



16758202120100101

**QUARTERLY STATEMENT**AS OF MARCH 31, 2021  
OF THE CONDITION AND AFFAIRS OF THE**Devoted Health Plan of Ohio, Inc.**

NAIC Group Code	4924 (Current Period)	4924 (Prior Period)	NAIC Company Code	16758	Employer's ID Number	83-4458231																		
Organized under the Laws of	OH		State of Domicile or Port of Entry																					
Country of Domicile	US																							
Licensed as business type:	<table border="0"> <tr> <td>Life, Accident and Health</td> <td><input type="checkbox"/></td> <td>Property/Casualty</td> <td><input type="checkbox"/></td> <td>Hospital, Medical &amp; Dental Service or Indemnity</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Dental Service Corporation</td> <td><input type="checkbox"/></td> <td>Vision Service Corporation</td> <td><input type="checkbox"/></td> <td>Health Maintenance Organization</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Other</td> <td><input type="checkbox"/></td> <td>Is HMO Federally Qualified?</td> <td colspan="3">Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></td> </tr> </table>						Life, Accident and Health	<input 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 checked="" type="checkbox"/>	Other	<input type="checkbox"/>	Is HMO Federally Qualified?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Life, Accident and Health	<input 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 checked="" type="checkbox"/>																			
Other	<input type="checkbox"/>	Is HMO Federally Qualified?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>																					
Incorporated/Organized	April 18, 2019		Commenced Business																					
Statutory Home Office	221 Crescent Street Suite 202 (Street and Number)		Waltham, MA US 02453 (City or Town, State, Country and Zip Code)																					
Main Administrative Office	221 Crescent Street Suite 202 (Street and Number)		Waltham, MA US 02453 (City or Town, State, Country and Zip Code)																					
Mail Address	221 Crescent Street Suite 202 (Street and Number or P.O. Box)		Waltham, MA US 02453 (City or Town, State, Country and Zip Code)																					
Primary Location of Books and Records	221 Crescent Street Suite 202 (Street and Number)		Waltham, MA US 02453 (City or Town, State, Country and Zip Code)																					
Internet Website Address	www.devoted.com																							
Statutory Statement Contact	Adam Thackery (Name)		862-222-7841 (Area Code) (Telephone Number)		(Extension)																			
	athackery@devoted.com (E-Mail Address)		978-616-7824 (Fax Number)																					

**OFFICERS**

	Name	Title
1.	Daniel Quintana	President and Chief Executive Officer
2.	Adam Thackery	Chief Financial Officer
3.	Jeremy Delinsky	Chief Operating Officer
4.	Paul Jernigan	Secretary

**VICE-PRESIDENTS**

Name	Title	Name	Title
David Johnson MD #	Medical Director	Dan Quinn	Appointed Actuary

**DIRECTORS OR TRUSTEES**

Ed Park	Daniel Quintana	Todd Park	Jeremy Delinsky
Adam Thackery			

State of OH

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.

DANIEL QUINTANA (May 12, 2021 12:04 EDT)

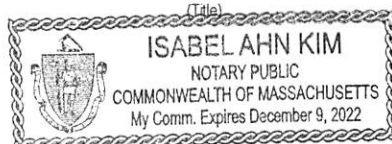
Adam Thackery (May 12, 2021 13:04 EDT)

Jeremy Delinsky (May 12, 2021 12:49 EDT)

(Signature)  
Daniel Quintana  
(Printed Name)  
1.  
President and Chief Executive Officer  
(Title)

(Signature)  
Adam Thackery  
(Printed Name)  
2.  
Chief Financial Officer  
(Title)

(Signature)  
Jeremy Delinsky  
(Printed Name)  
3.  
Chief Operating Officer  
(Title)



Subscribed and sworn to before me this  
12th day of May, 2021

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