



HEALTH QUARTERLY STATEMENT

AS OF MARCH 31, 2021
OF THE CONDITION AND AFFAIRS OF THE

Ohio Dental Association Wellness Trust

NAIC Group Code	0000 (Current)	0000 (Prior)	NAIC Company Code	00117	Employer's ID Number	47-6503449
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:	Other					
Is HMO Federally Qualified?	Yes [] No [X]					
Incorporated/Organized	01/07/2015		Commenced Business	03/01/2015		
Statutory Home Office	1370 Dublin Road (Street and Number)		Columbus, OH, US 43215 (City or Town, State, Country and Zip Code)			
Main Administrative Office	1370 Dublin Road (Street and Number)		614-486-2700 (Area Code) (Telephone Number)			
Mail Address	1370 Dublin Road (Street and Number or P.O. Box)		Columbus, OH, US 43215 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	1370 Dublin Road (Street and Number)		(Area Code) (Telephone Number)			
Internet Website Address	www.odawt.org					
Statutory Statement Contact	Ryan Davis (Name) rdavis@oda.org (E-mail Address)		678-300-3508 (Area Code) (Telephone Number)			
OFFICERS						
President	Thomas Paumier DDS					
Secretary/Treasurer	Thomas Kelly DDS					
OTHER						
DIRECTORS OR TRUSTEES			Thomas Paumier DDS			
Monica Newby DDS			Thomas Kelly DDS			

State of Ohio
County of Columbus

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. 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.

 Thomas Paumier, DDS President	 Thomas Kelly, DDS Secretary/Treasurer	 Ryan Davis Plan Administrator
Subscribed and sworn to before me this <u>13th</u> day of <u>MAY, 2021</u> <u>Cody M. Hill</u>		
a. Is this an original filing? Yes [X] No [] b. If no, 1. State the amendment number..... 2. Date filed 05/15/2021 3. Number of pages attached.....		



Cody M. Hill
Notary Public, State of Ohio
My Commission Expires 09-26-2025