



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

NAIC Group Code 0812 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 412-255-4640- (Telephone)

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 Cleveland, OH, US 44114 216-802-2121- (Telephone)

Internet Website Address www.gatewayhealthplan.com

Statutory Statement Contact Christopher Michael Cogan 412-255-4693- (Telephone)  
CCogan@GatewayHealthPlan.com 412-255-4693- (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 Lennox Woodward

State of \_\_\_\_\_  
County 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.

x x x

Karen Lynn Hanlon Ja'Ron Bridges Frances Ann Woodward  
Interim President Treasurer Secretary

Subscribed and sworn to before me  
this 12<sup>th</sup> day of

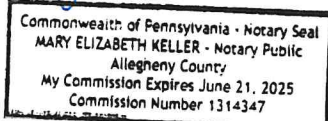
AUGUST, 2021

x

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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x \_\_\_\_\_ x \_\_\_\_\_ x Frances Ann Woodward  
Karen Lynn Hanlon Ja-Ron Bridges Frances Ann Woodward  
Interim President Treasurer Secretary

Subscribed and sworn to before me  
this 10 day of August 2021  
x B. C. Saltz  
a. Is this an original filing? Yes  
b. If no:  
1. State the amendment number: \_\_\_\_\_  
2. Date filed: \_\_\_\_\_  
3. Number of pages attached: \_\_\_\_\_

