## BEFORE THE DIVISION OF INSURANCE DEPARTMENT OF LABOR AND REGULATION STATE OF SOUTH DAKOTA

IN THE MATTER OF HEALTHSPRING LIFE &	) C(	ONSENT ORDER
HEALTH INSURANCE COMPANY INC	)	

In resolution of the above matter and in lieu of issuance of a Notice of Hearing and a formal hearing, the undersigned parties do hereby agree to the following:

HEALTHSPRING LIFE & HEALTH INSURANCE COMPANY INC ("HEALTHSPRING"), whose address of record is 530 Great Circle Road, Nashville, TN 37228, is an insurance company holding a certificate of authority to transact business in the State of South Dakota;

HEALTHSPRING is aware that the South Dakota Division of Insurance ("Division") has conducted an investigation of its insurance-related activities in South Dakota;

The Division has alleged the following:

- 1) HEALTHSPRING failed to timely pay the South Dakota Life and Health Insurance Guaranty Association assessment issued to them on October 21, 2022, a violation of SDCL 58-1-5 and 58-29C-52;
- 2) HEALTHSPRING failed to respond the Division's requests for explanation dated March 9, 2023 and April 3, 2023, a violation of SDCL 58-33-66;
- 3) Any of the above-cited conduct may be grounds for the revocation or suspension of HEALTHSPRING's certificate of authority pursuant to SDCL 58-6-46;

HEALTHSPRING is aware of and understands the nature of the charges and has been informed that it has the right to notice, hearing, and appeal, and that by agreeing to and signing this Consent Order waives these rights;

In return for HEALTHSPRING agreeing to the provisions of this Consent Order, the Division agrees not to proceed to hearing and agrees that this Consent Order will constitute an informal disposition of this licensing matter pursuant to SDCL 1-26-20;

HEALTHSPRING agrees to a monetary penalty in the amount of \$2,500 pursuant to SDCL 58-4-28.1, in lieu of contesting this matter formally; and

HEALTHSPRING further agrees to conduct itself in accordance with the insurance laws and regulations of the State of South Dakota;

HEALTHSPRING further agrees that this Consent Order may be considered for the purpose of determining the appropriate sanction in any future actions with the Division for any violations of the laws or regulations of the State of South Dakota or for failing to abide by any order of the Director;

Wherefore, good cause appearing from the foregoing, it is hereby:

ORDERED that HEALTHSPRING pay a monetary penalty in the amount of \$2,500 payable to "South Dakota Division of Insurance" for deposit in the general fund of the State of South Dakota; and it is further

ORDERED that should HEALTHSPRING fail to comply with the provisions of this Order, the Division may seek the suspension or revocation of HEALTHSPRING's Certificate of Authority at hearing pursuant to SDCL 58-6-46, or seek other remedies available at law; and it is further

ORDERED that the use of this Consent Order for competitive purposes by an insurance agent or third-party administrator holding a license in the State of South Dakota, or by any company holding a Certificate of Authority, or by anyone on their behalf, may be deemed unfair competition and be grounds for suspension or revocation of said license or authority; and it is further

ORDERED that HEALTHSPRING abide by the agreement made by it in this Consent Order.

ORDERED that the provisions of this Consent Order shall be effective from the date the Director signs this Order.

Dated at Pierre, South Dakota this / Hday of Taly, 2023.

Larry Deiter, Director

The undersigned, on behalf of HEALTHSPRING LIFE & HEALTH INSURANCE COMPANY INC, represents it understands the terms of this Consent Order and the waiver of its due process rights and voluntarily enter into this Consent Order.

Dated this 6th day of July , 2023.

Signature Of Authorized Representative

Kathleen O'Neil

Printed Name

Accounting Senior Director

Title

South Dakota Division of Insurance