



**QUARTERLY STATEMENT**  
AS OF JUNE 30, 2025  
OF THE CONDITION AND AFFAIRS OF THE  
**AULTCARE HEALTH INSURING CORPORATION**

NAIC Group Code ..... 4805, ..... 4805 ..... NAIC Company Code ..... 15461 ..... Employer's ID Number ..... 46-3305099 .....  
(Current) (Prior)

Organized under the Laws of ..... OH ..... State of Domicile or Port of Entry ..... OH .....  
Country of Domicile ..... US .....  
Licensed as business type: ..... Health Maintenance Organization ..... Is HMO Federally Qualified? ..... NO .....  
Incorporated/Organized ..... 07/11/2013 ..... Commenced Business ..... 01/01/2015 .....  
Statutory Home Office ..... 2600 Sixth Street SW ..... Canton, OH, 44710 .....  
Main Administrative Office ..... 2600 Sixth Street SW ..... Canton, OH, 44710 ..... 330-363-4057 .....  
Mail Address ..... 2600 Sixth Street SW ..... Canton, OH, 44710 ..... (Telephone Number)  
Primary Location of Books and Records ..... 2600 Sixth Street SW ..... Canton, OH, 44710 ..... 330-363-4057 .....  
Internet Website Address ..... www.aultcare.com ..... (Telephone Number)

Statutory Statement Contact ..... Melissa Rapp ..... 330-363-4880 .....  
melissa.rapp@aultman.com ..... (Telephone Number)  
(E-Mail Address) ..... 330-363-5012 .....  
(Fax Number)

OFFICERS

Mark D. Wright, President ..... Todd Hawke, Treasurer .....  
Barbara Hammontree-Bennett, Secretary ..... Robert Mullen J.D., Executive Vice President .....

DIRECTORS OR TRUSTEES

Michael E. Hanke ..... Nihad Boutros M.D. ....  
Brian Belden ..... Michael A. Rich M.D. ....  
Mark D. Wright ..... John B. Humphrey Jr., M.D. ....  
Darryl J. Dillenback ..... Barbara Hammontree-Bennett .....  
Todd Hawke ..... Richard V. Maggiore .....  
Robert Mullen J.D. ..... Leo Doyle# .....  
Edmund Wymyslo M.D. # .....

State of Ohio .....  
County of Stark ..... 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 *Mark D. Wright*  
Mark D. Wright  
President

x *Melissa A. Rapp*  
Melissa A. Rapp  
Chief Financial Officer

x *Todd Hawke*  
Todd Hawke  
Treasurer

Subscribed and sworn to before me  
this 15 day of

*August*, 2025  
x *Frances N. Jones*

a. Is this an original filing? Yes  
b. If no:  
1. State the amendment number: \_\_\_\_\_  
2. Date filed: \_\_\_\_\_  
3. Number of pages attached: \_\_\_\_\_

FRANCES N. JONES  
NOTARY PUBLIC • STATE OF OHIO  
Comm. No. 2017-RE-691149  
My commission expires Dec. 12, 2027