

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

STATE OF ALASKA
DEPARTMENT OF COMMERCE, COMMUNITY AND ECONOMIC
DEVELOPMENT
DIVISION OF INSURANCE

550 W. 7th AVENUE, SUITE 1560
ANCHORAGE, ALASKA 99501-3567

STATE OF ALASKA
DEPARTMENT OF COMMERCE, COMMUNITY AND ECONOMIC
DEVELOPMENT
DIVISION OF INSURANCE
550 W. 7th AVENUE SUITE 1560
ANCHORAGE, ALASKA 99513-3567
PHONE: (907) 269-7900

Order No. LD24-21) Insurance Producer
In the Matter of) License Denial Pursuant
ANDREA M. GOING) to AS 21.27.040
NPN# 17792254)
_____)

ACCUSATION AND FINAL ORDER

Lori Wing-Heier, Director of the Division of Insurance (Division), Department of
Commerce, Community, and Economic Development (DCCED), State of Alaska, states
the issues on which the accusation is based as follows:

1. On October 13, 2023, **ANDREA M. GOING (GOING)**, domiciled in the
State of Indiana applied for an Insurance Producer license requesting
Health line of authority with the Division to conduct business in the State
of Alaska.
2. Upon review of the application, **GOING** responded negatively to
background question 2, indicating no administrative actions to report to
the State of Alaska.

ANDREA M. GOING
Accusation and Final Order
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3. The Producer Database and the Attachment Warehouse reflects administrative action was taken against **GOING** in State of Indiana in effect March 10, 2017. **GOING** failed to disclose her administrative action to the Division and provided inaccurate information on her application.
4. On October 17, 2023, correspondence was provided to **GOING** informing of her failure to respond accurately to a background question regarding administrative actions. The Division provided **GOING** the opportunity to voluntarily withdraw the application and provide a new, complete, and accurate application within 30 days. No response was received.
5. Alaska Statute 21.27.040(a) states that “(a) Application for a license shall be made to the director upon forms prescribed by the director. As a part of or in connection with the application, the applicant shall furnish information concerning the applicant's identity, personal history, experience, business record, purposes, and other pertinent facts that the director may reasonably require. The applicant shall declare, subject to penalty of denial, nonrenewal, suspension, or revocation of a license issued by the director, that the statements made in or in connection with the application are true, correct, and complete to the best of the applicant's knowledge and belief...”
6. AS 21.27.020(a) provides: "For the protection of the people of this state, the director may not issue or renew a license except in compliance with this chapter and not issue a license to a person, or to be exercised by a

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person, found by the director to be untrustworthy, incompetent, or who has not established to the satisfaction of the director that the person is qualified under this chapter."

7. AS 21.27.020(b)(4) provides: "To qualify for issuance or renewal of an individual license, an applicant or licensee shall (4) be a trustworthy person."

8. Pursuant to AS 21.27.040(a), **GOING** provided inaccurate information at the time of application. Based on the above **GOING** Insurance Producer license is hereby DENIED.

ORDER

IT IS HEREBY ORDERED, under the provisions of AS 21.27.040(a) that **ANDREA M. GOING** application for the Insurance Producer license in Alaska under National Producer Number (NPN) # 17792254 is DENIED for supplying inaccurate information on the application for licensure.

This Order is effective the 6th day of May 2024.

DocuSigned by:

Lori Wing-Heier

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LORI WING-HEIER, DIRECTOR
DIVISION OF INSURANCE

ANDREA M. GOING
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I hereby certify that, on the 6th day of May, 2024, I mailed copies of the accusation to:

ANDREA M. GOING
9035 ADMIRALS POINTE DRIVE
INDIANAPOLIS, IN 46236
UNITED STATES

[Signature]
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FINAL ORDER

IT IS ORDERED that this license denial is adopted in full resolution of the issues in the case and shall constitute the final order of this matter. **ANDREA M. GOING** may seek licensure in Alaska after a period of 30 days has lapsed after the effective date of this ORDER.

This Order is effective the 3rd day of June 2024.

DocuSigned by:
Lori Wing-Heier
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LORI WING-HEIER, DIRECTOR
DIVISION OF INSURANCE

ANDREA M. GOING
Accusation and Final Order
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