



ANNUAL STATEMENT
FOR THE YEAR ENDING DECEMBER 31, 2022
OF THE CONDITION AND AFFAIRS OF THE

Elixir Insurance Company

(Name)

NAIC Group Code 00000 (Current Period) , 00000 (Prior Period) NAIC Company Code 12747 Employer's ID Number 20-4308924

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
Other Is HMO, Federally Qualified? Yes No

Incorporated/Organized 02/08/2006 Commenced Business 01/01/2007

Statutory Home Office 7835 Freedome Avenue NW (Street and Number) North Cantons, OH, US 44720 (City or Town, State, Country and Zip Code)

Main Administrative Office 7835 Freedome Avenue NW (Street and Number) North Canton, OH, US 44720 (City or Town, State, Country and Zip Code) 330-405-8089 (Area Code) (Telephone Number)

Mail Address 7835 Freedome Avenue NW (Street and Number or P.O. Box) North Canton, OH, US 44720 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 7835 Freedome Avenue NW (Street and Number) North Canton, OH, US 44720 (City or Town, State, Country and Zip Code) 330-405-8089 (Area Code) (Telephone Number) (Extension)

Internet Web Site Address www.elixirsolutions.com

Statutory Statement Contact Neil Victor Zaretsky CPA (Name) 330-486-4811 (Area Code) (Telephone Number) (Extension)
eicaccounting@elixirsolutions.com (E-Mail Address) 330-486-4801 (Fax Number)

OFFICERS

Name <u>Heyward Donigan</u> ,	Title <u>Chief Executive Officer</u>	Name <u>Rand Greenblatt #</u> ,	Title <u>Chief Financial Officer & Treasurer</u>
<u>Mitchell Kempker #</u> ,	<u>Secretary</u>	<u>Chris DuPaul #</u> ,	<u>Chief Operating Officer</u>

OTHER OFFICERS

, , , , , , , ,

DIRECTORS OR TRUSTEES

<u>Rand Greenblatt #</u>	<u>Brian Todd Hoover</u>	<u>Susan Catherine Lowell</u>	<u>Karen Lesley Staniforth</u>
<u>Chris DuPaul #</u>			

State of Ohio

ss

County of Stark

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.

Chris DuPaul
Chief Operating Officer

Rand Greenblatt
Chief Financial Officer & Treasurer

Mitchell Kempker
Secretary

a. Is this an original filing? Yes No

b. If no:

1. State the amendment number _____
2. Date filed _____
3. Number of pages attached _____

Subscribed and sworn to before me this
day of ,

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

Exhibit 3 - Health Care Receivables

NONE

Exhibit 3A - Analysis of HC Receivables

NONE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT 4 – CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported) Elixir Rx Options, LLC.	81,384,206					81,384,206
0199999 Individually listed claims unpaid.....	81,384,206	.0	0	.0	0	81,384,206
0299999 Aggregate accounts not individually listed-uncovered.....						0
0399999 Aggregate accounts not individually listed-covered.....						0
0499999 Subtotals.....	81,384,206	0	0	0	0	81,384,206
0599999 Unreported claims and other claim reserves.....						9,150,601
0699999 Total amounts withheld.....						
0799999 Total claims unpaid.....						90,534,807
0899999 Accrued medical incentive pool and bonus amounts.....						0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1 Affiliate	2 Description	3 Amount	4 Current	5 Non-Current
Elixir Rx Options, LLC.....	Claims and Various Management Services.....	240,568,882	240,568,882	
First Florida Insurers of Tampa.....	Premium Commissions.....	25,083	25,083	
.....
.....
.....
.....
.....
.....
.....
.....
0199999 Individually listed payables.....	240,593,965	240,593,965	.....0
0299999 Payables not individually listed
0399999 Total gross payables	240,593,965	240,593,965	0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT 7 - PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payments	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups	0	0.0		0.0		
2. Intermediaries	0	0.0		0.0		
3. All other providers	0	0.0		0.0		
4. Total capitation payments	0	0.0	0	0.0	0	0
Other Payments:						
5. Fee-for-service	0	0.0	XXX	XXX		
6. Contractual fee payments	0	0.0	XXX	XXX		
7. Bonus/withhold arrangements - fee-for-service	0	0.0	XXX	XXX		
8. Bonus/withhold arrangements - contractual fee payments	0	0.0	XXX	XXX		
9. Non-contingent salaries	0	0.0	XXX	XXX		
10. Aggregate cost arrangements	0	0.0	XXX	XXX		
11. All other payments	659,253,350	100.0	XXX	XXX	659,253,350	
12. Total other payments	659,253,350	100.0	XXX	XXX	659,253,350	
13. Total (Line 4 plus Line 12)	659,253,350	100 %	XXX	XXX	659,253,350	

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT 8 – FURNITURE, EQUIPMENT AND SUPPLIES OWNED

Description	1 Cost	2 Improvements	3 Accumulated Depreciation	4 Book Value Less Encumbrances	5 Assets Not Admitted	6 Net Admitted Assets
1. Administrative furniture and equipment						
2. Medical furniture, equipment and fixtures						
3. Pharmaceuticals and surgical supplies						
4. Durable medical equipment						
5. Other property and equipment						
6. Total	0	0	0	0	0	0

NONE



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Alabama			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		12,282													12,282
2. First Quarter		4,735													4,735
3. Second Quarter		4,806													4,806
4. Third Quarter		4,861													4,861
5. Current Year		5,009													5,009
6. Current Year Member Months		57,745													57,745
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		4,246,173													4,246,173
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		4,246,173													4,246,173
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		4,292,175													4,292,175
18. Amount Incurred for Provision of Health Care Services		4,136,642													4,136,642

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 4,246,173



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Alaska			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		1,964													1,964
2. First Quarter		2,612													2,612
3. Second Quarter		2,685													2,685
4. Third Quarter		2,775													2,775
5. Current Year		2,811													2,811
6. Current Year Member Months		32,326													32,326
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		2,739,472													2,739,472
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		2,739,472													2,739,472
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		2,555,360													2,555,360
18. Amount Incurred for Provision of Health Care Services		2,807,287													2,807,287

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 2,739,472



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Arizona			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		8,114													8,114
2. First Quarter		7,478													7,478
3. Second Quarter		7,371													7,371
4. Third Quarter		7,337													7,337
5. Current Year		7,463													7,463
6. Current Year Member Months		88,767													88,767
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		5,996,767													5,996,767
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		5,996,767													5,996,767
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		5,922,148													5,922,148
18. Amount Incurred for Provision of Health Care Services		6,046,921													6,046,921

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 5,996,767



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Arkansas		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		193													193
2. First Quarter		185													185
3. Second Quarter		198													198
4. Third Quarter		193													193
5. Current Year		186													186
6. Current Year Member Months		2,282													2,282
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		591,608													591,608
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		591,608													591,608
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		601,313													601,313
18. Amount Incurred for Provision of Health Care Services		604,287													604,287

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 591,608



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF California			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year .....		.79,381													.79,381
2. First Quarter		104,703													104,703
3. Second Quarter		106,909													106,909
4. Third Quarter		109,779													109,779
5. Current Year		111,091													111,091
6. Current Year Member Months		1,287,500													1,287,500
Total Member Ambulatory Encounters for Year:															
7. Physician .....		.0													
8. Non-Physician .....		.0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b).....		.99,543,414													.99,543,414
13. Life Premiums Direct.....		.0													
14. Property/Casualty Premiums Written.....		.0													
15. Health Premiums Earned.....		.99,543,414													.99,543,414
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services .....		.99,108,432													.99,108,432
18. Amount Incurred for Provision of Health Care Services		100,047,581													100,047,581

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 99,471,159



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Colorado		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		10,133													10,133
2. First Quarter		11,471													11,471
3. Second Quarter		11,473													11,473
4. Third Quarter		11,581													11,581
5. Current Year		11,686													11,686
6. Current Year Member Months		138,287													138,287
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		11,498,945													11,498,945
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		11,498,945													11,498,945
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		10,648,169													10,648,169
18. Amount Incurred for Provision of Health Care Services		11,271,234													11,271,234

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 11,498,945



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Connecticut			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		11,225													11,225
2. First Quarter		8,624													8,624
3. Second Quarter		8,610													8,610
4. Third Quarter		8,620													8,620
5. Current Year		8,688													8,688
6. Current Year Member Months		103,405													103,405
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		8,723,202													8,723,202
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		8,723,202													8,723,202
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		9,829,792													9,829,792
18. Amount Incurred for Provision of Health Care Services		8,689,777													8,689,777

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 8,723,202



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Delaware		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		7,118													7,118
2. First Quarter		5,335													5,335
3. Second Quarter		5,265													5,265
4. Third Quarter		5,257													5,257
5. Current Year		5,275													5,275
6. Current Year Member Months		63,569													63,569
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		5,162,354													5,162,354
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		5,162,354													5,162,354
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		5,942,269													5,942,269
18. Amount Incurred for Provision of Health Care Services		4,912,400													4,912,400

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 5,162,354



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF District of Columbia			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		2,463													2,463
2. First Quarter		2,621													2,621
3. Second Quarter		2,578													2,578
4. Third Quarter		2,577													2,577
5. Current Year		2,635													2,635
6. Current Year Member Months		31,327													31,327
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		2,544,024													2,544,024
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		2,544,024													2,544,024
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		2,581,972													2,581,972
18. Amount Incurred for Provision of Health Care Services		2,420,846													2,420,846

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 2,538,991



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Florida			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		1,456													1,456
2. First Quarter		1,557													1,557
3. Second Quarter		1,603													1,603
4. Third Quarter		1,664													1,664
5. Current Year		1,659													1,659
6. Current Year Member Months		19,274													19,274
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		4,435,726													4,435,726
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		4,435,726													4,435,726
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		4,654,467													4,654,467
18. Amount Incurred for Provision of Health Care Services		4,132,659													4,132,659

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 4,435,726



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Georgia			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		22,909													22,909
2. First Quarter		19,565													19,565
3. Second Quarter		18,815													18,815
4. Third Quarter		18,173													18,173
5. Current Year		17,729													17,729
6. Current Year Member Months		225,351													225,351
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		17,501,868													17,501,868
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		17,501,868													17,501,868
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		18,042,682													18,042,682
18. Amount Incurred for Provision of Health Care Services		17,319,158													17,319,158

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 17,501,868



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Guam			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		84													84
2. First Quarter		0													
3. Second Quarter		0													
4. Third Quarter		0													
5. Current Year		0													
6. Current Year Member Months		0													
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		(209)													(209)
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		(209)													(209)
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		7,209													7,209
18. Amount Incurred for Provision of Health Care Services		(2,477)													(2,477)

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ (209)



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Hawaii		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		41													41
2. First Quarter		39													39
3. Second Quarter		42													42
4. Third Quarter		44													44
5. Current Year		46													46
6. Current Year Member Months		504													504
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b).....		12,441													12,441
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		12,441													12,441
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		(3,873)													(3,873)
18. Amount Incurred for Provision of Health Care Services		(8,421)													(8,421)

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 12,441



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Idaho		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		708													708
2. First Quarter		2,569													2,569
3. Second Quarter		2,572													2,572
4. Third Quarter		2,619													2,619
5. Current Year		2,632													2,632
6. Current Year Member Months		31,013													31,013
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		2,053,662													2,053,662
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		2,053,662													2,053,662
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		1,536,430													1,536,430
18. Amount Incurred for Provision of Health Care Services		1,726,735													1,726,735

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 2,053,662

30.ID



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Illinois		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		21,153												21,153	
2. First Quarter		19,407												19,407	
3. Second Quarter		18,448												18,448	
4. Third Quarter		17,624												17,624	
5. Current Year		17,137												17,137	
6. Current Year Member Months		221,020												221,020	
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b).....		18,914,456												18,914,456	
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		18,914,456												18,914,456	
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		17,449,144												17,449,144	
18. Amount Incurred for Provision of Health Care Services		18,679,056												18,679,056	

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 18,730,718



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Indiana			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		8,531													8,531
2. First Quarter		2,977													2,977
3. Second Quarter		2,853													2,853
4. Third Quarter		2,806													2,806
5. Current Year		2,772													2,772
6. Current Year Member Months		34,361													34,361
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		2,834,032													2,834,032
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		2,834,032													2,834,032
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		4,144,904													4,144,904
18. Amount Incurred for Provision of Health Care Services		2,949,534													2,949,534

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 2,815,399



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Iowa		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		176													176
2. First Quarter		315													315
3. Second Quarter		304													304
4. Third Quarter		295													295
5. Current Year		291													291
6. Current Year Member Months		3,663													3,663
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		1,009,056													1,009,056
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		1,009,056													1,009,056
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		1,107,437													1,107,437
18. Amount Incurred for Provision of Health Care Services		996,948													996,948

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 1,009,056



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Kansas		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		209												209	
2. First Quarter		299												299	
3. Second Quarter		302												302	
4. Third Quarter		305												305	
5. Current Year		304												304	
6. Current Year Member Months		3,627												3,627	
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b).....		352,033												352,033	
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		352,033												352,033	
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		408,034												408,034	
18. Amount Incurred for Provision of Health Care Services		341,012												341,012	

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 352,033

30.KS



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Kentucky			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		7,945													7,945
2. First Quarter		2,715													2,715
3. Second Quarter		1,996													1,996
4. Third Quarter		1,930													1,930
5. Current Year		1,877													1,877
6. Current Year Member Months		26,007													26,007
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		2,309,152													2,309,152
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		2,309,152													2,309,152
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		2,645,620													2,645,620
18. Amount Incurred for Provision of Health Care Services		2,232,430													2,232,430

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 2,309,152

30.KY



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Louisiana		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		323													323
2. First Quarter		280													280
3. Second Quarter		262													262
4. Third Quarter		261													261
5. Current Year		257													257
6. Current Year Member Months		3,226													3,226
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		636,801													636,801
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		636,801													636,801
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		768,539													768,539
18. Amount Incurred for Provision of Health Care Services		621,165													621,165

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 636,801



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Maine		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		20,156												20,156	
2. First Quarter		6,989												6,989	
3. Second Quarter		6,892												6,892	
4. Third Quarter		6,819												6,819	
5. Current Year		6,790												6,790	
6. Current Year Member Months		82,638												82,638	
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		5,523,881												5,523,881	
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		5,523,881												5,523,881	
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		5,404,334												5,404,334	
18. Amount Incurred for Provision of Health Care Services		5,294,992												5,294,992	

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 5,523,881



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Maryland			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		26,341													26,341
2. First Quarter		22,482													22,482
3. Second Quarter		22,311													22,311
4. Third Quarter		22,253													22,253
5. Current Year		22,217													22,217
6. Current Year Member Months		268,138													268,138
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b).....		21,775,130													21,775,130
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		21,775,130													21,775,130
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		21,824,760													21,824,760
18. Amount Incurred for Provision of Health Care Services		19,416,059													19,416,059

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 21,775,130



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Massachusetts			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		30,593													30,593
2. First Quarter		24,569													24,569
3. Second Quarter		24,710													24,710
4. Third Quarter		24,884													24,884
5. Current Year		24,709													24,709
6. Current Year Member Months		295,518													295,518
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		24,929,775													24,929,775
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		24,929,775													24,929,775
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		27,392,157													27,392,157
18. Amount Incurred for Provision of Health Care Services		24,834,249													24,834,249

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 24,929,775



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Michigan			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		40,287													40,287
2. First Quarter		34,388													34,388
3. Second Quarter		33,399													33,399
4. Third Quarter		32,697													32,697
5. Current Year		32,053													32,053
6. Current Year Member Months		401,026													401,026
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		24,013,802													24,013,802
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		24,013,802													24,013,802
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		26,763,184													26,763,184
18. Amount Incurred for Provision of Health Care Services		23,765,856													23,765,856

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 23,791,813



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Minnesota			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		4													4
2. First Quarter		245													245
3. Second Quarter		240													240
4. Third Quarter		240													240
5. Current Year		237													237
6. Current Year Member Months		2,905													2,905
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b).....		800,248													800,248
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		800,248													800,248
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		977,247													977,247
18. Amount Incurred for Provision of Health Care Services		790,646													790,646

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 800,248



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Mississippi			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		14,153													14,153
2. First Quarter		12,032													12,032
3. Second Quarter		11,567													11,567
4. Third Quarter		11,191													11,191
5. Current Year		10,919													10,919
6. Current Year Member Months		138,679													138,679
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		11,168,449													11,168,449
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		11,168,449													11,168,449
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		11,627,952													11,627,952
18. Amount Incurred for Provision of Health Care Services		11,077,725													11,077,725

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 11,168,449



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Missouri			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		170													170
2. First Quarter		344													344
3. Second Quarter		336													336
4. Third Quarter		346													346
5. Current Year		355													355
6. Current Year Member Months		4,116													4,116
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		770,046													770,046
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		770,046													770,046
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		905,431													905,431
18. Amount Incurred for Provision of Health Care Services		810,902													810,902

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 770,046



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Montana			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		249													249
2. First Quarter		148													148
3. Second Quarter		150													150
4. Third Quarter		159													159
5. Current Year		161													161
6. Current Year Member Months		1,833													1,833
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		504,941													504,941
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		504,941													504,941
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		628,340													628,340
18. Amount Incurred for Provision of Health Care Services		498,882													498,882

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 504,941



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Nebraska		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		1													1
2. First Quarter		202													202
3. Second Quarter		199													199
4. Third Quarter		192													192
5. Current Year		191													191
6. Current Year Member Months		2,369													2,369
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b).....		652,595													652,595
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		652,595													652,595
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		661,817													661,817
18. Amount Incurred for Provision of Health Care Services		644,764													644,764

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 652,595



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Nevada			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		172													172
2. First Quarter		172													172
3. Second Quarter		182													182
4. Third Quarter		184													184
5. Current Year		186													186
6. Current Year Member Months		2,158													2,158
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		391,173													391,173
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		391,173													391,173
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		435,025													435,025
18. Amount Incurred for Provision of Health Care Services		385,861													385,861

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 391,173



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF New Hampshire			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		1,168													1,168
2. First Quarter		10,761													10,761
3. Second Quarter		10,677													10,677
4. Third Quarter		10,629													10,629
5. Current Year		10,540													10,540
6. Current Year Member Months		128,008													128,008
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b).....		8,556,607													8,556,607
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		8,556,607													8,556,607
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		9,713,286													9,713,286
18. Amount Incurred for Provision of Health Care Services		8,202,053													8,202,053

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 8,556,607



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF New Jersey			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		1,145													1,145
2. First Quarter		868													868
3. Second Quarter		848													848
4. Third Quarter		856													856
5. Current Year		831													831
6. Current Year Member Months		10,263													10,263
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		2,036,737													2,036,737
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		2,036,737													2,036,737
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		2,704,919													2,704,919
18. Amount Incurred for Provision of Health Care Services		2,058,502													2,058,502

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 2,035,007



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF New Mexico			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		4,477													4,477
2. First Quarter		4,155													4,155
3. Second Quarter		4,199													4,199
4. Third Quarter		4,246													4,246
5. Current Year		4,459													4,459
6. Current Year Member Months		50,576													50,576
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		2,959,409													2,959,409
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		2,959,409													2,959,409
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		2,622,337													2,622,337
18. Amount Incurred for Provision of Health Care Services		2,875,150													2,875,150

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 2,959,409



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF New York			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		56,032													56,032
2. First Quarter		18,847													18,847
3. Second Quarter		18,008													18,008
4. Third Quarter		17,563													17,563
5. Current Year		17,104													17,104
6. Current Year Member Months		213,023													213,023
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b).....		22,864,574													22,864,574
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		22,864,574													22,864,574
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		36,192,470													36,192,470
18. Amount Incurred for Provision of Health Care Services		23,798,205													23,798,205

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 22,797,877



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF North Carolina		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		35,319													35,319
2. First Quarter		29,989													29,989
3. Second Quarter		29,556													29,556
4. Third Quarter		29,208													29,208
5. Current Year		29,080													29,080
6. Current Year Member Months		354,882													354,882
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		26,519,189													26,519,189
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		26,519,189													26,519,189
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		32,313,349													32,313,349
18. Amount Incurred for Provision of Health Care Services		28,862,334													28,862,334

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 26,518,135



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF North Dakota			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		391													391
2. First Quarter		79													79
3. Second Quarter		75													75
4. Third Quarter		72													72
5. Current Year		75													75
6. Current Year Member Months		912													912
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		251,231													251,231
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		251,231													251,231
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		248,848													248,848
18. Amount Incurred for Provision of Health Care Services		248,216													248,216

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 251,231



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Ohio		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		105,692													105,692
2. First Quarter		94,272													94,272
3. Second Quarter		91,135													91,135
4. Third Quarter		88,898													88,898
5. Current Year		87,768													87,768
6. Current Year Member Months		1,095,399													1,095,399
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		94,094,176													94,094,176
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		94,094,176													94,094,176
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		97,397,134													97,397,134
18. Amount Incurred for Provision of Health Care Services		95,321,169													95,321,169

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 94,094,176



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Oklahoma			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		227													227
2. First Quarter		231													231
3. Second Quarter		229													229
4. Third Quarter		221													221
5. Current Year		224													224
6. Current Year Member Months		6,258													6,258
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b).....		359,773													359,773
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		359,773													359,773
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		391,295													391,295
18. Amount Incurred for Provision of Health Care Services		336,940													336,940

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 359,773



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Oregon			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10				
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year .....		.67,696													.67,696
2. First Quarter		23,100													23,100
3. Second Quarter		22,896													22,896
4. Third Quarter		22,828													22,828
5. Current Year		22,904													22,904
6. Current Year Member Months		275,345													275,345
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		17,537,249													17,537,249
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		17,537,249													17,537,249
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		19,535,514													19,535,514
18. Amount Incurred for Provision of Health Care Services		17,076,672													17,076,672

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 17,537,249



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Pennsylvania			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10				
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year .....		.77,950													.77,950
2. First Quarter .....		.65,788													.65,788
3. Second Quarter .....		.65,600													.65,600
4. Third Quarter .....		.65,341													.65,341
5. Current Year .....		.65,187													.65,187
6. Current Year Member Months		782,216													782,216
Total Member Ambulatory Encounters for Year:															
7. Physician .....		.0													
8. Non-Physician .....		.0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b).....		.44,446,777													.44,446,777
13. Life Premiums Direct.....		.0													
14. Property/Casualty Premiums Written.....		.0													
15. Health Premiums Earned.....		.44,446,777													.44,446,777
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services .....		.54,219,870													.54,219,870
18. Amount Incurred for Provision of Health Care Services		.45,888,052													.45,888,052

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 43,981,673



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Puerto Rico			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		31													31
2. First Quarter		0													
3. Second Quarter		0													
4. Third Quarter		0													
5. Current Year		0													
6. Current Year Member Months		0													
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		131,488													131,488
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		131,488													131,488
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		1,478,689													1,478,689
18. Amount Incurred for Provision of Health Care Services		1,478,689													1,478,689

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 131,488



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Rhode Island			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		50													50
2. First Quarter		3,141													3,141
3. Second Quarter		2,813													2,813
4. Third Quarter		2,811													2,811
5. Current Year		2,699													2,699
6. Current Year Member Months		38,494													38,494
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		3,247,338													3,247,338
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		3,247,338													3,247,338
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		3,670,335													3,670,335
18. Amount Incurred for Provision of Health Care Services		3,234,895													3,234,895

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 3,247,338



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF South Carolina		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		25,744													25,744
2. First Quarter		20,673													20,673
3. Second Quarter		20,332													20,332
4. Third Quarter		20,071													20,071
5. Current Year		19,998													19,998
6. Current Year Member Months		241,276													241,276
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		17,386,709													17,386,709
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		17,386,709													17,386,709
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		20,649,184													20,649,184
18. Amount Incurred for Provision of Health Care Services		17,686,334													17,686,334

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 17,386,709



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF South Dakota			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		285													285
2. First Quarter		90													90
3. Second Quarter		92													92
4. Third Quarter		93													93
5. Current Year		89													89
6. Current Year Member Months		3,780													3,780
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b).....		1,041,287													1,041,287
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		1,041,287													1,041,287
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		1,052,057													1,052,057
18. Amount Incurred for Provision of Health Care Services		1,028,792													1,028,792

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$1,041,287



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Tennessee			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		375													375
2. First Quarter		6,530													6,530
3. Second Quarter		6,531													6,531
4. Third Quarter		6,568													6,568
5. Current Year		6,721													6,721
6. Current Year Member Months		77,452													77,452
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b).....		6,356,609													6,356,609
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		6,356,609													6,356,609
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		7,150,751													7,150,751
18. Amount Incurred for Provision of Health Care Services		6,854,834													6,854,834

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 6,330,711



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Texas		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		21,901												21,901	
2. First Quarter		21,600												21,600	
3. Second Quarter		21,641												21,641	
4. Third Quarter		22,025												22,025	
5. Current Year		22,419												22,419	
6. Current Year Member Months		245,452												245,452	
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		19,296,620												19,296,620	
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		19,296,620												19,296,620	
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		19,476,368												19,476,368	
18. Amount Incurred for Provision of Health Care Services		19,284,971												19,284,971	

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 19,296,620



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Utah		DURING THE YEAR 2022							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		4,361													4,361
2. First Quarter		2,158													2,158
3. Second Quarter		2,128													2,128
4. Third Quarter		2,175													2,175
5. Current Year		2,214													2,214
6. Current Year Member Months		42,714													42,714
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		2,828,495													2,828,495
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		2,828,495													2,828,495
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		2,402,436													2,402,436
18. Amount Incurred for Provision of Health Care Services		2,378,221													2,378,221

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 2,828,495



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Vermont			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		10,776													10,776
2. First Quarter		4,516													4,516
3. Second Quarter		4,492													4,492
4. Third Quarter		4,475													4,475
5. Current Year		4,426													4,426
6. Current Year Member Months		54,645													54,645
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		4,609,829													4,609,829
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		4,609,829													4,609,829
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		5,544,447													5,544,447
18. Amount Incurred for Provision of Health Care Services		4,592,165													4,592,165

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 4,609,829



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Virginia			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		9,863													9,863
2. First Quarter		6,827													6,827
3. Second Quarter		6,705													6,705
4. Third Quarter		6,774													6,774
5. Current Year		6,866													6,866
6. Current Year Member Months		80,160													80,160
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		6,827,708													6,827,708
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		6,827,708													6,827,708
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		7,731,727													7,731,727
18. Amount Incurred for Provision of Health Care Services		7,042,322													7,042,322

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 6,827,708



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Washington			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year .....		.824													.824
2. First Quarter		34,794													34,794
3. Second Quarter		34,503													34,503
4. Third Quarter		34,340													34,340
5. Current Year		34,307													34,307
6. Current Year Member Months		414,209													414,209
Total Member Ambulatory Encounters for Year:															
7. Physician .....		.0													
8. Non-Physician .....		.0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		20,175,378													20,175,378
13. Life Premiums Direct .....		.0													
14. Property/Casualty Premiums Written .....		.0													
15. Health Premiums Earned		20,175,378													20,175,378
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		24,554,538													24,554,538
18. Amount Incurred for Provision of Health Care Services		21,279,620													21,279,620

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 20,175,378



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF West Virginia			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10				
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		6,434													6,434
2. First Quarter		8,365													8,365
3. Second Quarter		8,294													8,294
4. Third Quarter		8,248													8,248
5. Current Year		8,277													8,277
6. Current Year Member Months		100,378													100,378
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		11,297,396													11,297,396
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		11,297,396													11,297,396
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		12,342,191													12,342,191
18. Amount Incurred for Provision of Health Care Services		12,424,714													12,424,714

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 11,297,396



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Wisconsin			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		8,631													8,631
2. First Quarter		7,907													7,907
3. Second Quarter		7,548													7,548
4. Third Quarter		7,307													7,307
5. Current Year		7,049													7,049
6. Current Year Member Months		89,793													89,793
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		8,919,595													8,919,595
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		8,919,595													8,919,595
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		8,586,818													8,586,818
18. Amount Incurred for Provision of Health Care Services		8,246,809													8,246,809

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 8,919,595



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Wyoming			DURING THE YEAR 2022							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		99													99
2. First Quarter		112													112
3. Second Quarter		113													113
4. Third Quarter		113													113
5. Current Year		110													110
6. Current Year Member Months		1,412													1,412
Total Member Ambulatory Encounters for Year:															
7. Physician		0													
8. Non-Physician		0													
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0													
11. Number of Inpatient Admissions		0													
12. Health Premiums Written (b)		388,967													388,967
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		388,967													388,967
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		412,315													412,315
18. Amount Incurred for Provision of Health Care Services		384,300													384,300

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 388,967



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Consolidated			DURING THE YEAR 2022										NAIC Company Code	12747	
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14		
		Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health		
Total Members at end of:																	
1. Prior Year		768,005	0	0	0	0	0	0	0	0	0	0	0	0	0	768,005	0
2. First Quarter		663,860	0	0	0	0	0	0	0	0	0	0	0	0	0	663,860	0
3. Second Quarter		655,493	0	0	0	0	0	0	0	0	0	0	0	0	0	655,493	0
4. Third Quarter		652,527	0	0	0	0	0	0	0	0	0	0	0	0	0	652,527	0
5. Current Year		650,713	0	0	0	0	0	0	0	0	0	0	0	0	0	650,713	0
6. Current Year Member Months		7,879,281	0	0	0	0	0	0	0	0	0	0	0	0	0	7,879,281	0
Total Member Ambulatory Encounters for Year:																	
7. Physician		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Non-Physician		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11. Number of Inpatient Admissions		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Health Premiums Written (b)		603,768,157	0	0	0	0	0	0	0	0	0	0	0	0	0	603,768,157	0
13. Life Premiums Direct		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Property/Casualty Premiums Written		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned		603,768,157	0	0	0	0	0	0	0	0	0	0	0	0	0	603,768,157	0
16. Property/Casualty Premiums Earned		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services		659,253,350	0	0	0	0	0	0	0	0	0	0	0	0	0	659,253,350	0
18. Amount Incurred for Provision of Health Care Services		608,028,668	0	0	0	0	0	0	0	0	0	0	0	0	0	608,028,668	0

(a) For health business: number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$602,706,025

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

SCHEDULE S - PART 1 - SECTION 2

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total (Cols. 5+6+7)	9 Letters of Credit	10 Issuing or Confirming Bank Reference Number (a)	11 Trust Agreements	12 Funds Deposited by and Withheld from Reinsurers	13 Other	14 Miscellaneous Balances (Credit)	15 Sum of Cols 9+11+12+13+14 but not in Excess of Col. 8	
General Account - Accident and Health - Non-Affiliates - Non-U.S. Non-Affiliates															
		01/01/2017	Artex SAC Ltd/Fleet ENX Segregated Acct.		400,951	24,029	424,980				3,016,968			(58,873)	424,980
209999 - General Account - Accident and Health - Non-Affiliates - Non-U.S. Non-Affiliates				0	400,951	24,029	424,980	0	XXX	0	3,016,968	0	(58,873)	424,980	
219999 - General Account - Accident and Health - Non-Affiliates - Total Non-Affiliates				0	400,951	24,029	424,980	0	XXX	0	3,016,968	0	(58,873)	424,980	
229999 - General Account - Accident and Health - Total Accident and Health				0	400,951	24,029	424,980	0	XXX	0	3,016,968	0	(58,873)	424,980	
239999 - General Account - Total General Account				0	400,951	24,029	424,980	0	XXX	0	3,016,968	0	(58,873)	424,980	
369999 - Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2999999 and 3299999)				0	400,951	24,029	424,980	0	XXX	0	3,016,968	0	(58,873)	424,980	
99999999 Totals				0	400,951	24,029	424,980	0	XXX	0	3,016,968	0	(58,873)	424,980	

(a)	Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

SCHEDULE S - PART 5

Reinsurance Ceded to Certified Reinsurers as of December 31, Current Year (\$000 Omitted)

Reinsurance Used to Certify Reinsurers as of December 31, Current Year (\$000's Unaudited)																									
1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Certified Reinsurer Rating(1 through 6)	7 Effective Date of Certified Reinsurer Rating	8 Percent Collateral Required for Full Credit (0% - 100%)	9 Reserve Credit Taken	10 Paid and Unpaid Losses (Debit)	11 Other Debits	12 Total Recoverable / Reserve Credit Taken (Col. 9 + 10 + 11)	13 Miscellaneous Balances (Credit)	14 Net Obligation Subject to Collateral (Col.12 - 13)	15 Dollar Amount of Collateral Required for Full Credit (Col. 14 x Col.8)	Collateral							23 Percent Credit Allowed on Net Obligation Provided for Reinsurers	24 Percent Credit Allowed on Net Obligation Subject to Collateral (Col. 23 / Col. 8, not to exceed 100%)	25 Amount of Credit Allowed for Net Obligation Subject to Collateral (Col. 14 x Col. 24)	26 Liability for Reinsurance With Certified Reinsurers Due to Collateral Deficiency (Col 14 - Col. 25)
														16 Multiple Beneficiary Trust	17 Letters of Credit	18 Issuing or Confirming Bank Reference Number (a)	19 Trust Agreements	20 Funds Deposited by and Withheld from Reinsurers	21 Other	22 Total Collateral Provided (Col. 16 +17 + 19 +20 + 21)					
9999999	Totals							0	0	0	0	0	0	0	0	0	XXX	0	0	0	XXX	XXX	0	0	

NONE

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Issuing or Confirming Bank Reference Number (a)	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
.....
.....
.....

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

SCHEDULE S – PART 6

Five-Year Exhibit of Reinsurance Ceded Business
(\$000 Omitted)

	1 2022	2 2021	3 2020	4 2019	5 2018
A. OPERATIONS ITEMS					
1. Premiums.....	11,652	11,055	12,844	17,832	8,868
2. Title XVIII-Medicare.....	0	0	0	0	0
3. Title XIX-Medicaid.....	0	0	0	0	0
4. Commissions and reinsurance expense allowance.....	0	0	0	0	0
5. Total hospital and medical expenses.....	8,226	8,548	11,545	8,745	
B. BALANCE SHEET ITEMS					
6. Premiums receivable	0	0	0	0	0
7. Claims payable.....	3,006	904	789	641	
8. Reinsurance recoverable on paid losses.....	0	0	0	0	0
9. Experience rating refunds due or unpaid.....	0	0	0	0	0
10. Commissions and reinsurance expense allowances due.....	0	0	0	0	0
11. Unauthorized reinsurance offset.....	3,017	4,478	3,406	3,809	5,914
12. Offset for reinsurance with Certified Reinsurers.....	0	0	0	0	0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
13. Funds deposited by and withheld from (F).....	3,017	4,478	3,406	3,809	5,914
14. Letters of credit (L).....	0	500	500	500	500
15. Trust agreements (T).....	0	0	0	0	0
16. Other (O).....	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17. Multiple Beneficiary Trust.....	0	0	0	0	0
18. Funds deposited by and withheld from (F)	0	0	0	0	0
19. Letters of credit (L).....	0	0	0	0	0
20. Trust agreements (T).....	0	0	0	0	0
21. Other (O).....	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	101,111,542		101,111,542
2. Accident and health premiums due and unpaid (Line 15).....	89,456,830		89,456,830
3. Amounts recoverable from reinsurers (Line 16.1).....	0		0
4. Net credit for ceded reinsurance.....	XXX	(3,123,685)	(3,123,685)
5. All other admitted assets (Balance).....	227,543,927	(34,600)	227,509,327
6. Total assets (Line 28).....	418,112,299	(3,158,285)	414,954,014
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1).....	90,133,855	400,951	90,534,806
8. Accrued medical incentive pool and bonus payments (Line 2).....	0		0
9. Premiums received in advance (Line 8).....	907,221		907,221
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19, first inset amount plus second inset amount).....	3,016,968	(3,016,968)	0
11. Reinsurance in unauthorized companies (Line 20 minus inset amount).....	0		0
12. Reinsurance with Certified Reinsurers (Line 20 inset amount).....	0		0
13. Funds held under reinsurance treaties with Certified Reinsurers (Line 19 third inset amount).....	0		0
14. All other liabilities (Balance).....	254,225,598	(542,268)	253,683,330
15. Total liabilities (Line 24).....	348,283,642	(3,158,285)	345,125,357
16. Total capital and surplus (Line 33).....	69,828,657	XXX	69,828,657
17. Total liabilities, capital and surplus (Line 34).....	418,112,299	(3,158,285)	414,954,014
NET CREDIT FOR CEDED REINSURANCE			
18. Claims unpaid.....	400,951		
19. Accrued medical incentive pool.....	0		
20. Premiums received in advance	0		
21. Reinsurance recoverable on paid losses	0		
22. Other ceded reinsurance recoverables	34,600		
23. Total ceded reinsurance recoverables	435,551		
24. Premiums receivable	0		
25. Funds held under reinsurance treaties with authorized and unauthorized reinsurers	3,016,968		
26. Unauthorized reinsurance	0		
27. Reinsurance with Certified Reinsurers.....	0		
28. Funds held under reinsurance treaties with Certified Reinsurers.....	0		
29. Other ceded reinsurance payables/offsets	542,268		
30. Total ceded reinsurance payables/offsets	3,559,236		
31. Total net credit for ceded reinsurance	(3,123,685)		

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

SCHEDULE T – PART 2
INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN

Allocated By States and Territories

States, Etc.	Direct Business Only					
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama	AL					0
2. Alaska	AK					0
3. Arizona	AZ					0
4. Arkansas	AR					0
5. California	CA					0
6. Colorado	CO					0
7. Connecticut	CT					0
8. Delaware	DE					0
9. District of Columbia	DC					0
10. Florida	FL					0
11. Georgia	GA					0
12. Hawaii	HI					0
13. Idaho	ID					0
14. Illinois	IL					0
15. Indiana	IN					0
16. Iowa	IA					0
17. Kansas	KS					0
18. Kentucky	KY					0
19. Louisiana	LA					0
20. Maine	ME					0
21. Maryland	MD					0
22. Massachusetts	MA					0
23. Michigan	MI					0
24. Minnesota	MN					0
25. Mississippi	MS					0
26. Missouri	MO					0
27. Montana	MT					0
28. Nebraska	NE					0
29. Nevada	NV					0
30. New Hampshire	NH					0
31. New Jersey	NJ					0
32. New Mexico	NM					0
33. New York	NY					0
34. North Carolina	NC					0
35. North Dakota	ND					0
36. Ohio	OH					0
37. Oklahoma	OK					0
38. Oregon	OR					0
39. Pennsylvania	PA					0
40. Rhode Island	RI					0
41. South Carolina	SC					0
42. South Dakota	SD					0
43. Tennessee	TN					0
44. Texas	TX					0
45. Utah	UT					0
46. Vermont	VT					0
47. Virginia	VA					0
48. Washington	WA					0
49. West Virginia	WV					0
50. Wisconsin	WI					0
51. Wyoming	WY					0
52. American Samoa	AS					0
53. Guam	GU					0
54. Puerto Rico	PR					0
55. US Virgin Islands	VI					0
56. Northern Mariana Islands	MP					0
57. Canada	CAN					0
58. Aggregate Other Alien	OT					0
59. Totals		0	0	0	0	0

NONE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
		23-1614034		84129	NYSE	Rite Aid Corporation	DE	UDP	Board of Directors	Board of Directors	100.0	Rite Aid Corporation	NO	0	
		90-1011712				Hunter Lane, LLC	DE	NIA	Rite Aid Corporation	Ownership	100.0	Rite Aid Corporation	NO	0	
		26-0676699				Elixir Holdings LLC	DE	NIA	Hunter Lane, LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		12747	20-4308924			Elixir Insurance Company	OH	RE	Elixir Holdings LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		34-1939227				Elixir Rx Options, LLC	OH	NIA	Elixir Holdings LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		36-4221427				Elixir Rx Solutions, LLC	MO	NIA	Elixir Holdings LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		05-0570786				Elixir Rx Solutions, LLC	OH	NIA	Elixir Holdings LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		88-0511398				Elixir Rx Solutions of Nevada, LLC	NV	NIA	Elixir Holdings LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		20-3389462				Elixir Savings, LLC	FL	NIA	Elixir Holdings LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		26-2434607				Elixir Pharmacy, LLC	OH	NIA	Elixir Holdings LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		61-1772789				Elixir Puerto Rico	DE	NIA	Elixir Holdings LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		87-3071832				Tonic Procurement Solutions	OH	NIA	Elixir Holdings LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		59-2798509				First Florida Insurers of Tampa, LLC	OH	NIA	Elixir Holdings LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		59-3760021				Advance Benefits, LLC	FL	NIA	Elixir Holdings LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		27-4368094				Design Rx Holdings LLC	DE	NIA	Elixir Holdings LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		20-1369429				Design Rx, LLC	WY	NIA	Design Rx Holdings Corporation, LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		20-5166645				Design Rxclusives, LLC	WY	NIA	Design Rx Holdings Corporation, LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		20-3649446				Rx Initiatives L.L.C.	UT	NIA	Design Rx Holdings Corporation, LLC	Ownership	100.0	Rite Aid Corporation	NO	0	
		45-4806467				Ascend Health Technology LLC	DE	NIA	Elixir Holdings LLC	Ownership	100.0	Rite Aid Corporation	NO	0	

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

SCHEDULE Y

PART 3 – ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY’S CONTROL

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

MARCH FILING

	<u>Responses</u>
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	.....YES.....
2. Will an actuarial opinion be filed by March 1?	.....YES.....
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	.....YES.....
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?	.....YES.....

APRIL FILING

5. Will Management's Discussion and Analysis be filed by April 1?	.....YES.....
6. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	.....YES.....
7. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	.....YES.....

JUNE FILING

8. Will an audited financial report be filed by June 1?	.....YES.....
9. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	.....YES.....

SUPPLEMENTAL FILINGS

The following supplemental reports are required to be filed as part of your statement filing if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

MARCH FILING

10. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	.....NO.....
11. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?	.....NO.....
12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	.....SEE EXPLANATION.....
13. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
14. Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
15. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	.....YES.....
16. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	.....NO.....
17. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	.....NO.....
18. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed with electronically with the NAIC by March 1?	.....NO.....

APRIL FILING

19. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	.....NO.....
20. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?	.....NO.....
21. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	.....YES.....
22. Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?	.....YES.....
23. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?	.....SEE EXPLANATION.....

AUGUST FILING

24. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?YES.....
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Explanation:

10. The Company does not offer Medicare Supplement Insurance

11. The Company does not offer Life Insurance

12. The Company has less than 100 shareholders

13. The Company does not write Life Insurance

14. The Company does not write Life Insurance

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. The Company does not write Long-term Care Insurance

20. Not Required

23. Not Required by state of Ohio

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

Bar code:

10. 
1 2 7 4 7 2 0 2 2 3 6 0 5 9 0 0 0 0

11. 
1 2 7 4 7 2 0 2 2 0 5 5 9 0 0 0 0

13. 
1 2 7 4 7 2 0 2 2 3 7 1 0 0 0 0 0

14. 
1 2 7 4 7 2 0 2 2 3 7 0 0 0 0 0 0

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17. 
1 2 7 4 7 2 0 2 2 2 2 5 0 0 0 0 0

18. 
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19. 
1 2 7 4 7 2 0 2 2 3 0 6 0 0 0 0 0

20. 
1 2 7 4 7 2 0 2 2 2 1 1 0 0 0 0 0

OVERFLOW PAGE FOR WRITE-INS



SUPPLEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

MEDICARE PART D COVERAGE SUPPLEMENT

(Net of Reinsurance)

(To Be Filed By March 1)

NAIC Group Code 00000

NAIC Company Code 12747

	Individual Coverage		Group Coverage		5 Total Cash
	1 Insured	2 Uninsured	3 Insured	4 Uninsured	
1. Premiums Collected					
1.1 Standard Coverage					
1.11 With Reinsurance Coverage.....	263,938,969	XXX.....	11,829,588	XXX.....	275,768,557
1.12 Without Reinsurance Coverage.....		XXX.....		XXX.....	0
1.13 Risk-Corridor Payment Adjustments.....	267,978,051	XXX.....		XXX.....	267,978,051
1.2 Supplemental Benefits.....	44,339,001	XXX.....		XXX.....	44,339,001
2. Premiums Due and Uncollected-change					
2.1 Standard Coverage					
2.11 With Reinsurance Coverage	5,814,655	XXX.....		XXX.....	XXX.....
2.12 Without Reinsurance Coverage		XXX.....		XXX.....	XXX.....
2.2 Supplemental Benefits.....		XXX.....		XXX.....	XXX.....
3. Unearned Premium and Advance Premium-change					
3.1 Standard Coverage					
3.11 With Reinsurance Coverage.....		XXX.....		XXX.....	XXX.....
3.12 Without Reinsurance Coverage.....		XXX.....		XXX.....	XXX.....
3.2 Supplemental Benefits.....		XXX.....		XXX.....	XXX.....
4. Risk-Corridor Payment Adjustments-change					
4.1 Receivable.....	(1,784,254)	XXX.....		XXX.....	XXX.....
4.2 Payable.....		XXX.....		XXX.....	XXX.....
5. Earned Premiums					
5.1 Standard Coverage					
5.11 With Reinsurance Coverage.....	269,753,624	XXX.....	11,829,588	XXX.....	XXX.....
5.12 Without Reinsurance Coverage.....	0	XXX.....		XXX.....	XXX.....
5.13 Risk-Corridor Payment Adjustments.....	266,193,797	XXX.....		XXX.....	XXX.....
5.2 Supplemental Benefits	44,339,001	XXX.....		XXX.....	XXX.....
6. Total Premiums.....	580,286,422	XXX.....	11,829,588	XXX.....	588,085,609
7. Claims Paid					
7.1 Standard Coverage					
7.11 With Reinsurance Coverage.....	597,431,930	XXX.....	12,632,939	XXX.....	610,064,869
7.12 Without Reinsurance Coverage.....	0	XXX.....		XXX.....	0
7.2 Supplemental Benefits.....	35,557,518	XXX.....		XXX.....	35,557,518
8. Claim Reserves and Liabilities-change					
8.1 Standard Coverage					
8.11 With Reinsurance Coverage.....	(47,667,679)	XXX.....	(951,332)	XXX.....	XXX.....
8.12 Without Reinsurance Coverage.....		XXX.....		XXX.....	XXX.....
8.2 Supplemental Benefits.....		XXX.....		XXX.....	XXX.....
9. Health Care Receivables-change					
9.1 Standard Coverage					
9.11 With Reinsurance Coverage.....		XXX.....		XXX.....	XXX.....
9.12 Without Reinsurance Coverage.....		XXX.....		XXX.....	XXX.....
9.2 Supplemental Benefits.....		XXX.....		XXX.....	XXX.....
10. Claims Incurred					
10.1 Standard Coverage					
10.11 With Reinsurance Coverage.....	549,764,251	XXX.....	11,681,607	XXX.....	XXX.....
10.12 Without Reinsurance Coverage.....	0	XXX.....	0	XXX.....	XXX.....
10.2 Supplemental Benefits.....	35,557,518	XXX.....	0	XXX.....	XXX.....
11. Total Claims.....	585,321,769	XXX.....	11,681,607	XXX.....	645,622,387
12. Reinsurance Coverage and Low Income Cost Sharing					
12.1 Claims Paid – Net of Reimbursements Applied.....	XXX.....	(147,156,738)	XXX.....	(2,999,904)	(150,156,642)
12.2 Reimbursements Received but Not Applied-change.....	XXX.....		XXX.....		0
12.3 Reimbursements Receivable-change.....	XXX.....		XXX.....		XXX.....
12.4 Health Care Receivables-change.....	XXX.....		XXX.....		XXX.....
13. Aggregate Policy Reserves-change.....	(12,359,930)				XXX.....
14. Expenses Paid.....	13,554,882	XXX.....	160,249	XXX.....	13,715,131
15. Expenses Incurred.....	13,168,130	XXX.....	155,677	XXX.....	XXX.....
16. Underwriting Gain/Loss.....	(5,843,547)	XXX.....	(7,696)	XXX.....	XXX.....
17. Cash Flow Result.....	XXX.....	XXX.....	XXX.....	XXX.....	78,904,733