



**ANNUAL STATEMENT
FOR THE YEAR ENDING DECEMBER 31, 2023
OF THE CONDITION AND AFFAIRS OF THE**

Elixir Insurance Company

(Name)

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

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

Country of Domicile _____ United States _____

Licensed as business type: Life, Accident & Health Property/Casualty Hospital, Medical & Dental Service or Indemnity
 Dental Service Corporation Vision Service Corporation Health Maintenance Organization
 Other Is HMO, Federally Qualified? Yes No

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

Statutory Home Office 200 Newberry Commons, Etters, PA, US 17319
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office _____ 200 Newberry Commons
(Street and Number)
Etters, PA, US 17319 _____ 330-405-8089

Mail Address 7835 Freedom Avenue NW, North Canton, OH, US 44720
(City or Town, State, County and Zip Code) (Area Code) (Telephone Number)

(Street and Number of P.O. Box) _____ (City or Town, State, Country and Zip Code) _____

Etters, PA, US 17319, (Street and Number)
(City or Town, State, Country and Zip Code) 330-405-8089
(Area Code) (Telephone Number) (Extension)

Internet Web Site Address www.elixirsolutions.com

OFFICERS

OFFICERS

Name Matthew Schroeder #	Title President	Name Anna Khais #	Title Chief Financial Officer & Treasurer
Anna Desatnik #	Secretary		

OTHER OFFICERS

Byron Purcell # _____, Vice President _____ Jennifer Wagner-Parish # _____, Vice President _____

DIRECTORS OR TRUSTEES

Susan Lowell _____ Karen Lesley Staniforth _____ Steven Bixler _____

State of _____

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County of

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.

Matthew Schroeder
President

Anna Khais
Chief Financial Officer & Treasurer

Anna Desatnik
Secretary

Subscribed and sworn to before me this
day of _____,

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

Exhibit 3 - Health Care Receivables

NONE

Exhibit 3A - Analysis of HC Receivables

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

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

Aging Analysis of Unpaid Claims						
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported) Elixir Rx Options, LLC.....	44,044,449	42,733,113	38,314,807			125,092,369
0199999 Individually listed claims unpaid.....	44,044,449	42,733,113	38,314,807	0	0	125,092,369
0299999 Aggregate accounts not individually listed-uncovered.....						()
0399999 Aggregate accounts not individually listed-covered.....						()
0499999 Subtotals.....	44,044,449	42,733,113	38,314,807	0	0	125,092,369
0599999 Unreported claims and other claim reserves.....						8,073,231
0699999 Total amounts withheld.....						
0799999 Total claims unpaid.....						133,165,600
0899999 Accrued medical incentive pool and bonus amounts.....						()

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1 Affiliate	2 Description	3 Amount	4 Current	5 Non-Current
Elixir Rx Options, LLC.....	Claims and various Management Service.....	333,158,374	333,158,374	
First Florida Insurers of Tampa.....	Premium Commissions.....	35,752	35,752	
.....
.....
.....
.....
.....
.....
.....
.....
0199999 Individually listed payables.....	333,194,126	333,194,126	.....0
0299999 Payables not individually listed
0399999 Total gross payables	333,194,126	333,194,126	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT 7 - PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payments	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups	0	0.0		0.0		
2. Intermediaries	0	0.0		0.0		
3. All other providers	0	0.0		0.0		
4. Total capitation payments	0	0.0	0	0.0	0	0
Other Payments:						
5. Fee-for-service	0	0.0	XXX	XXX		
6. Contractual fee payments	0	0.0	XXX	XXX		
7. Bonus/withhold arrangements - fee-for-service	0	0.0	XXX	XXX		
8. Bonus/withhold arrangements - contractual fee payments	0	0.0	XXX	XXX		
9. Non-contingent salaries	0	0.0	XXX	XXX		
10. Aggregate cost arrangements	0	0.0	XXX	XXX		
11. All other payments	232,280,136	100.0	XXX	XXX	232,280,136	
12. Total other payments	232,280,136	100.0	XXX	XXX	232,280,136	
13. Total (Line 4 plus Line 12)	232,280,136	100 %	XXX	XXX	232,280,136	

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT 8 – FURNITURE, EQUIPMENT AND SUPPLIES OWNED

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

NONE



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		5,009													5,009
2. First Quarter		5,272													5,272
3. Second Quarter		5,126													5,126
4. Third Quarter		4,949													4,949
5. Current Year		4,890													4,890
6. Current Year Member Months		61,163													61,163
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).....		4,022,408													4,022,408
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		4,022,408													4,022,408
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		3,515,695													3,515,695
18. Amount Incurred for Provision of Health Care Services		4,190,752													4,190,752

(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 \$ 4,022,408



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

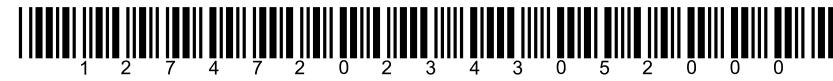
2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Alaska		DURING THE YEAR 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		2,811													2,811
2. First Quarter		565													565
3. Second Quarter		550													550
4. Third Quarter		531													531
5. Current Year		524													524
6. Current Year Member Months		6,560													6,560
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)		587,380													587,380
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		587,380													587,380
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		470,993													470,993
18. Amount Incurred for Provision of Health Care Services		559,716													559,716

(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 \$ 587,380



ANNUAL STATEMENT FOR THE YEAR 2023 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 American Samoa			DURING THE YEAR 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		0													
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)		0													
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		0													
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		0													
18. Amount Incurred for Provision of Health Care Services		0													

(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 \$



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		7,463													7,463
2. First Quarter		6,325													6,325
3. Second Quarter		6,150													6,150
4. Third Quarter		5,938													5,938
5. Current Year		5,867													5,867
6. Current Year Member Months		73,376													73,376
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)		5,329,104													5,329,104
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		5,329,104													5,329,104
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		4,540,897													4,540,897
18. Amount Incurred for Provision of Health Care Services		5,370,720													5,370,720

(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 \$ 5,329,104



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		186													186
2. First Quarter		260													260
3. Second Quarter		253													253
4. Third Quarter		244													244
5. Current Year		241													241
6. Current Year Member Months		3,017													3,017
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).....		548,618													548,618
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		548,618													548,618
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		447,915													447,915
18. Amount Incurred for Provision of Health Care Services		534,848													534,848

(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 \$ 548,618



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF California		DURING THE YEAR 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		111,091												111,091	
2. First Quarter		20,701												20,701	
3. Second Quarter		20,130												20,130	
4. Third Quarter		19,435												19,435	
5. Current Year		19,203												19,203	
6. Current Year Member Months		240,171												240,171	
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).....		22,769,223												22,769,223	
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		22,769,223												22,769,223	
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		22,509,903												22,509,903	
18. Amount Incurred for Provision of Health Care Services		25,651,756												25,651,756	

(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 \$ 22,754,481



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		11,686													11,686
2. First Quarter		2,492													2,492
3. Second Quarter		2,423													2,423
4. Third Quarter		2,340													2,340
5. Current Year		2,312													2,312
6. Current Year Member Months		28,913													28,913
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)		2,682,222													2,682,222
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		2,682,222													2,682,222
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		2,199,438													2,199,438
18. Amount Incurred for Provision of Health Care Services		2,613,758													2,613,758

(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 \$ 2,682,222



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Connecticut			DURING THE YEAR 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		8,688													8,688
2. First Quarter		2,778													2,778
3. Second Quarter		2,701													2,701
4. Third Quarter		2,608													2,608
5. Current Year		2,577													2,577
6. Current Year Member Months		32,230													32,230
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).....		4,454,336													4,454,336
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		4,454,336													4,454,336
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		3,618,209													3,618,209
18. Amount Incurred for Provision of Health Care Services		4,274,220													4,274,220

(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 \$ 4,454,336



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		5,275													5,275
2. First Quarter		1,842													1,842
3. Second Quarter		1,791													1,791
4. Third Quarter		1,729													1,729
5. Current Year		1,709													1,709
6. Current Year Member Months		21,372													21,372
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)		3,631,718													3,631,718
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		3,631,718													3,631,718
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		3,455,010													3,455,010
18. Amount Incurred for Provision of Health Care Services		3,729,098													3,729,098

(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 \$ 3,631,718



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

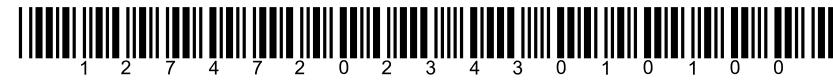
2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF District of Columbia			DURING THE YEAR 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10				
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		2,635													2,635
2. First Quarter		477													477
3. Second Quarter		464													464
4. Third Quarter		448													448
5. Current Year		443													443
6. Current Year Member Months		5,535													5,535
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)		459,427													459,427
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		459,427													459,427
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		358,750													358,750
18. Amount Incurred for Provision of Health Care Services		426,329													426,329

(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 \$ 455,037



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		1,659													1,659
2. First Quarter		2,291													2,291
3. Second Quarter		2,228													2,228
4. Third Quarter		2,151													2,151
5. Current Year		2,125													2,125
6. Current Year Member Months		26,582													26,582
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).....		3,864,307													3,864,307
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		3,864,307													3,864,307
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		3,335,339													3,335,339
18. Amount Incurred for Provision of Health Care Services		3,899,707													3,899,707

(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 \$ 3,864,307



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		17,729													17,729
2. First Quarter		14,753													14,753
3. Second Quarter		14,346													14,346
4. Third Quarter		13,851													13,851
5. Current Year		13,685													13,685
6. Current Year Member Months		171,162													171,162
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)		12,948,225													12,948,225
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		12,948,225													12,948,225
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		10,701,312													10,701,312
18. Amount Incurred for Provision of Health Care Services		12,699,278													12,699,278

(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 \$ 12,948,225



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Guam		DURING THE YEAR 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		0													
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)		1,108													1,108
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		1,108													1,108
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		0													0
18. Amount Incurred for Provision of Health Care Services		0													0

(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 \$ 1,108



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

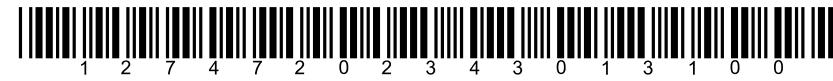
2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Hawaii		DURING THE YEAR 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		46													46
2. First Quarter		79													79
3. Second Quarter		76													76
4. Third Quarter		74													74
5. Current Year		73													73
6. Current Year Member Months		911													911
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).....		33,121													33,121
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		33,121													33,121
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		29,966													29,966
18. Amount Incurred for Provision of Health Care Services		35,151													35,151

(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 \$ 33,121



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Idaho		DURING THE YEAR 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		2,632													2,632
2. First Quarter		733													733
3. Second Quarter		713													713
4. Third Quarter		688													688
5. Current Year		680													680
6. Current Year Member Months		8,505													8,505
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)		543,652													543,652
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		543,652													543,652
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		451,822													451,822
18. Amount Incurred for Provision of Health Care Services		535,655													535,655

(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 \$ 543,652

30.ID



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		17,137													17,137
2. First Quarter		15,839													15,839
3. Second Quarter		15,402													15,402
4. Third Quarter		14,871													14,871
5. Current Year		14,693													14,693
6. Current Year Member Months		183,767													183,767
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)		13,311,238													13,311,238
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		13,311,238													13,311,238
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		10,358,327													10,358,327
18. Amount Incurred for Provision of Health Care Services		11,832,385													11,832,385

(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 \$ 12,986,978



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

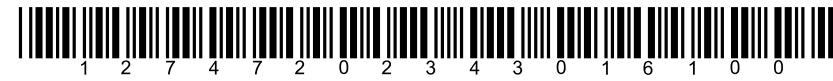
2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Indiana			DURING THE YEAR 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		2,772													2,772
2. First Quarter		1,771													1,771
3. Second Quarter		1,722													1,722
4. Third Quarter		1,662													1,662
5. Current Year		1,642													1,642
6. Current Year Member Months		20,541													20,541
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)		2,447,811													2,447,811
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		2,447,811													2,447,811
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		1,809,456													1,809,456
18. Amount Incurred for Provision of Health Care Services		2,150,314													2,150,314

(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 \$ 2,440,230



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		291													291
2. First Quarter		383													383
3. Second Quarter		373													373
4. Third Quarter		360													360
5. Current Year		356													356
6. Current Year Member Months		4,446													4,446
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)		268,856													268,856
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		268,856													268,856
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		225,810													225,810
18. Amount Incurred for Provision of Health Care Services		269,625													269,625

(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 \$ 268,856



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		304													304
2. First Quarter		375													375
3. Second Quarter		364													364
4. Third Quarter		352													352
5. Current Year		348													348
6. Current Year Member Months		4,348													4,348
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)		284,033													284,033
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		284,033													284,033
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		243,673													243,673
18. Amount Incurred for Provision of Health Care Services		311,257													311,257

(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 \$ 284,033

30.KS



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Kentucky			DURING THE YEAR 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		1,877													1,877
2. First Quarter		1,921													1,921
3. Second Quarter		1,868													1,868
4. Third Quarter		1,803													1,803
5. Current Year		1,782													1,782
6. Current Year Member Months		22,287													22,287
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).....		1,569,239													1,569,239
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		1,569,239													1,569,239
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		1,455,883													1,455,883
18. Amount Incurred for Provision of Health Care Services		1,730,135													1,730,135

(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 \$1,569,239

30.KY



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		257													257
2. First Quarter		390													390
3. Second Quarter		379													379
4. Third Quarter		366													366
5. Current Year		362													362
6. Current Year Member Months		4,524													4,524
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).....		451,337													451,337
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		451,337													451,337
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		410,518													410,518
18. Amount Incurred for Provision of Health Care Services		487,850													487,850

(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 \$ 451,337



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Maine			DURING THE YEAR 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		6,790													6,790
2. First Quarter		2,557													2,557
3. Second Quarter		2,486													2,486
4. Third Quarter		2,400													2,400
5. Current Year		2,372													2,372
6. Current Year Member Months		29,661													29,661
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)		1,997,675													1,997,675
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		1,997,675													1,997,675
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		1,804,789													1,804,789
18. Amount Incurred for Provision of Health Care Services		2,144,767													2,144,767

(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 \$ 1,997,675



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		22,217													22,217
2. First Quarter		9,377													9,377
3. Second Quarter		9,118													9,118
4. Third Quarter		8,803													8,803
5. Current Year		8,698													8,698
6. Current Year Member Months		108,786													108,786
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)		7,566,472													7,566,472
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		7,566,472													7,566,472
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		6,242,403													6,242,403
18. Amount Incurred for Provision of Health Care Services		7,449,004													7,449,004

(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 \$ 7,566,472



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10				
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		24,709													24,709
2. First Quarter		9,409													9,409
3. Second Quarter		9,149													9,149
4. Third Quarter		8,833													8,833
5. Current Year		8,728													8,728
6. Current Year Member Months		109,157													109,157
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)		9,183,111													9,183,111
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		9,183,111													9,183,111
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		8,211,771													8,211,771
18. Amount Incurred for Provision of Health Care Services		9,758,668													9,758,668

(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 \$ 9,183,111



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		32,053													32,053
2. First Quarter		21,812													21,812
3. Second Quarter		21,210													21,210
4. Third Quarter		20,478													20,478
5. Current Year		20,233													20,233
6. Current Year Member Months		253,059													253,059
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)		16,749,426													16,749,426
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		16,749,426													16,749,426
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		13,394,470													13,394,470
18. Amount Incurred for Provision of Health Care Services		15,917,661													15,917,661

(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 \$ 16,695,715



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

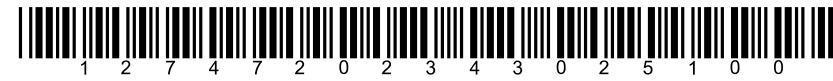
2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Minnesota			DURING THE YEAR 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		237													237
2. First Quarter		380													380
3. Second Quarter		369													369
4. Third Quarter		357													357
5. Current Year		352													352
6. Current Year Member Months		4,406													4,406
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)		345,216													345,216
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		345,216													345,216
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		286,480													286,480
18. Amount Incurred for Provision of Health Care Services		340,445													340,445

(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 \$ 345,216



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		10,919												10,919	
2. First Quarter		11,231												11,231	
3. Second Quarter		10,921												10,921	
4. Third Quarter		10,544												10,544	
5. Current Year		10,418												10,418	
6. Current Year Member Months		130,302												130,302	
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)		8,081,741												8,081,741	
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		8,081,741												8,081,741	
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		6,616,365												6,616,365	
18. Amount Incurred for Provision of Health Care Services		7,913,870												7,913,870	

(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 \$ 8,081,741



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		355													355
2. First Quarter		368													368
3. Second Quarter		358													358
4. Third Quarter		346													346
5. Current Year		342													342
6. Current Year Member Months		4,272													4,272
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)		429,901													429,901
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		429,901													429,901
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		362,824													362,824
18. Amount Incurred for Provision of Health Care Services		431,171													431,171

(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 \$ 429,901



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		161													161
2. First Quarter		244													244
3. Second Quarter		237													237
4. Third Quarter		229													229
5. Current Year		226													226
6. Current Year Member Months		2,825													2,825
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).....		182,034													182,034
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		182,034													182,034
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		151,176													151,176
18. Amount Incurred for Provision of Health Care Services		180,676													180,676

(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 \$ 182,034



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		191													191
2. First Quarter		190													190
3. Second Quarter		185													185
4. Third Quarter		179													179
5. Current Year		177													177
6. Current Year Member Months		2,209													2,209
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).....		171,153													171,153
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		171,153													171,153
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		123,296													123,296
18. Amount Incurred for Provision of Health Care Services		146,522													146,522

(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 \$ 171,153



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		186													186
2. First Quarter		340													340
3. Second Quarter		330													330
4. Third Quarter		319													319
5. Current Year		315													315
6. Current Year Member Months		3,942													3,942
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)		239,634													239,634
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		239,634													239,634
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		212,687													212,687
18. Amount Incurred for Provision of Health Care Services		251,474													251,474

(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 \$ 239,634



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF New Hampshire			DURING THE YEAR 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		10,540													10,540
2. First Quarter		3,937													3,937
3. Second Quarter		3,828													3,828
4. Third Quarter		3,696													3,696
5. Current Year		3,652													3,652
6. Current Year Member Months		45,673													45,673
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)		4,337,874													4,337,874
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		4,337,874													4,337,874
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		2,841,781													2,841,781
18. Amount Incurred for Provision of Health Care Services		4,077,103													4,077,103

(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 \$ 4,337,874



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year .....		.831													.831
2. First Quarter		1,183													1,183
3. Second Quarter		1,150													1,150
4. Third Quarter		1,111													1,111
5. Current Year		1,097													1,097
6. Current Year Member Months		13,724													13,724
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)		1,410,987													1,410,987
13. Life Premiums Direct .....		.0													
14. Property/Casualty Premiums Written .....		.0													
15. Health Premiums Earned		1,410,987													1,410,987
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		1,302,839													1,302,839
18. Amount Incurred for Provision of Health Care Services		1,498,263													1,498,263

(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 \$1,409,257



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		4,459													4,459
2. First Quarter		3,372													3,372
3. Second Quarter		3,279													3,279
4. Third Quarter		3,166													3,166
5. Current Year		3,128													3,128
6. Current Year Member Months		39,126													39,126
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)		2,473,954													2,473,954
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		2,473,954													2,473,954
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		2,198,820													2,198,820
18. Amount Incurred for Provision of Health Care Services		2,596,402													2,596,402

(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 \$ 2,473,954



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		17,104													17,104
2. First Quarter		14,287													14,287
3. Second Quarter		13,893													13,893
4. Third Quarter		13,413													13,413
5. Current Year		13,253													13,253
6. Current Year Member Months		165,757													165,757
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)		16,196,032													16,196,032
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		16,196,032													16,196,032
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		13,726,514													13,726,514
18. Amount Incurred for Provision of Health Care Services		16,312,254													16,312,254

(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 \$ 16,195,223



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		29,080													29,080
2. First Quarter		12,037													12,037
3. Second Quarter		11,705													11,705
4. Third Quarter		11,300													11,300
5. Current Year		11,165													11,165
6. Current Year Member Months		139,648													139,648
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).....		9,574,356													9,574,356
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		9,574,356													9,574,356
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		8,119,055													8,119,055
18. Amount Incurred for Provision of Health Care Services		9,699,630													9,699,630

(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 \$ 9,573,482



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

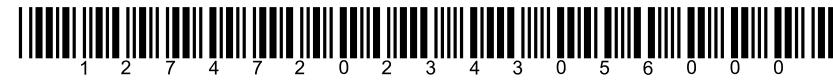
2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF North Dakota		DURING THE YEAR 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		75													75
2. First Quarter		116													116
3. Second Quarter		113													113
4. Third Quarter		109													109
5. Current Year		107													107
6. Current Year Member Months		1,343													1,343
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)		105,944													105,944
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		105,944													105,944
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		77,750													77,750
18. Amount Incurred for Provision of Health Care Services		92,396													92,396

(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 \$ 105,944



ANNUAL STATEMENT FOR THE YEAR 2023 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 Northern Mariana Islands			DURING THE YEAR 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10				
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		0													
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)		0													
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		0													
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		0													
18. Amount Incurred for Provision of Health Care Services		0													

(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 \$



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		87,768													87,768
2. First Quarter		14,624													14,624
3. Second Quarter		14,220													14,220
4. Third Quarter		13,729													13,729
5. Current Year		13,565													13,565
6. Current Year Member Months		169,662													169,662
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)		13,808,477													13,808,477
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		13,808,477													13,808,477
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		11,167,027													11,167,027
18. Amount Incurred for Provision of Health Care Services		13,283,614													13,283,614

(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 \$ 13,808,477



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		224													224
2. First Quarter		303													303
3. Second Quarter		294													294
4. Third Quarter		284													284
5. Current Year		281													281
6. Current Year Member Months		3,511													3,511
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).....		227,125													227,125
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		227,125													227,125
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		175,552													175,552
18. Amount Incurred for Provision of Health Care Services		208,621													208,621

(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 \$ 227,125



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		22,904												22,904	
2. First Quarter		13,899												13,899	
3. Second Quarter		13,516												13,516	
4. Third Quarter		13,049												13,049	
5. Current Year		12,893												12,893	
6. Current Year Member Months		161,258												161,258	
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)		11,116,116												11,116,116	
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		11,116,116												11,116,116	
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		8,822,389												8,822,389	
18. Amount Incurred for Provision of Health Care Services		10,484,311												10,484,311	

(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 \$ 11,116,116



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

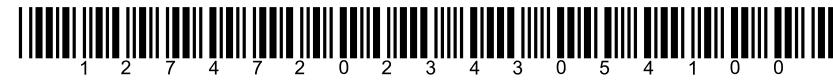
2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Pennsylvania			DURING THE YEAR 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10				
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year .....		.65,187													.65,187
2. First Quarter		37,804													37,804
3. Second Quarter		36,761													36,761
4. Third Quarter		35,492													35,492
5. Current Year		35,068													35,068
6. Current Year Member Months		438,597													438,597
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)		31,996,187													31,996,187
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		31,996,187													31,996,187
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		23,905,684													23,905,684
18. Amount Incurred for Provision of Health Care Services		28,785,682													28,785,682

(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 \$ 31,995,158



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Puerto Rico			DURING THE YEAR 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year .....		.0													
2. First Quarter		18													18
3. Second Quarter		18													18
4. Third Quarter		17													17
5. Current Year		17													17
6. Current Year Member Months		213													213
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).....		7,828													7,828
13. Life Premiums Direct.....		.0													
14. Property/Casualty Premiums Written.....		.0													
15. Health Premiums Earned.....		7,828													7,828
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services .....		.0													0
18. Amount Incurred for Provision of Health Care Services		0													0

(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 \$ 7,828



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

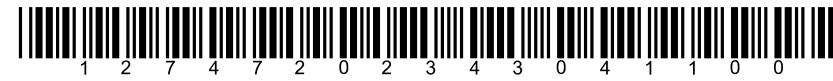
2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Rhode Island			DURING THE YEAR 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		2,699													2,699
2. First Quarter		975													975
3. Second Quarter		949													949
4. Third Quarter		916													916
5. Current Year		905													905
6. Current Year Member Months		11,317													11,317
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)		947,472													947,472
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		947,472													947,472
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		856,602													856,602
18. Amount Incurred for Provision of Health Care Services		1,017,964													1,017,964

(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 \$ 947,472



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		19,998												19,998	
2. First Quarter		14,369												14,369	
3. Second Quarter		13,973												13,973	
4. Third Quarter		13,490												13,490	
5. Current Year		13,329												13,329	
6. Current Year Member Months		166,711												166,711	
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)		13,065,020												13,065,020	
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		13,065,020												13,065,020	
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		10,926,870												10,926,870	
18. Amount Incurred for Provision of Health Care Services		12,976,224												12,976,224	

(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 \$ 13,065,020



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

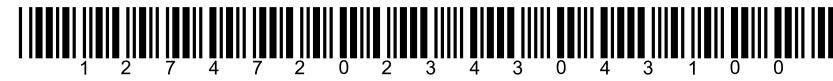
2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF South Dakota		DURING THE YEAR 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		89													89
2. First Quarter		90													90
3. Second Quarter		87													87
4. Third Quarter		84													84
5. Current Year		83													83
6. Current Year Member Months		1,043													1,043
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).....		93,018													93,018
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		93,018													93,018
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		79,072													79,072
18. Amount Incurred for Provision of Health Care Services		93,968													93,968

(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 \$ 93,018



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		6,721													6,721
2. First Quarter		6,712													6,712
3. Second Quarter		6,527													6,527
4. Third Quarter		6,302													6,302
5. Current Year		6,227													6,227
6. Current Year Member Months		77,876													77,876
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)		5,277,634													5,277,634
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		5,277,634													5,277,634
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		4,581,346													4,581,346
18. Amount Incurred for Provision of Health Care Services		5,457,145													5,457,145

(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 \$ 5,255,857



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

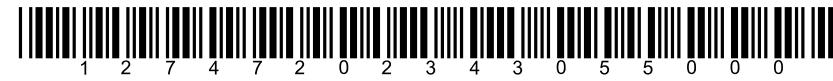
(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Texas		DURING THE YEAR 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		22,419												22,419	
2. First Quarter		5,554												5,554	
3. Second Quarter		5,401												5,401	
4. Third Quarter		5,215												5,215	
5. Current Year		5,152												5,152	
6. Current Year Member Months		64,440												64,440	
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)		7,102,447												7,102,447	
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		7,102,447												7,102,447	
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		6,714,927												6,714,927	
18. Amount Incurred for Provision of Health Care Services		7,297,540												7,297,540	

(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 \$ 7,102,447

30.TX



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

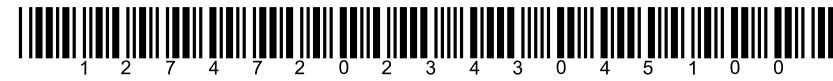
2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF U.S. Virgin Islands			DURING THE YEAR 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10				
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		0													
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)		0													
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		0													
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		0													
18. Amount Incurred for Provision of Health Care Services		0													

(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 \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

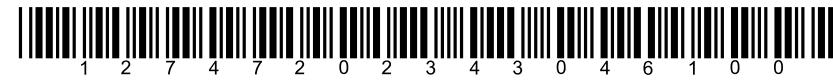
2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Utah			DURING THE YEAR 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		2,214													2,214
2. First Quarter		434													434
3. Second Quarter		422													422
4. Third Quarter		407													407
5. Current Year		402													402
6. Current Year Member Months		5,032													5,032
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)		349,488													349,488
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		349,488													349,488
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		277,481													277,481
18. Amount Incurred for Provision of Health Care Services		328,474													328,474

(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 \$ 349,488



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		4,426													4,426
2. First Quarter		2,272													2,272
3. Second Quarter		2,210													2,210
4. Third Quarter		2,133													2,133
5. Current Year		2,108													2,108
6. Current Year Member Months		26,362													26,362
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)		2,437,750													2,437,750
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		2,437,750													2,437,750
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		2,096,680													2,096,680
18. Amount Incurred for Provision of Health Care Services		2,491,643													2,491,643

(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 \$ 2,437,750



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Virginia		DURING THE YEAR 2023							NAIC Company Code	12747			
		1	Comprehensive Hospital & Medical)	4	5	6	7	8	9	10					
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		6,866												6,866	
2. First Quarter		2,546												2,546	
3. Second Quarter		2,476												2,476	
4. Third Quarter		2,390												2,390	
5. Current Year		2,362												2,362	
6. Current Year Member Months		29,540												29,540	
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)		2,534,015												2,534,015	
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		2,534,015												2,534,015	
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		2,286,794												2,286,794	
18. Amount Incurred for Provision of Health Care Services		2,717,570												2,717,570	

(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 \$ 2,534,015



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10				
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		34,307													34,307
2. First Quarter		20,979													20,979
3. Second Quarter		20,400													20,400
4. Third Quarter		19,695													19,695
5. Current Year		19,460													19,460
6. Current Year Member Months		243,391													243,391
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)		16,480,203													16,480,203
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		16,480,203													16,480,203
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		14,631,787													14,631,787
18. Amount Incurred for Provision of Health Care Services		17,349,701													17,349,701

(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 \$ 16,480,203



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10				
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		8,277													8,277
2. First Quarter		6,095													6,095
3. Second Quarter		5,927													5,927
4. Third Quarter		5,722													5,722
5. Current Year		5,654													5,654
6. Current Year Member Months		70,716													70,716
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).....		4,748,180													4,748,180
13. Life Premiums Direct.....		0													
14. Property/Casualty Premiums Written.....		0													
15. Health Premiums Earned.....		4,748,180													4,748,180
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		4,157,222													4,157,222
18. Amount Incurred for Provision of Health Care Services		4,940,341													4,940,341

(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 \$ 4,748,180



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Elixir Insurance Company

2. _____

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Wisconsin			DURING THE YEAR 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		7,049													7,049
2. First Quarter		7,392													7,392
3. Second Quarter		7,189													7,189
4. Third Quarter		6,940													6,940
5. Current Year		6,857													6,857
6. Current Year Member Months		85,766													85,766
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)		6,855,323													6,855,323
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		6,855,323													6,855,323
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		5,679,282													5,679,282
18. Amount Incurred for Provision of Health Care Services		6,722,781													6,722,781

(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 \$ 6,855,323



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023							NAIC Company Code	12747		
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:															
1. Prior Year		110													110
2. First Quarter		122													122
3. Second Quarter		118													118
4. Third Quarter		114													114
5. Current Year		113													113
6. Current Year Member Months		1,413													1,413
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)		119,272													119,272
13. Life Premiums Direct		0													
14. Property/Casualty Premiums Written		0													
15. Health Premiums Earned		119,272													119,272
16. Property/Casualty Premiums Earned		0													
17. Amount Paid for Provision of Health Care Services		109,486													109,486
18. Amount Incurred for Provision of Health Care Services		130,110													130,110

(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 \$ 119,272



ANNUAL STATEMENT FOR THE YEAR 2023 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 2023										NAIC Company Code	12747	
		1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14		
		Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health		
Total Members at end of:																	
1. Prior Year		650,713	0	0	0	0	0	0	0	0	0	0	0	0	0	650,713	0
2. First Quarter		304,275	0	0	0	0	0	0	0	0	0	0	0	0	0	304,275	0
3. Second Quarter		295,880	0	0	0	0	0	0	0	0	0	0	0	0	0	295,880	0
4. Third Quarter		285,664	0	0	0	0	0	0	0	0	0	0	0	0	0	285,664	0
5. Current Year		282,251	0	0	0	0	0	0	0	0	0	0	0	0	0	282,251	0
6. Current Year Member Months		3,530,150	0	0	0	0	0	0	0	0	0	0	0	0	0	3,530,150	0
Total Member Ambulatory Encounters for Year:																	
7. Physician		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Non-Physician		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11. Number of Inpatient Admissions		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Health Premiums Written (b).....		276,418,431	0	0	0	0	0	0	0	0	0	0	0	0	0	276,418,431	0
13. Life Premiums Direct.....		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Property/Casualty Premiums Written.....		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned.....		276,418,431	0	0	0	0	0	0	0	0	0	0	0	0	0	276,418,431	0
16. Property/Casualty Premiums Earned.....		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services		232,280,136	0	0	0	0	0	0	0	0	0	0	0	0	0	232,280,136	0
18. Amount Incurred for Provision of Health Care Services		274,398,549	0	0	0	0	0	0	0	0	0	0	0	0	0	274,398,549	0

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$275,987,529

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

SCHEDULE S - PART 1 - SECTION 2

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

SCHEDULE S - PART 2

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

SCHEDULE S - PART 3 - SECTION 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11 Current Year	12 Prior Year		
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates													
82627.....06-0839705.....01/01/2015.....SWISS RE LIFE & HLTH AMER INC.....MO.....MD.....							(525,357)						
0899999 - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates							(525,357)	0	0	0	0	0	0
1099999 - General Account - Authorized - Non-Affiliates - Total Authorized Non-Affiliates							(525,357)	0	0	0	0	0	0
1199999 - General Account - Authorized - Total General Account Authorized							(525,357)	0	0	0	0	0	0
General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates													
.....01/01/2017.....Artex SAC Ltd/Fleet ENX Segregated Acct.....BMU.....MD.....							10,834,365						
2099999 - General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates							10,834,365	0	0	0	0	0	0
2199999 - General Account - Unauthorized - Non-Affiliates - Total Unauthorized Non-Affiliates							10,834,365	0	0	0	0	0	0
2299999 - General Account - Unauthorized - Total General Account Unauthorized							10,834,365	0	0	0	0	0	0
4599999 - General Account - Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction and Certified							10,309,008	0	0	0	0	0	0
9199999 - Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)							(525,357)	0	0	0	0	0	0
9299999 - Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)							10,834,365	0	0	0	0	0	0
9999999 Totals							10,309,008	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total (Cols. 5+6+7)	9 Letters of Credit	10 Issuing or Confirming Bank Reference Number (a)	11 Trust Agreements	12 Funds Deposited by and Withheld from Reinsurers	13 Other	14 Miscellaneous Balances (Credit)	15 Sum of Cols 9+11+12+13+14 but not in Excess of Col. 8
General Account - Life and Annuity - Affiliates - U.S. - Other		01/01/2017	Artex SAC Ltd/Fleet ENX Segregated Acct		2,799,003	43,347	2,842,350				2,647,819			2,647,819
0299999 - General Account - Life and Annuity - Affiliates - U.S. - Other				0	2,799,003	43,347	2,842,350	0	XXX	0	2,647,819	0	0	2,647,819
0399999 - General Account - Life and Annuity - Affiliates - U.S. - Total				0	2,799,003	43,347	2,842,350	0	XXX	0	2,647,819	0	0	2,647,819
0799999 - General Account - Life and Annuity - Affiliates - Total Affiliates				0	2,799,003	43,347	2,842,350	0	XXX	0	2,647,819	0	0	2,647,819
1199999 - General Account - Life and Annuity - Total Life and Annuity				0	2,799,003	43,347	2,842,350	0	XXX	0	2,647,819	0	0	2,647,819
2399999 - General Account - Total General Account				0	2,799,003	43,347	2,842,350	0	XXX	0	2,647,819	0	0	2,647,819
3599999 - Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2699999 and 3199999)				0	2,799,003	43,347	2,842,350	0	XXX	0	2,647,819	0	0	2,647,819
9999999 Totals				0	2,799,003	43,347	2,842,350	0	XXX	0	2,647,819	0	0	2,647,819

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

SCHEDULE S - PART 5

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

NONE

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

SCHEDULE S – PART 6

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

	1 2023	2 2022	3 2021	4 2020	5 2019
A. OPERATIONS ITEMS					
1. Premiums.....	10,309	11,652	11,055	12,844	17,832
2. Title XVIII-Medicare.....	0	0	0	0	0
3. Title XIX-Medicaid.....	0	0	0	0	0
4. Commissions and reinsurance expense allowance.....	0	0	0	0	0
5. Total hospital and medical expenses.....	0	8,226	8,548	11,545	
B. BALANCE SHEET ITEMS					
6. Premiums receivable	0	0	0	0	0
7. Claims payable.....	0	3,006	904	789	
8. Reinsurance recoverable on paid losses.....	0	0	0	0	0
9. Experience rating refunds due or unpaid.....	0	0	0	0	0
10. Commissions and reinsurance expense allowances due.....	0	0	0	0	0
11. Unauthorized reinsurance offset.....	2,648	3,017	4,478	3,406	3,809
12. Offset for reinsurance with Certified Reinsurers.....	0	0	0	0	0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
13. Funds deposited by and withheld from (F).....	2,648	3,017	4,478	3,406	3,809
14. Letters of credit (L).....	0	0	500	500	500
15. Trust agreements (T).....	0	0	0	0	0
16. Other (O).....	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17. Multiple Beneficiary Trust.....	0	0	0	0	0
18. Funds deposited by and withheld from (F)	0	0	0	0	0
19. Letters of credit (L).....	0	0	0	0	0
20. Trust agreements (T).....	0	0	0	0	0
21. Other (O).....	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	124,950,898		124,950,898
2. Accident and health premiums due and unpaid (Line 15)	113,301,449		113,301,449
3. Amounts recoverable from reinsurers (Line 16.1)	0		0
4. Net credit for ceded reinsurance	XXX	4,271,371	4,271,371
5. All other admitted assets (Balance)	308,574,074		308,574,074
6. Total assets (Line 28)	546,826,421	4,271,371	551,097,792
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1)	130,366,598	2,799,003	133,165,601
8. Accrued medical incentive pool and bonus payments (Line 2)	0		0
9. Premiums received in advance (Line 8)	2,798,340		2,798,340
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19, first inset amount plus second inset amount)	2,647,819	1,472,368	4,120,187
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)	354,087,225	0	354,087,225
15. Total liabilities (Line 24)	489,899,982	4,271,371	494,171,353
16. Total capital and surplus (Line 33)	56,926,439	XXX	56,926,439
17. Total liabilities, capital and surplus (Line 34)	546,826,421	4,271,371	551,097,792
NET CREDIT FOR CEDED REINSURANCE			
18. Claims unpaid	2,799,003		
19. Accrued medical incentive pool	0		
20. Premiums received in advance	0		
21. Reinsurance recoverable on paid losses	0		
22. Other ceded reinsurance recoverables	0		
23. Total ceded reinsurance recoverables	2,799,003		
24. Premiums receivable	0		
25. Funds held under reinsurance treaties with authorized and unauthorized reinsurers	(1,472,368)		
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	0		
30. Total ceded reinsurance payables/offsets	(1,472,368)		
31. Total net credit for ceded reinsurance	4,271,371		

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

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

Allocated By States and Territories

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

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

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

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

SCHEDULE Y

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

SCHEDULE Y

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Elixir Insurance Company

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

MARCH FILING

	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.....
19. Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with the applicable jurisdictions and with the NAIC by March 1?	.....NO.....

APRIL FILING

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

AUGUST FILING

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

10. The Company does not offer Medicare Supplement Insurance

11. The Company does not offer Life Insurance

12. The Company has less than 100 shareholders

13. The Company does not write Life Insurance

14. The Company does not write Life Insurance

16. Not Applicable

17. Not Applicable

18. Not Applicable

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

20. Not Required

23. Not Required by state of Ohio

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

Bar code:

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

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OVERFLOW PAGE FOR WRITE-INS



SUPPLEMENT FOR THE YEAR 2023 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.....	132,852,153	XXX.....	6,587,094	XXX.....	139,439,247
1.12 Without Reinsurance Coverage.....		XXX.....		XXX.....	0
1.13 Risk-Corridor Payment Adjustments.....	101,973,240	XXX.....		XXX.....	101,973,240
1.2 Supplemental Benefits.....		XXX.....		XXX.....	0
2. Premiums Due and Uncollected-change					
2.1 Standard Coverage					
2.11 With Reinsurance Coverage	1,019,284	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.....	23,677,654	XXX.....		XXX.....	XXX.....
4.2 Payable.....		XXX.....		XXX.....	XXX.....
5. Earned Premiums					
5.1 Standard Coverage					
5.11 With Reinsurance Coverage.....	133,871,437	XXX.....	6,587,094	XXX.....	XXX.....
5.12 Without Reinsurance Coverage.....		XXX.....		XXX.....	XXX.....
5.13 Risk-Corridor Payment Adjustments.....	125,650,893	XXX.....		XXX.....	XXX.....
5.2 Supplemental Benefits		XXX.....		XXX.....	XXX.....
6. Total Premiums.....	259,522,330	XXX.....	6,587,094	XXX.....	241,412,487
7. Claims Paid					
7.1 Standard Coverage					
7.11 With Reinsurance Coverage.....	206,311,735	XXX.....	4,464,216	XXX.....	210,775,951
7.12 Without Reinsurance Coverage.....		XXX.....		XXX.....	0
7.2 Supplemental Benefits.....	12,212,117	XXX.....		XXX.....	12,212,117
8. Claim Reserves and Liabilities-change					
8.1 Standard Coverage					
8.11 With Reinsurance Coverage.....	39,427,284	XXX.....	805,459	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.....	245,739,019	XXX.....	5,269,675	XXX.....	XXX.....
10.12 Without Reinsurance Coverage.....	0	XXX.....	0	XXX.....	XXX.....
10.2 Supplemental Benefits.....	12,212,117	XXX.....	0	XXX.....	XXX.....
11. Total Claims	257,951,136	XXX.....	5,269,675	XXX.....	222,988,068
12. Reinsurance Coverage and Low Income Cost Sharing					
12.1 Claims Paid – Net of Reimbursements Applied.....	XXX.....	.72,122,489	XXX.....	1,830,585	73,953,074
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.....					XXX.....
14. Expenses Paid.....	10,732,978	XXX.....	.392,880	XXX.....	11,125,858
15. Expenses Incurred.....	.9,018,081	XXX.....	.330,106	XXX.....	XXX.....
16. Underwriting Gain/Loss.....	(7,446,887)	XXX.....	987,313	XXX.....	XXX.....
17. Cash Flow Result	XXX.....	XXX.....	XXX.....	XXX.....	(66,654,513)