

BEFORE THE INSURANCE COMMISSIONER OF THE
STATE OF OKLAHOMA

FILED

MAY 08 2015

INSURANCE COMMISSIONER
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN)
DOAK, Insurance Commissioner,)
)
Petitioner,)
)
v.)
)
HELMSMAN MANAGEMENT)
SERVICES LLC,)
an applicant for a nonresident business entity)
insurance adjuster license,)
)
Respondent.)

Case No. 15-0494-DEN

CONDITIONAL ADMINISTRATIVE ORDER
AND NOTICE OF RIGHT TO BE HEARD

COMES NOW the State of Oklahoma, ex rel. John Doak, Insurance Commissioner, by and through his attorney, Barron B. Brown, and alleges and states as follows:

JURISDICTION

1. John Doak is the Insurance Commissioner of the State of Oklahoma and is charged with the duty of administering and enforcing all provisions of the Oklahoma Insurance Code, 36 O.S. §§ 101 et seq.

2. Helmsman Management Services LLC (“Respondent”) is an applicant for a nonresident business entity insurance adjuster license in the State of Oklahoma. Respondent’s address of record is 175 Berkeley Street, Boston, Massachusetts 02116.

3. The Insurance Commissioner may place on probation, censure, suspend, revoke or refuse to issue or renew an initial license issued pursuant to the Oklahoma Insurance Adjusters Licensing Act and/or may levy a fine up to \$1,000.00 for each

occurrence of a violation of the Oklahoma Insurance Code, 36 O.S. § 6219, § 6220(A) and (B).

ALLEGATIONS OF FACT

1. Respondent applied for a nonresident business entity insurance adjuster license on or about April 10, 2015 with the Oklahoma Insurance Department (OID). On the application form, the fourth question asks the following: “Have authorities of any state ever revoked, suspended, fined or terminated the firm or any individuals authorized to act on behalf of the firm?” Respondent answered “no” to this question.

2. A background check of the National Association of Insurance Commissioners Regulatory Information Retrieval System database conducted by the OID Licensing Division showed that Respondent had ten (10) prior administrative actions listed on its record. Respondent did not properly disclose the aforementioned administrative actions in the license application. A summary list of the 10 referenced administrative actions is attached as Petitioner’s Exhibit A.

ALLEGED VIOLATIONS OF LAW

1. Respondent violated 36 O.S. § 6220(A)(1); material misrepresentation or fraud in obtaining an adjuster’s license.

ORDER

IT IS THEREFORE ORDERED by the Insurance Commissioner that Respondent is **FINED THREE HUNDRED DOLLARS (\$300.00)** for material misrepresentation or fraud in obtaining an adjuster’s license. **The \$300.00 fine is to be paid within thirty (30) days** made payable to the Oklahoma Insurance Department. The \$300.00 civil fine shall be paid by money order or cashier’s check. Respondent’s

application for a nonresident business entity insurance adjuster license may be granted upon receipt of payment of the fine and reporting of the administrative action. Failure to pay the civil fine or request a hearing within thirty (30) days will result in your license application being withdrawn.

IT IS FURTHER ORDERED, ADJUDGED AND DECREED by the Insurance Commissioner that this Order is a Conditional Order. Unless the Respondent requests a hearing with respect to the Allegations of Fact set forth above within thirty (30) days of the date of mailing of this Order, this Order and the penalties set forth above shall become a Final Order on the thirty-first day following the date of mailing this Order. A request for hearing should be in writing addressed to Barron Brown, Oklahoma Insurance Department, Legal Division, 3625 NW 56th St., Suite 100, Oklahoma City, Oklahoma 73112. The request for hearing must state the grounds for the request to set aside or modify the Order.

Any such hearing shall be conducted according to the procedures for contested cases under the Insurance Code and 75 O.S. § 250-323. If the Respondent serves a timely request for hearing on the Oklahoma Insurance Department, this Conditional Order shall act as notice of the matters to be reviewed at the hearing, and the Allegations of Fact, Alleged Violations of Law, and penalties imposed in this Conditional Order shall be considered withdrawn, pending final resolution at the hearing.

WITNESS My Hand and Official Seal this 8th day of May, 2015.



JOHN DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

A handwritten signature in black ink, reading "Barron B. Brown".

Barron B. Brown
Assistant General Counsel
3625 NW 56th St., Suite 100
Oklahoma City, OK 73112

CERTIFICATE OF MAILING

I, Barron B. Brown, hereby certify that a true and correct copy of the above and foregoing Conditional Administrative Order and Notice of Right to be Heard was mailed by regular mail and by certified mail, with postage prepaid and return receipt requested, on this 8th day of May, 2015, to:

Helmsman Management Services LLC
175 Berkley St.
Boston, MA 02116

CERTIFIED MAIL NO. 7014 2870 0000 5493 2217

and a copy was delivered to:

Angel Edingfield
Licensing Division

A handwritten signature in black ink, reading "Barron B. Brown".

Barron B. Brown
Assistant General Counsel

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

7014 2870 0000 5493 2217

| | |
|---|-----------|
| Postage | \$ |
| Certified Fee | |
| Return Receipt Fee (Endorsement Required) | |
| Restricted Delivery Fee (Endorsement Required) | |
| Total Postage & Fees | \$ |



Sent To: Helmsman Management Services LLC
 175 Berkley St.
 Boston, MA 02116
 City, State, ZIP+4: rlg/15-0494-DEN/Cond. Adm. Ord.

PS Form 3800, July 2014

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.

1. Article Addressed to:
 HELMSMAN MANAGEMENT SERVICES LLC
 175 BERKLEY ST.
 BOSTON, MA 02116
 rlg/15-0494-DEN/Cond. Adm. Ord.

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Harold Small* Agent Addressee

B. Received by (Printed Name): *MAY 11 2015* C. Date of Delivery

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) **7014 2870 0000 5493 2217**

PS Form 3811, July 2013

Domestic Return Receipt



NAIC Regulatory Actions
 RIRS Actions for HELMSMAN
 National Association of Insurance Commissioners
MANAGEMENT SERVICES INC



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Company Information

[HELMSMAN MANAGEMENT SERVICES INC](#)

NAIC Company Code:

FEIN:

042791584

Entity Number: 3195670

Alien:

Group:

[States with Regulatory Actions](#)

[Delimited Report](#)

Last Date Entered: 09/04/2013

Number of Actions: 10

| | | Activity 1 of 10 | |
|--------------------|---|-----------------------------|---------------------------|
| Action State: | South Dakota | Action Id: | 13357944 |
| Origin of Action: | 1015 OTHER STATES ACTION | State RIRS Identifier: | 1002052_33795 |
| Reason for Action: | 2075 FAILURE TO REPORT OTHER STATE ACTION | Entity Role: | Third Party Administrator |
| Disposition: | 3045 CONSENT ORDER | Penalty/Fine/Forfeiture: | \$500 |
| Action Date: | 8/28/2013 | Restitution: | |
| Effective Date: | 8/28/2013 | Time/Length of Order(Days): | |
| Enter Date: | 9/4/2013 | Department: | SD DOI |
| Contact Person: | Mallori Barnett | File Reference: | 1002052 |
| Contact E-Mail: | mallori.barnett@state.sd.us | | |
| Contact Phone: | (605)773-3563 | | |
| | | Activity 2 of 10 | |
| Action State: | Maine | Action Id: | 13346812 |
| Origin of Action: | 1018 INFORMATION/REFERRAL FROM ANOTHER STATE AGENCY 1040 WORKERS COMP EXAM | State RIRS Identifier: | TAF31988 |
| Reason for Action: | 2007 MARKET CONDUCT EXAMINATION | Entity Role: | Third Party Administrator |
| Disposition: | 2015 CLAIM HANDLING 3044 REMEDIAL MEASURES ORDERED 3045 CONSENT ORDER 3052 ORDERED TO COMPLY WITH SPECIFIC STATUTE OR REGULATION | Penalty/Fine/Forfeiture: | |
| Action Date: | 10/12/2012 | Restitution: | |
| Effective Date: | 10/12/2012 | Time/Length of Order(Days): | |
| Enter Date: | 4/2/2013 | Department: | |
| | | File Reference: | INS-11-212 |

| | | | |
|---------------------------|--|------------------------------------|---------------------------|
| Contact Person: | Elena Crowley | | |
| Contact E-Mail: | Elena.I.Crowley@maine.gov | | |
| Contact Phone: | 207-624-8421 | | |
| Activity 3 of 10 | | | |
| Action State: | South Dakota | Action Id: | 13260875 |
| Origin of Action: | 1065 ANNUAL FILING | State RIRS Identifier: | 1000042_31602 |
| Reason for Action: | 2028 TPA VIOLATION | Entity Role: | Third Party Administrator |
| | 2040 FAILURE TO TIMELY FILE | Penalty/Fine/Forfeiture: | \$250 |
| Disposition: | 3045 CONSENT ORDER | Restitution: | |
| Action Date: | 8/22/2011 | Time/Length of Order(Days): | |
| Effective Date: | 8/22/2011 | Department: | |
| Enter Date: | 8/31/2011 | File Reference: | 1000042 |
| Contact Person: | SOUTH DAKOTA DOI | | |
| Contact Phone: | Not Specified | | |
| Activity 4 of 10 | | | |
| Action State: | South Dakota | Action Id: | 13226397 |
| Origin of Action: | 1015 OTHER STATES ACTION | State RIRS Identifier: | 999532_30649 |
| Reason for Action: | 2075 FAILURE TO REPORT OTHER STATE ACTION | Entity Role: | Producer |
| Disposition: | 3045 CONSENT ORDER | Penalty/Fine/Forfeiture: | \$500 |
| Action Date: | 3/11/2011 | Restitution: | |
| Effective Date: | 3/11/2011 | Time/Length of Order(Days): | |
| Enter Date: | 3/16/2011 | Department: | |
| Contact Person: | SOUTH DAKOTA DOI | File Reference: | 999532 |
| Contact Phone: | Not Specified | | |
| Activity 5 of 10 | | | |
| Action State: | Delaware | Action Id: | 13215479 |
| Origin of Action: | 1015 OTHER STATES ACTION | State RIRS Identifier: | 114278_93245 |
| Reason for Action: | 2075 FAILURE TO REPORT OTHER STATE ACTION | Entity Role: | Producer |
| Disposition: | 3045 CONSENT ORDER | Penalty/Fine/Forfeiture: | \$250 |
| Action Date: | 10/27/2010 | Restitution: | |
| Effective Date: | 10/27/2010 | Time/Length of Order(Days): | |
| Enter Date: | 11/11/2010 | Department: | |
| Contact Person: | Robin David | File Reference: | |
| Contact E-Mail: | Robin.David@state.de.us | | |
| Contact Phone: | 302-674-7300 | | |
| Activity 6 of 10 | | | |
| Action State: | Nevada | Action Id: | 13161899 |
| Origin of Action: | 1060 LICENSING ADMINISTRATION | State RIRS Identifier: | 09.0130 |
| Reason for Action: | 2040 FAILURE TO TIMELY FILE | Entity Role: | Third Party Administrator |

| | | | |
|---------------------------|--|------------------------------------|------------------------------|
| Disposition: | 3102 MONETARY PENALTY 3105 CONSENT TO FINE | Penalty/Fine/Forfeiture: | \$500 |
| Action Date: | 12/10/2009 | Restitution: | |
| Effective Date: | 12/10/2009 | Time/Length of Order(Days): | |
| Enter Date: | 2/3/2010 | Department: | |
| Contact Person: | NEVADA DOI | File Reference: | 09.0130 |
| Contact Phone: | Not Specified | | |
| Activity 7 of 10 | | | |
| Action State: | Nevada | Action Id: | 13104204 |
| Origin of Action: | 1060 LICENSING ADMINISTRATION | State RIRS Identifier: | 09.0519 |
| Reason for Action: | 2040 FAILURE TO TIMELY FILE | Entity Role: | Third Party Administrator |
| Disposition: | 3102 MONETARY PENALTY 3105 CONSENT TO FINE | Penalty/Fine/Forfeiture: | \$500 |
| Action Date: | 12/4/2009 | Restitution: | |
| Effective Date: | 12/4/2009 | Time/Length of Order(Days): | |
| Enter Date: | 12/15/2009 | Department: | ENFORCEMENT |
| Contact Person: | Terri Verbrugghen | File Reference: | 09.0519 |
| Contact E-Mail: | verbrug@doi.nv.gov | | |
| Contact Phone: | (775)687-0701 | | |
| Activity 8 of 10 | | | |
| Action State: | Nevada | Action Id: | 11023922 |
| Origin of Action: | 1060 LICENSING ADMINISTRATION | State RIRS Identifier: | 1R_11023922 |
| Reason for Action: | 2028 TPA VIOLATION | Entity Role: | Third Party Administrator |
| | 2115 FAILURE TO TIMELY FILE 2004 REPORT | Penalty/Fine/Forfeiture: | \$1,000 |
| Disposition: | 3102 MONETARY PENALTY 3105 CONSENT TO FINE | Restitution: | |
| Action Date: | 6/14/2005 | Time/Length of Order(Days): | |
| Effective Date: | 6/29/2005 | Department: | |
| Enter Date: | 7/14/2005 | File Reference: | 05.398 |
| Contact Person: | NEVADA DOI | | |
| Contact Phone: | Not Specified | | |
| Activity 9 of 10 | | | |
| Action State: | Nevada | Action Id: | 10984824 |
| Origin of Action: | 1010 ROUTINE DEPT ACTION | State RIRS Identifier: | 1R_10984824 |
| Reason for Action: | 2028 TPA VIOLATION | Entity Role: | Third Party Administrator |
| | 2040 FAILURE TO TIMELY FILE | Penalty/Fine/Forfeiture: | \$500 |
| Disposition: | 3102 MONETARY PENALTY 3105 CONSENT TO FINE | Restitution: | |
| Action Date: | 5/8/2003 | Time/Length of Order(Days): | |
| Effective Date: | 5/29/2003 | Department: | |
| Enter Date: | 7/9/2003 | File Reference: | 03.560 |

| | | | |
|---------------------------|-----------------------------|------------------------------------|---------------------------|
| Contact Person: | NEVADA DOI | | |
| Contact Phone: | Not Specified | | |
| | | | Activity 10 of 10 |
| Action State: | Nevada | Action Id: | 10939973 |
| Origin of Action: | 1010 ROUTINE DEPT ACTION | State RIRS Identifier: | 1R_10939973 |
| Reason for Action: | 2028 TPA VIOLATION | | |
| | 2040 FAILURE TO TIMELY FILE | Entity Role: | Third Party Administrator |
| Disposition: | 3102 MONETARY PENALTY | Penalty/Fine/Forfeiture: | \$500 |
| | 3105 CONSENT TO FINE | Restitution: | |
| Action Date: | 9/13/2002 | Time/Length of Order(Days): | |
| Effective Date: | 10/1/2002 | Department: | |
| Enter Date: | 2/4/2003 | File Reference: | 02.376 |
| Contact Person: | NEVADA DOI | | |
| Contact Phone: | Not Specified | | |