

STATE OF INDIANA )  
 ) SS:  
COUNTY OF MARION )

BEFORE THE INDIANA  
COMMISSIONER OF INSURANCE

CAUSE NUMBER: 8532 – CO09 – 0706 - 013

IN THE MATTER OF: )

Association Healthcare Management, Inc. )  
d/b/a Family Care )  
Respondent, )

11111 Richmond Ave. Ste. 200 )  
Houston, TX 77082 )

Type of Action: Enforcement )

License Number: 508269 )

**FILED**

SEP 25 2009

STATE OF INDIANA  
DEPT. OF INSURANCE

**FINAL ORDER AND APPROVAL**

The Indiana Department of Insurance (“Department”) and Association Healthcare Management, Inc. (“Respondent”) signed an Agreed Entry which purports to resolve all issues involved in the above cause number. The Agreed Entry has been submitted to the Commissioner of Insurance (the “Commissioner”) for approval.

The Commissioner, after reviewing the Agreed Entry, finds it has been entered into fairly and without fraud, duress or undue influence, and is fair and equitable between the parties. The Commissioner hereby incorporates the Agreed Entry as if fully set forth herein, and approves and adopts in full the Agreed Entry as a resolution of this matter.


IT IS THEREFORE ORDERED, ADJUDGED AND DECREED by the Commissioner of Insurance:

1. The Department alleges that Respondent, through a third party marketer, made phone solicitations to Indiana consumers wherein, contrary to its training from

Respondent, it failed to make disclosures concerning the discount medical program being offered as required by Indiana Code 27-17-5-1 et seq.

2. The Department alleges that said phone solicitations made on behalf of Respondent used terms which mislead a person to believe that the discount medical program being offered is health insurance in violation of Indiana Code 27-17-4-1.
3. Respondent neither admits nor denies the Department's allegations.
4. Respondent shall pay a civil penalty in the amount of \$2,500.00, payable to the State of Indiana within thirty (30) days of this Final Order.

ALL OF WHICH IS ORDERED this 25<sup>th</sup> day of Sept., 2009.

  
\_\_\_\_\_  
Carol Cutter, Commissioner  
Indiana Department of Insurance

Distribution:

Association Health Care Management  
11111 Richmond Ave. Ste. 200  
Houston, TX 77082

Nikolas P. Mann  
**INDIANA DEPARTMENT OF INSURANCE**  
311 West Washington Street, Suite 300  
Indianapolis, Indiana 46204-2787

STATE OF INDIANA )  
 ) SS:  
COUNTY OF MARION )

BEFORE THE INDIANA  
COMMISSIONER OF INSURANCE

CAUSE NUMBER: 8352-CO09-0706-013

IN THE MATTER OF: )

Association Healthcare Management, Inc. )  
d/b/a Family Care )  
Respondent, )

11111 Richmond Ave. Ste 200 )  
Houston, TX 77082 )

License No.: 508269 )

**FILED**

SEP 25 2009

STATE OF INDIANA  
DEPT. OF INSURANCE

**AGREED ENTRY**

This Agreed Entry is executed by Nikolas P. Mann, Attorney for and on behalf of the State of Indiana, Indiana Department of Insurance ("Department"), and Association Healthcare Management, Inc., d/b/a Family Care ("Respondent"), a non-resident discount medical program organization authorized to do business in Indiana, to resolve all issues in the above cause number. This Agreed Entry is subject to the review and approval of Carol Cutter, Commissioner of the Indiana Department of Insurance.

WHEREAS, Respondent is a non-resident discount medical program organization with a statutory home office located in the State of Texas and is authorized to do business in the State of Indiana; and,

WHEREAS, Respondent has contracted with a marketing organization, Mercury Investment Group ("Mercury") for the purpose of soliciting sales of Respondent's discount medical program; and,

WHEREAS, Mercury, working on behalf of Respondent, made a series of phone solicitations to Indiana consumers wherein, contrary to its training from Respondent, it failed to make disclosures concerning the discount medical program being offered as required by Indiana Code § 27-17-5-1 et seq.; and,

WHEREAS, the phone solicitations made by Mercury on behalf of Respondent used the terms “national healthcare program”, “uninsured” and “qualify” which mislead a person to believe that the discount medical program being offered is health insurance, in violation of Indiana Code § 27-17-4-1; and,


WHEREAS, the Department and Respondent desire to resolve their differences and settle this issue without the necessity of a hearing;

IT IS, THEREFORE, NOW AGREED by and between the parties as follows:

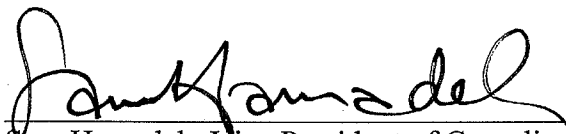
1. The Commissioner has jurisdiction over the subject matter and Respondent in this administrative action.
2. This Agreed Entry is executed voluntarily by the parties.
3. Respondent voluntarily and freely waives the right to a public hearing.
4. Respondent voluntarily and freely waives the right to judicial review of this matter.
5. Respondent neither admits nor denies that it violated any state law, but considers it desirable and in its interest for this matter to be resolved without further proceedings.
6. Respondent agrees to pay \$2,500.00 within thirty (30) days of the filing of the Commissioner’s Final Order in this matter.

7. The Department agrees to accept Respondent's compliance with the terms of this agreement as full and final resolution of all issues in the above cause number.
8. Respondent has carefully read and examined this agreement and fully understands its terms.

9/16/09  
Date Signed

  
\_\_\_\_\_  
Nikolas P. Mann, Deputy Commissioner  
Indiana Department of Insurance

9/4/09  
Date Signed

  
\_\_\_\_\_  
Sam Hamadeh, Vice President of Compliance  
Association Health Care Management, Inc.

STATE OF Texas )  
COUNTY OF Harris ) SS:

Before me a Notary Public for Harris County, State of Texas,  
personally appeared Sam Hamadeh  
and being first duly sworn by me upon his/her oath, says that the facts alleged in the foregoing  
instrument are true.

Signed and sealed this 4<sup>th</sup> day of September, 2009.

Julie Miller  
Signature

Julie Miller  
Printed

My Commissioner expires: June 20, 2012

County of Residence: Harris

