

STATE OF UTAH INSURANCE DEPARTMENT REPORT OF FINANCIAL EXAMINATION

of

EDUCATORS MUTUAL INSURANCE ASSOCIATION

of

Murray, Utah

as of

December 31, 2022



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November 13, 2023

Honorable Jonathan T. Pike, Commissioner Utah Insurance Department 4315 S 2700 W, Suite 2300 Taylorsville, Utah 84129

Commissioner:

Pursuant to your instructions and in compliance with Utah Code § 31A-2-204, an examination, as of December 31, 2022, has been made of the financial condition and business affairs of:

EDUCATORS MUTUAL INSURANCE ASSOCIATION Murray, Utah

hereinafter referred to in this report as "the Organization", and the following report of examination is respectfully submitted.

SCOPE OF EXAMINATION

Period Covered by Examination

Representatives of the Utah Insurance Department (Department) have performed a full scope examination of the Organization, which covers the period of January 1, 2019, through December 31, 2022, including any material transactions and/or events occurring subsequent to the examination date and noted during the course of the examination.

Examination Procedures Employed

We conducted our examination in accordance with the *National Association of Insurance Commissioners Financial Condition Examiners Handbook* (Handbook). The Handbook requires that we plan and perform the examination to evaluate the financial condition, assess corporate governance, identify current and prospective risks of the Organization, and evaluate system controls and procedures used to mitigate those risks. An examination also includes identifying and evaluating significant risks that could cause an insurer's surplus to be materially misstated both currently and prospectively.

All accounts and activities of the Organization were considered in accordance with the risk-focused examination process. This may include assessing significant estimates made by

management and evaluating management's compliance with Statutory Accounting Principles. The examination, however, does not attest to the fair presentation of the financial statements included herein. If during the course of the examination an adjustment is identified, the impact of such adjustment will be documented separately following the Financial Statements section of this report.

This examination report includes significant findings of fact, as mentioned in Utah Code § 31A-2-204 and general information about the Organization and its financial condition. There may be other items identified during the examination that, due to their nature (e.g., subjective conclusions, proprietary information, etc.), are not included within the examination report but separately communicated to other insurance regulators and/or the Organization.

SUMMARY OF SIGNIFICANT FINDINGS AND RECOMMENDATIONS

During a substantive testing of claims, examiner reviewed 80 samples, 60 of which are high-dollar claims (greater than \$50,000). Out of the 80 claims, 41 claims took longer than 30 days to be paid. The examiner inquired if there was appropriate proof of communication with the claimants regarding the payment delay. After reviewing the Organization's responses, 21 claims (18 high-dollar claims) did not have any evidence of any communication being made with the claimants.

According to Utah Code § 31A-26-301.6, within 30 days of the day on which the insurer receives a written claim, if payment or denial cannot be determined, the insurer must inform the claimant of the circumstance requiring the extension of time and the date by which the insurer expects to pay the claim or deny the claim with a written explanation for the denial.

Recommendation:

We recommend the Organization follow its Claims Policies and Procedures to ensure that all claims are paid in timely in accordance with the requirement of Utah Code § 31A-26-301.6.

Company Response:

Overall, we believe that in the vast majority of cases, the Company is following its claims policies and procedures to ensure that claims are paid in accordance with Utah Code § 31A-26-301.6 and communication is made to the claimant within 30 days of receiving the written claim. The claims testing targeted large dollar claims which require more investigation and multiple reviews before they are released. Due to staff turnover, we had an unfilled position for one of our large dollars claim examiners which resulted in lower turnaround time temporarily for larger claims. We have since filled the open position. We are working on hiring more qualified examiners to handle large dollar claims. We have also reminded and reemphasized to the existing large dollar examiners, the process to send letters if the claim payment/EOB will not be printed within 30 days of receipt of the claim. Supervisors handling the 2nd level review are also more aware now and we are planning

to add to our Quality Assurance team to handle the 2nd level reviews, which will reduce the turnaround time.

ORGANIZATION HISTORY

General

The Organization is a non-profit mutual benefit association created by the Utah Education Association in order to provide insurance protection to educators. The original name of the Organization was Utah Teachers Welfare Association. The name was changed to its current name on October 7, 1965.

The Organization is governed by the Board of Trustees, which made up of Members and industry experts who are committed to the mission and success of the Organization. The Organization is the parent company of Educators Health Plan Life, Accident and Health, Inc. (EHPL). There was no amendment to the Articles of Incorporation during this examination period. There were two amendments to the Bylaws on March 27, 2019, and June 24, 2021.

Mergers and Acquisitions

On September 1, 2021, the Organization's subsidiary, EHPL, completed the acquisition of Total Dental Administrators (TDA), and all of its subsidiaries. The acquisition brings together two organizations focused on providing affordable high-quality healthcare benefits. Total Dental Administrator Utah, a Utah domiciled insurance subsidiary of TDA is a licensed insurance company that offers health maintenance organization (DHMO) and preferred provider organization (PPO) dental insurance plans.

Dividends and Capital Contributions

No policyholder dividends were declared or paid during the examination period. In 2020, the Organization made capital contributions to EHPL in the amount of \$263,415, and \$1,960,857.

MANAGEMENT & CONTROL INCLUDING CORPORATE GOVERNANCE

Board of Directors or Trustees

The Organization's Bylaws require the number of the Directors/Trustees to be no less than five (5), nor more than fifteen (15). Currently, five (5) Directors/Trustees are elected by the Members and four (4) Directors/Trustees are appointed by the Board of Trustees.

The following persons served as Directors/Trustees of the Organization as of December 31, 2022:

Name	Principal Occupation
Richard Gottfredson Sanpete, UT	Business Administrator (Retired) South Sanpete School District
Corey Callahan Salt Lake City, UT	Manager Employee Benefits Utah Valley University
Michael Francis Orem, UT	Retired CPA
Wendell Bennett Kaysville, UT	CEO Horizon Utah
Clint Halverson Salt Lake City, UT	Chief People Officer Becklar LLC
Scott Thornton Centerville, UT	Retired Chief Actuary
Bryan Sprague West Valley City, UT	Executive Director (Retired) Utah School Employees Association
Randy Smart Sandy, UT	Attorney (Retired) Smart, Schofield, Shorter, and Lunceford
Jennifer Boehme South Jordan, UT	Executive Director Utah Education Association

Committees

The Board's active committees as of December 31, 2022, were as follows:

Executive Committee	Audit Committee
Michael Francis, Chair	Clint Halverson, Chair
Corey Callahan	Michael Francis
Steve Morrison	Page Bennet
Scott Thornton	
Paul Gottfredson	
Clint Halverson	

Finance & Risk Management Committee	Marketing & Legislative Committee
Scott Thornton, Chair	Paul Gottfredson, Chair
Corey Callahan	Randy Smart
Bryan Sprague	Jennifer Boehme

Officers

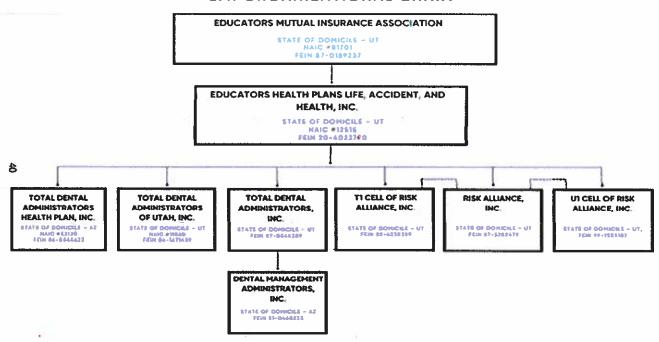
The following persons served as officers of the Organization as of December 31, 2022:

Name	Title
Steven Morrison	CEO/President
David Lowther	COO/Secretary
Michael Greenhalgh	CFO/Treasurer
Joseph Campbell	VP, Chief Information Officer
Cynthia Dunnavant	VP, Sales and Marketing
Tiffany Bermingham	VP, Enrollment
Brandon Smart	VP, Chief Compliance Officer / Chief Legal Counsel
David Wood	VP, Chief Actuary

Holding Organization

The Organization is a member of a holding company as defined in Utah Code §31A-16. The following all chart depicts the holding company as of December 31, 2022:

EMI ORGANIZATIONAL CHART



Transactions and Agreements with Affiliates

The following agreements were in place as of the date of this examination report:

Management Agreement

The Organization entered into a Management Agreement with EHPL, effective February 1, 2016, to share the general administrative functions and expenses. The agreement outlines each party's desire to provide certain services set forth in the contract. The parties agree to share in the responsibility of the general administration functions such as financial reporting, accounting, enrollment, billing, and claim administration. Fees paid were based on membership, premiums, enrollment, and product mix. The agreement was amended on November 1, 2021, to include TDA.

Reinsurance Agreement (Terminated)

Effective January 1, 2018, the Organization entered into a reinsurance agreement with EHPL to assume all of its stop loss business in Arizona and Utah. This agreement was terminated on September 30, 2020.

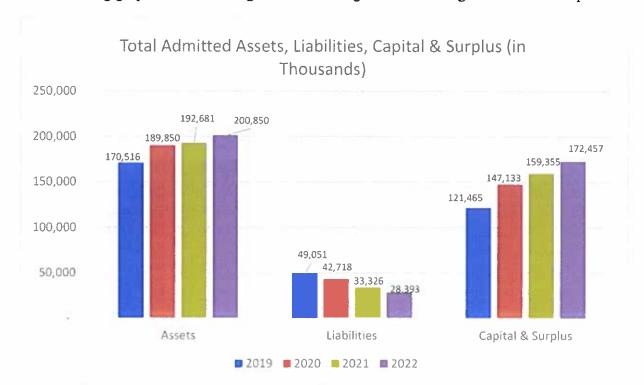
TERRITORY AND PLAN OF OPERATIONS

The Organization is licensed in the State of Utah to write certain life, medical, and disability insurance on behalf of its membership which is comprised primarily of individuals performing services for educational institutions, boards of education, the State of Utah, and other agencies or political subdivisions engaged in educational services. As of the examination date, the Organization was also licensed in Idaho, though the majority of business was written in Utah. The majority of the premiums were from stop loss coverage to self-funded groups with whom the Organization has entered into administrative service contracts (ASC). The Organization also writes individual dental and health policies (Medicare Supplement). As of December 31, 2019, Medicare part D products were no longer offered by the Organization.

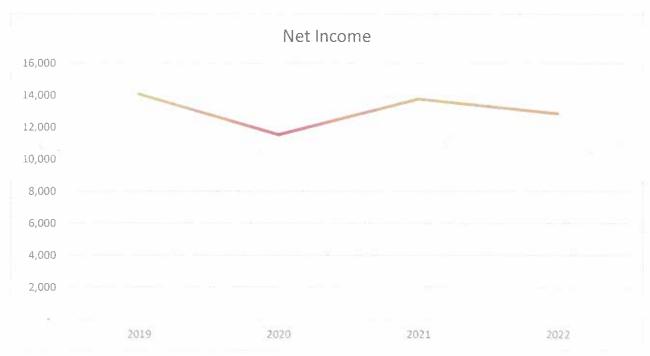
GROWTH OF ORGANIZATION

During the examination period, the Organization experienced steady growth with its assets and capital & surplus, whereas its liabilities have decreased steadily.

The following graphs illustrate the growth of the Organization during the examination period:



Sources: 2019 – 2022 Annual Statements



Sources: 2019 – 2022 Annual Statements

REINSURANCE

Assumed

As of the date of this examination, the Organization did not have any assumed reinsurance.

Ceded

The Company entered into a Medical Excess of Loss Reinsurance contract with Axis Insurance Company, effective September 1, 2020. See the following for coverage detail:

For Policies outside of the Aetna Network

100% of an unlimited amount of Ultimate Net Loss for each Covered Person, in excess of the Company's retention of \$600,000, inclusive of any applicable employer self-insured retention.

For Policies within the Aetna Network

Layer 1: 100% of \$2,150,000 of Ultimate Net Loss for each Covered Person, in excess of the Company's retention of \$600,000, inclusive of any applicable employer self-insured retention.

Layer 2: 100% of an unlimited amount of the Ultimate Net Loss for each Covered Person, in excess of \$3,000,000 of Ultimate Net Loss for each Covered Person.

In addition, the Company will retain a minimum of \$250,000 in excess of any applicable employer self-insured retention for each Covered Person.

Notwithstanding the retentions and limits stated above, the Company will also retain \$8 per employee per month which shall accrue to an Aggregating Specific Deductible.

FINANCIAL STATEMENTS

The following financial statements are based on the statutory financial statements filed by the Organization with the Department and present the financial condition of the Organization for the period ending December 31, 2022. The accompanying COMMENTS ON FINANCIAL STATEMENTS (if any) reflect any examination adjustments to the amounts reported in the annual statement and should be considered an integral part of the financial statements.

EDUCATORS MUTUAL INSURANCE ASSOCIATION BALANCE SHEET

as of December 31, 2022

ASSETS

	Net Admitted Assets
Bonds	\$82,127,675
Common stocks	62,309,583
Mortgage loans on real estate	2,319,373
Real estate	21,901,175
Cash, cash equivalents and short-term investments	19,345,605
Other invested assets	152,923
Investment income due and accrued	2,183,874
Uncollected premiums and agents' balances in the course of collection	1,950,978
Amounts recoverable from reinsurers	15,102
Amounts receivable relating to uninsured plans	4,427,720
Current federal and foreign income tax recoverable and interest thereon	6,525
Electronic data processing equipment and software	141,431
Receivables from parent, subsidiaries and affiliates	3,949,459
Health care and other amounts receivable	18,209
Total Assets	\$200,849,633

EDUCATORS MUTUAL INSURANCE ASSOCIATION BALANCE SHEET (Continued)

as of December 31, 2022

LIABILITIES, SURPLUS, AND OTHER FUNDS

	Current Year
Claims unpaid	\$ 6,627,560
Unpaid claims adjustment expenses	222,333
Aggregate health policy reserves	5,622,950
Aggregate life policy reserves	132,821
Aggregate health claim reserves	155,278
Premiums received in advance	34,209
General expenses due or accrued	5,854,200
Ceded reinsurance premiums payable	76,363
Amounts withheld or retained for the account o	f others 1,382,383
Remittances and items not allocated	719,849
Liability for amounts held under uninsured plar	4,710,249
Aggregate write-ins for other liabilities	2,854,784
Total Liabilities	\$28,392,979
Unassigned funds (surplus)	\$172,456,654
Total Capital & Surplus	\$172,456,654
Total Liabilities, Capital & Surplus	\$200,849,633

EDUCATORS MUTUAL INSURANCE ASSOCIATION STATEMENT OF INCOME

for the Year-Ended December 31, 2022

Member Months	Current Year 728,738
Net premium income	\$31,276,416
Aggregate write-ins for other health care related revenues	298,294
Aggregate write-ins for other non-health revenues	116,451
Total revenues:	31,691,161
Hospital/medical benefits	6,391,772
Other professional services	20,754,525
Outside referrals	817,387
Emergency room and out-of-area	249,784
Prescription drugs	48,993
Subtotal hospital and medical expenses:	28,262,461
Net reinsurance recoveries	2,212,675
Total hospital and medical	26,049,786
Non-health claims (net)	32,097
Claims adjustment expenses, including cost containment expenses	(2,004,900)
General administrative expenses	(2,998,581)
Increase in reserves for life and accident and health contracts	298,243
Total underwriting deductions	21,376,645
Net underwriting gain or (loss)	10,314,516
Net investment income earned	2,524,675
Net realized capital gains (losses) less capital gains tax	55,899
Net investment gains (losses)	2,580,574
Net income or (loss) after capital gains tax and before all federal income taxes	12,895,090
Federal and foreign income taxes incurred	41,007
Net income (loss)	\$12,854,083

EDUCATORS MUTUAL INSURANCE ASSOCIATION RECONCILIATION OF CAPITAL AND SURPLUS

2019 through 2022

	2019	2020	2021	2022
Capital and surplus, December 31, prior year	\$99,740,708	\$121,465,090	\$147,132,691	\$159,354,804
Net income	\$14,063,234	11,526,188	13,757,293	12,854,083
Change in net unrealized capital gains (losses)	7,796,777	13,402,531	(1,890,909)	(474,602)
Change in nonadmitted assets	96,852	(34,743)	20,941	788,300
Change in unauthorized and certified reinsurance	(381,124)	381,124	0	O to the state of
Aggregate write-ins for gains and losses in surplus	148,643	392,501	334,787	(65,931)
Net change in capital and surplus for the year	21,724,382	25,667,601	12,222,112	13,101,850
Capital and surplus, December 31, current year	\$121,465,090	\$147,132,691	\$159,354,804	\$172,456,654

ANALYSIS OF CHANGES IN FINANCIAL STATEMENTS

No adjustments were made to surplus as of December 31, 2022 as a result of the examination.

COMMENTS ON FINANCIAL STATEMENT ITEMS

There are no comments on financial statement items as of December 31, 2022, as a result of the examination.

SUBSEQUENT EVENTS

No material subsequent events were identified during the examination fieldwork.

ACKNOWLEDGEMENT

Becky Sheppard FSA, MAAA, Actuarial Manager, and Kenneth Mwangi, Actuarial Senior Associate, both of Risk & Regulatory Consulting, LLC, performed the actuarial review of the examination. Tracy Gates, CISA, CFE, CPA, and Lori Shores, CISA, both of Highland Clark, LLC, performed the information systems review. Malis Rasmussen, MSA, CFE, SPIR, Chief Financial Examiner, Utah Insurance Department, supervised the examination. They join the undersigned in acknowledging the assistance and cooperation extended during the course of the examination by officers and representatives of the Organization.

Respectfully submitted,

Madison Browne, PIR

Examiner-in-Charge

Utah Insurance Department

Madison Browne