

Received

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Exhibit 1
OAR 836-024-0115

Insurance Division
State of Oregon

INSIDER TRADING REPORTING FORMS AND INSTRUCTIONS

Note: These forms are patterned substantially after Forms 3 and 4 of the Securities and Exchange Commission.

STATE OF OREGON

Director of the Department of Consumer and Business Services

**FORM 3
INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed Pursuant to:

CLEAR CHOICE HEALTH PLANS, INC.

[Name of insurance company]

CONET

[Name of person whose ownership is reported]

2500 NE Neff Road, Bend, OR 97701

[Business address of such person; street, city, zone, state]

Relationship of such person to company named above.

(See instruction 5) BENEFICIAL OWNER OF MORE THAN 10% OF COMPANY'S
OUTSTANDING SHARES

Date of event that requires the filing of this state.

(See instruction 6) March 15, 2007

SECURITIES BENEFICIALLY OWNED

TITLE OF SECURITY (See instruction 7)	NATURE OF OWNERSHIP (See instruction 8)	AMOUNT OWNED BENEFICIALLY (See instruction 9)
COMMON STOCK	DIRECT	349,125
COMMON STOCK OPTIONS	DIRECT	46,800

REMARKS: (See instruction 10)

46,800 SHARES ARE NON-QUALIFIED COMMON STOCK OPTIONS.

I affirm under penalty of perjury that the foregoing is full, true and correct

CONET



By: Duane Francis

Its: Authorized Representative

Date of statement: March 26, 2007