

FILED *AM*
NOV 02 2021
Department of Insurance
State of Idaho

BEFORE THE DIRECTOR OF THE DEPARTMENT OF INSURANCE

STATE OF IDAHO

In the Matter of:

AMERICO FINANCIAL LIFE AND
ANNUITY INSURANCE COMPANY

Certificate of Authority No. 121
NAIC ID No. 61999

Docket No. 18-3987-21

**ORDER AUTHORIZING
DISCONTINUANCE OF
MEDICARE SUPPLEMENT PLANS**

On October 14, 2021, the Idaho Department of Insurance (“Department”) received a letter from AMERICO FINANCIAL LIFE AND ANNUITY INSURANCE COMPANY (“AMERICO”), which was subsequently revised and updated on October 19, 2021, notifying the Department of AMERICO’s intent to discontinue the availability of its Medicare Supplement plans, identified as form numbers AID500-A/AID500-A (09/16), AID500-F/AID500-F (09/16), AID500-G/AID500-G (09/16), and AID500-N/AID500-N (09/16), in Idaho effective December 31, 2021.

AMERICO acknowledged that discontinuance of the sale of its Medicare Supplement plans in Idaho will prohibit AMERICO from filing for approval in Idaho a new policy form or certificate form of the same type for the same standard Medicare Supplement benefit plans as the discontinued forms for a period of five (5) years from the date of AMERICO’s notice to the Department, pursuant to IDAPA 18.04.10.056.04.b. AMERICO represented that it will continue

to service all of its existing in-force Medicare Supplement policies covering Idaho insureds, which policies are guaranteed renewable.

The Department's Director ("Director"), having reviewed the foregoing and the requirements of IDAPA 18.04.10.056.04, finds that the proposed effective date of the discontinuance complies with the notice requirements to the Director set forth in IDAPA 18.04.10.056.04.a. Based on this finding, and good cause appearing,

NOW, THEREFORE, IT IS HEREBY ORDERED, pursuant to IDAPA 18.04.10.056.04.a, that AMERICO is authorized to discontinue availability of its Medicare Supplement plans identified above, effective December 31, 2021.

IT IS HEREBY FURTHER ORDERED, pursuant to IDAPA 18.04.10.056.04.b, that AMERICO shall not file with the Department a new policy form or certificate form of the same type for the same standard Medicare Supplement benefit plans as the discontinued forms prior to October 14, 2026.

DATED and effective this 1st day of November, 2021.

STATE OF IDAHO
DEPARTMENT OF INSURANCE



DEAN L. CAMERON
Director

NOTIFICATION OF RIGHTS

This is a final order of the agency. Any party may file a motion for reconsideration of this final order within 14 days of the service date of this order. The agency will dispose of the motion for reconsideration within 21 days of its receipt, or the motion will be considered denied by operation of law. *See* Idaho Code § 67-5246(4).

Any such motion for reconsideration shall be served on the Director of the Idaho Department of Insurance, addressed as follows:

Dean L. Cameron, Director
Idaho Department of Insurance
700 W. State Street, 3rd Floor
P.O. Box 83720
Boise, ID 83720-0043

Pursuant to Idaho Code §§ 67-5270 and 67-5272, any party aggrieved by this final order or orders previously issued in this case may file a petition for judicial review in the district court of the county in which:

- i. A hearing was held;
- ii. The final agency action was taken;
- iii. The party seeking review of the order resides, or operates its principal place of business in Idaho; or
- iv. The real property or personal property that was the subject of the agency action is located.

A petition for judicial review must be filed within 28 days of: (a) the service date of this final order, (b) the service of an order denying motion for reconsideration, or (c) the failure within 21 days to grant or deny a motion for reconsideration, whichever is later. *See* Idaho Code § 67-5273. The filing of a petition for judicial review does not itself stay the effectiveness or enforcement of the order under appeal. Idaho Code § 67-5274.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this 2nd day of November, 2021, I caused a true and correct copy of the foregoing ORDER AUTHORIZING DISCONTINUANCE OF MEDICARE SUPPLEMENT PLANS to be served upon the following by the designated means:

Americo Financial Life and Annuity Insurance Company
Tamika Gatson, Sr. Compliance Analyst
300 W. 11th Street
P.O. Box 410288
Kansas City, MO 64141-0288

- first class mail
- certified mail
- hand delivery
- facsimile
- email

Karl T. Klein
Lead Deputy Attorney General
Idaho Department of Insurance
700 W. State Street, 3rd Floor
P.O. Box 83720
Boise, ID 83720-0043

- first class mail
- certified mail
- hand delivery
- facsimile
- email


Pamela Murray