No. 2026-10059

Official Order
of the
Texas Commissioner of Insurance

Date: 08/04/2026

Subject Considered:

Institution Solutions II LLC
P.O. Box 851795
Richardson, Texas 75085-1795

Default Order
TDI Enforcement File No. 38859

General remarks and official action taken:

This is a default order taken against Institution Solutions II LLC (Respondent) because it failed to comply with requirements to maintain its third party administrator (TPA) certificate of authority. Respondent did not respond to a Notice of Allegations mailed by the Texas Department of Insurance. This order revokes Respondent's certificate of authority.

The following findings of fact and conclusions of law are adopted:

Findings of Fact

Failure to Respond to Notice of Allegations

1. On June 24, 2026, the department sent a Notice of Allegations, attached as Exhibit A, to Respondent.

2. The department sent the Notice of Allegations to Respondent's last known address provided in writing to the department, P.O. Box 851795, Richardson, Texas 75085-1795.

3. Respondent received and waived an opportunity for a hearing because Respondent failed to send the department a written response to the Notice of Allegations within 20 days after the date the Notice of Allegations was mailed.

4. The department's factual allegations set out in the attached Notice of Allegations are incorporated in this order as findings of fact.

Conclusions of Law

1. The commissioner has jurisdiction under Texas law, including TEX. INS. CODE §§ 82.051–82.055, 4151.051, 4151.056, 4151.205, 4151.206, 4151.212, 4151.301-4151.309; TEX. GOV'T CODE §§ 2001.051-2001.178, 2001.003(1); and 28 TEX. ADMIN. CODE §§ 7.1601, 7.1603, and 7.1609.

2. The commissioner has authority to dispose of this case informally under TEX. GOV'T CODE § 2001.056; TEX. INS. CODE § 82.055; and 28 TEX. ADMIN. CODE § 1.47.

3. The department provided proper notice to Respondent under TEX. GOV'T CODE §§ 2001.003(1), 2001.051, 2001.052, 2001.054, and 2001.056(4), and 28 TEX. ADMIN. CODE §§ 1.28 and 1.47.

4. Based on Respondent's failure to send the department a written response to the Notice of Allegations, the department is entitled to disposition by default under 28 TEX. ADMIN. CODE § 1.47.

5. Respondent failed to show compliance with the law.

6. The department's factual and legal allegations set out in the attached Notice of Allegations are incorporated in this order and deemed admitted as true under 28 TEX. ADMIN. CODE § 1.47.

Order

It is ordered that the third party administrator certificate of authority held by Institution Solutions II LLC is revoked.

It is also ordered that Institution Solutions II LLC cease and desist engaging in the business of a third party administrator in Texas.

Signed by:
Amanda Crawford
FE10434BC41A470...

Amanda Crawford
Commissioner of Insurance

Prepared and reviewed by:

Jacob Harry, Staff Attorney
Enforcement

Affidavit

STATE OF TEXAS §
§
COUNTY OF TRAVIS §

Before me, the undersigned authority, personally appeared Daniel Mireles, who, being by me duly sworn, deposed as follows:

"My name is Daniel Mireles and I am employed by the Texas Department of Insurance. I am of sound mind, capable of making this affidavit, and have personal knowledge of these facts which are true and correct.

I have reviewed TDI's records concerning Institution Solutions II LLC. I have confirmed that:

a. The last mailing address provided to the department in writing by Institution Solutions II LLC is P.O. Box 851795, Richardson, Texas 75085-1795.

b. The file maintained by Enforcement contains a Notice of Allegations dated June 24, 2026, which was sent to Institution Solutions II LLC.

c. On June 24, 2026, the Notice of Allegations addressed to Institution Solutions II LLC was mailed first-class and certified, return receipt requested, to their last known address.

Copies of the first-class mail log and certified mail log maintained by Enforcement are attached as Exhibit B and Exhibit C, respectively.

Signed by:
Daniel Mireles
C0FA86E83E0A442...
Affiant

SWORN TO AND SUBSCRIBED before me by means of an interactive two-way audio and video communication on 7/14/2026. This notarial act was an online notarization.

Notary Seal

MARY RUIZ
NOTARY PUBLIC
STATE OF TEXAS
Commission #13079242-7
My Comm. Expires August 23, 2028

Digital Certificate

Signed by:
Mary Ruiz
Z95DC2D59167488...
Notary Public State of Texas

2026-10059

TDI | Texas Department of Insurance

PO Box 12030 | Austin, TX 78711 | 800-578-4677 | tdi.texas.gov

EXHIBIT

A

June 24, 2026

Institution Solutions II, LLC
P.O. Box 851795
Richardson, Texas 75085-1795

Via CM/RRR No.
9214 8901 9403 8330 4443 16

TDI ENFORCEMENT CASE NO. 38859
NOTICE OF ALLEGATIONS AGAINST Institution Solutions II, LLC

The Texas Department of Insurance (TDI) seeks to take disciplinary action against Institution Solutions II, LLC to revoke its certificate of authority to act as a third party administrator. This Notice states the allegations against Institution Solutions II, LLC and the relief sought by TDI.

YOUR WRITTEN RESPONSE IS REQUIRED WITHIN 20 DAYS

YOU HAVE THE RIGHT TO A HEARING AND ARE INVITED TO SHOW COMPLIANCE WITH THE LAW. To request a hearing, you must send a written response to TDI within 20 days of the date this Notice was mailed.

If you fail to send a written response by the deadline, *you waive your right to a hearing*, and TDI may seek disposition by default under 28 TEX. ADMIN. CODE § 1.47, TEX. INS. CODE § 82.055, and TEX. GOV'T. CODE § 2001.056.

If you fail to send a written response by the deadline, without further notice to you, the commissioner of insurance may issue a default order that admits the factual matters asserted, deems all allegations as true, and orders the relief recommended in this Notice.

You must send your written response by mail, fax, or email to:

Jacob Harry, Staff Attorney
Texas Department of Insurance
Enforcement, MC ENF
P.O. Box 12030
Austin, Texas 78711-2030
(512) 490-1020 (Fax)
Jacob.Harry@tdi.texas.gov

Jurisdiction

The commissioner of insurance has jurisdiction over this matter under TEX. INS. CODE §§ 82.051–82.055, 4151.051, 4151.056, 4151.205, 4151.206, 4151.212, 4151.301-4151.309; TEX. GOV'T CODE §§ 2001.003(1) and 2001.051-2001.178; and 28 TEX. ADMIN. CODE §§ 7.1601, 7.1603, and 7.1609.

Factual Allegations

1. On September 6, 2017, TDI issued Institution Solutions II, LLC a third party administrator (TPA) certificate of authority no. 2988827.

2. Texas law states that TPA certificates of authority are effective until suspended, canceled, or revoked.

3. TPAs must file annual reports by June 30th of each year covering the preceding calendar year. The report must include an audited financial statement performed by an independent certified public accountant.

4. TPAs must pay a non-refundable $200 filing fee for each annual report.

5. A TPA is subject to discipline, including revocation of its certificate of authority, if it fails to timely file its annual report.

6. Institution Solutions II, LLC failed to file its annual reports and pay the associated $200 filing fees for calendar year 2024.

7. The department's investigation revealed no active registration for Institution Solutions II, LLC with the Texas Secretary of State.

Legal Allegations

1. Institution Solutions II, LLC failed to timely file annual TPA reports by June 30th on a form prescribed by the commissioner, in violation of TEX. INS. CODE §§ 4151.205 and 4151.301(14), and 28 TEX. ADMIN. CODE § 7.1609.

2. Institution Solutions II, LLC failed to pay the annual $200 TPA filing fee in violation of TEX. INS. CODE § 4151.206(a)(3) and 28 TEX. ADMIN. CODE § 7.1609(a).

3. Institution Solutions II, LLC failed to maintain at all times the qualifications for a certificate of authority, as required by TEX. INS. CODE § 4151.212 and 28 TEX. ADMIN. CODE § 7.1607(e).

4. Institution Solutions II, LLC has willfully violated an insurance law of this state, as contemplated by TEX. INS. CODE § 4151.301(1).

5. Institution Solutions II, LLC has willfully violated a commissioner rule, as contemplated by TEX. INS. CODE § 4151.301(10).

Relief Sought

TDI seeks the following relief:

1. revocation of your TPA certificate of authority;

2. an order mandating you cease and desist from engaging in the acts of a TPA in Texas; and

3. imposition of any other just and appropriate relief to which the department may be entitled to by law, including any combination of the above actions.

Respectfully,

_____

Jacob Harry
State Bar No. 24137475
Texas Department of Insurance
Enforcement, MC ENF
P.O. Box 12030
Austin, Texas 78711-2030
(512) 676-6361 (Direct)
(512) 490-1020 (Fax)
Jacob.Harry@tdi.texas.gov

cc: Leah Gillum, Deputy Commissioner, Fraud and Enforcement Division, MC: ENF
Ginger Loeffler, Litigation Director, Enforcement, MC: ENF

CERTIFICATE OF SERVICE

I, Jacob Harry, certify that a true and correct copy of this *Notice of Allegations Against Institution Solution II, LLC* was sent by the following methods on this 24th day of June, 2026 to:

Institution Solutions II, LLC P.O. Box 851795 Richardson, Texas 75085-1795	*Via CM/RRR No.:*9214 8901 9403 8330 4443 16 *Via First Class Mail*
licensing@isillc.com	*Via Email*

_____
Jacob Harry

Firm Mailing Book For Accountable Mail

2026-10059

Name and Address of Sender
Texas Dept of Insurance
Mail Code ENF
1601 Congress Avenue, Suite 6.900
Austin TX 78701
David Moreno 6.24.2026

Check type of mail or service

- ☐ Adult Signature Required
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery (COD)
- ☐ Insured Mail
- ☐ Priority Mail
- ☑ First-Class Mail
- ☐ Priority Mail Express
- ☐ Registered Mail
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation
- ☐ Signature Confirmation Restricted Delivery

Affix Stamp Here
(if issued as an international certificate of mailing or for additional copies of this receipt). Postmark with Date of Receipt

	USPS Tracking/Article Number	Address (Name, Street, City, State, & Zip Code)	Postage	(Extra Service) Fee	Handling Charge	Actual Value if Registered	Insured Value	Due Sender if COD	ASR Fee	ASRD Fee	RD Fee	RR Fee	SC Fee	SCRD Fee	SH Fee
1	Jacob/38859	Institution Solutions II, LLC P.O. Box 851795 Richardson, Texas 75085-1795	3	74											
2															
3															
4															
5															
6															
7															
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CORRECTION
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$002.40
06/24/2026 ZIP 78701
043M32206395
US POSTAGE

Handling Charge
Registered and
Adult Signature Require
Adult Signature Restricted Deliv
Restricted Delivery
Return Receipt
Signature Confirmation
Signature Confirmation Restricted De
Special Handling

RECEIVED
JUN 25 2026
TDI - ENFORCEMENT

CAPITOL STATION JUN 2026 AUSTIN TX

Total Number of Pieces Listed by Sender
Total Number of Pieces Received at Post Office
Postmaster, Per (Name of receiving employee)

PS Form 3877, June 2015
Completed in Ink
Privacy Note: For more information on USPS privacy policies, visit usps.com/privacy policy.

EXHIBIT
B

UNITED STATES POSTAL SERVICE®

Firm Mailing Book For Accountable Mail

2026-10059

Name and Address of Sender

MC ENF D MORENO
TEXAS DEPARTMENT OF INSURANCE
1601 CONGRESS AVENUE, SUITE 6.900
AUSTIN TX 78701

Check type of mail or service

- ☐ Adult Signature Required
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery (COD)
- ☐ Insured Mail
- ☐ Priority Mail
- ☐ Priority Mail Express
- ☐ Registered Mail
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation
- ☐ Signature Confirmation Restricted Delivery

Affix Stamp Here
(for additional copies of this receipt).
Postmark with Date of Receipt.

	USPS Tracking/Article Number	Addressee (Name, Street, City, State, & ZIP Code™)	Postage	(Extra Service) Fee	Handling Charge	Actual Value if Registered	Insured Value	Due Sender if COD	ASR Fee	ASRD Fee	RD Fee	RR Fee	SC Fee	SCRD Fee	SH Fee
1.	9214 8901 9403 8330 4443 16	INSTITUTION SOLUTIONS II, LLC P.O. BOX 851795 RICHARDSON, TEXAS 75085-1795	1.03	5.30								2.82			
	Jacob/38859														

Handling Charge - if Registered and over $50,000 in value
Adult Signature Required
Adult Signature Restricted Delivery
Restricted Delivery
Return Receipt
Signature Confirmation
Signature Confirmation Restricted Delivery
Special Handling

CAPITOL STATION JUN 2026 AUSTIN, TX 78711

RECEIVED
JUN 25 2026
TDI - ENFORCEMENT

Total Number of Pieces Listed by Sender	Total Number of Pieces Received at Post Office	Postmaster, Per *(Name of receiving employee)*
1		

EXHIBIT C

2026-10059

UNITED STATES POSTAL SERVICE®

Shipment Confirmation Acceptance Notice

A. Mailer Action

Note to Mailer: The labels and volume associated to this form online, **must** match the labeled packages being presented to the USPS® employee with this form.

Shipment Date: 06/24/2026

Shipped From:

Name: MC ENF D MORENO

Address: 1601 CONGRESS AVENUE SUITE 6 900

City: AUSTIN

State: TX ZIP+4® 78701

Type of Mail	Volume
Priority Mail Express®*	
Priority Mail®	
First-Class Package Service®	
Returns	
International*	
Other	1
Total	1

*Start time for products with service guarantees will begin when mail arrives at the local Post Office™ and items receive individual processing and acceptance scans.

B. USPS Action

Note to RSS Clerk:
1. Home screen > Mailing/Shipping > More
2. Select Shipment Confirm
3. Scan or enter the barcode/label number from PS Form 5630
4. Confirm the volume count message by selecting Yes or No
5. Select Pay and End Visit to complete transaction

USPS EMPLOYEE: Please scan upon pickup or receipt of mail. Leave form with customer or in customer's mail receptacle.

USPS SCAN AT ACCEPTANCE

9275 0901 1935 6200 0071 9029 05

Jacob/38859

RECEIVED
JUN 25 2026
TDI - ENFORCEMENT