LAWRENCE G. WASDEN Attorney General

RICHARD B. BURLEIGH, ISB No. 4032 Deputy Attorney General State of Idaho Department of Insurance 700 W. State Street, 3rd Floor P.O. Box 83720 Boise, Idaho 83720-0043

Boise, Idaho 83720-0043 Telephone: (208) 334-4219 Facsimile: (208) 334-4298 richard.burleigh@doi.idaho.gov

Attorneys for the Department of Insurance

FILED JUN 0 8 2015

Department of Insurance State of Idaho

BEFORE THE DIRECTOR OF THE DEPARTMENT OF INSURANCE

STATE OF IDAHO

In the Matter of:

STONEBRIDGE LIFE INSURANCE COMPANY

Certificate of Authority No. 796 NAIC ID No. 65021 Docket No. 18-3057-15

ORDER AUTHORIZING WITHDRAWAL FROM MEDICARE SUPPLEMENT MARKET

On May 13, 2015, the Idaho Department of Insurance (Department) received from STONEBRIDGE LIFE INSURANCE COMPANY (STONEBRIDGE) notice of its intent to withdraw from the Medicare Supplement market in Idaho, effective July 1, 2015, by discontinuing the availability of its Medicare Supplement plans, which are identified as policy form numbers MSH1A ID; MSH1F ID; MSH1G ID; MSH1N ID; MSH1O REV ID; MSH1R REV ID; H0714 ID; and SA-ADINFO 0914. STONEBRIDGE acknowledged that its withdrawal of Medicare Supplement policies from sale in Idaho will prohibit STONEBRIDGE 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 STONEBRIDGE's notice to the Department, pursuant to the requirements of IDAPA 18.01.54.030.04.b. STONEBRIDGE represented that its existing in-force Medicare Supplement policies covering Idaho insureds will be assumed by Transamerica Premier Life Insurance Company (Transamerica), a corporate affiliate of STONEBRIDGE, and that Transamerica will continue to service such policies.

STONEBRIDGE's notice of intent to withdraw from the Medicare Supplement market in Idaho appears to comply with the notice requirements to the Department's Director (Director) as set forth in IDAPA 18.01.54.030.04.a.

The Director, having reviewed the foregoing and the requirements of IDAPA 18.01.54.030.04, and good cause appearing therefor,

NOW, THEREFORE, IT IS HEREBY ORDERED, pursuant to IDAPA 18.01.54.030.04.a, that STONEBRIDGE is authorized to withdraw from the Medicare Supplement market in Idaho, effective July 1, 2015.

IT IS HEREBY FURTHER ORDERED, pursuant to IDAPA 18.01.54.030.04.b, that STONEBRIDGE 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 May 13, 2020.

DATED this ______ day of June, 2015.

STATE OF IDAHO DEPARTMENT OF INSURANCE

THOMAS A. DONOVAN

Acting Director

NOTIFICATION OF RIGHTS

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

Pursuant to Idaho Code §§ 67-5270 and 67-5272, any party aggrieved by this final order may appeal it by filing a petition for judicial review in the district court of the county in which: (1) the hearing was held; or (2) the final agency action was taken; or (3) the aggrieved party resides or operates its principal place of business in Idaho; or (4) the real property or personal property that was the subject of the agency decision is located. An appeal must be filed within twenty-eight (28) days of: (a) the service date of this final order; or (b) an order denying a petition for reconsideration; or (c) the failure within twenty-one (21) days to grant or deny a petition 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.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this Aday of June, 2015, I caused a true and correct copy of the foregoing ORDER AUTHORIZING WITHDRAWAL FROM MEDICARE SUPPLEMENT MARKET to be served upon the following by the designated means:

Stonebridge Life Insurance Company Robert D. Morrow, Jr., Asst. Vice President 100 Light Street, Floor B1 Baltimore, MD 21202	first class mail certified mail hand delivery via facsimile via email
Stonebridge Life Insurance Company 4333 Edgewood Road, NE Cedar Rapids, IA 52499	□ first class mail □ certified mail □ hand delivery □ via facsimile □ via email
Transamerica Premier Life Insurance Company 4333 Edgewood Road, NE Cedar Rapids, IA 52499	□ first class mail □ certified mail □ hand delivery □ via facsimile □ via email
Richard B. Burleigh Deputy Attorney General Idaho Department of Insurance 700 W. State Street, 3 rd Floor P.O. Box 83720 Boise, ID 83720-0043	☐ first class mail ☐ certified mail ☐ hand delivery ☐ via facsimile ☐ via email

Pamela Murray