

STATE OF WASHINGTON

Phone: (360) 725-7000

MIKE KREIDLER
STATE INSURANCE COMMISSIONER



OFFICE OF
INSURANCE COMMISSIONER

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HEARINGS UNIT
Fax: (360) 664-2782

Kelly A. Cairns
Paralegal
Chief Hearing Officer

Patricia D. Petersen
Chief Hearing Officer
(360) 725-7105

Kelly A. Cairns
Paralegal
(360) 725-7002
KellyC@oic.wa.gov

BEFORE THE STATE OF WASHINGTON
OFFICE OF INSURANCE COMMISSIONER

In the Matter of the Proposed Acquisition of Control of:

ARCADIAN HEALTH PLAN, INC., a Washington Domestic Health Maintenance Organization,

by

HUMANA INC., a Delaware corporation.

No. 12-0010

**NOTICE OF HEARING ON
HUMANA INC.'S APPLICATION
FOR APPROVAL OF PROPOSED
ACQUISITION OF ARCADIAN
HEALTH PLAN, INC.**

TO: Joan O. Lenahan, Vice President & Corporate Secretary
Humana Inc.
500 West Main Street
Louisville, KY 40202

Gary P. Timin, Esq.
Squire Sanders (U.S.) LLP
200 South Biscayne Boulevard, Suite 4100
Miami, FL 33131

Joseph C. Ventura, Legal Counsel & Assistant Corporate Secretary
Humana Inc.
500 West Main Street
Louisville, KY 40202

Mailing Address: P.O. Box 40255 • Olympia, WA 98504-0255
Street Address: 5000 Capitol Blvd. • Tumwater, WA 98501



James Novello, Sr. Vice President and General Counsel
Arcadian Management Services, Inc.
500 12th Street, Suite 350
Oakland, CA 94607

Robert W. Hoffman, Esq.
SNR Denton
525 Market Street, 26th Floor
San Francisco, CA 94105

COPY TO: Mike Kreidler, Insurance Commissioner
Mike Watson, Chief Deputy Insurance Commissioner
James T. Odiorne, Deputy Commissioner, Company Supervision Div.
Ronald J. Pastuch, Holding Company Manager, Company Supervision Div.
Carol Sureau, Deputy Commissioner, Legal Affairs Division
Charles D. Brown, Sr. Staff Attorney, Legal Affairs Division
Office of the Insurance Commissioner
P.O. Box 40255
Olympia, WA 98504-0255

NATURE OF PROCEEDING

On August 24, 2011, Humana Inc. contracted to acquire Arcadian Health Plan, Inc., a Washington health maintenance organization. Humana Inc., is a publicly traded Delaware for-profit corporation with its common stock listed on the New York Stock Exchange, and which along with its subsidiaries is one of the nation's largest health carriers with approximately 10.2 million covered individuals in its medical benefits plans, 7.1 million covered individuals in its specialty products and approximately \$33.9 billion in revenue in 2010. On September 21, Humana Inc. (and its wholly owned subsidiary Humsol, Inc.) filed a Form A Statement Regarding the Acquisition of Control of a Domestic Insurer with the Washington State Insurance Commissioner ("Commissioner"), requesting approval of its proposed acquisition of Arcadian Health Plan, Inc., a Washington domestic health maintenance organization. (Humana Inc. also proposes to acquire Arcadian Health Plan's parent company, Arcadian Management Services, Inc., and its five other subsidiaries which are health carriers domiciled in other states, as part of this transaction.) On December 30, the Commissioner determined that the Form A Statement contained all of the documents and information required to be included therein, and transmitted the Form A Statement to the undersigned with the request that the undersigned conduct an adjudicative proceeding and make the final decision either approving or denying Humana Inc.'s application for approval of this proposed acquisition.

All documents filed with Humana Inc.'s Form A, and all supplemental documents and information referenced herein, can be found at http://www.insurance.wa.gov/orders/hearings_proceedings.shtml. These documents include, among other documents, 1) the parties' Agreement and Plan of Merger dated August 24, 2011 with attached Exhibits A through D; 2) Disclosure Schedules; 3) Pre- and Post-Closing Organizational Charts of Humana Inc. and Arcadian; 4) List of Directors and Executive

Officers of Humana (and Humsol) and biographical information for same; 5) Humana Inc. (and Humsol) Boards of Directors' Resolutions; 6) Written Consent Action of Arcadian Management Shareholders; 7) Annual Reports of Humana Inc. for calendar years 2006 through 2010; and 8) Quarterly Report of Humana Inc., Form 10-Q, filed with the U.S. Securities and Exchange Commission for the period ending June 30, 2011. Included also are 9) the Commissioner's November 4, 2011 letter requesting further information from the Applicants; and 10) the Applicants' responses and information submitted pursuant to the Commissioner's November 4 request for additional information, with Exhibit A attached thereto. [The Applicants' November 11 responses and information also attached Exhibits B through E, containing information requested by the Commissioner, however, the Applicants asserted that these exhibits be kept non-publishable as "confidential" pursuant to RCW 48.31C.130. In response, the Commissioner's Public Disclosure section determined that they should not be published and as of this time they are not published.] Also published on the Commissioner's above website are 11) the parties' Letter Agreement dated January 19, 2012; and 12) First Amendment to Agreement and Plan of Merger dated January 31, 2012. [The First Amendment attaches an Exhibit E, however Exhibit E has not been published. Exhibit E contains two pages of specific assets of Humana which may be divested if the U.S. Department of Justice as part of its investigation into antitrust concerns about this proposed acquisition (see below) requires divestment. While the Applicants have asked that Exhibit E be kept non-publishable as "confidential," determination not to publish it now is instead based upon the Department of Justice's ("DOJ") suggestion and may be published later.] The documents specified above, and others also included in the Form A and all other communications between the Applicants and the Commissioner, and between the Applicants, Arcadian, the Commissioner and the undersigned, are published at the referenced website and shall be entered as evidence in this proceeding.

**IDENTITIES OF THE APPLICANT AND ARCADIAN HEALTH PLAN;
DETAILS OF PROPOSED ACQUISITION; CONSIDERATION TO BE PAID;
AND RESULT OF ACQUISITION**

I. Identity of the Applicant, Humana Inc., and Arcadian Health Plan:

Humana Inc. ("Humana" or the "Applicant") is a publicly traded Delaware for-profit corporation, organized in 1964, with its common stock listed on the New York Stock Exchange. Humana, which along with its subsidiaries, is one of the nation's largest health carriers with approximately 10.2 million members (covered individuals) as of December 31, 2010 in its medical benefits plans, as well as approximately 7.1 million members in its specialty products. Humana's 2010 revenues were approximately \$33.9 billion. Humana manages its business in four segments: 1) Humana's retail segment consists of Medicare, and commercial fully-insured medical and specialty health insurance benefits, including dental, vision, and other supplemental health and financial protection products, marketed directly to individuals; 2) Humana's Employer Group segment consists of Medicare and commercial fully-insured medical and specialty health insurance benefits, including dental, vision, and other supplemental health and financial protection products, as well as administrative services only products, marketed to employer groups; 3) Humana's Health and Well-Being Services segment includes services offered to its health plan members as well as to third parties including primary care, pharmacy, integrated wellness, and home care services; and 4) Humana's Other Businesses segment consists of its military services, primarily its TRICARE South region contract, Medicaid, and closed-block long-term care businesses as well as its contract with the Centers for Medicare and Medicaid Services to

administer the Limited Income Newly Eligible Transition program. Humana currently contracts with Centers for Medicare and Medicaid Services under the Medicare Advantage program to provide a variety of health insurance benefits to Medicare beneficiaries under health maintenance organization, preferred provider organization and PFFS plans in exchange for contractual payments received from Centers for Medicare and Medicaid Services - usually a fixed payment per member per month. Humana also enters into contracts with Centers for Medicare and Medicaid Services to offer prescription drug plans, either as a part of the Medicare Advantage plan or a stand-alone plan. (Humsol was incorporated on August 11, 2011 as a Delaware general business corporation wholly owned by Humana, and formed solely to facilitate the proposed acquisition transaction with the intent that it will be merged out of existence at closing of this proposed transaction.)

Arcadian Health Plan, Inc. (“Arcadian”) holds a Washington Certificate of Registration, issued by the Washington State Insurance Commissioner in 2004, authorizing it to operate as a health maintenance organization in Washington State. Arcadian is a wholly owned subsidiary of Arcadian Management Services, Inc., a privately held Delaware corporation. Arcadian is also authorized to operate as a health maintenance organization in Arizona, California, Maine, New Hampshire, South Carolina, Texas and Virginia. Arcadian currently engages exclusively in the business of Medicare Advantage–Prescription Drug plans pursuant to its contract with the Center for Medicare and Medicaid Services. Arcadian currently has no commercial enrollment, nor does it provide Medicaid coverage to enrollees, although some of its members are dually enrolled in both Medicare and Medicaid.

In August 2005, all issued and outstanding shares of Arcadian Management Services, Inc., which included Arcadian and other health plan subsidiaries operating in other states, were acquired by Morgan Stanley Dean Witter Venture Partners IV, LLC; Morgan Stanley Venture Partners 2002 Fund, LLC; Three Arch Management II, LLC; TAC Management, LLC and Three Arch Management IV, LLC. These entities are all venture capital funds, i.e. investment funds which acquire ownership in a variety of businesses, including health plans, which they believe will result in profit to their investors. It is noted that at the time these venture capital funds acquired Arcadian, they failed to seek the statutorily required authorization from the Commissioner to acquire Arcadian and therefore these funds had owned Arcadian for approximately two years prior to the Commissioner’s discovery that they had purchased Arcadian without legal authority to do so. For this reason, in September 2007 an adjudicative hearing was held before the undersigned and approval of the acquisition was granted by oral order effective September 7, 2007, with a written Order Approving Acquisition of Control entered on December 17, 2007. During that proceeding, the venture capital funds stated that they only intended to own Arcadian Management Services, Inc. and Arcadian for a short period of time and then would sell them. [Order Approving Acquisition of Control, Docket No. G07-12. See <http://www.insurance.wa.gov/orders/proceedingsDocuments/G07-12finalord.pdf>]

II. Proposed Acquisition and Consideration to be Paid: Humana Inc. proposes to acquire Arcadian by a statutory merger of Humsol, a directly, wholly owned subsidiary of Humana Inc. formed solely to effect the acquisition with and into Arcadian Management Services, Inc. in accordance with the parties’ Agreement and Plan of Merger dated August 24, 2011, as amended by First Amendment dated January 31, 2012. The proposal is that Humsol will merge with and into Arcadian Management Services, Inc., with Arcadian Management Services, Inc. as the surviving corporation. Humsol will then

be merged out of existence at Closing, at which time Humana Inc. will own all of the then issued and outstanding capital stock of Arcadian Management Services, Inc., and thus will indirectly own all of the then issued and outstanding capital stock of Arcadian Health Plan, Inc. and all of Arcadian Management Services, Inc.'s other wholly owned subsidiaries, specifically 1) Arkansas Community Care, Inc. (domiciled and qualified in Arkansas) and qualified in Arkansas, Oklahoma and Texas; 2) Arcadian Health Plan of North Carolina, Inc. (North Carolina); 3) Arcadian Health Plan of Georgia, Inc. (Georgia); 4) Arcadian Health Plan of Louisiana, Inc. (Louisiana); and 5) Arcadian Health Plan of New York, Inc. (New York). All of these subsidiaries of Arcadian Management Services, Inc., including Arcadian, are sponsors of Medicare Advantage-Prescription Drug plans through their contract with Centers for Medicare and Medicaid Services. None of them have any commercial enrollment.

Should this proposed acquisition be approved, as set forth in the above-referenced Agreement and Plan of Merger and Amendment to Agreement, Humana has agreed to pay a purchase price in cash totaling \$130,000,000.00, plus an Escrow Amount of \$24,000,000.00, for all of the issued and outstanding capital stock of Arcadian Management Services, Inc. That amount will be adjusted after the closing to reflect the sum of the actual working capital of Arcadian Management Services, Inc. and the statutory reserve of each of its subsidiaries as specified above. The signing date estimate for the sum of working capital of Arcadian Management Services, Inc. and the statutory reserve of each of its subsidiaries is approximately \$55,541,716.00. Over half of the closing proceeds, an amount estimated to be approximately \$85.3 million, will be used to satisfy and retire certain indebtedness of Arcadian Management Services, Inc. as of the date of the Closing. (More details of this proposed acquisition can be found in the Agreement and Plan of Merger dated August 24, 2011, the Summary of said Agreement, and the First Amendment to Agreement and Plan of Merger dated January 31, 2012, which are included in the link cited above.)

Humana will pay the purchase price with cash on hand. No borrowed funds will be used to pay the purchase price.

III. Result of Proposed Acquisition. Should this proposed acquisition be approved, the result would be that, upon closing, Humana would be the direct parent corporation of, and own all of the issued and outstanding stock of, Arcadian Management Services, Inc., which in turn wholly owns Arcadian Health Plan and five subsidiaries identified above. All of the presently issued and outstanding capital stock of Arcadian Management Services, Inc. will be cancelled and (except for such stock which may be owned by Arcadian Management Services, Inc. itself) converted into the right to receive the closing consideration per share balance specified in the Agreement and Plan of Merger, and First Amendment thereto, based upon type and number of shares held. Further, Arcadian Management Services, Inc. will continue to own all issued and outstanding shares of its six current health plan subsidiaries specified above including Arcadian. (Finally, the now outstanding shares of Humsol stock will be converted into stock of Arcadian Management Services, Inc. as the surviving corporation and such shares will then be the only outstanding shares of capital stock of Arcadian Management Services, Inc.)

IV. Documents filed and hearing procedure. Most significantly, in its Form A Application for approval of this proposed acquisition:

1. Humana states that it believes that there will be no change to its operations or those of its current subsidiaries as a result of this proposed acquisition.
2. Humana states that it believes that post-acquisition it intends to continue operating Arcadian Management Services, Inc.'s subsidiaries, including Arcadian, as Medicare Advantage-Prescription Drug plans without any material changes, except replacing certain directors and officers of Arcadian Management Services, Inc. and of its subsidiary health plans, including Arcadian, with various current directors and/or officers of Humana and Humsol.
3. Humana states that it believes that the proposed acquisition will have no adverse effect on competition in the product or geographic markets for their services and lines of insurance and business either in Washington or elsewhere. In its Form A Application, Humana stated that it had *filed a pre-merger notification statement* [on September 8, 2011] *under the Hart-Scott-Rodino Act* [antitrust review] *with the U.S. Department of Justice* ["DOJ"] *and Federal Trade Commission and is requesting early termination of the waiting period.* However, Humana failed to amend its Form A Application, as required, to reflect a material change in its September 21, 2011 filing: after inquiry by the undersigned on January 23, 2012, Humana advised that some seven weeks after it filed its Form A herein, on or before November 14, 2011, the DOJ, on behalf of itself and the Federal Trade Commission, had denied Humana's request for early termination of the waiting period and had instead commenced an investigation into its antitrust concerns about this proposed acquisition. Further, Humana is still furnishing the DOJ with documents it has requested, the DOJ is continuing to investigate Humana and this proposed acquisition relative to its antitrust concerns, and the DOJ may require Humana to divest some of its assets and/or require Humana to make other changes as condition(s) upon which the DOJ will be willing to resolve this matter. Because one of the findings which must be made before this state can approve this proposed acquisition is that the commissioner pursuant to his or her own review finds that *there is [no] substantial evidence that the effect of the acquisition may substantially lessen competition or tend to create a monopoly in the health coverage business*, the fact that the DOJ has chosen to investigate Humana and this proposed transaction is significant. After communications between the parties and the undersigned, the undersigned agreed not to wait for the DOJ to conclude its investigation – as the length of the investigation and time to reach resolution with the DOJ is unclear. The undersigned advised that she would conduct the hearing and (if all other required findings can be made based upon the evidence except that concerning antitrust) enter an order approving this proposed transaction with the condition that the Closing cannot occur unless and until such time as Humana has executed an agreement with the DOJ, which has been signed by the judge as required, resolving the DOJ's regulatory activity related to this proposed acquisition, e.g. whereby Humana has agreed to divest certain of its assets and/or has agreed to any other conditions the DOJ may impose on Humana in resolution of the DOJ's concerns. Further, it is anticipated that the DOJ may file a statement regarding the nature and scope of its investigation, its knowledge of the proceeding herein and of the above-referenced condition the undersigned expects to include in any final order approving this proposed acquisition.
4. Humana has filed a current (pre-acquisition) organizational chart which sets forth the identities and interrelationships among Humana and all of its organizational affiliates, including, but not

limited to, its insurance and health maintenance organization subsidiaries. Humana's present subsidiaries licensed and operating in Washington State include CompBenefits Insurance Company, Humana Health Plan, Inc., Humana Insurance Company, Humana MarketPOINT, Inc., Humana Pharmacy, Inc., Humana Dental Insurance Company, and Kanawha Insurance Company. Humana has also filed a current organizational chart of Arcadian Management Services, Inc. and its subsidiaries pre-acquisition as furnished by Arcadian Management Services, Inc. Finally, Humana has filed an organization chart which sets forth the identities and interrelationships among Humana and its affiliates post-acquisition. Humana states that there are no court proceedings involving reorganization or liquidation pending with respect to any of its organizational affiliates.

Pursuant to RCW 48.31C.030(5), the Insurance Commissioner shall approve an acquisition of a domestic health carrier unless, after a public hearing thereon, it is found: 1) that after the change of control, the domestic carrier would not be able to satisfy the requirements for registration as a health carrier; and 2) the antitrust section of the office of the attorney general and any federal antitrust enforcement agency has chosen not to undertake a review of the proposed acquisition and the commissioner pursuant to his or her own review finds that there is substantial evidence that the effect of the acquisition may substantially lessen competition or tend to create a monopoly in the health coverage business; 3) the financial condition of an acquiring party is such as might jeopardize the financial stability of the health carrier, or prejudice the interest of its subscribers; 4) the plans or proposals that the acquiring party has to liquidate the health carrier, sell its assets, consolidate or merge it with any person, or to make any other material change in its business or corporate structure or management, are unfair and unreasonable to subscribers of the health carrier and not in the public interest; 5) the competence, experience, and integrity of those persons who would control the operation of the health carrier are such that it would not be in the interest of subscribers of the health carrier and of the public to permit the merger or other acquisition of control; 6) or the acquisition is likely to be hazardous or prejudicial to the insurance-buying public.

Toward this end, the parties are advised that the Commissioner or his duly authorized representative is expected to testify as to whether he has given reasonable advance notice to the public of the hearing scheduled herein and whether he or any members of his staff has received any objections or concerns relative to this proposed acquisition and provide details of these objections or concerns. The Commissioner or his duly authorized representative is also expected to testify as to the conclusions he has reached during his examination of the subject Form A and all related documents and communications insofar as they relate to the above stated issues 1) through 6). Further, a duly authorized representative of the Applicants is expected to testify as to the above stated issues 1) through 6) and as to whether the Applicants or any of their affiliates has received any objections or concerns regarding this proposed acquisition and provide details of these objections or concerns. Additionally, a duly authorized representative of Arcadian is expected to testify as to the above stated issues and as to whether Arcadian or any of its affiliates has received any objections or concerns relative to this proposed acquisition. Finally, while live testimony from the Commissioner, the Applicants, and Arcadian will be taken during the hearing as to the above identified issues, written declarations from the parties and the Commissioner must be filed at least three working days prior to the date of the hearing. Further, oral opening statements and closing arguments from the Applicant and Arcadian are expected along with written closing arguments to be filed at least three working days prior to the date of the

hearing. Duly authorized representatives of the Applicants and Arcadian can include officers and/or directors of the companies or in house counsel employed by the companies; while testimony of outside counsel may be presented, it will be in addition to the testimony of those duly authorized representatives specified above.

YOU ARE HERBY NOTIFIED that a hearing will be held commencing at 10:00 a.m. Pacific Standard Time on Tuesday, March 27, 2012, in the Office of the Insurance Commissioner, 5000 Capitol Boulevard, Tumwater, Washington 98501, to consider Humana's and Humsol's request for approval of the proposed acquisition of Arcadian Health Plan, Inc. by Humana Inc. under the terms specified in their Agreement and Plan of Merger dated August 24, 2011, Letter Agreement dated January 19, 2012 and Amendment to Agreement and Plan of Merger dated January 31, 2012 which are referenced above and published on the Commissioner's website.

The hearing will be held under the authority granted the Insurance Commissioner by Chapter 48.04 RCW and RCW 48.31C.030, and shall have as its purpose consideration of the Applicants' request for approval of the proposed acquisition of Arcadian Health Plan, Inc. by Humana Inc. The hearing will be governed by the Administrative Procedure Act, Chapter 34.05 RCW, and the model rules of procedure contained in Chapter 10-08 WAC. A party who fails to attend or participate in any stage of the proceeding may be held in default in accordance with Chapter 34.05 RCW.

The Insurance Commissioner has not taken, and will not take, any position on this matter prior to entry of the Findings of Facts, Conclusions of Law and Final Order to be entered by the undersigned after hearing.

YOU ARE FURTHER NOTIFIED that all interested individuals may attend the hearing in this matter without prior approval as this is a public proceeding. Further, interested parties may also listen to or otherwise participate in the hearing by telephone by dialing (877) 668-4493, followed by access code number 231 993 38. YOU ARE FURTHER NOTIFIED that all interested individuals and entities may submit comments on, or objections to, this proposed acquisition to the undersigned. Said comments or objections, which will be included in the hearing record and will be considered by the undersigned prior to her making her final decision in this matter, must be submitted by 9:00 a.m. Pacific Standard Time on Tuesday, March 27, 2012, by fax, U.S. Mail, personal delivery, or email to Judge Petersen. Her fax number is (360) 664-2782; her U.S. Mail address is PO Box 40255, Olympia, WA 98504-0255; her personal delivery address is 5000 Capitol Boulevard, Tumwater, Washington 98501; and her email address is that of her Paralegal, Kelly A. Cairns, which is KellyC@oic.wa.gov. YOU ARE FURTHER NOTIFIED that, pursuant to RCW 48.31B.015(4)(b), any person whose interest is determined by the undersigned to be affected, may present evidence and argument on all issues involved, examine and cross-examine witnesses, and offer oral and written statements, and in connection therewith may conduct discovery proceedings.

The Insurance Commissioner will appear by and through Charles D. Brown, Sr. Staff Attorney in his Legal Affairs Division. He can be reached at (360) 725-7044 or CharlesB@oic.wa.gov. Humana Inc. and Humsol, Inc. will be represented by Gary P. Timin, Esq. of Squire Sanders (U.S.) LLP, 200 South Biscayne Boulevard, Suite 4100, Miami, FL 33131. He can be reached at (305) 577-2860 or

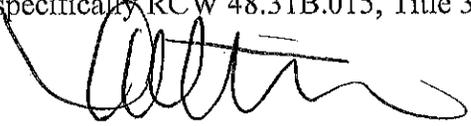
Gary.Timin@squiresanders.com. Arcadian Health Plan, Inc. will be represented by Robert W. Hoffman, Esq. with SNR Denton, 525 Market Street, 26th Floor, San Francisco, CA 94105, and James Novello, Esq., Sr. Vice President and General Counsel of Arcadian Management Services, Inc., 500 12th Street, Suite 350, Oakland, CA 94607. Mr. Hoffman can be reached at (415) 882-0381 or robert.hoffman@snrdenton.com. Mr. Novello can be reached at (510) 817-1845 or jnovello@arcadianhealth.com.

Based upon a delegation of authority from the Insurance Commissioner, the undersigned will conduct the hearing and will make the final decision and enter the final order relative to this matter without input from the Insurance Commissioner or his staff or any other individual who has knowledge of the issues herein, except as will be presented as evidence in the hearing. Her address is Office of the Insurance Commissioner, Hearings Unit, P.O. Box 40255, Olympia, WA 98504-0255 and her telephone number is (360) 725-7105. All questions or concerns should be directed to Kelly A. Cairns, Paralegal to the undersigned, who may be reached at the telephone and fax numbers, e-mail or U.S. Mail addresses set forth above.

On January 17, 2012, the undersigned held a first prehearing conference in this matter. The parties were represented by the above stated attorneys. During said first prehearing conference, the undersigned identified the parties and statutes involved, reviewed procedure to be expected at hearing, and responded to all questions and concerns of the parties. On February 28, 2012, the undersigned held a second prehearing conference at Humana's request to address additional concerns of the parties which were specified and summarized in written communications filed herein and published on the Commissioner's website. As stated above, **should any party or any interested individual have any further questions or concerns prior to the hearing date, they are advised to telephone or e-mail Kelly A. Cairns, Paralegal to the undersigned, for assistance** or to schedule a third prehearing conference if necessary.

Pursuant to WAC 10-08-040(2) and in accordance with ch. 2.42 RCW, if a limited English-speaking or hearing impaired or speech impaired party or witness needs an interpreter, a qualified interpreter will be appointed. There will be no cost to the party or witness therefore, except as may be provided by ch. 2.42 RCW. Following this Notice is a form you may use to advise the Chief Hearing Officer of your need for an interpreter.

ENTERED at Tumwater, Washington, this 13th day of March, 2012, pursuant to Title 48 RCW and specifically RCW 48.31B.015, Title 34 RCW, and regulations applicable thereto.



PATRICIA D. PETERSEN
Presiding Officer
Chief Hearing Officer

Declaration of Mailing

I declare under penalty of perjury under the laws of the State of Washington that on the date listed below, I mailed or caused delivery through normal office mailing custom, a true copy of this document to the following people at their addresses listed above: Joan O. Lenahan, Gary P. Timin, Esq., Joseph C. Ventura, Esq., James Novello, Esq., Robert W. Hoffman, Esq., Mike Kreidler, Michael G. Watson, Carol Sureau, Esq., Charles Brown, Esq., James T. Odiorne and Ronald J. Pastuch.

DATED this 13th day of March 2012.


KELLY A. CAIRNS

HEARINGS UNIT
Fax: (360) 664-2782

Patricia D. Petersen
Chief Hearing Officer
(360) 725-7105

Kelly A. Cairns
Paralegal
(360) 725-7002
KellyC@oic.wa.gov

To request an interpreter, complete and mail this form to:

Chief Hearing Officer
Office of Insurance Commissioner
P.O. Box 40255
Olympia, WA 98504-0255

REQUEST FOR INTERPRETER

I am a party or witness in Matter No. 12-0010, before the Insurance Commissioner. I NEED AN INTERPRETER and request that one be furnished.

Please check the statements that apply to you:

I am a non-English-speaking person. I cannot readily speak or understand the English language. My primary language is _____ (insert your primary language). I need an interpreter who can translate to and from the primary language and English.

I am unable to readily understand or communicate the spoken English language because:

- I am deaf.
- I have an impairment of hearing.
- I have an impairment of speech.

[Please state below or on the reverse side any details which would assist the Commissioner or Presiding Officer in arranging for a suitable interpreter or in providing appropriate mechanical or electronic amplification, viewing, or communication equipment.]

Date: _____

Signed: _____

Please print or type your name: _____

Address: _____

Telephone: _____