



**QUARTERLY STATEMENT**  
**AS OF JUNE 30, 2023**  
**OF THE CONDITION AND AFFAIRS OF THE**  
**PARAMOUNT INSURANCE COMPANY**

NAIC Group Code	1212 (Current Period)	1212 (Prior Period)	NAIC Company Code	11518	Employer's ID Number	010580404
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[X]	Property/Casualty[ ]	Hospital, Medical & Dental Service or Indemnity[ ]			
	Dental Service Corporation[ ]	Vision Service Corporation[ ]	Health Maintenance Organization[ ]			
	Other[ ]	Is HMO Federally Qualified? Yes[ ] No[X] N/A[ ]				
Incorporated/Organized	04/19/2002		Commenced Business	09/26/2002		
Statutory Home Office	300 Madison Ave (Street and Number)		Toledo, OH, US 43604 (City or Town, State, Country and Zip Code)			
Main Administrative Office	300 Madison Ave Toledo, OH, US 43604 (Street and Number)		300 Madison Ave (Street and Number) (419)887-2500			
Mail Address	300 Madison Ave (Street and Number or P.O. Box)		(Area Code) (Telephone Number) Toledo, OH, US 43604 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	300 Madison Ave Toledo, OH, US 43604 (Street and Number)		(419)887-2500 (Area Code) (Telephone Number)			
Statutory Statement Contact	Rich Potter, Mr. (Name) rich.potter@promedica.org (E-Mail Address)		(419)887-2006 (Area Code)(Telephone Number)(Extension) (419)887-2020 (Fax Number)			

**OFFICERS**

Name	Title
Mark Duane Wagoner Mr.	Chairman #
Lori Ann Johnston Mrs.	President
Terrence Gavin Metzger Mr.	Treasurer #
Stephen Michael Sadowski Mr.	Secretary

**OTHERS**

Jeffrey William Martin Mr., Chief Financial Officer  
 David Roger Brackett Mr., VP Information Technology Systems

Dee Ann Bialecki-Haase M.D., Chief Medical Officer

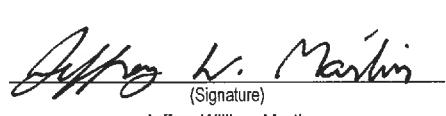
**DIRECTORS OR TRUSTEES**

Lori Ann Johnston Ms. Zak Jon Vassar Mr. David Frantz Waterman Mr. Joseph James Sferra Mr. Terry Lynn Bawal Ms. Lisa Lyn Burke D.O. Mark Duane Wagoner Mr.	Elaine Marie Canning Ms. Larry Carl Peterson Mr. Shraddha Gupta Ms. James Frederick White Mr. Sameh Bashar Almadani M.D. Jim Allen Hoffman Mr. Shanda Laine Gore PhD #
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State of Ohio  
 County of Lucas ss

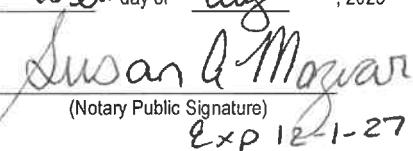
The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any 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.

  
 (Signature)  
 Lori Ann Johnston  
 (Printed Name)  
 1.  
 President  
 (Title)

  
 (Signature)  
 Jeffrey William Martin  
 (Printed Name)  
 2.  
 CFO  
 (Title)

  
 (Signature)  
 Stephen Michael Sadowski  
 (Printed Name)  
 3.  
 Secretary  
 (Title)

Subscribed and sworn to before me this  
 10th day of Aug, 2023

  
 (Notary Public Signature)  
 Exp 12-1-27



a. Is this an original filing?  
 b. If no: 1. State the amendment number  
 2. Date filed

Number of pages attached

Yes[X] No[ ]