QUARTERLY STATEMENT

AS OF JUNE 30, 2025
OF THE CONDITION AND AFFAIRS OF THE

CareSource Ohio Inc.

NAIC Group Code	03683	,	03683	NAIC Company Code	95201	Employer's ID Number	31-1143265
	(Current Period)		(Prior Period)				

Organized under the Laws of __Ohio__, State of Domicile or Port of Entry __Ohio__

Country of Domicile __United States__

Licensed as business type:
Life, Accident & Health [ ]   Property/Casualty [ ]   Hospital, Medical & Dental Service or Indemnity [ ]
Dental Service Corporation [ ]   Vision Service Corporation [ ]   Health Maintenance Organization [X]
Other [ ]

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

Incorporated/Organized __06/12/1985__   Commenced Business __10/01/1988__

Statutory Home Office __230 North Main St.__ , __Dayton, OH, US 45402__
    (Street and Number)   (City or Town, State, County and Zip Code)

Main Administrative Office __230 North Main S.__ , __Dayton, OH, US 45402__, __937-224-3300__
    (Street and Number)   (City or Town, State, County and Zip Code)   (Area Code) (Telephone Number)

Mail Address __PO Box 2208__ , __Dayton, OH, US 45401-2208__
    (Street and Number or P.O. Box)   (City or Town, State, County and Zip Code)

Primary Location of Books and Records __230 North Main St.__ , __Dayton, OH, US 45402__, __937-224-3300__
    (Street and Number)   (City or Town, State, County and Zip Code)   (Area Code) (Telephone Number)

Internet Web Site Address __www.caresource.com__

Statutory Statement Contact __Rachel Ainslie__ , __517-331-3100__
    (Name)   (Area Code) (Telephone Number) (Extension)

__Rachel.Ainslie@caresource.com__ , __937-487-1744__
    (E-Mail Address)   (FAX Number)

OFFICERS

Name	Title	Name	Title
Stephen L. Ringel	President	Lawrence R. Smart	Chief Financial Officer/Treasurer
Stephanie A. Williams	Assistant Treasurer	Edward L. Stubbers	Secretary

OTHER OFFICERS

Erhardt H. Preitauer	Chair	

DIRECTORS OR TRUSTEES

Name		Name
Erhardt H. Preitauer		Lawrence R. Smart
		Edward L. Stubbers

State of __Ohio__
County of __Montgomery__   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.

Stephen L. Ringel	Lawrence R. Smart	Stephanie A. Williams
President	Chief Financial Officer/Treasurer	Assistant Treasurer

Edward L. Stubbers
Secretary

Subscribed and sworn to before me this
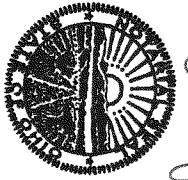__7__ day of __August__, __2025__

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