

FILED

OCT 26 2021

INSURANCE COMMISSIONER  
OKLAHOMA

BEFORE THE INSURANCE COMMISSIONER OF THE  
STATE OF OKLAHOMA

STATE OF OKLAHOMA, ex rel. GLEN )  
 MULREADY, Insurance Commissioner, )  
 )  
 Petitioner, )  
 v. )  
 )  
 EMPLOYERS NATIONAL INSURANCE )  
 COMPANY, INC., a domestic property and )  
 casualty insurer in the State of Oklahoma, )  
 )  
 Respondent. )

Case No. 21-0215-DIS

AGREED ORDER

COMES NOW the State of Oklahoma, ex rel. Glen Mulready, Insurance Commissioner, by and through counsel, Antuanya "Bo" DeBose, and Respondent Employers National Insurance Company, Inc, by and through counsel J. Clay Christensen and Lawn B. Gardner, and agree to entry of this Order.

JURISDICTION

The parties stipulate to the following:

1. Glen Mulready is the Insurance Commissioner of the State of Oklahoma and, as such, is charged with the duty of administering and enforcing all provisions of the Oklahoma Insurance Code, 36 O.S. §§ 101-7401, including Subsidiaries of Insurers. 36 O.S. § 1631 et seq..
2. Respondent Employers National Insurance Company Inc. ("Respondent"), holding NAIC Cocode 16220, is a member of an insurance holding company system and required to register with the Commissioner pursuant to 36 O.S. §1635(A). Respondent's address of record is 3401 NW 63<sup>rd</sup> Street, Suite 600, Oklahoma City, Oklahoma 73116.
3. The Insurance Commissioner has jurisdiction over the subject matter raised in this dispute and may issue penalties pursuant to 36 O.S. §1643.
4. The Insurance Commissioner, pursuant to 36 O.S. § 319, has appointed an independent hearing examiner who shall sit as a quasi-judicial officer.

5. Informal disposition of this matter may be made by agreed settlement pursuant to 75 O.S. §309(E).

#### FINDINGS OF FACT

1. Pursuant to 36 O.S. § 1635, the Oklahoma Insurance Department ("OID") requires yearly filings of the Annual Form B ("Annual Form B") and Ultimate Controlling Person statement ("UCP statement"). Any insurer which is subject to registration under this section shall register within fifteen (15) days after it becomes subject to registration, and annually thereafter by May 1 of each year for the previous calendar year, unless the Commissioner for good cause shown extends the time for registration, and then within the extended time.

2. On or about April 22, 2020, Respondent filed its 2019 Annual Form B without a UCP Statement. OID subsequently requested Respondent file its 2019 UCP Statement.

3. On or about April 12, 2021, Respondent filed its 2020 Annual Form B without a UCP Statement. OID subsequently requested Respondent file its 2020 UCP Statement.

4. Respondent filed their 2019 and 2020 UCP statements on August 31, 2021.

5. Pursuant to 36 O.S. §1635(B)(1), every insurer subject to registration shall file the registration statement with the Commissioner on a form and in a format prescribed by the National Association of Insurance Commissioners, which shall contain the capital structure, general financial condition, ownership and management of the insurer and any person controlling the insurer.

6. Pursuant to the provisions of 36 O.S. §1643, *"Any insurer failing, without just cause, to file any registration statement as required in this act shall be required, after notice and hearing, to pay a penalty of Five Hundred Dollars (\$500.00) for each day's delay, to be recovered by the Insurance Commissioner and the penalty so recovered shall be paid as provided in Section 307.5 of Title 36 of the Oklahoma Statutes. The maximum penalty under this section is One Hundred Thousand Dollars (\$100,000.00). The Commissioner may reduce the penalty if the insurer*

demonstrates to the Commissioner that the imposition of the penalty would constitute a financial hardship to the insurer.”

**CONCLUSIONS OF LAW**

1. Respondent violated 36 O.S. §1635(A) and 36 O.S. §1635(B)(1), by failing to completely file its 2019 and 2020 registration as required. Specifically, Respondent failed to file its 2019 and 2020 UCP Statement as required by statute and requested by OID.

**ORDER**

**IT IS THEREFORE ORDERED** by the Insurance Commissioner and **AGREED** to by the Respondent that Respondent is **CENSURED** and **FINED** One Hundred Thousand Dollars (\$100,000.00). The fine shall be paid within ten (10) months of the date of this Agreed Order and made payable to the Oklahoma Insurance Department located at 400 NE 50<sup>th</sup> Street, Oklahoma City, Oklahoma 73112. Failure to comply with a proper order of the Commissioner will result in further administrative action.

WITNESS My Hand and Official Seal this 26 day of October 2021.


GLEN MULREADY  
INSURANCE COMMISSIONER  
STATE OF OKLAHOMA



Stephen Mathis  
HEARING EXAMINER

AGREED TO:

 *for Bo DeBose*  
Antuanya "Bo" DeBose  
ASSISTANT GENERAL COUNSEL

  
J. Clay Christensen  
ATTORNEY FOR RESPONDENT

**CERTIFICATE OF MAILING**

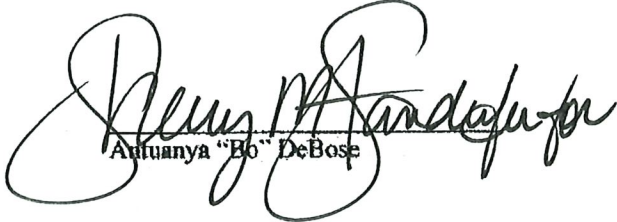
I, Antuanya "Bo" DeBose, hereby certify that a true and correct copy of the above and foregoing Agreed Order was mailed by first class U.S. Mail and by certified mail with postage prepaid and return receipt requested on this 27<sup>th</sup> day of October, 2021 to:

J. Clay Christensen  
Lawn B. Gardner  
Christensen Law Group, PLLC  
3401 N.W. 63<sup>rd</sup> Street, Suite 600  
Oklahoma City, Oklahoma 73116  
[clay@christensenlawgroup.com](mailto:clay@christensenlawgroup.com)  
[lawn@christensenlawgroup.com](mailto:lawn@christensenlawgroup.com)

CERTIFIED MAIL NO.  
9214 8902 0982 7500 0417 28

and that a copy was delivered to:

Financial Division

  
Antuanya "Bo" DeBose




Date Produced: 11/01/2021

OKLAHOMA INSURANCE DEPARTMENT:

The following is the delivery information for Certified Mail™/RRE item number 9214 8902 0982 7500 0417 28. Our records indicate that this item was delivered on 10/28/2021 at 11:13 a.m. in OKLAHOMA CITY, OK 73116. The scanned image of the recipient information is provided below.

Signature of Recipient :

C19 160 R  


Address of Recipient :

3101 ALLE 63RD  
#600

Thank you for selecting the Postal Service for your mailing needs. If you require additional assistance, please contact your local post office or Postal Service representative.

Sincerely,  
United States Postal Service

The customer reference number shown below is not validated or endorsed by the United States Postal Service. It is solely for customer use.

This USPS proof of delivery is linked to the customers mail piece information on file as shown below:

J CLAY CHRISTENSEN  
LAWN B GARDNER  
CHRISTENSEN LAW GROUP LLC  
STE 600  
3401 NW 63RD ST  
OKLAHOMA CITY OK 73116-3796

Customer Reference Number: C3025136.17590035

Return Reference Number sms/21-0215-DIS (ASD)/Agreed Order



**Return address:**

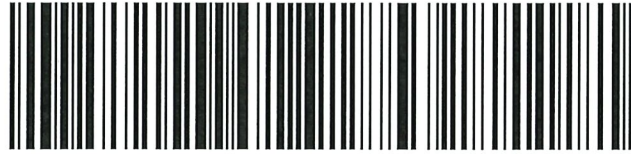
OKLAHOMA INSURANCE DEPARTMENT  
5 CORPORATE PLAZA  
OKLAHOMA CITY, OK 73112

**Recipient address:**

J CLAY CHRISTENSEN  
LAWN B GARDNER  
CHRISTENSEN LAW GROUP LLC  
STE 600  
3401 NW 63RD ST  
OKLAHOMA CITY OK 73116-3796

MAILING DATE: 10/27/2021  
DELIVERY DATE: 10/28/2021

USPS CERTIFIED MAIL



9214 8902 0982 7500 0417 28

**USPS Tracking Label Number: 9214 8902 0982 7500 0417 28**

USPS Tracking History	Location	Date / Time
PRE-SHIPMENT INFO SENT USPS AWAITS ITEM	OKLAHOMA CITY,OK 73105	10/27/2021 15:42
SHIPMENT RECEIVED ACCEPTANCE PENDING	OKLAHOMA CITY,OK 73118	10/27/2021 16:02
ORIGIN ACCEPTANCE	OKLAHOMA CITY,OK 73105	10/27/2021 20:27
PROCESSED THROUGH USPS FACILITY	OKLAHOMA CITY OK DISTRIBUTION C 73107	10/27/2021 21:42
DEPARTED USPS REGIONAL FACILITY	OKLAHOMA CITY OK DISTRIBUTION C 73107	10/28/2021 08:51
DELIVERED FRONT DESK/RECEPTION/MAIL ROOM	OKLAHOMA CITY,OK 73116	10/28/2021 11:13

CASE NUMBER: 21-0215-DIS  
DEPARTMENT: LEGAL/ASD  
SENDER: SMS  
CUSTOM 4: AGREED ORDER