FILED

APR 2 1 2011

INSURANCE COMMISSIONER
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN D. DOAK, Insurance Commissioner,	))
Petitioner,	)
vs.	) CASE NO. 11-0509-DIS
	)
MUTUAL ASSURANCE ADMIN INC., a licensed third party administrator in the State of Oklahoma,	)))
Respondent.	)

CONDITIONAL ADMINISTRATIVE ORDER
AND NOTICE OF RIGHT TO BE HEARD

COMES NOW the State of Oklahoma, ex rel., John D. Doak, Insurance Commissioner, by

and through counsel and alleges and states as follows:

JURISDICTION

1.   John D. Doak is the Insurance Commissioner of the State of Oklahoma and as such is

charged with the duty of administering and enforcing all provisions of the Oklahoma Insurance Code

36 O.S. §§ 101-7004.

2.   Respondent Mutual Assurance Admin, Inc. ("Mutual Assurance") is a licensed third

party administrator in the State of Oklahoma holding license number 13063.

FINDINGS

1.   On or about March 14, 2011, an inquiry regarding a claim which arose under an

insurance contract was forwarded by the Oklahoma Insurance Department to Respondent.

2.   The thirtieth (30th) day after the date of the inquiry was April 13, 2011.

3.   Mutual Assurance failed to adequately respond to the inquiry within thirty (30) days

from the date of the inquiry.

CONCLUSIONS

The allegations are found to be true and correct and Respondent has violated 36 O.S. § 1250.4(B) by failing to furnish an adequate response to an inquiry from the Commissioner within thirty (30) days from the date of the inquiry.

ORDER

IT IS THEREFORE ORDERED that Mutual Assurance Admin Inc. shall provide a response to the inquiry referenced above and is fined in the amount of Five Hundred Dollars ($500.00). The response and fine are to be submitted to the Oklahoma Insurance Department within thirty (30) days of the date of this Order.

Respondent is further notified that they may request a hearing within 30 days of the receipt of this Order concerning this action and upon such request the Insurance Department shall conduct a hearing before an independent hearing examiner. A request for hearing shall be made in writing to Ellen Edwards, Oklahoma Insurance Department, Legal Division, 3625 NW 56th Suite 100, Oklahoma City, Oklahoma 73112 and state the basis for requesting the hearing.

If Respondent does not request a hearing within the 30 days allotted this Order shall be a **FINAL ORDER** on the 31st day following the receipt of the Order.

WITNESS My Hand and Official Seal this 21ST day of April, 2011.

JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

Ellen J. Edwards

Ellen Edwards
Deputy General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma, 73112
(405) 521-2746

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the above and foregoing Order was mailed certified, return receipt requested on this 21ST day of April, 2011, to:

Mutual Assurance Admin, Inc.
P.O. Box 42096
Oklahoma City OK 73123
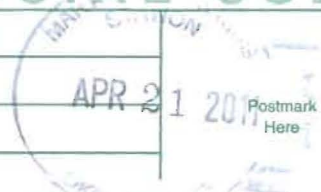
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Ellen J. Edwards

Ellen Edwards

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Sent To

Mutual Assurance Administrators Inc.
P.O. Box 42096
Oklahoma City, OK 73123

Street, Apt. No.; or PO Box No.

City, State, ZIP+4

11-0509-DIS
Cond Admin opd / ECE (MI)

PS Form 3800, August 2006   See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- ■ Print your name and address on the reverse so that we can return the card to you.
- ■ Attach this card to the back of the mailpiece, or on the front if space permits.

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OKLAHOMA INSURANCE DEPARTMENT

APR 27 2011

Legal Division

1. Article Addressed to:

Mutual Assurance Administrators Inc.
P.O. Box 42096
Oklahoma City, OK 73123

11-0509-DIS
Cond. Admin Ord / ECE/mt

COMPLETE THIS SECTION ON DELIVERY

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X _____ ☐ Agent
                    ☐ Addressee

B. Received by (Printed Name)   C. Date of Delivery

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   If YES, enter delivery address below: ☐ No

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USPS 73123

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   ☐ Insured Mail   ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)   ☐ Yes

2. Article Number
   (Transfer from service label)

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PS Form 3811, February 2004   Domestic Return Receipt   102595-02-M-1540