



HEALTH ANNUAL STATEMENT

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

Botsford Health Plan

NAIC Group Code 0000 0000 NAIC Company Code 52570 Employer's ID Number 38-3243956
(Current Period) (Prior Period)

Organized under the Laws of Michigan, State of Domicile or Port of Entry Michigan
Country of Domicile United States of America

Licensed as business type: Life, Accident & Health [] Property/Casualty [] Dental Service Corporation []
Vision Service Corporation [] Other [] Health Maintenance Organization [X]
Hospital, Medical & Dental Service or Indemnity [] Is HMO, Federally Qualified? Yes [X] No []
Incorporated 06/26/1995 Commenced Business 10/01/1996

Statutory Home Office 28050 Grand River Avenue, Farmington Hills, MI 48336-5933
(Street and Number) (City or Town, State and Zip Code)

Main Administrative Office 28050 Grand River Avenue
(Street and Number) Farmington Hills, MI 48336-5933 248-471-8157-0000
(City or Town, State and Zip Code) (Area Code) (Telephone Number)

Mail Address 28050 Grand River Avenue, Farmington Hills, MI 48336-5933
(Street and Number or P.O. Box) (City or Town, State and Zip Code)

Primary Location of Books and Records 28050 Grand River Avenue
(Street and Number) Farmington Hills, MI 48336-5933 248-471-8157
(City or Town, State and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.botsfordsystem.org/bhp

Statement Contact Regina Doxtader 248-471-8157
(Name) (Area Code) (Telephone Number) (Extension)
rdoxtader@botsford.org 248-471-8887
(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 Ronald P. Szumski Secretary Lisa D. Vandecaveye
Treasurer David L. Marcellino

VICE PRESIDENTS

DIRECTORS OR TRUSTEES

Gerson I Cooper Ronald P. Szumski Paul E. LaCasse D.O.
Jack D. Lennox D.O. Frank F. Lanzilote D.O. Richard N. Mark D.O.
Bridgette A. Davis Annette Johnson # Ethel Harris #

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.

Ronald P. Szumski Lisa D. Vandecaveye David L. Marcellino
President Secretary Treasurer

Subscribed and sworn to before me this
March 31 day of 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

**ANNUAL STATEMENT FOR THE YEAR 2002 OF THE
BOTSFORD HEALTH PLAN**

SCHEDULE D - PART 1

Showing all Long-Term BONDS Owned December 31 of Current Year

1 CUSIP Identification	2 Description	3 *	Interest		6 Maturity Date	7 Option Date	8 Option Call Price	9 Book/Adjusted Carrying Value	10 Par Value	11 Rate Used to Obtain Fair Value	12 Fair Value	13 Actual Cost	Interest		16 Increase (Decrease) by Adjustment	17 Increase (Decrease) by Foreign Exchange Adjustment	18 Amount of Interest Due and Accrued Dec. 31 Current Year, on Bonds in Default as to Principal or Interest	19 NAIC Design- nation	20 Date Acquired	21 Effec- tive Rate of In- terest
			4 Rate of	5 How Paid									14 Amount Due and Accrued Dec. 31 of Current Year on Bonds not in Default	15 Gross Amount Received During Year						
6099999 Totals																				
										XXX								XXX	XXX	XXX

E08

Schedule D - Part 3

NONE

Schedule D - Part 4

NONE

Schedule D - Part 5

NONE

Schedule D - Part 6 - Section 1

NONE

Schedule D - Part 6 - Section 2

NONE

**ANNUAL STATEMENT FOR THE YEAR 2002 OF THE
BOTSFORD HEALTH PLAN**

SCHEDULE DA - PART 1

Showing all SHORT-TERM INVESTMENTS Owned December 31 of Current Year

1 CUSIP Identification	2 Description	3 Date Acquired	4 Name of Vendor	Interest		7 Maturity Date	8 Book/Adjusted Carrying Value	9 Increase (Decrease) by Adjustment	10 Increase (Decrease) by Foreign Exchange Adjustment	11 Par Value	12 Actual Cost	Interest		15 Paid for Accrued Interest	16 NAIC Desig- nation	17 Effective Rate of Interest
				5 Rate of	6 How Paid							13 Amount Due and Accrued Dec. 31 of Current Year on Bonds Not in Default	14 Gross Amount Received			
453993-AD-9	Independence One U.S. Treasury Fund	01/01/3000	Standard Federal Bank	0.000	0	01/01/3000	842,116			842,115	842,115		10,276			0.000
7799999	- Exempt Money Market Mutual Funds						842,116			XXX	842,115		10,276		XXX	XXX
8099999 Totals							842,116 ^(a)			XXX	842,115		10,276		XXX	XXX

(a) Includes \$other than accrual of discount and amortization of premium.

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

**ANNUAL STATEMENT FOR THE YEAR 2002 OF THE
BOTSFORD HEALTH PLAN**

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	842,116	842,116	0
2. Preferred Stocks	0		0
3. Totals	842,116	842,116	0

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

Government Obligation.....

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