Session of 2011

HOUSE BILL No. 2076

By Committee on Insurance

1-24

AN ACT concerning insurance; relating to municipal pools; *relating to group-funded pool filings with the insurance commissioner; relating to the extension of the insurance department's anti-fraud divisions exception to disclosure of records under the open records act;* amending K.S.A. 12-2620 and K.S.A. 2010 Supp. 12-2618 and 44-584
 and repealing the existing sections; also repealing K.S.A. 2010 Supp.
 40-2,118.

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9 Be it enacted by the Legislature of the State of Kansas:

Section 1. K.S.A. 2010 Supp. 12-2618 is hereby amended to read as follows: 12-2618. Application for a certificate of authority to operate a pool shall be made to the commissioner of insurance not less than 30 60 days prior to the proposed inception date of the pool. The application shall include the following:

(a) A copy of the bylaws of the proposed pool, a copy of the articles
of incorporation, if any, and a copy of all agreements and rules of the
proposed pool. If any of the bylaws, articles of incorporation, agreements
or rules are changed, the pool shall notify the commissioner within 30 days
after such change.

(b) Designation of the initial board of trustees and administrator.
When there is a change in the membership of the board of trustees or
change of administrator, the pool shall notify the commissioner within 30
days after such change.

(c) The address where the books and records of the pool will be
 maintained at all times. If this address is changed, the pool shall notify the
 commissioner within 30 days after such change.

27 (d) Evidence that the annual Kansas gross premium of the pool will 28 be not less than \$250,000 for each of the categories described in 29 subparagraphs (1) through (4) of this subsection: (1) All property 30 insurance under article 9 of chapter 40 of the Kansas Statutes Annotated 31 except motor vehicle physical damage; (2) motor vehicle liability and physical damage insurance; (3) workers' compensation and employers' 32 liability insurance; (4) all casualty insurance under article 11 of chapter 40 33 34 of the Kansas Statutes Annotated except insurance under categories (2) 35 and (3) above; (5) group sickness and accident insurance if at the date of 36 issue the annual gross premium for such coverage will be not less than

\$1,000,000; and (6) group life insurance if at the date of issue the coverage will insure at least 60% of the eligible participants or the total number of persons covered will exceed 600. The pool shall notify the commissioner within 30 days if the minimum premium qualification or participation requirement is less than that specified in this subsection for any of the above categories of insurance.

7 (e) An agreement binding the group and each member thereof to 8 comply with the provisions of the workers compensation act if such 9 coverage is to be provided by the pool. For all lines of coverage, all 10 members of the pool shall be jointly liable for the payment of claims to the 11 extent of the assets of the pool.

(f) A copy of the procedures adopted by the pool to provide services
with respect to underwriting matters and, with respect to the categories
identified in subsection (d)(1) through (4), safety engineering.

15 (g) A copy of the procedures adopted by the pool to provide claims 16 adjusting and accumulation of income and expense and loss data.

17 (h) A confirmation that specific and aggregate excess insurance 18 provided by an insurance company holding a Kansas certificate of authority or reinsurance approved by the commissioner is or will be in 19 20 effect concurrent with the assumption of risk by the pool, as selected by 21 the board of trustees of the pool, or adequate surplus funds as approved by 22 the commissioner, in the pool. The pool shall notify the commissioner 23 within 30 days of any change in the specific or aggregate excess insurance 24 or reinsurance carried by the pool. For the purposes hereof, "surplus 25 funds" shall mean retained earnings of the pool after reserves have been 26 established for all known and incurred but not reported losses of the pool 27 and after all other liabilities of the pool, including unearned premium 28 reserves, have been deducted from total assets. The term "adequate surplus 29 funds" shall mean the amount necessary for the pool to fund its self-30 insured obligations.

(i) After evaluating the application the commissioner shall notify the
applicant if the plan submitted is inadequate, fully explaining to the
applicant what additional requirements must be met. If the application is
denied, the applicant shall have 10 days to make an application for hearing
by the commissioner after the denial notice is received. A record shall be
made of such hearing, and the cost thereof shall be assessed against the
applicant requesting the hearing.

(j) Any other relevant factors the commissioner may deem necessary.

Sec. 2. K.S.A. 12-2620 is hereby amended to read as follows: 122620. (a) All certificates granted hereunder shall be perpetual unless
sooner suspended or revoked by the commissioner or the attorney general.

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42 (b) Whenever the commissioner shall deem it necessary the 43 commissioner may make, or direct to be made, an examination of the

affairs and the financial condition of any pool, except that once every five 1 2 years the commissioner shall conduct an examination of the affairs and the 3 financial condition of each pool. Each pool shall submit a certified 4 independent audited financial statement no later than 90 150 days after the 5 end of the fiscal year. The financial statement shall include outstanding reserves for claims and for claims incurred but not reported. Each pool 6 7 shall file reports as to income, expenses and loss data at such times and in 8 such manner as the commissioner shall require. Any pool which does not 9 use rates developed by an approved rating organization shall file with the 10 commissioner an actuarial certification that such rates are actuarially 11 sound. Whenever it appears to the commissioner from such examination 12 or other satisfactory evidence that the ability to pay current and future 13 claims of any such pool is impaired, or that it is doing business in violation 14 of any of the laws of this state, or that its affairs are in an unsound 15 condition so as to endanger its ability to pay or cause to be paid claims in 16 the amount, manner and time due, the commissioner shall, before filing 17 such report or making the same public, grant such pool upon reasonable 18 notice a hearing, and, if on such hearing the report be confirmed, the 19 commissioner may require any of the actions allowed under K.S.A. 40-20 222b and amendments thereto or suspend the certificate of authority for 21 such pool until its ability to pay current and future claims shall have been 22 fully restored and the laws of the state fully complied with. The 23 commissioner may, if there is an unreasonable delay in restoring the ability 24 to pay claims of such pool and in complying with the law or if 25 rehabilitation or corrective action taken under K.S.A. 40-222b and 26 amendments thereto is unsuccessful, revoke the certificate of authority of 27 such pool to do business in this state. Upon revoking any such certificate 28 the commissioner shall communicate the fact to the attorney general, 29 whose duty it shall be to commence and prosecute an action in the proper 30 court to dissolve such pool or to enjoin the same from doing or transacting 31 business in this state. The commissioner of insurance may call a hearing 32 under K.S.A. 40-222b, and amendments thereto, and the provisions thereof 33 shall apply to group-funded pools.

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(c) On an annual basis, or within 30 days of any change thereto, each
 pool shall supply to the commissioner the name and qualifications of the
 designated administrator of the pools and the terms of the specific and
 aggregate excess insurance contracts of the pool.

New Sec. 3. (a) For purposes of this act a "fraudulent insurance act" means an act committed by any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating HB 2076—Am. by SC 4

1 of an insurance policy for personal or commercial insurance, or a claim 2 for payment or other benefit pursuant to an insurance policy for 3 commercial or personal insurance which such person knows to contain 4 materially false information concerning any fact material thereto; or 5 conceals, for the purpose of misleading, information concerning any 6 fact material thereto.

7 (b) An insurer that has knowledge or a good faith belief that a 8 fraudulent insurance act is being or has been committed shall provide to 9 the commissioner, on a form prescribed by the commissioner, any and 10 all information and such additional information relating to such 11 fraudulent insurance act as the commissioner may require.

12 (c) Any other person that has knowledge or a good faith belief that 13 a fraudulent insurance act is being or has been committed may provide 14 to the commissioner, on a form prescribed by the commissioner, any and 15 all information and such additional information relating to such 16 fraudulent insurance act as the commissioner may request.

17 (d) (1) Each insurer shall have antifraud initiatives reasonably 18 calculated to detect fraudulent insurance acts. Antifraud initiatives may include: fraud investigators, who may be insurer employees or 19 20 independent contractors; or an antifraud plan submitted to the commissioner no later than July 1, 2007. Each insurer that submits an 21 22 antifraud plan shall notify the commissioner of any material change in 23 the information contained in the antifraud plan within 30 days after 24 such change occurs. Such insurer shall submit to the commissioner in 25 writing the amended antifraud plan.

The requirement for submitting any antifraud plan, or any amendment thereof, to the commissioner shall expire on the date specified in paragraph (2) of this subsection unless the legislature reviews and reenacts the provisions of paragraph (2) pursuant to K.S.A. 45-229 and amendments thereto.

31 (2) Any antifraud plan, or any amendment thereof, submitted to the 32 commissioner for informational purposes only shall be confidential and 33 not be a public record and shall not be subject to discovery or subpoena in a civil action unless following an in camera review, the court 34 determines that the antifraud plan is relevant and otherwise admissible 35 under the rules of evidence set forth in article 4 of chapter 60 of the 36 Kansas Statutes Annotated, and amendments thereto. The provisions of 37 this paragraph shall expire on July 1, 2016, unless the legislature 38 39 reviews and reenacts this provision pursuant to K.S.A. 45-229, and 40 amendments thereto, prior to July 1, 2016.

41 (e) Except as otherwise specifically provided in K.S.A. 21-3718, and 42 amendments thereto, and K.S.A. 44-5,125, and amendments thereto, a 43 fraudulent insurance act shall constitute a severity level 6, nonperson HB 2076—Am. by SC 5

felony if the amount involved is \$25,000 or more; a severity level 7, 1 nonperson felony if the amount is at least \$5,000 but less than \$25,000; 2 3 a severity level 8, nonperson felony if the amount is at least \$1,000 but 4 less than \$5,000; and a class C nonperson misdemeanor if the amount is less than \$1,000. Any combination of fraudulent acts as defined in 5 subsection (a) which occur in a period of six consecutive months which 6 involves \$25,000 or more shall have a presumptive sentence of 7 8 imprisonment regardless of its location on the sentencing grid block.

9 (f) In addition to any other penalty, a person who violates this 10 statute shall be ordered to make restitution to the insurer or any other 11 person or entity for any financial loss sustained as a result of such 12 violation. An insurer shall not be required to provide coverage or pay 13 any claim involving a fraudulent insurance act.

(g) This act shall apply to all insurance applications, ratings, claims
 and other benefits made pursuant to any insurance policy.

Sec. 4. K.S.A. 2010 Supp. 44-584 is hereby amended to read as 16 17 follows: 44-584. (a) The application for a new certificate shall be signed 18 by the trustees of the trust fund created by the pool. Any application for a renewal of an existing certificate shall meet at least the standards 19 20 established in subsections (a)(6) through (a)(14) of K.S.A. 44-582, and amendments thereto. After evaluating the application the commissioner 21 22 shall notify the applicant that the plan submitted is approved or 23 conversely, if the plan submitted is inadequate, the commissioner shall 24 then fully explain to the applicant what additional requirements must be met. If the application is denied, the applicant shall have 15 days to 25 26 make an application for hearing by the commissioner after service of the 27 denial notice. The hearing shall be conducted in accordance with the 28 provisions of the Kansas administrative procedure act.

29 (b) An approved certificate of authority shall remain in full force 30 and effect until such certificate is suspended or revoked by the 31 commissioner. An existing pool operating under an approved certificate 32 of authority must file with the commissioner, within 120 days following 33 the close of the pool's fiscal year, a current financial statement on a 34 form approved by the commissioner showing the financial ability of the pool to meet its obligations under the worker compensation act and 35 confirmation of specific and aggregate excess insurance as required by 36 law for the pool. If an existing pool's certificate of authority is 37 suspended or revoked, such pool shall have the same rights to a hearing 38 39 by the commissioner as for applicants for new certificates of authority as 40 set forth in subsection (a) above.

41 (c) Whenever the commissioner shall deem it necessary the 42 commissioner may make, or direct to be made, an examination of the 43 affairs and financial condition of any pool in accordance with K.S.A. HB 2076—Am. by SC 6

40-222 and 40-223, and amendments thereto, except that once every five 1 years the commissioner shall conduct an examination of the affairs and 2 3 financial condition of each pool. Each pool shall submit a certified independent audited financial statement no later than 90 150 days after 4 the end of the pool's fiscal year. The financial statement shall include 5 outstanding reserves for claims and for claims incurred but not reported. 6 Each pool shall file payroll records, accident experience and 7 8 compensation reports and such other reports and statements at such times and in such manner as the commissioner shall require. Whenever 9 it appears to the commissioner from such examination or other 10 satisfactory evidence that the solvency of any such pool is impaired, or 11 that it is doing business in violation of any of the laws of this state, or 12 that its affairs are in an unsound condition so as to endanger its ability 13 to pay or cause to be paid the compensation in the amount, manner and 14 time due as provided for in the Kansas workers compensation act, the 15 commissioner shall, before filing such report or making the same public, 16 17 grant such pool upon reasonable notice a hearing in accordance with 18 the provisions of the Kansas administrative procedure act, and, if on 19 such hearing the report be confirmed, the commissioner shall suspend the certificate of authority for such pool until its solvency shall have 20 been fully restored and the laws of the state fully complied with. The 21 22 commissioner may, if there is an unreasonable delay in restoring the 23 solvency of such pool and in complying with the law, revoke the certificate of authority of such pool to do business in this state. Upon 24 revoking any such certificate the commissioner shall communicate the 25 fact to the attorney general, whose duty it shall be to commence and 26 27 prosecute an action in the proper court to dissolve such pool or to enjoin the same from doing or transacting business in this state. The 28 29 commissioner of insurance may call a hearing under K.S.A. 40-222b, 30 and amendments thereto, and the provisions shall apply to group 31 workers compensation pools.

32 Sec. 3. 5. K.S.A. 12-2620 and K.S.A. 2010 Supp. 12-2618, 40-2,118
 33 and 44-584 are hereby repealed.

34 Sec.<u>4.</u> 6. This act shall take effect and be in force from and after its 35 publication in the statute book.