

FORM AA

CONSENT TO JURISDICTION STATEMENT

Filed with the office of the commissioner of insurance,  
of the state of Wisconsin

BY  
University Health Care (UHC)

Name of Affiliate

On Behalf of the Following Insurers

Name Address  
Unity Health Plans Insurance Corp.  
840 Carolina Street  
Sauk City, WI 53583

Date: 2.10.2016

Name, Title, Address and Telephone Number of Individual to Whom Notices and Correspondence Concerning this Statement  
Should be Addressed:

Christine C. Senty  
VP General Counsel and Secretary  
840 Carolina Street  
Sauk City, WI 53583  
(608) 821-1067

CONSENT TO JURISDICTION

The, (1) UHC, an affiliate of Unity Health Plans Ins. Corp.  
(Affiliate) (Insurer)

an insurer authorized to do business in the state of Wisconsin, pursuant to the requirements of ch. 617, Stats., do hereby  
consent to the jurisdiction of the Commissioner of Insurance and the courts of the state of Wisconsin.

SIGNATURE

UNIVERSITY HEALTH CARE has caused this statement to be  
(Name of Affiliate)

duly signed

on its behalf in the city of Madison and state of Wisconsin  
on the 10<sup>th</sup> day of February, 2016

(Name of Affiliate)  
(SEAL)

BY MICHAEL E. DALLMAN

(Name)

PRESIDENT / CEO

(Title)

Attest: Michael Dallman

(Signature of Officer)

PRESIDENT / CEO

(Title)

CERTIFICATION

The undersigned deposes and says that he or she has duly executed the attached statement dated 2.10, 2016, for and  
on behalf of University Health Care, that he or

(Name of Affiliate)

she is the PRESIDENT / CEO of such company,

(Title of Officer)

and that he or she is authorized to execute and file such instrument. Deponent further says that he or she is familiar with such  
instrument and the contents thereof, and that the facts therein set forth are true to the best of his or her knowledge and belief.

(Signature) Michael E. Dorman  
(Type or print name beneath) MICHAEL E. DORMAN

Subscribed and sworn to this  
10<sup>th</sup> day of February, 2016

Notary Public

My commission expires IS PERMANENT

DANIEL P. BRZOWSKI  
Notary Public  
State of Wisconsin