



HEALTH ANNUAL STATEMENT
FOR THE YEAR ENDING DECEMBER 31, 2003
OF THE CONDITION AND AFFAIRS OF THE

Magellan Behavioral Health of Ohio

NAIC Group Code	1260 <small>(Current Period)</small>	1260 <small>(Prior Period)</small>	NAIC Company Code	11222	Employer's ID Number	31-1785222
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 []	
	Vision Service Corporation []		Other [X]		Health Maintenance Organization []	
	Hospital, Medical & Dental Service or Indemnity []		Is HMO, Federally Qualified? Yes [] No [X]			
Incorporated	06/27/2001		Commenced Business			
Statutory Home Office	10101 Alliance Road #201 <small>(Street and Number)</small>			Cincinnati, OH 45242 <small>(City or Town, State and Zip Code)</small>		
Main Administrative Office	10101 Alliance Road #201 <small>(Street and Number)</small>			Cincinnati, OH 45242 <small>(City or Town, State and Zip Code)</small>		
	513-794-7000 <small>(Area Code) (Telephone Number)</small>					
Mail Address	10101 Alliance Road #201 <small>(Street and Number or P.O. Box)</small>			Cincinnati, OH 45242 <small>(City or Town, State and Zip Code)</small>		
Primary Location of Books and Records	10101 Alliance Road #201 <small>(Street and Number)</small>			Cincinnati, OH 45242 <small>(City or Town, State and Zip Code)</small>		
	314-387-5003 <small>(Area Code) (Telephone Number)</small>					
Internet Website Address	magellanhealth.com					
Statutory Statement Contact	Randy M Kilper <small>(Name)</small>			314-387-5003 <small>(Area Code) (Telephone Number) (Extension)</small>		
	rmkilper@magellanhealth.com <small>(E-mail Address)</small>			314-387-5407 <small>(FAX Number)</small>		
Policyowner Relations Contact						

OFFICERS

President	Dennis Paul Moody	Secretary	Megan Mary Arthur
Treasurer	Edward Joseph Christie		

VICE PRESIDENTS

Linton Clark Newlin		
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DIRECTORS OR TRUSTEES

Dennis Paul Moody	Mark Steven Demilio	Megan Mary Arthur
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State of }
County of } 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.

Dennis Paul Moody President	Megan Mary Arthur Secretary	Edward Joseph Christie Treasurer
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Subscribed and sworn to before me this _____ day of _____, 2004	a. Is this an original filing? Yes [] No [] b. If no, 1. State the amendment number _____ 2. Date filed _____ 3. Number of pages attached _____
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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 1

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

[illegible]

Schedule D - Part 5

NONE

Schedule D - Part 6 - Section 1

NONE

Schedule D - Part 6 - Section 2

NONE

E15

E15

E15

E15

E15

Schedule DB - Part A - Section 1
NONE

Schedule DB - Part A - Section 2
NONE

Schedule DB - Part A - Section 3
NONE

Schedule DB - Part B - Section 1
NONE

Schedule DB - Part B - Section 2
NONE

Schedule DB - Part B - Section 3
NONE

Schedule DB - Part C - Section 1
NONE

Schedule DB - Part C - Section 2
NONE

Schedule DB - Part C - Section 3
NONE

Schedule DB - Part D - Section 1
NONE

Schedule DB - Part D - Section 2
NONE

Schedule DB - Part D - Section 3

NONE

Schedule DB - Part E - Section 1

NONE

SCHEDULE DM

For bonds and preferred stocks owned as of December 31, state the aggregate statement (admitted) value, the aggregate fair value, and the aggregate difference, if any, between them.

	1	2	3
	Statement (Admitted) Value	Fair Value (a)	Excess of Statement over Fair Value(-), or Fair Value over Statement (+)
1. Bonds	150,804	150,828	24
2. Preferred Stocks	0	0	0
3. Totals	150,804	150,828	24

(a) Amortized or book values shall not be substituted for fair values. Describe the sources or methods utilized in determining the fair values.

Fair market value for National Home Mortgage Association bond owned as of December 31, 2003 was obtained per December 2003 account statement from Wachovia Bank.....

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SCHEDULE E - PART 2 CASH EQUIVALENTS

Showing Investments owned December 31 of current year

1	2	3	4	5	6	7	8
CUSIP Identification	Description	Date Acquired	Rate of Interest	Maturity	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Gross Investment Income
			NONE				
0199999 Total Cash Equivalents							

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SCHEDULE E - PART 3 - 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
0H00001.....	B.....	Federal National Mortgage Association - 2/11/04 Maturity - 1.133%.....	Wachovia Bank, - Statutory Deposit.....	151,000	150,804	150,828
OH99999 - Ohio				151,000	150,804	150,828
9999997 - Totals - Not All Policyholders				151,000	150,804	150,828
9999999 Totals				151,000	150,804	150,828

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