



DEPARTMENT OF FINANCIAL SERVICES

Division of Rehabilitation and Liquidation  
[www.myfloridacfo.com/receiver](http://www.myfloridacfo.com/receiver)

**Si necesita una versión en español de este aviso, visite el sitio web de la  
División de Rehabilitación y Liquidación [www.myfloridacfo.com/Receiver](http://www.myfloridacfo.com/Receiver).**  
(If you need a Spanish version of this notice, visit the Receiver's website at [www.myfloridacfo.com/Receiver](http://www.myfloridacfo.com/Receiver))

**NOTICE TO POLICYHOLDER –SEPTEMBER 17, 2012  
REGARDING THE RECEIVERSHIP OF AVAHEALTH, INC. d/b/a KEY INSURANCE PLAN**

Dear Policyholder:

On August 31, 2012, AvaHealth, Inc. d/b/a Key Insurance Plan ("AvaHealth") was ordered into receivership for purposes of liquidation by the Second Judicial Circuit Court in Leon County, Florida. The Florida Department of Financial Services is the court appointed Receiver of AvaHealth. AvaHealth was previously ordered into receivership for purposes of rehabilitation effective July 2, 2012.

AvaHealth was a health insurer, based in Tampa, which had approximately 1,200 policyholders at the time of liquidation. This Notice is being sent to you because AvaHealth's records indicate that you are one of the policyholders and have a health insurance policy with AvaHealth. Additional information regarding the receivership, including a copy of the Liquidation Order, is available at the Receiver's website, [www.myfloridacfo.com/receiver](http://www.myfloridacfo.com/receiver).

**POLICY STATUS:**

**Continuation of Coverage:** Under the terms of the Liquidation Order and Florida Statutes, the policies are **not** cancelled by the Liquidation Order. The Florida Life and Health Insurance Guaranty Association ("FLAHIGA") will take over AvaHealth's obligations to collect premiums and administer policies. Although FLAHIGA will give you at least 180 days notice prior to terminating your AvaHealth policy, ultimately, the AvaHealth policies will be terminated. Please see the enclosed letter from FLAHIGA regarding the current continuation of coverage and ultimate termination of the AvaHealth policies. You may also want to contact your insurance agent for additional information and advice regarding your health insurance coverage, including advice as to whether or not you should seek replacement coverage.

**PREMIUM ISSUES:**

**Policyholders should continue to pay premiums in order to continue their insurance coverage until their policies are terminated by FLAHIGA.** Please note, however, that effective October 1, 2012, AvaHealth is no longer accepting any automated premium payments or credit cards. To make

your premium payments, you will need to send a check, payable to FLAHIGA, to the following address:

Florida Life and Health Insurance Guaranty Association  
PO Box 47587  
Jacksonville, FL 32247-7587

The payment should also include the name of the policyholder and the policy number.

**Premium Refunds/Unearned Premium:** Upon termination/non-renewal of policies by FLAHIGA, the guaranty association will refund any unearned premiums. Premium refunds covered by FLAHIGA are mailed from or on behalf of the guaranty association. If you believe you are due a refund, please contact your agent or the guaranty association for assistance.

### **CLAIMS ISSUES:**

FLAHIGA will take over AvaHealth's obligations to pay all valid policyholder claims incurred during the life of the policy, subject to statutory limits. Contact information for FLAHIGA will be posted on the Receiver's website in the near future. In the meantime, policyholders with questions regarding AvaHealth should continue to contact the company directly at 877-539-2911.

### **PROOF OF CLAIM FORM:**

Most, if not all, medical claims are eligible for coverage by FLAHIGA and should not result in the need to file a claim against the estate of AvaHealth. However, claims for losses not covered by FLAHIGA, claims which are limited due to limits or caps, or agent claims, may become claims against the estate of AvaHealth and may be submitted to the Receiver by filing a proof of claim form. A proof of claim form for policyholders, medical providers or agents who have claims which were not paid by FLAHIGA, can be found on the Receiver's website, [www.myfloridacfo.com/Receiver](http://www.myfloridacfo.com/Receiver). All other claimants will be mailed a proof of claim form at a later date. The deadline for timely filing a proof of claim form is 11:59:59 p.m. on March 1, 2013.

### **CONTACTING THE RECEIVER:**

Please contact the Receiver by using the "Contact Us" form at the Receiver's website, [www.myfloridacfo.com/Receiver](http://www.myfloridacfo.com/Receiver) if you have any non-claims related questions regarding the receivership (for claims questions, please refer to the phone number provided under Claims Issues). You may also contact the Florida Department of Financial Services, as Receiver, at 1-800-882-3054 (in Florida only) or (850) 413-3081.