2012 -- H 7782 SUBSTITUTE A

LC01801/SUB A

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2012

AN ACT

RELATING TO INSURANCE - UNFAIR COMPETITION AND PRACTICES

Introduced By: Representatives Ucci and Winfield Date Introduced: February 28, 2012

Referred To: House Corporations

It is enacted by the General Assembly as follows:

- 1 SECTION 1. Section 27-29-4 of the General Laws in Chapter 27-29 entitled "Unfair 2 Competition and Practices" is hereby amended to read as follows:
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27-29-4. Unfair methods of competition and unfair or deceptive acts or practices defined. -- The following are defined as unfair methods of competition and unfair and deceptive acts or practices in the business of insurance:

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(1) Misrepresentations and false advertising of policies or contracts. - Making, issuing, 6 7 circulating, or causing to be made, issued, or circulated, any estimate, illustration, circular, or statement, sales presentation, omission, or comparison misrepresenting the terms of any policy 8 9 issued or to be issued or the benefits, conditions, or advantages promised by any policy or the 10 dividends or share of the surplus to be received on any policy, or making any false or misleading 11 statement as to the dividends or share of surplus previously paid on any policy, or making any 12 misleading representation or any misrepresentation as to the financial condition of any insurer, or 13 as to the legal reserve system upon which any life insurer operates, or using any name or title of 14 any policy or class of policies misrepresenting the true nature of that policy or class of policies, or 15 making any misrepresentation to any policyholder insured in any company including any intentional misquote of a premium rate, for the purpose of inducing or tending to induce the 16 17 policyholder to lapse, forfeit, or surrender his or her insurance, or misrepresenting for the purpose 18 of effecting a pledge or assignment of or effecting a loan against any policy, or misrepresenting 19 any policy as being share or stock;

1 (2) False information and advertising generally. - Making, publishing, disseminating, 2 circulating, or placing before the public or causing, directly or indirectly, to be made, published, 3 disseminated, circulated, or placed before the public in a newspaper, magazine, or other 4 publication, or in the form of a notice, circular, pamphlet, letter, or poster, or over any radio or 5 television station, or in any other way, an advertisement, announcement, or statement containing any assertion, representation, or statement with respect to the business of insurance or with 6 7 respect to any person in the conduct of his or her insurance business which is untrue, deceptive, 8 or misleading;

9 (3) Defamation. - Making, publishing, disseminating, or circulating, directly or 10 indirectly, or aiding, abetting, or encouraging the making, publishing, disseminating, or 11 circulating of any oral or written statement or any pamphlet, circular, article of literature which is 12 false or maliciously critical of or derogatory to the financial condition of an insurer, and which is 13 calculated to injure any person engaged in the business of insurance;

(4) Boycott, coercion, and intimidation. - Entering into any agreement to commit, or by
any concerted action committing, any act of boycott, coercion, or intimidation resulting in or
tending to result in unreasonable restraint of, or monopoly in, the business of insurance;

(5) (i) False financial statements. - Knowingly filing with any supervisory or other public
official, or knowingly making, publishing, disseminating, circulating, or delivering to any person,
or placing before the public or causing directly or indirectly, to be made, published, disseminated,
circulated, delivered to any person, or placed before the public any false material statement of
financial condition of an insurer; or

(ii) Knowingly making any false entry of a material fact in any book, report, or statement
of any insurer or knowingly omitting to make a true entry of any material fact pertaining to the
business of the insurer in any book, report, or statement of the insurer;

(6) Stock operations and advisory board contracts. - Issuing or delivering or permitting
agents, officers, or employees to issue or deliver agency company stock or other capital stock, or
benefit certificates or shares in any common law corporation, or securities of any special or
advisory board contracts or other contracts of any kind promising returns and profits as an
inducement to insurance;

30 (7) (i) Unfair discrimination. - Making or permitting any unfair discrimination between
31 individuals of the same class and equal expectation of life in the rates charged for any policy of
32 life insurance or of life annuity or in the dividends or other benefits payable on any such policy or
33 life annuity, or in any other of the terms and conditions of the policy; or

34 (ii) Making or permitting any unfair discrimination between individuals of the same

class and of essentially the same hazard in the amount of premium, policy fees, or rates charged
 for any policy or contract of accident or health insurance or in the benefits payable under any
 policy or contract, or in any of the terms or conditions of that policy, or in any other manner;

4 (iii) Making or permitting any unfair discrimination between individuals or risks of the
5 same class and of essentially the same hazards by refusing to issue, refusing to renew, canceling,
6 or limiting the amount of insurance coverage on a property or casualty risk because of the
7 geographic location of the risk, unless:

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(A) The refusal, cancellation, or limitation is for a business purpose that is not a pretext for unfair discrimination; or

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(B) The refusal, cancellation, or limitation is required by law or regulation;

(iv) Making or permitting any unfair discrimination between individuals or risks of the same class and of essentially the same hazards by refusing to issue, refusing to renew, canceling, or limiting the amount of insurance coverage on a residential property risk, or the personal property contained in the residential property risk, because of the age of the residential property, unless:

16 (A) The refusal, cancellation, or limitation is for a business purpose that is not a pretext17 for unfair discrimination; or

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(B) The refusal, cancellation, or limitation is required by law or regulation;

(v) Refusing to insure, refusing to continue to insure, or limiting the amount of coverage
available to an individual because of the sex or marital status of the individual; nothing in this
subsection shall prohibit an insurer from taking marital status into account for the purpose of
defining persons eligible for dependent benefits; or

(vi) To terminate, or to modify coverage, or to refuse to issue or refuse to renew any property or casualty policy solely because the applicant or insured or any employee of either is mentally or physically impaired; provided, that this subsection shall not apply to accident and health insurance sold by a casualty insurer and, provided that this subsection shall not be interpreted to modify any other provision of law relating to the termination, modification, issuance or renewal of any insurance policy or contract;

(8) (i) Rebates. - Except as otherwise expressly provided by law, knowingly permitting or offering to make or making any policy or agreement as to the policy other than as plainly expressed in the policy issued on it, or paying or allowing or giving or offering to pay, allow, or give, directly or indirectly, as inducement to the policy, any rebate of premiums payable on the policy, or any special favor or advantage in the dividends or other benefits on the policy, or any valuable consideration or inducement not specified in the policy, or giving, selling, or purchasing or offering to give, sell, or purchase as inducement to the policy, or in connection with the policy,
any stocks, bonds, or other securities of any insurance company or other corporation, association,
or partnership, or any dividends or profits accrued on the security, or anything of value not
specified in the policy;

(ii) Nothing in subdivision (7) of this section or paragraph (i) of this subdivision shall be
construed as including within the definition of discrimination or rebates any of the following
practices:

8 (A) In the case of any contract of life insurance policies or life annuity, annuities paying 9 bonuses to policyholders or abating their premiums in whole or in part out of surplus accumulated 10 from nonparticipating insurance; provided, that any bonuses or abatement of premiums shall be 11 fair and equitable to policyholders and for the best interests of the company and its policyholders;

(B) In the case of life insurance policies issued on the industrial debit plan, making
allowance to policyholders who have continuously for a specified period made premium
payments directly to an office of the insurer in an amount which fairly represents the saving in
collection expenses; and

16 (C) Readjustment of the rate of premium for a group insurance policy based on the loss
17 or expense experience under it, at the end of the first or any subsequent policy year of insurance
18 under the policy, which may be made retroactive only for the policy year;

19 (9) (i) Free choice of insurance producer or insurer. - When any person, firm, or 20 corporation engaged in the business of lending money on the security of real or personal property, 21 or in the business of negotiating, purchasing, selling, or holding loans on the security of real 22 property, or in the business of building, selling, or financing the sale or purchase of real property, 23 or any trustee, director, officer, agent, or other employee of that person, firm, or corporation, 24 requires that property insurance be procured for the property, the borrower, debtor, or purchaser 25 shall have free choice of insurance producer and insurer through or by which the insurance is to 26 be placed or written, subject only to the right of the builder, creditor, lender, or seller:

(A) To require evidence, to be produced at a reasonable time prior to commencement or
renewal of risk, that the insurance providing reasonable coverage has been obtained in an amount
equal to the amount required by the builder, creditor, lender, or seller;

30 (B) To require insurance in an insurer authorized to do business and having a licensed
 31 resident insurance producer agent in this state; and

32 (C) To refuse to accept insurance in a particular insurer on reasonable grounds related to33 solvency;

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(ii) When any contractor or subcontractor is required to procure a surety bond or policy

1 of insurance with respect to any building or construction contract which is about to be, or which 2 has been bid or entered into, the contractor or subcontractor shall have free choice of insurance 3 producer and insurer through or by which the surety bond or insurance is to be written; provided, 4 that the owner or contractor shall have the right: (A) to require evidence, to be produced at a 5 reasonable time prior to commencement or renewal of risk, that the insurance providing reasonable coverage has been obtained in an amount equal to the amount required by the builder, 6 7 creditor, lender, or seller; (B) to require insurance in an insurer authorized to do business and 8 having a licensed resident insurance producer in this state; and (C) to refuse to accept insurance in 9 a particular insurer on reasonable grounds related to solvency; provided, that the owner or 10 contractor shall have the right to approve the form, sufficiency, or manner of execution of the 11 surety bond or policy or insurance furnished by the insurance company or insurance producer 12 selected by the contractor or subcontractor;

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(iii) No person who lends money or extends credit may:

(A) Solicit insurance for the protection of real property after a person indicates interest in
securing a first mortgage credit extension until that person has received a commitment in writing
from the lender as to a loan or credit extension;

(B) Unreasonably reject a policy furnished by the borrower for the protection of the property securing the creditor lien. A rejection shall not be deemed unreasonable if it is based on reasonable standards, uniformly applied, relating to the extent of coverage required and the financial soundness and the services of an insurer. The standards shall not discriminate against any particular type of insurer, nor shall the standards call for rejection of a policy because it contains coverage in addition to that required in the credit transaction;

(C) Require that any borrower, mortgagor, purchaser, insurer, or insurance producer pay a separate charge, in connection with the handling of any policy required as security for a loan on real estate, or pay a separate charge to substitute the policy of one insurer for that of another. This subsection does not include the interest that may be charged on premium loans or premium advancements in accordance with the terms of the loan or credit document;

28 (D) Use or disclose, without the prior written consent of the borrower, mortgagor, or 29 purchaser taken at a time other than the making of the loan or extension of credit, information 30 relative to a policy which is required by the credit transaction, for the purpose of replacing the 31 insurance; or

32 (E) Require any procedures or conditions of duly licensed insurance producers or 33 insurers not customarily required of those insurance producers or insurers affiliated or in any way 34 connected with the person who lends money or extends credit;

1 (iv) Every person who lends money or extends credit and who solicits insurance on real 2 and personal property subject to paragraph (iii) of this subdivision shall explain to the borrower in 3 writing that the insurance related to the credit extension may be purchased from an insurer or 4 insurance producer of the borrower's choice, subject only to the lender's right to reject a given 5 insurer or insurance producer as provided in paragraph (iii)(B) of this subdivision. Compliance with disclosures as to insurance required by truth in lending laws or comparable state laws shall 6 7 be compliance with this subsection;

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(v) This requirement for a commitment shall not apply in cases where the premium for 9 the required insurance is to be financed as part of the loan or extension of credit involving 10 personal property transactions;

11 (vi) The commissioner shall have the power to examine and investigate those insurance 12 related activities of any person or insurer that the commissioner believes may be in violation of 13 this section. Any affected person may submit to the commissioner a complaint or material 14 pertinent to the enforcement of this section;

15 (vii) Nothing in this section shall prevent a person who lends money or extends credit 16 from placing insurance on real or personal property in the event the mortgagor, borrower, or 17 purchaser has failed to provide required insurance in accordance with the terms of the loan or 18 credit document;

19 (viii) Nothing contained in this section shall apply to credit life or credit accident and 20 health insurance.

21 (10) Notice of free choice of insurance producer or insurer. - Every debtor, borrower, or 22 purchaser of property with respect to which insurance of any kind on the property is required in connection with a debt or loan secured by the property or in connection with the sale of the 23 24 property, shall be informed in writing by the builder, creditor, lender, or seller, of his or her right 25 of free choice in the selection of the insurance producer and insurer through or by which the 26 insurance is to be placed. There shall be no interference, either directly or indirectly, with the 27 borrower's, debtor's, or purchaser's free choice of an insurance procedure and of an insurer which 28 complies with the requirements of this section, and the builder, creditor, lender, seller, owner, or 29 contractor shall not refuse the policy tendered by the borrower, debtor, purchaser, contractor, or 30 subcontractor. Upon notice of any refusal of the tendered policy, the insurance commissioner 31 shall order the builder, creditor, lender, seller, owner, or contractor to accept the tendered policy, 32 if the commissioner determines that the refusal is not in accordance with the requirements of this 33 section. Failure to comply with an order of the insurance commissioner shall be deemed a 34 violation of this section;

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1 (11) Using insurance information to detriment of another. - Whenever the instrument 2 requires that the purchaser, mortgagor, or borrower furnish insurance of any kind on real property 3 being conveyed or is collateral security to a loan, the mortgagee, vendor, or lender shall refrain 4 from disclosing or using any and all insurance information to his or her or its own advantage and 5 to the detriment of either the borrower, purchaser, mortgagor, insurance company, or agency complying with the requirements relating to insurance; 6

7 (12) Prohibited group enrollments. - No insurer shall offer more than one group policy of 8 insurance through any person unless that person is licensed, at a minimum, as an insurance 9 producer. This prohibition shall not apply to employer-employee relationships, or to any of these 10 enrollments;

11 (13) Failure to maintain complaint handling procedures. - No insurer shall fail to 12 maintain a complete record of all the complaints it received since the date of its last examination 13 pursuant to the general laws providing for examination of insurers. This record shall indicate the 14 total number of complaints, their classification by line of insurance, the nature of each complaint, 15 the disposition of each complaint, and the time it took to process each complaint. For the 16 purposes of this subsection, "complaint" means any written communication primarily expressing 17 a grievance;

18 (14) Misrepresentation in insurance applications. - Making false or fraudulent statements 19 or representations on or relative to an application for a policy, for the purpose of obtaining a fee, 20 commission, money, or other benefit from any insurers, insurance producer, or individual person; 21 and

22 (15) Requiring that repairs be made to an automobile at a specified auto body repair shop 23 or interfering with the insured's or claimant's free choice of repair facility. The insured or 24 claimant shall be promptly informed by the insurer of his or her free choice in the selection of an 25 auto body repair shop. Once the insured or claimant has advised the insurer that an auto body 26 repair shop has been selected, the insurer may not recommend that a different auto body repair 27 shop be selected to repair the automobile. An auto body repair shop may file a complaint with the 28 department of business regulation alleging a violation of this subdivision (15). Whenever the 29 department of business regulation has reason to believe that an insurer has violated this 30 subdivision (15), the department shall conduct an investigation and may convene a hearing. A 31 complaint filed by an auto body repair shop must be accompanied by a statement written and 32 signed by the insured or claimant setting forth the factual basis of the complaint, and the insured 33 or claimant must voluntarily appear and testify at any administrative proceedings on the 34 complaint.

1 SECTION 2. Section 27-9.1-4 of the General Laws in Chapter 27-9.1 entitled "Unfair 2 Claims Settlement Practices Act" is hereby amended to read as follows: 3 27-9.1-4. "Unfair claims practices" defined. -- (a) Any of the following acts by an 4 insurer, if committed in violation of section 27-9.1-3, constitutes an unfair claims practice: 5 (1) Misrepresenting to claimants and insured relevant facts or policy provisions relating to coverage at issue; 6 7 (2) Failing to acknowledge and act with reasonable promptness upon pertinent 8 communications with respect to claims arising under its policies; 9 (3) Failing to adopt and implement reasonable standards for the prompt investigation and 10 settlement of claims arising under its policies; 11 (4) Not attempting in good faith to effectuate prompt, fair, and equitable settlement of 12 claims submitted in which liability has become reasonably clear; 13 (5) Compelling insured, beneficiaries, or claimants to institute suits to recover amounts 14 due under its policies by offering substantially less than the amounts ultimately recovered in suits 15 brought by them; 16 (6) Refusing to pay claims without conducting a reasonable investigation; 17 (7) Failing to affirm or deny coverage of claims within a reasonable time after having 18 completed its investigation related to the claim or claims; 19 (8) Attempting to settle or settling claims for less than the amount that a reasonable 20 person would believe the insured or beneficiary was entitled by reference to written or printed 21 advertising material accompanying or made part of an application; 22 (9) Attempting to settle or settling claims on the basis of an application that was 23 materially altered without notice to, or knowledge or consent of, the insured; 24 (10) Making claims payments to an insured or beneficiary without indicating the 25 coverage under which each payment is being made; 26 (11) Unreasonably delaying the investigation or payment of claims by requiring both a 27 formal proof of loss form and subsequent verification that would result in duplication of 28 information and verification appearing in the formal proof of loss form; 29 (12) Failing in the case of claims denials or offers of compromise settlement to promptly 30 provide a reasonable and accurate explanation of the basis of those actions; 31 (13) Failing to provide forms necessary to present claims within ten (10) calendar days 32 of a request with reasonable explanations regarding their use; 33 (14) Failing to adopt and implement reasonable standards to assure that the repairs of a repairer owned by or required to be used by the insurer are performed in a workmanlike manner; 34

- 1 (15) Misleading a claimant as to the applicable statute of limitations;

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- (16) Failing to respond to a claim within thirty (30) days, unless the insured shall agree
- 3 to a longer period;
- 4 (17) Engaging in any act or practice of intimidation, coercion, threat or 5 misrepresentation of consumers rights, for or against any insured person, claimant, or entity to use a particular rental car company for motor vehicle replacement services or products; provided, 6 7 however, nothing shall prohibit any insurance company, agent or adjuster from providing to such 8 insured person, claimant or entity the names of a rental car company with which arrangements 9 have been made with respect to motor vehicle replacement services; provided, that the rental car 10 company is licensed pursuant to Rhode Island general laws section 31-5-33; or
- (18) Refusing to honor a "direction to pay" executed by an insured, claimant, indicating 11 12 that the insured or claimant, wishes to have the insurance company directly pay his or her motor 13 vehicle replacement vehicle rental benefit to the rental car company of the consumer's choice; 14 provided, that the rental car company is licensed pursuant to Rhode Island general laws section 15 31-5-33. Nothing in this section shall be construed to prevent the insurance company's ability to 16 question or challenge the amount charged, in accordance with its policy provisions, and the requirements of the department of business regulation; 17
- 18 (19) Modifying any published manual (i.e. motors, mitchells, or any automated appraisal 19 system) relating to auto body repair without prior agreement between the parties;
- 20 (20) Failing to use a manual or system in its entirety in the appraisal of a motor vehicle;
- 21 (21) Refusing to compensate an auto body shop for documented charges as identified 22 through industry recognized software programs or systems for paint and refinishing materials in
- 23 auto body repair claims; and/or
- (22) Failing to comply with the requirements of Rhode Island General Laws section 31-24 25 47-12.1.
- 26 (23) Failure to have an appraisal performed by a licensed appraiser where the motor 27 vehicle has sustained damage estimated to exceed two thousand five hundred dollars (\$2,500). 28 Said licensed appraiser referred to herein must be unaffiliated with the repair facility repairing the 29 subject motor vehicle.
- 30 (24) Failure to perform a supplemental appraisal inspection of a vehicle within four (4) 31 business days after a request is received from an auto body repair shop.
- 32 (b) (1) Nothing contained in subsections 27-9.1-4(a)(19), (20), & (21) of this chapter 33 shall be construed to interfere with an auto body repair facility's contract with an insurance 34 company.

1	(2) If an insurance company and auto body repair facility have contracted under a direct
2	repair program or any similar program thereto the provisions of subsections 27-9.1-4(a)(19), (20)
3	& (21) shall not apply.
4	(3) If the insured or claimant elects to have the vehicle repaired at a shop of his or her
5	choice, the insurer shall not limit or discount the reasonable repair costs based upon the charges
6	that would have been incurred had the vehicle been repaired by the insurer's chosen shop(s).
7	SECTION 3. Title 27 of the General Laws entitled "INSURANCE" is hereby amended
8	by adding thereto the following chapter:
9	CHAPTER 10.4
10	MOTOR VEHICLE PROPERTY DAMAGE CLAIMS SETTLEMENT ACT
11	27-10.4-1. Purpose of chapter The general assembly declares that it is concerned
12	with ensuring fair claims settlement practices with regard to motor vehicle property damage
13	claims. The purpose of this chapter is to set forth standards for the disposition of such claims as it
14	relates to vehicles that are to be repaired in auto body repair shops in the state of Rhode Island.
15	The director of the department of business regulation shall promulgate rules and
16	regulations not inconsistent with purpose of this chapter.
17	27-10.4-2. Definitions (1) "Automobile body shop" referred to as "auto body shop",
18	means and includes any establishment, garage, or work area enclosed within a building where
19	repairs are made or caused to be made to motor vehicle bodies, including fenders, bumpers,
20	chassis and similar components of motor vehicle bodies as distinguished from the seats, motor,
21	transmission, and other accessories for propulsion and general running gear of motor vehicles,
22	except as provided in section 5-38-20;
23	(2) "Claimant" means a person, other than the insured, who claims that the insured is
24	legally liable to them for damages resulting from an act, occurrence or other covered event as a
25	result of which the insured's policy may be obligated to provide coverage;
26	(3) "Insured" means the party named on a policy or certificate as the individual(s) with
27	legal rights to the benefits provided by the policy;
28	(4) "Insurer" means any person, reciprocal exchange, interinsurer, Lloyds insurer,
29	fraternal benefit society, and any other legal entity engaged in the business of insurance,
30	including agents, brokers, insurance producers, adjusters and third-party administrators. For the
31	purposes of this chapter, the entities in this subdivision shall be deemed to be engaged in the
32	business of insurance and subject to this chapter;
33	(5) "Motor Vehicle" means any automobile, truck, or other self-propelled vehicle of any
34	type; and

(6) "Person" means any natural or artificial entity including, but not limited to,
 individuals, partnerships, associations, trusts or corporations, or limited liability corporations.

<u>27-10.4-3. Rental vehicles.</u> – It is an improper claim settlement practice for any
 domestic, or foreign insurer transacting business in this state, or any employee or agent of the
 insurer to:

6 (1) Engage in any act or practice of intimidation, coercion, threat or misrepresentation of 7 consumers' rights, for or against any insured person, claimant, or entity to use a particular rental 8 car company for motor vehicle replacement services or products; provided, however, nothing 9 shall prohibit any insurance company, agent or adjuster from providing to such insured person, 10 claimant or entity the names of a rental car company with which arrangements have been made 11 with respect to motor vehicle replacement services; provided, that the rental car company is 12 licensed pursuant to Rhode Island general laws section 31-5-33: or

13 (2) Refuse to honor a "direction to pay" executed by an insured, claimant, indicating that 14 the insured or claimant, wishes to have the insurance company directly pay his or her motor 15 vehicle replacement vehicle rental benefit to the rental car company of the consumer's choice; 16 provided, that the rental car company is licensed pursuant to Rhode Island general laws section 17 31-5-33. Nothing in this section shall be construed to prevent the insurance company's ability to 18 question or challenge the amount charged, in accordance with its policy provisions, and the

- 19 requirements of the department of business regulation.
- 20 <u>27-10.4-4. Steering prohibited. It is an improper claim settlement practice for any</u>
 21 domestic, foreign, or alien insurer transacting business in this state, or any employee or agent of
 22 the insurer to:

23 (1) Require that repairs be made to an automobile at a specified auto body repair shop or 24 interfering with the insured's or claimant's free choice of repair facility. The insured or claimant shall be promptly informed by the insurer of his or her free choice in the selection of an auto body 25 26 repair shop. Once the insured or claimant has advised the insurer that an auto body repair shop 27 has been selected, the insurer may not recommend that a different auto body repair shop be 28 selected to repair the automobile. An auto body repair shop may file a complaint with the 29 department of business regulation alleging a violation of this subdivision. Whenever the 30 department of business regulation has reason to believe that an insurer has violated this 31 subsection, the department shall conduct an investigation and may convene a hearing. A 32 complaint filed by an auto body repair shop must be accompanied by a statement written and 33 signed by the insured or claimant setting forth the factual basis of the complaint, and the insured 34 or claimant must voluntarily appear and testify at any administrative proceedings on the 1 <u>complaint.</u>

2	27-10.4-5. Procedure pages It is an improper claim settlement practice for any
3	domestic, foreign, or alien insurer transacting business in this state, or any employee or agent of
4	the insurer to:
5	(1) Modify any published manual (i.e., Motor, Mitchell or any automotive appraisal
6	system) relating to auto body repair without prior agreement between the parties;
7	(2) Fail to use a manual or system in its entirety in the appraisal of a motor vehicle;
8	(3) Refuse to compensate an auto body shop for documented charges as identified
9	through industry recognized software programs or systems for paint and refinishing materials in
10	auto body repair claims; and/or
11	(4) Fail to comply with the requirements of section 31-47-12.1.
12	(5) Nothing contained in subdivisions 27-10.4-5(1)(2), and (3) of this chapter shall be
13	construed to interfere with an auto body repair facility's contract with an insurance company.
14	(6) If an insurance company and auto body shop have contracted under a direct repair
15	program or any similar program thereto the provisions of subdivisions 27-10.4-5(1), (2), and (3)
16	shall not apply.
17	(7) If the insured or claimant elects to have the vehicle repaired at a shop of his or her
18	choice, the insurer shall not limit or discount the reasonable repair costs based upon the charges
19	that would have been incurred had the vehicle been repaired by the insurer's chosen shop(s).
20	27-10.4-6. Total losses. – It is an improper claim settlement practice for any domestic,
21	foreign, or alien insurer transacting business in this state, or any employee or agent of the insurer
22	<u>to:</u>
23	(1) Deem a motor vehicle a total loss if the cost to rebuild or reconstruct the motor
24	vehicle to its pre-accident condition is less than seventy-five percent (75%) of the "fair market
25	value" of the motor vehicle immediately preceding the time it was damaged.
26	(2) "Fair market value" means the retail value of a motor vehicle as set forth in a current
27	edition of a nationally recognized compilation of retail values commonly used by the automotive
28	industry to establish values of motor vehicles.
29	(3) Nothing herein shall be construed to require a vehicle be deemed a total loss if the
30	total cost to rebuild or reconstruct the motor vehicle to its pre-accident condition is greater than
31	seventy-five percent (75%) of the fair market value of the motor vehicle immediately preceding
32	the time it was damaged.
33	27-10.4-7. Appraisals required. – It is an improper claim settlement practice for any

34 domestic, foreign, or alien insurer transacting business in this state, or any employee or agent of

1 <u>the insurer to:</u>

2	(1) Fail to have an appraisal performed by a licensed appraiser where the motor vehicle
3	has sustained damage estimated to exceed two thousand five hundred dollars (\$2,500). Said
4	licensed appraiser referred to herein must be unaffiliated with the repair facility repairing the
5	subject motor vehicle; and
6	(2) Fail to perform a supplemental appraisal inspection of a vehicle within four (4)
7	business days after a request is received from an auto body shop.
8	27-10.4-8. Agreed price for repairs to motor vehicles. – (a) When determining the
9	amount an insurer must pay for repair a damaged motor vehicle, every insurer, agent, and
10	employee must:
11	(1) Negotiate in good faith with an auto body shop chosen by an insured or claimant; and
12	(2) Reach an agreed price with the auto body shop chosen by the insured or claimant to
13	repair the vehicle to pre-accident condition. In reaching an agreed price with the chosen auto
14	body shop, an insurer must negotiate all aspects of the repair in good faith, including, but not
15	limited to, the auto body labor rate charged by the auto body shop.
16	(b) If an insurer and an auto body shop do not reach an agreed price to repair the vehicle
17	to pre-accident condition, the insurer may not:
18	(1) Delay concluding the claim and must promptly issue payment for the amount it
19	determined; or
20	(2) Require an insured or claimant to have the repairs performed at a different auto body
21	<u>shop.</u>
22	(c) If an insurer and auto body shop do not reach an agreed price, the auto body shop may
23	assert a civil action against the insurer, its employees and agents for all amounts in dispute and
24	any other damages resulting therefrom pursuant to section 27-10.4-10.
25	27-10.4-9. Penalties For each violation of this chapter, the offending insurance
26	company, its employees and agents, shall be fined a sum not to exceed five thousand dollars
27	(\$5,000) by the department of business regulation.
28	27-10.4-10. Private actions (1) Any insured or claimant, or licensed auto body repair
29	facility may bring an action for money damages against an insurer, its employees and agents, as a
30	result of the use or employment by an insurer, employee, agent, or person of a method, act or
31	practice declared unlawful by sections 27-10.4-3, 27-10.4-5, 27-10.4-6, and 27-10.4-8.
32	Notwithstanding any provisions of law to the contrary, all such actions may be brought in the
33	small claims, district, and superior court of the state of Rhode Island in the county in which the
34	insurer maintains its principal place of business. If the insurer is a foreign entity all such actions

- 1 <u>shall be brought in the county in which the party bringing the action resides. In the case of small</u>
- 2 claims actions brought under this section, the filing fee shall be eighty dollars (\$80.00).
- 3 (2) In any action brought under this section, in addition to the relief provided in this
- 4 section, the court may award, in its discretion, reasonable attorneys' fees and costs, and may
- 5 provide other equitable relief that it deems necessary or proper.
- 6 (3) Notwithstanding any provision of the public or general laws to the contrary, this
- 7 chapter shall not be construed to prevent an insured or claimant from assigning its rights to an
- 8 <u>auto body shop for any claims arising out of the damage to its motor vehicle.</u>
- 9 <u>27-10.4-11. Severability. If any provision of this chapter or the application of the</u>
- 10 provision to any person or circumstances shall be held invalid, the remainder of the chapter and
- 11 the application of the provision to any person or circumstances other than those as to which it is
- 12 <u>held invalid shall not be affected by that invalidity.</u>
- 13 SECTION 4. This act shall take effect upon passage.

LC01801/SUB A

EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

AN ACT

RELATING TO INSURANCE - UNFAIR COMPETITION AND PRACTICES

1 This act would delete the section of law which requires that an insured or claimant be 2 promptly informed by the insurer of his or her free choice in the selection of an auto body repair 3 shop and would set forth standards for the disposition of motor vehicle property damage claims 4 that are to be repaired in auto body shops in Rhode Island. 5 This act would take effect upon passage.

LC01801/SUB A