



HEALTH QUARTERLY STATEMENT
 AS OF SEPTEMBER 30, 2023
 OF THE CONDITION AND AFFAIRS OF THE
EMPOWER HEALTHCARE SOLUTIONS LLC

NAIC Group Code 0000 0000 NAIC Company Code 16244 Employer's ID Number 82-1454637
 (Current) (Prior)

Organized under the Laws of Arkansas, State of Domicile or Port of Entry AR

Country of Domicile United States of America

Licensed as business type: Other

Is HMO Federally Qualified? Yes [] No []

Incorporated/Organized 02/05/2017 Commenced Business 02/01/2018

Statutory Home Office 17500 CHENAL PARKWAY, SUITE 300, LITTLE ROCK, AR, US 72223
 (Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 17500 CHENAL PARKWAY, SUITE 300
 (Street and Number)
LITTLE ROCK, AR, US 72223
 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 17500 CHENAL PARKWAY, SUITE 300, LITTLE ROCK, AR, US 72223
 (Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 17500 CHENAL PARKWAY, SUITE 300
 (Street and Number)
LITTLE ROCK, AR, US 72223
 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address WWW.GETEMPOWERHEALTH.COM

Statutory Statement Contact David John Zdechlik, 501-516-2603
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 (E-mail Address) (FAX Number)

OFFICERS

CHIEF EXECUTIVE OFFICER <u>DOUGLAS MITCHELL MORRIS</u>	CHIEF FINANCIAL OFFICER <u>MARTIN WAYNE CATRON</u>
CHIEF OPERATING OFFICER <u>GREGORY MARK LUECK</u>	TREASURER <u>MARK ANTHONY HARTMAN</u>

OTHER

<u>DR. JOSHUA BRIAN WILSON</u>	<u>ELIZABETH HEISLER GINTY</u>	<u>SYLVIA ANN SHERRILL, VP QUALITY AND HEALTH SERVICES</u>
<u>DR. BRADLEY DINER, CHIEF MEDICAL OFFICER</u>		

DIRECTORS OR TRUSTEES

<u>DR. JOSHUA BRIAN WILSON</u>	<u>ELIZABETH HEISLER GINTY</u>	<u>MARK ANTHONY HARTMAN</u>
<u>DAVID LAMAR NORSWORTHY</u>	<u>DR. STEVEN FRANKLIN COLLIER</u>	<u>TANNER JOE COPE</u>

State of Arkansas SS:
 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.

Douglas Mitchell Morris
 Chief Executive Officer

Martin Wayne Catron
 Chief Financial Officer

Gregory Mark Lueck
 Chief Operating Officer

Subscribed and sworn to before me this _____ day of _____

- a. Is this an original filing? Yes [X] No []
 b. If no,
 1. State the amendment number.....
 2. Date filed11/15/2023
 3. Number of pages attached.....

STATEMENT AS OF SEPTEMBER 30, 2023 OF THE EMPOWER HEALTHCARE SOLUTIONS LLC

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	121,514,624		121,514,624	143,212,340
2. Stocks:				
2.1 Preferred stocks	3,793,525		3,793,525	4,027,600
2.2 Common stocks	4,597,130		4,597,130	4,343,480
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens.....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$ 11,512,440), cash equivalents (\$ 14,060) and short-term investments (\$ 4,119,918)	15,646,419		15,646,419	41,692,748
6. Contract loans (including \$ premium notes)			0	0
7. Derivatives			0	0
8. Other invested assets			0	0
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	145,551,698	0	145,551,698	193,276,168
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	688,344		688,344	758,272
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection			0	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)			0	0
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers			0	0
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon			0	0
18.2 Net deferred tax asset	847,531		847,531	847,531
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software	1,111,852	1,111,852	0	384,089
21. Furniture and equipment, including health care delivery assets (\$)	1,328,621	1,328,621	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates			0	0
24. Health care (\$) and other amounts receivable	5,550,000		5,550,000	0
25. Aggregate write-ins for other than invested assets	458,473	458,473	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	155,536,519	2,898,946	152,637,573	195,266,060
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	155,536,519	2,898,946	152,637,573	195,266,060
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Other Receivables	132,886	132,886	0	0
2502. Prepaid Expenses	325,587	325,587	0	0
2503. Provider Advances	0	0	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	458,473	458,473	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ reinsurance ceded)	33,748,141		33,748,141	35,477,510
2. Accrued medical incentive pool and bonus amounts	653,999		653,999	712,345
3. Unpaid claims adjustment expenses	729,664		729,664	765,175
4. Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act	61,562,611		61,562,611	87,707,811
5. Aggregate life policy reserves			0	0
6. Property/casualty unearned premium reserve			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance			0	0
9. General expenses due or accrued	8,088,020		8,088,020	8,392,814
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))			0	1,164,591
10.2 Net deferred tax liability			0	0
11. Ceded reinsurance premiums payable			0	0
12. Amounts withheld or retained for the account of others.....			0	0
13. Remittances and items not allocated			0	0
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current)			0	0
15. Amounts due to parent, subsidiaries and affiliates			0	0
16. Derivatives			0	0
17. Payable for securities			0	0
18. Payable for securities lending			0	0
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers).....			0	0
20. Reinsurance in unauthorized and certified (\$) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans			0	0
23. Aggregate write-ins for other liabilities (including \$ current)	353,384	0	353,384	836,438
24. Total liabilities (Lines 1 to 23)	105,135,819	0	105,135,819	135,056,684
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX	7,695,000	7,695,000
27. Preferred capital stock	XXX	XXX		22,305,000
28. Gross paid in and contributed surplus	XXX	XXX	25,000	25,000
29. Surplus notes	XXX	XXX		
30. Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	39,781,754	30,184,376
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 \$)	XXX	XXX		
32.2 shares preferred (value included in Line 27 \$)	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	47,501,754	60,209,376
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	152,637,573	195,266,060
DETAILS OF WRITE-INS				
2301. Dividends Payable to Shareholders	0		0	836,438
2302. Lease Incentive	353,384		353,384	
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	353,384	0	353,384	836,438
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months	XXX	171,766	179,686	240,654
2. Net premium income (including \$ non-health premium income).....	XXX	356,258,127	345,278,729	480,462,240
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	(16,065,738)	(28,933,142)	(60,546,452)
4. Fee-for-service (net of \$ medical expenses).....	XXX			
5. Risk revenue	XXX			
6. Aggregate write-ins for other health care related revenues	XXX	1,515,142	0	12,135,715
7. Aggregate write-ins for other non-health revenues	XXX	688	0	15
8. Total revenues (Lines 2 to 7)	XXX	341,708,219	316,345,587	432,051,518
Hospital and Medical:				
9. Hospital/medical benefits		183,767,264	158,416,867	223,286,627
10. Other professional services		45,720,343	39,499,062	53,793,714
11. Outside referrals		0		
12. Emergency room and out-of-area		6,456,723	6,674,813	9,169,057
13. Prescription drugs		36,082,251	32,986,554	44,266,478
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts		1,133,602	1,267,869	1,680,691
16. Subtotal (Lines 9 to 15)	0	273,160,183	238,845,165	332,196,567
Less:				
17. Net reinsurance recoveries				
18. Total hospital and medical (Lines 16 minus 17)	0	273,160,183	238,845,165	332,196,567
19. Non-health claims (net)				
20. Claims adjustment expenses, including \$ cost containment expenses		2,731,144	8,014,872	3,707,073
21. General administrative expenses		50,718,772	38,398,742	59,499,033
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only)		0		0
23. Total underwriting deductions (Lines 18 through 22).....	0	326,610,099	285,258,779	395,402,673
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	15,098,120	31,086,808	36,648,845
25. Net investment income earned		2,757,413	(720,781)	2,117,604
26. Net realized capital gains (losses) less capital gains tax of \$		(86,085)	(73,301)	(54,989)
27. Net investment gains (losses) (Lines 25 plus 26)	0	2,671,328	(794,082)	2,062,615
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$)].....				
29. Aggregate write-ins for other income or expenses	0	(1,477,142)	(11,796,194)	(9,348,573)
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	16,292,306	18,496,532	29,362,887
31. Federal and foreign income taxes incurred	XXX	3,421,384	3,125,594	5,376,908
32. Net income (loss) (Lines 30 minus 31)	XXX	12,870,922	15,370,938	23,985,979
DETAILS OF WRITE-INS				
0601. Other Health Revenues	XXX	1,515,142	0	12,135,715
0602.	XXX			
0603.	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	1,515,142	0	12,135,715
0701. Vendor Discounts	XXX	688	0	15
0702.	XXX			
0703.	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	688	0	15
1401.				
1402.				
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
2901. ARPA claims		(1,477,142)	(11,796,194)	(12,326,365)
2902. Community Investments				2,977,792
2903. ARPA CLAIMS PAYABLE			0	
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	(1,477,142)	(11,796,194)	(9,348,573)

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
CAPITAL AND SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year.....	60,209,376	54,118,120	54,118,120
34. Net income or (loss) from Line 32	12,870,922	15,370,938	23,985,979
35. Change in valuation basis of aggregate policy and claim reserves			
36. Change in net unrealized capital gains (losses) less capital gains tax of \$	323,042	(1,424,932)	(2,463,299)
37. Change in net unrealized foreign exchange capital gain or (loss)			
38. Change in net deferred income tax		(1,321,938)	(732,572)
39. Change in nonadmitted assets	(2,481,335)	(67,584)	262,565
40. Change in unauthorized and certified reinsurance	0	0	0
41. Change in treasury stock	0	0	0
42. Change in surplus notes	0	0	0
43. Cumulative effect of changes in accounting principles.....		0	
44. Capital Changes:			
44.1 Paid in	(22,305,000)	30,000,000	30,000,000
44.2 Transferred from surplus (Stock Dividend).....	0	0	0
44.3 Transferred to surplus.....		0	0
45. Surplus adjustments:			
45.1 Paid in	0	(22,305,000)	(22,305,000)
45.2 Transferred to capital (Stock Dividend)			
45.3 Transferred from capital		(16,401,163)	(18,822,003)
46. Dividends to stockholders	(1,115,250)	(2,230,500)	(3,066,938)
47. Aggregate write-ins for gains or (losses) in surplus	0	0	(767,476)
48. Net change in capital & surplus (Lines 34 to 47)	(12,707,621)	1,619,821	6,091,256
49. Capital and surplus end of reporting period (Line 33 plus 48)	47,501,755	55,737,941	60,209,376
DETAILS OF WRITE-INS			
4701. Prior Period Corrections			(767,476)
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	(767,476)

STATEMENT AS OF SEPTEMBER 30, 2023 OF THE EMPOWER HEALTHCARE SOLUTIONS LLC

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	314,047,189	324,160,337	459,343,848
2. Net investment income	3,076,371	(445,544)	2,398,852
3. Miscellaneous income	1,515,830	0	12,135,730
4. Total (Lines 1 to 3)	318,639,390	323,714,793	473,878,430
5. Benefit and loss related payments	280,497,898	241,312,810	334,712,687
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	55,267,363	39,315,581	74,128,518
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	4,585,975	660,905	2,800,000
10. Total (Lines 5 through 9)	340,351,236	281,289,296	411,641,205
11. Net cash from operations (Line 4 minus Line 10)	(21,711,846)	42,425,497	62,237,225
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	39,449,709	14,585,126	16,385,127
12.2 Stocks	74,712	675,756	685,835
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	(1,009)
12.7 Miscellaneous proceeds	0	73,301	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	39,524,421	15,334,183	17,069,953
13. Cost of investments acquired (long-term only):			
13.1 Bonds	17,832,110	46,911,029	50,689,497
13.2 Stocks	26,242	1,079,693	1,136,337
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	0	0
13.6 Miscellaneous applications	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	17,858,352	47,990,722	51,825,834
14. Net increase (or decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	21,666,069	(32,656,539)	(34,755,881)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	(18,822,003)	(18,822,003)
16.2 Capital and paid in surplus, less treasury stock	(22,305,000)	7,695,000	7,695,000
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	1,115,250	1,394,062	3,066,938
16.6 Other cash provided (applied)	(2,580,300)	69,582	268,666
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(26,000,550)	(12,451,483)	(13,925,275)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(26,046,327)	(2,682,525)	13,556,069
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	41,692,747	28,136,678	28,136,678
19.2 End of period (Line 18 plus Line 19.1)	15,646,420	25,454,153	41,692,747

Note: Supplemental disclosures of cash flow information for non-cash transactions:

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STATEMENT AS OF SEPTEMBER 30, 2023 OF THE EMPOWER HEALTHCARE SOLUTIONS LLC

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
Total Members at end of:														
1. Prior Year	20,224	0	0	0	0	0	0	0	20,224	0	0	0	0	0
2. First Quarter	20,584	0	0	0	0	0	0	0	20,584	0	0	0	0	0
3. Second Quarter	18,184	0	0	0	0	0	0	0	18,184	0	0	0	0	0
4. Third Quarter	16,965								16,965					
5. Current Year	0													
6. Current Year Member Months	171,766								171,766					
Total Member Ambulatory Encounters for Period:														
7. Physician	66,955								66,955					
8. Non-Physician	46,353								46,353					
9. Total	113,308	0	0	0	0	0	0	0	113,308	0	0	0	0	0
10. Hospital Patient Days Incurred	17,760								17,760					
11. Number of Inpatient Admissions	2,878								2,878					
12. Health Premiums Written (a)	356,258,127								356,258,127					
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written	0													
15. Health Premiums Earned.....	340,192,389								340,192,389					
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	274,889,552							0	274,889,552					
18. Amount Incurred for Provision of Health Care Services	273,160,183								273,160,183					

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

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) individual					0	0
2. Comprehensive (hospital and medical) group					0	0
3. Medicare Supplement					0	0
4. Dental Only					0	0
5. Vision Only					0	0
6. Federal Employees Health Benefits Plan					0	0
7. Title XVIII - Medicare					0	0
8. Title XIX - Medicaid	24,635,760	248,329,694	385,687	33,362,454	25,021,447	35,477,510
9. Credit A&H					0	0
10. Disability Income					0	0
11. Long-term care					0	0
12. Other health					0	0
13. Health subtotal (Lines 1 to 12)	24,635,760	248,329,694	385,687	33,362,454	25,021,447	35,477,510
14. Health care receivables (a)					0	0
15. Other non-health					0	0
16. Medical incentive pools and bonus amounts	1,484,051	498,393		653,999	1,484,051	712,345
17. Totals (Lines 13 - 14 + 15 + 16)	26,119,811	248,828,087	385,687	34,016,453	26,505,498	36,189,855

(a) Excludes \$ loans or advances to providers not yet expensed.

NOTES TO FINANCIAL STATEMENTS

For the quarterly interim financial information, it is presumed that the users of the interim financial information have read or have access to the Annual Statement as of December 31, 2022. This presentation addresses only significant events occurring since the last Annual Statement.

1. Summary of Significant Accounting Policies and Going Concern**A. Accounting Practices**

The accompanying financial statements of Empower Healthcare Solutions, LLC (the "Company") are presented based on accounting practices prescribed or permitted by the Arkansas Insurance Department. The Arkansas Insurance Department recognizes only statutory accounting practices prescribed or permitted by the state of Arkansas for determining and reporting the financial condition and results of operations of an insurance company, and for determining its solvency under the Arkansas Insurance Code.

The National Association of Insurance Commissioners (NAIC) Accounting Practices and Procedures Manual (NAIC SAP), has been adopted as a component of prescribed or permitted practices by the state of Arkansas. The State has adopted certain prescribed accounting principles that differ from those found in NAIC SAP. A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Arkansas is shown below:

	SSAP #	F/S Page	F/S Line #	September 30, 2023	December 31, 2022
Net Income					
(1) Empower Healthcare Solutions, LLC, state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ 12,870,922	\$ 23,985,979
(2) State Prescribed Practices that is an increase/(decrease) from NAIC SAP:					
(3) State Permitted Practices that is an increase/(decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 12,870,922	\$ 23,985,979

NOTES TO FINANCIAL STATEMENTS

Surplus

(5)	Empower Healthcare Solutions, LLC. state basis (Page 3, Line 33, Column 3 & 4)	XXX	XXX	XXX	\$47,501,754	\$60,209,376
(6)	State Prescribed Practices that is an increase/(decrease) from NAIC SAP:					
(7)	State Permitted Practices that is an increase/(decrease) from NAIC SAP:					
(8)	NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$47,501,754	\$60,209,376

B. Use of Estimates in the Preparation of the Financial Statements

No significant change.

C. Accounting Policies

Health premiums are earned over the term of the related insurance policies. Premiums written are reported net of experience rating refunds. Premiums paid before the effective date are recorded on the balance sheet as premiums received in advance and are subsequently credited to income as earned during the coverage period. Premium rates are subject to approval by the Centers for Medicare and Medicaid Services. Expenses are charged to operations as incurred.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments include investments with maturities of less than one year and more than three months at the date of acquisition and are reported at amortized cost, which approximates fair value. Non-investment grade short-term investments are stated at the lower of amortized cost or fair value.
- (2) Investment grade bonds not backed by other loans are stated at amortized cost, with amortization calculated based on the modified scientific method, using lower of yield to call or yield to maturity. Non-investment grade bonds are stated at the lower of amortized cost or fair value as determined by various third-party pricing sources.
- (3) Common stocks of unaffiliated companies are stated at fair value based upon security ratings prescribed by various third-party pricing sources.
- (4) Redeemable preferred stocks of unaffiliated companies of the highest and highest quality are stated at cost or amortized cost, and all other redeemable preferred stocks are reported at lower of cost, amortized cost, or fair value. Perpetual preferred stocks are carried at fair value, not to exceed any currently effective call prices.
- (5) The Company has no mortgage loans - real estate.
- (6) The Company has no loan-backed securities.

NOTES TO FINANCIAL STATEMENTS

- (7) The Company has no investments in subsidiaries, controlled and affiliated companies.
- (8) The Company has no investments in joint ventures, partnerships, or limited liability companies.
- (9) The Company has no derivative instruments.
- (10) The Company does not anticipate investment income as a factor in premium deficiency calculations.
- (11) Unpaid claims and claims adjustment expenses include management's best estimate of amounts based on historical claim development patterns and certain individual case estimates. The established liability considers health benefit provisions, business practices, economic conditions, and other factors that may materially affect the cost, frequency, and severity of claims. Liabilities for unpaid claims and claim adjustment expenses are based on assumptions and estimates, and while management believes such estimates are reasonable, the ultimate liability may be more than or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and changes in estimates are incorporated into current period estimates.
- (12) The Company has not modified its capitalization policy from the prior period.
- (13) The Company has no pharmaceutical rebate receivables.

D. Going Concern

Management has assessed the Company's ability to continue as a going concern and noted no issues.

2. Accounting Changes and Corrections of Errors

Not applicable.

3. Business Combinations and Goodwill

Not applicable.

4. Discontinued Operations

Not applicable.

5. Investments

A. - C.

Not applicable.

D. Loan-Backed Securities

- (1) The Company did not have loan-backed securities on September 30, 2023 or December 31, 2022.

NOTES TO FINANCIAL STATEMENTS

- (2) The Company did not recognize other-than-temporary impairments ("OTTI") on its loan-backed securities during the three months ended September 30, 2023, or December 31, 2022.
- (3) The Company did not hold OTTI on its loan-backed securities on September 30, 2023 or December 31, 2022.
- (4) The Company had no impaired loan-backed securities for which an OTTI had not been recognized in earnings on September 30, 2023, or December 31, 2022.
- (5) The Company had no impaired loan-backed securities on September 30, 2023, or December 31, 2022.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

The Company did not enter into repurchase agreements or securities lending transactions on September 30, 2023, or December 31, 2022.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into repurchase agreement transactions accounted for as secured borrowing on September 30, 2023, or December 31, 2022.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into reverse repurchase agreement transactions accounted for as a secured borrowing on September 30, 2023, or December 31, 2022.

H. Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into repurchase agreement transactions accounted for as a sale on September 30, 2023, or December 31, 2022.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into reverse repurchase agreement transactions accounted for as a sale on September 30, 2023, or December 31, 2022.

J. Real Estate

The Company did not have investments in real estate and did not engage in retail land sales operations during at September 30, 2023, or December 31, 2022.

K. Investments in Low-Income Housing Tax Credits

The Company did not invest in properties generating low-income housing tax credits on September 30, 2023, or December 31, 2022.

NOTES TO FINANCIAL STATEMENTS

L. Restricted Assets

No significant change.

M. Working Capital Finance Investments

The Company did not have any working capital finance investments on September 30, 2023, or December 31, 2022.

N. Offsetting and Netting of Assets and Liabilities

The Company did not have any offsetting or netting of assets and liabilities on September 30, 2023, or December 31, 2022.

O. 5GI Securities

The Company has no 5GI Securities as of September 30, 2023, or December 31, 2022.

P. Short Sales

The Company did not have any short sales on September 30, 2023, or December 31, 2022.

Q. Prepayment Penalty and Acceleration Fees

The Company had a prepayment penalty and acceleration fees of \$7,190 and \$2,476 associated with one CUSIP on September 30, 2023, and associated with two CUSIPs on December 31, 2022, respectively.

R. Reporting Entity's Share of Cash Pool by Asset Type

The Company did not participate in a cash pool on September 30, 2023, or December 31, 2022.

6. Joint Ventures, Partnerships and Limited Liability Companies

A. The Company had no investments in joint ventures, partnerships, or LLCs on September 30, 2023, or December 31, 2022.

B. Not applicable.

NOTES TO FINANCIAL STATEMENTS

7. Investment Income

- A. All investment income due and accrued with amounts that are over 90 days past due is non-admitted.
- B. On September 30, 2023, and December 31, 2022, there was no non-admitted accrued investment income.

8. Derivative Instruments

The Company had no derivative instruments on September 30, 2023, or December 31, 2023

9. Income Taxes

No Significant change

10. Information Concerning Parent, Subsidiaries, Affiliates, and Other Related Parties

A. Nature of the Relationship

The Company is an Arkansas-domiciled company formed by Beacon Health Options, Inc. ("BHO"), Arkansas Community Health Network, LLC, Preferred Family Healthcare, Inc., Woodruff Health Group, LLC, Independent Case Management, Inc., Arkansas Healthcare Alliance, LLC, and Statera, LLC. The Company was granted authority by the Arkansas Insurance Department ("AID") to conduct business in Arkansas as a Risk-based Provider Organization ("RPO"), limited to plans established under the Medicaid Provider-Led Organized Care System.

B. Significant Transactions for Each Period

The following significant transactions took place between the Company and its affiliates:

On March 9, 2022, the Company repaid the capital contributions of \$22,315,000 to BHO. On June 28, 2022, the Company paid retained earnings of \$18,822,003 to BHO.

On February 4, 2022, TSCFI EP LLC became the new equity partner in the Company contributing capital of \$30,000,000.

On April 18, 2023, the Company paid \$22,305,000 to TSCFI EP LLC to redeem the Preferred Interest Equity balance.

C. Transactions with Related Parties who are not Reported on Schedule Y

No significant change.

NOTES TO FINANCIAL STATEMENTS

D. Amounts Due to or from Related Parties

On September 30, 2023, and December 31, 2022, the Company reported no amounts due to or from affiliates.

E. Management and Service Contracts and Cost Sharing Arrangements

No agreements were in place as of September 30, 2023, and December 31, 2022.

F. Guarantees or Contingencies for Related Parties

No significant change.

G. Nature of Control Relationships that Could Affect Operations or Financial Position

Effective January 1, 2022, BHO is no longer an equity partner in the Company.

The Company is owned equally by the following six companies: TSCFI EP LLC, Arkansas Community Health Network, LLC, Woodruff Health Group, LLC, Independent Case Management, Inc., Arkansas Healthcare Alliance, LLC, and Statera, LLC.

H. - O.

No significant change.

11. Debt

Not applicable.

12. Retirement Plans, Deferred Compensation, Postemployment Benefits, and Compensated Absences, and Other Postretirement Benefit Plans

A. Defined Benefit Plan

Not applicable.

B. Not applicable.

C. Not applicable.

D. Not applicable.

E. Defined Contribution Plans

Not applicable.

NOTES TO FINANCIAL STATEMENTS

F. Multiemployer Plans

The Company does not participate in a multiemployer plan.

G. Consolidated/Holding Company Plans

Not applicable.

H. Post Employment Benefits and Compensated Absences

Not applicable.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not applicable.

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

A. Outstanding Shares

On February 4, 2022, the Company issued Common Interest to TSCFI EP LLC, \$7,695,000.

B. Preferred Stock

On February 4, 2022, the Company issued Preferred Interest to TSCFI EP LLC, \$22,305,000.

C. Dividend Restrictions

Under Arkansas law, the amount of ordinary dividends a domestic insurer is permitted to pay is limited to an amount not exceeding the greater of 10% of total surplus, net gain from operations, or net gain from operations from the 3 calendar years preceding the dividend less dividends paid for those 3 years.

D. Dividends Paid

Dividends of \$1,115,250 and \$3,066,938 were paid in 2023 and 2022, respectively.

E. - M.

No significant change.

14. Liabilities, Contingencies and Assessments

No significant change.

NOTES TO FINANCIAL STATEMENTS

15. Leases

No significant change.

16. Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

Not applicable.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

Not applicable.

B. Transfer and Servicing of Financial Assets

(1) Not applicable.

C. Wash Sales

(1) In the course of the Company's asset management, securities may be sold and reacquired within 31 days of the sale date to enhance the yield on the investments.

(2) On September 30, 2023, and December 31, 2022, there were no wash sales involving securities with an NAIC designation of 3 or below or unrated.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. Administrative Services Only Plans

Not applicable.

B. Administrative Services Contract Plans

Not applicable.

C. Medicare or Other Similarly Structured Cost-Based Reimbursement Contract

Not applicable.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable.

NOTES TO FINANCIAL STATEMENTS

20. Fair Value Measurements

A. Fair Value Measurements at September 30, 2023

Description for each class of Asset or Liability	Net Asset Value				Total
	Level 1	Level 2	Level 3	NAV	
a. Assets at Fair Value					
Perpetual preferred stock					
Industrial and Misc	\$ -	\$ 3,589,146	\$ -	\$ -	\$ 3,589,146
Total perpetual preferred stocks	\$ -	\$ 3,589,146	\$ -	\$ -	\$ 3,589,146
Redeemable preferred stock					
Industrial and Misc	\$ -	\$ 69,046	\$ -	\$ -	\$ 69,046
Total redeemable preferred stocks	\$ -	\$ 69,046	\$ -	\$ -	\$ 69,046
Bonds					
U.S. governments	\$ -	\$ -	\$ -	\$ -	\$ -
Industrial and Misc	\$ -	\$ -	\$ -	\$ -	\$ -
Total Bonds	\$ -	\$ -	\$ -	\$ -	\$ -
Common stock					
Industrial and misc	\$ 4,597,130	\$ -	\$ -	\$ -	\$ 4,597,130
Total common stocks	\$ 4,597,130	\$ -	\$ -	\$ -	\$ 4,597,130
Cash Equivalents					
US Government, Industrial and Misc, and Money Market Funds	\$ 14,060	\$ -	\$ -	\$ -	\$ 14,060
Total cash equivalents	\$ 14,060	\$ -	\$ -	\$ -	\$ 14,060
Total Assets at Fair Value / NAV	\$ 4,611,190	\$ 3,658,192	\$ -	\$ -	\$ 8,269,382

B. Fair Value Measurements Under Other Accounting Pronouncements

Not applicable on September 30, 2023, and December 31, 2022.

NOTES TO FINANCIAL STATEMENTS

C. Financial Instruments

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value NAV	Not Practicable Carrying Value
Bonds	\$ 113,378,402	\$ 121,514,624	\$ 17,687,727	\$ 95,690,675	\$ -	\$ -	\$ -
Redeemable Preferred Stock	\$ 175,011	\$ 206,576	\$ -	\$ 175,011	\$ -	\$ -	\$ -
Perpetual Preferred Stocks	\$ 3,589,146	\$ 3,589,146	\$ -	\$ 3,589,146	\$ -	\$ -	\$ -
Common Stock	\$ 4,597,129	\$ 4,597,130	\$ 4,597,130	\$ -	\$ -	\$ -	\$ -
Short Term Investments	\$ 4,117,704	\$ 4,119,919	\$ 3,624,931	\$ 492,772	\$ -	\$ -	\$ -
Cash and Cash Equivalents	\$ 14,060	\$ 14,060	\$ 14,060	\$ -	\$ -	\$ -	\$ -
Total Assets	\$ 125,871,452	\$ 134,041,455	\$ 25,923,848	\$ 99,947,604	\$ -	\$ -	\$ -

D. Not Practicable to Estimate Fair Value

There are no financial instruments that were not practicable to estimate at fair value.

E. Investments Measured at Net Asset Value

The Company has no investments measured at net asset value.

21. Other Items

No significant change.

22. Events Subsequent

Subsequent events have been considered through November 15, 2023, for the statutory statement issued on November 15, 2023.

No significant subsequent events have occurred.

23. Reinsurance

Not applicable.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination**A.- D.**

No significant change.

NOTES TO FINANCIAL STATEMENTS

E. Risk-Sharing Provisions of the Affordable Care Act ("ACA")

(1) Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk-sharing provisions (YES/NO)? NO

(2) Impact of Risk-Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities, and Revenue for the Current Year.

Not applicable.

(3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to the prior year balance.

Not applicable.

(4) Roll-forward of Risk Corridors Asset and Liability balances by Program benefit Year.

Not applicable.

(5) ACA Risk Corridors Receivable as of Reporting Date.

Not applicable.

25. Change in Incurred Claims and Claim Adjustment Expenses

No significant change.

26. Intercompany Pooling Arrangements

Not applicable.

27. Structured Settlements

Not applicable.

28. Health Care Receivables

Not Applicable.

29. Participating Policies

Not applicable.

NOTES TO FINANCIAL STATEMENTS

30. Premium Deficiency Reserves

- | | | |
|---|-----|--------------------|
| 1. Liability carried for premium deficiency reserves | \$ | 0 |
| 2. Date of the most recent evaluation of this liability | | September 30, 2023 |
| 3. Was anticipated investment income utilized in the calculation? | Yes | No X |

31. Anticipated Salvage and Subrogation

Not applicable.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change:
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [] No [X]
If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [] No [X]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.
.....
- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2	3
Name of Entity	NAIC Company Code	State of Domicile

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] N/A []
If yes, attach an explanation.
.....
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2021
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2021
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 06/08/2023
- 6.4 By what department or departments?
.....
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [X] No [] N/A []
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] N/A []
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 7.2 If yes, give full information:
.....
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
.....
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC

GENERAL INTERROGATORIES

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- (c) Compliance with applicable governmental laws, rules and regulations;
- (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- (e) Accountability for adherence to the code.
- 9.11 If the response to 9.1 is No, please explain:
- 9.2 Has the code of ethics for senior managers been amended? Yes [] No [X]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No [X]
- 11.2 If yes, give full and complete information relating thereto:
12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$
13. Amount of real estate and mortgages held in short-term investments: \$
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No [X]
- 14.2 If yes, please complete the following:

	1	2
	Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$0	\$
14.22 Preferred Stock	\$0	\$
14.23 Common Stock	\$0	\$
14.24 Short-Term Investments	\$0	\$
14.25 Mortgage Loans on Real Estate	\$0	\$
14.26 All Other	\$0	\$
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$0	\$0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$	\$

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No [X]
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
If no, attach a description with this statement.
16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$0
- 16.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$0
- 16.3 Total payable for securities lending reported on the liability page. \$0

STATEMENT AS OF SEPTEMBER 30, 2023 OF THE EMPOWER HEALTHCARE SOLUTIONS LLC
GENERAL INTERROGATORIES

17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []
- 17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian Address
Raymond James	2900 Highway 280, Suite 100 Birmingham, AL 35233

- 17.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No [X]
- 17.4 If yes, give full information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

- 17.5 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1 Name of Firm or Individual	2 Affiliation
Parkway Advisors	U.....

- 17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets? Yes [X] No []

- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets? Yes [X] No []

- 17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []
- 18.2 If no, list exceptions:

.....

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:
- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
 - b. Issuer or obligor is current on all contracted interest and principal payments.
 - c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
- Has the reporting entity self-designated 5GI securities? Yes [] No [X]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
- a. The security was purchased prior to January 1, 2018.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 - d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.
- Has the reporting entity self-designated PLGI securities? Yes [] No [X]

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
- a. The shares were purchased prior to January 1, 2019.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
 - d. The fund only or predominantly holds bonds in its portfolio.
 - e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
 - f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
- Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

GENERAL INTERROGATORIES

PART 2 - HEALTH

- 1. Operating Percentages:
 - 1.1 A&H loss percent80.8 %
 - 1.2 A&H cost containment percent %
 - 1.3 A&H expense percent excluding cost containment expenses14.2 %

- 2.1 Do you act as a custodian for health savings accounts? Yes [] No [X]
- 2.2 If yes, please provide the amount of custodial funds held as of the reporting date \$.....
- 2.3 Do you act as an administrator for health savings accounts? Yes [] No [X]
- 2.4 If yes, please provide the balance of the funds administered as of the reporting date \$.....

- 3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [] No [X]
- 3.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? Yes [] No [X]

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Type of Reinsurer	9 Certified Reinsurer Rating (1 through 6)	10 Effective Date of Certified Reinsurer Rating
NONE									

STATEMENT AS OF SEPTEMBER 30, 2023 OF THE EMPOWER HEALTHCARE SOLUTIONS LLC
SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

States, etc.	1	Direct Business Only								
		2	3	4	5	6	7	8	9	10
	Active Status (a)	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums & Other Considerations	Property/Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
1. Alabama	AL	N							0	
2. Alaska	AK	N							0	
3. Arizona	AZ	N							0	
4. Arkansas	AR	L		356,258,127					356,258,127	
5. California	CA	N							0	
6. Colorado	CO	N							0	
7. Connecticut	CT	N							0	
8. Delaware	DE	N							0	
9. District of Columbia	DC	N							0	
10. Florida	FL	N							0	
11. Georgia	GA	N							0	
12. Hawaii	HI	N							0	
13. Idaho	ID	N							0	
14. Illinois	IL	N							0	
15. Indiana	IN	N							0	
16. Iowa	IA	N							0	
17. Kansas	KS	N							0	
18. Kentucky	KY	N							0	
19. Louisiana	LA	N							0	
20. Maine	ME	N							0	
21. Maryland	MD	N							0	
22. Massachusetts	MA	N							0	
23. Michigan	MI	N							0	
24. Minnesota	MN	N							0	
25. Mississippi	MS	N							0	
26. Missouri	MO	N							0	
27. Montana	MT	N							0	
28. Nebraska	NE	N							0	
29. Nevada	NV	N							0	
30. New Hampshire	NH	N							0	
31. New Jersey	NJ	N							0	
32. New Mexico	NM	N							0	
33. New York	NY	N							0	
34. North Carolina	NC	N							0	
35. North Dakota	ND	N							0	
36. Ohio	OH	N							0	
37. Oklahoma	OK	N							0	
38. Oregon	OR	N							0	
39. Pennsylvania	PA	N							0	
40. Rhode Island	RI	N							0	
41. South Carolina	SC	N							0	
42. South Dakota	SD	N							0	
43. Tennessee	TN	N							0	
44. Texas	TX	N							0	
45. Utah	UT	N							0	
46. Vermont	VT	N							0	
47. Virginia	VA	N							0	
48. Washington	WA	N							0	
49. West Virginia	WV	N							0	
50. Wisconsin	WI	N							0	
51. Wyoming	WY	N							0	
52. American Samoa	AS	N							0	
53. Guam	GU	N							0	
54. Puerto Rico	PR	N							0	
55. U.S. Virgin Islands	VI	N							0	
56. Northern Mariana Islands	MP	N							0	
57. Canada	CAN	N							0	
58. Aggregate Other Aliens	OT	XXX	0	0	0	0	0	0	0	0
59. Subtotal	XXX	0	0	356,258,127	0	0	0	0	356,258,127	0
60. Reporting Entity Contributions for Employee Benefit Plans	XXX								0	
61. Totals (Direct Business)	XXX	0	0	356,258,127	0	0	0	0	356,258,127	0
DETAILS OF WRITE-INS										
58001.	XXX									
58002.	XXX									
58003.	XXX									
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0	0

(a) Active Status Counts:

- | | |
|---|---|
| 1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 1 | 4. Q - Qualified - Qualified or accredited reinsurer..... 0 |
| 2. R - Registered - Non-domiciled RRGs..... 0 | 5. N - None of the above - Not allowed to write business in the state..... 56 |
| 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. 0 | |

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
NONE															

Asterisk	Explanation
----------	-------------

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. 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.

	Response
1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO

AUGUST FILING

2. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.	N/A
--	-----

Explanation:

1. Filer does not cover Medicare

Bar Code:

1. Medicare Part D Coverage Supplement [Document Identifier 365]



NONE

STATEMENT AS OF SEPTEMBER 30, 2023 OF THE EMPOWER HEALTHCARE SOLUTIONS LLC

SCHEDULE A - VERIFICATION

Real Estate

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Current year change in encumbrances		
4. Total gain (loss) on disposals		
5. Deduct amounts received on disposals		
6. Total foreign exchange change in book/adjusted carrying value		
7. Deduct current year's other than temporary impairment recognized		
8. Deduct current year's depreciation		
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)		
10. Deduct total nonadmitted amounts		
11. Statement value at end of current period (Line 9 minus Line 10)		

NONE

SCHEDULE B - VERIFICATION

Mortgage Loans

	1 Year to Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase (decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and mortgage interest points and commitment fees		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest		
10. Deduct current year's other than temporary impairment recognized		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12. Total valuation allowance		
13. Subtotal (Line 11 plus Line 12)		
14. Deduct total nonadmitted amounts		
15. Statement value at end of current period (Line 13 minus Line 14)		

NONE

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase (decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and depreciation		
9. Total foreign exchange change in book/adjusted carrying value		
10. Deduct current year's other than temporary impairment recognized		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)		

NONE

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	151,583,420	119,958,239
2. Cost of bonds and stocks acquired	17,858,352	51,825,834
3. Accrual of discount	341,486	142,504
4. Unrealized valuation increase (decrease)	72,128	(2,463,299)
5. Total gain (loss) on disposals	(85,566)	(53,980)
6. Deduct consideration for bonds and stocks disposed of	39,524,421	17,072,948
7. Deduct amortization of premium	337,922	754,916
8. Total foreign exchange change in book/adjusted carrying value	0	
9. Deduct current year's other than temporary impairment recognized	2,197	
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees	0	1,986
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	129,905,279	151,583,420
12. Deduct total nonadmitted amounts	0	
13. Statement value at end of current period (Line 11 minus Line 12)	129,905,279	151,583,420

STATEMENT AS OF SEPTEMBER 30, 2023 OF THE EMPOWER HEALTHCARE SOLUTIONS LLC

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	124,949,022	3,617,034	2,925,000	(6,514)	179,464,771	124,949,022	125,634,542	153,298,164
2. NAIC 2 (a)	0				0	0	0	0
3. NAIC 3 (a)	0				0	0	0	0
4. NAIC 4 (a)	0				0	0	0	0
5. NAIC 5 (a)	0				0	0	0	0
6. NAIC 6 (a)	0				0	0	0	0
7. Total Bonds	124,949,022	3,617,034	2,925,000	(6,514)	179,464,771	124,949,022	125,634,542	153,298,164
PREFERRED STOCK								
8. NAIC 1	0				0	0	0	0
9. NAIC 2	2,199,945			4,042	2,268,723	2,199,945	2,203,987	2,206,454
10. NAIC 3	1,713,510		76,578	(122,475)	1,731,595	1,713,510	1,514,457	1,740,971
11. NAIC 4	78,260			(3,179)	79,662	78,260	75,081	80,176
12. NAIC 5	0				20,247	0	0	0
13. NAIC 6	0				0	0	0	0
14. Total Preferred Stock	3,991,715	0	76,578	(121,612)	4,100,227	3,991,715	3,793,525	4,027,601
15. Total Bonds and Preferred Stock	128,940,736	3,617,034	3,001,578	(128,126)	183,564,998	128,940,736	129,428,066	157,325,765

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$ 4,119,919 ; NAIC 2 \$ 0 ; NAIC 3 \$ 0 ; NAIC 4 \$ 0 ; NAIC 5 \$ 0 ; NAIC 6 \$ 0

SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year-to-Date	Paid for Accrued Interest Year-to-Date
7709999999 Totals	4,119,919	xxx	4,098,704	978	125

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	2,602,783	4,973,740
2. Cost of short-term investments acquired	17,314,360	15,553,977
3. Accrual of discount	190,741	0
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	(8,335)	(2,362)
6. Deduct consideration received on disposals	15,973,323	17,821,064
7. Deduct amortization of premium	6,308	101,508
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	4,119,918	2,602,783
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	4,119,918	2,602,783

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

N O N E

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

N O N E

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of
Derivatives

N O N E

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	15,475,352	477,052
2. Cost of cash equivalents acquired	87,972,508	63,851,596
3. Accrual of discount	123,592	13,257
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	103,557,392	48,864,365
7. Deduct amortization of premium	0	2,188
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	14,060	15,475,352
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	14,060	15,475,352

Schedule A - Part 2 - Real Estate Acquired and Additions Made

N O N E

Schedule A - Part 3 - Real Estate Disposed

N O N E

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

N O N E

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

N O N E

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

N O N E

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

N O N E

STATEMENT AS OF SEPTEMBER 30, 2023 OF THE EMPOWER HEALTHCARE SOLUTIONS LLC

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22	
										11	12	13	14	15								
CUSIP Identification	Description	For-foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's (Amortization)/Accretion	Other Than Temporary Impairment Recognized	Total Change in Book/Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	
..912828-VS-6	US TREASURY N/B 2.5 8/15/2023		08/15/2023	MATURITY		925,000	925,000	965,035	938,137	0	(13,137)	0	(13,137)	0	925,000	0	0	0	23,125	08/15/2023	1.A	
0109999999	Subtotal - Bonds - U.S. Governments					925,000	925,000	965,035	938,137	0	(13,137)	0	(13,137)	0	925,000	0	0	0	23,125	XXX	XXX	
..17275R-BH-4	CISCO SYSTEMS 2.2 9/20/2023		09/20/2023	MATURITY		2,000,000	2,000,000	2,077,360	2,020,665	0	(20,665)	0	(20,665)	0	2,000,000	0	0	0	44,000	09/20/2023	1.E FE	
1109999999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					2,000,000	2,000,000	2,077,360	2,020,665	0	(20,665)	0	(20,665)	0	2,000,000	0	0	0	44,000	XXX	XXX	
2509999997	Total - Bonds - Part 4					2,925,000	2,925,000	3,042,395	2,958,802	0	(33,802)	0	(33,802)	0	2,925,000	0	0	0	67,125	XXX	XXX	
2509999998	Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2509999999	Total - Bonds					2,925,000	2,925,000	3,042,395	2,958,802	0	(33,802)	0	(33,802)	0	2,925,000	0	0	0	67,125	XXX	XXX	
..38145G-30-8	GOLDMAN SACHS GROUP INC		09/14/2023	CALLED @ 25.00000000		70,125	25.00	76,578	69,143	7,435	0	0	7,435	0	76,578	0	(6,453)	(6,453)	4,169		3.A FE	
4019999999	Subtotal - Preferred Stocks - Industrial and Miscellaneous (Unaffiliated) Perpetual Preferred					70,125	XXX	76,578	69,143	7,435	0	0	7,435	0	76,578	0	(6,453)	(6,453)	4,169	XXX	XXX	
4509999997	Total - Preferred Stocks - Part 4					70,125	XXX	76,578	69,143	7,435	0	0	7,435	0	76,578	0	(6,453)	(6,453)	4,169	XXX	XXX	
4509999998	Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4509999999	Total - Preferred Stocks					70,125	XXX	76,578	69,143	7,435	0	0	7,435	0	76,578	0	(6,453)	(6,453)	4,169	XXX	XXX	
5989999997	Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999998	Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5989999999	Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5999999999	Total - Preferred and Common Stocks					70,125	XXX	76,578	69,143	7,435	0	0	7,435	0	76,578	0	(6,453)	(6,453)	4,169	XXX	XXX	
6009999999	Totals					2,995,125	XXX	3,118,973	3,027,945	7,435	(33,802)	0	(26,367)	0	3,001,578	0	(6,453)	(6,453)	71,294	XXX	XXX	

EOS

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open

N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open

N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made

N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open

N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To

N O N E

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

N O N E

STATEMENT AS OF SEPTEMBER 30, 2023 OF THE EMPOWER HEALTHCARE SOLUTIONS LLC

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
0109999999	Total - U.S. Government Bonds					0	0	0
0309999999	Total - All Other Government Bonds					0	0	0
0509999999	Total - U.S. States, Territories and Possessions Bonds					0	0	0
0709999999	Total - U.S. Political Subdivisions Bonds					0	0	0
0909999999	Total - U.S. Special Revenues Bonds					0	0	0
1109999999	Total - Industrial and Miscellaneous (Unaffiliated) Bonds					0	0	0
1309999999	Total - Hybrid Securities					0	0	0
1509999999	Total - Parent, Subsidiaries and Affiliates Bonds					0	0	0
1909999999	Subtotal - Unaffiliated Bank Loans					0	0	0
2419999999	Total - Issuer Obligations					0	0	0
2429999999	Total - Residential Mortgage-Backed Securities					0	0	0
2439999999	Total - Commercial Mortgage-Backed Securities					0	0	0
2449999999	Total - Other Loan-Backed and Structured Securities					0	0	0
2459999999	Total - SVO Identified Funds					0	0	0
2469999999	Total - Affiliated Bank Loans					0	0	0
2479999999	Total - Unaffiliated Bank Loans					0	0	0
2509999999	Total Bonds					0	0	0
RJBDD0-00-3	RAYMOND JAMES BANK DEPOSIT PROGRAM		09/29/2023	0.000		14,060	0	38,404
8209999999	Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO					14,060	0	38,404
8609999999	Total Cash Equivalents					14,060	0	38,404

E14