



HEALTH COMPANIES – ASSOCIATION EDITION

QUARTERLY STATEMENT
 AS OF JUNE 30, 2021
 OF THE CONDITION AND AFFAIRS OF THE
GATEWAY HEALTH PLAN OF OHIO, INC.

NAIC Group Code 0812 NAIC Company Code 12325 Employers ID Number 30-0282076
 (Current) (Prior)

Organized under the Laws of OH State of Domicile or Port of Entry OH
 Country of Domicile US
 Licensed as business type: Other Is HMO Federally Qualified? NO
 Incorporated/Organized 11/05/2004 Commenced Business 09/01/2005
 Statutory Home Office Four Gateway Center, 444 Liberty Avenue, Ste 2100 Pittsburgh, PA, US 15222-1222
 Main Administrative Office Four Gateway Center, 444 Liberty Avenue, Ste 2100 Pittsburgh, PA, US 15222-1222
 Mail Address Four Gateway Center, 444 Liberty Avenue, Ste 2100 Pittsburgh, PA, US 15222-1222
 Primary Location of Books and Records c/o CT Corporation System, 1300 East 9th Street 216-802-2121-
 Cleveland, OH, US 44114 (Telephone)
 Internet Website Address www.gatewayhealthplan.com
 Statutory Statement Contact Christopher Michael Cogan 412-255-4693-
 (Telephone)
 CCogan@GatewayHealthPlan.com 412-255-4693-
 (E-Mail) (Fax)

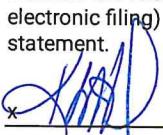
OFFICERS

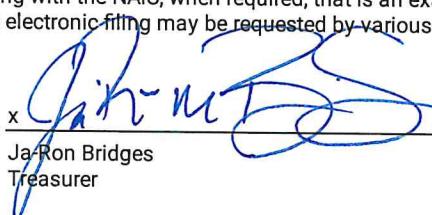
Karen Lynn Hanlon, Interim President Frances Ann Woodward, Secretary
 Ja'Ron Bridges, Treasurer Christopher Michael Cogan, Assistant Treasurer

DIRECTORS OR TRUSTEES

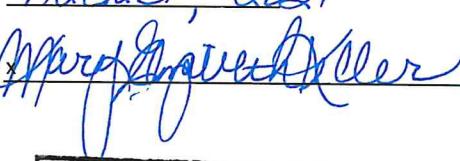
David Arthur Blandino M.D. Tony George Farah M.D.
 Karen Lynn Hanlon Stuart Michael Kilpinen
 Peter Joseph Schied James Lenox Woodward
 State of SS

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.

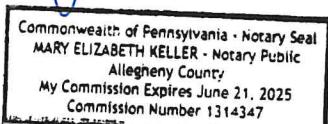

 Karen Lynn Hanlon
 Interim President


 x Ja'Ron Bridges
 Treasurer


 x Frances Ann Woodward
 Secretary

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


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





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 (Telephone)

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OFFICERS

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 Ja'Ron Bridges, Treasurer..... Christopher Michael Cogan, Assistant Treasurer.....

DIRECTORS OR TRUSTEES

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x _____

x _____

SA Woodward
 x _____

Karen Lynn Hanlon
 Interim President

Ja'Ron Bridges
 Treasurer

Frances Ann Woodward
 Secretary

Subscribed and sworn to before me

this 10 day of

August 2021

a. Is this an original filing? Yes

b. If no:

1. State the amendment number: _____

2. Date filed: _____

3. Number of pages attached: _____

B. C. Saltz

