



LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES - ASSOCIATION EDITION

## QUARTERLY STATEMENT

AS OF JUNE 30, 2021

OF THE CONDITION AND AFFAIRS OF THE

### Provident American Life and Health Insurance Company

NAIC Group Code 0901 (Current) 0901 (Prior) NAIC Company Code 67903 Employer's ID Number 23-1335885

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: Life, Accident and Health [ X ] Fraternal Benefit Societies [ ]

Incorporated/Organized 04/06/1949 Commenced Business 09/30/1949

Statutory Home Office 1300 East Ninth Street (Street and Number) Cleveland, OH, US 44114 (City or Town, State, Country and Zip Code)

Main Administrative Office 11200 Lakeline Blvd Ste 100 (Street and Number) Austin, TX, US 78717 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 11200 Lakeline Blvd Ste 100 (Street and Number or P.O. Box) Austin, TX, US 78717 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 11200 Lakeline Blvd Ste 100 (Street and Number) Austin, TX, US 78717 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address CignaSupplementalBenefits.com

Statutory Statement Contact Renee Wilkins Feldman (Name) 512-531-1465 (Area Code) (Telephone Number)  
CSBFinRpt@cigna.com (E-mail Address) 512-467-1399 (FAX Number)

#### OFFICERS

President	<u>Stephen Burnett Jones</u>	Vice President and Chief Actuary	<u>David Leroy Swanson #</u>
Treasurer & Chief Accounting Officer	<u>Byron Keith Buescher</u>	Secretary	<u>Jill Mary Stadelman</u>

#### OTHER

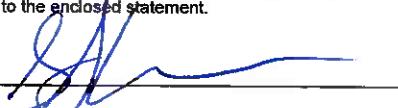
David Lawrence Chambers, Vice President - Sales and Marketing	<u>Mark Fleming, Vice President and Assistant Treasurer</u>	<u>Mohammed Umar Gilani, Appointed Actuary</u>
Joanne Ruth Hart, Vice President and Assistant Treasurer	<u>Scott Ronald Lambert, Vice President and Assistant Treasurer</u>	<u>Tyler Michael Lester, Executive Vice President and Chief Financial Officer</u>
Kathleen Murphy O'Neil, Vice President	<u>Drew Jerome Reynolds, Vice President and Assistant Treasurer</u>	

#### DIRECTORS OR TRUSTEES

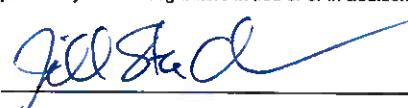
<u>Stephen Burnett Jones</u>	<u>Tyler Michael Lester</u>	<u>Frank Sataline Jr.</u>
<u>James Yablecki</u>		

State of Texas SS: Williamson  
 County of

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.

  
 Stephen Burnett Jones  
 President

  
 Byron Keith Buescher  
 Treasurer and Chief Accounting Officer

  
 Jill Mary Stadelman  
 Secretary

Subscribed and sworn to before me this  
12<sup>th</sup> day of August 2021  


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

Yes [  ] No [  ]

