



QUARTERLY STATEMENT
 AS OF JUNE 30, 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..... 3700 Park East Drive Suite 450..... Beachwood, OH, US 44122.....
 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

..... Dariel 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.....
 Dariel 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	x	x
Dariel Quintana President and Chief Executive Officer	Jeremy Edward Delinsky Chief Operating Officer	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: _____		
3. Number of pages attached: _____		

x _____

Joseph Anthony Alfano

FLORIDA JURAT

State of Florida _____)
County of Broward _____)

)

On 08/08/2022, before me, Jeanese Bryant
Date *Notary Name*

the foregoing instrument was subscribed and sworn to before me by:

Joseph Alfano

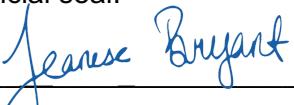
Name of Affiant(s)

Personally known to me -- OR --

Proved to me on the basis of the oath of _____ *Name of Credible Witness* -- OR --

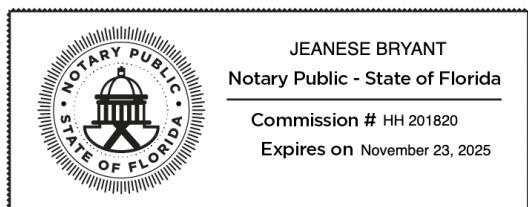
Proved to me on the basis of satisfactory evidence: DRIVER LICENSE
Type of ID Presented

WITNESS my hand and official seal.

Notary Public Signature: 

Notary Name: Jeanese Bryant

Notarized online using audio-video communication



DESCRIPTION OF ATTACHED DOCUMENT

Title or Type of Document: Jurat - Quarterly Statement

Document Date: 08/08/2022

Number of Pages (including notarial certificate): 2