

uilding Suite 410

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1 located at 1314 Douglas St., Suite 1400, Omaha, NE 68102-1944 ("Berkshire Address"). 2 Berkshire has been licensed to enter into Oregon insurance policies, including workers 3 compensation policies, since 1976.¹

4 Wellfleet is an Indiana insurance company with a principal place of business 2. 5 located at 5814 Reed Rd., Fort Wayne, IN 46835 ("Wellfleet Address"). Wellfleet has 6 been licensed to enter into Oregon insurance policies, including workers compensation 7 policies, since 1929.²

8 3. Wellfleet NY is an New York insurance company with a principal place of 9 business located at the Wellfleet Address. Wellfleet NY has been licensed to enter into 10 Oregon insurance policies, including workers compensation policies, since 1929.³

11 4. NLFIC is a Connecticut insurance company with a principal place of business 12 located at the Berkshire Address. NLFIC has been licensed to enter into Oregon insurance 13 policies, including workers compensation policies, since 1980.⁴

Respondents are all members of the Berkshire Hathaway Group of insurers.⁵ 5.

15 Pursuant to Oregon Administrative Rules ("OAR") 836-043-0110, insurers of 6. 16 workers compensation policies are required to include particular language in their audit 17 billings pertaining to the insureds' right to a hearing to dispute the audit results. The 18 language must identify who is entitled to a hearing, when and how they must request a 19 hearing, and related information.

20 From January 1, 2020 through June 30, 2022, Respondents issued final 7. premium audit billings for Oregon workers compensation policies which failed to include 22 the language described in Paragraph (6).

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1 Regulation Building E, Suite 410

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During the foregoing time period, Respondents issued the following number of 8.

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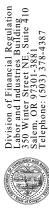
- ³ Wellfleet NY's NAIC number is 20931.
- ⁴ NLFIC's NAIC number is 20052. 26

Berkshire's NAIC number is 10391.

² Wellfleet's NAIC number is 32280. 25

⁵ The Berkshire Hathaway Group's NAIC Group Code number is 31.

	1	annen inne an die billin as with ant the language described in Densmuch (6).
		premium audit billings without the language described in Paragraph (6):
	2	A. Berkshire – 403
	3	B. NLFIC – 337
	4	C. Wellfleet – 199
	5	D. Wellfleet NY – 107 6
	6	CONCLUSIONS OF LAW
	7	The Director CONCLUDES that:
	8	9. Respondents are all "insurers" under ORS 731.106.
	9	10. OAR 836-043-0110 requires insurers of workers compensation insurance
	10	policies to include the language described in Paragraph (6), or substantially similar
	11	language, in their final premium audit billings.
	12	11. By failing to include the language identified in Paragraph (6) in 1,046 final
	13	premium audit billings issued from January 1, 2020 through June 30, 2022, Respondents
	14	violated OAR 836-043-0110.
	15	12. Because the Director has reason to believe that Respondents have been
	16	engaged, are engaging, or are about to engage in violations of the Insurance Code, the
2	17	Director may issue an order to Respondents to cease and desist, pursuant to ORS
78-4387	18	731.252(1).
Telephone: (503) 378-4	19	13. Under ORS 731.988(1), the Director may impose a civil penalty of up to
phone:	20	\$10,000 per violation upon any person who violates a provision of the Insurance Code.
Tele	21	ORDERS
	22	Now therefore, the Director issues the following Orders:
en	23	14. As authorized by ORS 731.252(1), the Director hereby ORDERS Respondents
	24	to CEASE AND DESIST from violating OAR 836-043-0110.
	25	15. As authorized by ORS 731.988(1), the Director hereby ORDERS that
	26	
		⁶ Respondents have confirmed that their premium audit billings now include this language.



	1	Respondents be jointly and severally subject to a CIVIL PENALTY of \$40,000 for
	2	violating OAR 836-043-0110 in 1,046 instances.
	3	16. The Director hereby SUSPENDS PAYMENT of \$15,000 of the CIVIL
	4	PENALTY for a period of three years, provided Respondents:
	5	A. Comply with the terms of this Order; and
	6	B. Do not violate OAR 836-043-0110 within the three-year time period.
	7	17. The non-suspended CIVIL PENALTY (\$25,000) is due and payable at the time
	8	this Order is returned to the Director.
	9	18. The suspended CIVIL PENALTY (\$15,000) will be waived three years from
	10	the date this Order is finalized, provided Respondents have complied with the foregoing
	11	Order terms. The Director reserves the right to immediately assess and collect the
	12	suspended civil penalty upon a determination that Respondents have violated any term of
	13	this Order.
	14	19. This Order is binding upon Respondents' successors and assigns.
	15	20. This Order is a "Final Order" under ORS 183.310(6)(b).
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egulation ilding uite 410 887	17	SO ORDERED this 1^{st} day of November, 2022.
ial Regules Buildi es Buildi NE, Suito 3881 78-4387	18	ANDREW R. STOLFI, Director
f Financ Industri Street 97301- (503) 3	19	Department of Consumer and Business Services
/ision o oor and) Winter em, OR ephone	20	/a/ Derether Deer
Telano	21	<u>/s/ Dorothy Bean</u> Dorothy Bean Chief of Enforcement
	22	Division of Financial Regulation
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	1	CONSENT TO ENTRY OF ORDER
	2	I, Peter Shelley, state that I am an officer of Berkshire and am authorized to act on
	3	its behalf. I have read the foregoing Order and know and fully understand the contents
	4	hereof. I have been advised of Berkshire's right to a hearing and right to be represented
	5	by counsel in this matter. Berkshire voluntarily consents to the entry of this Order without
	6	any force or duress, expressly waiving any right to a hearing in this matter, as well as any
	7	rights to administrative or judicial review of this Order. Berkshire understands that the
	8	Director reserves the right to take further actions against it to enforce this Order or to take
	9	appropriate action upon discovery of other violations of the Insurance Code or with the
	10	terms and conditions stated herein.
	11	Berkshire further assures the Director that neither Berkshire nor its officers,
	12	directors, employees, or agents will effect insurance services in Oregon unless such
	13	activities are in full compliance with the Insurance Code. Berkshire understands that this
	14	Consent Order is a public document.
	15	
	16	Signature: <u>/s/ Peter Shelley</u>
gulation Iding iite 410 87	17	Position Held: President
ial Regul ss Buildi NE, Suite 1881 78-4387	18	State of Connecticut
Financi ndustric Street 1 97301-3 (503) 3	19	County of Fairfield
ision of or and J Winter em, OR ephone:	20	
Div Div Sal- Tel-	21	Signed or attested before me on this 18^{th} day of October, 2022
	22	by <u>Peter Shelley</u> .
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	24	<u>/s/ Melissa G. Hough</u> Notary Public
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	1	CONSENT TO ENTRY OF ORDER
	2	I, Angela Adams, state that I am an officer of Wellfleet and am authorized to act
	3	on its behalf. I have read the foregoing Order and know and fully understand the contents
	4	hereof. I have been advised of Wellfleet's right to a hearing and right to be represented
	5	by counsel in this matter. Wellfleet voluntarily consents to the entry of this Order without
	6	any force or duress, expressly waiving any right to a hearing in this matter, as well as any
	7	rights to administrative or judicial review of this Order. Wellfleet understands that the
	8	Director reserves the right to take further actions against it to enforce this Order or to take
	9	appropriate action upon discovery of other violations of the Insurance Code or with the
	10	terms and conditions stated herein.
	11	Wellfleet further assures the Director that neither Wellfleet nor its officers,
	12	directors, employees, or agents will effect insurance services in Oregon unless such
	13	activities are in full compliance with the Insurance Code. Wellfleet understands that this
	14	Consent Order is a public document.
	15	
	16	Signature: <u>/s/ Angela Adams</u>
gulation Iding iite 410 87	17	Position Held: <u>Secretary</u>
al Regul s Buildi (E, Suite 881 78-4387	18	State of Indiana
financi dustrie street N 7301-3 503) 33	19	County of <u>Allen</u>
ion of I r and In Vinter S n, OR 9 shone: (20	
Divis Labo 350 V Saler Teler	21	Signed on other to dealer me on this 19th day of October 2022
	22	Signed or attested before me on this 18^{th} day of October, 2022
A STORE	23	by <u>Angela M. Adams</u> .
	24	/s/ Melissa Dawn Millican
	25	Notary Public
	2 <i>5</i> 26	
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	CONSENT TO ENTRY OF ORDER
,	I, Angela Adams, state that I am an officer of Wellfleet NY and am authorized to
-	act on its behalf. I have read the foregoing Order and know and fully understand the
2	contents hereof. I have been advised of Wellfleet NY's right to a hearing and right to be
:	represented by counsel in this matter. Wellfleet NY voluntarily consents to the entry of
(this Order without any force or duress, expressly waiving any right to a hearing in this
,	matter, as well as any rights to administrative or judicial review of this Order. Wellfleet
;	NY understands that the Director reserves the right to take further actions against it to
9	enforce this Order or to take appropriate action upon discovery of other violations of the
10	Insurance Code or with the terms and conditions stated herein.
1	Wellfleet NY further assures the Director that neither Wellfleet NY nor its
12	officers, directors, employees, or agents will effect insurance services in Oregon unless
13	such activities are in full compliance with the Insurance Code. Wellfleet NY understands
14	that this Consent Order is a public document.
1:	
10	
kegulation uilding Suite 410 1387	Position Held: <u>Secretary</u>
tial Regul les Buildi NE, Suite 3881 378-4387	State of Indiana
f Financ Industri Street 97301- : (503) :	County of <u>Allen</u>
vision o bor and 0 Winte lem, OR lephone	
	Signed or attested before me on this <u>18th</u> day of <u>October</u> , 2022
22	by <u>Angela M. Adams</u> .
23	
24	/s/ Melissa Dawn Millican Notary Public
2:	
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	1	CONSENT TO ENTRY OF ORDER
	2	I, Peter Shelley, state that I am an officer of NLFIC and am authorized to act on
	3	its behalf. I have read the foregoing Order and know and fully understand the contents
	4	hereof. I have been advised of NLFIC's right to a hearing and right to be represented by
	5	counsel in this matter. NLFIC voluntarily consents to the entry of this Order without any
	6	force or duress, expressly waiving any right to a hearing in this matter, as well as any
	7	rights to administrative or judicial review of this Order. NLFIC understands that the
	8	Director reserves the right to take further actions against it to enforce this Order or to take
	9	appropriate action upon discovery of other violations of the Insurance Code or with the
	10	terms and conditions stated herein.
	11	NLFIC further assures the Director that neither NLFIC nor its officers, directors,
	12	employees, or agents will effect insurance services in Oregon unless such activities are in
	13	full compliance with the Insurance Code. NLFIC understands that this Consent Order is
	14	a public document.
	15	
	16	Signature: <u>/s/ Peter Shelley</u>
gulation [ding iite 410 87	17	Position Held: Vice President
al Regul s Buildi (E, Suite 881 78-4387	18	State of <u>Connecticut</u>
Financia Idustrie Street N 7301-3 503) 37	19	County of <u>Fairfield</u>
sion of tr and It Winter m, OR 9 phone: (20	
Divis Labo 350 Saler Tele	21	Signed or attested before me on this <u>18th</u> day of <u>October</u> , 2022
	22	by Peter Shelley.
an Direction	23	by <u>reter sheney</u> .
	24	/s/ Melissa G. Hough
	25	Notary Public
	26	