

EXHIBIT A

NOTICE OF THE CLAIM FILING DEADLINE FOR HEALTHCARE PROVIDERS INSURANCE EXCHANGE (IN LIQUIDATION)

On April 7, 2020, the Commonwealth Court of Pennsylvania entered an Order establishing a claim filing deadline in connection with the liquidation of Healthcare Providers Insurance Exchange (HPIX) (In Liquidation).

The Court's Order provides in pertinent part as follows:

ORDER

1. December 31, 2020 is hereby established as the Claim Filing Deadline.
2. Any claim against Healthcare Providers Insurance Exchange (HPIX), the Liquidator, her agents and representatives, or any claim that could affect the assets of HPIX, wherever or however such assets may be owned or held, directly or indirectly, must be filed with the Liquidator no later than the Claim Filing Deadline. Any claims filed after December 31, 2020 may be subject to the late filing provisions of Section 537(b) and (c) of The Insurance Department Act of 1921.¹
3. The mailing Notice attached to this Order as Exhibit A is approved. The Liquidator shall mail by first class mail, as soon as practicable after receipt of this Order, a copy of the mailing Notice to the insureds, claimants, creditors, or potential creditors

¹ Act of May 17, 1921, P.L. 789, *as amended*, added by the Act of December 14, 1977, P.L. 280, 40 P.S. § 221.37(b), (c).

of HPIX as of the date of the Liquidation Order, January 12, 2018.

4. The publication Notice attached to this Order as Exhibit B is approved. The Liquidator shall cause a copy of the publication Notice to be published once in the same newspapers in which the Liquidator filed notice of the Liquidation Order, The Patriot News and The Philadelphia Inquirer, as soon as practicable after receipt of this Order.

Proof of Claim forms may be obtained by sending a request in writing to:

Proof of Claims Department
Statutory Liquidator of Healthcare Providers Insurance Exchange (In
Liquidation)
Pennsylvania Insurance Department
901 North 7th Street
Harrisburg, PA 17102

OR BY CALLING

717-787-7823

OR BY EMAILING

ra-in-claims@pa.gov

Please request a separate proof of claim form for each claim that you wish to file.

s/P. Kevin Brobson, Judge