	Kamala D. Harris	
1	Attorney General of California	
2	STEPHEN-LEW Supervising Deputy Attorney General	
3	MATTHEW C. HEYN (State Bar No. 227474) Deputy Attorneys General	
4	300 South Spring Street, Suite 1702	
5	Los Angeles, CA 90013 Telephone: (213) 897-2444	
	Fax: (213) 897-5775 E-mail: Matthew.Heyn@doj.ca.gov	
6	Attorneys for Insurance Commissioner of the	
7	State of California	
8	SUPERIOR COURT OF T	THE STATE OF CALIFORNIA
9	COUNTY OF LOS ANGELES DECEIVE	
10	CENTRAL CIVIL	WEST COURTHOUSE MAR 3 0 2010
11		BY: STEPHANIE AMAE
12	INSURANCE COMMISSIONER OF THE	Case No. BS152302
13	STATE OF CALIFORNIA,	Assigned to Hon. Amy D. Hogue
14	Applicant,	[PROPOSED] ORDER APPROVING INSURANCE COMMISSIONER'S
	v.	SECOND STATUS REPORT AND
15	SEECHANGE HEALTH INSURANCE	REQUEST FOR APPROVAL OF LIQUIDATION COSTS
16	COMPANY,	Status Conference
17	Respondent.	Date: April 29, 2016 Time 9:00 a.m.
18		Place: Central Civil West Courthouse
19		Department 307 600 South Commonwealth Avenue
20		Los Angeles, California 90005
21		Action Filed: November 18, 2014
	California Incurance Commissioner Day	ve Jones, as Liquidator of SeeChange Health
22		
23	Insurance Company (the "Liquidator"), has s	submitted the Insurance Commissioner's Second
24	Status Report on the Liquidation of SeeChange Health Insurance Company and Request for	
25	Approval of Liquidation Costs (the "Liquidator's Second Report") and requested an order	
26	approving the Liquidator's Second Report, as	well as the transactions and expenses described
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28		

. 1	therein. On April 29, 2016, the Court held a hearing on the Liquidator's Second Report.	
2	Appearances are set forth on the record.	
3	The Court has considered the Liquidator's Second Report and the accompanying	
4	Declaration of Joseph Holloway. Good cause appearing therefor, IT IS ORDERED:	
5.	(i) The Liquidator's Second Report is approved.	
6	(ii) The Liquidator's closure of SeeChange's Calabasas office, as described in the	
7	Liquidator's Second Report, is approved and ratified.	
8	(iii) The Liquidator's payment of fees and other costs during the period from January	
9	1, 2015 through December 31, 2015, as described in the Liquidator's Second Report, is approved	
10	and ratified.	
11	(iv) The Court will hold a continued status conference to review the status of the	
12	present liquidation on	
13		
14	Dated: THE HONORABLE AMY D. HOGUE	
15	Jude of the Superior Court	
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DECLARATION OF SERVICE BY E-MAIL and OVERNIGHT COURIER

Case Name:

Insurance Commissioner of the State of California v. SeeChange Health

Insurance Company

Case No.:

BS152302

I declare:

I am employed in the Office of the Attorney General, which is the office of a member of the California State Bar, at which member's direction this service is made. I am 18 years of age or older and not a party to this matter; my business address is: 300 South Spring Street, Suite 1702, Los Angeles, CA 90013. I am familiar with the business practice at the Office of the Attorney General for collection and processing of correspondence for overnight mail with the **FEDEX**. In accordance with that practice, correspondence placed in the internal mail collection system at the Office of the Attorney General is deposited with the overnight courier that same day in the ordinary course of business.

On March 29, 2016, I served the attached ORDER APPROVING INSURANCE COMMISSIONER'S SECOND STATUS REPORT AND REQUEST FOR APPROVAL OF LIQUIDATION COSTS by transmitting a true copy via electronic mail. In addition, I placed a true copy thereof enclosed in a sealed envelope, in the internal mail system of the Office of the Attorney General, for overnight delivery, addressed as follows:

PLEASE SEE THE ATTACHED SERVICE LIST BY E-MAIL AND BY OVERNIGHT COURIER

I declare under penalty of perjury under the laws of the State of California the foregoing is true and correct and that this declaration was executed on March 29, 2016, at Los Angeles, California.

Carolina Lopez-Castillo

Declarant

Signature

molina L. Castillo

LA2014512962 52035368.doc

OVERNIGHT COURIER

Case Name: Insurance Commissioner of the State of California v. SeeChange Health

Insurance Company

No.: **BS152302**

Counsel to SeeChange Health Insurance Co. Michael Rosenfield, Esq. SIDLEY AUSTIN LLP 555 West Fifth Street Los Angeles, CA 90014

Counsel to National Organization of Life & Health Guaranty Associations
Frank O'Loughlin & Cindy C. Oliver
LEWIS ROCA ROTHGERBER LLP
1200 Seventeenth St., Suite 3000
Denver, Colorado 80202

SERVICE BY E-MAIL

Case Name: Insurance Commissioner of the State of California v. SeeChange Health

Insurance Company

No.: **BS152302**

Frank O'Loughlin, counsel for the National Organization of Life & Health Insurance Guaranty Associations, foloughlin@lrrlaw.com

Cindy C. Oliver, counsel for the National Organization of Life & Health Insurance Guaranty Associations, COliver@lrrlaw.com

Michael Surguine, administrator of the Arizona Life & Health Guarantee Association, msurguine@azinsurance.gov

Allan (Dick) Horne, administrator of the Arkansas Life & Health Guarantee Association, ahorne@ddh-ar.com

Peter Leonard, administrator of the California Life & Health Guarantee Association, pleonard@clhiga.org

Jamie Kelldorf, administrator of the Colorado Life & Health Guarantee Association, jkelldorf@aol.com

William Falck, administrator of the Florida Life & Health Guarantee Association, wef@wfalcklaw.com

Candie Kinch, administrator of the Idaho Life & Health Guarantee Association, ckinch@idlifega.org

Janis Potter, administrator of the Illinois Life & Health Guarantee Association, jpotter@illinoisga.org

Janis Funk, administrator of the Indiana Life & Health Guarantee Association, jfunk@quadassoc.org

G. Thomas Sullivan, administrator of the Iowa Life & Health Guarantee Association, gtsullivan@nyemaster.com

Linda Becker, administrator of the Kansas Life & Health Guarantee Association, lbecker@kslifega.org

Thomas Peterson, administrator of the Kentucky Life & Health Guarantee Association, guarantymn@aol.com

Beth Hoffman, administrator of the Maryland Life & Health Guarantee Association, beth.hoffman@mdlifega.org

John Colpean, administrator of the Michigan Life & Health Guarantee Association, jcolpean@milifega.org

Gordon Haydel, administrator of the Mississippi Life & Health Guarantee Association, rusdale@aol.com

Charles Renn, administrator of the Missouri Life & Health Guarantee Association, crenn@mo-iga.org

Pamela Olsen, administrator of the Nebraska Life & Health Guarantee Association, polsen@clinewilliams.com

Lou Roggensack, administrator of the Nevada Life & Health Guarantee Association, nlhiga@sbcglobal.net

Gregory Morris, administrator of the North Dakota Life & Health Guarantee Association, gmorris@ndlifega.org

Stephen Durish, administrator of the Ohio Life & Health Guarantee Association, sdurish@ohioga.org

James Rhodes, administrator of the Oklahoma Life & Health Guarantee Association, jwrhodes@oklifega.org

Charles Gullickson, administrator of the South Dakota Life & Health Guarantee Association, cgullickson@sdlifega.org

Dan Elrod, administrator of the Tennessee Life & Health Guarantee Association, Dan.Elrod@butlersnow.com

Margaret Parker, administrator of the Virginia Life & Health Guarantee Association, pparker@valifega.org

Mauna Dailey, administrator of the West Virginia Life & Health Guarantee Association, wvlhga@frontier.com

Allan Patek, administrator of the Wisconsin Life & Health Guarantee Association, allan@wisf-madison.org

Michael Rosenfield, counsel to SeeChange Health Insurance Co., mrosenfield@sidley.com

Dan Boivin, counsel to SeeChange Health Management, LLC DBoivin@healthmine.com