



HEALTH QUARTERLY STATEMENT

AS OF JUNE 30, 2021

OF THE CONDITION AND AFFAIRS OF THE

PROVIDER PARTNERS HEALTH PLAN OF OHIO, INC.

NAIC Group Code	4842 (Current)	4842 (Prior)	NAIC Company Code	16362	Employer's ID Number	82-3676800
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:	Health Maintenance Organization					
Is HMO Federally Qualified? Yes [] No [X]						
Incorporated/Organized	11/09/2017		Commenced Business	11/09/2017		
Statutory Home Office	CORPORATION SERVICE COMPANY, 50 WEST BROAD STREET (Street and Number)			COLUMBUS, OH, US 43215 (City or Town, State, Country and Zip Code)		
Main Administrative Office	785 ELKRIDGE LANDING ROAD, SUITE 300 (Street and Number)			443-275-9800 (Area Code) (Telephone Number)		
Mail Address	785 ELKRIDGE LANDING ROAD, SUITE 300 (Street and Number or P.O. Box)			LINTHICUM HEIGHTS, MD, US 21090 (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	785 ELKRIDGE LANDING ROAD, SUITE 300 (Street and Number)			443-275-9800 (Area Code) (Telephone Number)		
Internet Website Address	www.pphealthplan.com					
Statutory Statement Contact	MARY BETH MCINTYRE (Name) MMCINTYRE@PPHEALTHPLAN.COM (E-mail Address)			443-275-9800 (Area Code) (Telephone Number) (FAX Number)		

OFFICERS

PRESIDENT AND CEO	BRUCE R GRINDROD	CFO AND COO	KEITH PERSINGER
SECRETARY AND TREASURER	MARY BETH MCINTYRE		

OTHER

DIRECTORS OR TRUSTEES

SCOTT M RIFKIN MD	BRUCE R GRINDROD JR	JOAN NEUSCHELER
-------------------	---------------------	-----------------

State of Maryland SS: _____
County of Anne Arundel

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.


Bruce R. Grindrod, President and CEO


Mary Beth McIntyre, Secretary & Treasurer


Keith D. Persinger, CFO and COO

Subscribed and sworn to before me this
day of _____

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