



2022

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QUARTERLY STATEMENT

AS OF JUNE 30, 2022

OF THE CONDITION AND AFFAIRS OF THE PARAMOUNT INSURANCE COMPANY

NAIC Group Code 1212

(Current Period)

NAIC Company Code 11518Employer's ID Number 010580404Organized under the Laws of OhioState of Domicile or Port of Entry OHCountry of Domicile United States of AmericaLicensed as business type: Life, Accident & Health[X]

Dental Service Corporation[]

Property/Casualty[]

Vision Service Corporation[]

Is HMO Federally Qualified? Yes[] No[X] NA[]

Other[]

Hospital, Medical & Dental Service or Indemnity[]

Health Maintenance Organization[]

Incorporated/Organized 04/19/2002Commenced Business 09/26/2012Statutory Home Office 1901 Indian Wood Circle

(Street and Number)

Maumee, OH, US 43537

(City or Town, State, County and Zip Code)

Main Administrative Office 1901 Indian Wood Circle

(Street and Number)

Maumee, OH, US 43537

(Area Code) (Telephone Number)

Mail Address 1901 Indian Wood Circle

(Street and Number or P.O. Box)

Maumee, OH, US 43537

(City or Town, State, County and Zip Code)

Primary Location of Books and Records Maumee, OH, US 43537

(Street and Number)

Maumee, OH, US 43537

(Area Code) (Telephone Number)

Internet Web Site Address www.paramounthealthcare.com

(Street and Number)

Maumee, OH, US 43537

(City or Town, State, County and Zip Code)

Statutory Statement Contact Rich Potter, Mr.

(Name)

(419)887-2500

(Area Code) (Telephone Number)/Extension

Email Address rich.potter@promedia.org

(E-Mail Address)

(419)887-2006

(Fax Number)

OFFICERS

Name	Title
James Frederick White Mr.	Chairman
Lori Ann Johnston Mrs.	President
Louis Eugene Robichaux Mr.	Treasurer #
Jeffrey Crag Kuhn Mr.	Secretary

OTHERS

Dee Ann Bialecki-Haase M.D.: Chief Medical Officer
David Roger Brackett Mr.: Chief Information Officer

DIRECTORS OR TRUSTEES

Lori Ann Johnston Ms.	John Paul Imm M.D.
Douglas J Welch Mr.	Elaine Marie Canning Ms.
Tammy Lou Claus Ms.	Stephanie Michelle Cole M.D.
Zak Jon Vasser Mr.	Larry Carl Peterson Mr.
David Frantz Waterman Mr.	Shradhha Gupta Ms.
Joseph James Serra Mr.	James Frederick White Mr.
Terry Lynn Bawal Ms. #	Sameeh Bashir Almadani M.D. #
Lissa Lynn Burke D.O. #	Jim Allen Hoffman Mr. #
Mark Duane Wagoner Mr. #	

State of Ohio
County of Lucas 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.

Lori A. Johnston

(Signature)

Lori Ann Johnston

(Printed Name)

1.

President

(Title)

Jeffrey William Martin

(Signature)

Jeffrey William Martin

(Printed Name)

2.

CEO

(Title)

Stephen Michael Sadowski

(Signature)

Stephen Michael Sadowski

(Printed Name)

3.

Secretary

(Title)

Subscribed and sworn to before me this

27day of AUGUST, 2022

Yes[X] No[]

a. Is this an original filing?

b. If no,

1. State the amendment number

2. Date filed

3. Number of pages attached

Kimberely S. Wilson

(Signature)

Kimberely S. Wilson

Notary Public

State of Ohio

My Comm. Expires

November 4, 2024



KIMBERELY S. WILSON
Notary Public
State of Ohio
My Comm. Expires
November 4, 2024