FILED

MAY - 1 2023

Department of Insurance State of Idaho

BEFORE THE DIRECTOR OF THE DEPARTMENT OF INSURANCE

STATE OF IDAHO

In the Matter of:

ACCENDO INSURANCE COMPANY

Certificate of Authority No. 1062 NAIC No. 63444 Docket No. 18-4281-23

ORDER AUTHORIZING
DISCONTINUANCE OF
MEDICARE SUPPLEMENT PLANS

On April 4, 2023, Accendo Insurance Company (the "Company") notified the Idaho Department of Insurance ("Department") that the Company intends to stop selling Medicare Supplement policies in Idaho effective May 31, 2023. The Company identified the following affected plans as form numbers:

ACCMSP20A-ID

ACCMSP20F-ID

ACCMSP20G-ID

ACCMSP20N-ID

The Company acknowledged that, per IDAPA 18.04.10.056.04.b, discontinuing availability of its Medicare Supplement plans in Idaho will prohibit the Company from filing, for approval in Idaho, a new policy form or certificate form of the same type for the same standard Medicare Supplement benefit plan as the discontinued forms for five years from the date of the Company's notice to the Department. The Company represented that there are 985 active Medicare Supplement Policies under the above-identified policy forms, and that the Company will continue to service those existing policies.

The Department's Director ("Director"), having reviewed the foregoing and 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 ORDERED, pursuant to IDAPA 18.04.10.056.04.a, that the Company may discontinue availability of its Medicare Supplement plans identified above, effective May 31, 2023.

IT IS FURTHER ORDERED, pursuant to IDAPA 18.04.10.056.04.b, that the Company shall not file with the Department a new policy form or certificate form of the same type for the same standard Medicare Supplement benefit plan as the discontinued forms prior to May 31, 2028.

DATED and effective this ____ day of _______, 2023.

STATE OF IDAHO DEPARTMENT OF INSURANCE

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

	day of
Accendo Insurance Company 1021 Reams Fleming Blvd. Franklin, TN 37064	 □ First Class Mail □ Certified Mail □ Hand Delivery □ Facsimile □ Email:
Karl T. Klein 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 □ Facsimile ⋈ Email: karl.klein@doi.idaho.gov
	Penny Wilcox