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Attorneys for the Department of Insurance

BEFORE THE DIRECTOR OF THE DEPARTMENT OF INSURANCE

STATE OF IDAHO

In the Matter of:

ARCADIAN HEALTH PLAN, INC. NAIC No. 12151 Docket No. 18-3320-17

STIPULATION AND ORDER EXTENDING DEADLINE TO COMPLY

STIPULATION

WHEREAS, Arcadian Health Plan, Inc. ("Arcadian") and the Idaho Department of Insurance (the "Department") entered into that certain Stipulation and Order Concerning Certificate of Authority, which issued on April 27, 2017 (hereinafter "2017 Stipulation");

WHEREAS, in reliance on the agreements and commitments set forth in the 2017 Stipulation, Arcadian was issued a certificate of authority pursuant to Idaho Code § 41-308, permitting Arcadian to operate in the State of Idaho as a managed care organization pursuant to chapter 39, title 41, of the Idaho Code;

WHEREAS, Paragraph 3 of the 2017 Stipulation required Arcadian to expand its Medicare service areas to two additional underserved counties commencing no later than the

STIPULATION AND ORDER EXTENDING DEADLINE TO COMPLY - Page 1

2019 contract year;

WHEREAS, Arcadian admits that it cannot comply with Paragraph 3 by the stated timeline;

WHEREAS, the expansion requirement stated in Paragraph 3 was one, among other material terms, upon which the Department relied in issuing Arcadian a certificate of authority;

WHEREAS, Arcadian now seeks an extension of the timeline to comply with Paragraph 3, requesting that it be allowed until the 2020 contract year to comply with its prior commitment to expand to underserved counties;

WHEREAS, the parties agree that the following stipulation is in the best interest of Idaho consumers, the Department and Arcadian.

NOW THEREFORE, Arcadian and the Department hereby stipulate and agree as follows:

- 1. Arcadian shall pay an administrative penalty in the amount of five thousand dollars (\$5,000) within ten (10) business days from the date of this Stipulation and Order for failing to comply with Paragraph 3 of the 2017 Stipulation;
- 2. Arcadian, Humana Inc., and Humana Insurance Company shall have entered into a Compliance Agreement with the Department concurrent with this Stipulation and Order;
- 3. The Compliance Agreement shall detail the underserved counties targeted for expansion, the milestone dates, and the agreed-upon reporting requirements that must be met within the upcoming year to show Arcadian, Humana Inc., or Humana Insurance Company's progression and commitment towards expanding into underserved counties;
- 4. Arcadian, Humana Inc., and/or Humana Insurance Company's failure to meet any one of the terms of the Compliance Agreement shall constitute a separate violation subjecting

either Arcadian, Humana Inc., or Humana Insurance Company, individually or collectively, to administrative penalties found in title 41, Idaho Code.

- 5. In reliance on the terms of this Stipulation and Order as well as the terms of the Compliance Agreement entered into concurrently herewith among and between the Department and Arcadian, Humana Inc., and Humana Insurance Company, the Department agrees to extend the timeline stated in Paragraph 3 of the 2017 Stipulation to commencement of the 2020 contract year in reliance on and accordance with the terms of the Compliance Agreement;
 - All other terms of the 2017 Stipulation shall remain in effect.
- 7. This stipulation and the Compliance Agreement executed concurrently herewith is subject to approval by the Director, and shall become effective and binding upon the Department and parties upon such approval. Should the Director decline to approve this Agreement and/or the stipulation concurrently executed herewith, the Department and parties shall retain all of their rights, claims and/or defenses.

IT IS SO AGREED this 3/5+day of October, 2018.

ARCADIAN HEALTH PLAN, INC.

Bv:

Joseph C. Ventura

Title: SVP, Assoc. General Counsel & Corporate Secretary

Approved as to Form:

By:

Attorney for Arcadian Health Plan, Inc.

STATE OF <u>KENTUCKY</u>) ss.

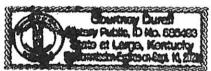
County of <u>JEFFERSON</u>) ss.

On this <u>31 day of Cotoo</u>, 2018, before me, the undersigned, a Notary Public in and for said State, personally appeared <u>Joseph C. Ventura</u>, known or identified to me (or proved to me on the oath of), to be the president, or vice-president, or secretary or assistant secretary, of the corporation that executed the instrument or the person who executed the instrument on behalf of said corporation and acknowledged to me that such corporation executed the same.

WITNESS MY HAND and official seal hereto affixed the day, month and year in this

.

certificate first above written.



Notary Public in and for the State of KENTUCKY

Residing at 500 W. Main Street, Louisville, KY 40202

STATE OF IDAHO DEPARTMENT OF INSURANCE

By:

NATHAN FARAGHER

Title: Bureau Chief, Company Activities Bureau

Approved as to Form:

OFFICE OF THE ATTORNEY GENERAL

Rve

Judy I Gaier

Deputy Attorney General

Attorney for the Idaho Department of Insurance

ORDER

IT IS ORDERED, pursuant to Idaho Code §§ 41-210, 41-212 and 41-308, that the foregoing Stipulation as between Arcadian Health Plan, Inc. ("Arcadian"), and the State of Idaho, Department of Insurance (the "Department"), is approved.

IT IS FURTHER ORDERED as follows:

- That Arcadian is in violation of that certain Stipulation and Order Concerning
 Certificate of Authority, which issued on April 27, 2017, for failing to timely
 comply with the terms of Paragraph 3 stated therein; and
- That, for such violation, Arcadian shall pay an administrative fee in the amount of five thousand dollars (\$5,000) within no later than ten (10) business days from the date of this order; and
- That Arcadian shall be granted an extension until the 2020 contract year commencing January 1, 2020, subject to the terms stated in this Stipulation and Order and the Compliance Agreement entered into concurrently herewith; and
- That the extension contemplated herein is subject to Arcadian, Humana Inc., and Humana Insurance Company having entered into a Compliance Agreement concurrently hereto and complying with the terms of said agreement and this Stipulation and Order; and
- That, subject to the Compliance Agreement and this Stipulation and Order, all other terms of the Stipulation and Order Concerning Certificate of Authority which issued on April 27, 2017, remain in full force and effect.

IT HEREBY SO ORDERED.

Signature page to follow

DATED AND EFFECTIVE this day of		
	STATE OF IDAHO DEPARTMENT OF INSU	JRANCE
	DEAN L. CAMERON, Di	luero
CERTIFICATE OF SERVICE		
I HEREBY CERTIFY that I have, on this 6th day of 42018, caused a true and correct copy of the foregoing STIPULATION AND ORDER EXTENDING DEADLINE TO COMPLY to be served upon the following by the designated means:		
ARCADIAN HEALTH PLAN, INC. 500 West Main Street Louisville, KY 40202	Copp Seculary	 ☐ first class mail ☐ certified mail ☐ hand delivery ☐ via facsimile
Judy L. Geier Deputy Attorney General IDAHO DEPARTMENT OF INSURANCE 700 W. State Street P.O. Box 83720 Boise, Idaho 83720-0043		☐ first class mail ☐ certified mail ☑ hand delivery ☐ via facsimile