



**QUARTERLY STATEMENT**  
 AS OF MARCH 31, 2022  
 OF THE CONDITION AND AFFAIRS OF THE  
**DEVOTED HEALTH PLAN OF OHIO, INC.**

NAIC Group Code ..... 4924 ..... 4924 ..... NAIC Company Code ..... 16758 ..... Employer's ID Number ..... 83-4458231 .....  
 (Current) (Prior)

Organized under the Laws of ..... OH ..... State of Domicile or Port of Entry ..... OH .....  
 Country of Domicile ..... US .....  
 Licensed as business type: ..... Life, Accident & Health ..... Is HMO Federally Qualified? ..... N/A .....  
 Incorporated/Organized ..... 04/18/2019 ..... Commenced Business ..... 01/01/2021 .....  
 Statutory Home Office ..... 221 Crescent Street Suite 202 ..... Waltham, MA, US 02453 .....  
 Main Administrative Office ..... 221 Crescent Street Suite 202 .....  
 Waltham, MA, US 02453 ..... 860-916-9120 .....  
 (Telephone Number)  
 Mail Address ..... 221 Crescent Street Suite 202 ..... Waltham, MA, US 02453 .....  
 Primary Location of Books and .....  
 Records ..... 221 Crescent Street Suite 202 .....  
 Waltham, MA, US 02453 ..... 860-916-9120 .....  
 (Telephone Number)  
 Internet Website Address ..... www.devoted.com .....  
 Statutory Statement Contact ..... Joseph Anthony Alfano ..... 860-916-9120 .....  
 (Telephone Number)  
 joseph.alfano@devoted.com ..... 978-616-7824 .....  
 (E-Mail Address) (Fax Number)

## OFFICERS

..... Darrel Quintana, President and Chief Executive Officer ..... Joseph Anthony Alfano#, Co-Chief Financial Officer .....  
 ..... Jeremy Edward Delinsky, Chief Operating Officer ..... Wilson Bradley Yale#, Co-Chief Financial Officer .....

## OTHER

..... David Michael Johnson MD, Medical Director ..... Paul David Jernigan, Secretary .....  
 ..... Daniel Francis Quinn, Appointed Actuary .....

## DIRECTORS OR TRUSTEES

..... Todd Youngsuh Park ..... Edward Youngjoon Park .....  
 ..... Darrel Quintana ..... Jeremy Edward Delinsky .....  
 ..... Paul David Jernigan .....

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

Darrel Quintana  
 President and Chief Executive Officer

x

Jeremy Edward Delinsky  
 Chief Operating Officer

x

Joseph Anthony Alfano  
 Co-Chief Financial Officer

Subscribed and sworn to before me

this \_\_\_\_\_ day of \_\_\_\_\_

a. Is this an original filing? Yes

b. If no:

1. State the amendment number: \_\_\_\_\_

2. Date filed: \_\_\_\_\_

THE COMMONWEALTH OF MASSACHUSETTS

COUNTY OF MIDDLESEX

On this 5<sup>th</sup> day of May, 2022, before me, Kathryn M. LaFargue,  
TERENY SELINSKY appeared, personally known to me and proved  
through satisfactory evidence of identification, which was Company (Devoted Health,  
Inc.) identification, to be the person whose name is signed on the preceding document,  
and acknowledged to me that he signed it voluntarily for its stated purpose.

Kathryn M. LaFargue  
My Commission Expires: September 4, 2026

