BEFORE THE INSURANCE COMMISSIONER OF THE COMMONWEALTH OF PENNSYLVANIA

2011 APR 22 AM 11: 17

ADMIN HEARINGS OFFICE

IN RE:

VIOLATIONS:

HARVEY SILVERSTEIN

40 P.S. §§ 310.11(6), (7), (20) and

1008 Mandarin Isle

310.95

Fort Lauderdale, FL 33315-1643

Respondent.

Docket No. CO11-01-017

CONSENT ORDER

AND NOW, this 220 day of April , 2011, this Order is hereby issued by the Insurance Department of the Commonwealth of Pennsylvania pursuant to the statutes cited above and in disposition of the matter captioned above.

- 1. Respondent hereby admits and acknowledges that he has received proper notice of his rights to a formal administrative hearing pursuant to the Administrative Agency Law, 2 Pa.C.S. § 101, et seq., or other applicable law.
- 2. Respondent hereby waives all rights to a formal administrative hearing in this matter, and agrees that this Consent Order, and the Findings of Fact and Conclusions of Law contained herein, shall have the full force and effect of an Order duly entered in accordance with the adjudicatory procedures set forth in the Administrative Agency Law, supra, or other applicable law.

3. Respondent neither admits nor denies that he violated any Pennsylvania insurance laws.

FINDINGS OF FACT

- 4. The Insurance Department finds true and correct each of the following Findings of Fact:
 - (a) Respondent is Harvey Silverstein. Respondent maintains his address at 1008Mandarin Isle, Fort Lauderdale, FL 33315-1643.
 - (b) At all relevant times herein, Respondent had an active non-resident individual producer license # 423861 to conduct the business of insurance in Pennsylvania. Respondent's non-resident individual producer license #423861 is now inactive.
 - (c) At all relevant times herein, Respondent was employed by Headquarters

 Insurance located at 4300 North University Drive, Suite B-203, Lauderhill,

 Florida 33351.
 - (d) On July 28, 2009, Pennsylvania resident Sharon Rollins applied online for a limited benefit health insurance plan with the Association of Independent Managers (AIM), Chief Executive Officers (CEO) Clubs, Inc., and was

enrolled into the Access 1000 Diamond Single insurance plan, identifying Respondent and Headquarters Insurance as the agent of record.

- (e) On January 13, 2010, Pennsylvania resident Susanne Carney also applied online for a discount health insurance plan with the Association of Independent Managers (AIM)/Chief Executive Officers (CEO) Clubs, Inc. identifying Respondent and Headquarters Insurance as the agent of record.
- (f) Five (5) subsequent Pennsylvania residents also applied online for a discount health insurance plan with the Association of Independent Managers (AIM)/ Chief Executive Officers (CEO) Clubs, Inc., identifying Respondent and Headquarters Insurance as the agent of record.
- (g) The AIM literature received by the insurance applicants indicates enrollment is made by sending payment and application to 20 Madison Avenue, Valhalla, New York.
- (h) In order for an association to be bona fide under the United States

 Department of Labor's guidelines within the meaning of Section 3(5), it is supposed to be organized as a trade group or similar organization, not solely for the purpose of supplying health benefits. AIM was organized for the purpose of providing health insurance. Therefore, AIM has never been recognized as a bona fide group by the federal or state governments.

- (i) Respondent did not determine if the Association of Independent Managers(AIM) was a bona fide association or group and did not verify that insurance coverage continued to actually exist for the insureds.
- (j) As a result of Respondent's actions, consumers Rollins and Carney incurred medical bills in the amount of \$7,476.65 which they were forced to pay out of pocket.

CONCLUSIONS OF LAW

- 5. In accord with the above Findings of Fact and applicable provisions of law, the Insurance Department concludes and finds the following Conclusions of Law:
 - (a) Respondent is subject to the jurisdiction of the Pennsylvania Insurance

 Department.
 - (b) 40 P.S. § 310.11(6) prohibits a licensee or an applicant from committing any unfair insurance practice or fraud.
 - (c) Respondent's activities described above in paragraphs 4(d) through 4(j) violate 40 P.S. § 310.11(6).

- (d) 40 P.S. § 310.11(7) prohibits a licensee or an applicant from using fraudulent, coercive or dishonest practices or demonstrating incompetence, untrustworthiness or financial irresponsibility in the conduct of doing business.
- (e) Respondent's activities described above in paragraphs 4(d) through 4(j) violate 40 P.S. § 310.11(7).
- (f) 40 P.S. § 310.11(20) prohibits a licensee from demonstrating a lack of general fitness, competence or reliability sufficient to satisfy the department that the licensee is worthy of licensure.
- (g) Respondent's activities described above in paragraphs 4(d) through 4(j) violate 40 P.S. § 310.11(20).
- (h) Respondent's violations of Sections 310.11(6), (7) and (20) are punishable by the following, under 40 P.S. § 310.91:
 - suspension, revocation or refusal to issue the certificate of qualification or license;
 - (ii) imposition of a civil penalty not to exceed five thousand dollars (\$5,000.00) for every violation of the Act;
 - (iii) an order to cease and desist; and

- (iv) any other conditions as the Commissioner deems appropriate.
- (i) 40 P.S. § 310.95 holds an insurance agent personally liable on all contracts of insurance made through any company not authorized to do business in this Commonwealth.
- (j) Respondent's activities described above in paragraphs 4(d) through 4(j) constitute transacting insurance business within this Commonwealth through a company not authorized to do business and violate 40 P.S. § 310.95.
- (k) Respondent's violation of 40 P.S. § 310.95 makes the insurance producer personally liable for all contracts issued through the unauthorized company.

ORDER

- 6. In accord with the above Findings of Fact and Conclusions of Law, the Insurance Department orders and Respondent consents to the following:
 - (a) Respondent shall not engage in the activities described herein in the Findings of Fact and Conclusions of Law.
 - (b) Respondent shall make full and final payment for restitution in the total amount of \$7,476, within thirty (30) days from the date of this Order. Proof of

restitution payment shall be provided to the Insurance Department by Respondent.

- (c) Respondent's certificates and licenses may be immediately suspended by the Department following its investigation and determination that (i) any terms of this Order have not been complied with, or (ii) any complaint against Respondent is accurate and a statute or regulation has been violated. The Department's right to act under this section is limited to a period of five (5) years from the date of this Order.
- (d) Respondent specifically waives his right to prior notice of said suspension, but will be entitled to a hearing upon written request received by the Department no later than thirty (30) days after the date the Department mailed to Respondent by certified mail, return receipt requested, notification of said suspension, which hearing shall be scheduled for a date within sixty (60) days of the Department's receipt of Respondent's written request.
- (e) At the hearing referred to in paragraph 6(d) of this Order, Respondent shall have the burden of demonstrating that he is worthy of a license.
- (f) In the event Respondent's certificates and licenses are suspended pursuant to paragraph 6(c) above, and Respondent either fails to request a hearing within thirty (30) days or at the hearing fails to demonstrate that he is worthy of a

license, Respondent's suspended certificates and licenses shall be revoked.

- 7. In the event the Insurance Department finds that there has been a breach of any of the provisions of this Order, based upon the Findings of Fact and Conclusions of Law contained herein, the Department may pursue any and all legal remedies available, including but not limited to the following: The Department may enforce the provisions of this Order in an administrative action pursuant to the Administrative Agency Law, supra, or other relevant provision of law; or, if applicable, the Department may enforce the provisions of this Order in any other court of law or equity having jurisdiction.
- 8. Alternatively, in the event the Insurance Department finds that there has been a breach of any of the provisions of this Order, the Department may declare this Order to be null and void and, thereupon, reopen the entire matter for appropriate action pursuant to the Administrative Agency Law, supra, or other relevant provision of law.
- 9. In any such enforcement proceeding, Respondent may contest whether a breach of the provisions of this Order has occurred but may not contest the Findings of Fact and Conclusions of Law contained herein.
- 10. Respondent hereby expressly waives any relevant statute of limitations and application of the doctrine of laches for purposes of any enforcement of this Order.

- 11. This Order constitutes the entire agreement of the parties with respect to the matters referred to herein, and it may not be amended or modified except by an amended order signed by all the parties hereto.
- 12. This Order shall be final upon execution by the Insurance Department. Only the Insurance Commissioner or a duly authorized delegee is authorized to bind the Insurance Department with respect to the settlement of the alleged violations of law contained herein, and this Consent Order is not effective until executed by the Insurance Commissioner or a duly authorized delegee.

BY:

HARVEY SILVERSTE

Respondent

COMMONWEALTH OF PENNSYLVANIA

By: RONALD A. GALLAGHER, JR.

Deputy Insurance Commissioner