BEFORE THE INSURANCE COMMISSIONER OF THE STATE OF OKLAHOMA

FILED
JUL 29 2014
INSURANCE COMMISSIONER
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN D. DOAK, Insurance Commissioner,	)	
Petitioner,	)	
v.	)	
	)	Case No. 14-0555-DIS
PROVIDER SERVICES, LLC d/b/a WALKER-BROWN FUNERAL HOME	)	
Prepaid Funeral Benefits Permit 863545	)	
Respondent.	)	

CONDITIONAL ADMINISTRATIVE ORDER AND NOTICE OF RIGHT TO HEARING

The State of Oklahoma, ex rel., John D. Doak, Insurance Commissioner, alleges and states as follows:

JURSDICTION AND AUTHORITY

1. John D. Doak is the Insurance Commissioner of the State of Oklahoma ("the Insurance Commissioner") and, as such, is charged with the duty of administering and enforcing the Oklahoma Insurance Code, 36 O.S. §§ 101 et seq., including the provisions of the Prepaid Funeral Service and Funeral Service Merchandise Act, 36 O.S. §§ 6121-6136.18 ("the Prepaid Act").

2. The Respondent, Provider Services LLC d/b/a Walker-Brown Funeral Home ("Respondent" or "Permit Holder"), is a Permitted Provider of prepaid funeral

benefit contracts in the State of Oklahoma and holds Permit Number 863545 for an establishment in Bartlesville, Oklahoma.

FINDINGS OF FACT

1. The Insurance Commissioner is charged with the duty of administering and enforcing all provisions of the Prepaid Act, 36 O.S. §§ 6121-6136.18.

2. Respondent is a prepaid funeral benefits Permit Holder in the state of Oklahoma pursuant to 36 O.S. §§ 6121 and 6124, holding Permit Number 863545 for an establishment in Bartlesville, Oklahoma.

3. Respondent failed to submit its Annual Report by March 17, 2014 (as March 15, 2014, fell on a Saturday), as required by 36 O.S. §6128. In fact, the Department did not receive Respondent's Annual Report until April 9, 2014 (postmark date).

CONCLUSIONS OF LAW

1. Respondent has failed to submit its Annual Report timely in violation of 36 O.S. § 6128.

2. The Insurance Commissioner may censure, suspend, or revoke a prepaid funeral permit or impose a fine in the amount of $100 to $1,000, or impose a combination of such administrative actions, for violating any provision of the Prepaid Act. *See e.g.* 36 O.S. § 6130 (B).

3. The Annual Report is central to the Insurance Commissioner's ability to properly regulate the prepaid funeral benefits trust industry. *See* 36 O.S. §§ 6123, 6125, 6128, 6129, 6129.1 and O.A.C 365:25-9-3(b) (3).

ORDER

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED by the Insurance Commissioner that the named Respondent is assessed a civil penalty in the amount of Two Hundred and Fifty Dollars ($250.00).

IT IS FURTHER ORDERED, ADJUDGED AND DECREED that this Conditional Administrative Order **shall become a FINAL ORDER on the 31st day following its receipt by the Respondent, unless the Respondent requests a Hearing as set out below.** The fine levied herein is due at the time this Conditional Administrative Order becomes a Final Order.

IT IS FURTHER ORDERED, ADJUDGED AND DECREED and Respondent is further notified that it may request a Hearing within thirty (30) days of the receipt of this Conditional Administrative Order, and upon such request, the Oklahoma Insurance Department shall conduct a Hearing before an independent Hearing Examiner. A request for Hearing shall be made in writing to Kelley C. Callahan, Senior Attorney, Oklahoma Insurance Department, Legal Division, 3625 NW 56th Suite 100, Oklahoma City, Oklahoma 73112 and **give an explanation of Respondent's actions described herein and any defenses thereto.**

Any such Hearing shall be conducted according to the procedures for contested cases under the Insurance Code and the Oklahoma Administrative Procedures Act, 75 O.S. § 250-323. If the Respondent serves a timely request for Hearing, this Conditional Administrative Order shall act as notice of the matters to be reviewed at the Hearing, and such allegations may be amended as additional information is discovered. The Insurance

Commissioner or his appointed Hearing Examiner reserves the right to impose additional or different administrative discipline at a Hearing, if warranted.

WITNESS My Hand and Official Seal this 29th day of July, 2014.

JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

By: Kelley C. Callahan, OBA No. 1429
Senior Attorney
3625 NW 56th Street, Suite 100
Oklahoma City, OK 73112
Telephone: (405) 521-2746
Facsimile: (405) 522-0125

CERTIFICATE OF MAILING

I, Kelley C. Callahan, hereby certify that a true and correct copy of the attached *Conditional Administrative Order and Notice of Right to Hearing* was mailed certified mail, return receipt requested and by regular U.S. mail on the 29th day of July, 2014 to:

Provider Services LLC d/b/a Walker-Brown Funeral Home
ATTN: Mr. Steven Walker, FDIC
4201 East Nowata Road
Bartlesville, OK 74006

Certified Mail No.
7001 0320 0004 4249 4275

And that a copy was mailed by regular mail to:

Oklahoma Funeral Board
ATTN: Chris Ferguson, Deputy Director
4545 North Lincoln, Suite 175
Oklahoma City, OK 73105

And a Copy Was Delivered to Shanna Johnson, Regulatory Supervisor, Prepaid Accounts, Oklahoma Insurance Department.

Kelley C. Callahan
Senior Attorney
Oklahoma Insurance Department

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7001 0320 0004 4249 4275

OFFICIAL USE

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here
JUL 29 2014
USPS 73118-9998
OKLAHOMA CITY, OK

Sent To
Street, Apt. No.; or PO Box No.
City, State, ZIP+4

Provider Services, LLC,
DBA Walker-Brown Funeral Home
ATTN: Steven Walker, FDIC
4201 E. Nowata Rd.
Bartlesville, OK 74006
rlg/14-0555-DIS/Cond. Adm. Ord.

PS Form 3800, January 2001

SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

RECEIVED
OKLAHOMA INSURANCE DEPARTMENT
AUG 05 2014
Legal Division

Provider Services, LLC,
DBA Walker-Brown Funeral Home
ATTN: Steven Walker, FDIC
4201 E. Nowata Rd.
Bartlesville, OK 74006
rlg/14-0555-DIS/Cond. Adm. Ord.

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Mike L Wilson
☐ Agent
☒ Addressee

B. Received by *(Printed Name)*: Mike L. Wilson
C. Date of Delivery: 7/31

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☒ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7001 0320 0004 4249 4275

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540