Amendments per OFIS' instructions.

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HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDING DECEMBER 31, 2003

OF THE CONDITION AND AFFAIRS OF THE

Upper Peninsula Health Plan, Inc.

NAIC Group Code 0000 (Current Period) 0000 (Prior Period) NAIC Company Code 52615 Employer's ID Number 38-3379956

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 [ ]
Hospital, Medical & Dental Service or Indemnity [ ] Is HMO, Federally Qualified? Yes [ ] No [X]

Incorporated 10/14/1997 Commenced Business 08/01/1998

Statutory Home Office 228 W. Washington St. (Street and Number), Marquette, MI 49855 (City or Town, State and Zip Code)

Main Administrative Office 228 W. Washington St. (Street and Number)
Marquette, MI 49855 (City or Town, State and Zip Code) 906-225-7500 (Area Code) (Telephone Number)

Mail Address 228 W. Washington St. (Street and Number or P.O. Box), Marquette, MI 49855 (City or Town, State and Zip Code)

Primary Location of Books and Records 228 W. Washington St. (Street and Number)
Marquette, MI 49855 (City or Town, State and Zip Code) 906-225-7491 (Area Code) (Telephone Number)

Internet Website Address www.uphp.com

Statutory Statement Contact Patrick N. Thomson CPA (Name) 906-225-7491 (Area Code) (Telephone Number) (Extension)
pthomson@uphp.com (E-mail Address) 906-225-7690 (FAX Number)

Policyowner Relations Contact 228 W. Washington St. (Street and Number)
Marquette, MI 49855 (City or Town, State and Zip Code) 906-225-7500 (Area Code) (Telephone Number) (Extension)

OFFICERS

President Dennis H. Smith CEO Secretary John Weiss MD
Treasurer John Schon

VICE PRESIDENTS

DIRECTORS OR TRUSTEES

Mr. John Schon	Mr. James Bogan	Mr. Robert Vairo
Mr. John Chartier	Mr. William Nemacheck	Kirk Lufkin MD
Catherine Kroll DO	Ms. Michelle Tavernier	Satish Chawla MD
Ms. Connie Lekander	Richard Bruner DO	Mark Callaghan MD
Mr. Wayne Hellerstedt	Mr. David Jahn	John Weiss MD
Mr. Eric Jurgensen		

State of .....Michigan.....
County of .....Marquette.....
} 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 H. Smith	John Weiss, MD	Greg A. Gustafson
President	Secretary	Treasurer
(CEO)	()	(CFO)

Subscribed and sworn to before me this
5
_____day of _____Apirl, 2003_____

_____
Tanya M. Jennings

October 11, 2007

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						
Group subscribers:						
	0					
	0					
	0					
0299997 Group subscriber subtotal	0	0	0	0	0	0
0299998 Premiums due and unpaid not individually listed						
0299999 Total group	0	0	0	0	0	0
0399999 Premiums due and unpaid from Medicare entities						
0499999 Premiums due and unpaid from Medicaid entities						0
0599999 Accident and health premiums due and unpaid (Page 2, Line 12)	0	0	0	0	0	0

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
Individually Listed Receivables:						
Psychotropic Drug Reimbursement	450,000	466,546	0	0		916,564
Medicaid Maturnity Case Rates	122,148	85,956	158,340	718,927		1,085,371
	0	0	0	0		0
0499999 Receivables not individually listed						
0599999 Gross health care receivables	572,148	552,502	158,340	718,927	0	2,001,935

EXHIBIT 5 – CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (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
Claims Unpaid (Reported)						
Marquette General Health System	26,952					26,952
Portage Health Systems	13,109					13,109
War Memorial Hospital	36,021					36,021
Paid Prescriptions, LLC	1,099,857					1,099,857
0199999 Individually listed claims unpaid	1,175,939	0	0	0	0	1,175,939
0299999 Aggregate accounts not individually listed-uncovered						0
0399999 Aggregate accounts not individually listed-covered						0
0499999 Subtotals	1,175,939	0	0	0	0	1,175,939
0599999 Unreported claims and other claim reserves						4,724,061
0699999 Total amounts withheld						
0799999 Total claims unpaid						5,900,000
0899999 Accrued medical incentive pool and bonus amounts						

EXHIBIT 6 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1	2	3	4	5	6	Admitted	
						7	8
Name of Affiliate	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Current	Non-Current
Individually Listed Receivables:							
0199999 Individually listed receivables							
0299999 Receivables not individually listed							
0399999 Total gross amounts receivable							

NONE

EXHIBIT 7 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1 Affiliate	2 Description	3 Amount	4 Current	5 Non-Current
	NONE			
0199999 Individually listed payables				
0299999 Payables not individually listed				
0399999 Total gross payables				

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	0	0.0		0.0		
2. Intermediaries	0	0.0		0.0		
3. All other providers	0	0.0		0.0		
4. Total capitation payments	0	0.0	0	0.0	0	0
Other Payments:						
5. Fee-for-service	3,284,252	8.4	XXX	XXX		3,284,252
6. Contractual fee payments	35,853,021	91.6	XXX	XXX	35,853,021	0
7. Bonus/withhold arrangements - fee-for-service	0	0.0	XXX	XXX		
8. Bonus/withhold arrangements - contractual fee payments	0	0.0	XXX	XXX		
9. Non-contingent salaries	0	0.0	XXX	XXX		
10. Aggregate cost arrangements	0	0.0	XXX	XXX		
11. All other payments	0	0.0	XXX	XXX		0
12. Total other payments	39,137,273	100.0	XXX	XXX	35,853,021	3,284,252
13. TOTAL (Line 4 plus Line 12)	39,137,273	100 %	XXX	XXX	35,853,021	3,284,252

EXHIBIT 8 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

1 NAIC Code	2 Name of Intermediary	3 Capitation Paid	4 Average Monthly Capitation	6 Intermediary's Total Adjusted Capital	7 Intermediary's Authorized Control Level RBC
	NONE				
9999999 Totals			XXX	XXX	XXX

EXHIBIT 9 – FURNITURE, EQUIPMENT AND SUPPLIES OWNED

Description	1 Cost	2 Improvements	3 Accumulated Depreciation	4 Book Value Less Encumbrances	5 Assets Not Admitted	6 Net Admitted Assets
1. Administrative furniture and equipment	113,305		27,959		12,802	72,544
2. Medical furniture, equipment and fixtures						
3. Pharmaceuticals and surgical supplies						
4. Durable medical equipment						
5. Other property and equipment						
6. Total	113,305	0	27,959	0	12,802	72,544

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Upper Peninsula Health Plan, Inc. 2. _____ (LOCATION)

NAIC Group Code 0000 BUSINESS IN THE STATE OF Michigan DURING THE YEAR 2003 NAIC Company Code 52615

	1	Comprehensive (Hospital & Medical) 2	3	4	5	6	7	8	9	10	11	12	13
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Stop Loss	Disability Income	Long-Term Care	Other
Total Members at end of:													
1. Prior Year	19,052								18,738				314
2 First Quarter	26,211								25,914				297
3 Second Quarter	25,724								25,432				292
4. Third Quarter	26,029								25,733				296
5. Current Year	26,195								25,898				297
6 Current Year Member Months	311,820								308,226				3,594
Total Member Ambulatory Encounters for Year:													
7. Physician	194,712								193,225				1,487
8. Non-Physician	341,679								339,614				2,065
9. Total	536,391	0	0	0	0	0	0	0	532,839	0	0	0	3,552
10. Hospital Patient Days Incurred	7,202								7,198				4
11. Number of Inpatient Admissions	2,124								2,122				2
12. Health Premiums Collected	47,341,780								47,065,782				275,998
13. Life Premiums Direct	0												
14. Property/Casualty Premiums Written	0												
15. Health Premiums Earned	46,490,976								46,214,978				275,998
16. Property/Casualty Premiums Earned	0												
17. Amount Paid for Provision of Health Care Services	39,295,249								39,174,952				120,297
18. Amount Incurred for Provision of Health Care Services	39,608,278								39,354,188				254,090

(a) For health business: number of persons insured under PPO managed care products _____ and number of persons under indemnity only products _____

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Upper Peninsula Health Plan, Inc. 2. _____ (LOCATION)

NAIC Group Code 0000 BUSINESS IN THE STATE OF Consolidated DURING THE YEAR 2003 NAIC Company Code 52615

	1	Comprehensive (Hospital & Medical) 2	3	4	5	6	7	8	9	10	11	12	13
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Stop Loss	Disability Income	Long-Term Care	Other
Total Members at end of:													
1. Prior Year	19,052	0	0	0	0	0	0	0	18,738	0	0	0	314
2 First Quarter	26,211	0	0	0	0	0	0	0	25,914	0	0	0	297
3 Second Quarter	25,724	0	0	0	0	0	0	0	25,432	0	0	0	292
4. Third Quarter	26,029	0	0	0	0	0	0	0	25,733	0	0	0	296
5. Current Year	26,195	0	0	0	0	0	0	0	25,898	0	0	0	297
6 Current Year Member Months	311,820	0	0	0	0	0	0	0	308,226	0	0	0	3,594
Total Member Ambulatory Encounters for Year:													
7. Physician	194,712	0	0	0	0	0	0	0	193,225	0	0	0	1,487
8. Non-Physician	341,679	0	0	0	0	0	0	0	339,614	0	0	0	2,065
9. Total	536,391	0	0	0	0	0	0	0	532,839	0	0	0	3,552
10. Hospital Patient Days Incurred	7,202	0	0	0	0	0	0	0	7,198	0	0	0	4
11. Number of Inpatient Admissions	2,124	0	0	0	0	0	0	0	2,122	0	0	0	2
12. Health Premiums Collected	47,341,780	0	0	0	0	0	0	0	47,065,782	0	0	0	275,998
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	46,490,976	0	0	0	0	0	0	0	46,214,978	0	0	0	275,998
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	39,295,249	0	0	0	0	0	0	0	39,174,952	0	0	0	120,297
18. Amount Incurred for Provision of Health Care Services	39,608,278	0	0	0	0	0	0	0	39,354,188	0	0	0	254,090

(a) For health business: number of persons insured under PPO managed care products 0 and number of persons under indemnity only products 0

SCHEDULE A VERIFICATION BETWEEN YEARS

NONE

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 cost 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
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 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

NONE

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
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

NONE

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

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

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 Col. 6 as a % of Line 10.7	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
1. U.S. Governments, Schedules D & DA (Group 1)											
1.1 Class 1	974,479	25,257				999,736	100.0	514,447	100.0	999,736	
1.2 Class 2						0	0.0	0	0.0		
1.3 Class 3						0	0.0	0	0.0		
1.4 Class 4						0	0.0	0	0.0		
1.5 Class 5						0	0.0	0	0.0		
1.6 Class 6						0	0.0	0	0.0		
1.7 Totals	974,479	25,257	0	0	0	999,736	100.0	514,447	100.0	999,736	0
2. All Other Governments, Schedules D & DA (Group 2)											
2.1 Class 1						0	0.0	0	0.0		
2.2 Class 2						0	0.0	0	0.0		
2.3 Class 3						0	0.0	0	0.0		
2.4 Class 4						0	0.0	0	0.0		
2.5 Class 5						0	0.0	0	0.0		
2.6 Class 6						0	0.0	0	0.0		
2.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
3. States, Territories and Possessions etc., Guaranteed, Schedules D & DA (Group 3)											
3.1 Class 1						0	0.0	0	0.0		
3.2 Class 2						0	0.0	0	0.0		
3.3 Class 3						0	0.0	0	0.0		
3.4 Class 4						0	0.0	0	0.0		
3.5 Class 5						0	0.0	0	0.0		
3.6 Class 6						0	0.0	0	0.0		
3.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
4. Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 4)											
4.1 Class 1						0	0.0	0	0.0		
4.2 Class 2						0	0.0	0	0.0		
4.3 Class 3						0	0.0	0	0.0		
4.4 Class 4						0	0.0	0	0.0		
4.5 Class 5						0	0.0	0	0.0		
4.6 Class 6						0	0.0	0	0.0		
4.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
5. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed, Schedules D & DA (Group 5)											
5.1 Class 1						0	0.0	0	0.0		
5.2 Class 2						0	0.0	0	0.0		
5.3 Class 3						0	0.0	0	0.0		
5.4 Class 4						0	0.0	0	0.0		
5.5 Class 5						0	0.0	0	0.0		
5.6 Class 6						0	0.0	0	0.0		
5.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

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 Col. 6 as a % of Line 10.7	8 Total from Col. 6 Prior Year	9 % From Col. 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						0	0.0	0	0.0		
6.2 Class 2						0	0.0	0	0.0		
6.3 Class 3						0	0.0	0	0.0		
6.4 Class 4						0	0.0	0	0.0		
6.5 Class 5						0	0.0	0	0.0		
6.6 Class 6						0	0.0	0	0.0		
6.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
7. Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7)											
7.1 Class 1						0	0.0	0	0.0		
7.2 Class 2						0	0.0	0	0.0		
7.3 Class 3						0	0.0	0	0.0		
7.4 Class 4						0	0.0	0	0.0		
7.5 Class 5						0	0.0	0	0.0		
7.6 Class 6						0	0.0	0	0.0		
7.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
8. Credit Tenant Loans, Schedules D & DA (Group 8)											
8.1 Class 1						0	0.0	0	0.0		
8.2 Class 2						0	0.0	0	0.0		
8.3 Class 3						0	0.0	0	0.0		
8.4 Class 4						0	0.0	0	0.0		
8.5 Class 5						0	0.0	0	0.0		
8.6 Class 6						0	0.0	0	0.0		
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
9. Parent, Subsidiaries and Affiliates, Schedules D & DA (Group 9)											
9.1 Class 1						0	0.0	0	0.0		
9.2 Class 2						0	0.0	0	0.0		
9.3 Class 3						0	0.0	0	0.0		
9.4 Class 4						0	0.0	0	0.0		
9.5 Class 5						0	0.0	0	0.0		
9.6 Class 6						0	0.0	0	0.0		
9.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

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 Col. 6 as a % of Line 10.7	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
10. Total Bonds Current Year											
10.1 Class 1	974,479	25,257	0	0	0	999,736	100.0	XXX	XXX	999,736	0
10.2 Class 2	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.3 Class 3	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.4 Class 4	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.5 Class 5	0	0	0	0	0	(c) 0	0.0	XXX	XXX	0	0
10.6 Class 6	0	0	0	0	0	(c) 0	0.0	XXX	XXX	0	0
10.7 Totals	974,479	25,257	0	0	0	(b) 999,736	100.0	XXX	XXX	999,736	0
10.8 Line 10.7 as a % of Col. 6	97.5	2.5	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
11. Total Bonds Prior Year											
11.1 Class 1	399,254	70,296	44,897	0	0	XXX	XXX	514,447	100.0	514,447	0
11.2 Class 2	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.3 Class 3	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.4 Class 4	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.5 Class 5	0	0	0	0	0	XXX	XXX	(c) 0	0.0	0	0
11.6 Class 6	0	0	0	0	0	XXX	XXX	(c) 0	0.0	0	0
11.7 Totals	399,254	70,296	44,897	0	0	XXX	XXX	(b) 514,447	100.0	514,447	0
11.8 Line 11.7 as a % of Col. 8	77.6	13.6	8.8	0.0	0.0	XXX	XXX	100.0	XXX	100.0	0.0
12. Total Publicly Traded Bonds											
12.1 Class 1	974,479	25,257				999,736	100.0	514,447	0.0	999,736	XXX
12.2 Class 2						0	0.0	0	0.0	0	XXX
12.3 Class 3						0	0.0	0	0.0	0	XXX
12.4 Class 4						0	0.0	0	0.0	0	XXX
12.5 Class 5						0	0.0	0	0.0	0	XXX
12.6 Class 6						0	0.0	0	0.0	0	XXX
12.7 Totals	974,479	25,257	0	0	0	999,736	100.0	514,447	0.0	999,736	XXX
12.8 Line 12.7 as a % of Col. 6	97.5	2.5	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10	97.5	2.5	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
13. Total Privately Placed Bonds											
13.1 Class 1						0	0.0	0	0.0	XXX	0
13.2 Class 2						0	0.0	0	0.0	XXX	0
13.3 Class 3						0	0.0	0	0.0	XXX	0
13.4 Class 4						0	0.0	0	0.0	XXX	0
13.5 Class 5						0	0.0	0	0.0	XXX	0
13.6 Class 6						0	0.0	0	0.0	XXX	0
13.7 Totals	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.8 Line 13.7 as a % of Col. 6	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

(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 Type and Subtype of Issues

Distribution by Type	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 Col. 6 as a % of Line 10.7	8 Total from Col 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
1. U.S. Governments, Schedules D & DA (Group 1)											
1.1 Issuer Obligations	974,479	25,257				999,736	100.0	514,447	100.0	999,736	
1.2 Single Class Mortgage-Backed/Asset-Backed Securities						0	0.0	0	0.0		
1.7 Totals	974,479	25,257	0	0	0	999,736	100.0	514,447	100.0	999,736	0
2. All Other Governments, Schedules D & DA (Group 2)											
2.1 Issuer Obligations						0	0.0	0	0.0		
2.2 Single Class Mortgage-Backed/Asset-Backed Securities						0	0.0	0	0.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
2.3 Defined						0	0.0	0	0.0		
2.4 Other						0	0.0	0	0.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
2.5 Defined						0	0.0	0	0.0		
2.6 Other						0	0.0	0	0.0		
2.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
3. States, Territories, and Possessions Guaranteed, Schedules D & DA (Group 3)											
3.1 Issuer Obligations						0	0.0	0	0.0		
3.2 Single Class Mortgage-Backed/Asset-Backed Securities						0	0.0	0	0.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
3.3 Defined						0	0.0	0	0.0		
3.4 Other						0	0.0	0	0.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
3.5 Defined						0	0.0	0	0.0		
3.6 Other						0	0.0	0	0.0		
3.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
4. Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 4)											
4.1 Issuer Obligations						0	0.0	0	0.0		
4.2 Single Class Mortgage-Backed/Asset-Backed Securities						0	0.0	0	0.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
4.3 Defined						0	0.0	0	0.0		
4.4 Other						0	0.0	0	0.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
4.5 Defined						0	0.0	0	0.0		
4.6 Other						0	0.0	0	0.0		
4.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
5. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed, Schedules D & DA (Group 5)											
5.1 Issuer Obligations						0	0.0	0	0.0		
5.2 Single Class Mortgage-Backed/Asset-Backed Securities						0	0.0	0	0.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
5.3 Defined						0	0.0	0	0.0		
5.4 Other						0	0.0	0	0.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
5.5 Defined						0	0.0	0	0.0		
5.6 Other						0	0.0	0	0.0		
5.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

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

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	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 Col. 6 as a % of Line 10.7	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
6. Public Utilities (Unaffiliated), Schedules D & DA (Group 6)											
6.1 Issuer Obligations						0	0.0	0	0.0		
6.2 Single Class Mortgage-Backed/Asset-Based Securities						0	0.0	0	0.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
6.3 Defined						0	0.0	0	0.0		
6.4 Other						0	0.0	0	0.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
6.5 Defined						0	0.0	0	0.0		
6.6 Other						0	0.0	0	0.0		
6.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
7. Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7)											
7.1 Issuer Obligations						0	0.0	0	0.0		
7.2 Single Class Mortgage-Backed/Asset-Based Securities						0	0.0	0	0.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
7.3 Defined						0	0.0	0	0.0		
7.4 Other						0	0.0	0	0.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
7.5 Defined						0	0.0	0	0.0		
7.6 Other						0	0.0	0	0.0		
7.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
8. Credit Tenant Loans, Schedules D & DA (Group 8)											
8.1 Issuer Obligations						0	0.0	0	0.0		
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
9. Parents, Subsidiaries and Affiliates, Schedules D & DA (Group 9)											
9.1 Issuer Obligations						0	0.0	0	0.0		
9.2 Single Class Mortgage-Backed/Asset-Based Securities						0	0.0	0	0.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
9.3 Defined						0	0.0	0	0.0		
9.4 Other						0	0.0	0	0.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
9.5 Defined						0	0.0	0	0.0		
9.6 Other						0	0.0	0	0.0		
9.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

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

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	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 Col. 6 as a % of Line 10.7	8 Total From Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
10. Total Bonds Current Year											
10.1 Issuer Obligations	974,479	25,257	0	0	0	999,736	100.0	XXX	XXX	999,736	0
10.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	XXX	XXX	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
10.3 Defined	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.4 Other	0	0	0	0	0	0	0.0	XXX	XXX	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
10.5 Defined	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.6 Other	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.7 Totals	974,479	25,257	0	0	0	999,736	100.0	XXX	XXX	999,736	0
10.8 Line 10.7 as a % of Col. 6	97.5	2.5	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
11. Total Bonds Prior Year											
11.1 Issuer Obligations	399,254	70,296	44,897	0	0	XXX	XXX	514,447	0.0	514,447	0
11.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	XXX	XXX	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
11.3 Defined	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.4 Other	0	0	0	0	0	XXX	XXX	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
11.5 Defined	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.6 Other	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.7 Totals	399,254	70,296	44,897	0	0	XXX	XXX	514,447	0.0	514,447	0
11.8 Line 11.7 as a % of Col. 8	77.6	13.6	8.8	0.0	0.0	XXX	XXX	100.0	XXX	100.0	0.0
12. Total Publicly Traded Bonds											
12.1 Issuer Obligations	974,479	25,257				999,736	100.0	514,447	0.0	999,736	XXX
12.2 Single Class Mortgage-Backed/Asset-Backed Securities						0	0.0	0	0.0	0	XXX
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
12.3 Defined						0	0.0	0	0.0	0	XXX
12.4 Other						0	0.0	0	0.0	0	XXX
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
12.5 Defined						0	0.0	0	0.0	0	XXX
12.6 Other						0	0.0	0	0.0	0	XXX
12.7 Totals	974,479	25,257	0	0	0	999,736	100.0	514,447	0.0	999,736	XXX
12.8 Line 12.7 as a % of Col. 6	97.5	2.5	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10	97.5	2.5	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
13. Total Privately Placed Bonds											
13.1 Issuer Obligations						0	0.0	0	0.0	XXX	0
13.2 Single Class Mortgage-Backed/Asset-Backed Securities						0	0.0	0	0.0	XXX	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
13.3 Defined						0	0.0	0	0.0	XXX	0
13.4 Other						0	0.0	0	0.0	XXX	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
13.5 Defined						0	0.0	0	0.0	XXX	0
13.6 Other						0	0.0	0	0.0	XXX	0
13.7 Totals	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.8 Line 13.7 as a % of Col. 6	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

SCHEDULE DA - PART 2

Verification of SHORT-TERM INVESTMENTS Between Years

	1 Total	2 Bonds	3 Mortgage Loans	4 Other Short-term Investment Assets(a)	5 Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, prior year	0	0	0	0	0
2. Cost of short-term investments acquired	492,656			492,656	
3. Increase (decrease) by adjustment	484,639			484,639	
4. Increase (decrease) by foreign exchange adjustment	0				
5. Total profit (loss) on disposal of short-term investments	0				
6. Consideration received on disposal of short-term investments	22,816			22,816	
7. Book/adjusted carrying value, current year	954,479	0	0	954,479	0
8. Total valuation allowance	0				
9. Subtotal (Lines 7 plus 8)	954,479	0	0	954,479	0
10. Total nonadmitted amounts	0				
11. Statement value (Lines 9 minus 10)	954,479	0	0	954,479	0
12. Income collected during year	4,675			4,675	
13. Income earned during year	5,568			5,568	

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

SCHEDULE DB - PART A - VERIFICATION BETWEEN YEARS

Verification Between Years of Aggregate Write-in Book Value on Options, Caps, Floors and Insurance Futures Options Owned

NONE

1. Aggregate write-in book value, December 31, prior year (Line 8, prior year) .....
2. Cost/Option Premium (Section 2, Column 7) .....
3. Increase/(Decrease) by Adjustment (Section 1, Column 12) (Section 3, Column 13) .....
4. Gain/(Loss) on Termination:

   4.1 Recognized (Section 3, Column 14) .....

   4.2 Used to Adjust Basis of Hedged Item (Section 3, Column 15) .....
5. Consideration received on terminations (Section 3, Column 12) .....
6. Used to Adjust Basis on Open Contracts (Section 1, Column 13) .....
7. Disposition of deferred amount on contracts terminated in prior year:

   7.1 Recognized .....

   7.2 Used to Adjust Basis of Hedged Item .....
8. Aggregate write-in book value, December 31, Current Year (Lines 1 + 2 + 3 + 4 – 5 – 6 - 7) .....

SCHEDULE DB - PART B - VERIFICATION BETWEEN YEARS

Verification Between Years of Aggregate Write-in Book Value on Options, Caps, Floors and Insurance Futures Options Written

NONE

1. Aggregate write-in book value, December 31, prior year (Line 8, prior year) .....
2. Consideration received (Section 2, Column 7) .....
3. Increase/(Decrease) by Adjustment (Section 1, Column 12) (Section 3, Column 13) .....
4. Gain/(Loss) on Termination:

   4.1 Recognized (Section 3, Column 14) .....

   4.2 Used to Adjust Basis (Section 3, Column 15) .....
5. Consideration paid on terminations (Section 3, Column 12) .....
6. Used to Adjust Basis on Open Contracts (Section 1, Column 13) .....
7. Disposition of deferred amount on contracts terminated in prior year:

   7.1 Recognized .....

   7.2 Used to Adjust Basis .....
8. Aggregate write-in book value, December 31, Current Year .....

SCHEDULE DB - PART C - VERIFICATION BETWEEN YEARS

NONE

Verification Between Years of Aggregate Write-in Book Value on Swaps and Forwards

1. Aggregate write-in book value, December 31, prior year (Section 4, Line 8, prior year)
2. Cost or (Consideration Received) (Section 2, Column 7)
3. Increase/(Decrease) by Adjustment (Section 1, Column 12) plus (Section 3, Column 13)
4. Gain/(Loss) on Termination:
   4.1 Recognized (Section 3, Column 14)
   4.2 Used to Adjust Basis of Hedged Item (Section 3, Column 15)
5. Consideration received (or paid) on terminations (Section 3, Column 12)
6. Used to Adjust Basis of Hedged Item on Open Contracts (Section 1, Column 13)
7. Disposition of deferred amount on contracts terminated in prior year:
   7.1 Recognized
   7.2 Used to Adjust Basis of Hedged Item
8. Aggregate write-in book value, December 31, Current Year (Lines 1 + 2 + 3 + 4 – 5 – 6 - 7)

SCHEDULE DB - PART D - VERIFICATION BETWEEN YEARS

NONE

Verification Between Years of Aggregate Write-in Book Value on Futures Contracts and Insurance Futures Contracts

1. Aggregate write-in book value, December 31, prior year (Section 4, Line 8, prior year)
2. Change in total Variation Margin on Open Contracts (Difference between Years - Section 1, Column 7)
3.1 Change in Variation Margin on Open Contracts used to Adjust Basis of Hedged Item (Section 1, Column 11)
3.2 Change in variation margin on open contracts recognized (Difference between Years - Section 1, Column 10)
4.1 Variation Margin on Contracts Terminated During the Year (Section 3, Column 6)
4.2 Less:
   4.21 Gain/(Loss) Recognized in Current Year (Section 3, Column 11)
   4.22 Gain/(Loss) Used to Adjust Basis of Hedge (Section 3, Column 12)
4.3 Subtotal (Line 4.1 minus Line 4.2)
5.1 Net additions to Cash Deposits (Section 2, Column 7)
5.2 Less: Net Reductions to Cash Deposits (Section 3, Column 9)
6. Subtotal (Lines 1 - 2 + 3.1 + 3.2 - 4.3 + 5.2)
7. Disposition of Gain/(Loss) on Contracts Terminated in Prior Year:
   7.1 Recognized
   7.2 Used to Adjust Basis of Hedged Item
8. Aggregate write-in book value, December 31, Current Year (Lines 6 + 7.1 + 7.2)

SCHEDULE DB - PART E - VERIFICATION BETWEEN YEARS

NONE

Verification of Statement Value and Fair Value of Open Contracts

		Statement Value
1.	Part A, Section 1, Column 10	
2.	Part B, Section 1, Column 10	
3.	Part C, Section 1, Column 10	
4.	Part D, Section 1, Column 9 - 12	
5.	Lines (1) - (2) + (3) + (4)	
6.	Part E, Section 1, Column 4	
7.	Part E, Section 1, Column 5	
8.	Lines (5) - (6) - (7)	

		Fair Value
9.	Part A, Section 1, Column 11	
10.	Part B, Section 1, Column 11	
11.	Part C, Section 1, Column 11	
12.	Part D, Section 1, Column 9	
13.	Lines (9) - (10) + (11) + (12)	
14.	Part E, Section 1, Column 7	
15.	Part E, Section 1, Column 8	
16.	Lines (13) - (14) - (15)	

SCHEDULE DB - PART F- SECTION 1

Summary of Replicated (Synthetic) Assets Open

Replicated (Synthetic) Asset					Components of the Replicated (Synthetic) Asset						
					Derivative Instruments Open		Cash Instrument(s) Held				
1 Replication RSAT Number	2 Description	3 NAIC Designation or Other Description	4 Statement Value	5 Fair Value	6 Description	7 Fair Value	8 CUSIP	9 Description	10 Statement Value	11 Fair Value	12 NAIC Designation or Other Description
9999999 Totals					XXX		XXX	XXX			XXX

NONE

SCHEDULE DB - PART F - SECTION 2

Reconciliation of Replicated (Synthetic) Assets Open

NONE

	First Quarter		Second Quarter		Third Quarter		Fourth Quarter		Year-to-Date	
	1 Number of Positions	2 Total Replicated (Synthetic) Assets Statement Value	3 Number of Positions	4 Total Replicated (Synthetic) Assets Statement Value	5 Number of Positions	6 Total Replicated (Synthetic) Assets Statement Value	7 Number of Positions	8 Total Replicated (Synthetic) Assets Statement Value	9 Number of Positions	10 Total Replicated (Synthetic) Assets Statement Value
1. Beginning Inventory										
2. Add: Opened or Acquired Transactions										
3. Add: Increases in Replicated Asset Statement Value	XXX		XXX		XXX		XXX		XXX	
4. Less: Closed or Disposed of Transactions										
5. Less: Positions Disposed of For Failing Effectiveness Criteria										
6. Less: Decreases in Replicated (Synthetic) Asset Statement Value	XXX		XXX		XXX		XXX		XXX	
7. Ending Inventory										

SCHEDULE S - PART 1 - SECTION 2

Reinsurance Assumed for Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Reinsured	5 Location	6 Type of Reinsurance Assumed	7 Premiums	8 Unearned Premiums	9 Reserve Liability Other Than for Unearned Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
0399999 Totals											

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
0799999 - Totals						

NONE

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
66346	58-0828824	01/01/2003	Munich American Reassurance Company	Miami, Florida	OTH/A	355,782						
0299999 - Total - Non-Affiliates						355,782						
0399999 Totals						355,782						

SCHEDULE S - PART 4

Reinsurance Ceded to Unauthorized Companies

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total Cols. (5+6+7)	9 Letters of Credit	10 Trust Agreements	11 Funds Deposited by and Withheld from Reinsurers	12 Other	13 Miscellaneous Balances (Credit)	14 Sum of Cols. 9+10+11+12+13 But Not in Excess of Col. 8
1199999 Totals													

NONE

Schedule S-Part 5
Five-Year Exhibit of Reinsurance Ceded Business
(000 Omitted)

	1 2003	2 2002	3 2001	4 2000	5 1999
A. OPERATIONS ITEMS					
1. Premiums	2	3	3	4	4
2. Title XVIII-Medicare	0	0	0	0	0
3. Title XIX-Medicaid	354	196	322	421	425
4. Commissions and reinsurance expense allowance		0	0	0	0
5. Total hospital and medical expenses		0	0	0	0
B. BALANCE SHEET ITEMS					
6. Premiums receivable		0	0	0	0
7. Claims payable		0	0	0	0
8. Reinsurance recoverable on paid losses	0	0	0	0	0
9. Experience rating refunds due or unpaid		0	0	0	0
10. Commissions and reinsurance expense allowances unpaid		0	0	0	0
11. Unauthorized reinsurance offset	0	0	0	0	0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
12. Funds deposited by and withheld from (F)	0	0	0	0	0
13. Letters of credit (L)	0	0	0	0	0
14. Trust agreements (T)	0	0	0	0	0
15. Other (O)	0	0	0	0	0

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 10)	9,577,212		9,577,212
2. Amounts recoverable from reinsurers (Line 12)	0		0
3. Amounts recoverable from reinsurers (Line 13.1)	0		0
4. Net credit for ceded reinsurance	XXX	0	0
5. All other admitted assets (Balance)	2,107,573		2,107,573
6. Total assets (Line 26)	11,684,785	0	11,684,785
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1)	5,742,030	0	5,742,030
8. Accrued medical incentive pool and bonus payments (Line 2)	0		0
9. Premiums received in advance (Line 8)	0		0
10. Reinsurance in unauthorized companies (Line 18)	0		0
11. All other liabilities (Balance)	1,635,485		1,635,485
12. Total liabilities (Line 22)	7,377,515	0	7,377,515
13. Total capital and surplus (Line 30)	4,307,270	XXX	4,307,270
14. Total liabilities, capital and surplus (Line 31)	11,684,785	0	11,684,785
NET CREDIT FOR CEDED REINSURANCE			
15. Claims unpaid	0		
16. Accrued medical incentive pool	0		
17. Premiums received in advance	0		
18. Reinsurance recoverable on paid losses	0		
19. Other ceded reinsurance recoverables	0		
20. Total ceded reinsurance recoverables	0		
21. Premiums receivable	0		
22. Unauthorized reinsurance	0		
23. Other ceded reinsurance payables/offsets	0		
24. Total ceded reinsurance payable/offsets	0		
25. Total net credit for ceded reinsurance	0		

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

1 NAIC Company Code	2 Federal ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	38-1394903	Bell Memorial		(26,000)							(26,000)	
	38-2780429	Dickinson County Healthcare System		(60,000)							(60,000)	
	38-2908586	Grand View Health System		(31,000)							(31,000)	
	38-2873485	Helen Newberry Joy Hospital		(14,500)							(14,500)	
	38-2529825	Iron County Hospital		(17,500)							(17,500)	
	38-1443361	Keweenaw Memorial Hospital		(15,000)							(15,000)	
	38-1358036	Marquette General Health System		(236,713)							(236,713)	
	38-1381288	Portage Health Systems		(50,000)							(50,000)	
	74-2517055	Schoolcraft Memorial Hospital		(10,000)							(10,000)	
	23-7249643	Sault Ste. Marie Tribal Health		(1,787)							(1,787)	
	38-2602147	War Memorial Hospital		(37,500)							(37,500)	
	38-3379956	Upper Peninsula Health Plan, Inc		500,000							500,000	
	38-3379956	Upper Peninsula Health Plan, Inc					(1,061,087)				(1,061,087)	
	38-3323620	Upper Peninsula Managed Care, LLC					1,061,087				1,061,087	
9999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your annual statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING

1.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	Yes [ ]	No [X]
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	Yes [X]	No [ ]
3.	Will an actuarial certification be filed by March 1?	Yes [X]	No [ ]
4.	Will the Risk-based Capital Report be filed with the NAIC by March 1?	Yes [X]	No [ ]
5.	Will the Risk-based Capital Report be filed with the state of domicile, if required by March 1?	Yes [X]	No [ ]
6.	Will the SVO Compliance Certification be filed by March 1?	Yes [X]	No [ ]
7.	Will the Life Supplement be filed the state of domicile and the NAIC by March 1?	Yes [ ]	No [X]
8.	Will the Property/Casualty Supplement be filed the state of domicile and the NAIC by March 1?	Yes [ ]	No [X]

APRIL FILING

9.	Will Management's Discussion and Analysis be filed by April 1?	Yes [ ]	No [X]
10.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile by April 1?	Yes [ ]	No [X]
11.	Will the Investment Risks Interrogatories be filed by April 1?	Yes [X]	No [ ]

JUNE FILING

12.	Will an audited financial report be filed by June 1 with the state of domicile?	Yes [ ]	No [X]

EXPLANATIONS:

1.

7.

8.

10.

11.

BAR CODE:

1. 5 2 6 1 5 2 0 0 3 3 6 0 5 8 0 0 0

7.

8. 5 2 6 1 5 2 0 0 3 3 5 0 0 0 0 0 0

10. 5 2 6 1 5 2 0 0 3 3 3 0 5 8 0 0 0

5 2 6 1 5 2 0 0 3 2 2 0 0 0 0 0 0

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