



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 [ X ] Property/Casualty [ ] Hospital, Medical & Dental Service or Indemnity [ ]  
Dental Service Corporation [ ] Vision Service Corporation [ ] Health Maintenance Organization [ ]  
Other [ ] Is HMO, Federally Qualified? Yes [ ] No [ ]

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

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

Main Administrative Office 7835 Freedom 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 Freedom 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 Freedom 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	Title	Name	Title
Heyward Donigan	Chief Executive Officer	Rand Greenblatt #	Chief Financial Officer & Treasurer
Mitchell Kempker #	Secretary	Chris DuPaul #	Chief Operating Officer

OTHER OFFICERS


DIRECTORS OR TRUSTEES

Rand Greenblatt #	Brian Todd Hoover	Susan Catherine Lowell	Karen Lesley Staniforth
Chris DuPaul #			

State of Ohio

County of Stark

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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

Subscribed and sworn to before me this  
day of ,

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

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

## EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

[illegible]

Exhibit 3 - Health Care Receivables

**NONE**

Exhibit 3A - Analysis of HC Receivables

**NONE**

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

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## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

## EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

[illegible]

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

## EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

[illegible]

## 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	0
13. Total (Line 4 plus Line 12)	659,253,350	100 %	XXX	XXX	659,253,350	0

## EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

[illegible]

EXHIBIT 8 – FURNITURE, EQUIPMENT AND SUPPLIES OWNED

	1	2	3	4	5	6
Description	Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
1. Administrative furniture and equipment .....	NONE					
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





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				
			2	3															
		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		
		2	3													
	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	
			2	3												
		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	11	12	13	14	
		2	3												
	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



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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
		2	3											
	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	11	12	13	14		
			2	3													
		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)

	1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
		Individual	Group											
	Total			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	11	12	13	14			
		2	3														
	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

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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)

	1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	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
		2	3											
	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	
		2	3												
	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)

	1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	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	11	12	13	14		
		2	3													
	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)

	1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
		Individual	Group											
	Total			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	11	12	13	14	
		2	3												
	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		
		2	3													
	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	11	12	13	14	
			2	3												
		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 Total	Comprehensive Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
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)

	1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
		Individual	Group											
	Total			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 Total	Comprehensive Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
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

30.LA



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)

	1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	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 Total	Comprehensive Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non- Health
		2 Individual	3 Group											
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		
		2	3													
	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	
			2	3												
		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	
			2	3												
		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

30.MN



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	
			2	3												
		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

30.MS



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		
			2	3													
		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	
		2	3												
	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

30.MT



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	11	12	13	14	
			2	3												
		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

30.NE



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	
			2	3												
		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)

	1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
		Individual	Group											
	Total			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

30.NH



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	
			2	3												
		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 Total	Comprehensive Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
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

30.NM



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	
			2	3												
		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	11	12	13	14	
			2	3												
		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	
		2	3												
	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	11	12	13	14				
			2	3															
		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

30.OH



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	
			2	3												
		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

30.OK



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 Total	Comprehensive Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
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

30. OR



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	11	12	13	14	
		2	3												
	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)

	1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	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

30.PR



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)

	1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	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	11	12	13	14	
			2	3												
		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)

	1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	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

30.SD



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		
		2	3													
	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 Total	Comprehensive Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
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)

	1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
		Individual	Group											
	Total			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	
			2	3												
		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)

	1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	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
		2	3											
	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	11	12	13	14	
			2	3												
		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

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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)

	1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
		Individual	Group											
	Total			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

30.W1



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	
		2	3												
	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

30.WY



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 Total	Comprehensive Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
Total Members at end of:														
1. Prior Year .....	768,005	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	663,860	0
3 Second Quarter .....	655,493	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	652,527	0
5. Current Year	650,713	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	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
8. Non-Physician .....	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
10. Hospital Patient Days Incurred	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
12. Health Premiums Written (b).....	603,768,157	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
14. Property/Casualty Premiums Written.....	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	603,768,157	0
16. Property/Casualty Premiums Earned	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	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	608,028,668	0

(a) For health business: number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0

(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

[illegible]

## 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

[illegible]



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## 34

## Reinsurance Ceded To Unauthorized Companies

(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
	.....	.....	.....	.....	.....
	.....	.....	.....	.....	.....
	.....	.....	.....	.....	.....
	.....	.....	.....	.....	.....

## 35

## 35

## 35

3535

SCHEDULE S – PART 6

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

	1 2022	2 2021	3 2020	4 2019	5 2018
<b>A. OPERATIONS ITEMS</b>					
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
5. Total hospital and medical expenses.....		8,226	8,548	11,545	8,745
<b>B. BALANCE SHEET ITEMS</b>					
6. Premiums receivable .....		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
10. Commissions and reinsurance expense allowances due.....		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
<b>C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
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
<b>D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
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

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1	2	3
	As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
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
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
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
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
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

		Direct Business Only					
		1	2	3	4	5	6
States, Etc.		Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Deposit-Type Contracts	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	0

NONE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Elixir Insurance Company

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
			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

## 42

## 42

## 42

42



SCHEDULE Y

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

1	2	3	4	5	6	7	8
Insurers in Holding Company	Owners with Greater than 10% Ownership	Ownership Percentage Column 2 of Column 1	Granted Disclaimer of Control/Affiliation of Column 2 Over Column 1 (Yes/No)	Ultimate Controlling Party	U.S. Insurance Groups or Entities Controlled by Column 5	Ownership Percentage (Columns 5 of Column 6)	Granted Disclaimer of Control/Affiliation of Column 5 Over Column 6 (Yes/No)
		%	NONE			%	
		%				%	
		%				%	
		%				%	
		%				%	
		%				%	
		%				%	
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		%				%	
		%				%	
		%				%	

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

Responses

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.....

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.

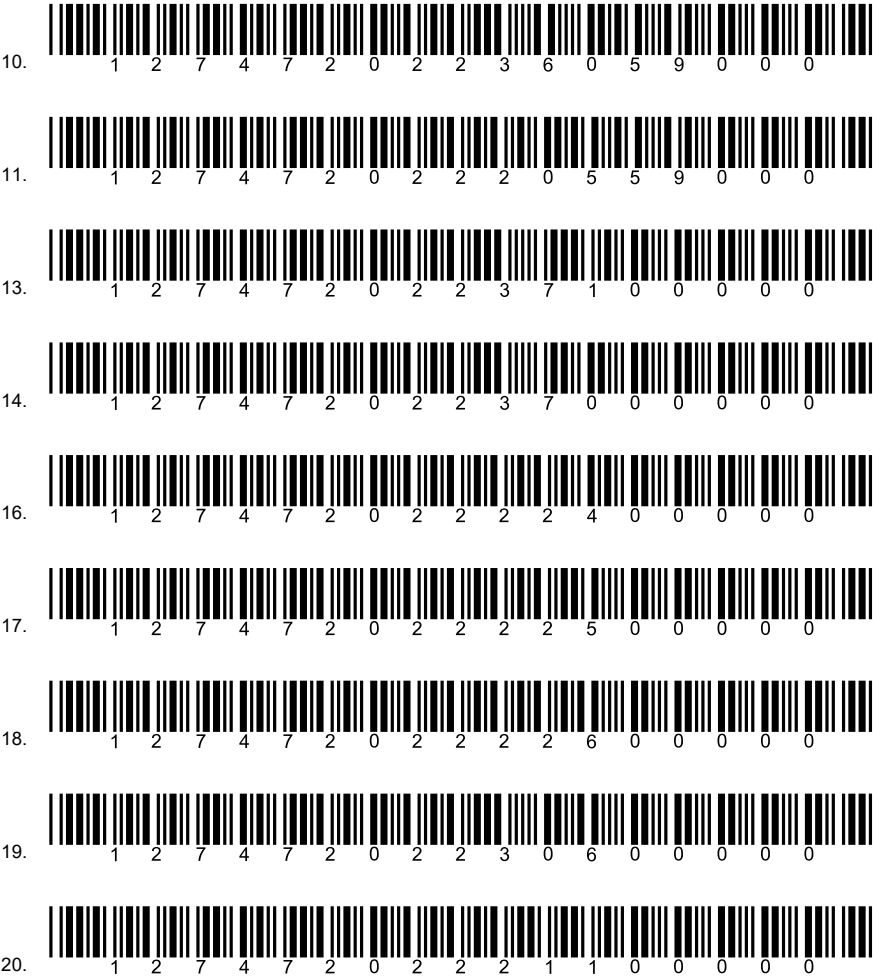
The Company does not write Long-term Care Insurance
20.

Not Required
23.

Not Required by state of Ohio

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

Bar code:



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