



Filed April 25, 2024

STATE OF INDIANA)
)
COUNTY OF MARION)

BEFORE THE INDIANA
COMMISSIONER OF INSURANCE

DOI CAUSE NO: 21938-AG23-0309-048
ADMINISTRATIVE CAUSE NO.: DOI-2310-002649

IN THE MATTER OF:)
)
Darnell Hayes)
6 Kingswood Dr.)
Lewisberry, PA 17339)
)
Petitioner.)
)
License Application #: 3677317)
)
Type of Agency Action: Enforcement)

FILED

APR 25 2024

STATE OF INDIANA
DEPT. OF INSURANCE

FINDINGS OF FACT, CONCLUSIONS OF LAW AND FINAL ORDER

1. On February 26, 2024, the Administrative Law Judge, Beth A. Butsch, filed her Findings of Fact, Conclusions of Law and Nonfinal Order (“Recommended Order”) in the above-captioned matter under Indiana Code § 4-21.5-3-27.

2. Counsel for the Department timely filed an objection with the Commissioner regarding the Administrative Law Judge’s Recommended Order.

3. The ultimate authority shall issue a final order affirming, modifying, or dissolving the administrative law judge’s order under Ind. Code § 4-21.5-3-29.

Therefore, the Commissioner of Insurance, being fully advised, now hereby issues the following Findings of Fact, Conclusions of Law and Final Order:

FINDINGS OF FACT

1. All Paragraphs set forth in the “Findings of Fact” section in the Recommended Order are adopted in full and incorporated herein.

2. The Administrative Cause Number and Underlying/State Agency Action Number in the Recommended Order’s caption are modified such that the Administrative Cause Number

is "DOI-2310-002649" and the Underlying/State Agency Action Number is "21938-AG23-0309-048."

CONCLUSIONS OF LAW

1. All paragraphs set forth in the "Conclusions of Law" section in the Recommended Order are adopted in full and incorporated herein.

FINAL ORDER

IT IS THEREFORE ORDERED by the Commissioner of Insurance:

1. Petitioner's nonresident producer license #3677317 is hereby permanently revoked.

Under Ind. Code §4-21.5-5-5, Petitioner has the right to appeal this Final Order by filing a petition for judicial review in the appropriate court within thirty (30) days.

ALL OF WHICH IS ORDERED by the Commissioner this 25 day of April, 2024.


Amy L. Beard, Commissioner
Indiana Department of Insurance

Copies to:

Darnell Hayes – darnellhayes4@gmail.com

Joe Bossinger, Attorney – Jbossinger@idoi.in.gov

Dawn Bopp, Indiana Department of Insurance - dbopp@idoi.in.gov

Office of Administrative Law Proceedings – OALP@oalp.in.gov



FILED: February 26, 2024

**STATE OF INDIANA
OFFICE OF ADMINISTRATIVE LAW PROCEEDINGS**

Administrative Cause No.: DOI-2308-002203
Underlying/State Agency Action No.: 2252-AG23-0613-078

Indiana Department of Insurance

Petitioner,

v.

Darnell Hayes

Respondent.

Ultimate Authority: Indiana Department of Insurance

NON-FINAL ADMINISTRATIVE DECISION

The Administrative Law Judge (ALJ) Beth A. Butsch, having heard the evidence and arguments presented in this matter, now issues this Non-Final Order addressing the request by the Indiana Department of Insurance (DOI) to revoke Respondent's nonresident producer license. **This decision is favorable to Petitioner (DOI).** Any aggrieved party may appeal this decision. Appeal instructions are at the end of this document.

Jurisdiction

The ALJ assigned to this matter by the Director of the Office of Administrative Law Proceedings (OALP), *see* Ind. Code § 4-15-10.5-13, has jurisdiction over this case pursuant to Indiana Code § 4-15-10.5-12, which gives OALP jurisdiction over agency administrative actions subject to the Indiana Administrative Orders and Procedures Act at Indiana Code Art. 4-21.5 (AOPA) or "any other statute that requires or allows the office to take action." The OALP has jurisdiction over this case because this case is governed by AOPA.

Issue

The issue in this case is: whether the request of the DOI to permanently revoke Respondent's nonresident insurance producer license should be granted.

Procedural History

1. On October 12, 2023, the Petitioner filed its "Statement of Charges", requesting the permanent revocation of Petitioner's nonresident insurance producer's license. The administrative complaint was forwarded to OALP on the same date.
2. On October 13, 2023, OALP issued its Notice of Assignment of ALJ and Order Setting Evidentiary Hearing. The November 6, 2023, hearing date was continued at the request of Petitioner, and converted to a prehearing conference on November 6, 2023.
3. Respondent did not appear at the prehearing conference on November 6, 2023, after being served with notice. The Petitioner appeared by counsel, Samantha Aldridge. Counsel for Petitioner represented she had not heard from Respondent and OALP did not receive a request to continue the prehearing conference or notice that service was not perfected. The evidentiary hearing was rescheduled for January 4, 2024, at 9:00 a.m.
4. Respondent did not appear at the evidentiary hearing, on January 4, 2024, after being served with notice. Petitioner appeared by counsel, Samantha Aldridge. Court reporter DeShon Smith also appeared. Counsel for Petitioner represented she had not heard from Respondent and OALP did not receive a request to continue the evidentiary hearing or notice that service was not perfected. The ALJ commended the hearing at 9:15 a.m.; evidence was heard, and the hearing was concluded.
5. The following Exhibits were offered by Petitioner and admitted at the Administrative Hearing by the ALJ:
 - a. Petitioner's Exhibit 1, United Healthcare Memorandum of investigation for agent Darnell Hayes (12 Pages).
 - b. Petitioner's Exhibit 2, United Healthcare Disciplinary Action Committee Meeting Minutes (3 Pages).
 - c. Petitioner's Exhibit 3, email between Respondent and SureBridge Consumer Affairs re consumer complaints. (5 pages).
 - d. Petitioner's Exhibit 4, transcription of Respondent's telephone calls with various applicants prepared by UHC investigator with red highlighting, (48 pages).
 - e. Petitioner's Exhibit 5 was not offered or admitted into evidence.

- f. Petitioner's Exhibit 6, Cease and Desist Order and Summary Suspension Order to Respondent from Louisiana Department of Insurance date January 13, 2023, (8 pages).
 - g. Petitioner's Exhibit 7, Notice of Revocation Order and Notice of Fine to Respondent from Louisiana Department of Insurance dated March 24, 2023, (7 pages).
 - h. Petitioner's Exhibit 8, Order revoking Respondent's license from the Utah Insurance Commissioner dated April 5, 2023, (7 pages).
6. The following people testified at the administrative hearing:
- a. Mary Sutherland, United Healthcare Compliance Investigator, hereinafter Investigator Sutherland.
 - b. Tina Harris, Senior Investigator, Indiana Department of Insurance, hereinafter Investigator Harris
7. After the conclusion of the presentation of its evidence, counsel for Petitioner requested a default order, which the ALJ took under advisement.
8. On January 4, 2024, a Notice of Proposed Default Order was issued to Respondent due to his failure to appear at the evidentiary hearing, giving Respondent seven (7) days to file a motion requesting the case remain open.
9. Respondent did not file a response to the Notice of Proposed Default Order after being served.
10. The ALJ has considered Petitioner's motion for a default order and hereby **GRANTS** Petitioner's motion based on the following Findings of Fact and Conclusions of Law.

Findings of Fact

1. Respondent Darnell Hayes has held a nonresident insurance producer license in the State of Indiana since June 2, 2021, holding license #3677317. Respondent's license was due for renewal September 30, 2023. See testimony of Investigator Harris.
2. Respondent worked as an independent insurance agent for Chesapeake Life, also known as Surebridge, and Health Markets, companies acquired by United Health Companies (UHC). Respondent sold products providing supplemental medical insurance. See testimony of Investigator Sutherland.

3. UHC suspended Respondent from selling company products on or about October 6, 2022, after conducting an internal investigation of a consumer complaint. Respondent resigned as their agent a few days later. See testimony of Investigator Sutherland and Petitioner's Exhibits 1, 2, 3, and 4.
4. The internal investigation conducted by UHC included Investigator Sutherland personally reviewing recorded telephone calls of Respondent with numerous applicants and confirming fraudulent conduct by Respondent as set forth specifically in the Findings of Fact below. The written explanation provided to UHC by Respondent was not an accurate depiction of what was said on the telephone calls. See testimony of Investigator Sutherland and Petitioner's Exhibit 3.
5. UHC's internal investigation revealed that Respondent engaged in fraudulent and egregious conduct by: misrepresenting that he had met with and enrolled applicants in person when they were enrolled over the telephone; selling supplemental insurance policies as primary health insurance when primary coverage was available to an applicant at lower or no cost to gain commissions; requesting applicants provide him with confidential PIN codes and signing applicants' names without permission; providing incorrect answers on underwriting questions in order to quote lower premiums; misrepresenting coverage benefits to applicants; failing to read required disclosures to applicants; failing to respond to UHC's requests for information about applicant complaints, and failing to report disciplinary action against his license in other jurisdictions. See testimony of Investigator Sutherland and Petitioner's Exhibits 1, 2, 3, and 4.
6. On May 26, 2022, Respondent misrepresented an applicant's household income and household size to Anthem to quote a lower premium for the applicant and misrepresented to the Applicant that all medical costs would be fully covered with no co pay. See testimony of Investigator Sutherland and Petitioner's Exhibit 4, pgs. 2 through 5.
7. On April 18, 2022, Respondent misrepresented to an applicant that all medical costs would be covered one hundred per cent, misrepresented an enrollment that occurred by telephone as an in-person enrollment, improperly obtained the applicant's confidential PIN code, and provided a false email address on the application that did not belong to the applicant, who had no email. See Petitioner's Exhibit 4, pgs. 7 and 8.
8. On March 12, 2022, Respondent misrepresented an enrollment that occurred by telephone as an in-person enrollment, misrepresented to the applicant that certain medical expenses would be covered one hundred per cent, provided false answers to underwriting questions, and accessed the applicant's confidential PIN code. See Petitioner's Exhibit 4 pgs. 9, 10, and 11.

9. On March 3, 2022, Respondent misrepresented an enrollment that occurred by telephone as an in-person enrollment, misrepresented the applicant's household income to quote a lower premium, misrepresented the waiting period for coverage, accessed the applicant's confidential PIN code, misrepresented the use of a medical underwriter, and misrepresented supplemental premium payments as payments for primary medical coverage. See Petitioner's Exhibit 4, pgs. 12 and 13.
10. On February 20, 2022, Respondent misrepresented an applicant's household income to quote a lower premium, misrepresented to the applicant the use of a medical underwriter to obtain lower premiums, improperly accessed the applicant's confidential PIN code, and misrepresented the scope of coverage. See Petitioner's Exhibit 4, pg. 17, 18, and 19.
11. On February 1, 2022, Respondent misrepresented an enrollment that occurred by telephone as an in-person enrollment, misrepresented the applicant's household income and weight to quote a lower premium, misrepresented that certain medical costs would be covered one hundred percent, and improperly accessed the applicant's confidential PIN code. See Petitioner's Exhibit 4, pg. 24.
12. On January 26, 2022, Respondent misrepresented an enrollment that occurred by telephone as an in-person enrollment, misrepresented that certain medical costs would be covered one hundred percent, and improperly accessed the applicant's confidential PIN code. See Petitioner's Exhibit 4, pgs. 28 and 29.
13. On January 20, 2022, Respondent misrepresented an enrollment that occurred by telephone as an in-person enrollment, misrepresented that certain medical costs would be covered one hundred percent, and improperly accessed the applicant's confidential PIN code, See Petitioner's Exhibit 4, pgs. 30 and 31.
14. On January 7, 2022, Respondent misrepresented an enrollment that occurred by telephone as an in-person enrollment, misrepresented that certain medical costs would be covered one hundred percent, misrepresented the use of a medical underwriter, and improperly accessed the applicant's confidential PIN code. See Petitioner's Exhibit 4, pgs. 32 and 33.
15. On January 6, 2022, Respondent misrepresented an enrollment that occurred by telephone as an in-person enrollment, misrepresented applicant's household income to quote a lower premium, misrepresented that certain medical costs would be covered one hundred percent, and improperly accessed the applicant's confidential PIN code. See Petitioner's Exhibit 4, pgs. 34, 35, and 36.
16. On January 3, 2022, Respondent misrepresented an enrollment that occurred by telephone as an in-person enrollment, improperly accessed the applicant's confidential

PIN code, and misrepresented the use of Surebridge as a medical underwriter. See Petitioner's Exhibit 4, pgs. 40 and 41.

17. On November 11, 2021, Respondent misrepresented an enrollment that occurred by telephone as an in-person enrollment, misrepresented applicant's weight, improperly accessed the applicant's confidential PIN code and misrepresented that payments for supplemental coverage were payments for primary insurance. See Petitioner's Exhibit 4, pgs. 42 and 43.
18. On July 23, 2021, Respondent misrepresented an enrollment that occurred by telephone as an in-person enrollment, misrepresented applicant's household income to quote a lower premium, improperly accessed applicant's confidential PIN code, and misrepresented charges for supplemental coverage as costs for primary coverage. See Petitioner's Exhibit 4, pgs. 44 and 45.
19. PIN codes were issued to applicants as part of the application process, so the applications could be reviewed for accuracy and signed by the applicant. Instead, Respondent fraudulently accessed the numerous applications and signed the applicant's names, bypassing their review. See testimony of Investigator Sutherland and Petitioner's Exhibit 4.
20. Respondent's acts as an insurance producer as set forth in Findings of Fact # 4 through 19 above reflect repeated fraudulent conduct by Respondent over a course of many months and evidence Respondent's unfitness to hold an Indiana producer's license.
21. On January 13, 2023, Respondent's non-resident producer license in the state of Louisiana was summarily suspended, and a cease-and-desist order issued, due to numerous consumer complaints against, and fraudulent conduct by Respondent. Respondent failed to inform the Indiana Department of Insurance of the disciplinary action against his license. See testimony of Investigator Harris and Petitioner's Exhibit 6.
22. On March 24, 2023, Respondent's non-resident insurance producer's license in Louisiana was revoked and a fine of \$5,000.00 was imposed due to Respondent's fraudulent actions in the submission of policy applications. Respondent failed to report this disciplinary action to the Indiana Department of Insurance. See testimony of Investigator Harris and Petitioner's Exhibit 7.
23. On April 6, 2023, Respondent's non-resident insurance producer's license in Utah was revoked. Respondent failed to report this disciplinary action to the Indiana Department of Insurance. See testimony of Investigator Harris and Petitioner's Exhibit 8.

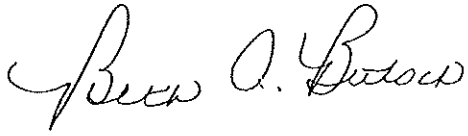
Conclusions of Law

1. DOI is responsible for licensing and imposing sanctions against licensed insurance producers who practice in the State of Indiana. See IC § 27-1-15.6.
2. OALP has jurisdiction over both the subject matter and the parties to this action and the Commissioner of DOI is the ultimate authority. Ind. Code § 27-1-15.6-12(d); Ind. Code §§ 4-15-10.5-12 and 13.
3. This hearing was held in compliance with the Administrative Orders and Procedures Act of the Indiana Code, Ind. Code § 4-21.5-3 and Ind. Code § 27-1-15.6-12(d).
4. The person requesting an agency action has the burden of persuasion and the burden of going forward. Petitioner requests that DOI permanently revoke Respondent's license, therefore Petitioner bears the burden of proof. Ind. Code § 4-21.5-3-14(c).
5. Proceedings held before an ALJ are *de novo*, which means the ALJ does not—and may not—defer to an agency's initial determination. Indiana Code § 4-21.5-3-14(d); *Ind. Dept. of Natural Res. v. United Refuse Co., Inc.*, 615 N.E.2d 100, 104 (Ind. 1993). Instead, in its role as factfinder, the ALJ must independently weigh the evidence in the record and may base findings and conclusions only upon that record. *Id.* At a minimum, the ALJ's findings "...must be based upon the kind of evidence that is substantial and reliable." Indiana Code § 4-21.5-3-27(d). "[S]ubstantial evidence is such relevant evidence as a reasonable mind might accept as adequate to support the decision..." *St. Charles Tower, Inc. v. Bd. of Zoning Appeals*, 873 N.E.2d 598, 601 (Ind. 2007).
6. Despite the *de novo* review, Indiana Code §27-1-15.6-12(d) limits the ALJ's review to a determination of whether the Commissioner's actions were reasonable.
7. The Commissioner of Insurance may permanently revoke an insurance producer's license for using fraudulent, coercive, or dishonest practices, or demonstrating incompetence, untrustworthiness, or financial irresponsibility in the conduct of business in Indiana or elsewhere. IC § 27-1-15.6-12(b)(8).
8. Petitioner has met its burden of proving that Respondent engaged in fraudulent, coercive, and dishonest practices and demonstrated untrustworthiness in the conduct of business in Indiana. See testimony of Investigators Sutherland and Harris and Petitioner's Exhibits 1 through 8.

Decision and Non-final Order

In consideration of the foregoing Findings of Fact and the Conclusions of Law, the ALJ now recommends that the Commissioner of Insurance permanently revoke Respondent Darnell Hayes' nonresident insurance producer license # 3677317.

So ordered on: February 26, 2024



Hon. Beth A. Butsch, Administrative Law Judge
Office of Administrative Law Proceedings

Appeal Rights

This order is not final. This matter is now before the ultimate authority, the Commissioner of the Department of Insurance who has the final authority over this matter and shall review this Nonfinal Order and issue a final order to all parties.

To preserve an objection to this order for judicial review, the Parties must object to the order in writing that: 1) Identifies the basis for the objection with reasonable particularity; and 2) Is filed with the ultimate authority, the Commissioner of the Department of Insurance, within fifteen (15) days from the date of this Order. Indiana Code 4-21.5-3-29. For provisions on how to compute days see Ind. Code § 4-21.5-3-2.

Any questions regarding this matter may now be directed to Dawn Bopp at dbopp@idoi.in.gov.

Distribution:

Petitioner, Indiana Department of Insurance, sent to counsel Joseph Bossinger via e-mail at JBossinger@idoi.in.gov

Respondent, Darnell Hayes sent via e-mail at darnellhayes4@gmail.com

Deshon Smith, Court Reporter, served via email at desmith2211@gmail.com

Ultimate Authority, Commissioner of DOI, sent via e-mail at DBopp@idoi.in.gov



FILED: January 4, 2024

**STATE OF INDIANA
OFFICE OF ADMINISTRATIVE LAW PROCEEDINGS**

Administrative Cause No.: DOI-2310-002649
Underlying/State Agency Action No.: 21938-AG23-0309-048

FINAL AGENCY AUTHORITY: Commissioner of the Department of Insurance

Indiana Department of Insurance
Petitioner,

v.

Darnell Hayes
Respondent.

NOTICE OF PROPOSED DEFAULT ORDER

An evidentiary hearing was held on this matter on January 4, 2024, at 9:00 am EST via video conferencing. Darnell Hayes, (Respondent) did not appear at the evidentiary hearing. The Indiana Department of Insurance (Petitioner) was represented by counsel Samantha Aldridge and Joseph Bossinger. Administrative Law Judge (ALJ) Beth A. Butsch waited until 9:15 am EST to begin the hearing, at which time, Petitioner requested a default order, which the ALJ took under advisement.

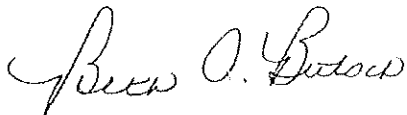
Petitioner represented that it had not heard from Respondent. The Office of Administrative Law Proceedings (OALP) served Petitioner with the Order Setting Evidentiary Hearing and has not received any returned mail or request to reschedule the evidentiary hearing from Petitioner. The Petitioner was notified in the Combined Notice of ALJ and Filing Procedures and Order Setting Evidentiary Hearing issued by the undersigned ALJ on October 13, 2023, that "a party who fails to attend or participate in a pre-hearing conference, hearing, or

other later stage of the proceeding, may be held in default or have a proceeding dismissed under Indiana Code § 4-21.5-3-24.”

Indiana Code 4-21.5-3-24(b) states that after the ALJ grants a request for a default "... the administrative law judge may adjourn the proceedings or conduct them without the participation of the party against whom a proposed default order was issued, having due regard for the interest of justice and the orderly and prompt conduct of the proceedings." The evidentiary hearing on January 4, 2024, was conducted without the participation of the Respondent.

The Petitioner will have seven (7) days to file a motion requesting that the case remain open and stating the grounds for the request. If the ALJ does not receive a motion from Petitioner within seven (7) days, the ALJ will issue a Findings of Fact, Conclusions of Law, and Proposed Default Order, recommending that the agency petition for the permanent revocation of Respondent’s license be granted.

SO ORDERED:



Beth A. Butsch, Administrative Law Judge
Office of Administrative Law Proceedings

Distributed to Parties:

Indiana Department of Insurance – Respondent, served by Counsel Samantha Aldridge and Joseph Bossinger by E-Mail at saldrige@idoi.in.gov; joebossinger@gmail.com
Darnell Hayes – Petitioner, served by mail at darnellhayes4@gmail.com

Additional Distribution to Non-Party:

Dawn Bopp – Non-Party, Administrator for the Indiana Department of Insurance served by E-Mail at DBopp@idoi.in.gov

Deshon Smith – Non-Party, Court reporter served at desmith2211@gmail.com

STATE OF INDIANA)
) SS:
COUNTY OF MARION)

BEFORE THE INDIANA
COMMISSIONER OF INSURANCE

CAUSE NO.: 21938-AG23-0309-048

IN THE MATTER OF:)
)
Darnell Hayes)
6 Kingswood Dr.)
Lewisberry, PA 17339)
)
Respondent.)
)
Type of Agency Action: Enforcement)
)
License Number: 3677317)



Filed October 12, 2023

STATEMENT OF CHARGES

The Enforcement Division of the Indiana Department of Insurance (“Department”), by counsel, Samantha Aldridge, pursuant to the Indiana Administrative Orders and Procedures Act, Indiana Code § 4-21.5 *et seq.*, files its Statement of Charges Darnell Hayes (“Respondent”), as follows:

FACTS

1. Darnell Hayes (“Respondent”) is a nonresident insurance producer, holding license #3677317 since June 2, 2021.
2. Respondent’s license is due for renewal on September 30, 2023.
3. Respondent was terminated for cause on or around October 14, 2022 by The Chesapeake Life Insurance Company who underwrites SureBridge supplemental insurance products and is represented by United Healthcare Insurance Company.
4. United Healthcare Insurance Company (“United Healthcare”) investigation substantiated that Respondent was responsible for enrolling individuals without their knowledge, misrepresenting supplemental plans/coverages as health insurance coverage, obtaining

applicants' confidential four (4) digit PIN codes and using the codes to sign applications without applicants' knowledge, and providing incorrect information on insurance applications to quote lower premiums to applicants.

5. United Healthcare's investigation identified twenty-two (22) live transfer calls of which thirteen (13) calls were completed enrollments.
 - a. Eleven (11) of the thirteen (13) telephone enrollments were submitted as in-person enrollments. Respondent asked each of the eleven (11) applicants to provide the confidential four (4) digit code they received via text, which goes against the United Healthcare's company policy. Respondent told two (2) of the applicants the code was for authentication purposes.
 - b. One (1) of the enrollments was submitted as a voice enrollment with a text signature. The applicant was told by Respondent, they were signing a payment authorization form.
 - c. One (1) enrollment was submitted as voice enrollment with an email signature. Applicant was told by Respondent he was sending an email to sign, but Respondent failed to tell the applicant it was an application for SureBridge insurance.
 - d. For all thirteen (13) enrollments, Respondent did not ask the required medical underwriting questions, did not advise the supplemental plans are separate, optional, and for an additional premium, did not advise coverage with two (2) carriers or breakdown the premium for each carrier, and did not advise the applicants of the twenty-dollar (\$20) SureBridge application fee.

- e. On three (3) of the thirteen (13) applications, Respondent documented the incorrect weight for an applicant.
 - f. On ten (10) of the enrollments, Respondent did not present or provide the applicant with correct benefits regarding SureBridge policies; On three (3) of the ten (10) enrollments, the incorrect benefits were provided by the Respondent after the applications had already been submitted.
 - g. On six (6) of the thirteen (13) enrollments, Respondent documented an incorrect household size and/or income for ACA plans.
 - h. On one (1) enrollment call, Respondent did not read any required disclosures or obtain a Scope of Appointment for presenting and enrolling the applicant into a MAPD plan.
 - i. One (1) applicant informed Respondent he did not have an email address. Respondent documented the email address duaneb@gmail.com on the application which is an active email address.
 - j. Three of the applicants filed a verbal complaint against Respondent, and one (1) of the three (3) applicants also filed a complaint with the Montana Department of Insurance.
6. United Healthcare reviewed Respondent's complete complaint history and noted that seven (7) complaints were filed in the one (1) year look back period. United Healthcare's investigation identified that five (5) of the complaints were due to inappropriate applications that were submitted by Respondent without the customer's knowledge or consent.

7. Respondent's nonresident producer license was suspended in the state of Louisiana on January 13, 2023, for demonstrating lack of fitness and misrepresenting insurance products. Respondent was also issued a Cease-and-Desist Order at the same time. Respondent did not report this action to the Department.
8. Respondent's nonresident producer license was revoked in the state of Louisiana on March 24, 2023, for demonstrating lack of fitness, misrepresenting insurance products, and unfair insurance practices. Respondent was also issued a monetary penalty of five thousand dollars (\$5,000). Respondent did not report this action to the Department.
9. Respondent's nonresident producer license was revoked in the state of Utah on April 6, 2023 for failure to respond to a reasonable written inquiry from the Utah commissioner, having Respondent's license suspended in Louisiana, and failure to report other state's actions. Respondent did not report this action to the Department.

CHARGES

COUNT I

10. Averments 1 through 7 are incorporated fully as if set forth herein.
11. Respondent's conduct, as alleged herein, constitutes using fraudulent, coercive, or dishonest practices, or demonstrating incompetence, untrustworthiness, or financial irresponsibility in the conduct of business in Indiana or elsewhere and is cause for disciplinary action in accordance with Indiana Code § 27-1-15.6-12(b)(8) to include sanctions, fine, restitution and revocation of license.

COUNT II

12. Averments 1 through 7 are incorporated fully as if set forth herein.
13. Respondent's conduct, as alleged herein, constitutes having an insurance producer license, or its equivalent, denied, suspended, or revoked in any other state, province, district, or territory and is cause for disciplinary action in accordance with Indiana Code § 27-1-15.6-12(b)(9) to include sanctions, fine, restitution and revocation of license.

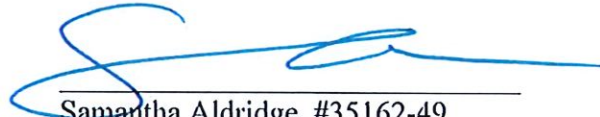
COUNT III

14. Averments 1 through 7 are incorporated fully as if set forth herein.
15. Indiana Code § 27-1-15.6-12(b)(2)(A), authorizes the Commissioner may revoke insurance producer's license for violating an insurance law.
16. Respondent's conduct, as alleged herein, constitutes not reporting to the Commissioner an administrative action taken against the producer in another jurisdiction or by another governmental agency in Indiana not more than thirty (30) days after the final disposition of the matter and is cause for disciplinary action in accordance with Indiana Code § 27-1-15.6-17(a) to include sanctions, fine, restitution and revocation of license by another governmental agency in Indiana not more than thirty (30) days after the final disposition of the matter.

WHEREFORE, the Enforcement Division of the Indiana Department of Insurance, by counsel, Samantha Aldridge, requests that the Commissioner set this matter for a hearing pursuant to Indiana Code § 4-21.5:

1. Issue an order permanently revoking Respondent's nonresident insurance producer license #3677317; and
2. Grant all other relief necessary and proper in the premises.

Respectfully submitted,




Samantha Aldridge, #35162-49
Attorney, Enforcement Division

Samantha Aldridge, Attorney
ATTN: Tina Harris, Sr. Investigator
Indiana Department of Insurance
Enforcement Division
311 West Washington Street, Suite 103
Indianapolis, Indiana 46204-2787
Telephone: (317) 233-0129
Facsimile: (317) 232-5251

CERTIFICATE OF SERVICE

I certify that a copy of the foregoing has been served upon the following Respondent by
United States first class mail, postage prepaid, this 12th day of October, 2023.

Darnell Hayes
6 Kingswood Dr.
Lewisberry, PA 17339



Samantha Aldridge #35162-49
Attorney, Enforcement Division