

STATE OF INDIANA)
) SS: BEFORE THE INDIANA
COUNTY OF MARION) COMMISSIONER OF INSURANCE

IN THE MATTER OF:)
)
All Savers Insurance Company)
7440 Woodland Drive)
Indianapolis, Indiana 46278-1719)

Examination of: **All Savers Insurance Company**


NOTICE OF ENTRY OF ORDER

Enclosed is the Final Order entered by Stephen W. Robertson, Commissioner of the Indiana Department of Insurance, after fully considering and reviewing the Verified Report of Examination of All Savers Insurance Company, any relevant examination work papers, and any written submissions or rebuttals. The Verified Report of Examination, as sent to you on May 29, 2019, has been adopted by the Commissioner.

Pursuant to Ind. Code § 27-1-3.1-12(b), within thirty (30) days of receipt of the Final Order, each director of All Savers Insurance Company shall file an affidavit with the Indiana Department of Insurance stating that he/she has received a copy of the Verified Report of Examination and the Final Order.

The Final Order is a final administrative decision that may be appealed pursuant to Ind. Code § 4-21.5-5.

June 28, 2019
Date



Roy Eft
Chief Financial Examiner

CERTIFIED MAIL NUMBER: 7005 3110 0002 4444 0625

STATE OF INDIANA) BEFORE THE INDIANA
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All Savers Insurance Company)
7440 Woodland Drive)
Indianapolis, Indiana 46278-1719)

Examination of: **All Savers Insurance Company**

FINDINGS AND FINAL ORDER

The Indiana Department of Insurance conducted an examination into the affairs of the All Savers Insurance Company (hereinafter “Company”) for the time period January 1, 2013 through December 31, 2017.

The Verified Report of Examination was filed with the Commissioner of the Department of Insurance (hereinafter “Commissioner”) by the Examiner on April 11, 2019.

A copy of the Verified Report of Examination, along with a Notice of Opportunity to Make Written Submission or Rebuttal, was mailed to the Company via Certified Mail on May 29, 2019 and was received by the Company on June 3, 2019.

The Company did not file any objections.

NOW THEREFORE, based on the Verified Report of Examination, I hereby make the following **FINDINGS**:

1. That the Verified Report of Examination is a true and accurate report of the financial condition and affairs of the All Savers Insurance Company as of December 31, 2017.
2. That the Examiner’s Recommendations are reasonable and necessary in order for the All Savers Insurance Company to comply with the laws of the State of Indiana.

Based on the FINDINGS, the Commissioner does hereby ORDER:

1. Pursuant to Ind. Code § 27-1-3.1-11(a)(1), the Verified Report of Examination is adopted and shall be filed. Hereafter the Verified Report of Examination, may constitute prima facie evidence of the facts contained therein in any action or proceeding taken by the Indiana Department of Insurance against the Company, its officers, directors, or agents.
2. The Company shall comply with the Examiner's Recommendations enumerated in summary form and throughout the text of the Verified Report of Examination. A written response to these recommendations should be provided to the Department within 30 days of receipt of this order.
3. Compliance with the Examiner's recommendations shall be completed on or before the filing of the subsequent annual statement. In the event it is not feasible to comply with a recommendation before the filing of the subsequent annual statement, the Company shall submit a written explanation as to why it was not feasible with the filing of the annual statement.

Signed this 28 day of
June, 2019.

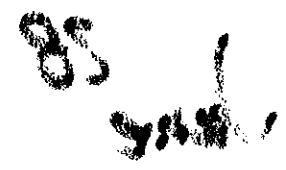

Stephen W. Robertson
Insurance Commissioner
Indiana Department of Insurance

ABOUT AFFIRMATIONS

The following pages for affirmations need to be signed by each Board Member and returned to the Indiana Department of Insurance within thirty (30) days in accordance with I.C. §27-1-3.1-12(b).

If your affirmations list individuals that are no longer on your Board of Directors, you may simply retype the form on plain white paper with the correct names and a line to the right for signature. If the names are misspelled, you may do the same, simply re-type the corrected form with a line to the right for signature.

Should you have any questions or difficulties with these forms or you require additional time past the thirty (30) day requirement, please do not hesitate to contact this department at (317) 232-2390.

A large, stylized handwritten signature in black ink, appearing to be a name with a prominent initial.Handwritten initials '83' followed by a scribbled-out signature or mark.

STATE OF INDIANA
Department of Insurance
REPORT OF EXAMINATION
OF

ALL SAVERS INSURANCE COMPANY

NAIC Co. CODE 82406
NAIC GROUP CODE 0707

As of

December 31, 2017

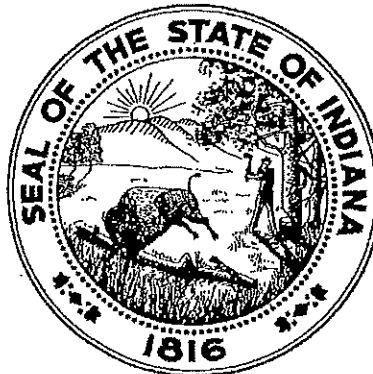


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STATE OF INDIANA

ERIC J. HOLCOMB, GOVERNOR

Indiana Department of Insurance

Stephen W. Robertson, Commissioner
311 W. Washington Street, Suite 103
Indianapolis, Indiana 46204-2787
Telephone: 317-232-2385
Fax: 317-232-5251
Website: in.gov/idoi

April 11, 2019

Honorable Stephen W. Robertson, Commissioner
Indiana Department of Insurance
311 West Washington Street, Suite 300
Indianapolis, Indiana 46204-2787

Dear Commissioner:

Pursuant to the authority vested in Appointment Number 3974, an examination has been made of the affairs and financial condition of:

**All Savers Insurance Company
7440 Woodland Drive
Indianapolis, Indiana 46278-1719**

hereinafter referred to as the "Company" or "ASIC", an Indiana domestic stock, life and accident and health insurance company. The examination was conducted at the corporate offices of the Company in Indianapolis, Indiana.

The Report of Examination, reflecting the status of the Company as of December 31, 2017, is hereby respectfully submitted.

ACCREDITED BY THE NATIONAL ASSOCIATION OF INSURANCE COMMISSIONERS

AGENCY SERVICES 317-232-2413 COMPANY COMPLIANCE 317-232-3495 CONSUMER SERVICES 317-232-2395/1-800-622-4461 FINANCIAL SERVICES 317-232-2390 MEDICAL MALPRACTICE 317-232-2402 COMPANY RECORDS 317-232-5692 STATE HEALTH INSURANCE PROGRAM 1-800-452-4800

SCOPE OF EXAMINATION

The Company was last examined by representatives of the Indiana Department of Insurance (INDOI), and covered the period from January 1, 2008 through December 31, 2012. The present risk-focused examination was conducted by Noble Consulting Services, Inc., and covered the period from January 1, 2013 through December 31, 2017, and included any material transactions and/or events occurring subsequent to the examination date and noted during the course of this examination.

The examination was conducted in accordance with the NAIC *Financial Condition Examiners Handbook* (Handbook). The Handbook requires that we plan and perform the examination to evaluate the financial condition, assess corporate governance, identify current and prospective risks of the Company, and evaluate system controls and procedures used to mitigate those risks. An examination also includes identifying and evaluating significant risks that could cause an insurer's surplus to be materially misstated both currently and prospectively.

The Connecticut Insurance Department (CID) in accordance with the Handbook guidelines, through the NAIC's Financial Examination Electronic Tracking System called the examination of UnitedHealth Group Incorporated (UHG). The CID served as the lead state on the coordinated examination, and the INDOI served as the facilitating state of Subgroup 3. Participating states included in Subgroup 3 were the California Department of Insurance, New York State Department of Financial Services, and Wisconsin Department of Insurance.

The Pennsylvania Insurance Department contracted Lewis & Ellis, Inc., to provide all actuarial services throughout the examination, and conducted a review of the Company's actuarial related risks as of December 31, 2017.

Winthrop Capital Management provided all investment services throughout the examination and conducted a review of the Company's investment related risks as of December 31, 2017.

All accounts and activities of the Company were considered in accordance with the risk-focused examination process. This may include assessing significant estimates made by management and evaluating management's compliance with Statutory Accounting Principles. The examination does not attest to the fair presentation of the financial statements included herein. If, during the course of the examination an adjustment is identified, the impact of such adjustment will be documented separately following the Company's financial statements.

This examination report includes significant findings of fact, as in the Indiana Code (IC) 27-1-3.1-10 and general information about the insurer and its financial condition. There may be other items identified during the examination that, due to their nature (e.g., subjective conclusions, proprietary information, etc.), are not included within the examination report but separately communicated to other regulators and/or the Company.

HISTORY

ASIC is a wholly owned subsidiary of Golden Rule Financial Corporation (GRFC), and its ultimate parent company is UHG. The Company, licensed as a life, accident, and health insurer, is domiciled in the state of Indiana. ASIC was incorporated in Indiana and commenced operations February 12, 1986.

The Company was certified on November 15, 2014, by the INDOI as a Qualified Health Plan, which allowed them to begin writing marketplace business on the exchange effective January 1, 2015 for individuals; however the Company has exited the exchange line of business effective January 1, 2017.

CAPITAL AND SURPLUS

GRFC owned 100% of the Company's issued and outstanding stock as of the examination date. There were 1,000 authorized shares of common stock with a par value of \$10,000 per share and 250 shares issued and outstanding throughout the examination period. The Company has no preferred stock outstanding.

DIVIDENDS TO STOCKHOLDERS

During the examination period, the Company paid the following extraordinary dividend to GRFC:

<u>Year</u>	<u>Total</u>	<u>Ordinary Dividends</u>	<u>Extraordinary Dividends</u>
2017	\$ 250,000,000	\$ -	\$250,000,000
2016	-	-	-
2015	-	-	-
2014	-	-	-
2013	-	-	-
Total	<u>\$ 250,000,000</u>	<u>\$ -</u>	<u>\$250,000,000</u>

During the examination period, the Company received the following capital infusions from GRFC:

<u>Year</u>	<u>Total</u>
2017	\$ 0
2016	571,000,000
2015	908,000,000
2014	10,000,000
2013	4,000,000
Total	<u>\$1,493,000,000</u>

In accordance with IC 27-1-23-4(h), the payment of dividends to holding companies or affiliated insurers may not exceed the greater of 10% of the prior year's surplus or the net income of such insurer of the prior year. The extraordinary dividend paid in 2017 was made with prior approval of the Indiana Insurance Commissioner which was recorded as a reduction to gross paid-in and contributed surplus. In accordance with IC 27-1-23-1.5, the Company notified the INDOI of all declared dividends to the parent during the examination period.

TERRITORY AND PLAN OF OPERATION

The Company offers both fully insured and stop loss coverage Preferred Provider Organization plans to employer groups with a variety of plan designs to encourage prevention and wellness. Products target employers with 10-99 employees that are looking for alternative benefit options and offers employers the ability to establish medical benefit plans from pre-built plan designs. The Company is licensed to sell life, accident, and health insurance in forty-seven (47) states. The plans have access to the extensive UHG network of physicians and other health care providers, and are marketed through the existing independent channels of its affiliated companies. In 2016, ASIC participated in the Affordable Care Act (ACA) individual exchange market in seven (7) states but chose to exit that market effective January 1, 2017.

GROWTH OF THE COMPANY

The following exhibit summarizes the financial results of the Company during the examination period:

Year	Admitted Assets	Liabilities	Capital and Surplus	Premiums	Net Income (loss)
2017	\$1,143,175,563	\$ 145,895,758	\$ 997,279,805	\$ 497,726,068	\$ 187,622,839
2016	1,551,506,002	497,349,939	1,054,156,063	1,603,113,661	(102,205,265)
2015	1,067,525,252	466,718,708	600,806,544	891,365,288	(339,523,600)
2014	61,591,282	30,445,392	31,145,890	111,927,696	4,958,542
2013	29,577,049	13,154,318	16,422,731	76,308,850	1,507,679

Capital and surplus demonstrate an increase starting in 2015 due in part to an influx of capital from the parent company to satisfy the minimum capital requirements. In 2017, given the improvement in net income from operations, a dividend was paid to reduce the amount of excess capital. The decrease in premiums from 2016 to 2017 is due to exiting the ACA business as of January 1, 2017.

MANAGEMENT AND CONTROL

Directors

The Company is managed by its Board of Directors (Board). The Company's Bylaws state the Board shall consist of five (5) members, and at least one (1) of which must be a resident of Indiana.

The following is a listing of persons serving as directors at December 31, 2017, and their principal occupations as of that date:

Name and Address	Principal Occupation
Patrick Francis Carr Indianapolis, Indiana	Board Chairman, President, and Chief Executive Officer UnitedHealthcare *
Douglas Ford Crockett Indianapolis, Indiana	Chief Operating Officer and Vice President UnitedHealthcare *
John Frederick Frank Indianapolis, Indiana	Chief Administrative Officer and Vice President UnitedHealthOne *
James Mark Gabriel Green Bay, Wisconsin	Senior Vice President UnitedHealthcare*
Richard Charles Sullivan Indianapolis, Indiana	Vice President and Secretary UnitedHealthcare *

* The Directors/Officers support the business segments noted above, but are employees of United HealthCare Services, Inc. (UHS).

Officers

The Bylaws state that the elected officers of the Company shall consist of a Chairman, a President, who must also be a Board member, one (1) or more Vice Presidents, a Treasurer, and a Secretary and one (1) or more Assistant Secretaries and a Treasurer. Any number of offices, except the offices of President and Secretary, may be held by the same person. Each of these officers is elected by the Board and shall hold office one (1) year or until their respective successors are duly chosen and have qualified.

The following is a list of key officers and their respective titles as of December 31, 2017:

<u>Name</u>	<u>Office</u>
Patrick Francis Carr	Board Chair, President and Chief Executive Officer
Robert Worth Oberrender	Treasurer
Richard Charles Sullivan	Secretary and Vice President
Jeremy Michael Schoettle	Chief Financial Officer and Vice President
Douglas Ford Crockett	Chief Operating Officer and Vice President
James Mark Gabriel	Senior Vice President

CONFLICT OF INTEREST

Directors and officers are required to review and sign Conflict of Interest statements annually. It was determined that all directors and officers listed in the Management and Control section of this Report of Examination have reviewed and signed their statements as of December 31, 2017.

OATH OF OFFICE

IC 27-1-7-10(i) stipulates that every director, when elected, shall take and subscribe to an oath stating that he or she will faithfully, honestly, and diligently administer the affairs of the Company and will not knowingly violate any of the laws applicable to such Company. It was determined that all directors listed in the Management and Control section of this Report of Examination have not subscribed to an oath as of October 17, 2018. See **Other Significant Issues section of this Report of Examination.**

CORPORATE RECORDS

Articles of Incorporation

There were no amendments made to the Articles of Incorporation during the examination period.

Bylaws

There were no amendments made to the Bylaws during the examination period.

Minutes

The Board and shareholders meeting minutes were reviewed for the period under examination through the fieldwork date. Significant actions taken during each meeting were noted. See **Other Significant Issues section of this Report of Examination.**

The committee meeting minutes for the examination period, and through the fieldwork date, were reviewed for the GRFC Audit Committee, which is the only Board level committee.

AFFILIATED COMPANIES

Organizational Structure

The following abbreviated organizational chart shows the Company’s parent and affiliates as of December 31, 2017:

	NAIC Co. Code	Domiciliary State/Country
UnitedHealth Group, Inc. (UHG)		DE
Golden Rule Financial Corporation (GRFC)		DE
UnitedHealthcare Life Insurance Company	97179	WI
Golden Rule Insurance Company	62286	IN
All Savers Insurance Company (ASIC)	82406	IN
All Savers Life Insurance Company of California	73130	CA

Affiliated Agreements

The following significant affiliated agreements and transactions were disclosed as part of the Form B – Holding Company Registration Statement and were filed with the INDOI, as required, in accordance with IC 27-1-23-4.

Management Services Agreement

ASIC and UHS

Effective January 1, 2014, ASIC and UHS entered into a Management Services Agreement. Pursuant to the agreement, UHS will provide management services under a fee structure, including but not limited to, behavioral health, discount program services, network management and operations for medical, primary benefit management, transplant services, and utilization management. Under the terms of this agreement, ASIC paid UHS \$13.3 million and \$121.8 million in 2017 and 2016, respectively.

Administrative Services Agreement

ASIC and OptumRx

Effective October 1, 2013, ASIC and OptumRx entered into an Administrative Services Agreement. Pursuant to the agreement, OptumRx provides certain administrative services to ASIC including pharmacy management and pharmacy claims processing. Under the terms of this agreement, ASIC paid OptumRx \$0.2 million and \$7.9 million in 2017 and 2016, respectively.

Subordinated Revolving Credit Agreement

Effective in 2012, the Company entered into Subordinated Revolving Credit Agreement with UHG. Pursuant to the agreement, UHG agrees to provide short-term borrowing facilities to the companies, as needed. The agreement was amended and/or renewed in 2017 and has a limit of \$10 million for ASIC with an interest rate of the London InterBank Offered Rate plus fifty (50) basis points. No amounts were outstanding under the agreement, as of December 31, 2017. The amount of interest paid or accrued on all borrowings was \$5,012 and \$1,873 in 2017 and 2016, respectively.

Tax Sharing Agreement

Effective January 1, 2005, the Company and certain other affiliates entered into a Tax Sharing Agreement with UHG. Pursuant to the agreement, a consolidated return is prepared for the group of companies, including GRIC. Generally, each member of the group pays its federal income tax liability or receives federal income tax benefits, as if the member had filed as a separate entity. For fiscal year 2017, the tax liability associated with the agreement for ASIC was \$35.7 million.

See the Reinsurance section below for related transactions with affiliates.

FIDELITY BOND AND OTHER INSURANCE

The Company protects itself against loss from any fraudulent or dishonest acts by any employees through fidelity coverage issued by Great American Insurance Company. The bond has a coverage limit of \$10,000,000 with a \$500,000 deductible. The fidelity bond is adequate to meet the prescribed minimum coverage specified by the NAIC.

The Company had additional types of coverage in-force at December 31, 2017, including but not limited to: auto liability, cyber liability, employment benefits liability, management indemnity/directors and officers liability, umbrella, and workers' compensation liability. These policies are held at the UHG level, and cover all subsidiaries.

PENSION, STOCK OWNERSHIP, AND INSURANCE PLANS

The Company has no defined benefit plans, defined contribution plans, multiemployer plans, consolidated/holding company plans, postemployment benefits, or compensated absences plans and is not impacted by the Medicare Modernization Act on postretirement benefits, since all personnel are employees of UHS, which provides services to the Company under the terms of the Management Services Agreement.

SPECIAL AND STATUTORY DEPOSITS

The Company reported the following deposits at December 31, 2017:

<u>State</u>	<u>Book Value</u>	<u>Fair Value</u>
Deposits For The Benefit Of All Policyholders:		
Indiana	\$2,339,525	\$2,864,305
All Other Special Deposits:		
Florida	226,685	251,297
Georgia	36,208	41,231
Nevada	212,210	209,762
North Carolina	414,134	410,820
South Carolina	128,178	137,415
Virginia	212,210	209,762
Total Deposits	<u>\$3,569,150</u>	<u>\$4,124,592</u>

REINSURANCE

The Company entered into a reinsurance agreement effective July 1, 2015 and terminated the agreement as of December 31, 2017 with Unimerica Insurance Company (UIC), the reinsurer. UIC entered into Reinsurance Agreements with ASIC and twenty-three (23) other affiliated entities. Pursuant to the terms of the agreement, UIC assumed the liability to provide coverage for certain specialized health benefits and has transferred funds withheld to Oxford Health Insurance, Inc. (OHI), in accordance with contract terms. The funds withheld amounts due from OHI were \$27.7 million and \$24.5 million as of December 31, 2017 and December 31, 2016, respectively. UIC is an affiliated life and health insurance company domiciled in Wisconsin and licensed in the District of Columbia and all states, except New York. The Company also has a small amount of reinsurance in place with an external reinsurer (American United Life Insurance Company) and the federal government (previously written ACA Exchange business.)

The Company assumed no reinsurance during the examination period.

ACCOUNTS AND RECORDS

The Company's accounting procedures, practices, account records, and supporting data were reviewed and tested to the extent deemed necessary. The trial balances prepared from the Company's general ledger for the years ended December 31, 2016 and December 31, 2017, were agreed to the respective Annual Statements. The Annual Statements for the years ended December 31, 2016 and December 31, 2017, were agreed to each year's independent audit report without material exception. The Company's accounting procedures, practices, and account records were deemed satisfactory.

FINANCIAL STATEMENTS

ALL SAVERS INSURANCE COMPANY

Assets

As of December 31, 2017

	<u>Per Examination*</u>
Bonds	\$ 968,639,328
Cash, cash equivalents and short-term investments	97,856,508
Other invested assets	30,376,743
Receivables for securities	0
Subtotals, cash and invested assets	<u>1,096,872,579</u>
Investment income due and accrued	7,004,944
Premiums and considerations:	
Uncollected premiums and agents' balances in course of collection	3,919,545
Accrued retrospective premiums and contracts subject to redetermination	1,011,892
Reinsurance:	
Amounts recoverable from reinsurers	13,845,929
Current federal and foreign income tax recoverable and interest thereon	4,693,366
Net deferred tax asset	1,194,091
Guaranty funds receivable or on deposit	1,174,522
Health care and other amounts receivable	477,852
Aggregate write-ins for other than invested assets	<u>12,980,844</u>
Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts	<u>1,143,175,563</u>
Total**	<u>\$1,143,175,563</u>

* There were no adjustments to the as-filed financial statements, therefore the Annual Statement amounts agree to the examination amounts.

** The balances include immaterial balancing differences.

ALL SAVERS INSURANCE COMPANY
Liabilities, Surplus and Other Funds
As of December 31, 2017

	Per Examination*
Aggregate reserve for life contracts	\$ 618
Aggregate reserve for accident and health contracts	88,388,242
Contract claims:	
Accident and health	5,918,533
Premiums and annuity considerations for life and accident and health contracts received in advance less discount; including accident and health premiums	5,335,893
Contract liabilities not included elsewhere:	
Provision for experience rating refunds	191,098
Commissions to agents due or accrued	1,430,313
General expenses due or accrued	1,147,698
Taxes, licenses and fees due or accrued, excluding federal income taxes	5,629,389
Remittances and items not allocated	5,766,006
Miscellaneous liabilities:	
Asset valuation reserve	3,458,635
Payable to parent, subsidiaries and affiliates	23,640,965
Liability for amounts held under uninsured plans	274,540
Payable for securities	4,636,828
Aggregate write-ins for liabilities	76,998
Total liabilities excluding Separate Accounts business**	145,895,758
Total liabilities	145,895,758
Common capital stock	2,500,000
Gross paid in and contributed surplus	1,244,537,581
Aggregate write-ins for special surplus funds	1,916,878
Unassigned funds (surplus)	(251,674,654)
Surplus	994,779,805
Totals	997,279,805
Totals**	\$1,143,175,563

* There were no adjustments to the as-filed financial statements, therefore the Annual Statement amounts agree to the examination amounts.

** The balances include immaterial balancing differences.

ALL SAVERS INSURANCE COMPANY
Summary of Operations
For the Year Ended December 31, 2017

	Per Examination*
Premiums and annuity considerations for life and accident and health contracts	\$ 497,726,068
Net investment income	19,424,589
Amortization of Interest Maintenance Reserve	(319,381)
Commissions and expense allowances on reinsurance ceded	15
Miscellaneous Income:	
Aggregate write-ins for miscellaneous income	(1,338)
Total	<u>516,829,953</u>
Disability benefits and benefits under accident and health contracts	398,892,272
Increase in aggregate reserves for life and accident and health contracts	(129,492,240)
Totals	<u>269,400,032</u>
Commissions on premiums, annuity considerations, and deposit-type contract funds	962,144
General insurance expenses	8,034,538
Insurance taxes, licenses and fees, excluding federal income taxes	14,029,546
Aggregate write-ins for deductions	1,357
Totals	<u>292,427,617</u>
Net gain from operations before dividends to policyholders and federal income taxes	224,402,336
Federal and foreign income taxes incurred	36,632,870
Net gain from operations after dividends to policyholders and federal income taxes and before net realized capital gains or (losses)**	187,769,467
Net realized capital gains (losses)	(146,628)
Net income**	<u>\$ 187,622,839</u>

* There were no adjustments to the as-filed financial statements, therefore the Annual Statement amounts agree to the examination amounts.

** The balances include immaterial balancing differences.

ALL SAVERS INSURANCE COMPANY
Capital and Surplus Account Reconciliation

	2017	2016	2015	2014	2013
Capital and surplus, December 31, prior year	\$ 1,054,156,063	\$ 600,806,544	\$ 31,145,890	\$ 16,422,731	\$ 11,110,025
Net income	187,622,839	(102,205,265)	(339,523,600)	4,958,542	1,507,679
Change in net unrealized capital gains (losses)					
less capital gains tax	(727)	-	-	-	-
Change in net deferred income tax	1,245,613	(3,521,260)	2,876,405	319,394	158,750
Change in nonadmitted assets	4,546,215	(3,562,006)	(1,320,147)	(547,980)	(352,861)
Change in asset valuation reserve	(1,271,745)	(1,805,110)	(372,003)	(6,796)	(863)
Cumulative effect of changes in accounting principles	981,547	-	-	-	-
Capital changes:					
Paid in	-	-	-	500,000	-
Surplus adjustment:					
Paid in	(250,000,000)	571,000,000	908,000,000	9,500,000	4,000,000
Dividends to stockholders					
Aggregate write-ins for gains and losses in surplus	-	(6,556,841)	-	-	-
Net change in capital and surplus for the year*	(56,876,257)	453,349,518	569,660,654	14,723,160	5,312,705
Capital and surplus, December 31, current year*	<u>\$ 997,279,805</u>	<u>\$ 1,054,156,063</u>	<u>\$ 600,806,544</u>	<u>\$ 31,145,890</u>	<u>\$ 16,422,731</u>

* The balances include immaterial balancing differences.

COMMENTS ON THE FINANCIAL STATEMENTS

There were no recommended adjustments to the financial statements as of December 31, 2017, based on the results of this examination.

OTHER SIGNIFICANT ISSUES

IC 27-1-7-10(i) stipulates that every director, when elected, shall take and subscribe to an oath stating that he or she will faithfully, honestly, and diligently administer the affairs of the Company and will not knowingly violate any of the laws applicable to such Company. It was determined that each director does have an Oath of Office statement on file, as of October 17, 2018. It was noted that Oaths of Office were not signed in prior years during the examination period. It is recommended that every director shall take and subscribe to an Oath of Office at the time of annual election to the Board.

IC 27-1-7-7(b) states an annual meeting of shareholders, members, or policyholders shall be held within five (5) months after the close of each fiscal year of the Company and at such time within that period as the Bylaws may provide. The Company's Bylaws indicate that annual meetings are to occur at a location of Board's choosing no later than the last day in June. However, they also allow meetings to occur anytime. The Company typically handles the Annual Shareholder Meeting by way of a Written Consent in Lieu of the Meeting, which were occasionally not dated within the timing parameters noted above. This matter has been discussed with the Company and they provided updated Bylaws and ensure the timing is handled correctly noting the Annual Shareholder Meeting is typically handled by way of a Written Consent in Lieu of a Meeting.

SUBSEQUENT EVENTS

There were no events subsequent to the examination date and prior to the completion of fieldwork, which were considered material events requiring disclosure in this Report of Examination.

AFFIDAVIT

This is to certify that the undersigned is a duly qualified Examiner-in-Charge appointed by the Indiana Department of Insurance and that he, in coordination with staff assistance from Noble Consulting Services, Inc., and actuarial assistance from Lewis and Ellis Inc., Actuaries and Consultants, performed an examination of All Savers Insurance Company, as of December 31, 2017.

The Indiana Department of Insurance is accredited under the National Association of Insurance Commissioners Financial Regulation Accreditation Standards.

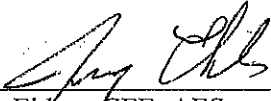
This examination was performed in accordance with those procedures required by the NAIC Financial Condition Examiners Handbook and other procedures tailored for this examination. Such procedures performed on this examination do not constitute an audit made in accordance with generally accepted auditing standards and no audit opinion is expressed on the financial statements contained in this report.

The attached Report of Examination is a true and complete report of condition of All Savers Insurance Company as of December 31, 2017, as determined by the undersigned.



Brad Neff, CFE
Noble Consulting Services, Inc.

Under the Supervision of:

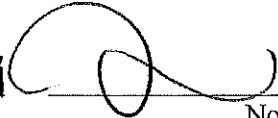


Jerry Ehlers, CFE, AES
Examinations Manager
Indiana Department of Insurance

State of: Indiana
County of: Marion

On this 3 day of May, 2019, before me personally appeared, Brad Neff and Jerry Ehlers, to sign this document.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my notarial seal in said County and State, the day and year last above written.

My commission expires: July 4, 2019 

Notary Public

