IN THE DISTRICT COURT OF OKLAHOMA COUNTY STATE OF OKLAHOMA

DEC 2 8 2023 RICK WARREN

	COURT CLERK
STATE OF OKLAHOMA, ex rel.) 126
GLEN MULREADY, Insurance Commissioner,)
)
Petitioner,)
\mathbf{v}_{ullet}) Case No. CJ-2023-3105
FRIDAY HEALTH PLANS OF) Judge Natalie C. Mai
OKLAHOMA, INC., a licensed health)
maintenance organization in the State of)
Oklahoma,)
Defendant.)

ORDER APPROVING RECEIVER'S COMBINED APPLICATION FOR APPROVAL OF (A) NOTICE OF LIQUIDATION, (B) FORM OF PROOF OF CLAIM AND INSTRUCTIONS AND APPLICATION FOR APPROVAL OF RECEIVER'S CLAIMS REPORTING AND EVALUATION PLAN

This matter comes on before the Court on this 28 day of December, 2023, on the Receiver's Combined Application for Approval of (a) Notice of Liquidation, (b) Form of Proof of Claim and Instructions and Application for Approval of the Receiver's Claims Reporting and Evaluation Plan ("Combined Application"). Upon review of the Receiver's Combined Application, there being no filed objections to the Receiver's Combined Application, the Court being fully advised, finds that the Receiver's Combined Application should be and hereby is granted.

The Court further finds that the notification to potential claimants and proof of claims process as detailed in the Receiver's Combined Application and this Order satisfies any and all due process requirements as contemplated by the OUILA and under the circumstances of this receivership proceeding.

IT IS THEREFORE ORDERED, ADJUDGED and DECREED that the proposed:

A. Receiver's (a) Notice of Liquidation, (b) Form of Proof of Claim and Instructions; and

B. Receiver's claim reporting and evaluation plan.
 Are hereby approved.

The Receiver is authorized and ordered to proceed with mailing the Notice of Liquidation and Deadline for filing Proof of Claim to potential claimants of record, directing said claimants to obtain a Proof of Claim form from the Oklahoma Receivership Office, Inc.'s website, or to request such form by contacting the Oklahoma Receivership Office, except for those policyholders and medical providers whose claims are deemed filed as allowed by the terms of this Order.

The Court hereby orders and authorizes alternative procedures for the allowance and filing of certain claims. The Court dispenses with the filing of proof of claims by policyholders and medical providers who provided services to policyholders whose aggregate claims do not exceed the \$500,000 lifetime statutory limit of the Oklahoma Life and Health Insurance Guaranty Association shall have their claim deemed filed in the amount of the aggregate total not in excess of the \$500,000 limit. It is also ordered that if any policyholder's or medical provider's claims exceed the statutory limit, the Receiver shall notify the policyholder or medical provider of the requirement to file a proof of claim.

The Receiver's proposed claims reporting and evaluation plan as set forth in the Combined Application is approved. The following claims reporting and evaluation schedule is hereby set by the Court (subject to modification for good cause shown):

Deadline	Activity to Occur On or Before Deadline
2/28/24 4/26/24 10/26/24	Claims filing deadline. Receiver's Report on Timely-Filed Claims due. Receiver's First Claims Evaluation and Request for Confirmation due (on claims due to be adjudicated).

Receiver's Supplemental Claims Evaluations and Requests for Confirmation (on subsequently evaluated claims ready to be adjudicated) will be submitted to the Court in a schedule to be set at the time of filing the Receiver's First Claims Evaluation

IT IS SO ORDERED.

NATALIE MAI

Natalie Mai Judge of the District Court

CERTIFIED COPY
AS FILED OF RECORD
IN DISTRICT COURT

DEC 2 8 2023

RICK WARREN SOURT CLERK

APPROVED:

Robert A. Nance, OBA No. 6581

George M. Emerson, OBA No. 13159

RIGGS, ABNEY, NEAL, TURPEN

ORBISON & LEWIS

528 NW 12th Street

Oklahoma City, Oklahoma 73103

Phone: (405) 843-9909 rnance@riggsabney.com

gemerson@riggsabney.com

ATTORNEYS FOR GLEN MULREADY,

INSURANCE COMMISSIONER, AS RECEIVER

OF FRIDAY HEALTH PLANS OF OKLAHOMA, INC.

CERTIFICATE OF MAILING

I hereby certify that on the Aby day of December, 2023, a true and correct copy of the foregoing instrument was mailed, postage paid, to:

Oklahoma Receivership Office Attn: Debra Crowe dcrowe@okaro.org

Sherry Standerfer
Oklahoma Insurance Department
Sherry.standerfer@oid.ok.gov

Darren T. Ellingson Ellingson & Associates, L.L.C. dellingson@ellingsonassociates.com

James W. Rhodes Oklahoma Life & Health Insurance Guaranty Association jwrhodes@oklifega.org

FHP ABC 10 South LaSalle Street, Ste. 3300 Chicago, IL 60603

George M. Emerson