



HEALTH QUARTERLY STATEMENT
AS OF MARCH 31, 2022
OF THE CONDITION AND AFFAIRS OF THE
Bright Health Insurance Company of Ohio, Inc.

NAIC Group Code 4887 4887 NAIC Company Code 16353 Employer's ID Number 37-1873205
(Current) (Prior)

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 & Health

Is HMO Federally Qualified? Yes [] No []

Incorporated/Organized 10/26/2017 Commenced Business 01/01/2019

Statutory Home Office 300 E Business Way, Suite 220, Cincinnati, OH, US 45241
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 8000 Norman Center Dr, Suite 1200
(Street and Number)
Minneapolis, MN, US 55437, 612-238-1321
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 8000 Norman Center Dr, Suite 1200, Minneapolis, MN, US 55437
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 8000 Norman Center Dr, Suite 1200
(Street and Number)
Minneapolis, MN, US 55437, 612-238-1321
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.brighthousehealthcare.com

Statutory Statement Contact Chelsea Marie McGee, 605-216-2433
(Name) (Area Code) (Telephone Number)
cmcgee@brighthousegroup.com,
(E-mail Address) (FAX Number)

OFFICERS

Chief Executive Officer,
Chief Financial Officer and
President Jay Matushak #
Secretary George Lyford

OTHER

DIRECTORS OR TRUSTEES

Jay Matushak # A.Bartley Bryt # Jeff Craig #

State of _____ SS:
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.

Jay Matushak Jeff Craig
Chief Executive Officer, Chief Financial Officer and Secretary
President

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.....