



QUARTERLY STATEMENT

As of June 30, 2024
of the Condition and Affairs of

Gateway Health Plan of Ohio, Inc.

NAIC Group Code..... 00812, 00812
(Current Period) (Prior Period)

NAIC Company Code..... 12325

Employer's ID Number..... 30-0282076

Organized under the Laws of Ohio

State of Domicile or Port of Entry Ohio

Country of Domicile United States

Licensed as Business Type Other

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

Incorporated/Organized..... November 5, 2004

Commenced Business..... September 1, 2005

Statutory Home Office

120 Fifth Avenue, Mail Code: FAPHM-191A PittsburghPA 15222
(Street and Number) (City or Town, State and Zip Code)

412-544-7000
(Area Code) (Telephone Number)

Main Administrative Office

120 Fifth Avenue, Mail Code: FAPHM-191A PittsburghPA 15222
(Street and Number) (City or Town, State and Zip Code)

Mail Address

120 Fifth Avenue, Mail Code: FAPHM-191A PittsburghPA 15222
(Street and Number or P. O. Box) (City or Town, State and Zip Code)

Primary Location of Books and Records

120 Fifth Avenue, Mail Code: FAPHM-191A PittsburghPA 15222
(Street and Number) (City or Town, State and Zip Code)

412-544-5458
(Area Code) (Telephone Number) (Extension)

Internet Web Site Address

highmark.com

412-544-5458
(Area Code) (Telephone Number) (Extension)
412-544-8674
(Fax Number)

Statutory Statement Contact

Christopher Michael Cogan
(Name)
chris.cogan@highmarkhealth.org
(E-Mail Address)

OFFICERS
Ellen Marie DuffieldPresident
Caleb Lee KnierTreasurer
Thomas Devlin KavanaughSecretary

David Arthur Blandino M.D.
Alexis A. Miller

Ellen Marie Duffield

Tony George Farah M.D.

Kevin Lee Jenkins

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.

Ellen Marie Duffield
President

Caleb Lee Knier
Treasurer

Thomas Devlin Kavanaugh
Secretary

State of _____

State of Pennsylvania

County of _____

County of Allegheny

Ellen Marie Duffield subscribed and sworn to before me
this 9th day of Aug, 2024

Caleb Lee Knier subscribed and sworn to before me
this 9th day of Aug, 2024

Suanne M. Kelly

Suanne M. Kelly

State of Pennsylvania

County of Allegheny

Thomas Devlin Kavanaugh subscribed and sworn to
before me

this 9th day of Aug, 2024

Suanne M. Kelly

a. Is this an original filing? Yes [X] No []
b. If no: 1. State the amendment number _____
2. Date filed _____

Commonwealth of Pennsylvania - Notary Seal
Suanne M. Kelly, Notary Public
Washington County
My commission expires February 2, 2028
Commission number 1083640

Member, Pennsylvania Association of Notaries

Commonwealth of Pennsylvania - Notary Seal
Suanne M. Kelly, Notary Public
Washington County
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Internet Web Site Address highmark.com 412-544-5458
Statutory Statement Contact Christopher Michael Cogan
(Name) 412-544-5458
chris.cogan@highmarkhealth.org (E-Mail Address) (Area Code) (Telephone Number)
412-544-5458
412-544-5458
(Fax Number)

OFFICERS

Ellen Marie Duffield President
Caleb Lee Knier Treasurer
Thomas Devlin Kavanaugh Secretary

DIRECTORS OR TRUSTEES

David Arthur Blandino M.D. Ellen Marie Duffield Tony George Farah M.D. Kevin Lee Jenkins
Alexis A. Miller

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Ellen Marie Duffield
President

Caleb Lee Knier
Treasurer

Thomas Devlin Kavanaugh
Secretary

State of Pennsylvania
County of Allegheny

Ellen Marie Duffield subscribed and sworn to before me
this 2nd day of July, 2024

State of _____
County of _____

Caleb Lee Knier subscribed and sworn to before me
this _____ day of _____, 2024

State of _____
County of _____

Thomas Devlin Kavanaugh subscribed and sworn to
before me
this _____ day of _____, 2024

Commonwealth of Pennsylvania - Notary Seal
Donna J. Clark, Notary Public
Allegheny County
My commission expires March 17, 2028
Commission number 1240483
Member, Pennsylvania Association of Notaries

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 _____