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**BEFORE THE INSURANCE COMMISSIONER
OF THE STATE OF UTAH**

<p>COMPLAINANT:</p> <p>UTAH INSURANCE DEPARTMENT</p> <p>RESPONDENT:</p> <p>GLOBE LIFE AND ACCIDENT INSURANCE COMPANY 204 North Robinson, 3rd Floor Oklahoma City, OK 93102 COMPANY ID #1178</p>	<p>STIPULATION AND ORDER</p> <p>Docket No. 2013-012 LF</p> <p>Enf. Case No. 3260</p>
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STIPULATION

1. Respondent, Globe Life and Accident Insurance Company, is an insurer domiciled in the State of Nebraska and authorized to do business in the State of Utah, Utah Company Identification No. 1178.

2. Respondent stipulates with the Complainant, Utah Insurance Department, as follows:
 - a. If a hearing were held, witnesses called by the Complainant could offer and introduce evidence that would support the Findings of Fact herein;

 - b. Respondent admits the Findings of fact and Conclusions made therefrom;

- c. Respondent stipulates to the summary entry of the Order herein which shall be in lieu of other administrative proceedings by Complainant in this matter; and
- d. Respondent and Complainant have negotiated the terms of the Order entered herein and Respondent agrees to its entry and further agrees to be bound by all its terms.

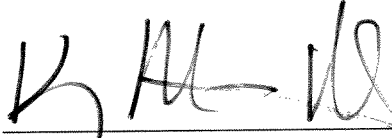
3. Respondent is aware of its right to a hearing at which it may be represented by counsel, present evidence, and cross-examine witnesses. Respondent has irrevocably waived its right to such hearing and to any appeal related thereto.

4. Respondent admits the jurisdiction of the State of Utah Insurance Commissioner as to all matters herein.

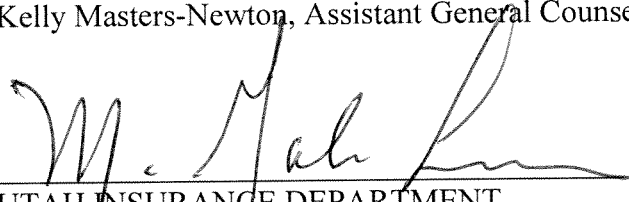
5. Respondent is acting herein free from any duress or coercion of any kind or nature, having been advised fully as to its rights set forth herein.

6. Respondent acknowledges that the issuance of this Order by the Commissioner is solely for purpose of disposition of the matter entitled herein.

DATED this 19th day of February, 2013.



GLOBE LIFE AND ACCIDENT INSURANCE
AGENCY
Kelly Masters-Newton, Assistant General Counsel



UTAH INSURANCE DEPARTMENT
M. Gale Lemmon, Assistant Attorney General

Based upon the foregoing Stipulation and information in the file, the Presiding Officer makes the following Findings of Fact:

FINDINGS OF FACT

1. On August 11, 2010, Respondent, Globe Life and Accident Insurance Company, filed form #GTLADR10, an Accidental Death Benefit Rider, with Utah's electronic rate and form filing system. This form provided that a notice of loss be presented in writing within ninety (90) days of the date of an accident.

2. The form filed by Respondent did not comply with Insurance Department Administrative Rule R590-126-5(10)(a) which provides that accidental death and dismemberment benefits shall be payable if the loss occurs within 180 days from the date of the accident irrespective of total disability.

3. On August 16, 2010 the Department notified Respondent that its form was non-compliant with Utah law and requested that the form be corrected to provide the correct time limit of 180 days. Respondent replied to the Department on August 17, 2010 stating that the language had been changed and the form was now compliant.

4. On June 29, 2012, the Department received a copy of a policy on July 19, 2011, (eleven months after the form filing correction), which contained the non-compliant language. Respondent was again contacted by the Department and responded that a programming error caused the correct language not to be incorporated into the rider. Respondent stated that approximately 1,000 non-compliant riders were issued between August 17, 2010 and June 29, 2012.

5. On January 3, 2013 after completing an in house audit, Respondent stated that no

claims had been denied due to the 90 day language.

6. On January 23, 2013, Respondent agreed to an administrative forfeiture of \$10,000.

Based upon the foregoing Stipulation and Findings of Fact, the Presiding Officer enters the following Conclusions of Law:

CONCLUSIONS OF LAW

1. Utah Code Ann. § 31A-2-202 requires that all reports and replies submitted to the Department contain correct and accurate information. Respondent's August 17, 2010, response to the Department stating that the language of the rider had been corrected to the 180 day period was not accurate.

2. Respondent issued of approximately 1,000 policy riders which did not comply with Utah Code Admin. P. R590-1256-5 after August 17, 2010, when the correct language should have been incorporated.

3. An administrative forfeiture in the amount of \$10,000 is appropriate in this matter.

Based upon the foregoing Stipulation, Findings of Fact and Conclusions of Law, the Presiding Officer herewith enters the following Order:

ORDER

IT IS HEREBY ORDERED:

Respondent Globe Life and Accident Insurance Company is assessed an administrative forfeiture in the amount of \$10,000 to be paid to the Department within 30 days of issuance of this Order.

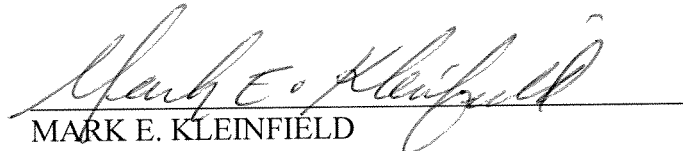
NOTIFICATION

You are hereby notified that a failure to obey an Order of the Commissioner may subject you to further penalties, including forfeiture of up to \$5,000 per violation and the suspension or revocation of your license and the filing of an action in district court, which may impose forfeitures of up to \$10,000 per day for continued violation.

You are further notified that other jurisdictions in which you may be licensed may require that you report this action to them.

DATED this 26th day of February, 2013.

TODD E. KISER
Insurance Commissioner



MARK E. KLEINFELD
Administrative Law Judge
Utah Insurance Department
State Office Building, Room 3110
Salt Lake City, Utah 84114
Telephone: (801) 538-3800

CERTIFICATE OF MAILING

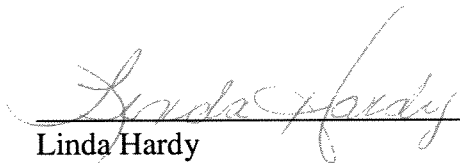
I do hereby certify that on this date I mailed, by regular mail postage prepaid, a true and correct copy of the attached:

STIPULATION
&
ORDER

To the following:

Globe Life and Accident Insurance Company
Attn: Kelly Masters-Newton
204 North, 3rd Floor
Oklahoma City, OK 93102

DATED this 26th day February, 2013



Linda Hardy
Market Conduct
Utah Department of Insurance
State Office Building, Room 3110
Salt Lake City, UT 84114-6901
801-538-3860

**UTAH
Invoice**

Printed Date: February 21, 2013

Invoice Date: February 21, 2013
Balance Due: \$0.00
Due Date: March 28, 2013
Invoice ID: 624731

GLOBE LIFE ACCIDENT INSURANCE COMPANY
3700 S STONEBRIDGE DR
MCKINNEY TX 75070

Item Description	Amount
Monetary Penalty Company	\$10,000.00
Original Amount Due	\$10,000.00
Payments Received	
2/21/2013 Check	\$10,000.00
Balance Due	\$0.00

**UTAH
Invoice**

Printed Date: February 21, 2013

Invoice Date: February 21, 2013
Balance Due: \$0.00
Due Date: March 28, 2013
Invoice ID: 624731

Make checks payable to: Utah Insurance Department

Send payment to:

Utah Insurance Department
3110 State Office Building
Salt Lake City, UT 84114-6901