

INDIANA  
STATE ETHICS COMMISSION

DEC 11 2018



**ETHICS DISCLOSURE STATEMENT  
CONFLICTS OF INTEREST – DECISIONS AND VOTING**  
State Form 55860 (R / 10-15)  
OFFICE OF THE INSPECTOR GENERAL  
IC 4-2-6-9

**FILED**

In accordance with IC 4-2-6-9, you must file your disclosure with the State Ethics Commission no later than seven (7) days after the conduct that gives rise to the conflict. You must also include a copy of the notification provided to your agency appointing authority and ethics officer when filing this disclosure. This disclosure will be posted on the Inspector General's website.

Name (last) Green	Name (first) Kimberly	Name (middle) Ann
Name of office or agency Indiana Department of Insurance		Job title Accounts Receivable, Auditor, Travel Coordinator
Address of office (number and street) 311 W. Washington Street, Suite 103		City Indianapolis
Office telephone number ( 317 ) 234-5473		ZIP code 46204
Office e-mail address (required) kigreen@idoi.IN.gov		

Describe the conflict of interest:  
I am in communication with Protective Insurance Company regarding a possible job opportunity for a Regulatory Affairs Analyst. Protective Insurance Company is licensed and regulated by the Department of Insurance who I am employed with. I work in Office Operations as an Accounts Receivable Coordinator, Exam Coordinator, Travel Coordinator and Filing Fee Auditor. My daily activities do not require me to make licensing decisions on behalf of Protective Insurance. Additionally, Contracts with Protective and voting on issues related to Protective are not an aspect of my daily functions. As an Office Operations staff I am not privileged to information regarding Protective nor am I aware of confidential information which could benefit Protective Insurance Company. As part of my daily duties I utilize an insurance industry database called SERFF. This database allows all insurance companies to submit for Department approval rate, rule and form changes for insurance products sold to Indiana consumers. I do not analyze the insurance products submitted, but review for accuracy the filing fees submitted applying the respective state retaliatory laws. This reason is the interest Protective Insurance Company has reached out to me. Due to my familiarity with this database, I have the knowledge on how the system functions and would require less training than someone not familiar with the database. Confidential filings with the Department have a designated path to the Director of Compliance and the Department's legal team. My other duties require me to receive funds from Protective; however, most are electronically filed and processed by other individuals within the Department. I also invoice for Exam fees when an insurance company is examined by our financial division. This task is done quarterly and simply involves compiling amounts owed by the insurance companies and invoicing.

Describe the screen established by your ethics officer: *(Attach additional pages as needed.)*  
 The Department of Insurance Ethic's Officer, Claire Szpara, sent the attached email to Department heads in addition to Protective Insurance Company. The screen was established prior to a 30 minute conversation with a Talent Acquisition representative from Protective Insurance Company. This conversation consisted of me explaining my skill set and knowledge of the commercial insurance industry. Should they be interested, the next step would include the legal team, actuaries and underwriters the new Protective employee will work with in the SERFF database noted above.

**AFFIRMATION**

Your signature below affirms that your disclosures on this form are true, complete, and correct to the best of your knowledge and belief. In addition to this form, you have attached a copy of your written disclosure to your agency appointing authority and ethics officer.

Signature of state officer, employee or special state appointee <i>Kimberly Green</i>	Date signed (month, day, year) <i>12.11.18</i>
Printed full name of state officer, employee or special state appointee <i>Kimberly Green</i>	

**FOR ETHICS OFFICER USE ONLY**

Your signature below affirms that you have reviewed this disclosure form and that it is true, complete, and correct to the best of your knowledge and belief. You also attest that your agency has implemented the screen described above.

Signature of ethics officer <i>Claire Szpara</i>	Date signed (month, day, year) <i>12.11.18</i>
Printed full name of ethics officer <i>Claire Szpara</i>	

**Scruggs, Cynthia J.**

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**From:** Szpara, Claire  
**Sent:** Thursday, December 06, 2018 3:45 PM  
**To:** Robertson, Stephen W.; Beard, Amy (IDOI); Eft, Roy; Knable, Karl J; Williams Lambert, Holly; Bopp, Dawn; Lohman, Barbara; Groth, Jenifer  
**Cc:** Green, Kimberly; Szpara, Claire  
**Subject:** Ethical Screen

All:  
I am writing as IDOI's Ethics Officer to make you aware of an ethical screen that has recently been established. Kim Green has been in talks with a representative from Protective Insurance Company regarding a position. Protective Insurance Company is regulated by the IDOI. Therefore, to allow Kim to pursue this potential employment opportunity if she so chooses, she must be screened completely from any contact with Protective. Please refrain from discussing matters involving Protective with Kim. Going forward, any matters involving Protective audits should be addressed to Barb Lohman. This ethical screen is required to be established by IC 4-2-6-9(a)(4) and will remain in place until I notify you otherwise. If you have any questions, please contact me.



**Claire Szpara, APIR**  
Attorney  
Indiana Department of Insurance  
311 W. Washington Street, Suite 103  
Indianapolis, IN 46204-2787  
317-232-5312  
[cszpara@idoi.in.gov](mailto:cszpara@idoi.in.gov)

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## Scruggs, Cynthia J.

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**From:** Szpara, Claire  
**Sent:** Thursday, December 06, 2018 3:47 PM  
**To:** swignall@protectivespecialty.com  
**Cc:** Green, Kimberly  
**Subject:** Ethical Screen

Good afternoon:

I am writing as IDOI's Ethics Officer to make you aware of an ethical screen that has recently been established. Kim Green has been in talks with a representative from Protective Insurance Company regarding a position. Protective Insurance Company has a business relationship with the IDOI. Therefore, to allow Kim to pursue this potential employment opportunity if she so chooses, she must be screened completely from any contact with Protective, other than employment discussions.

This ethical screen is required to be established by IC 4-2-6-9(a)(4) and will remain in place until I notify you otherwise. If you have any questions, please contact me.



**Claire Szpara, APIR**  
Attorney  
Indiana Department of Insurance

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