

**PERSONAL PHYSICIAN CARE, INC.
NOTICE OF LIQUIDATION**

ALL MEMBERS, HOSPITALS, PRIMARY CARE PHYSICIANS, SPECIALISTS, CREDITORS, AND OTHER PERSONS KNOWN OR REASONABLY EXPECTED TO HAVE CLAIMS AGAINST PERSONAL PHYSICIAN CARE, INC.

On August 20, 1998, Personal Physician Care, Inc. was determined to be insolvent and ordered liquidated by Judge Crawford of the Court of Common Pleas, Franklin County, Ohio, Case No. 98CVH08-6251. Harold T. Duryee, Ohio Superintendent of Insurance, was appointed as Liquidator.

The Liquidation Order enjoins all persons who have claims against Personal Physician Care, Inc., from (1) instituting or continuing to prosecute any civil action or claim against Personal Physician Care, Inc. or the Liquidator, (2) from in any way interfering with the possession, control, title, rights, and interests of the Liquidator as provided by Ohio Revised Code Sections 3903.01 to 3903.99, inclusive, or (3) taking any action which tends to give rise to waste of assets, a preference, judgment, attachment, lien or the making of a levy against Personal Physician Care, Inc. or its property or assets subject to the possession or control of the Liquidator.

Pursuant to statute and court order, all policies of insurance and similar obligations issued by Personal Physician Care, Inc., are canceled effective no later than 12:01 a.m., September 20, 1998. Personal Physician Care, Inc. will provide no insurance coverage or indemnification for any loss made after this date. All policyholders of Personal Physician Care, Inc., must secure coverage with other insurance companies by the above date. Contact your agent, broker, attorney and/or insurance advisor immediately to discuss your individual situation and for assistance in obtaining other coverage. If you have further questions regarding your healthcare options, please contact the Consumer Services Division of the Ohio Department of Insurance at 800 686-1526.

If coverage is secured with another company prior to 12:01 a.m., September 20, 1998, please send a copy of the declaration page, face sheet, or binder of the new policy, which shows the effective date of the new policy, to Personal Physician Care, Inc., Suite 500, 1255 Euclid Avenue, Cleveland, Ohio, 44115, so that your Personal Physician Care, Inc. policy can be cancelled as of the date you obtained the new coverage. If no evidence of replacement coverage is received, the Personal Physician Care, Inc. policy will be canceled at 12:01 a.m., September 20, 1998, or the normal expiration date if the policy expires prior to September 20, 1998.

Personal Physician Care, Inc. agents are not permitted to credit or refund unearned premium resulting from cancellations with effective dates after August 20, 1998. If you have a claim for unearned premium, it must be filed directly in the liquidation proceedings on a Proof of Claim form.

Providers that contracted with Personal Physician Care, Inc. (Contract Providers) are prohibited by contract from pursuing members for unpaid balances covered by Personal Physician Care, Inc. Contract Providers must file a Proof of Claim form in the liquidation proceedings for any unpaid fees.

It is anticipated that you will receive a Proof of Claim form within the next 90-120 days to be used in filing your claim in the liquidation proceedings. A Proof of Claim form must be used for claiming unearned premiums resulting from policies being cancelled after August 20, 1998, and/or for making a claim for any other amounts owed you by Personal Physician Care, Inc.

Any new claims of which you become aware should be submitted to the Liquidator on a separate Proof of Claim form which will be provided to you at a later date. Please address all inquiries to Personal Physician Care, Inc., In Liquidation. The telephone number is 216-687-0015. Proofs of Claim must be returned to: Personal Physician Care, Inc., In Liquidation, P.O. Box 16338, Columbus, Ohio 43216.

Harold T. Duryee
Superintendent of Insurance, State of Ohio
Liquidator of Personal Physician Care, Inc.

By: _____
David S. Meyer, Chief Deputy Liquidator

PERSONAL PHYSICIAN CARE, INC., IN LIQUIDATION
CLAIM NOTICE AND CLAIM FILING PROCEDURES

1. Proof of Claim forms are anticipated to be mailed within the next 90-120 days to all known policyholders/insureds, claimants and creditors as reflected on the books and records of Personal Physician Care, Inc. The Proof of Claim should be completed in its entirety and all questions answered. You must file a separate Proof of Claim form for each claim you are making.
2. Your Proof of Claim form and all supporting documentation must be received on or before the claim filing deadline to be determined by the Liquidation Court.
3. If your claim is for unearned premium, you must submit documentation evidencing proof of premium payment and certify that you have not received the return of premium from your agent or broker, and/or that it has not been applied/credited to premium due by you for your new/replacement coverage.
4. If you move prior to receiving your Proof of Claim form, it is your responsibility to provide us with your new address. Failure to do so may result in your claim being barred from participating in any distribution of assets.
5. The Liquidator, in the normal course of the liquidation proceeding, will independently evaluate claims made against the assets of the Personal Physician Care, Inc.
6. When your claim is evaluated by the Liquidator, you will be notified as to the Liquidator's determination for the allowance or disallowance of your claim, and you will have 60 days from the date of the notice in which to submit a written objection if you disagree.
7. After all claims have been evaluated and approved by the Liquidation Court, allowed claims will be paid by priority level based on available funds. The amount paid will depend on the ratio of assets to total allowed claims by priority level. We will not know the distribution percentage that can be paid on any individual claim until all claims in the first three priority levels are evaluated and all assets converted to cash. This process will take a number of months after the deadline for filing Proofs of Claim has passed and we cannot state-at this time if or when any distribution of assets will be made on allowed claims.