BEFORE THE INSURANCE COMMISSIONER OF THE STATE OF OKLAHOMA

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	MSURANCE COMMISSIONER

STATE OF OKLAHOMA, ex rel. GLEN)	Oki
MULREADY, Insurance Commissioner,)	
)	
	Petitioner,)	
v.)	Case No. 22-0406-DIS
)	
THIRD COAST INSURANCE COMPAN	ΝY,)	
a surplus lines insurance company,)	
)	
	Respondent.)	

CONDITIONAL ADMINISTRATIVE ORDER AND NOTICE OF RIGHT TO BE HEARD

COMES NOW the State of Oklahoma, ex rel. Glen Mulready, Insurance Commissioner, by and through counsel, Antuanya "Bo" DeBose, and alleges and states as follows:

JURISDICTION

- 1. Glen Mulready 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. §§ 101-7401, including the Unfair Claims Settlement Practices Act, 36 O.S. §1250.1 et seq..
- 2. Respondent Third Coast Insurance Company ("Respondent"), is a foreign insurance company, holding NAIC Cocode 10713, authorized to write surplus lines insurance in the State of Oklahoma. Respondent's address of record is PO Box 40790, Lansing, Michigan 48901.
- 3. If Respondent requests a hearing in writing pursuant to *OAC 365:1-7-1*, the Insurance Commissioner, pursuant to *36 O.S. § 319*, will appoint an independent hearing examiner who shall sit as a quasi-judicial officer and preside over the hearing requested by Respondent.

FINDINGS OF FACT

- 1. On or about April 15, 2022, the Consumer Assistance Division of the Oklahoma Insurance Department ("OID") emailed, mailed and faxed a letter to Respondent and requested a response within twenty (20) days of receipt. The OID file number for this matter is #92883. The letter was emailed to regulatory.services@accidentfund.com and bob.lapinski@accidentfund.com. The letter was also faxed to (517) 346-7681 and mailed to 200 N. Grand Ave, Lansing, Michigan 48933, Respondent's recorded address in the State Based System ("SBS"). OID received a response to this request May 9, 2022 on behalf the Respondent.
- 2. On or about May 16, 2022, another letter was emailed, mailed and faxed to the Respondent and a response was requested within twenty (20) days of receipt. The letter was emailed to regulatory.services@accidentfund.com and bob.lapinski@accidentfund.com. The letter was also faxed to (517) 346-7681 and mailed to 200 N. Grand Ave, Lansing, Michigan 48933, Respondent's recorded address in SBS.
- 3. The twentieth (20th) day after the date of this letter was June 6, 2022. Respondent failed to provide a response to the aforementioned letter on or before June 6, 2022.
- 4. OID followed up and emailed, faxed and mailed the same letter to Respondent dated June 24, 2022. OID also requested a response to this letter within twenty (20) days of receipt. This letter was emailed to regulatory.services@accidentfund.com and bob.lapinski@accidentfund.com. The letter was also faxed to (517) 346-7681 and mailed to 200 N. Grand Ave, Lansing, Michigan 48933, Respondent's recorded address in SBS.
- 5. The twentieth (20th) day after the date of this letter was July 14, 2022. Respondent failed to provide a response to the aforementioned letter on or before July 14, 2022.
- 6. A copy of the aforementioned letters are attached as "Petitioner's Exhibit A" and

"Petitioner's Exhibit B."

- 7. As of the date of this Order, Respondent has failed to provide a response to the two (2) aforementioned letters from OID.
- 8. Pursuant to 36 O.S. §1250.4(B), "Any person subject to the jurisdiction of the Commissioner, upon receipt of any inquiry from the Commissioner shall, within twenty (20) calendar days from the date of receipt of the inquiry, furnish the Commissioner with an adequate response to the inquiry. The Commissioner may, upon good cause shown and on a case-by-case basis, extend the time allowed for a response for up to seven (7) additional calendar days. Any inquiry or response subject to this subsection shall be delivered electronically."
- 9. Pursuant to 36 O.S. §1250.14, the Insurance Commissioner may, after notice and hearing, subject an insurer to a civil penalty of not less than one hundred dollars (\$100.00) nor more than Five Thousand Dollars (\$5,000.00) for each violation of the Unfair Claims Settlement Practices Act.

CONCLUSIONS OF LAW

1. Respondent has violated 36 O.S. §1250.4(B) by failing to furnish an adequate response to two (2) inquiry letters from the Commissioner within twenty (20) calendar days from the date of the inquiry.

ORDER

IT IS THEREFORE ORDERED that Respondent shall provide a response to the Oklahoma Insurance Department letters referenced above and is fined in the amount of Two Hundred dollars (\$200.00). The response and fine shall be submitted to the Oklahoma Insurance Department within thirty (30) days of the date of this Conditional Administrative Order and made payable to the Oklahoma Insurance Department. The fine shall be sent to the Oklahoma Insurance

Department located at 400 NE 50th Street, Oklahoma City, Oklahoma 73105. Failure to comply with a proper order of the Commissioner will result in further administrative action.

To the Further Order is a Conditional Order. Unless Respondent requests a hearing with respect to the Findings of Fact set forth above within 30 days of the date of this Conditional Order, the penalties set forth above will become a Final Order on the 31st day following the date of mailing this Order. A request for hearing should be in writing and addressed to Antuanya "Bo" DeBose, Oklahoma Insurance Department, Legal Division, 400 NE 50th Street, Oklahoma City, Oklahoma 73105. The request for hearing must state the grounds for the request to set aside or modify the Order and must be served on the Oklahoma Insurance Department within the 30 days allotted. The proceedings on such requested hearing will be conducted in accordance with the Oklahoma Insurance Code, 36 O.S. §§ 101 et seq., and the Oklahoma Administrative Procedures Act, 75 O.S. §§ 250 through 324. If Respondent serves a timely request for hearing on the Oklahoma Insurance Department, this Conditional Order will act as a notice of the matters to be reviewed at the hearing and the Findings of Fact, Conclusions 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 27 day of July 2022.



GLEN MULREADY INSURANCE COMMISSIONER STATE OF OKLAHOMA

Antuanya "Bo" DeBose Assistant General Counsel Oklahoma Insurance Department 400 NE 50th Street Oklahoma City, Oklahoma, 73105

Tel. (405) 522-4805 Fax (405) 522-0125

CERTIFICATE OF MAILING

I hereby certify that a true and correct copy of the above and foregoing *Conditional Order* was mailed by regular mail and by certified mail, with postage prepaid and return receipt requested, on this _______ day of July, 2022, to:

Third Coast Insurance Company PO Box 40790 Lansing, MI 48901 regulatory services@afhi.com

CERTIFIED MAIL NO: 9214 8902 0982 7500 0481 78

and a copy was delivered to:

Consumer Assistance Division

Antuanya "Bo" DeBose Assistant General Counsel





Date Produced: 08/08/2022

OKLAHOMA INSURANCE DEPARTMENT:

The following is the delivery information for Certified Mail™/RRE item number 9214 8902 0982 7500 / 0481 78. Our records indicate that this item was delivered on 08/01/2022 at 11:43 a.m. in LANSING, MI 48924. The scanned image of the recipient information is provided below.

Signature of Recipient:



Address of Recipient:



Thank you for selecting the Postal Service for your mailing needs. If you require additional assistance, please contact your local post office or Postal Service representative.

Sincerely, United States Postal Service

The customer reference number shown below is not validated or endorsed by the United States Postal Service. It is solely for customer use.

This USPS proof of delivery is linked to the customers mail piece information on file as shown below:

THIRD COAST INSURANCE COMPANY PO BOX 40790 LANSING MI 48901-7990

Customer Reference Number:

C3583021.21160793



May 16, 2022

BOB LAPINSKI THIRD COAST INSURANCE COMPANY 200 N GRAND AVE LANSING, MI 48933

RE: EARNEST BELL, POLICY NUMBER PROP-STR7-032983-20

OID FILE NUMBER: 92883

Dear Mr. Lapinski:

We are enclosing a copy of additional information pertaining to the captioned matter, which has been forwarded to this office.

You are requested to review the enclosed material along with your file and advise us of your position in this matter. Please provide your response to us within twenty (20) calendar days from the date of receipt of this letter.

Regards,

Tracee Watley

Property & Casualty Analyst

Consumer Assistance/Claims Division

tracee.watley@oid.ok.gov

acel

(405)521-2991 Fax:(405)521-6652

EXHIBIT

Tracee Watley

From:

Tracee Watley

Sent:

Monday, May 16, 2022 4:48 PM

To:

regulatory.services@accidentfund.com; bob.lapinski@accidentfund.com

Subject: Attachments: OID FILE 92883 92883 105.pdf

Greetings, please see attached.

Regards,

Tracee Watley, MSM

Property and Casualty Analyst



Consumer Assistance/Claims Division 400 NE 50th Street Oklahoma City, Oklahoma 73105 405.521.2991 office <u>Tracee.Watley@oid.ok.gov</u> <u>oid.ok.gov</u> Follow us on:

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400 NC 50 Store: Oklahoma City, OK 70105

405 521 2023
 eldekney

June 24, 2022

BOB LAPINSKI THIRD COAST INSURANCE COMPANY 200 N GRAND AVE LANSING, MI 48933

RE: EARNEST BELL, POLICY NUMBER PROP-STR7-032983-20

OID FILE NUMBER: 92883

Dear Mr. Lapinski:

This letter is in reference to our recent inquiry regarding the captioned matter, a copy of which is attached for your easy reference.

Our files indicate that we have not received a reply to our inquiry. Please be advised that failure to furnish the Insurance Department with an adequate response to any inquiry within twenty (20) calendar days of receipt of the inquiry constitutes violation of 36 O.S. Section 1250.4.

Please give this matter your immediate attention and forward your reply so this office can evaluate your position and reply to the complainant.

Regards,

Tracee Watley

Consumer Assistance/Claims Division

tracee.watley@oid.ok.gov

(405) 521-2991 Fax: (405) 521-6652

Enclosure



Tracee Watley

From:

Tracee Watley

Sent:

Friday, June 24, 2022 3:27 PM

To:

regulatory.services@accidentfund.com; bob.lapinski@accidentfund.com;

regulatory.services@accidentfund.com

Subject:

OID FILE 92883

Attachments:

92883 80.pdf

Greetings,

Please see attached.

Regards,

Tracee Watley, MSM

Property and Casualty Analyst III



Consumer Assistance
400 NE 50th Street
Oklahoma City, Oklahoma 73105
405.521.2991 office
Tracee.Watley@oid.ok.gov
oid.ok.gov
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