219,395		572,732		646,663	
2. Medical furniture, equipment and fixtures						
3. Pharmaceuticals and surgical supplies						
4. Durable medical equipment						
5. Other property and equipment						
6. Total	1,219,395		572,732		646,663	



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

REPORT FOR: 1. CORPORATION: 2. DIVISION:

NAIC Group Code 1212

BUSINESS IN THE STATE OF **GRAND TOTAL** DURING THE YEAR

NAIC Company Code 95189

	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	152,939	225	113,395					15,090	24,229	
2. First Quarter	160,015	189	117,029					17,635	25,162	
3. Second Quarter	165,191	202	120,935					17,600	26,454	
4. Third Quarter	170,057	201	125,735					17,507	26,614	
5. Current Year	170,991	194	126,280					17,525	26,992	
6. Current Year Member Months	1,988,065	2,235	1,463,531					209,512	312,787	
Total Member Ambulatory Encounters for Year:										
7. Physician	666,928	472	406,454					157,567	102,435	
8. Non-Physician	247,028	73	80,150					148,535	18,270	
9. Total	913,956	545	486,604					306,102	120,705	
10. Hospital Patient Days Incurred	33,216	12	13,200					16,183	3,821	
11. Number of Inpatient Admissions	5,946	3	2,840					2,036	1,067	
12. Premiums Collected	454,558,049	894,788	263,691,639				5,351,429	132,844,795	51,775,398	
13. Premiums Earned	452,875,828	894,185	264,061,767				5,221,955	131,676,916	51,021,005	
14. Amount Paid for Provision of Health Care Services	406,418,918	260,518	236,301,370				4,795,000	121,990,728	43,071,302	
15. Amount of Incurred for Provision of Health Care Services	406,702,065	254,549	236,110,223				4,763,398	121,541,118	44,032,777	

34 Grand Total



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

REPORT FOR: 1. CORPORATION: 2. DIVISION:

NAIC Group Code 1212

BUSINESS IN THE STATE OF **OHIO** DURING THE YEAR

NAIC Company Code 95189

	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	152,939	225	113,395					15,090	24,229	
2. First Quarter	160,015	189	117,029					17,635	25,162	
3. Second Quarter	165,191	202	120,935					17,600	26,454	
4. Third Quarter	170,057	201	125,735					17,507	26,614	
5. Current Year	170,991	194	126,280					17,525	26,992	
6. Current Year Member Months	1,988,065	2,235	1,463,531					209,512	312,787	
Total Member Ambulatory Encounters for Year:										
7. Physician	666,928	472	406,454					157,567	102,435	
8. Non-Physician	247,028	73	80,150					148,535	18,270	
9. Total	913,956	545	486,604					306,102	120,705	
10. Hospital Patient Days Incurred	33,216	12	13,200					16,183	3,821	
11. Number of Inpatient Admissions	5,946	3	2,840					2,036	1,067	
12. Premiums Collected	454,558,049	894,788	263,691,639				5,351,429	132,844,795	51,775,398	
13. Premiums Earned	452,875,828	894,185	264,061,767				5,221,955	131,676,916	51,021,005	
14. Amount Paid for Provision of Health Care Services	406,418,918	260,518	236,301,370				4,795,000	121,990,728	43,071,302	
15. Amount of Incurred for Provision of Health Care Services	406,702,065	254,549	236,110,223				4,763,398	121,541,118	44,032,777	

SCHEDULE A - VERIFICATION BETWEEN YEARS

1.	Book/adjusted carrying value, December 31, prior year (prior year statement)	
2.	Increase (decrease) by adjustment:	
2.1	Totals, Part 1, Column 10	
2.2	Totals, Part 3, Column 7	
3.	Cost of acquired, (Totals, Part 2, Column 6, net of encumbrances (Column 7) and net of additions and permanent improvements (Column 9))	
4.	Cost of additions and permanent improvements:	
4.1	Totals, Part 1, Column 13	
4.2	Totals, Part 3, Column 9	
5.	Total profit (loss) on sales, Part 3, Column 14	NONE
6.	Increase (decrease) by foreign exchange adjustment	
6.1	Totals, Part 1, Column 11	
6.2	Totals, Part 3, Column 8	
7.	Amounts received on sales, Part 3, Column 11 and Part 1, Column 12	
8.	Book/adjusted carrying value at the 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 BETWEEN YEARS

1.	Book value/recorded investment excluding accrued interest of mortgages owned, December 31 of prior year	
2.	Amount loaned during year:	
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	NONE
6.	Amounts paid on account or in full during the year	
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 BETWEEN YEARS

1.	Book/adjusted carrying value of long-term invested assets owned, December 31 of prior year	27,221,412
2.	Cost of acquisitions during year:	
2.1	Actual cost at time of acquisitions	
2.2	Additional investment made after acquisitions	1,065,309
3.	Accrual of discount	
4.	Increase (decrease) by adjustment	(1,820,338)
5.	Total profit (loss) on sale	(332,446)
6.	Amounts paid on account or in full during the year	1,087,472
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	25,046,465
10.	Total valuation allowance	
11.	Subtotal (Lines 9 plus 10)	25,046,465
12.	Total nonadmitted amounts	
13.	Statement value of long-term invested assets at end of current period	25,046,465

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

	1	2	3	4	5	6	7	8	9	10	11
Quality Rating Per the NAIC Designation	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	Total Current Year	Column 6 as a % of Line 10.7	Total From Column 6 Prior Year	% From Column 7 Prior Year	Total Publicly Traded	Total Privately Placed (a)
1. U.S. GOVERNMENTS, SCHEDULES D & DA (Group 1)											
1.1 Class 1	3,501,185	8,231,188	3,424,903	976,782	262,287	16,396,345	36.45	14,634,336	48.95	16,396,345	
1.2 Class 2											
1.3 Class 3											
1.4 Class 4											
1.5 Class 5											
1.6 Class 6											
1.7 TOTALS	3,501,185	8,231,188	3,424,903	976,782	262,287	16,396,345	36.45	14,634,336	48.95	16,396,345	
2. ALL OTHER GOVERNMENTS, SCHEDULES D & DA (Group 2)											
2.1 Class 1											
2.2 Class 2											
2.3 Class 3											
2.4 Class 4											
2.5 Class 5											
2.6 Class 6											
2.7 TOTALS											
3. STATES, TERRITORIES AND POSSESSIONS ETC., GUARANTEED, SCHEDULES D & DA (Group 3)											
3.1 Class 1		339,710				339,710	0.76			339,710	
3.2 Class 2											
3.3 Class 3											
3.4 Class 4											
3.5 Class 5											
3.6 Class 6											
3.7 TOTALS		339,710				339,710	0.76			339,710	
4. POLITICAL SUBDIVISIONS OF STATES, TERRITORIES & POSSESSIONS, GUARANTEED, SCHEDULES D & DA (Group 4)											
4.1 Class 1		5,489,369	4,858,517	531,985		10,879,871	24.19			10,879,871	
4.2 Class 2											
4.3 Class 3											
4.4 Class 4											
4.5 Class 5											
4.6 Class 6											
4.7 TOTALS		5,489,369	4,858,517	531,985		10,879,871	24.19			10,879,871	
5. SPECIAL REVENUE & SPECIAL ASSESSMENT OBLIGATIONS ETC., NON-GUARANTEED, SCHEDULES D & DA (Group 5)											
5.1 Class 1											
5.2 Class 2											
5.3 Class 3											
5.4 Class 4											
5.5 Class 5											
5.6 Class 6											
5.7 TOTALS											

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating Per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
6. PUBLIC UTILITIES (UNAFFILIATED), SCHEDULES D & DA (Group 6)											
6.1 Class 1		1,064,610	277,245			1,341,855	2.98	763,025	2.55	1,341,855	
6.2 Class 2											
6.3 Class 3											
6.4 Class 4											
6.5 Class 5											
6.6 Class 6											
6.7 TOTALS		1,064,610	277,245			1,341,855	2.98	763,025	2.55	1,341,855	
7. INDUSTRIAL & MISCELLANEOUS (UNAFFILIATED), SCHEDULES D & DA (Group 7)											
7.1 Class 1	1,977,176	7,507,672	6,540,868			16,025,716	35.63	14,502,000	48.50	16,025,716	
7.2 Class 2											
7.3 Class 3											
7.4 Class 4											
7.5 Class 5											
7.6 Class 6											
7.7 TOTALS	1,977,176	7,507,672	6,540,868			16,025,716	35.63	14,502,000	48.50	16,025,716	
8. CREDIT TENANT LOANS, SCHEDULES D & DA (Group 8)											
8.1 Class 1											
8.2 Class 2											
8.3 Class 3											
8.4 Class 4											
8.5 Class 5											
8.6 Class 6											
8.7 TOTALS											
9. PARENT, SUBSIDIARIES AND AFFILIATES, SCHEDULES D & DA (Group 9)											
9.1 Class 1											
9.2 Class 2											
9.3 Class 3											
9.4 Class 4											
9.5 Class 5											
9.6 Class 6											
9.7 TOTALS											

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

Quality Rating Per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
10. TOTAL BONDS CURRENT YEAR											
10.1 Class 1	5,478,361	22,632,549	15,101,533	1,508,767	262,287	44,983,497	100.00	X X X	X X X	44,983,497	
10.2 Class 2								X X X	X X X		
10.3 Class 3								X X X	X X X		
10.4 Class 4								X X X	X X X		
10.5 Class 5						(c)		X X X	X X X		
10.6 Class 6						(c)		X X X	X X X		
10.7 TOTALS	5,478,361	22,632,549	15,101,533	1,508,767	262,287	(b) 44,983,497	100.00	X X X	X X X	44,983,497	
10.8 Line 10.7 as a % of Column 6	12.18	50.31	33.57	3.35	0.58	100.00	X X X	X X X	X X X	100.00	
11. TOTAL BONDS PRIOR YEAR											
11.1 Class 1	3,200,044	15,124,702	11,574,615			X X X	X X X	29,899,361	100.00	29,899,361	
11.2 Class 2						X X X	X X X				
11.3 Class 3						X X X	X X X				
11.4 Class 4						X X X	X X X				
11.5 Class 5						X X X	X X X	(c)			
11.6 Class 6						X X X	X X X	(c)			
11.7 TOTALS	3,200,044	15,124,702	11,574,615			X X X	X X X	(b) 29,899,361	100.00	29,899,361	
11.8 Line 11.7 as a % of Col. 8	10.70	50.59	38.71			X X X	X X X	100.00	X X X	100.00	
12. TOTAL PUBLICLY TRADED BONDS											
12.1 Class 1	5,478,361	22,632,549	15,101,533	1,508,767	262,287	44,983,497	100.00	29,899,361	100.00	44,983,497	X X X
12.2 Class 2											X X X
12.3 Class 3											X X X
12.4 Class 4											X X X
12.5 Class 5											X X X
12.6 Class 6											X X X
12.7 TOTALS	5,478,361	22,632,549	15,101,533	1,508,767	262,287	44,983,497	100.00	29,899,361	100.00	44,983,497	X X X
12.8 Line 12.7 as a % of Col. 6	12.18	50.31	33.57	3.35	0.58	100.00	X X X	X X X	X X X	100.00	X X X
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10	12.18	50.31	33.57	3.35	0.58	100.00	X X X	X X X	X X X	100.00	X X X
13. TOTAL PRIVATELY PLACED BONDS											
13.1 Class 1										X X X	
13.2 Class 2										X X X	
13.3 Class 3										X X X	
13.4 Class 4										X X X	
13.5 Class 5										X X X	
13.6 Class 6										X X X	
13.7 TOTALS										X X X	
13.8 Line 13.7 as a % of Col. 6							X X X	X X X	X X X	X X X	
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10							X X X	X X X	X X X	X X X	

(a) Includes \$..... freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.

(b) Includes \$..... current year, \$..... prior year of bonds with Z designations and \$..... current year, \$..... prior year of bonds with Z* designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z*" means the SVO could not evaluate the obligation because valuation procedures for the security class is under regulatory review.

(c) Includes \$..... current year, \$..... prior year of bonds with 5* designations and \$..... current year, \$..... prior year of bonds with 6* designations. "5*" means the NAIC designation was assigned by the SVO in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Types of and subtype of Issues

	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
Distribution by Type											
1. U.S. GOVERNMENTS, SCHEDULES D & DA (Group 1)											
1.1 Issuer Obligations	3,501,185	8,231,188	3,424,903	976,782	262,287	16,396,345	36.45	14,634,336	48.95	16,396,345	
1.2 Single Class Mortgage-Backed/Asset-Backed Bonds											
1.7 TOTALS	3,501,185	8,231,188	3,424,903	976,782	262,287	16,396,345	36.45	14,634,336	48.95	16,396,345	
2. ALL OTHER GOVERNMENTS, SCHEDULES D & DA (Group 2)											
2.1 Issuer Obligations											
2.2 Single Class Mortgage-Backed/Asset-Backed Bonds											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
2.3 Defined											
2.4 Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
2.5 Defined											
2.6 Other											
2.7 TOTALS											
3. STATES, TERRITORIES AND POSSESSIONS, GUARANTEED, SCHEDULES D & DA (Group 3)											
3.1 Issuer Obligations		339,710				339,710	0.76			339,710	
3.2 Single Class Mortgage-Backed/Asset-Backed Bonds											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
3.3 Defined											
3.4 Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
3.5 Defined											
3.6 Other											
3.7 TOTALS		339,710				339,710	0.76			339,710	
4. POLITICAL SUBDIVISIONS OF STATES, TERRITORIES & POSSESSIONS, GUARANTEED, SCHEDULES D & DA (Group 4)											
4.1 Issuer Obligations		5,489,369	4,858,517	531,985		10,879,871	24.19			10,879,871	
4.2 Single Class Mortgage-Backed/Asset-Backed Bonds											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
4.3 Defined											
4.4 Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
4.5 Defined											
4.6 Other											
4.7 TOTALS		5,489,369	4,858,517	531,985		10,879,871	24.19			10,879,871	
5. SPECIAL REVENUE & SPECIAL ASSESSMENT OBLIGATIONS ETC., NON-GUAR., SCH. D & DA (Group 5)											
5.1 Issuer Obligations											
5.2 Single Class Mortgage-Backed/Asset-Backed Bonds											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
5.3 Defined											
5.4 Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
5.5 Defined											
5.6 Other											
5.7 TOTALS											

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Types of and subtype of Issues

	1	2	3	4	5	6	7	8	9	10	11
Distribution by Type	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	Total Current Year	Column 6 as a % of Line 10.7	Total From Column 6 Prior Year	% From Column 7 Prior Year	Total Publicly Traded	Total Privately Placed
6. PUBLIC UTILITIES (UNAFFILIATED), SCHEDULES D & DA (Group 6)											
6.1 Issuer Obligations		1,064,610	277,245			1,341,855	2.98	763,025	2.55	1,341,855	
6.2 Single Class Mortgage-Backed/Asset-Backed Bonds											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
6.3 Defined											
6.4 Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
6.5 Defined											
6.6 Other											
6.7 TOTALS		1,064,610	277,245			1,341,855	2.98	763,025	2.55	1,341,855	
7. INDUSTRIAL & MISCELLANEOUS (UNAFFILIATED), SCHEDULES D & DA (Group 7)											
7.1 Issuer Obligations	1,977,176	7,507,672	6,540,868			16,025,716	35.63	14,502,000	48.50	16,025,716	
7.2 Single Class Mortgage-Backed/Asset-Backed Bonds											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
7.3 Defined											
7.4 Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
7.5 Defined											
7.6 Other											
7.7 TOTALS	1,977,176	7,507,672	6,540,868			16,025,716	35.63	14,502,000	48.50	16,025,716	
8. CREDIT TENANT LOANS, SCHEDULES D & DA (Group 8)											
8.1 Issuer Obligations											
8.7 TOTALS											
9. PARENT, SUBSIDIARIES AND AFFILIATES, SCHEDULES D & DA (Group 9)											
9.1 Issuer Obligations											
9.2 Single Class Mortgage-Backed/Asset-Backed Bonds											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
9.3 Defined											
9.4 Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
9.5 Defined											
9.6 Other											
9.7 TOTALS											

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Types of and subtype of Issues

	1	2	3	4	5	6	7	8	9	10	11
Distribution by Type	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	Total Current Year	Column 6 as a % of Line 10.7	Total From Column 6 Prior Year	% From Column 7 Prior Year	Total Publicly Traded	Total Privately Placed
10. TOTAL BONDS CURRENT YEAR											
10.1 Issuer Obligations	5,478,361	22,632,549	15,101,533	1,508,767	262,287	44,983,497	100.00	X X X	X X X	44,983,497	
10.2 Single Class Mortgage-Backed/Asset-Backed Bonds								X X X	X X X		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
10.3 Defined								X X X	X X X		
10.4 Other								X X X	X X X		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
10.5 Defined								X X X	X X X		
10.6 Other								X X X	X X X		
10.7 TOTALS	5,478,361	22,632,549	15,101,533	1,508,767	262,287	44,983,497	100.00	X X X	X X X	44,983,497	
10.8 Line 10.7 as a % of Column 6	12.18	50.31	33.57	3.35	0.58	100.00		X X X	X X X	100.00	
11. TOTAL BONDS PRIOR YEAR											
11.1 Issuer Obligations	3,200,044	15,124,702	11,574,615					X X X	X X X	29,899,361	100.00
11.2 Single Class Mortgage-Backed/Asset-Backed Bonds								X X X	X X X		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
11.3 Defined								X X X	X X X		
11.4 Other								X X X	X X X		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
11.5 Defined								X X X	X X X		
11.6 Other								X X X	X X X		
11.7 TOTALS	3,200,044	15,124,702	11,574,615					X X X	X X X	29,899,361	100.00
11.8 Line 11.7 as a % of Column 8	10.70	50.59	38.71					X X X	X X X	100.00	
12. TOTAL PUBLICLY TRADED BONDS											
12.1 Issuer Obligations	5,478,361	22,632,549	15,101,533	1,508,767	262,287	44,983,497	100.00	29,899,361	100.00	44,983,497	X X X
12.2 Single Class Mortgage-Backed/Asset-Backed Bonds											X X X
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
12.3 Defined											X X X
12.4 Other											X X X
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
12.5 Defined											X X X
12.6 Other											X X X
12.7 TOTALS	5,478,361	22,632,549	15,101,533	1,508,767	262,287	44,983,497	100.00	29,899,361	100.00	44,983,497	X X X
12.8 Line 12.7 as a % of Column 6	12.18	50.31	33.57	3.35	0.58	100.00		X X X	X X X	100.00	X X X
12.9 Line 12.7 as a % of Line 10.7, Column 6, Section 10	12.18	50.31	33.57	3.35	0.58	100.00		X X X	X X X	100.00	X X X
13. TOTAL PRIVATELY PLACED BONDS											
13.1 Issuer Obligations										X X X	
13.2 Single Class Mortgage-Backed/Asset-Backed Bonds										X X X	
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
13.3 Defined										X X X	
13.4 Other										X X X	
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
13.5 Defined										X X X	
13.6 Other										X X X	
13.7 TOTALS										X X X	
13.8 Line 13.7 as a % of Column 6								X X X	X X X	X X X	X X X
13.9 Line 13.7 as a % of Line 10.7, Column 6, Section 10								X X X	X X X	X X X	X X X

SCHEDULE DA - PART 2

Verification of SHORT-TERM INVESTMENTS Between Years

	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets (a)	Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, prior year	2,401,166			2,401,166	
2. Cost of short-term investments acquired	4,105,736			4,105,736	
3. Increase (decrease) by adjustment	13,012			13,012	
4. Increase (decrease) by foreign exchange adjustment					
5. Total profit (loss) on disposal of short-term investments					
6. Consideration received on disposal of short-term investments					
7. Book/adjusted carrying value, current year	6,519,914			6,519,914	
8. Total valuation allowance					
9. Subtotal (Lines 7 plus 8)	6,519,914			6,519,914	
10. Total nonadmitted amounts					
11. Statement value (Lines 9 minus 10)	6,519,914			6,519,914	
12. Income collected during year	136,014			136,014	
13. Income earned during year	144,758			144,758	

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

44 Schedule DB Part A Verification - NONE

44 Schedule DB Part B Verification - NONE

45 Schedule DB Part C Verification - NONE

45 Schedule DB Part D Verification - NONE

45 Schedule DB Part E Verification - NONE

46 Schedule DB Part F Sn 1 - Sum Replicated Assets - NONE

47 Schedule DB Part F Sn 2 - Recon Replicated Assets - NONE

48 Schedule S - Part 1 - Section 2 - NONE

SCHEDULE S - PART 2**Reinsurance Recoverable on Paid and Unpaid Losses Listed by
Reinsuring Company as of December 31, Current Year**

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Location	6 Paid Losses	7 Unpaid Losses
Accident and Health, Non-Affiliates						
90611	41-1366075 ...	01/01/2001	Allianz Life Insurance Company of North America	Minneapolis, Minnesota	438,176	1,027,003
0599999 Total - Accident and Health, Non-Affiliates					438,176	1,027,003
0699999 Totals - Accident and Health					438,176	1,027,003
0799999 Totals - Life, Annuity and Accident and Health					438,176	1,027,003

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	Outstanding Surplus Relief		12	13
									10	11		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Location	Type	Premiums	Unearned Premiums (estimated)	Reserve Credit Taken Other than for Unearned Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
Non-Affiliates												
90611	41-1366075	01/01/2001	Allianz Life Insurance Company of North America	Minneapolis, Minnesota	SSL/A	2,953,416						
0299999 Total - Non-Affiliates						2,953,416						
0399999 Totals						2,953,416						

SCHEDULE S - PART 4
Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	10	11	12	13	14
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Totals (Cols. 5 + 6 + 7)	Letters of Credit	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9+10+11+12+13 But Not in Excess of Col. 8
				NONE									
119999 Totals (General Account and Separate Accounts combined)													

SCHEDULE S - PART 5
Five-Year Exhibit of Reinsurance Ceded Business
(000 Omitted)

	1 2002	2 2001	3 2000	4 1999	5 1998
A. OPERATIONS ITEMS					
1. Premiums	1,358	815	465	584	397
2. Title XVIII-Medicare	481	255	189	178	182
3. Title XIX - Medicaid	1,114	714	288	297	354
4. Commissions and reinsurance expense allowance					
5. Total medical and hospital expenses					
B. BALANCE SHEET ITEMS					
6. Premiums receivable					
7. Claims payable	1,027	1,500	1,413	897	280
8. Reinsurance recoverable on paid losses	438	671	988	567	594
9. Experience rating refunds due or unpaid					
10. Commissions and reinsurance expense allowances unpaid					
11. Unauthorized reinsurance offset					
C. UNAUTHORIZED REINSURANCE					
(DEPOSITS BY AND FUNDS WITHHELD FROM)					
12. Funds deposited by and withheld from (F)					
13. Letters of credit (L)					
14. Trust agreements (T)					
15. Other (O)					

SCHEDULE S - PART 6

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 9)	102,043,033		102,043,033
2. Amounts recoverable from reinsurers (Line 12)	438,176	(438,176)	
3. Accident and health premiums due and unpaid (Line 10)	3,339,676		3,339,676
4. Net credit for ceded reinsurance	X X X	438,176	438,176
5. All other admitted assets (Balance)	14,598,354		14,598,354
6. Total assets (Line 23)	120,419,239		120,419,239
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1)	40,020,772	1,027,003	41,047,775
8. Accrued medical incentive pool and bonus payments (Line 2)			
9. Premiums received in advance (Line 6)	17,172,426		17,172,426
10. Reinsurance in unauthorized companies (Line 14)			
11. All other liabilities (Balance)	17,171,068	(1,027,003)	16,144,065
12. Total liabilities (Line 18)	74,364,266		74,364,266
13. Total capital and surplus (Line 26)	46,054,972	X X X	46,054,972
14. Total liabilities, capital and surplus (Line 27)	120,419,238		120,419,238
NET CREDIT FOR CEDED REINSURANCE			
15. Claims unpaid			
16. Accrued medical incentive pool			
17. Premiums received in advance			
18. Reinsurance recoverable on paid losses	438,176		
19. Other ceded reinsurance recoverables			
20. Total ceded reinsurance recoverables	438,176		
21. Premiums receivable			
22. Unauthorized reinsurance			
23. Other ceded reinsurance payables/offsets			
24. Total ceded reinsurance payables/offsets			
25. Total net credit for ceded reinsurance	438,176		

SCHEDULE Y (continued)
PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/(Disburse- ments) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
.. 95189 ..	.. 341549926 ..	Paramount Health Care .....	.. (3,800,000) ..	.....	.....	.....	.. (894,412) ..	.....	.....	.....	.. (4,694,412) ..	.....
.. 95566 ..	.. 383200310 ..	Paramount Care of Michigan .....	.....	.. 800,000 ..	.....	.....	.. (944,027) ..	.....	.....	.....	.. (144,027) ..	.....
.....	.. 341623220 ..	Paramount Preferred Options Inc .....	.....	.....	.....	.....	.. (125,561) ..	.....	.....	.....	.. (125,561) ..	.....
.....	.. 341773766 ..	ProMedica Health System .....	.....	.....	.....	.....	.. 1,964,000 ..	.....	.....	.....	.. 1,964,000 ..	.....
.. 00000 ..	.. 34-1570675 ..	ProMedica Insurance Corporation .....	.. 3,800,000 ..	.. (3,800,000) ..	.....	.....	.....	.....	.....	.....	.....	.....
.. 11518 ..	.. 01-0580404 ..	Promedica Life Ins Co .....	.....	.. 3,000,000 ..	.....	.....	.....	.....	.....	.....	.. 3,000,000 ..	.....
9999999 Totals .....			.....	.....	.....	.....	.....	.....	X X X	.....	.....	.....

Schedule Y Part 2 Explanation:

OVERFLOW PAGE FOR WRITE-INS**LIABILITIES, CAPITAL AND SURPLUS**

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1704. Accrued Compensation	534,456		534,456	873,033
1705. Accrued Broker Commissions	815,740		815,740	703,990
1706. Security Deposits	157,107		157,107	157,107
1707. Accrued Dental	23,505		23,505	82,170
1708. Education Grant	50,512		50,512	45,163
1709. Accrued Sales Tax	7,045		7,045	44,531
1710. 0				
1797. Summary of remaining write-ins for Line 17 (Lines 1704 through 1796)	1,588,365		1,588,365	1,905,994

**UNDERWRITING AND INVESTMENT EXHIBIT
PART 3 - ANALYSIS OF EXPENSES**

	1 Claim Adjustment Expenses	2 General Administrative Expenses	3 Investment Expenses	4 Total
2504. Bad Debt Expense		240,000		240,000
2505. Recruitment		35,704		35,704
2506. Depreciation: Furniture & Machinery		138,145		138,145
2507. Staff Seminar/Conferences	9,244	56,630		65,874
2508. Licenses: General		102,440		102,440
2509. Community Benefit		52,480		52,480
2510. Dues: Non-Association Related				
2511. Supplies: Lunchroom				
2512. Other		341,933		341,933
2513. Member Education		43,340		43,340
2597. Summary of overflow write-ins for Line 25	9,244	1,010,671		1,019,915

EXHIBIT 1 - ANALYSIS OF NONADMITTED ASSETS AND RELATED ITEMS

	1 End of Current Year	2 End of Prior Year	3 Changes for Year (Increase) or Decrease
0404. Other	127,775	71,499	(56,276)
0497. Summary of remaining write-ins for Line 4 (Lines 0404 through 0496)	127,775	71,499	(56,276)

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT
FOR THE STATE OF OHIO**



NAIC Group Code: 1212

NAIC Company Code: 95189

Address (City, State and Zip Code): Maumee, OH 43537

Person Completing This Exhibit:

Title:

Telephone:

1 Compliance with OBRA	2 Policy Form Number	3 Standardized Medicare Supplement Benefit Plan	4 Medicare Select	5 Plan Characteristics	6 Date Approved	7 Date Approval Withdrawn	8 Date Last Amended	9 Date Closed	10 Policy Marketing Trade Name	Policies Issued Through 1999				Policies Issued in 2000, 2001, 2002			
										11 Premiums Earned	12 Incurred Claims		14 Number of Covered Lives	15 Premiums Earned	16 Incurred Claims		18 Number of Covered Lives
											12 Amount	13 Percent of Premiums Earned			16 Amount	17 Percent of Premiums Earned	
NONE																	
0299999 Total Experience on Group Policies																	

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details:
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
 - 2.1 Address:
 - 2.2 Contact Person and Phone Number:
3. Billing address and contact person for user fees established under 42 U.S.C. 1395u(h)(3)(B)
 - 3.1 Address:
 - 3.2 Contact Person and Phone Number:
4. Explain any policies identified above as policy type "O":

MS Ohio

INDEX TO HEALTH ANNUAL STATEMENT