



THE TREASURER OF THE STATE OF FLORIDA  
DEPARTMENT OF INSURANCE

TOM GALLAGHER

IN THE MATTER OF:

CASE NO.: 40715-01-CO

**NEW AMERICA INSURANCE COMPANY**

2000 Property and Casualty Market Conduct  
Examination

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CONSENT ORDER

THIS CAUSE came on for consideration as the result of an agreement between **NEW AMERICA INSURANCE COMPANY**, hereinafter referred to as **NEW AMERICA** and the **FLORIDA DEPARTMENT OF INSURANCE**, hereinafter, referred to as the **DEPARTMENT**. Following a complete review of the entire record, and upon consideration thereof, and being otherwise fully advised in the premises, the Treasurer and Insurance Commissioner, as head of the **FLORIDA DEPARTMENT OF INSURANCE**, hereby finds as follows:

1. The Treasurer and Insurance Commissioner, as head of the **DEPARTMENT**, has jurisdiction over the subject matter of, and parties to, this proceeding.

2. **NEW AMERICA** is a domestic property and casualty insurer authorized to transact insurance business in Florida and is subject to the jurisdiction and regulation of the **DEPARTMENT** pursuant to the Florida Insurance Code.

3. The **DEPARTMENT** conducted a property and casualty market conduct examination of **NEW AMERICA** covering the period of February 1999 through August 2000, pursuant to Section 624.3161, Florida Statutes. As a result of such examination, the **DEPARTMENT** determined that **NEW AMERICA** committed the following violations of the Florida Insurance Code or Florida Administrative Code as outlined in total in the Fine Worksheet provided with the Report of Examination Findings. A partial listing of the citations noted on the Fine Worksheet includes but is not limited to:

a. Homeowners

1. Section 624.418, F.S., Failure to Comply with the Terms of Consent Order.

b. Claims

2. Rule 4-166.026, Failure to Provide Written Explanation of Claim Denial.

4. The **DEPARTMENT** and **NEW AMERICA** expressly waive a hearing in this matter and the making of Findings of Fact and Conclusions of Law by the **DEPARTMENT** and all further and other proceedings herein to which the parties may be entitled by law. **NEW AMERICA** hereby knowingly and voluntarily waives the rights to challenge or to contest this Order, in any forum now available to it, including the right to any administrative proceeding, circuit or federal court action, or any appeal.

5. For each violation noted in Paragraph 3, which was not corrected during the examination and verification provided to the **DEPARTMENT**, **NEW AMERICA** shall provide written documentation to the **DEPARTMENT** no later than May 20, 2001, detailing the corrective action taken in order to comply with Florida Statutes

for each of the remaining violations noted in Paragraph 3. All pending refunds shall be completed within 60 days of the execution of the Consent Order and documentation provided to the department.

6. **NEW AMERICA** agrees that upon the execution of this Consent Order it shall be subject to the following terms and conditions:

(a) **NEW AMERICA** shall pay an administrative penalty of \$1,500 and administrative costs of \$200 on or before the 30th day after this Consent Order is executed.

(b) **NEW AMERICA** shall henceforth comply with all of the provisions of the Florida Insurance Code and Florida Administrative Code, and will implement the recommendations contained in this report within 90 days after execution of Consent Order.

(c) **NEW AMERICA** is hereby placed on notice of the requirements of the above referenced sections of law and agrees that any future violations of these sections by **NEW AMERICA** may be deemed willful, subjecting **NEW AMERICA** to appropriate penalties.

7. **NEW AMERICA** agrees that the failure to adhere to one or more of the above terms and conditions of this Order shall constitute a violation of a lawful order of the **DEPARTMENT**, and shall subject **NEW AMERICA** to such administrative action as the Treasurer and Insurance Commissioner may deem appropriate.

8. Except as noted above, each party to this action shall bear its own costs and attorney's fees.

9. **THEREFORE**, the agreement between **NEW AMERICA INSURANCE COMPANY** and the **DEPARTMENT**, the terms and conditions of that are set forth above, is approved.

**FURTHER**, all terms and conditions above are hereby **ORDERED**.

**DONE AND ORDERED** this \_\_\_\_ day of \_\_\_\_\_,  
2001.

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**KEVIN MCCARTY**  
DEPUTY INSURANCE COMMISSIONER

By execution hereof **NEW AMERICA INSURANCE COMPANY** consents to entry of this Order, agrees without reservation to all of the above terms and conditions, and shall be bound by all provisions herein. I am authorized to execute this document.

**NEW AMERICA INSURANCE COMPANY**

By: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

COPIES FURNISHED TO:

MR. ROBERT M. WILLIS, PRESIDENT  
New America Insurance Company  
1200 G Street, NW #800  
Washington, DC 20005

CHERYL C. JONES, AIE  
Field Insurance Regional Administrator  
Division of Insurer Services  
Bureau of P&C Insurer Solvency and  
Market Conduct Review  
200 East Gaines Street, Suite 131B  
Tallahassee, Florida 32399-0329

S. STROM MAXWELL, SENIOR ATTORNEY  
Department of Insurance  
Division of Legal Services  
200 East Gaines Street  
612 Larson Building  
Tallahassee, Florida 32399-0333

INVOICE

**ADMINISTRATIVE PENALTY IMPOSED BY CONSENT ORDER**

In order to ensure that your payment is received and properly credited, please make your check payable to the Florida Department of Insurance and **return this invoice with your check** to:

Department of Insurance and State Treasurer  
Division of Legal Services  
Revenue Processing Section  
Post Office Box 6100  
Tallahassee, FL 32399-6100

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REFERENCE

NAME: Mr. Robert Willis, President  
New America Insurance Company

ADDRESS: 1200 G Street, NW #800  
Washington, DC 20005

FEID#

CASE #: 40715-01-CO

ATTORNEY: S. Strom Maxwell

SOURCE: P&C Solvency

Fine Due: ..... \$ 1,500.00  
Cost Due: ..... \$ 200.00  
Total Amount Due: ..... \$ 1,700.00

Amount remitted: ..... \$ \_\_\_\_\_

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