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4. The Insurance Commissioner, pursuant to 36 O.S. § 319, will appoint an independent hearing examiner to sit as a quasi-judicial officer.
5. Informal disposition of this matter may be made by agreed settlement pursuant to 75 O.S. §309(E).

STIPULATIONS OF FACT

6. The Oklahoma Insurance Department's Consumer Assistance Division ("OID") received five (5) complaints stating the Respondent failed to resolve the insureds' claims timely. The OID file number(s) for these complaints are 124007, 124779, 123965, 123241, and 124088.
7. For OID file number 124007, the complainant filed a claim with the Respondent on or about January 19, 2024. On April 10, 2024, the Respondent accepted liability and stated a payment in the amount of \$18,223.69 would be issued for the claim. However, the Respondent failed to issue the payment for approximately four (4) months. The Respondent issued payment to the insured in the amount of \$18,853.24 on August 29, 2024.
8. For OID file number 124779, the complainant filed his claim with the Respondent on August 19, 2024. The Respondent made the claim payments November 27, 2024 and December 12, 2024 (100 and 115 days after the claim was initially filed).
9. For OID file number 123965, the complainant filed a claim with the Respondent on or about June 5, 2024. However, the Respondent failed to issue the claim payment for approximately eighty-five (85) days. The Respondent made the claim payment on August 29, 2024.
10. For OID file number 123241, the complainant filed a claim with the Respondent on or about April 30, 2024. However, the Respondent failed to issue the claim payment for

approximately ninety-seven (97) days. The Respondent made the claim payment on August 5, 2024.

11. For OID file number 124088, the complainant filed a claim with the Respondent on or about May 10, 2024. However, the Respondent failed to issue the claim payment for approximately one hundred nineteen (119) days. The Respondent made the claim payment on September 6, 2024.

12. Pursuant to 36 O.S. § 1250.7(A), within sixty (60) days after receipt by a property and casualty insurer of properly executed proofs of loss, the first party claimant shall be advised of the acceptance or denial of the claim by the insurer, or if further investigation is necessary. In the event of a weather-related catastrophe or a major natural disaster, as declared by the Governor, the Insurance Commissioner may extend the deadline imposed under this subsection an additional twenty (20) days.

13. Pursuant to 36 O.S. § 1250.7(C), every property and casualty insurer shall complete investigation of a claim within sixty (60) days after notification of proof of loss unless such investigation cannot reasonably be completed within such time. If such investigation cannot be completed, or if a property and casualty insurer needs more time to determine whether a claim should be accepted or denied, it shall so notify the claimant within sixty (60) days after receipt of the proofs of loss, giving reasons why more time is needed. If the investigation remains incomplete, a property and casualty insurer shall, within sixty (60) days from the date of the initial notification, send to such claimant a letter setting forth the reasons additional time is needed for investigation. Except for an investigation of possible fraud or arson which is supported by specific information giving a reasonable basis for the investigation, the time for investigation shall not exceed one hundred twenty

(120) days after receipt of proof of loss. Provided, in the event of a weather-related catastrophe or a major natural disaster, as declared by the Governor, the Insurance Commissioner may extend this deadline for investigation an additional twenty (20) days.

14. Pursuant to 36 O.S. §1250.14, “For any violation of the Unfair Claims Settlement Practices Act, 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 occurrence...”

CONCLUSIONS OF LAW

1. The Respondent has violated 36 O.S. §1250.7(C) by failing to complete its investigation into five (5) claims within sixty (60) days after notification of proof of loss and for failing to notify the claimants of the reasons that additional time was needed for investigation.

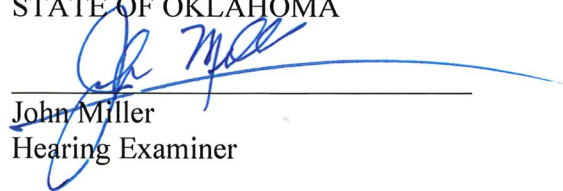
ORDER

IT IS THEREFORE ORDERED by the Insurance Commissioner and **AGREED** by Respondent Union Mutual Insurance Company that the Respondent is **FINED** in the amount of **Three Thousand Dollars** (\$3,000.00). The fine shall be paid within thirty (30) days from the date of this Agreed Order and made payable 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.

WITNESS My Hand and Official Seal this 11th day of March 2025.



GLEN MULREADY
INSURANCE COMMISSIONER
STATE OF OKLAHOMA


John Miller
Hearing Examiner

AGREED TO:


Antuany "Bo" DeBose
ASSISTANT GENERAL COUNSEL


Michael Ridgeway
RESPONDENT'S ATTORNEY

CERTIFICATE OF MAILING

I, Antuany "Bo" DeBose, hereby certify that a true and correct copy of the above and foregoing Agreed Order was mailed by first class U.S. Mail and by certified mail with postage prepaid and return receipt requested on this 13th day of March, 2025 to:

Union Mutual Insurance Company
9400 Broadway Extension Suite 500
Oklahoma City, Oklahoma 73114
francesm@umic-okc.com
robertm@umic.okc.com

CERTIFIED MAIL NO.
9214 8902 0982 7500 0702 61

MWR PLLC
Attn: Michael Ridgeway
PO Box 5927
Norman, Oklahoma 73069
ridgeway@sbcglobal.net

CERTIFIED MAIL NO.
9214 8902 0982 7500 0702 78

and a copy was delivered to:

Licensing & Anti-Fraud Division


Antuany "Bo" DeBose
Assistant General Counsel