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HEARINGS UNIT
OFFICE OF
INSURANCE COMMISSIONER

BEFORE THE STATE OF WASHINGTON
OFFICE OF INSURANCE COMMISSIONER

In the Matter of:

The Form A and Form E Application
for the Proposed Acquisition of
Control of:

**GROUP HEALTH
COOPERATIVE and GROUP
HEALTH OPTIONS, INC.,**

Docket No. 16-0050

DECLARATION OF RONALD J.
PASTUCH

By

**KAISER FOUNDATION
HEALTH PLAN OF
WASHINGTON, a Washington
corporation.**

I, Ronald J. Pastuch, declare as follows:

1. I am over the age of 18 and make this declaration based on my personal knowledge. If called, I can competently testify to the contents of this declaration.
2. I am a graduate of Pacific Lutheran University, where I earned a Bachelor of Arts Degree in Business Administration in 1988. I received my CPA license in 2003.
3. My previous state employment includes the Washington Department of Veterans Affairs from 1980 to 1987 in accounting and human resource positions, and the Office of the Insurance Commissioner from 1987 to 1991 as a staff accountant, from 1991 to 1993 as a field Insurance Examiner in the OIC Company Supervision Division, and from 1993 to 2006 as a Financial Analyst at various levels within the same division.

DECLARATION OF RONALD J.
PASTUCH
NO. 16-0050
1355296

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State of Washington
Office of the Insurance Commissioner
5000 Capitol Blvd.
P O Box 40255
Olympia WA 98504-0255

1 4. On February 16, 2006, I was appointed the Holding Company Manager in the same
2 division. As the Holding Company Manager, my primary duties consist of reviewing and
3 approving holding company transactions, which include reviewing and recommending OIC
4 staff's position on proposed requests for insurance company acquisitions and mergers, including
5 disclaimers of control.

6 5. On March 1, 2016, Kaiser Foundation Health Plan of Washington ("Kaiser" or
7 "Applicant") filed an application for approval of the proposed acquisition of control of Group
8 Health Cooperative ("GHC") and Group Health Options, Inc. ("GHO") (collectively, "Group
9 Health") in an application statement ("Form A") dated February 26, 2016.

10 6. On March 1, 2016, Kaiser Foundation Health Plan of Washington ("Kaiser" or
11 "Applicant") filed a pre-notification notification regarding potential competitive impact of a
12 proposed acquisition by a non-domiciliary insurer doing business in this state or by a domestic
13 insurer ("Form E") dated February 26, 2016.

14 7. GHO is a Washington domiciled health care service contractor incorporated on January
15 30, 1990, and began writing business on October 23, 1990. GHO has been registered to write
16 health care coverages in Washington State since its inception. GHO is currently owned and
17 controlled by GHC since its inception.

18 8. GHC is a Washington domiciled health maintenance organization incorporated on
19 December 22, 1945, and began writing business on January 1, 1947. GHC originally registered
20 with the OIC as Group Health Cooperative of Puget Sound as a health maintenance organization
21 on April 7, 1976. GHC is currently the ultimate controlling person in its holding company
22 system.

23 9. Kaiser is a Washington domiciled nonprofit corporation incorporated on May 1, 1942
24 under the original name of Northern Permanente Foundation. It later changed its name to Kaiser
25 Foundation Northern Hospitals in 1953, Kaiser Foundation Health Plan of Oregon in 1963, OHP
26

1 in 1981, and its current name on October 15, 2015. The sole member of Kaiser is Kaiser
2 Foundation Health Plan, Inc.

3 10. Kaiser is controlled by Kaiser Foundation Health Plan, Inc. (California) ("KFHP"), a
4 California nonprofit public benefit corporation organized in 1955. KFHP is the ultimate
5 controlling person for various insurance companies, health maintenance and dental maintenance
6 organizations, and other related organizations within the Kaiser Foundation holding company
7 system.

8 11. Kaiser Foundation Hospitals (California) ("KFH") is a California nonprofit corporation
9 and holding company for various nonprofit hospitals and other organizations within its holding
10 company system. KFH operates affiliated hospitals and medical centers throughout various
11 states including southwest Washington state.

12 12. Both KFHP and KFH are interconnected by an arrangement that includes similar board
13 of trustees and management. Both KFHP and KFH are shown together in Exhibit D of the Form
14 A. A list of subsidiaries and affiliated corporation are also listed in Exhibit E of the Form A.

15 13. GHC is licensed to write business in one state, the state of Washington. GHO is licensed
16 to write business in two states, Idaho and Washington. According to their latest annual financial
17 statement, Group Health offers comprehensive, coordinated health care to an enrolled
18 membership for a fixed prepaid fee through its owned and lease facilities, employed, and
19 contracted providers, in addition to providing certain health care services on a fee-for-service
20 basis to both enrollees and non-enrollees. Combined writings for Group Health were \$ 3.2 billion
21 serving approximately 1,800 enrollees in Idaho and 513,000 enrollees in Washington.

22 14. The proposed transaction comes at the request of Kaiser whereby Kaiser, GHC, and
23 Group Health Community Foundation signed an acquisition agreement which the Applicant
24 proposes, subject to certain conditions, to acquire control of GHC. The acquisition agreement
25 was filed as Exhibit B of the Form A. The agreement was subject to the approval of the GHC
26

1 voting members. According to the GHC, the GHC voting members held a meeting on March 12,
2 2016, and received the required majority voting in favor to accept the agreement.

3 15. The OIC reviewed the filings and issued a letter of deficiency and request for additional
4 information to Kaiser on March 24, 2016.

5 16. Kaiser submitted numerous supplements to the Form A and E filings. The OIC received
6 these filings in this order:

7 Form A

- 8 • First Supplement to Form A dated April 15, 2016
- 9 • Second Supplement to Form A dated July 22, 2016
- 10 • Third Supplement to Form A dated November 10, 2016
- 11 • Kaiser financial status report as of September 30, 2016 – incorporated with
12 Exhibit H of Form A

13 Form E

- 14 • First Supplement to Form E dated May 17, 2016

15 Kaiser also provided a cash flow diagram for illustrative purposes to the OIC.

16 17. With its May 17, 2016 supplement, Kaiser submitted an economist report which
17 including an opinion that the proposed transaction would yield substantial economies of scale
18 and would not lessen competition in Washington.

19 18. The Insurance Commissioner and OIC conducted three public forums to allow the
20 general public to speak and submit comments regarding the proposed acquisition. The three
21 public forums were held in Tacoma (June 15, 2016), Seattle (June 29, 2016), and Spokane (July
22 27, 2016). Transcripts from these public forums were made available to the public on the OIC
23 website.

24 19. Throughout this comment process, individuals also provided their comments regarding
25 the proposed acquisition to the OIC. Individuals provided various views and commentary
26 offering support or opposition regarding the proposed acquisition.

1 20. During March 2016, the OIC issued a request of proposal (RFP) to hire expert consultants
2 for the review of the Form A. On July 21, 2016, the OIC and Risk and Regulatory Consultants
3 (“RRC”) signed an agreement for the review of the financial perspective of the Form A. RRC
4 began its work on July 22, 2016. On August 18, 2016, RRC requested information and asked
5 questions about the Form A filing from Kaiser. On August 26, 2016, Kaiser responded to the
6 RRC inquiry. On October 26, 2016, RRC completed its review and issued its final report to the
7 OIC. The OIC met with Kaiser on October 27, 2016, to review the comments and deficiencies
8 noted in the RRC report which included a request for an additional fairness opinion regarding
9 the proposed transaction. The GHC board responded and GHC submitted a second fairness
10 opinion issued by an unrelated firm regarding the proposed transaction on November 21, 2016.
11 OIC reviewed the opinion and determined the opinion had sufficiently met the requirements
12 noted in the RRC report.

13 21. On March 7, 2016, the OIC sent a letter to the OIC Hearings Unit and its presiding officer
14 regarding the Form A and Form E requesting a hearing to decide on such matter. On December
15 1, 2016, the OIC sent two letters to the OIC Hearings Unit and its special master regarding the
16 Form A and Form E, separately. The OIC was satisfied with the submitted documents and
17 requested that a hearing be scheduled.

18 22. I have reviewed and analyzed these submittals. My analysis was performed under the
19 criteria set forth in RCW 48.31B.015(4). From my analysis,

20 a. After the change of control, the domestic insurer would be able to satisfy the
21 requirements for the issuance of a registration to write its current lines of business in Washington.
22 As stated previously, GHC and GHO are presently registered to write health care coverages.
23 GHC and GHOs’ minimum net worth as of the date of the Declaration are \$25.3 and \$9.9 million,
24 respectively. According to its latest unaudited financial statement as of September 30, 2016, filed
25 with the OIC, GHC reportedly has \$1.8 billion in admitted assets and \$956.7 million in net worth,
26 and GHO reportedly has \$18.9 million in admitted assets and \$8.6 million in net worth.

1 b. The effect of the proposed acquisition of control would not lessen competition in this
2 state or tend to create a monopoly therein. The OIC reviewed a market analysis report of the
3 proposed acquisition and found no competitive standard issues. Group Health and Kaiser operate
4 within different regions within Washington state. Group Health and Kaiser do not operate in the
5 same Washington counties. There appears to be no prima facie evidence that competition in these
6 counties would be adversely affected, and the combined effect on the market would have not
7 created a concentration of enrollees that would have created a prima facie evidence of the
8 competitive standard. There is no prima facie evidence of the competitive standard on the
9 Washington health insurance market.

10 We found that the combination of Kaiser and Group Health affiliates would exceed the
11 standards for market impact on the health market in Washington according to RCW
12 48.31B.020(4). The 2015 market share report issued by the OIC indicates Group Health as one
13 of the leading health plans in Washington state serving 512,593 enrollees and wrote \$3.2 billion
14 in prepayments. Kaiser served 78,803 enrollees and wrote \$577,745. The combined Kaiser
15 Group Health would hold 16 percent of the total Washington accident & health market during
16 2015.

17 Kaiser provided an economic report regarding the proposed acquisition would bring
18 substantial economies of scale or in resource use that cannot feasibly be achieved in any other
19 way. The report also indicates there is no evidence of significant trend toward increased
20 concentration, no evidence of prima facie violation of the competitive standard, and the
21 acquisition is in the best interests of consumers. There would be a small concentration in one
22 county for Medicare Advantage coverage, but due to the large number of competitors in that
23 county, the acquisition raises no anticompetitive concerns of the competitive standard.

24 We also noted the federal Department of Justice and Federal Trade Commission agencies
25 reviewed this proposed acquisition and the FTC issued a letter regarding the early termination
26 of the 30-day waiting period on March 10, 2016.

1 c. The financial condition of the applicant by itself would not jeopardize the financial
2 stability as a domestic insurer (by definition includes health care maintenance organization or
3 health care service contractor) or prejudice the interest of its policyholders including subscribers.
4 Kaiser provided an unaudited financial statement and no audited financial statement. However,
5 Kaiser also submitted its KFHP and KFHP combined financial statements which includes Kaiser
6 within those financial statements. KFHP funds Kaiser for various needs. The latest combined
7 financial statements indicates it has a combined \$62.6 billion in total assets and \$24.9 billion in
8 net worth. This combination would not jeopardize the financial stability of a domestic insurer.

9 d. We found no evidence that Kaiser or KFHP plans to sell the Group Health assets,
10 consolidate, or merge it with any other person. However, we noted that the acquisition included
11 a plan to fund Kaiser with a \$2 billion loan arrangement from a Kaiser affiliate which is included
12 in the Acquisition agreement. The planned distribution from Kaiser to various Group Health
13 units became more evident from the RRC report and later from Kaiser. GHC or GHO would not
14 receive any of the loaned funds from Kaiser; however, there would be an expectation that if the
15 loan were called by the Kaiser affiliate, Kaiser would seek funds from GHC to repay the loan.

16 e. We verified the same persons who were listed in the Form A who are currently the
17 directors and/or officers of Kaiser. Except for two instances, there are no reported changes to the
18 listed persons' biographical affidavit. A third-party verification firm provided reports that did
19 detect some questions about certain persons' background information; however, the responsive
20 individuals explained the circumstances and mitigated the questionable events. The events do
21 not affect their competence, experience, and integrity of the person. Overall, we do not have any
22 further outstanding questions regarding the current directors and officers of Kaiser and KFHP,
23 or current and proposed directors and officers of Group Health.

24 f. We are not aware that the acquisition (merger) is likely to be hazardous or prejudicial
25 to the insurance buying public. However, we are concerned with various components of the
26 acquisition that may affect how Group Health would operate going forward under Kaiser and

1 KFHP. Those concerns were proposed in the RRC report and we concur with those concerns.
2 We have proposed certain conditions for the presiding officer's consideration to address those
3 concerns. A true and accurate copy of the list of our proposed conditions, along with the
4 concerns raised by RRC, is attached as Exhibit A to this declaration.

5 We noted the Insurance Commissioner's regulatory action on one Kaiser affiliate during
6 the past five years which resulted in a one cease and desist order with a fine levied for non-
7 compliant activity. That Kaiser affiliate paid the fine timely. We also noted other consent orders
8 with fines issued for non-compliant activity over the past ten years and those fines were paid.
9 The OIC has no further regulatory action on that Kaiser affiliate. No other Kaiser affiliate
10 operates in Washington.

11 We were aware of the FTC had reviewed this proposed merger and provided its 30-day
12 early termination notice. We are also aware that the Washington Attorney General Office
13 ("AGO") also received a similar filed documents that were submitted in the Form A filings. We
14 have not heard of any further attempt by the FTC or the AGO to take action against or halt the
15 proposed acquisition as of the date of this declaration.

16 23. Kaiser and GHC have submitted all necessary documents to the OIC in connection with
17 the proposed acquisition. The OIC is satisfied with the necessary documents meeting the
18 statutory requirements for an acquisition pursuant to RCW 48.31B.015. The OIC recommends
19 to the presiding officer to approve the acquisition of GHC and GHO by Kaiser according to the
20 standards set forth under RCW 48.31B.015 for the presiding officer's consideration. In addition,
21 the OIC recommends to the presiding officer to incorporate our recommended conditions to the
22 approval order. As stated previously, the OIC continues to have concerns regarding the proposed
23 acquisition and on a going forward, requests that regulatory measures in addition as a result of
24 the proposed acquisition. Those measures are set forth in the aforementioned list of OIC
25 proposed conditions, attached hereto as Exhibit A.

1 24. From a procedural standpoint, the OIC requires that notice of this proposed merger be
2 given to the public via the Internet (on the Insurance Commissioner's website). On December 7,
3 2016, the OIC posted an electronic notice on the Insurance Commissioner's website concerning
4 the proposed acquisition of Group Health and information about the OIC's hearing process, a
5 true and correct copy of which is attached hereto as Exhibit "B". Such notice included
6 information regarding the hearing, via the Notice of Hearing dated December 7, 2016, and
7 announcement posted on the website. We understand that notice will remain posted on the
8 website from the date of this Declaration to the date of the hearing.

9 25. The Notice of Hearing informs and advises all interested parties that any individual or
10 entity is permitted to submit comments on, or objections to, this proposed merger. The Notice
11 of Hearing states that any questions or concerns should be directed to Dorothy Seabourne-
12 Taylor, Paralegal to the Special Master.

13 26. As of the date of this Declaration, I personally have not received any comments,
14 questions, or objections through letter, correspondence, email, or phone, nor am I aware of any
15 comments, questions, or objections having been received by the presiding officer, from
16 interested parties.

17 27. As mentioned previously the OIC has received correspondence from the public in
18 response to an OIC request for public written comment, as well as in response to the public
19 hearings in this matter held before the Insurance Commissioner. The correspondence from the
20 public and transcripts of the public hearings have been considered by the OIC staff in making
21 our recommendation and will be entered into evidence in the upcoming hearing in this matter.

22 Continued to next page
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1 I declare under penalty of perjury under the laws of the State of Washington that the
2 foregoing is true and correct.

3 Dated this 20th day of December, 2016, at Tumwater, Washington.
4

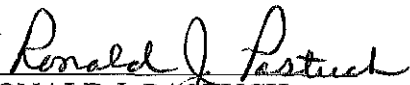
5 
6 RONALD J. PASTUCH
7 Holding Company Manager
8 Company Supervision Division
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EXHIBIT A

OIC Recommendation with Proposed Conditions

In light of the materials submitted by the applicants, we believe the proposed transaction should be approved by the Commissioner. However, the following conditions should be included in any order approving the proposed transaction to meet the concerns raised in the RRC Final Report of 10/26/16:

- The submission of audited financial information for the acquiring party which satisfies the requirements of RCW 48.31B.015(2)(a).

We recommend that an audited financial statement should be filed by the acquiring party to the OIC within 90 days after Commissioner's approval.

- It may be beneficial for the creation and maintenance of the Consumer Advisory Committee and the GHC Senior Caucus since these were concerns raised in the hearings held by the commissioner.

We concur with this recommendation.

- Kaiser Foundation Hospitals (KFH) and Kaiser Foundation Health Plan (KFHP), Inc. have entered into a guaranty agreement under which they guarantee all of the liabilities, debts and obligations of each other and substantially all of the liabilities, debts and obligations of Kaiser Foundation Health Plan of Northwest, Kaiser Foundation Health Plan of Georgia, Inc., Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc., and Kaiser Foundation Health Plan of Colorado (Affiliated Health Plans). Under the guaranty agreement, only KFH and KFHP are guarantors and Only KFH and KFHP and the Affiliated Health Plans are covered under the guaranty agreement. It may be beneficial for GHC to become a party of the guaranty agreement in a manner similar to the other Affiliated Health Plans.

We recommend that GHC and GHO may only be covered under the Kaiser guaranty agreement in the same manner as an Affiliated Health Plan, subject to OIC approval.

- In the Statement of Operations for years 2017 through 2019, there is an incremental cost for Additional Community Benefits and this represents the increased Community Benefit commitment of \$800 million over the next 10 years, all of which will be funded

EXHIBIT A

by Group Health Cooperative's (GHC) balance sheet and cash flows. It may be beneficial for the OIC to put in place a capped amount of annual expenditures as they relate to the \$1 billion commitment over the next 10 years for capital expenditures and the \$800 million commitment over the next 10 years for community benefits. Any amount in excess of the cap could be required to be approved by the OIC prior to exceeding the cap.

We note that the acquisition includes a plan to fund KFHPW with a \$2 billion loan arrangement from a Kaiser affiliate which is included in the Acquisition agreement. \$1.8 billion of this amount will be paid to as transaction consideration to Group Health Community Foundation, a newly-formed non-profit that will operate completely independently from the Kaiser entities, including KFHPW, as well as the newly-acquired GHC (which will come under the control of KFHPW). Accordingly, GHC and GHO would not receive any of the loaned funds from KFHPW; however, as subsidiaries of KFHPW, there would be an expectation that if the loan were called by the Kaiser affiliate, KFHPW could seek funds from GHC to repay the loan.

We recommend that annual contributions from GHC and GHO to the new Foundation and Community Benefits should be reported to the OIC on or before May 1st of each year.

We recommend that block contributions (outside of charity care provided directly by GHC and GHO) to the new Foundation and Community Benefit programs require the same notification and commissioner approval as distributions required by RCW 48.31B.030(2) through (3) and WAC 284-18-450 based on the cumulative effect of these payments, combined with any other distributions already covered by this statute and rule, on the extraordinary distribution determination.

- The applicant indicated that decisions regarding intercompany agreements have not been made. It may be beneficial to have the OIC approve any intercompany or service agreements prior to the commencement date of these contracts.

EXHIBIT A

We recommend any intercompany agreements between GHC and GHO and Kaiser affiliates are subject to RCW 48.31B.030(1) and subject to OIC prior approval.

We recommend that GHC or GHO will not do any of the following with prior written approval of the Commissioner:

- i) Co-sign or guarantee any part of any current or future loan and/or credit facility entered into by the any Parent Company;
- ii) Assume any part of a loan from any Parent Company; or
- iii) Pledge or hypothecate any GHC or GHO asset in connection with any current or future loan in which any Parent Company is a borrower or guarantor.

If the OIC denies approval of any of the above, GHC or GHO will be entitled to a hearing on whether the proposed transaction satisfies the requirements of RCW 48.31B.030.

- It may be beneficial to stipulate that the board governance committee will not adjust criteria that board candidates must meet in order to fill any vacant seats for a specified period of time following any approval of the acquisition.

We recommend the board governance committee will not adjust any criteria for future board candidates to fill vacant seats for a period of three years from the Commissioner's approval.

- As of September 1, 2016 two officers have been determined. It may be beneficial to have Kaiser identify the remaining officers and have them submit biographical affidavits and third party background checks or stipulate in an order that this documentation must be received and reviewed prior to commencing any business.

This task has been completed. See amendment #3 to Form A statement.

- It may be beneficial to stipulate that payments in excess of a certain threshold for capital improvements or community charitable contributions and repayment of the \$2 billion Demand Note or Accrued Interest are approved in writing by the OIC prior to payment.

EXHIBIT A

We recommend that no distribution, dividend, or direct payment to the Acquiring Party for the purpose of repayment of the Demand Note or its Accrued Interest for a period of five years from the Commissioner's approval.

After the five year period, any distribution, dividend, or direct payment from GHO or GHC to the Acquiring Party for the purpose of repayment of the Demand Note or its Accrued Interest must have prior approval by the Commissioner at least 30 calendar days prior to the proposed payment.

We further recommend that Kaiser and its affiliates do not apply to transfer the state of domicile of GHC or GHO outside of Washington if, immediately following the redomestication, a plurality of covered lives reside in Washington of all types of coverage in all jurisdictions from all regulated entities that are subsidiaries of Group Health.

This condition should remain in full force and effect until the earlier of: the date on which Kaiser ceases to maintain a majority of voting power, direct or indirect, over GHC or GHO, as established by the Commissioner's approval authorizing a change of control under RCW 48.31B.015; or the date this condition is terminated with the written consent of the Commissioner.

"EXHIBIT B"

Proposed sale of Group Health to Kaiser Foundation Health Plan

Group Health Cooperative (Group Health) notified the insurance commissioner on Dec. 3, 2015, that it intends to be acquired by California-based Kaiser Foundation Health Plan, Inc. (Kaiser FHP). The proposal was supported by a membership vote (www.ghc.org) announced on March 12, 2016; 8,824 eligible members voted in favor of the acquisition and 1,586 voted against it.

Final hearing scheduled for Jan. 3, 2017

The formal public hearing (PDF, 198KB) on the proposed sale will take place Jan. 3, 2017 at 10 a.m. in our [Tumwater office](#). The purpose of the hearing is for the commissioner to hear evidence about the proposal and the recommendation from his staff. The hearing is open to the public, but they will not be able to offer testimony or otherwise participate.

To listen by phone, call 1-650-479-3208 and enter access code: 25313049

Our review

We received the formal application, called a Form A filing, along with a [public summary \(PDF, 119KB\)](#) of the proposal from Kaiser FHP on March 2, 2016.

[Kreidler statement on his role in the hearing \(PDF, 560KB\)](#).

[Second Order - Case Scheduling \(PDF, 383KB\)](#)

- | Sets a case schedule based on the trigger date of the OIC's final recommendation and addresses other miscellaneous matters.

[First Order - Case Management \(PDF, 425KB\)](#)

- | Lays out how the adjudicative hearing will work;
- | Assigns a Special Master to oversee the hearing process;
- | Sets a deadline of April 8 for interveners (people who wish to formally participate in the proceedings) to file a petition to do so;

- | Explains that public forums will be held throughout the state; and
- | Schedules a status conference on April 4 for the parties.

"EXHIBIT B"

The commissioner's review is governed by state laws ([RCW 48.31B.015](#) and [RCW 48.31B.020](#)) ([leg.wa.gov](#)) and includes looking closely at how this proposed sale could affect the overall stability of the health insurance market in Washington state, including competition and consumer choice.

There are two phases to his review. First, specialized staff including accountants, lawyers, and financial examiners will thoroughly review the application and make their recommendation. Next, the commissioner will hold a public hearing on the evidence, including the staff recommendation and issue an order either approving or denying the sale.

Looking at a 2017 health plan?

Group Health posted information ([www.ghc.org](#)) for consumers who are shopping for 2017 health plans:

If the acquisition is completed:

- | The Group Health plan you select during 2016 Open Enrollment will not change in 2017.
- | You can keep your Group Health doctors.
- | You can continue to receive care at the same Group Health locations.
- | You will have access to the same hospitals you go to today.

Public forums, Summer 2016

We held three public forums around the state to accept comments about the proposed acquisition.

- | June 15, Tacoma: [Transcript \(PDF, 343KB\)](#)
- | June 29, Seattle: [Transcript \(PDF, 446KB\)](#)
- | July 27, Spokane: [Transcript \(PDF, 167KB\)](#)

Stay connected

- | [Email us](#) with your comments or concerns.
- | [Sign up to receive an email](#) when new information is available about the proposed sale.

SEE ALSO

"EXHIBIT B"

| Comment on sale of Group Health to Kaiser Foundation Health

| Search company financial statements

| Insurer mergers and acquisitions

NEED MORE HELP?

| Call us at 800-562-6900, 8 a.m. to 5 p.m., Monday - Friday

| Email us

"EXHIBIT B"

<p>Group Health Cooperative and Group Health Options, Inc. acquisition by Kaiser Foundation Health Plan of Washington</p>	<p>Form A and Form E Applications for Acquisition and Control</p>	<p>Group Health's Witness and Exhibit List (12-13-16) (80 KB)</p>
<p>16-0050</p>		<p>OIC's Exhibit List (12-13-16) (77 KB)</p>
		<p>OIC's Witness List (12-13-16) (42 KB)</p>
		<p>Kaiser's Witness List (12-13-16) (84 KB)</p>
		<p>Kaiser's Exhibit list (12-13-16) (116 KB)</p>
		<p>Notice of Hearing (12-7-16) (198 KB)</p>
		<p>Stipulation to Modify the Second Order: Case Scheduling, etc. (12-2-16) (120 KB)</p>
		<p>OIC Recommendation letter regarding Form E Application (12-1-16) (47 KB)</p>
		<p>OIC Recommendation letter regarding Form A Application (12-1-16) (49 KB)</p>
		<p>Second Order: Case Scheduling, Consolidated Hearings for Form A and Form E Applications, Misc. Matters (383KB)</p>
		<p>Group Health's Joinder in Kaiser's Opposition to Consolidation of</p>

"EXHIBIT B"

Form A and Form E Hearings (62KB)

Kaiser Brief in Opposition to Consolidation of Form A and Potential Form E Hearing (207KB)

OIC Position on Holding Consolidated Hearing (122KB)

Kaiser Foundation Health Plan of Washington Status Report (115 KB)

Group Health Cooperative Status Report (77KB)

OIC Status Report (80KB)

First Order: Case Management Order (357KB)

OIC Letter Requesting Adjudicative Hearing with attached Form A filing (808KB)

Form A exhibits and documents: Table of Exhibits (51 KB); Exhibit A (459 KB); Exhibit B (9,072 KB); Exhibit C (4,010 KB); Exhibit D (493 KB); Exhibit E (551 KB); Exhibit F (532 KB); Exhibit G (1.685 KB); Exhibit H-2011 financials (5,544 KB); Exhibit

"EXHIBIT B"

			<p>H-2012 financials (5,829 KB); Exhibit H-2013 financials (5,677 KB); Exhibit H-2014 financials (5,383 KB); Exhibit H-2015 financials (6,191 KB); Exhibit I (4,933 KB); Exhibit J (450 KB); Exhibit L (1,670 KB); Exhibit N (874 KB); Exhibit O (613 KB); Group Health Community Foundation (GHCF) Bylaws and Articles of Incorporation (4,549 KB); GHCF org chart (post-acquisition) (159 KB); Group Health's bylaws (post-acquisition) (1,165 KB); Group Health's bylaws (current) (4,712 KB)</p> <p>Form A filing without exhibits (542KB)</p> <p>Executive Summary to Form A Filing (94KB)</p>
<p>Gundersen Dental Care 11-0002</p>	<p>Demand for Hearing</p>	<p>Proceedings terminated</p>	<p>Order Terminating Proceeding</p>
<p>Gunderson, Rose G11-0002</p>	<p>Appeal OIC's Determination</p>	<p>Withdrawal of hearing demand</p>	<p>Withdrawal of Hearing Demand Notice of Hearing Receipt of Demand</p>