

**OFFICE OF INSURANCE REGULATION**

**KEVIN M. McCARTY**  
COMMISSIONER

IN THE MATTER OF:

CASE NO.: 85624-06

SSTAR LIFE INSURANCE COMPANY

**CONSENT ORDER**

THIS CAUSE came on for consideration as the result of an agreement between SSTAR LIFE INSURANCE COMPANY (hereinafter referred to as "SSTAR") and the OFFICE OF INSURANCE REGULATION (hereinafter referred to as the "OFFICE"). Following a review of the entire record, and upon consideration thereof, and being otherwise fully advised in the premises, the OFFICE hereby finds as follows:

1. The OFFICE has jurisdiction over the subject matter and parties to this proceeding.
2. SSTAR is a foreign insurer that is authorized to transact life and health insurance in the state of Florida.
3. The OFFICE conducted an investigation of SSTAR pursuant to Section 624.318, Florida Statutes (2008). As a result of its investigation, the OFFICE has determined that SSTAR violated Section 624.418(1)(b), Florida Statutes, by using S&S Healthcare Strategies, Ltd. (hereinafter referred to as "S&S Healthcare"), an unlicensed third party administrator, to adjust or settle claims on its policies in Florida.

4. 5STAR agrees that upon the execution of this Consent Order, it shall be subject to the terms and conditions herein.
5. 5STAR hereby affirms that it no longer uses S&S Healthcare or any other unauthorized individual or company to administer claims in Florida.
6. 5STAR shall provide to the OFFICE within ten (10) business days of the execution of this Consent Order documentation, certified by an officer of the company to be true and correct, indicating the date on which 5STAR discontinued the use of S&S Healthcare as an administrator in Florida.
7. Within thirty (30) days of the execution of this Consent Order, 5STAR shall submit documentation to the OFFICE, certified by an officer of the company to be true and correct, on the process 5STAR uses to determine whether an administrator that it may employ to transact insurance business in Florida, is properly authorized.
8. 5STAR is hereby placed on notice of the requirements of the above-referenced statutory provisions and agrees that any future violations of these sections by 5STAR may be deemed willful, subjecting 5STAR to appropriate penalties.
9. 5STAR shall pay a penalty of Five Thousand Dollars (\$5,000) and costs and fees in the amount of Three Thousand Dollars (\$3,000) within thirty (30) days of the execution of this Consent Order.
10. The OFFICE and 5STAR expressly waive a hearing in this matter, and the making of Findings of Fact and Conclusions of Law by the OFFICE including any and all further or other proceedings to which the parties may be entitled by law or the rules of the OFFICE. 5STAR hereby knowingly and voluntarily waives all rights to challenge or contest this Consent

Order, in any forum presently or in the future available to it, including the right to any administrative proceeding, state or federal court action, or any appeal.

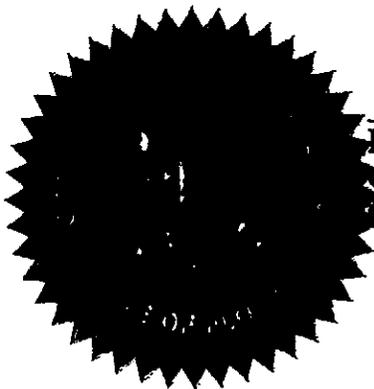
11. 5STAR agrees that the failure to adhere to one or more of the terms and conditions of this Consent Order shall constitute a violation of a lawful Order of the OFFICE, and may subject 5STAR to such administrative penalties or remedies available under the Florida Insurance Code or other applicable law.

12. Except as noted above, each party to this action shall bear its own costs and fees.

THEREFORE, the agreement between 5STAR and the OFFICE, the terms and conditions of which are set forth above, is approved.

FURTHER, all terms and conditions above are hereby ORDERED.

DONE AND ORDERED this 27TH day of MAY 2009.



  
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Kevin M. McCarty  
Commissioner  
Office of Insurance Regulation

By execution hereof, 5STAR LIFE INSURANCE COMPANY consents to the entry of this Consent Order, agrees without reservation to all of the above terms and conditions, and shall be bound by all provisions herein. The undersigned represents that he or she has the authority to bind 5STAR LIFE INSURANCE COMPANY to the terms and conditions of this Consent Order.

5STAR LIFE INSURANCE COMPANY

By: Craig S. Piers

Print Name: Craig S. Piers

Title: President

Date: May 14, 2009

[Corporate Seal]

STATE OF Virginia  
COUNTY OF Alexandria

The foregoing instrument was acknowledged before me this 14 day of May 2009, by Craig S. Piers, who is personally known to me or has produced the following identification \_\_\_\_\_

[Signature]

Signature of Notary Public

Sherree Jackson  
Print Name



My Commission Expires: 8/31/11

**COPIES FURNISHED TO:**

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