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Department of Insurance State of Idaho

FILED

BEFORE THE DIRECTOR OF THE DEPARTMENT OF INSURANCE

STATE OF IDAHO

In the Matter of:

STERLING LIFE INSURANCE COMPANY

Certificate of Authority No. 1200 NAIC ID No. 77399

Docket No. 18-3122-15

ORDER AUTHORIZING WITHDRAWAL FROM MEDICARE SUPPLEMENT MARKET

On November 19, 2015, the Idaho Department of Insurance (Department) received from STERLING LIFE INSURANCE COMPANY (STERLING) notice of its intent to withdraw from the Medicare Supplement market in Idaho, effective December 31, 2015, by discontinuing the availability of its Medicare Supplement plans, which are identified as policy forms:

- Medicare Supplement Plan A ID STD A (05/10);
- Medicare Supplement Plan B ID STD B (05/10);
- Medicare Supplement Plan C ID STD C (05/10);
- Medicare Supplement Plan F ID STD F (05/10);
- Medicare Supplement Innovative Plan F ID INN STD F (05/10);
- Medicare Supplement Plan G ID STD G (05/10);
- Medicare Supplement Plan K ID STD K (05/10);
- Medicare Supplement Plan N ID STD N;
- Medicare Select Plan A ID SEL A (05/10);

- Medicare Select Plan B ID SEL B (05/10);
- Medicare Select Plan C ID SEL C (05/10);
- Medicare Select Plan F ID SEL F (05/10);
- Medicare Select Innovative Plan F ID INN SEL F (05/10);
- Medicare Select Plan G ID SEL G (05/10);
- Medicare Select Plan K ID SEL K (05/10); and
- Medicare Select Plan N ID SEL N.

STERLING acknowledged that its withdrawal of Medicare Supplement policies from sale in Idaho will prohibit STERLING 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 STERLING's notice to the Department, pursuant to the requirements of IDAPA 18.01.54.030.04.b. STERLING represented that it will continue to service its existing in-force Medicare Supplement policies covering Idaho insureds.

STERLING'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 STERLING is authorized to withdraw from the Medicare Supplement market in Idaho, effective December 31, 2015.

IT IS HEREBY FURTHER ORDERED, pursuant to IDAPA 18.01.54.030.04.b, that STERLING 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 November 19, 2020.

DATED this _____ day of December, 2015.

STATE OF IDAHO DEPARTMENT OF INSURANCE

DEAN L. CAMERON

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 <u>15</u> day of December, 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:

| Sterling Life Insurance Company Gerald Reilly, Vice President, Produ 11200 Lakeline Blvd., Suite 100 Austin, TX 78717 | ct Development | □ 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☐ |
| | Kelly Grady | |