

Amended Explanation Page

The Company is amending certain schedules of its December 31, 2019 financial statements.



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2019

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ANNUAL STATEMENT
For the Year Ending DECEMBER 31, 2019
OF THE CONDITION AND AFFAIRS OF THE
Oscar Buckeye State Insurance Corporation

NAIC Group Code	4818 (Current Period)	4818 (Prior Period)	NAIC Company Code	16416	Employer's ID Number	82-5264817
Organized under the Laws of		Ohio	State of Domicile or Port of Entry		OH	
Country of Domicile		United States of America				
Licensed as business type:	Life, Accident & Health <input checked="" type="checkbox"/>	Property/Casualty <input type="checkbox"/>	Hospital, Medical & Dental Service or Indemnity <input type="checkbox"/>			
	Dental Service Corporation <input type="checkbox"/>	Vision Service Corporation <input type="checkbox"/>	Health Maintenance Organization <input type="checkbox"/>			
	Other <input type="checkbox"/>	Is HMO Federally Qualified? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>				
Incorporated/Organized	04/18/2018		Commenced Business	01/01/2019		
Statutory Home Office	2000 Huntingdon Center, 41 S. High Street (Street and Number)		Columbus, OH, US 43215 (City or Town, State, Country and Zip Code)			
Main Administrative Office	75 Varick St. 5th Floor (Street and Number)		New York, NY, US 10013 (Area Code) (Telephone Number)			
Mail Address	75 Varick St, 5th Floor (Street and Number or P.O. Box)		New York, NY, US 10013 (Area Code) (Telephone Number)			
Primary Location of Books and Records	75 Varick St, 5th floor (Street and Number)		New York, NY, US 10013 (Area Code) (Telephone Number)			
Internet Website Address	hioscar.com					
Statutory Statement Contact	Aaron Crawford (Name) acrawford@hioscar.com (E-Mail Address)		(646)403-3677 (Area Code)(Telephone Number)(Extension) (212)226-1283 (Fax Number)			

OFFICERS

Name	Title
Mario Schlosser	Chief Executive Officer
Joel Klein	Chief Policy and Strategy Officer
Sid Sankaran	Chief Financial Officer
Dennis Weaver	Chief Clinical Officer
Meghan Joyce	Chief Operating Officer
Isaac Councill	Chief Technology Officer

OTHERS

Harold Greenberg, Secretary #

DIRECTORS OR TRUSTEES

Mario Schlosser
Dennis Weaver
Kareem Zaki
Jed Feldman #
Joel Klein
Joel Cutler
Sid Sankaran #

State of New York
County of New York ss

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of the 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. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature)
Joel Klein
(Printed Name)
1.
cy and Strategy Officer
(Title)

(Signature)
Sid Sankaran
(Printed Name)
2.
Chief Financial Officer
(Title)

(Signature)

Mario Schlosser
(Printed Name)
3.
Chief Executive Officer
(Title)

Subscribed and sworn to before me this
____ day of _____, 2020

- a. Is this an original filing?
- b. If no:
 - 1. State the amendment number
 - 2. Date filed
 - 3. Number of pages attached

Yes[] No[X]
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04/10/2020
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(Notary Public Signature)

SCHEDULE E - PART 1 - CASH

1			2	3	4	5	6	7
Depository			Code	Rate of Interest	Amount of Interest Received During Year	Amount of Interest Accrued December 31 of Current Year	Balance	*
open depositories								
State Street							10,789	XXX
Bank of America	New York, NY						1,964,868	XXX
0199998 Deposits in	0	depositories that do not exceed the allowable limit in any one depository (See Instructions) - open depositories		XXX ..				XXX
0199999 Totals - Open Depositories				XXX ..			1,975,657	XXX
0299998 Deposits in	0	depositories that do not exceed the allowable limit in any one depository (See Instructions) - suspended depositories		XXX ..				XXX
0299999 Totals - Suspended Depositories				XXX ..				XXX
0399999 Total Cash On Deposit				XXX ..			1,975,657	XXX
0499999 Cash in Company's Office				XXX ..	XXX ..	XXX ..		XXX
0599999 Total Cash				XXX ..			1,975,657	XXX

TOTALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR

1. January	13,832,953	4. April	2,668,976	7. July	4,795,265	10. October	6,459,576
2. February	14,637,065	5. May	3,397,932	8. August	5,279,101	11. November	7,006,760
3. March	15,901,294	6. June	4,117,129	9. September	5,999,384	12. December	1,975,657