



**DEPARTMENT OF INSURANCE, FINANCIAL
INSTITUTIONS AND PROFESSIONAL REGISTRATION**

P.O. Box 690, Jefferson City, Mo. 65102-0690

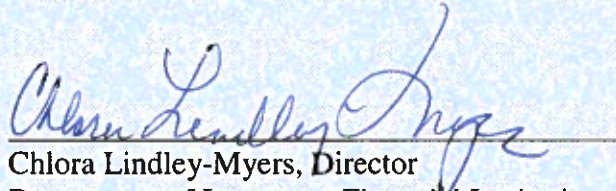
ORDER

After full consideration and review of the report of the financial examination of Good Health HMO, Inc. d/b/a Blue-Care HMO for the period ended December 31, 2017, together with any written submissions or rebuttals and any relevant portions of the examiner's workpapers, I, Chlora Lindley-Myers, Director of the Missouri Department of Insurance, Financial Institutions and Professional Registration pursuant to section 374.205.3(3)(a), RSMo, adopt such examination report. After my consideration and review of such report, workpapers, and written submissions or rebuttals, I hereby incorporate by reference and deem the following parts of such report to be my findings and conclusions to accompany this order pursuant to section 374.205.3(4), RSMo: summary of significant findings, subsequent events, company history, corporate records, territory and plan of operation, reinsurance, financial statements, financial statement changes resulting from examination, comments on financial statement items, and summary of recommendations.

Based on such findings and conclusions, I hereby ORDER that the report of the financial examination of Good Health HMO, Inc. d/b/a Blue-Care HMO as of December 31, 2017 be and is hereby ADOPTED as filed and for Good Health HMO, Inc. d/b/a Blue-Care HMO to take the following action or actions, which I consider necessary to cure any violation of law, regulation or prior order of the Director revealed by such report: (1) account for its financial condition and affairs in a manner consistent with the Director's findings and conclusions.

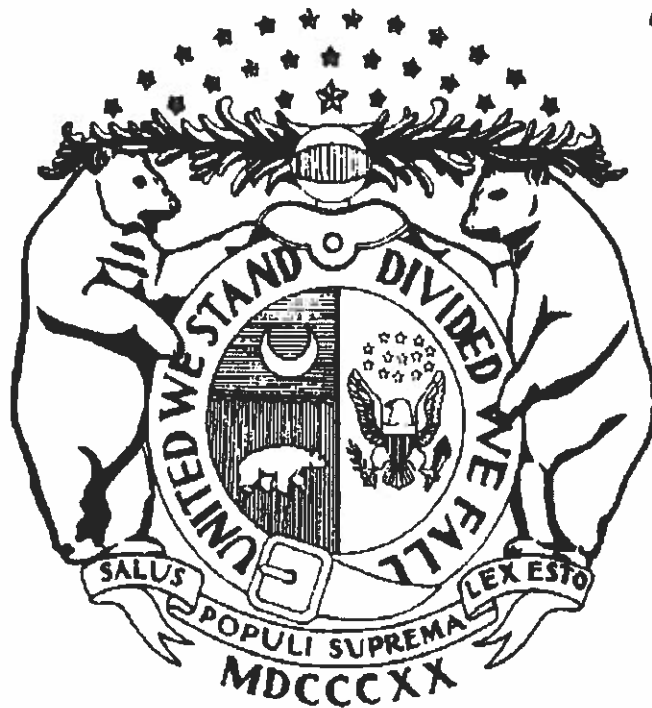
So ordered, signed and official seal affixed this 28th day of June, 2019.




Chlora Lindley-Myers, Director
Department of Insurance, Financial Institutions
and Professional Registration

**REPORT OF THE
FINANCIAL EXAMINATION OF
Good Health HMO, Inc. d/b/a Blue-Care HMO
AS OF
DECEMBER 31, 2017**

FILED
JUL 8 2019
DIRECTOR OF INSURANCE,
FINANCIAL INSTITUTIONS AND
PROFESSIONAL REGISTRATION



**STATE OF MISSOURI
DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND
PROFESSIONAL REGISTRATION
JEFFERSON CITY, MISSOURI**

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Kansas City, MO
May 16, 2019

Honorable Chlora Lindley-Myers, Director
Missouri Department of Insurance, Financial
Institutions and Professional Registration
301 West High Street, Room 530
Jefferson City, Missouri 65102

Director Lindley-Myers:

In accordance with your financial examination warrant, a full scope financial association examination has been made of the records, affairs and financial condition of

Good Health HMO, Inc. d/b/a Blue-Care HMO

hereinafter referred to as Good Health or as the Company. Its main administrative office is located at 2301 Main Street, Kansas City, Missouri 64108. The fieldwork for this examination began on June 25, 2018 and concluded on the above date.

SCOPE OF EXAMINATION

Period Covered

The Missouri Department of Insurance, Financial Institutions and Professional Registration (DIFP) has performed a full scope financial examination of Good Health HMO, Inc. d/b/a Blue-Care HMO. The last examination covered the period January 1, 2008 through December 31, 2012 and was also completed by examiners from the DIFP. This examination covers the period of January 1, 2013 through December 31, 2017.

This examination was performed concurrently with the examination of the Company's parent, Blue Cross and Blue Shield of Kansas City (BCBSKC) and its other affiliates: Blue Advantage Plus of Kansas City, Inc. (BA+), and Missouri Valley Life and Health Insurance Company (Missouri Valley).

The examination also includes the material transactions and/or events occurring subsequent to December 31, 2017, which are noted in this report.

Procedures

We conducted our examination in accordance with the National Association of Insurance Commissioners (NAIC) Financial Condition Examiners Handbook (Handbook) except where practices, procedures and applicable regulations of the DIFP and statutes of the State of Missouri prevailed. The Handbook requires the planning and performance of the examination to evaluate the Company's financial condition, assess corporate governance, identify current and prospective

risks of the Company and evaluate system controls and procedures used to mitigate those risks. An examination also includes identifying and evaluating significant risks that could cause an insurer's surplus to be materially misstated both currently and prospectively.

All accounts and activities of the Company were considered in accordance with the risk-focused examination approach. This may include assessing significant estimates made by management and evaluating management's compliance with Statutory Accounting Principles. The examination does not attest to the fair presentation of the financial statements included herein. If, during the course of the examination an adjustment is identified, the impact of such adjustment will be documented separately following the Company's financial statements. The following key activities were identified during the examination: Investments, Related Party, Reserves/Claims Handling, Premiums/Underwriting, and Medicare Advantage.

The examination report includes significant findings of fact and general information about the insurer and its financial condition. There may be other items identified during the examination that, due to their nature, are not communicated within the examination report but separately communicated to other regulators and/or the Company.

Reliance Upon Others

The examination relied upon information provided by the Company and its management. Where the examiners have deemed appropriate, this information has been tested or verified with external sources. The examiners also relied upon information supplied by the Company's independent auditor, Ernst & Young, LLP of Kansas City, Missouri for its audit covering the period from January 1, 2017 through December 31, 2017 and BCBSKC's Internal Audit Department. Information relied upon included, but was not limited to: fraud risk analysis, process narratives, control and substantive testing procedures for investments, premiums, claims, and taxes.

SUMMARY OF SIGNIFICANT FINDINGS

There were no material adverse findings, significant non-compliance issues, or material changes to the financial statements noted during the examination.

SUBSEQUENT EVENTS

There were no significant subsequent events noted from December 31, 2017 through the date of this report.

CORPORATE HISTORY

General

Good Health does business as Blue-Care HMO. The Company was incorporated on October 21, 1988, under the general business laws of Missouri. On February 16, 1990, the Missouri Department of Insurance granted the Company a certificate of authority to operate as a Health Maintenance Organization (HMO) under the provisions of the Missouri Revised Statutes RSMo. Chapter 354 (Health Services Corporations-Health Maintenance Organizations). The Company operates as an Individual Practice Association model HMO, providing comprehensive health care services to its members on a prepaid basis.

Good Health is wholly owned by Blue Cross and Blue Shield of Kansas City, which is dually licensed as a Health Maintenance Organization and a Health Services Corporation in the State of Missouri. Additionally, Good Health owns a 1% interest in New Directions Behavioral Health, LLC and The EPOCH Group, LC.

Capital Contributions

The Company received no capital contributions during the period under examination.

Dividends

No dividends were declared or paid during the examination period.

Mergers and Acquisitions

There were no mergers or acquisitions significant to Good Health during the period under examination.

CORPORATE RECORDS

The Company’s Articles of Incorporation and Bylaws were reviewed for the period under examination. Neither the Articles of Incorporation nor the Bylaws were amended during the examination period.

The minutes for the Board of Directors and shareholders meetings were reviewed for proper approval of corporate transactions. In general, the minutes appear to properly reflect and approve the Company’s major transactions and events for the period under examination.

Board of Directors

The management of the Company is vested in a Board of Directors. The Company’s Articles of Incorporation and its Bylaws specify that the number of Directors shall be fixed at five, which may be increased or decreased by future action of the Board; however, the number shall not be less than three. The Directors elected and serving, as of December 31, 2017, were as follows:

<u>Name</u>	<u>Principal Occupation and Business Affiliations</u>
Danette K. Wilson	Board Chair, President and CEO, Good Health, President and Chief Executive Officer, BCBSKC
Richard J. Kastner	Secretary, Good Health, General Counsel, Chief Administrative Officer and Corporate Secretary, BCBSKC
Thomas E. Nightingale	Treasurer and Actuary, Good Health, Senior Vice President, Chief Financial Officer and Treasurer, BCBSKC

Subsequent to the examination date, Richard J. Kastner resigned from the Board of Directors. Mark A. Newcomer was subsequently appointed as a Director effective January 15, 2019.

Committees

The Company does not have any committees and utilizes the committees of its parent, BCBSKC, to manage the operations of the business.

Officers

The Board of Directors annually elects various Company officers, as required by the Bylaws. The President and Chief Executive Officer supervises the day to day operations of the Company as directed by the Board of Directors. The senior officers elected and serving as of December 31, 2017, were as follows:

Danette K. Wilson	Board Chair, President and Chief Executive Officer
Richard J. Kastner	Secretary
Thomas E. Nightingale	Actuary and Treasurer

Subsequent to the examination period, Richard J. Kastner resigned as Secretary. Mark A. Newcomer was subsequently appointed Secretary effective January 15, 2019.

Holding Company, Subsidiaries, and Affiliates

The Company is a member of an Insurance Holding Company System as defined by Section 382.010, RSMo. (Definitions). An Insurance Holding Company System Registration Statement was filed by Good Health’s parent, BCBSKC, on behalf of itself, Good Health, and its other subsidiaries for each year of the examination period.

Good Health is 100% owned by BCBSKC, which is a not-for-profit, health care insurer that is domiciled in the State of Missouri. BCBSKC has no stockholders or other ownership. Good Health is ultimately controlled by the Board of Directors of BCBSKC.

BCBSKC has several subsidiaries that all have businesses involved in or related to the health care industry. These subsidiaries are described as follows:

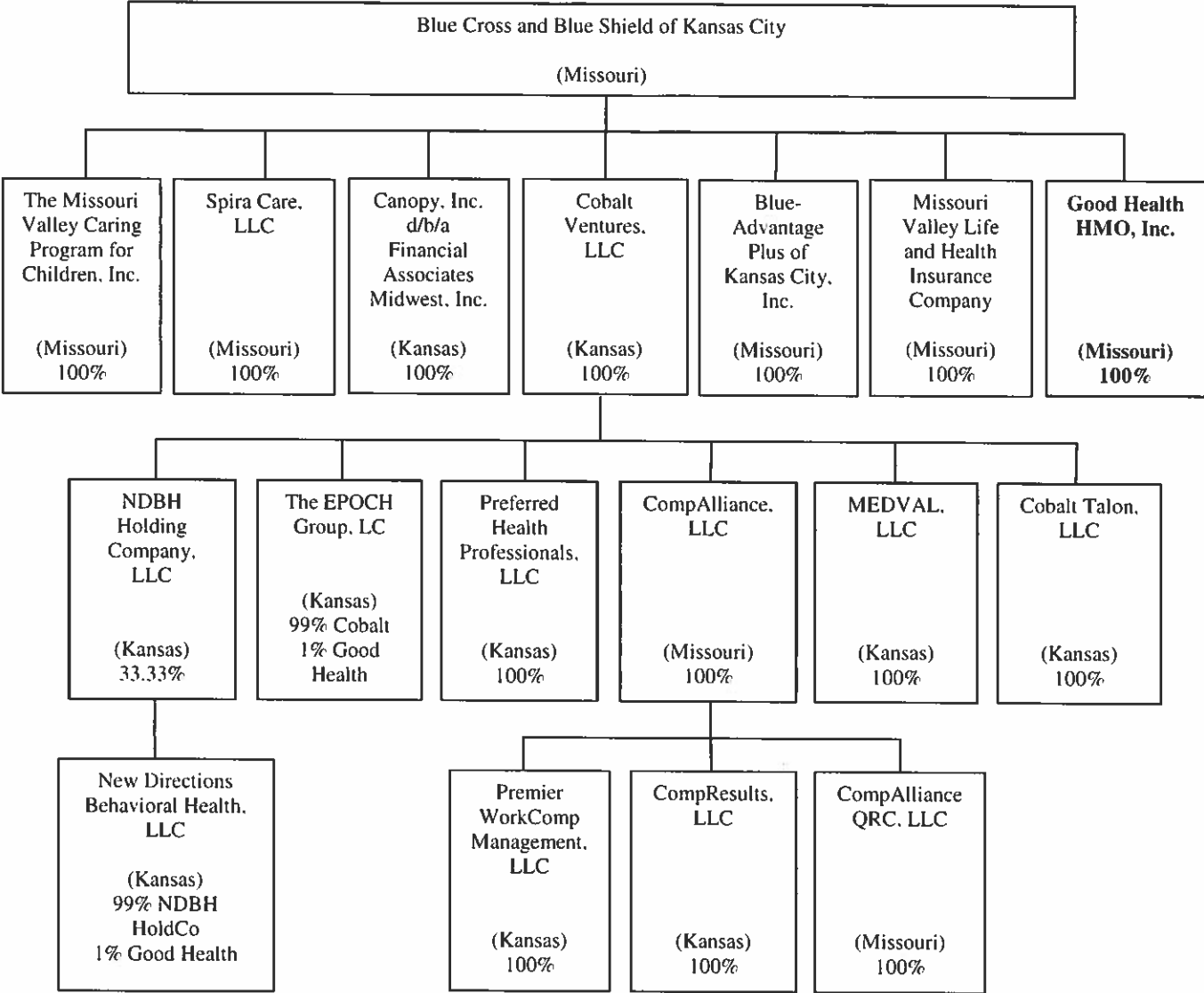
- Good Health HMO, Inc. d/b/a Blue Care, Inc., Blue Advantage Plus of Kansas City, Inc., and Missouri Valley Life and Health Insurance Company are Missouri domiciled insurers.
- Canopy, Inc. (Canopy) f/k/a Financial Associates Midwest, Inc. is a brokerage company specializing in group and individual health products, life, dental, disability, and retirement annuities.
- Missouri Valley Caring Program for Children, Inc. is a charitable organization providing durable medical equipment to children for items not covered by insurance.
- Spira Care, LLC (Spira Care) is in the business of providing services to health care providers, and owning and operating health care clinics.

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- Cobalt Ventures, LLC (Cobalt) is a holding company and directly holds BCBSKC's interest in its non-insurance subsidiaries. The entities held are NDBH Holding Company LLC; The EPOCH Group, LC; Preferred Health Professionals LLC; CompAlliance, LLC; MEDVAL, LLC and Cobalt Talon LLC.
- The EPOCH Group, LC (EPOCH) d/b/a Cobalt MedPlans serves as an outsourcing partner for insurance claims processing, staff augmentation, backlog reduction, systems conversions, and facility consolidation. Cobalt owns a 99% interest in EPOCH and Good Health owns the remaining 1% interest.
- Preferred Health Professionals, LLC (PHP) provides network rental and medical management services for groups and third-party administrators.
- MEDVAL, LLC provides consultation services in the settlement of insurance claims. Its primary business involves preparing Medicare set-aside arrangements and integrating these arrangements into workers' compensation and personal injury settlements. It also provides structured settlement services and administration.
- Cobalt Talon, LLC (Cobalt Talon) currently exists as a shell company since the sale of its assets to Health Lumen in 2016. Prior to the asset sale, Cobalt Talon provided healthcare data analytic services.
- NDBH Holding Company, LLC (NDBH HoldCo) is a holding company that owns New Directions Behavioral Health, LLC. BCBSKC owns a 33.33% interest in NDBH HoldCo.
- New Directions Behavioral Health, LLC (NDBH) manages behavioral health benefits and operates an employee assistance program. NDBH HoldCo owns a 99% interest and Good Health owns a 1% interest in NDBH.
- CompAlliance, LLC is a managed care service organization for workers' compensation claims, providing bill review, Preferred Provider Organization (PPO) and case management services. CompAlliance, LLC owns Premier Workers Comp Networks, LLC, CompAlliance QRC, LLC, and CompResults, LLC.
- Premier Workers Comp Networks, LLC is a PPO network used exclusively for the treatment of work-related injuries and illnesses.
- CompResults, LLC is a PPO network used exclusively to bring workers' compensation cost containment solutions to employers and payers.
- CompAlliance QRC, LLC provides qualified workers compensation consultation services.

Organizational Chart

The following organizational chart depicts Good Health’s ownership and holding company system, as of December 31, 2017:



Intercompany Transactions

The Company's intercompany agreements in effect, as of December 31, 2017, are outlined below:

- 1. Type:** Third Amended and Restated Agreement for the Sharing of Federal Income Taxes and Filing of a Consolidated Tax Return
Affiliates: Missouri Valley, BCBSKC, BA+, and Canopy
Effective: December 31, 2014, amended January 22, 2016 to update the parties to the agreement and revise the provisions for adding and terminating parties to the agreement.
Terms: BCBSKC will file a consolidated federal tax return for itself and its subsidiaries. The tax liability for each subsidiary shall be based upon each subsidiary's taxable income or loss as reflected in the consolidated financial statements. Each subsidiary will pay its federal income taxes to BCBSKC. BCBSKC will collect and remit any tax refunds to the subsidiaries.
- 2. Type:** Administrative Services Agreement
Affiliate: BCBSKC
Effective: August 1, 2006, restated April 1, 2009 to add the service of tracking and allocating premium revenue between accounts.
Terms: BCBSKC agrees to provide the following administrative services: accounting, budgeting, personnel, payroll, office space, utilities, maintenance, claims processing, purchasing, legal, actuarial, underwriting, cash management, investment, marketing, data processing, and other services. Good Health will pay BCBSKC the actual expenses incurred for the services provided.
- 3. Type:** Ancillary Provider Agreement
Affiliates: NDBH, BCBSKC, BA+ and Missouri Valley
Effective: January 1, 2006, amended June 1, 2006, October 1, 2007, June 1, 2008, January 1, 2011, January 1, 2014, September 1, 2015, and April 7, 2016 to adjust rates and include additional services to be provided by NDBH.
Terms: NDBH agrees to manage and/or arrange for the provision of behavioral health and substance abuse services for BCBSKC's members and the members of BCBSKC's subsidiaries. NDBH will provide for the credentialing reviews of the providers. BCBSKC will pay NDBH a capitation payment each month that is determined by the per member per month rates specified in the agreement. The rates vary between products sold by BCBSKC and its subsidiaries.
- 4. Type:** Agreement for the Management of Intercompany Payables and Receivables
Affiliates: Missouri Valley, BCBSKC, Spira Care, Canopy and BA+
Effective: August 1, 2006, restated effective March 1, 2009 to remove the specific exclusion for the Missouri Valley direct enrollment PPO, change duration and renewal terms, and include a specific exclusion for Medicaid payments, and amended November 1, 2017 to add Spira Care and Canopy to the agreement.
Terms: BCBSKC shall pay the payables and collect the receivables for its subsidiaries. Separate accounting records will be maintained for the transactions for each subsidiary. Transfers of funds to or from the subsidiaries will be made to minimize uninvested cash balances and to minimize the receivable or payable

balance with each subsidiary. BCBSKC shall settle all intercompany payable and receivables within ninety days following receipt by BCBSKC.

BCBSKC shall pool and retain the consolidated funds resulting from these transactions and invest the pooled funds. BCBSKC shall pay interest or receive interest each month from the subsidiaries based on the intercompany balance of each subsidiary.

- 5. Type:** Guarantor Agreement
Affiliate: BCBSKC
Effective: January 1, 1993
Terms: In the event of the insolvency of Good Health, BCBSKC agrees to provide Good Health whatever guarantee or coverage that is necessary to meet all applicable requirements of its business as a state-qualified HMO. This coverage will provide for the continuation of covered benefits to Good Health’s members and pay provider expenses, as defined in the agreement.

TERRITORY AND PLAN OF OPERATIONS

Good Health is licensed as an HMO by the DIFP under Chapter 354 RSMo (Health Service Corporations – Health Maintenance Organizations – Prepaid Dental Plans). The Company is also a licensed insurer in the State of Kansas. The Company’s service territory is concentrated in the Kansas City, Missouri metropolitan area and Northwest Missouri, which includes nine counties in Missouri and two counties in Kansas. As of December 31, 2017, the Company reported 50,445 members.

The Company’s HMO product is sold on an individual and group basis and is marketed under the “Blue Care” name. The Company also has “Cost Plus” business, which provides administrative services for self-insured groups. Some of these groups are partially insured by the Company through stop-loss coverages.

Third-party agents and brokers are utilized to obtain group business. The parent, BCBSKC, also has a staff of sales employees that sell Good Health’s individual and group business. BCBSKC has its own marketing employees to promote the Blue Care product. Marketing methods include the use of television, radio, newspaper, and magazine advertisements, billboards, direct mail, and telemarketing.

REINSURANCE

General

The Company's premium activity on a direct written, assumed and ceded basis, for the period under examination, is detailed below:

	<u>2017</u>	<u>2016</u>	<u>2015</u>	<u>2014</u>	<u>2013</u>
Direct Business	\$187,657,880	\$187,761,517	\$139,096,165	\$153,583,871	\$253,552,317
Reinsurance Ceded:					
Affiliates	0	0	0	0	0
Non-affiliates	<u>(213,787)</u>	<u>(361,633)</u>	<u>(116,290)</u>	<u>(263,559)</u>	<u>(243,719)</u>
Net Premiums Written	<u>\$187,444,093</u>	<u>\$187,399,884</u>	<u>\$138,979,875</u>	<u>\$153,320,312</u>	<u>\$253,308,598</u>

Assumed

The Company does not assume any business.

Ceded

BCBSKC together with BA+, Good Health, and Missouri Valley are reinsured by an excess of loss agreement with BCS Insurance Company (BCS). BCS is domiciled in the State of Ohio and is licensed as a property and casualty company with an accident and health line in the State of Missouri. The Company's specific retention is \$2,500,000 per covered loss under the agreement. The covered block is fully insured medical.

The Company is contingently liable for all reinsurance losses ceded to others. This contingent liability would become an actual liability in the event that an assuming reinsurer fails to perform its obligations under the reinsurance agreement.

FINANCIAL STATEMENTS

The following financial statements are based on the statutory financial statements filed by the Company with the DIFP and present the financial condition of the Company for the period ending December 31, 2017. The accompanying comments on financial statements reflect any examination adjustments to the amounts reported in the annual statement and should be considered an integral part of the financial statements.

There may have been additional differences found in the course of this examination, which are not shown in the "Comments on Financial Statement Items". These differences were determined to be immaterial concerning their effect on the financial statements and therefore were only communicated to the Company and noted in the workpapers for each individual activity.

Good Health – 12/31/17 Exam

	<u>Assets</u>	Non-admitted	Net Admitted
	<u>Assets</u>	<u>Assets</u>	<u>Assets</u>
Bonds	\$ 42,262,612	\$ -	\$ 42,262,612
Cash, cash equivalent and short-term investments	10,045,985	-	10,045,985
Other invested assets	493,166	493,166	-
Investment income due and accrued	323,483	-	323,483
Premiums and considerations	9,369,017	-	9,369,017
Amounts receivable relating to uninsured plans	15,572,543	288,991	15,283,552
Receivable from parents, subsidiaries and affiliates	605,379	-	605,379
Health care and other amounts receivable	2,032,289	316,221	1,716,068
Aggregate write-in for other-than-invested assets	1,243,127	-	1,243,127
TOTAL ASSETS	<u>\$ 81,947,601</u>	<u>\$ 1,098,378</u>	<u>\$ 80,849,223</u>

Liabilities, Surplus and Other Funds

Claims unpaid	\$ 12,672,979
Unpaid claims adjustment expenses	330,414
Aggregate health policy reserves	219,721
Aggregate health claim reserves	172,159
Premium received in advance	570,585
General expense due or accrued	1,239,879
Current tax payable	326,827
Amounts due to parent, subsidiaries and affiliates	8,734,167
Liabilities for amounts held under uninsured plans	4,604
Aggregate write-ins for other liabilities	156,835
TOTAL LIABILITIES	<u>\$ 24,428,170</u>
Aggregate write-ins for special surplus funds	3,647,000
Common capital stock	1,000,000
Gross paid-in and contributed surplus	3,035,931
Unassigned funds	48,738,122
TOTAL SURPLUS	<u>\$ 56,421,053</u>
TOTAL LIABILITIES AND SURPLUS	<u>\$ 80,849,223</u>

Statement of Income

Net premium income	\$ 187,444,093
Change in unearned premium reserves and reserve for rate credits	241,030
Total revenues	\$ 187,685,123
Hospital/medical benefits	123,714,332
Emergency room and out-of-area	15,908,453
Prescription drugs	27,774,139
Claims adjustment expenses	6,245,271
General administrative expenses	15,587,760
Total underwriting deductions	\$ 189,229,955
Net underwriting gains (losses)	\$ (1,544,832)
Net investment income earned	624,289
Net realized capital gains	15,940
Aggregate write-ins for other income	752
Net income (loss) before taxes	\$ (903,851)
Federal and foreign income taxes incurred	(113,295)
NET INCOME (LOSS)	\$ (790,556)

Reconciliation of Capital and Surplus
Changes from January 1, 2013 to December 31, 2017
(\$000 Omitted)

	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>
Capital and Surplus, Beginning of Year	\$74,460	\$63,408	\$51,787	\$56,004	\$57,691
Net income (loss)	(6,547)	(6,811)	467	(3,834)	(791)
Change in net unrealized capital gains	64	128	127	13	-
Change in non-admitted assets	<u>(4,569)</u>	<u>(4,938)</u>	<u>3,623</u>	<u>5,508</u>	<u>(479)</u>
Change in capital and surplus for the year	<u>(\$11,052)</u>	<u>(\$11,621)</u>	<u>\$4,217</u>	<u>\$1,687</u>	<u>(\$1,270)</u>
Capital and Surplus, End of Year	<u>\$63,408</u>	<u>\$51,787</u>	<u>\$56,004</u>	<u>\$57,691</u>	<u>\$56,421</u>

FINANCIAL STATEMENT CHANGES RESULTING FROM EXAMINATION

None

COMMENTS ON FINANCIAL STATEMENT ITEMS

None

SUMMARY OF RECOMMENDATIONS

None

ACKNOWLEDGMENT

The assistance and cooperation extended by the officers and the employees of Good Health HMO, Inc. during the course of this examination is hereby acknowledged and appreciated. In addition to the undersigned, Mark Nance, CPA, CFE, Emily Pennington, CFE, Lisa Li, CPA, CFE, Kimberly Dobbs, AES, CISA, CFE, Bradley Brunton, AFE and Danielle Smith, AFE examiners for the DIFP participated in this examination. The firm of Lewis & Ellis, Inc. participated as consulting actuaries. The firm, Risk & Regulatory Consulting, LLC, also participated as an information technology systems consultant.

VERIFICATION

State of Missouri)
County of Jackson)

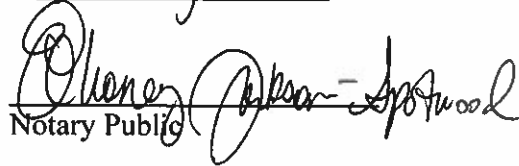
I, Laura Church, CPA, CFE, on my oath swear that to the best of my knowledge and belief the above examination report is true and accurate and is comprised of only facts appearing upon the books, records or other documents of Good Health HMO, Inc., its agents or other persons examined or as ascertained from the testimony of its officers or agents or other persons examined concerning its affairs and such conclusions and recommendations as the examiners find reasonably warranted from the facts.



Laura Church, CPA, CFE
Examiner-In-Charge
Missouri Department of Insurance, Financial
Institutions and Professional Registration

Sworn to and subscribed before me this 16th day of May, 2019.

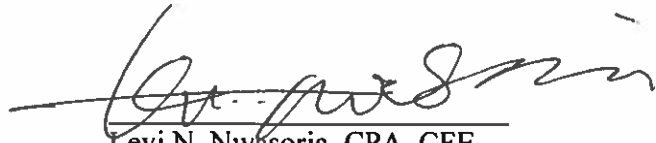
My commission expires: April 8, 2023


Notary Public

EBONEE JACKSON-SPOTWOOD
My Commission Expires
April 8, 2023
Clay County
Commission #19865798

SUPERVISION

The examination process has been monitored and supervised by the undersigned. The examination report and supporting workpapers have been reviewed and approved. Compliance with NAIC procedures and guidelines as contained in the Financial Condition Examiners Handbook has been confirmed, except where practices, procedures and applicable regulations of the DIFP and statutes of the State of Missouri prevailed.



Levi N. Nwasoria, CPA, CFE

Audit Manager

Missouri Department of Insurance, Financial
Institutions and Professional Registration