

REPORT OF EXAMINATION
OF THE
CRUSADER INSURANCE COMPANY
AS OF
DECEMBER 31, 2020

Insurance Commissioner

A handwritten signature in blue ink, appearing to read "P. DeLoe", is positioned to the right of the "Insurance Commissioner" text.

FILED on June 13, 2022

TABLE OF CONTENTS

	<u>PAGE</u>
SCOPE OF EXAMINATION	1
SUMMARY OF SIGNIFICANT FINDINGS	2
COMPANY HISTORY:	3
Dividends	3
MANAGEMENT AND CONTROL:	4
Management Agreements	5
TERRITORY AND PLAN OF OPERATION	7
LOSSES EXPERIENCE	7
ACCOUNTS AND RECORDS:	9
Corporate Records	9
Vehicle Fraud Assessment Filing	9
REINSURANCE:	10
Assumed	10
Ceded	11
FINANCIAL STATEMENTS:	12
Statement of Financial Condition as of December 31, 2020	13
Underwriting and Investment Exhibit for the Year Ended December 31, 2020	14
Reconciliation of Surplus as Regards Policyholders from December 31, 2015 through December 31, 2020	15
Analysis of Changes to Surplus as of December 31, 2020	16
COMMENTS ON FINANCIAL STATEMENT ITEMS:	16
Premiums and agents' balances in course of collection	16
Losses and Loss Adjustment Expenses	16
SUBSEQUENT EVENTS	17
SUMMARY OF COMMENTS AND RECOMMENDATIONS:	17
Current Report of Examination	17
Previous Report of Examination	18
ACKNOWLEDGMENT	19

Los Angeles, California
May 12, 2022

Honorable Ricardo Lara
Insurance Commissioner
California Department of Insurance
Sacramento, California

Dear Commissioner:

Pursuant to your instructions, an examination was made of the

CRUSADER INSURANCE COMPANY

(hereinafter also referred to as the Company). Its home office is located at 26050 Mureau Road, Calabasas, California 91302.

SCOPE OF EXAMINATION

We have performed our multi-state examination of the Company. The previous examination of the Company was as of December 31, 2015. This examination covered the period from January 1, 2016 through December 31, 2020.

The examination was conducted in accordance with the National Association of Insurance Commissioners *Financial Condition Examiners Handbook (Handbook)*. The Handbook requires the planning and performance of the examination to evaluate the Company's financial condition, assess corporate governance, identify current and prospective risks, 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 Company 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.

This examination report includes significant findings of fact and general information about the Company and its financial condition. There might be other items identified during the examination that, due to their nature (e.g., subjective conclusions, proprietary information, etc.), were not included within the examination report but separately communicated to other regulators and/or the Company.

SUMMARY OF SIGNIFICANT FINDINGS

California Insurance Code (CIC) Section 1733 states, "all funds received by any person acting as licensee, as premium or return premium on or under any policy of insurance or undertaking of bail, are received and held by that person in that person's fiduciary capacity. A person who diverts or appropriates those fiduciary funds to that person's own use is guilty of theft and punishable for theft as provided by law." Pursuant to the terms of the General Agency Agreement (agreement) as described in the "Management and Control" section, Unifax Insurance Systems, Inc. (Unifax) holds the premium in a fiduciary capacity in financial institutions and remit these funds due to the Company on a monthly basis. A review of the premium trust account balance held by Unifax and remittance of the premium collected indicated that a portion of the premium collected was diverted to the parent, Unico American Corporation (Unico), for operational needs. It also showed that premiums collected were not remitted to the Company within the required period. The diverting of the premium trust funds is in violation with CIC Section 1733 and the terms of the executed agreement. The premium trust account balance was deficient by approximately \$3.3 million and \$3.1 million as of December 31, 2020, and September 30, 2021, respectively.

As the result of continued significant losses, the Company Action Level event and required RBC corrective action plan described in the "Losses Experience" section and the above mentioned premium trust deficiency, the Company voluntarily entered into an Administration Supervision Agreement with the California Department of Insurance (CDI)

on September 10, 2021, at the request of the CDI. Under the agreed terms of the agreement, CDI appointed a Special Examiner to provide supervision and regulatory oversight of the Company's operation and imposed limitations on the Company's ability to take certain actions without the prior written consent from the Specialist Examiner. These actions include but are not limited to making dividend payments, material changes in its ordinary course of operations, and providing financial support to the parent.

On January 1, 2022, in an effort to resolve the premium trust deficiency and as recommended by the Special Examiner, the parent, Unico American Corporation (Unico), contributed the computer system currently used for the operation and business of the Company to Unifax Insurance Systems, Inc. (Unifax). As of January 1, 2022, the net book value of the computer system was \$1,991,956. On the same date, Unifax transferred the ownership of the computer system to the Company, and the value of the computer system was applied to and credited to the premium trust deficiency. The value of the computer system is considered non-admitted assets under Statements of Statutory Accounting Principles No 16. As of March 31, 2022, the remaining premium trust deficiency is \$177,751. It is recommended that the remaining trust deficiency be remediated to comply with CIC 1733.

COMPANY HISTORY

The Company was incorporated under the laws of California in June 1976 and commenced business in January 1985.

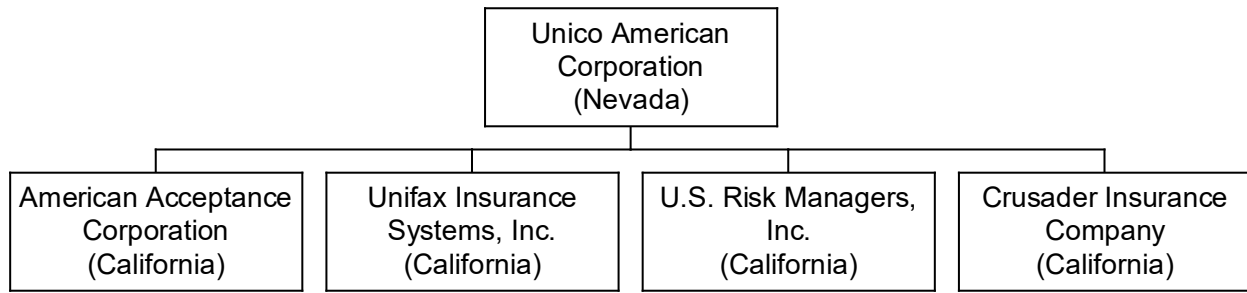
Dividends

The Company paid the following ordinary dividends to its parent Unico American Corporation during the examination period:

Year	Type	Amount
2016	Cash	\$2,000,000
2017	Cash	\$3,000,000
2019	Cash	\$2,000,000
2020	Cash	\$4,000,000

MANAGEMENT AND CONTROL

The Company is a wholly-owned subsidiary of Unico American Corporation (Unico), an insurance holding company system. Following is an abridged organizational chart. All ownership is 100%.



The three members of the board of directors, who are elected annually, manage the business and affairs of the Company. Following are members of the board and principal officers of the Company serving at December 31, 2020:

Directors

Name and Location

Michael Budnitsky
Calabasas, California

Erwin Cheldin
Pacific Palisades, California

Ronald A. Closser ^(a)
El Dorado Hills, California

Principal Business Affiliation

Chief Financial Officer and Senior Vice
President
Crusader Insurance Company

Majority Shareholder
Unico American Corporation

President and Chief Executive Officer
Unico American Corporation

Principal Officers

<u>Name</u>	<u>Title</u>
Ronald Closser ^(a)	President and Chief Executive Officer
Michael Budnitsky ^(b)	Senior Vice President, Chief Financial Officer, Treasurer, and Secretary
Adam LaPierre	Vice President and Chief Claims Officer
Renai J. Effarah ^(c)	Vice President and Controller

The following changes in management occurred subsequent to the examination date:

- (a) Ronald Closser resigned as officer and director of the Company effective February 10, 2021, and February 17, 2021, respectively.
- (b) Michael Budnitsky was appointed as Chief Executive Officer and President effective February 11, 2021, and terminated as the officer and director of the Company, effective December 17, 2021. Steven L. Shea was elected as the President and Chief Executive Officer.
- (c) Renai J. Effarah was appointed as the Chief Financial Officer on February 11, 2021, and resigned, effective October 15, 2021.

Management Agreements

General Agency Agreement: Effective March 1, 1996, the Company entered into a General Agency Agreement with its affiliate, Unifax Insurance Systems, Inc. (Unifax). Unifax provides production, underwriting, accounting, data processing, administration, and other management services to the Company. The Company pays Unifax a commission of 30% of direct premiums written. In addition to the service provided under the terms of the agreement, the premium collected while Unifax serves as general agent for the Company shall be segregated, held apart by, and chargeable to Unifax as trustee for and on behalf of the Company in conformance with the California Insurance Code (CIC) Section 1733, 1734, 1735, 1735.5, and 1736. All premium collected shall remit the balance within forty-five days following the end of the month. The original agreement was effective prior to the approval requirement of the Holding Company Act. The agreement was amended, effective September 1, 2002, to reflect the change to the commission rate from 30% to 27.5%. The California Department of Insurance (CDI) approved the amended agreement on June 16, 2009. Payments made to Unifax for the years 2016, 2017, 2018, 2019, and 2020 were \$10,617,680, \$10,530,419, \$8,898,586, \$9,850,264, and

\$10,115,792, respectively.

Intercompany Cost Allocation Agreement: Effective December 17, 2007, the Company and its parent, Unico American Corporation (Unico), are parties to an Intercompany Cost Allocation Agreement. Under the terms of the agreement, the Company reimburses Unico for operating expenses primarily related to the claims department, which includes salaries and related employee benefits, profit sharing, rent, and other expenses. The CDI approved the agreement on June 5, 2009. The agreement was later amended to reflect that on October 15, 2015, the Company ended the rent sharing service under the agreement with Unico. Payments made to Unico for the years 2016, 2017, 2018, 2019, and 2020 were \$1,248,508, \$1,623,526, \$1,899,734, \$2,236,138, and \$637,169, respectively.

Inter-company Federal Income Tax Allocation Agreement: Effective December 17, 2007, the Company and its affiliates entered into an Inter-Company Federal Income Tax Allocation Agreement with its parent, Unico. Allocation of taxes is based upon separate return calculations. Intercompany tax allocations are settled within 30 days after filing the consolidated income tax return. The federal income taxes paid/recovered by the Company during 2016, 2017, 2018, 2019, and 2020 were \$29,079, \$0, \$(387,870), \$(372,375), and \$0, respectively. The CDI approved this agreement on June 5, 2009.

Lease Agreement: On September 26, 2013, the Company purchased an office building located at 26050 Mureau Road, Calabasas, California. The Company leased space vacated by a previous tenant in the Calabasas building to Unico under a lease, effective October 9, 2015. Unico occupies approximately 29,100 square feet at \$1.95 per foot for a total monthly base rent of \$56,745. The term of the lease is four years, eleven months, and twenty-two days. The lease has an option to extend for an additional five years. The rent and lease terms were consistent with the Calabasas office building rental market. The rent payments made by Unico to the Company during 2016, 2017, 2018, 2019, and 2020 were \$677,732, \$704,875, \$726,021, \$747,802, and \$770,236, respectively. The CDI approved this agreement on February 8, 2016. The agreement was terminated when the office building was sold on February 12, 2021.

Claims Management Agreement: On March 12, 2020, the Company entered into a Claims Management Agreement with U.S. Risk Managers, Inc. (U.S. Risk). The agreement grants authority to U.S Risk to manage, settle, and pay claims within the policy limits on behalf of the Company. As compensation, the Company shall pay U.S. Risk a service fee of 6% of earned premiums, direct or assumed. Payment made to U.S. Risk in 2020 was \$1,653,069. The CDI approved this agreement on April 23, 2020.

TERRITORY AND PLAN OF OPERATION

As of December 31, 2020, the Company was licensed to transact multiple property and casualty insurance lines of business in Arizona, California, Nevada, Oregon, and Washington. In 2020, all but 0.01%, or approximately \$36 million of the direct business, was written in the state of California.

The principal line of business written is commercial multiple perils, which accounted for approximately 99.5% of the Company's total premiums written in 2020. Classes of business include apartments, commercial buildings, auto-body shops, auto dealers, towing operators, bars, and restaurants. Business is produced primarily through the Company's affiliated general agent, Unifax Insurance Systems, Inc., which works with independent agents and brokers.

On September 24, 2021, and effective immediately, the board of directors voted to cease writing new and renewal business, other than the renewals required by the regulations. The Company will be operating on a run-off basis until all inforce business is exhausted. As of March 31, 2022, the Company has 1,917 policies inforce.

LOSSES EXPERIENCE

The Company reported incurred loss and loss expense, underwriting losses, and net losses for all years under the examination as follows:

Year	Incurred loss and loss expense	Net underwriting losses	Net loss
2016	\$ 22,706,878	\$ 1,525,210	\$ 207,503
2017	30,447,824	8,196,148	6,207,351
2018	23,515,906	2,761,492	453,966
2019	22,533,442	4,549,464	2,190,703
2020	34,600,236	15,143,447	12,862,588

The Company has experienced difficulty in estimating the loss and loss adjustment expenses reserves contributed by the adverse development of insured events. In 2020, the Company reevaluated the assumptions used in the process for estimating loss and loss adjustment expense reserves, especially in apartments and commercial buildings and transportations product coverage. The reevaluation resulted in a significant loss and loss adjustment expense reserve strengthening of approximately \$12.3 million and increased the net loss from \$2.2 million in 2019 to \$12.9 million in 2020. Also, as the result of the combination of a decrease in the net deferred tax asset, increases in dividend payment, and adverse loss development, the surplus as regards policyholders decreased from \$46.5 million in 2019 to \$26.9 million in 2020.

As a property and casualty insurance company, the Company is subject to Risk-Based Capital (RBC) requirements. RBC is a method developed by the National Association of Insurance Commissioners (NAIC) and adopted in the California Insurance Code Section 739 to determine the minimum amount of statutory capital appropriate for an insurance company to support its overall business operations in consideration of its size and risk profile. The RBC requirements require the insurer to report the results of RBC calculations to its domiciliary insurance regulator and the NAIC. If a company fails to meet certain standards related to its RBC Authorized Control Level and its RBC total adjusted capital standards and requirements, the domiciliary insurance regulator may require specified actions to be taken, which could have a material and adverse impact on a company's competitiveness, operational flexibility, and operations.

The Company's RBC total adjusted capital was less than 300% of its Authorized Control Level as of December 31, 2020. Its statutory accounting basis combined ratio was in excess of 120% for the year ended December 31, 2020. The RBC level, when coupled

with the statutory accounting basis combined ratio, triggered a Company Action Level Event under the RBC requirements. The Company submitted to the California Department of Insurance (CDI) a comprehensive Risk-Based Capital Plan (RBC Plan) to increase the adjusted capital above 300% and address the Company's actions to correct the conditions that resulted in the Company Action Level Event. On July 2, 2021, the Company submitted a revised RBC Plan, which attempted to address questions raised by the CDI. The CDI has not accepted the revised RBC plan due to the numerous operational changes and the potential sale of the Company subsequent to the examination date. However, the Company has voluntarily entered into an Administration Supervision Agreement with the CDI and is expected to submit another revision of the RBC plan to better address the operational and financial difficulties it currently is experiencing. The details of the Administration Supervision Agreement and other operational changes is described in the "Summary of Significant Findings" section of the report.

ACCOUNTS AND RECORDS

Corporate Records

The Company's By-Laws state, "the authorized number of directors shall be five until changed by the amendment of the Articles of Incorporation or By-Laws". The number of the board members varied from three to eight for all years under the examination and subsequent period, and there was no amendment to the Articles of Incorporation or By-Laws to reflect the changes in the authorized number of the directors. The same recommendation was made during the prior examination. It is again recommended the Company comply with its By-laws on the appointment of the directors or amend its By-laws to reflect the change in the number of the directors.

Vehicle Fraud Assessment Filing

California Insurance Code (CIC) Section 1872.8 states, in part, that each insurer doing business in the state of California must pay an annual "Vehicle Fraud Assessment Fee"

for each vehicle insured under an insurance policy it issues in California. The fee provides funding for the investigation and prosecution of fraudulent automobile insurance claims and automobile theft in the state of California. California Code of Regulations (CCR), Title 10, Chapter 5, Subchapter 9, Article 4, Section 2698.62(d) required the Auto Assessment File shall contain vehicle identification, policy number, and transaction for every vehicle for which a policy was in force for each quarter or any part thereof. The data shall be kept in a computer format for a minimum of five years after each calendar year quarter.

During the course of this examination, it was noted that the Company failed to maintain a detailed Auto Assessment File due to the limitation of the computer system used. As a result, the accuracy of the vehicle count was unable to be verified. It is recommended that the Company establish and implement procedures to ensure that adequate and complete documentation is maintained to support its filing with the CDI to ensure future compliance of CCR Section 2698.62(d).

REINSURANCE

Assumed

Effective April 1, 2020, the Company entered into a Quota Share Reinsurance Agreement with United Specialty Insurance Company (USIC), an insurer domiciled in the state of Delaware and surplus lines insurer in the state of California. Under the terms of the agreement, the Company will assume all of USIC's liability for policies issued by USIC and produced by Unifax Insurance Systems, Inc. (Unifax) for property, general liability, commercial multiple peril property, commercial multiple peril liability, and other miscellaneous coverages. The Company will indemnify USIC against any loss, claim, or liability that may arise from or be related to the insurance placed by Unifax and ceded to the Company. The maximum annual premium volume assumed shall be \$12 million.

Ceded

The following is a summary of the reinsurance program in-force as of December 31, 2020:

Type of Contract	Reinsurer's Name	Company's Retention	Reinsurer's Limit
<u>Multiple Line Excess of Loss Reinsurance Contract</u>			
<u>Excess of Loss</u> First Layer	Hannover Ruck SE (50%, Authorized) Renaissance Reinsurance U.S. Inc. (50%, Authorized)	\$500,000 each occurrence	\$500,000 in excess of \$500,000, each and every occurrence, each and every risk, not to exceed \$2 million each occurrence
Second Layer	Hannover Ruck SE (50%, Authorized) Renaissance Reinsurance U.S. Inc. (50%, Authorized)	\$1 million per occurrence	\$3 million in excess of \$1 million, each occurrence, not to exceed \$3 million each occurrence with \$6 million aggregate limit
Third Layer	Hannover Ruck SE (50%, Authorized) Renaissance Reinsurance U.S. Inc. (50%, Authorized)	\$4 million per occurrence	\$4 million in excess of \$4 million, each occurrence, not to exceed \$4 million each occurrence with \$12 million aggregate limit
<u>Catastrophe Excess of Loss Reinsurance Contract</u>			
<u>Excess of Loss</u> First layer	Various domestic, foreign and alien companies led by Renaissance Reinsurance U.S. Inc. (100%, Authorized)	\$1 million each and every loss occurrence	\$9 million in excess of \$1 million, each loss occurrence, limited to \$18 million all occurrence
Second layer	Various domestic, foreign and alien companies led by R+V Versicherung A.G. (100%, Authorized)	\$10 million each and every loss/risk	\$36 million in excess of \$10 million, each loss occurrence, limited to \$72 million all occurrence
<u>Property Facultative Excess of Loss Reinsurance Agreement</u>			
<u>Excess of Loss</u>	Arch Reinsurance Company (100%, Authorized)	\$4 million each and every loss occurrence	\$4 million in excess of \$4 million, each loss occurrence

FINANCIAL STATEMENTS

The following financial statements are based on the statutory financial statements filed by the Company with the California Department of Insurance and present the financial condition of the Company for the period ending December 31, 2020. The accompanying comments on financial statements reflect the examination adjustments to the amounts reported in the annual statements and should be considered an integral part of the financial statements.

Statement of Financial Condition as of December 31, 2020

Underwriting and Investment Exhibit for the Year Ended December 31, 2020

Reconciliation of Surplus as Regards Policyholders from December 31, 2015
through December 31, 2020

Analysis of Changes to Surplus as of December 31, 2020

Statement of Financial Condition
as of December 31, 2020

<u>Assets</u>	<u>Ledger and Non-ledger Assets</u>	<u>Assets Not Admitted</u>	<u>Net Admitted Assets</u>	<u>Notes</u>
Bonds	\$ 80,825,763	\$	\$ 80,825,763	
Common stocks	2,746,706		2,746,706	
Real Estate: Properties occupied by the Company	8,335,018		8,335,018	
Cash and short-term investments	2,573,191		2,573,191	
Investment income due and accrued	402,046		402,046	
Premiums and agents' balances in course of collection	3,771,055	3,341,375	429,680	(1)
Amount recoverable from reinsurers	621,307		621,307	
Furniture and equipment	893	893	893	
Receivables from parent, subsidiaries and affiliates	41,892		41,892	
Aggregate write-ins for other than invested assets	<u>52,743</u>	<u>14,351</u>	<u>38,392</u>	
 Total assets	 <u>\$ 99,370,614</u>	 <u>\$ 3,356,619</u>	 <u>\$ 96,013,995</u>	
 <u>Liabilities, Surplus and Other Funds</u>				
Losses and loss adjustment expenses			\$ 52,639,869	(2)
Other expenses			99,461	
Taxes, licenses and fees			17,061	
Unearned premiums			17,989,108	
Advance premiums			98,007	
Ceded reinsurance premiums payable			443,424	
Payable for securities			500,000	
Aggregate write-ins for liabilities			<u>674,925</u>	
 Total liabilities			 72,461,855	
Common capital stock		\$ 3,000,200		
Gross paid-in and contributed surplus		8,100,000		
Unassigned funds (surplus)		<u>12,451,940</u>		
Surplus as regards policyholders			<u>23,552,140</u>	
 Total liabilities, surplus and other funds			 <u>\$ 96,013,995</u>	

Underwriting and Investment Exhibit
for the Year Ended December 31, 2020

Statement of Income

Underwriting Income

Premiums earned		\$ 28,168,169
Deductions:		
Losses and loss expenses incurred	\$ 34,600,236	
Other underwriting expenses incurred	<u>8,711,380</u>	
Total underwriting deductions		<u>43,311,616</u>
Net underwriting loss		(15,143,447)

Investment Income

Net investment income earned	\$ 2,300,693	
Net realized capital gain	<u>97,772</u>	
Net investment gain		2,398,465

Other Income

Aggregate write-ins for miscellaneous income	<u>(117,606)</u>	
Total other income		<u>(117,606)</u>
Net income before dividends to policyholders, after capital gains tax and before federal and foreign income taxes		(12,862,588)
Dividends to policyholders		<u>0</u>
Net income after dividends to policyholders, after capital gains tax and before federal and foreign income taxes		(12,862,588)
Federal and foreign income taxes incurred		<u>0</u>
Net income		<u>\$ (12,862,588)</u>

Capital and Surplus Account

Surplus as regards policyholders, December 31, 2019		\$ 45,498,960
Net income	\$ (12,862,588)	
Change in net unrealized capital gains	154,748	
Change in net unrealized foreign exchange capital gain	240,029	
Change in net deferred income tax	(2,938,701)	
Change in nonadmitted assets	(3,300,279)	
Dividends to stockholders	<u>(4,000,000)</u>	
Change in surplus as regards policyholders for the year		<u>(22,946,820)</u>
Surplus as regards policyholders, December 31, 2020		<u>\$ 23,552,140</u>

Reconciliation of Surplus as Regards Policyholders
from December 31, 2015 through December 31, 2020

Surplus as regards policyholders, December 31, 2015				\$ 61,367,728
	<u>Gain in Surplus</u>	<u>Loss in Surplus</u>		
Net income	\$		\$ 21,922,111	
Net unrealized capital gains	154,748			
Change in net deferred income tax		2,041,734		
Change in nonadmitted assets		3,006,491		
Dividends to stockholders		<u>11,000,000</u>		
Total gains and losses	<u>\$ 154,748</u>	<u>\$ 37,970,336</u>		
Net decrease in surplus as regards policyholders				<u>(37,815,588)</u>
Surplus as regards policyholders, December 31, 2020				<u>\$ 23,552,140</u>

Analysis of Changes to Surplus as of December 31, 2020

As a result of the examination, the following adjustment was made to the Company's reported balance sheet item. The premium trust deficiency noted in the "Summary of Significant Findings" was non-admitted from the reported balance on Premiums and agents' balances in course of collection. The sum of the effect on surplus is shown below:

Surplus as regards policyholders, December 31, 2020, per Annual Statement			\$ 26,893,515
	<u>Increase</u>	<u>Decrease</u>	
Premiums and agents' balances in course of collection		\$ 3,341,375	
Net decrease			<u>3,341,375</u>
Surplus as regards policyholders, December 31, 2020 after adjustment			<u>\$ 23,552,140</u>

COMMENTS ON FINANCIAL STATEMENT ITEMS

(1) Premiums and Agents' Balances in Course of Collection

Premiums were collected by the affiliated agency under the contractual obligation described under "Management and Control" section. The premium trust deficiency noted during the examination resulted in an examination adjustment of \$3,341,375, decreasing the Premiums and agents' balances in course of collection and Surplus as regards policyholder.

(2) Losses and Loss Adjustment Expenses

Based on an analysis by a Casualty Actuary from the California Department of Insurance, the Company's loss and loss adjustment expense reserves as of December 31, 2020 were found to be reasonably stated and have been accepted for purposes of this examination.

SUBSEQUENT EVENTS

On February 12, 2021, the Company completed the sale of the Company's headquarters office building at 26050 Mureau Road, Calabasas, California, for \$12,695,000 to Mureau Road, LLC, an unaffiliated California corporation. The Company recognized a gain of \$3,693,858 on the sale of the Calabasas Building.

As a result of the multiple events that occurred subsequent to the examination date as described in the "Summary of Significant Findings" and "Loss Experience" sections, the Company remains under administration supervision by the California Department of Insurance. In addition to the recommendation to remediate the premium trust deficiency, it is also recommended that the Company submit a revised Risk-Based Capital plan (RBC plan) to address the operational and financial difficulties it currently is experiencing and to comply with California Insurance Code Section 739.3(b). The Company has submitted a revised RBC Plan on May 16, 2022 and is currently under review.

SUMMARY OF COMMENTS AND RECOMMENDATIONS

Current Report of Examination

Summary of Significant Findings (Page 2): It is recommended that the remaining trust deficiency be remediated to comply with California Insurance Code Section (CIC) 1733.

Accounts and Records – Corporate Records (Page 9): It is again recommended the Company comply with its By-laws on the appointment of the directors or amend its By-laws to reflect the change in the number of the directors.

Accounts and Records – Vehicle Fraud Assessment Filing (Page 9): It is recommended that the Company establish and implement procedures to ensure that adequate and complete documentation is maintained to support its filing with the California Department of Insurance to ensure future compliance of California Code of Regulations Section 2698.62(d).

Subsequent Events (Page 17): It is also recommended that the Company submit a revised Risk-based Capital plan to address the operational and financial difficulties it currently is experiencing and to comply with CIC Section 739.3(b).

Previous Report of Examination

Management and Control (page 3): The Company's By-Laws state the board shall consist of five members. It is recommended the Company comply with its By-Laws. During the examination period, it was brought to the Company's attention, and on May 23, 2017, two additional members were elected to the Company's board of directors, bringing the total to five in compliance with the Company's By-Laws. The Company has not complied with the recommendation.

Accounts and Records - Vehicle Fraud Assessment (Page 7): It was noted that the Company did not follow the approved alternate method for vehicle counts pertaining to used car dealers within the Auto Dealer program. It is recommended that the Company comply with the agreement instructions and obtain the inventory listing from the automobile dealerships to be in compliance with California Code of Regulations, Title 10, Chapter 5, Subchapter 9, Article 4, Section 2698.62(c). The Company has complied with the recommendation.

ACKNOWLEDGMENT

Acknowledgment is made of the cooperation and assistance extended by the Company's officers and employees during the course of this examination.

Respectfully submitted,

Cuauthamoc Beltran, CFE
Examiner-In-Charge
Senior Insurance Examiner
Department of Insurance
State of California

Vivien Fan, CFE
Senior Insurance Examiner, Supervisor
Department of Insurance
State of California