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CERTIFIED MAIL
RETURN RECEIPT REQUESTED

STATE OF ALASKA
DEPARTMENT OF COMMERCE AND ECONOMIC DEVELOPMENT
DIVISION OF INSURANCE
3601 C STREET, SUITE 1324
ANCHORAGE, ALASKA 99503-5948

STATE OF ALASKA
DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT
DIVISION OF INSURANCE
3601 C STREET, SUITE 1324
ANCHORAGE, ALASKA 99503-5948
PHONE: (907) 269-7900
FAX: (907) 269-7910 / TDD: (907) 465-5437

Order No. SR 01-16 (a)) Suspension of Certificate of
) Authority No F-1273
In the Matter of) Order under the Provisions
MAXICARE LIFE AND) Of AS 21.09.140 (a) (3)
HEALTH INSURANCE)
COMPANY)
NAIC NO. 90476)
_____)

WHEREAS, a Certificate of Authority to transact the business of insurance
in the State of Alaska was issued to **MAXICARE LIFE AND HEALTH**
INSURANCE COMPANY, domiciled in the State of Missouri.

WHEREAS, the State of Missouri, Department of Insurance has placed
MAXICARE LIFE AND HEALTH INSURANCE COMPANY under an
administrative order of supervision dated May 24, 2001.

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WHEREAS, AS 21.09.140 (a) (3) states that the director shall suspend or revoke an insurer's Certificate of Authority if the insurer's authority to transact insurance is suspended or revoked by its state of domicile.

WHEREAS, the Quarterly Statement as of June 30, 2001 for **MAXICARE LIFE AND HEALTH INSURANCE COMPANY** shows that the company fails to meet the minimum Capital and Surplus requirement of AS 21.09.070 for the kinds of insurance authorized.

IT IS HEREBY ORDERED, pursuant to the provision of AS 21.09.140 (a) (3) that Certificate of Authority No F- 1273 issued to **MAXICARE LIFE AND HEALTH INSURANCE COMPANY** to transact the business of insurance in the State of Alaska shall be suspended for a period of one year unless terminated sooner as permitted by statute. Pursuant to AS 21.09.160 (b), this suspension shall automatically suspend the authority of all its agents to act as agents of **MAXICARE LIFE AND HEALTH INSURANCE COMPANY** in this state.

IT IS FURTHER ORDERED, during the period of suspension, **MAXICARE LIFE AND HEALTH INSURANCE COMPANY** shall not solicit or write any new business in Alaska, but shall file the Annual Statement, pay fees and any taxes due as provided by AS 21.09.170 (b).

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IT IS FURTHER ORDERED that Certificate of Authority No. F- 1273 will continue to be held in safekeeping by **MAXICARE LIFE AND HEALTH INSURANCE COMPANY** until such time as this Order of Suspension is replaced by an order of Revocation or the Certificate of Authority is surrendered.

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This Order is effective the 27th day of November 2001

Dated this 27th day of November 2001.



ROBERT A. LOHR, DIRECTOR
DIVISION OF INSURANCE