IN THE CIRCUIT COURT OF THE SECOND JUDICIAL CIRCUIT, IN AND FOR LEON COUNTY, FLORIDA

In Re: The Receivership of DOCTORCARE INC., a Florida corporation.

CASE NO.: 2006-CA-2965

<u>DEPARTMENT OF FINANCIAL SERVICES MOTION TO REOPEN THE</u>
<u>RECEIVERSHIP OF DOCTORCARE, INC.</u>

COMES NOW, the Florida Department of Financial Services (hereinafter "Department"), by and through the undersigned counsel, and respectfully moves this Honorable Court for an Order Reopening the Receivership of DoctorCare, Inc. ("DoctorCare"), and in support thereof states the following:

- 1. DoctorCare was a Florida corporation previously authorized to transact the business of a Medicare-approved health maintenance organization in the State of Florida pursuant to the Florida Insurance Code, and therefore subject to the jurisdiction of and regulation by the Office of Insurance Regulation and the Department.
- 2. On November 27, 2006, this Court found that DoctorCare was insolvent and entered an Order Appointing the Department as Receiver of DoctorCare for purposes of Liquidation, Injunction, and Notice of Automatic Stay. A copy of the Liquidation Order is attached as Exhibit A.
- 3. On January 18, 2013, this Court entered an Order Approving Receiver's Discharge Accounting Statement, Directing Final Discharge, and Authorizing Destruction of Obsolete Records. This Order closed the DoctorCare Receivership. A copy of the Discharge Order is attached as Exhibit B.

- 4. The Department has learned of additional assets which belong to Doctorcare.

 These assets are currently held by the Department of Financial Services Bureau of Unclaimed Property. These assets total approximately seven hundred fifty thousand dollars.
- 5. The Department has determined, based on the amount available, that it is cost-effective to reopen the DoctorCare estate.
- 6. The Department, upon the reopening of the estate, intends to collect the additional assets and distribute same for the benefit of the previously approved claimants in the estate.
- 7. Without the authority to act as Receiver, the Department cannot effect the collection and distribution of these assets.
- 8. Pursuant to section 631.021(1), Florida Statutes, this Court has jurisdiction over the DoctorCare receivership and is authorized to enter all necessary or proper orders to carry out the purpose of the Florida Insurers and Liquidation Act.
- 9. On October 4, 2012, this Court entered an Order Approving the Receiver's Second Claims Distribution Report and Final Distribution Accounting, Authorizing Final Distribution, and Confirming Deadline to File Assignments of Claim. A copy of this Distribution Order is attached as Exhibit C.
- 10. Pursuant to the Distribution Order, the last date that the Department could accept assignments of claims was September 27, 2012. In order to assure that the processing of assignments does not create an undue burden on limited estate resources, the Department requests that the Court maintain September 27, 2012, as the last date to accept further assignments of claims.
- 11. The Department has prepared a proposed order to effect the requested actions, included in this motion as Exhibit D.

WHEREFORE, the Florida Department of Financial Services respectfully requests this Court enter an Order:

- A. Authorizing the Department to act as Receiver of DoctorCare, Inc.;
- B. Reopening the receivership of DoctorCare, Inc., for the purposes of collecting any assets belonging to DoctorCare and distributing those assets to those entitled to them;
- C. Ordering that the November 27, 2006 Order Order Appointing the Department as Receiver of DoctorCare for purposes of Liquidation, Injunction, and Notice of Automatic Stay should be revived and, to the extent applicable, in full force and effect; and
- D. Confirming that in accordance with the Distribution Order, September 27, 2012 was the last date that the Receiver could accept any further assignments of claims.

RESPECTFULLY SUBMITTED this 10 day of October, 2014.

HELENA CRUZ SÁNCHEZ

Senior Attorney

Florida Bar No.: 61250

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IN THE CIRCUIT COURT OF THE SECOND JUDICIAL CIRCUIT IN AND FOR LEON COUNTY, FLORIDA

IN RE: The Receivership of DOCTORCARE, INC., a Florida Health Maintenance Organization

CASE NO.: 2006-2965

ORDER APPOINTING THE FLORIDA DEPARTMENT OF FINANCIAL SERVICES AS RECEIVER FOR PURPOSES OF LIQUIDATION, INJUNCTION, AND NOTICE OF AUTOMATIC STAY

THIS CAUSE was considered on the Department of Financial Services' (hereinafter the "Department") Petition for an Order appointing the Department as Receiver for purposes of Liquidation of DoctorCare, Inc. (hereinafter the "Respondent"). The Court, having reviewed the pleadings of record, and otherwise being fully informed in the premises finds that:

- 1. Respondent is a corporation authorized pursuant to the Florida Insurance Code to transact business in the state of Florida as a domestic provider-sponsored health maintenance organization. DoctorCare, Inc. is a "Medicare Only" health maintenance organization, providing coverage to more than 5,700 enrollees. Medicare contracts and funds are administered through the federal Centers for Medicare and Medicaid Services. Respondent's principal place of business as listed in their 2006 For Profit Corporation Reinstatement with the Florida Department of State, Division of Corporations, is 3001 Ponce De Leon Boulevard, Suite 101, Coral Gables, Florida 33134.
- 2. Section 631.061, Florida Statutes, authorizes the Department to apply to this Court for an Order directing it to liquidate a domestic insurer upon the existence of any grounds specified in Section 631.051, Florida Statutes.

- 3. By letter dated November 14, 2006, to the Honorable Tom Gallagher, Chief Financial Officer of the State of Florida, Kevin McCarty, Commissioner of the Florida Office of Insurance Regulation, recommended that delinquency proceedings, pursuant to Chapter 631, Florida Statutes, be initiated against Respondent. Respondent consented to the appointment of the Department as Receiver for the purposes of rehabilitation pursuant to Section 631.051(11) and if subsequently determined necessary by the Receiver, entry of an Order of liquidation.
- 4. On November 20, 2006, this court entered an Order Appointing the Florida Department of Financial Services as Receiver for DoctorCare, Inc. for purposes of rehabilitation.
- 5. In the instant Petition, the Department/Receiver asserts that further efforts to rehabilitate Respondent would be useless, and that the financial condition of Respondent makes liquidation necessary.
- 6. Section 641.284, Florida Statutes, provides that a delinquency proceeding pursuant to Chapter 631, Florida Statutes, constitutes the sole and exclusive method of liquidating, rehabilitating, reorganizing, or conserving a Florida-domestic health maintenance organization. Further, Section 631.025(2), Florida Statutes authorizes the Department to initiate delinquency proceedings against any "insurer" if the statutory grounds are present as to that insurer.
- 7. Respondent has approximately 5,700 members who must be transitioned to another medicare HMO by the Centers for Medicare & Medicaid Services. In order to assist the Centers for Medicare & Medicaid Services in their efforts to provide Respondent's members a smooth transition to another Medicare provider, Respondent

shall be placed into liquidation effective at 12:01 a.m. on December 1, 2006. This will allow time for the Centers for Medicare & Medicaid Services to accomplish the tasks necessary to complete the transitions.

- 8. Respondent must be liquidated to protect the remaining assets of Respondent for the benefit of its policyholders, creditors and the public, as well as assuring for the orderly transition of these policyholders to one or more solvent insurers.
- 9. Pursuant to Section 631.051(11), Florida Statutes, the Respondent has consented to the appointment of the Department of Financial Services as Receiver for the purpose of liquidation through a majority of its directors, stockholders, members, or subscribers.
- 10. In light of the Respondent's consent to liquidation, pursuant to Section 631.051(11), and Section 631.061, Florida Statutes, the Court finds that it is in the best interests of Respondent, its creditors, and its members that the relief requested in the petition be granted.

THEREFORE, IT IS ORDERED AND ADJUDGED as follows:

- 11. Effective at 12:01 a.m. on December 1, 2006, the Department of Financial Services of the State of Florida shall be appointed Receiver of Respondent for purposes of liquidation.
 - 12. The Receiver shall be authorized and directed to:
 - A. Take immediate possession of all the property, assets, and estate, and all other property of every kind whatsoever and wherever located belonging to Respondent pursuant to Sections 631.111 and 631.141, Florida Statutes, including but not limited to: offices maintained by Respondent, rights of action,

books, papers, evidences of debt, bank accounts, savings accounts, certificates of deposit, stocks, bonds, debentures and other securities, mortgages, furniture, fixtures, office supplies and equipment, wherever situate and however titled, whether in the possession of Respondent or its officers, directors, shareholders, trustees, employees, consultants, attorneys, agents or affiliates and all real property of Respondent, wherever situate, whether in the possession of Respondent or its officers, directors, shareholders, trustees, employees, consultants, attorneys, agents or affiliates.

- B. Liquidate the assets of Respondent, including but not limited to, funds held by Respondent's agents, subagents, producing agents, brokers, solicitors, service representatives or others under agency contracts or otherwise which are due and unpaid to Respondent, including premiums, unearned commissions, agents' balances, agents' reserve funds, and subrogation recoveries.
- C. Employ and authorize the compensation of legal counsel, actuaries, accountants, clerks, consultants, and such assistants as it deems necessary, purchase or lease personal or real property as it deems necessary, and authorize the payment of the expenses of these proceedings and the necessary incidents thereof, as approved by the Court, to be paid out of the funds or assets of the Respondent in the possession of the Receiver or coming into its possession.
- D. Reimburse such employees, from the funds of this receivership, for their actual necessary and reasonable expenses incurred while traveling on the business of this receivership.
 - E. Not defend or accept service of process on legal actions wherein

Respondent, the Receiver, or the insured is a party defendant, commenced either prior to or subsequent to the order, without authorization of this Court; except, however, in actions where Respondent is a nominal party, as in certain foreclosure actions, and the action does not affect a claim against or adversely affect the assets of Respondent, the Receiver may file appropriate pleadings in its discretion.

- F. Commence and maintain all legal actions necessary, wherever necessary, for the proper administration of this receivership proceeding.
- G. Collect all debts which are economically feasible to collect which are due and owing to Respondent.
- H. Deposit funds and maintain bank accounts in accordance with Section 631.221, Florida Statutes.
- I. Take possession of all of Respondent's securities and certificates of deposit on deposit with the Treasurer of Florida or any similar official of any other state, if any, and convert to cash as much as may be necessary, in its judgment, to pay the expenses of administration of this receivership.
- J. Publish notice specifying the time and place fixed for the filing of claims with the Receiver once each week for three consecutive weeks in the Florida Administrative Weekly published by the Secretary of State, and at least once in the Florida Bar News and to publish notice by similar methods in all states where Respondents may have issued insurance policies.
 - K. Negotiate and settle subrogation claims and Final Judgments up to

and including the sum of Twenty Thousand Dollars (\$20,000.00) without further order of this Court.

- L. Sell any salvage recovered property having value of not more than Twenty Thousand Dollars (\$20,000.00) without further order of this Court.
- M. Give notice of this proceeding to Respondent's agents pursuant to Section 631.341, Florida Statutes, and to its insureds, if any.
- N. All officers, directors, trustees, administrators, agents and employees and all other persons representing Respondent or currently employed or utilized by Respondent in connection with the conduct of its business are discharged forthwith.
- O. Any officer, director, manager, trustee, administrator, attorney, agent, accountant, actuary, broker, employee, adjuster, independent contractor, or affiliate of Respondent and any other person who possesses or possessed any executive authority over, or who exercises or exercised any control over, any segment of Respondent's affairs or the affairs of its affiliates shall be required to fully cooperate with the Receiver, pursuant to Section 631.391, Florida Statutes, notwithstanding the provisions of the above paragraph.
- P. Title to all property, real or personal, all contracts, rights of action and all books and records of Respondent, wherever located, is vested in the Receiver pursuant to Sections 631.111 and 631.141, Florida Statutes.
- Q. All attorneys employed by Respondent as of the date of the Order, within 10 days notice of the Order, are required to report to the Receiver on the

name, company claim number and status of each file they are handling on behalf of the Respondent. Said report shall also include an accounting of any funds received from or on behalf of the Respondent. All attorneys employed by Respondent shall be discharged as of the date of the Order unless their services are retained by the Receiver. All attorneys employed by Respondent shall be advised that pursuant to Section 631.011(21), Florida Statutes, a claim based on mere possession does not create a secured claim and all attorneys employed by Respondent, pursuant to In Re the Receivership of Syndicate Two, Inc., 538 So.2d 945 (Fla. 1st DCA 1989), who are in possession of litigation files or other material, documents or records belonging to or relating to work performed by the attorney on behalf of Respondent shall be required to deliver such litigation files, material, documents or records intact and without purging to the Receiver, on request, notwithstanding any claim of a retaining lien which, if otherwise valid, shall not be extinguished by the delivery of these documents.

R. All agents, brokers or other persons having sold policies of insurance and/or collected premiums on behalf of the Respondent shall be required to account for and pay all premiums and commissions unearned due to cancellation of policies by the Order or in the normal course of business owed to the Respondent directly to Receiver within 30 days of demand by the Receiver or appear before this Court to show cause, if any they may have, as to why they shall not be required to account to the Receiver or be held in contempt of Court for violation of the provisions of the Order. No agent, broker, premium finance company or other person shall use premium monies owed to the Respondent for

refund of unearned premium or for any purpose other than payment to the Receiver.

- S. Any premium finance company which has entered into a contract to finance a premium for a policy which has been issued by the Respondent shall be required to pay any premium owed to the Respondent directly to the Receiver.
- T. Reinsurance premiums due to or payable by Respondent shall be remitted to, or disbursed by, the Receiver. Reinsurance losses recoverable or payable by Respondent shall be handled by the Receiver. All correspondence concerning reinsurance shall be between the Receiver and the reinsuring company or intermediary.
- U. Upon request by the Receiver, any company providing telephonic services to Respondent shall be required to provide a reference of calls from the number presently assigned to Respondent to any such number designated by the Receiver or perform any other services or changes necessary to the conduct of the receivership.
- V. Any bank, savings and loan association, or other financial institution which has on deposit, in its possession, custody or control any funds, accounts and any other assets of Respondent, shall be required to immediately transfer title, custody and control of all such funds, accounts and other assets to the Receiver. The Receiver shall be authorized to change the name of such accounts and other assets, withdraw them from such bank, savings and loan association or other financial institution, or take any lesser action necessary for the proper conduct of this receivership. No bank, savings and loan association or

other financial institution shall be permitted to exercise any form of set-off, alleged set-off, lien, any form of self-help whatsoever, or refuse to transfer any funds or assets to the Receiver's control without the permission of this Court.

- W. Any entity furnishing telephone, water, electric, sewage, garbage or trash removal services to Respondent shall be required to maintain such service and transfer any such accounts to the Receiver as of the date of the Order, unless instructed to the contrary by the Receiver.
- X. Any data processing service, which has custody or control of any data processing information and records including but not limited to source documents, data processing cards, input tapes, all types of storage information, master tapes or any other recorded information relating to Respondent shall be required to transfer custody and control of such records to the Receiver. The Receiver shall be authorized to compensate any such entity for the actual use of hardware and software which the Receiver finds to be necessary to this proceeding. Compensation shall be based upon the monthly rate provided for in contracts or leases with Respondent which was in effect when this proceeding was instituted, or based upon such contract as may be negotiated by the Receiver, for the actual time such equipment and software is used by the Receiver.
- Y. The United States Postal Service shall be directed to provide any information requested by the Receiver regarding Respondent and to handle future deliveries of Respondent's mail as directed by the Receiver.
- Z. All claims shall be filed with the Receiver on or before 11:59 p.m. on Monday, December 3, 2007 or be forever barred, and all such claims shall be

filed on proof of claim forms prepared by the Receiver.

AA. Except for contracts of insurance, all executory contracts to which the Respondent was a party shall be cancelled and stand cancelled unless specifically adopted by the Receiver within ninety (90) days of the date of this Order or from the date of the Receiver's actual knowledge of the existence of such contract, whichever is later. "Actual Knowledge" means the Receiver has in its possession the original of a written contract to which Respondent is a party, and the Receiver has notified the vendor in writing acknowledging the existence of the contract. Any vendor, including but not limited to, any and all employees / contractors of insurer, claiming the existence of a contractual relationship with the insurer shall provide notice to the Receiver of such relationship. This notice shall include any and all documents and information regarding the terms and conditions of the contract, including a copy of the written contract between the vendor and the insurer, if any, what services or goods were provided pursuant to the contract, any current, future and/or past due amounts owing under the contract, and any supporting documentation for third party services or goods provided. Failure to provide the required information may result in vendors' contractual rights not being recognized by the Receiver. The rights of the parties to any such contracts are fixed as of the date of the Order and any cancellation under this provision shall not be treated as an anticipatory breach of such contracts.

BB. All affiliated companies and associations, including but not limited to DoctorCare Holdings, LLC, and the shareholder-owners of DoctorCare, Inc., shall be directed to make their books and records available to the Receiver, to

include all records located in any premises occupied by said affiliate, whether corporate records or not, and to provide copies of any records requested by the Receiver whether or not such records are related to Respondent. The Receiver shall have title to all policy files and other records of, and relating to Respondent, whether such documents are kept in offices occupied by an affiliate company or any other person, corporation, or association. The Receiver shall be authorized to take possession of any such records, files, and documents, and to remove them to any location in the Receiver's discretion. Any disputed records shall not be withheld from the Receiver's review, but shall be safeguarded and presented to this Court for review prior to copying by the Receiver.

- CC. The Receiver shall have complete access to and control of all computer records of the Respondent, including administrative rights.
- DD. Any person, firm, corporation or other entity having notice of the Order that fails to abide by its terms shall be directed to appear before this Court to show good cause, if any they may have, as to why they shall not be held in contempt of Court for violation of the provisions of this Order.
- 13. All insurance policies/contracts issued by Respondent which have not been canceled as a result of action by the policyholder/enrollee or for non-payment of premium prior to 12:01 a.m., December 1, 2006 are canceled as of that time.
- 14. All subsidiaries, affiliates, parent corporations, ultimate parent corporations, and any other business entity affiliated with DoctorCare, Inc. having any interest in the building located at 3001 Ponce de Leon Boulevard, Coral Gables, Florida; or any other facility in which DoctorCare, Inc. may operate, shall make available, at that

location and at no charge to the Receiver or to DoctorCare, Inc., office space, and related facilities (telephone service, copiers, computer equipment and software, office supplies, parking, etc.) to the extent deemed necessary by the Receiver in its sole discretion.

15. All subsidiaries, affiliates, parent corporations, ultimate parent corporations, and any other business entity affiliated with DoctorCare, Inc. having any interest in the computer equipment and software currently used by or for DoctorCare, Inc. shall make such computer equipment and software available to the Receiver at no charge to the Receiver or DoctorCare, Inc. to the extent deemed necessary by the Receiver in its sole discretion.

CONTINUATION OF INVESTIGATION

by Section 631.391, Florida Statutes, of Respondent and its affiliates, as defined above, to uncover and make fully available to the Court the true state of Respondent's financial affairs. In furtherance of this investigation, Respondent and its affiliates shall be required to make all books, documents, accounts, records, and affairs, which either belong to or pertain to Respondent, available for full, free and unhindered inspection and examination by the Receiver during normal business hours (9:00 a.m. to 5:00 p.m.) Monday through Friday, from the date of the Order. Respondent and the above specified entities shall be required to cooperate with the Receiver to the fullest extent required by Section 631.391, Florida Statutes. Such cooperation shall include, but not be limited to, the taking of oral testimony under oath of Respondent's officers, directors, managers, trustees, agents, adjusters, employees, or independent contractors of Respondent, its affiliates and any

other person who possesses any executive authority over, or who exercises any control over, any segment of the affairs of Respondent in both their official, representative and individual capacities and the production of all documents that are calculated to disclose the true state of Respondent's affairs.

17. Any officer, director, manager, trustee, administrator, attorney, agent, accountant, actuary, broker, employee, adjuster, independent contractor, or affiliate of Respondent and any other person who possesses or possessed any executive authority over, or who exercises or exercised any control over, any segment of the affairs of Respondent or its affiliates shall be required to fully cooperate with the Receiver as required by Section 631.391, Florida Statutes, and as set out in the preceding paragraph. Upon receipt of a certified copy of the Order, any bank or financial institution shall be required to immediately disclose to the Receiver the existence of any accounts of Respondent and any funds contained therein and any and all documents in its possession relating to Respondent for the Receiver's inspection and copying.

NOTICE OF AUTOMATIC STAY

- 18. Notice is hereby given that, pursuant to Section 631.041(1), Florida Statutes, the filing of the Department's initial petition herein operates as an automatic stay applicable to all persons and entities, other than the Receiver, which shall be permanent and survive the entry of this order, and which prohibits:
 - A. The commencement or continuation of judicial, administrative or other action or proceeding against the insurer or against its assets or any part thereof;

- B. The enforcement of judgment against the insurer or an affiliate, provided that such affiliate is owned by or constitutes an asset of Respondent, obtained either before or after the commencement of the delinquency proceeding;
 - C. Any act to obtain possession of property of the insurer;
- D. Any act to create, perfect or enforce a lien against property of the insurer, except a secured claim as defined in Section 631.011(21), Florida Statutes;
- E. Any action to collect, assess or recover a claim against the insurer, except claims as provided for under Chapter 631;
- F. The set-off or offset of any debt owing to the insurer except offsets as provided in Section 631.281, Florida Statutes.
- 19. All Sheriffs and all law enforcement officials of the state shall cooperate with and assist the Receiver in the implementation of this Order.
- 20. This Court retains jurisdiction of this cause for the purpose of granting such other and further relief as from time to time shall be deemed appropriate.
- 21. The Respondent is ordered into liquidation, effective 12:01a.m., December 1, 2006.

DONE and ORDERED in Chambers at the Leon County Courthouse in Tallahassee, Leon County, Florida this 27 day of _______, 2006.

TERRY P. LEWIS CIRCUIT JUDGE

COPIES FURNISHED TO:

William A. Spillias, Chief Attorney Robert V. Elias, Deputy Chief Attorney Florida Department of Financial Services Division of Rehabilitation and Liquidation P.O. Box 110 Tallahassee, Florida 32302

A Certified Copy
Attest:

Bob Inzer
Clerk Circuit Court
Leon County, Florida

By Carrelle Meefore

IN THE CIRCUIT COURT OF THE SECOND JUDICIAL CIRCUIT IN AND FOR LEON COUNTY, FLORIDA

IN RE:

The Receivership of DOCTORCARE INC., a Florida Corporation.

CASE NO.: 06-CA-2965

ORDER APPROVING RECEIVER'S DISCHARGE ACCOUNTING
STATEMENT, DIRECTING FINAL DISCHARGE, AND AUTHORIZING
DESTRUCTION OF OBSOLETE RECORDS

THIS CAUSE having come before the Court on the Florida Department of Financial Services, as Receiver of DoctorCare, Inc. (hereinafter "Receiver"), Motion for Approval of Discharge Accounting Statement, Directing Final Discharge and Authorizing Destruction of Obsolete Records, and the Court having reviewed the pleadings of record and otherwise being fully advised in the premises, it is hereby ORDERED AND ADJUDGED as follows:

- 1. The Motion is Granted in all respects.
- 2. The Receiver's Discharge Accounting Statement is hereby approved and this Court adopts the Discharge Accounting.
- 3. The Receiver is hereby authorized to retain \$3,500 as a reserve for wind up expenses. Any surplus remaining from the \$3,500 and the balance of the estate's assets shall be paid to the Regulatory Trust Fund.
- 4. The Receiver is hereby authorized and directed to transfer the funds remaining in the estate (approximately \$3,393.73) to the Regulatory Trust Fund as partial reimbursement for Contributed Equity in this estate funded by/through the Regulatory Trust Fund.

- The Receiver is authorized and directed to transfer unclaimed funds to the Department of Financial Services as unclaimed property pursuant to Section 717.119, Florida Statutes.
- 6. The Receiver is hereby authorized to reimburse the Florida Insurance Regulatory Trust Fund the amount of \$30,000 for its January 2013 advance, as the first priority for any and all funds recovered after discharge before any other payments are made to the Regulatory Trust Fund.
- 7. The Receiver is hereby authorized and directed, after final discharge, to destroy any obsolete records in the Receiver's possession.
- 8. The Receiver's administration of this receivership shall be deemed satisfied, approved, and confirmed in all respects, and the Receiver, its deputies and all other employees shall be discharged without further order of this Court from any and all duties, obligations and liabilities in the administration of this Receivership as of 11:59 P.M. on January 31, 2013.
- 9. Although such recovery is unlikely, the Division of Rehabilitation and Liquidation is authorized to remit to the Regulatory Trust Fund any assets which may be recovered following the January 31, 2013 discharge of this receivership estate if, in the Division's sole discretion, the value of the recovered assets does not justify the reopening of this receivership.

DONE AND ORDERED, in Chambers at the Leon County Courthouse in Tallahassee, Leon County, Florida, this ______ day of January, 2013

JUDGE TERREY P. LEWIS

Copy furnished to: Jody E. Collins, Esq.

2

CIRCUIT COURT IN THE THESECOND JUDICIAL CIRCUIT INAND FOR LEON COUNTY, **FLORIDA**

IN RE:

The Receivership of DOCTORCARE

INC., a Florida Corporation.

CASE NO.: 06-CA-2965

ORDER APPROVING SECOND CLAIMS DISTRIBUTION REPORT AND FINAL DISTRIBUTION ACCOUNTING, AUTHORIZING FINAL DISTRIBUTION, AND CONFIRMING DEADLINE TO FILE ASSIGNMENTS OF CLAIM

THIS CAUSE having come before the Court on the Florida Department of Financial Services, as Receiver of DoctorCare, Inc. (hereinafter "Receiver"), Motion for Approval of Second Claims Distribution Report and Final Distribution Accounting, for Order Authorizing Distribution, and for Order Confirming Deadline to File Assignments of Claim, and the Court having reviewed the pleadings of record and otherwise being fully advised in the premises, it is hereby ORDERED AND ADJUDGED as follows:

- 1. The Receiver's Second Claims Distribution Report dated September 14, 2012, attached as Exhibit 2 to the Receiver's Motion is hereby approved.
- The Receiver's Final Distribution Accounting, attached as Exhibit 3 to the 2. Receiver's Motion, is hereby approved.
- The Receiver is authorized and directed to make a final distribution of 3. estate assets in the amount of \$3,406,081.62 on allowed claims in Class6 in this receivership.
- The Court confirms that, in accordance with the notice given in the 4. Assignment of Claim Change Form, the date of filing the Motion for Approval of

Receiver's Second Claims Distribution Report and Final Distribution Accounting, for Order Authorizing Final Distribution, and Confirming Deadline to File Assignments of Claim is the last date that the Receiver could accept any further Assignments of Claim. That date is September 27, 2012.

5. The Receiver's recommendation that the distribution amounts intended for claimants who did not respond to the Receiver's inquiries, or where inadequate address information exists, be transferred to the Florida Department of Financial Services, Bureau of Unclaimed Property, is approved.

DONE AND ORDERED, in Chambers at the Leon County Courthouse in Tallahassee, Leon County, Florida, this ________ day of ________, 2012.

JUDGE TERRY P. LEWIS

Copy furnished to:

Robert V. Elias, Esq./Jody E. Collins, Esq.

IN THE CIRCUIT COURT OF THE SECOND JUDICIAL CIRCUIT IN AND FOR LEON COUNTY, FLORIDA

CASE NO.: 06-CA-2965

IN RE: The Receivership of DOCTORCARE INC., a Florida Corporation.

____/

RECEIVER'S MOTION FOR APPROVAL OF SECOND CLAIMS DISTRIBUTION REPORT, FINAL DISTRIBUTION ACCOUNTING, FOR ORDER AUTHORIZING FINAL DISTRIBUTION, AND CONFIRMING DEADLINE TO FILE ASSIGNMENTS OF CLAIM

The Florida Department of Financial Services, as Receiver of DoctorCare, Inc. (hereinafter "Receiver"), by and through its undersigned counsel, moves this Honorable Court for entry of an Order approving the Receiver's Second Claims Distribution Report and Final Distribution Accounting, for an Order Authorizing Final Distribution in accordance with the above documents, and Confirming Deadline to File Assignments of Claim, and in support of its Motion states as follows:

- 1. On November 27, 2006, this Court entered an Order Appointing the Florida Department of Financial Services as Receiver for Purposes of Liquidation, Injunction, and Notice of Automatic Stay, effective December 1, 2006.
- 2. DoctorCare, Inc. ("DoctorCare") was a Medicare-approved health maintenance organization ("HMO") with approximately 5,700 subscribers and 4000 providers. Upon DoctorCare's liquidation, those subscribers were assigned to one of two other HMOs which agreed to assume the former DoctorCare members.

- 3. This Court has jurisdiction over the DoctorCare receivership and is "authorized to make all necessary or proper orders to carry out the purposes of" the Florida Insurers Rehabilitation and Liquidation Act, Section 631.021(1), Florida Statutes.
- 4. As DoctorCare was a Medicare Advantage HMO, there was no guaranty association to pay claims. The total number of filed claims is 8268, for a total amount claimed of \$79,757,429.49.
- 5. This Court previously entered an Order Approving Final Claims Report, Claims Distribution Report and Distribution Accounting and Authorizing Distribution on May 17, 2011, a copy of which is attached hereto as Exhibit 1. That Order authorized a partial distribution of estate assets in the amount of \$30,731.63 on allowed claims in Class 2, and the Receiver made said distribution.
- 6. At that time, the Receiver had not obtained the federal release to allow the Receiver to distribute past Class 4. Now that the release has been executed, and the Court has approved the release in its Order Approving Release Agreement With the United States entered on August 21, 2012, the Receiver is able to move forward with the remainder of its obligations pursuant to Chapter 631, Florida Statutes and make a distribution of receivership assets.
- 7. The assets of DoctorCare will be distributed to claimants in accordance with the Claims Distribution Report, summary page, dated September 14, 2012 ("CDR", attached hereto as Exhibit 2). The CDR lists all claims in Class 6 where an approved amount has been recommended in the Final Claims Report and is in accord with Section 631.271, Florida Statutes. (As there are only sufficient funds to pay pro rata through Class 6, the Class 10 claims were not evaluated.)

- 8. Based upon the Final Distribution Accounting, which is attached hereto as Exhibit 3, the Receiver is prepared to distribute \$3,406,081.62 to all allowed claims in Class 6.
- The Receiver recommends that the Second Claims Distribution Report and the Final Distribution Accounting be approved.
- 10. The Receiver further advises the Court that many of the original claimants assigned their claims to other entities, and the Receiver continues to receive Assignment of Claim Change Forms even several years after the deadline to file a Proof of Claim in the estate has passed. The processing of such Assignments requires the Receiver to continually update its databases as well as to verify the accuracy and credibility of said Assignments at a time when it is attempting to finalize its accounting, cut checks, and close out the estate.
- 11. The Assignment Form already notifies claimants that Assignments will not be accepted after this distribution petition/Motion is filed with the Court. (Exhibit 4) The Receiver therefore requests that the Court confirm that the date of filing of this Motion is the last date that the Receiver may accept any further Assignments of Claim.
- 12. Lastly, despite the Receiver's best efforts, some approved claims may have inadequate current address information, and/or may not have provided the Receiver with a W-9 form, required by the Internal Revenue Service. The Receiver asks for authority to remit the funds due to these claimants to the Unclaimed Property Bureau of the Florida Department of Financial Services.

WHEREFORE the Receiver respectfully requests this Court grant this Motion and a) enter an Order approving the Second Claims Distribution Report and Final Claims Distribution Accounting, b) authorizing the Receiver to make the above referenced final distribution to the Class 6 claimants in this receivership, and c) confirm that the date of filing this Motion is the last date that the Receiver may accept any further Assignments of Claim.

RESPECTFULLY SUBMITTED this 27 day of September, 2012.

Robert V Elias, Chief Attorney

Florida Bar No. 530107

Jody E. Collins, Senior Attorney

Florida Bar No. 500445

Florida Department of Financial Services Division of Rehabilitation and Liquidation

2020 Capital Circle S.E. Suita 210

2020 Capital Circle S.E., Suite 310

Tallahassee, Florida 32301

(850) 413-3924 - Telephone

(850) 413-3992 - Facsimile

IN THE CIRCUIT COURT OF THE SECOND JUDICIAL CIRCUIT IN AND FOR LEON COUNTY, FLORIDA

IN RE: The Receivership of DOCTORCARE INC., a Florida Corporation.

CASE NO.: 06-CA-2965

ORDER APPROVING FINAL CLAIMS REPORT, CLAIMS DISTRIBUTION REPORT AND DISTRIBUTION ACCOUNTING AND AUTHORIZING DISTRIBUTION

THIS CAUSE having come before the Court on the Florida Department of Financial Services, as Receiver of DoctorCare, Inc. (hereinafter "Receiver"), Motion for Approval of Final Claims Report, Claims Distribution Report and Distribution Accounting, and for Order Authorizing Distribution, and the Court having reviewed the pleadings of record and otherwise being fully advised in the premises, it is hereby ORDERED AND ADJUDGED as follows:

- 1. The Receiver's Final Claims Report dated April 1, 2011 is hereby approved.
- The Receiver's Claims Distribution Report dated April 14, 2011, attached as Exhibit 2 to the Receiver's Motion is hereby approved.
- The Receiver's Distribution Accounting, attached as Exhibit 4 to the Receiver's Motion, is hereby approved.
- 4. The Receiver is authorized and directed to make a distribution of estate assets in the amount of \$30,731.63 on allowed claims in Class 2 in this receivership.
- The Receiver's recommendation that the distribution amounts intended for claimants who did not respond to the Receiver's inquiries, or where inadequate address information

EXHIBIT 1

Exhibit C

exists, be transferred to the Florida Department of Financial Services, Bureau of Unclaimed Property, is approved.

6. The Receiver is authorized to incorporate any future claimant information updates resulting from the distribution process into its database.

DONE AND ORDERED, in Chambers at the Leon County Courthouse in Tallahassee, Leon County, Florida, this _______day of May, 2011.

JUDGE TERRY P. LEWIS

Copy furnished to: William A. Spillias, Esq.

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUII DOCTORCARE, INC CLAIMS DISTRIBUTION REPORT

| SUMMARYTOTALS | | | | |
|--|------------------------------------|---|---|--|
| TOTAL AMOUNT CLAIMED TOTAL AMOUNT RECOMMENDED | \$70,495,621.35 \$15,169,625.92 | | | |
| TOTAL NUMBER | 858 | | | |
| Secured Claims | | | | |
| COUNT OF SECURED CLAIMS: AMOUNT CLAIMED FOR SECURED CLAIMS: AMOUNT RECOMMENDED FOR SECURED CLAIMS: | | a | | |
| Unsecured Claims | | | | |
| COUNT OF CLASS 1 CLAIMS : AMOUNT CLAIMED FOR CLASS 1 CLAIMS : | i. | 0 | COUNT OF CLASS & CLAIMS : AMOUNT CLAIMED FOR CLASS & CLAIMS : | \$70,495,621.35 |
| COLINT OF CLASS 2 CLASS 5 | | | | die les les les les les les les les les le |
| AMOUNT CLAIMED FOR CLASS 2 CLAIMS : AMOUNT RECOMMENDED FOR CLASS 2 CLAIMS : | | 0 | COUNT OF CLASS 7 CLAIMS : AMOUNT CLAIMED FOR CLASS 7 CLAIMS : | 0 |
| COUNT OF CLASS 3 CLAIMS : | | 0 | COUNT OF CLASS B CLAIMS: | 0 |
| AMOUNT CLAIMED FOR CLASS 3 CLAIMS : AMOUNT RECOMMENDED FOR CLASS 3 CLAIMS : | | | AMOUNT CLAIMED FOR CLASS 8 CLAIMS : AMOUNT RECOMMENDED FOR CLASS 8 CLAIMS : | |
| COUNT OF CLASS 4 CLAIMS : | | 0 | COUNT OF CLASS 9 CLAIMS: | 0 |
| AMOUNT CLAIMED FOR CLASS 4 CLAIMS : AMOUNT RECOMMENDED FOR CLASS 4 CLAIMS : | | | AMOUNT CLAIMED FOR CLASS 9 CLAIMS: AMOUNT RECOMMENDED FOR CLASS 9 CLAIMS: | |
| COUNT OF CLASS 5 CLAIMS: | | 0 | COUNT OF CLASS 10 CLAIMS: | 0 |
| AMOUNT CLAIMED FOR CLASS 5 CLAIMS : AMOUNT RECOMMENDED FOR CLASS 5 CLAIMS : | | | AMOUNT CLAIMED FOR CLASS 10 CLAIMS : AMOUNT RECOMMENDED FOR CLASS 10 CLAIMS : | |

Page number 109 09/14/2012 15:23:53

DoctorCare, Inc. Distribution Accounting Projected for September 2012 Distribution

ESTIMATED ASSETS AT AUGUST 31, 2012

Value Reference 3,410,487.75 Schedule A Accrued Interest Rec. (To be paid 9/01/2012) 6,000.00 Schedule D **Total Assets** \$ 3,416,487.75

ESTIMATED FUNDS RETAINAGE

| | Value | Reference | |
|--|-----------------|------------|--|
| Class I - Administrative Claims Retainage for Receiver Expenses Estimate (Septrmber 2012- December 2012) | 4,406.13 | Schedule B | |
| Discharge Expenses Retainage for records storage, records destruction, tax return prep. & labor | 6,000.00 | Schedule E | |
| Total Proposed Retainage | 10,406.13 | | |
| TOTAL AVAILABLE TO DISTRIBUTE | \$ 3,406,081.62 | | |

DISTRIBUTION RECOMMENDATION

| | Claims Value | Le | ss Previous Claims Distributions | | Value of Claims Outstanding | Apply Adv. Pmts. to Guaranty Assoc. | | ecommended Distribution | % Value of Claims Outstanding | % Value of Gross Filed Claims | Total % of Claims Value Distributed |
|--|---------------------|----|-------------------------------------|----|--------------------------------|---|----|----------------------------|-------------------------------------|-------------------------------------|---|
| Class I - Administrative Claims-Guaranty Funds | \$ 12 | 5 | | 5 | | - | s | | 0.0000% | 0.0000% | 0.0000% |
| Class II - Loss Claims-Guaranty Funds | 1 - 3.60 | | | | 4.4 | | | | 0.0000% | 0.0000% | |
| Class II - Loss Claims-Other | 30,731.63 | | 30,731.63 | | | | | - 1 | 0.0000% | 0.0000% | |
| Class III - Return Premium Claims-Guaranty Funds | - | | 7.4 | | 1.7 | | | 1. | 0.0000% | 0.0000% | |
| Class III - Return Premium Claims-Other | 9 | | - A- | | | | | | 0.0000% | 0.0000% | |
| Class IV - Federal Government Claims | 4 | | 1941 | | | | | | 0.0000% | 0.0000% | Contract. |
| Class V - Employee Claims | | | 2 | | | - | | | 0.0000% | 0.0000% | |
| Class VI - General Creditors Claims | 15,169,625.92 | | | | 15,169,625.92 | | | 3,406,081,62 | 22.4533% | 22 4533% | 3,02137 |
| Class VII - State & Local Government Claims | | | 2 | | | | | | 0.0000% | 0.0000% | |
| Class VIII - Late Filed Claims | - | | • | | 201 | | | 2.0 | 0.0000% | 0.0000% | |
| Class IX - Surplus/Other-GA | 14.1 | | Ψ, | | | | | 4.5 | 0.0000% | 0.0000% | |
| Class iX - Surplus/Other Claims | | | | | 2 | | | | 0.0000% | 0.0000% | |
| Class X - Shareholder Claims | 3,018,978.20 | | | | 3,018,978.20 | | | | 0.0000% | 0.0000% | |
| Totals | \$ 18,219,335.75 | \$ | 30,731.63 | \$ | 18,188,604.12 | \$ | \$ | 3,406,081.62 | 300000 | 0.000010 | 0.000070 |

Index to Attached Schedules:

Schedule A - Available Cash Projection
Schedule B - Estimated Funds to be Retained by the Receiver for Discharge of the Estate
Schedule C - Allocated State Funds Expensed
Schedule D - Interest Earnings Projection - Pooled Cash
Schedule E - Receiver Discharge Expenses

EXHIBIT 3

DoctorCare, Inc. Available Cash Projection Projected for September 2012 Distribution

| | Casl | Bal. as of July 31, 2012 | August | |
|---|------|-----------------------------|-------------------------|---|
| Beginning Pooled Cash Balance | 1 | V | \$ 3,406,114.78 | ì |
| Direct Receiver Expenses (Actual or Estimated) | 1 | / | Ashab | |
| Rent-Storage & Utilities Sub-total | | / | 150.00 150.00 | |
| Allocated Receiver Expenses (Estimated) | | . /: | | 9 |
| Labor & Benefits | | | 1,322.00 | 1 |
| Indirect Expenses Sub-total | | | 380.00 | 4 |
| Sub-total | | | 1,702.00 | |
| Cash Balance Before Interest Earnings | | V | 3,404,262.78 | |
| Interest Earnings | | Λ | | |
| Pooled Cash: | | / \ | | |
| Actual SPIA Earnings for July to be credited on | | Λ Δ | | |
| 08/01/2012. | | 1 | 6,224.97 | |
| | - 1 | \ | | |
| | | | | |
| | 1 | 1 | | |
| Ending Pooled Cash Balance | \$ | 3,406,114.78 | \$ 3,410,487.75 | |
| | | | | |

Assumptions for Allocated Receiver Expenses:

¹ Labor & Benefits: This estimate is based on a four month actual average. Doubled for increased activity leading up to distribution.

| April Actual | \$ | 1,901.86 |
|--------------------------------------|----|----------|
| May Actual | 3- | 395.93 |
| June Actual | | 176.28 |
| July Actual | | 171.14 |
| Sub-total | - | 2,645.21 |
| 4 mth. actual average (rounded) | | 661.00 |
| Doubled for increased activity level | \$ | 1,322.00 |

Indirect Expenses: This estimate is DoctorCare's estimated pro rata share of the Receiver's estimated total indirect expenses. The pro rata share calculation is based on DoctorCare's estimated total assets divided by the Receiver's estimated total assets for all receiverships.

| Estimated Total Asset % | 0.23% |
|----------------------------------|------------------|
| Estimated Total for the Receiver | \$ 165,000.00 |
| Estimated Expense (rounded) | \$ 380.00 |
| | |

DoctorCare, Inc.
Estimated Funds to be Retained by the Receiver for Discharge of the Estate
Estimated from September 2012 through the Projected Discharge Date of December 2012

| | Sentine | | Schleilibei | | October | | November | | December | Ca | Calculation |
|--|--------------|---|--------------|----|----------|---|----------|---|----------|----|-------------|
| Direct Receiver Eventer | / | w | 3,410,487.75 | | 2,554.13 | • | 3,702.13 | 5 | 1,850.13 | | |
| Rent - Storage | \ | | 150.00 | | 150.00 | | 150.00 | | 150.00 | | |
| Sub-total | \ / | | 150.00 | | 150.00 | | 150.00 | | 150.00 | v | 600.00 |
| Allocated Receiver Expenses Labor & Benefits Indirect Expenses | > | | 1,322.00 1 | | 1,322.00 | | 1,322.00 | | 1,322.00 | | |
| Sub-total | > | | 1,702.00 | | 1,702.00 | | 1,702.00 | | 1,702.00 | 69 | 6,808.00 |
| Claims Distribution (Approx.) | < | | 3,406,081.62 | | | | | | | | |
| Cash Balance Before Interest Earnings | _ | | 2,554.13 | | 702.13 | | 1,850.13 | | (1.87) | | |
| Interest Earnings | / | | | | | | | | | | |
| Estimate based on assumed SPIA APR on the previous month's average Pooled Cash | / | | | | | | | | | | |
| batance (see schedule D). | | | ď | | 3,000.00 | | | | | 4 | 3,000.00 |
| Projected Ending Cash Balance | 3,410,487.75 | s | 2,554.13 | ., | 3,702.13 | 5 | 1,850.13 | 5 | (1.87) | | |

Assumptions for Allocated Receiver Expenses:

1. Labor & Benefits: This estimate is based on a four month actual average doubled for increased labor activity through discharge.

| April Actual | U | 00 100 1 | |
|---|----|----------|--|
| | 9 | 98.108,1 | |
| May Actual | | 395.93 | |
| June Actual | | 176.28 | |
| | | 171.14 | |
| | | 2,645.21 | |
| mth. actual average (rounded) | 69 | 661.00 | |
| Doubled for increased distribution activity | 69 | 1,322.00 | |

² Indirect Expenses: This estimate is DoctorCare's estimated pro rata share of the Receiver's estimated total indirect expenses. The pro rata share calculation is based on DoctorCare's estimated total assets divided by the Receiver's estimated total assets for all receiverships.

0.23% 165,000.00 380.00 Estimated Total Asset %
Estimated Total for the Receiver
Estimated Expense (rounded)

3 The August 2012 interest is not included in the 'Retainage Calculation' as it is included as Accrued Interest in the Estimated Assets at August 31, 2012 on the Distribution Accounting Statement.

Exhibit C

Allocated State Funds Expensed
Estimated from August 2012 through the Projected Discharge Date of December 2012
THIS STATEMENT INCLUDED FOR INFORMATION PURPOSES ONLY - AMOUNTS NOT PART OF DISTRIBUTION CALCULATION DoctorCare, Inc.

| | A | ugust | Ø | September | O | October | Š | November | Dec | December | | Totale | |
|---|----|----------|----|-----------|----|----------|----|----------|-----|----------|----|----------|----|
| Accrued Allocated State of Florida Expenses (Estimated) | | | | | | | | | | | | | 7 |
| Labor & Benefits \$ | 69 | 240.00 1 | 69 | 240.00 | 69 | 240.00 1 | 69 | 240.00 1 | 69 | 240.00 | 69 | 1,200.00 | |
| Indirect Expenses | | 30.00 | | 30.00 | | 30.00 2 | | 30.00 2 | | 30.00 2 | 49 | 150.00 | |
| lotal | \$ | 270.00 | 69 | 270.00 | 4 | 270.00 | 69 | 270.00 | es. | 270.00 | 69 | 1,350.00 | 67 |

Assumptions for Allocated State of Florida Expenses:

Labor & Benefits: This estimate is based on a four month actual average doubled for increased labor activity through discharge.

| April Actual | | 30.62 | |
|---|----|--------|--|
| ly Actual | | 91.90 | |
| une Actual | | 178.40 | |
| uly Actual | | 166.49 | |
| ub-total | | 467.41 | |
| mth. actual average (rounded) | 69 | 120.00 | |
| Doubled for increased distribution activity | 65 | 240 00 | |

Indirect Expenses: This estimate is DoctorCare's estimated pro rata share of the State's estimated total indirect expenses. The pro rata share calculation is based on DoctorCare's estimated total assets divided by the Receiver's estimated total assets for all receiverships.

| Estimated Total Asset % | | 0.23% |
|-------------------------------|----|-----------|
| Estimated Total for the State | 49 | 13,000.00 |
| Estimated Expense (rounded) | 69 | 30.00 |

³ Per current Receiver policies and procedures, these accumulated amounts are recorded directly against estate equity as opposed to a liability account.

DoctorCare, Inc. Interest Earnings Projection - Pooled Cash Projected for September 2012 Distribution

| nterest accrued for August | |
|--|------------------------------------|
| Beginning cash balance at 8/01/2012 Ending cash balance at 08/31/2012 | \$ 3,406,114.78 3,410,487.75 |
| Average cash balance for August Assumed SPIA interest rate (Annualized) | 3,408,301.27 2.009 |
| Subtotal (Annualized) | 68,166.03 |
| Accrual for August (Rounded) | \$ 6,000.00 |
| nterest accrued for September | |
| Beginning cash balance at 09/01/2012 | 3,410,487.75 |
| Ending cash balance at 09/30/2012 | 2,554.13 |
| Average cash balance for September | 1,706,520.94 |
| Assumed SPIA interest rate (Annualized) | 2.00% |
| Subtotal (Annualized) | 34,130.42 |
| Accrual for September (Rounded) | \$ 3,000.00 |
| nterest accrued for October | |
| Beginning cash balance at 10/01/2012 | 2,554.13 |
| Ending cash balance at 10/31/2012 | 3,702.13 |
| Average cash halance for October | 0.400.40 |
| Average cash balance for October Assumed SPIA interest rate (Annualized) | 3,128.13 2.00% |
| Subtotal (Annualized) | 62.56 |
| Accrual for October (Rounded) | \$ |
| nterest accrued for November | |
| Beginning cash balance at 11/01/2012 | 3,702.13 |
| Ending cash balance at 11/30/2012 | 1,850.13 |
| Average cash balance November 2010 | 2,776.13 |
| Assumed SPIA interest rate (Annualized) | 2.00% |
| Subtotal (Annualized) | 55.52 |
| Accrual for November (Rounded) | \$ - J. |
| iterest accrued for December | |
| Beginning cash balance at 12/01/2012 | 1,850.13 |
| Ending cash balance at 12/31/2012 | (1.87) |
| Average cash balance for December | 924.13 |
| Assumed SPIA interest rate (Annualized) | 2.00% |
| Subtotal (Annualized) | 18.48 |
| Accrual for December (Rounded) | \$ |

DoctorCare, Inc. Receiver Discharge Expenses Projected for September 2012 Distribution

Discharge Expenses (Projected for Post 12/31/2012)

Records Storage, Records Destruction, Labor 2012 Tax Return Preparation Total

6,000.00

\$ 6,000.00



Division of Rehabilitation and Liquidation www.floridainsurancereceiver.org

| For DFS p | urposes only; |
|-----------|---------------|
| | Adjuster |
| | Date |
| | Supervisor |
| | Date |

Assignment of Claim Request Change Form

| Policy #: | Claim #: |
|--|--|
| And the second s | Receiver's ID#/Suffix: |
| Claimant name (you or you | firm's name) and address currently on file with Receiver: |
| Claimant Name: | |
| Address: | |
| City: | State: Zip: |
| changed to show that the person including any future mailings an wording on this form and no page. | your firm are requesting that the Receiver's records for your claim be permanent n/entity entered below is the new owner of the title, interest and rights to your clain d distributions if they occur. Please note that no alterations can be made to the form can be obscured or redacted. |
| New Owner Name: | |
| Address: | |
| City: | State: Zip: |
| Phone #: | |
| Vith your signature, you acknowle | cude that it is your intent to sell your civilit sun mai me number nume or me cisim ms |
| differ from the amount ultimately amount may not be absolutely de and represent that you or your estate of the claim and the status claim and that you or your firm hat please have your signature not the instructions to: The Depart | distributed in the Receivership proceeding with respect to the claim, and that suctermined until the conclusion of the Receivership proceeding. You further acknowledging has adequate information concerning the business and financial condition of the of the Receivership proceeding to make an informed decision regarding the sale of the sindependently made an analysis and decision to enter into the assignment. |
| differ from the amount ultimately amount may not be absolutely de and represent that you or your estate of the claim and the status claim and that you or your firm hat please have your signature not the instructions to: The Depart | distributed in the Receivership proceeding with respect to the claim, and that suctermined until the conclusion of the Receivership proceeding. You further acknowledging has adequate information concerning the business and financial condition of the of the Receivership proceeding to make an informed decision regarding the sale of the sindependently made an analysis and decision to enter into the assignment. **Tarized** below and return this form along with the supporting documentation as outlined ment of Financial Services, Division of Rehabilitation and Liquidation, Attention: Claims of Capital Circle SE Suite 310, Tallahassee, FL 32301. |
| differ from the amount ultimately amount may not be absolutely deand represent that you or your estate of the claim and the status claim and that you or your firm had elease have your signature not in the instructions to: The Depart Dept — Assignment of Claim, 202 Claimant Signature Swear or affirm that I am the claim authorized to sign this form | distributed in the Receivership proceeding with respect to the claim, and that suctermined until the conclusion of the Receivership proceeding. You further acknowledgirm has adequate information concerning the business and financial condition of the of the Receivership proceeding to make an informed decision regarding the sale of the independently made an analysis and decision to enter into the assignment. **Tarized** below and return this form along with the supporting documentation as outlined ment of Financial Services, Division of Rehabilitation and Liquidation, Attention: Claims of Capital Circle SE Suite 310, Tallahassee, FL 32301. **Page 18.1.** **Relationship to Claimant** **Relationship to Claimant** **Independently** **Independently** **Relationship to Claimant** **Independently** **Relationship to Claimant** **Independently** **Relationship to Claimant** **Independently** **Relationship to Claimant** **Independently** **Independently** **Relationship to Claimant** **Independently** **Relationship to Claimant** **Independently** **Relationship to Claimant** **Independently** **Independently** **Relationship to Claimant** **Independently** **Independently** **Relationship to Claimant** **Independently** * |
| differ from the amount ultimately amount may not be absolutely deand represent that you or your estate of the claim and the status claim and that you or your firm had elease have your signature noon the instructions to: The Depart Dept — Assignment of Claim, 202 Claimant Signature swear or affirm that I am the claim authorized to sign this form as well as the contained on th | Parized below and return this form along with the supporting documentation as outlined ment of Financial Services, Division of Rehabilitation and Liquidation, Attention: Claims 0 Capital Circle SE Suite 310, Tallahassee, FL 32301. Date Relationship to Claimant |
| differ from the amount ultimately amount may not be absolutely deand represent that you or your estate of the claim and the status claim and that you or your firm had elease have your signature not in the instructions to: The Depart Dept — Assignment of Claim, 202 Claimant Signature Swear or affirm that I am the claim authorized to sign this form | distributed in the Receivership proceeding with respect to the claim, and that suctermined until the conclusion of the Receivership proceeding. You further acknowledging has adequate information concerning the business and financial condition of the of the Receivership proceeding to make an informed decision regarding the sale of the sindependently made an analysis and decision to enter into the assignment. **Tarized** below and return this form along with the supporting documentation as outlined ment of Financial Services, Division of Rehabilitation and Liquidation, Attention: Claims 0 Capital Circle SE Suite 310, Tallahassee, FL 32301. **Date** Relationship to Claimant Relationship to Claimant Relationshi |

EXHIBIT 4 Exhibit C

Assignment of Claim Instructions

Support documents, as specified below, <u>must</u> accompany your request. The Receiver reserves the right to validate any change request received and may request additional information from you. Please contact us if you have questions by clicking on the "Contact Us Form" in the website's <u>www.myfloridacfo.com/receiver</u> navigation pane or you may call Consumer Services at 800-882-3054.

Assignments of claim will not be accepted after the distribution petition has been filed with the Court.

- Properly executed <u>Assignment of Claim Change Request Form.</u>
- Properly executed Claim Assignment Agreement.
- Forms must be signed and notarized with no information obscured, altered or redacted.
- If the claimant on file with the Receiver is not an individual, the change forms should be signed by an individual with the authority to sign on behalf of the company/corporation/drs office etc. If it is not a listed officer on the Secretary of States filing, supporting documentation confirming the person is authorized to act on the claimants behalf must be submitted.
- If the claimant name and/or address on file with the Receiver differs from the current claimant name and address, please see www.myfloridacfo.com/receiver for forms and instructions. This information must also be submitted with the Assignment of Claim Change Request Form and Claim Assignment Agreement.

Thomas, Melody

From: noreply@myflcourtaccess.com

Sent: Thursday, September 27, 2012 12:00 PM
To: Collins, Jody; Thomas, Melody; Cowart, Andrea
Subject: Processing Completed for Filing # 314002

Dear Jody E Collins:

This email verifies the processing of Filing # 314002 submitted by you to Circuit Court for Leon County, Florida Circuit Civil division on 09/27/2012 10:37:10 AM.

Case Number: 372006CA002965XXXXXX

| # | Document Type | Status | Filing Date | Rejection Reason | Your Attachment |
|---|---|----------|-------------|-------------------------|--|
| 1 | Applications, Motions and Requests Motion For | Accepted | 09/27/2012 | | H:\Jody\DoctorCare\DCI - MOTION TO APPROVE SECOND CLAIMS DISTRIBUTION REPORT.pdf |

This is a non-monitored email. Do not reply directly to it. If you have any questions about this filing, please contact the Circuit Court for Leon County, Florida Circuit Civil division.

Please remember, rule 2.525, Rules of Judicial Administration, requires that any document filed electronically must be followed-up and filed with the Clerk as a paper document, with original signatures, during the first 90 days of eFiling.

Some counties have completed the 90-day paper document follow-up period and other counties have received exemption from this rule. Please verify with the filing county as to their current paper document follow-up requirements.

Thank you, FACC ePortal Staff

IN THE CIRCUIT COURT OF THE SECOND JUDICIAL CIRCUIT, IN AND FOR LEON COUNTY, FLORIDA

In Re: The Receivership of DOCTORCARE INC., a Florida corporation.

CASE NO.: 2006-CA-2965

ORDER GRANTING THE DEPARTMENT OF FINANCIAL SERVICES MOTION TO REOPEN THE DOCTORCARE, INC., RECEIVERSHIP

THIS CAUSE was considered on the Department of Financial Services (hereinafter "Department" Motion to Reopen the Receivership of DoctorCare, Inc., ("Respondent"). The Court having reviewed the pleading of record and otherwise being fully advised in the premises finds as follows:

- 1. This Court has jurisdiction pursuant to section 631.021(1), Florida Statutes, and venue is proper pursuant to section 631.021(2), Florida Statutes.
- 2. Respondent was a corporation authorized to transact the business of a Medicareapproved health maintenance organization in the State of Florida pursuant to the Florida Insurance Code.
- 3. Respondent was ordered into receivership for purposes of liquidation on November 27, 2006. This Court entered an order to discharge the estate on January 18, 2013.
- 4. The Department has identified additional assets belonging to DoctorCare, Inc. in the amount of approximately seven hundred fifty thousand dollars.
- 5. Based on the amount available, it is cost-effective to reopen the DoctorCare estate.

THEREFORE, IT IS HEREBY ORDERED AND ADJUDGED as follows:

6. The Department of Financial Services Motion to Reopen the Receivership of DoctorCare, Inc., is hereby granted.

Page 1 of 2

- 7. The Department is appointed to act as Receiver of DoctorCare, Inc.
- 8. This Court's November 27, 2006 Order Appointing the Department as Receiver of DoctorCare for purposes of Liquidation, Injunction, and Notice of Automatic Stay is hereby revived and, to the extent applicable, in full force and effect.
- 9. In accordance with the Distribution Order, September 27, 2012 was the last date that the Receiver could accept any further assignments of claims.

| DONE and ORDERED in Chambers at the | Leon County Courthouse in Tallahassee, |
|--|--|
| Florida this day of October, 2014. | |
| | |
| | CIRCUIT JUDGE |