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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2014

AN ACT

RELATING TO INSURANCE -- THE STANDARD NON-FORFEITURE LAW FOR LIFE INSURANCE

Introduced By: Senator Roger Picard

Date Introduced: March 25, 2014

Referred To: Senate Commerce

(Business Regulation)

It is enacted by the General Assembly as follows:

SECTION 1. Section 27-4.3-5 of the General Laws in Chapter 27-4.3 entitled "The Standard Nonforfeiture Law for Life Insurance" is hereby amended to read as follows:

27-4.3-5. Calculations of adjusted premiums by the nonforfeiture net level premium method. -- (a) This section shall apply to all policies issued on or after January 1, 1994. Except as provided in subsection (g) of this section, the adjusted premiums for any policy shall be calculated on an annual basis and shall be such a uniform percentage of the respective premiums specified in the policy for each policy year, excluding amounts payable as extra premiums to cover impairments or special hazards, and also excluding any uniform annual contract charge or policy fee specified in the policy in a statement of the method to be used in calculating the cash surrender values and paid_up nonforfeiture benefits, that the present value, at the date of issue of the policy, of all adjusted premiums shall be equal to the sum of: (1) the then_present value of the future_guaranteed benefits provided for by the policy; (2) one percent (1%) of either the amount of insurance, if the insurance be uniform in amount, or the average amount of insurance at the beginning of each of the first ten (10) policy years; and (3) one hundred twenty-five percent (125%) of the nonforfeiture net-level premium as defined in subsection (b); provided, however, that in applying the percentage specified in subdivision (a)(3), no nonforfeiture net_level premium shall be deemed to exceed four percent (4%) of either the amount of insurance, if the insurance be uniform in amount, or the average amount of insurance at the beginning of each of the first ten

(10) policy years. The date of issue of a policy for the purpose of this section shall be the date as of which the rated age of the insured is determined.

- (b) The nonforfeiture net_level premium shall be equal to the present value, at the date of issue of the policy, of the guaranteed benefits provided for by the policy divided by the present value, at the date of issue of the policy, of an annuity of one per annum payable on the date of issue of the policy and on each anniversary of the policy on which a premium falls due.
- (c) In the case of policies which that cause on a basis guaranteed in the policy, unscheduled changes in benefits or premiums, or which that provide an option for changes in benefits or premiums, other than a change to a new policy, the adjusted premiums and present values shall initially be calculated on the assumption that future benefits and premiums do not change from those stipulated at the date of issue of the policy. At the time of any change in the benefits or premiums, the future_adjusted premiums, nonforfeiture net_level premiums, and present values shall be recalculated on the assumption that future benefits and premiums do not change from those stipulated by the policy immediately after the change.
- (d) Except as otherwise provided in subsection (g), the recalculated future_adjusted premiums for any policy shall be a uniform percentage of the future premiums specified in the policy for each policy year, excluding amounts payable as extra premiums to cover impairments and special hazards, and also excluding any uniform annual contract charge or policy fee specified in the policy in a statement of the method to be used in calculating the cash surrender values and paid up nonforfeiture benefits, so that the present value, at the time of change to the newly defined benefits or premiums, of all future_adjusted premiums shall be equal to the excess of: (1) the sum of: (i) the then_present value of the then_future_guaranteed benefits provided for by the policy and (ii) the additional expense allowance, if any, over (2) the then_cash_surrender value, if any, or present value of any paid up nonforfeiture benefit under this policy.
- (e) The additional expense allowance, at the time of the change to the newly defined benefits or premiums, shall be the sum of: (1) one percent (1%) of the excess, if positive, of the average amount of insurance at the beginning of each of the first ten (10) policy years subsequent to the change over the average amount of insurance prior to the change at the beginning of each of the first ten (10) policy years subsequent to the time of the most recent previous change, or, if there has been no previous change, the date of issue of the policy; and (2) one hundred twenty-five percent (125%) of the increase, if positive, in the nonforfeiture net_level premium.
- (f) The recalculated nonforfeiture net_level premium shall be equal to the result obtained by dividing subdivision (f)(1) by subdivision (f)(2) where:
- (1) Equals the sum of:

(i) The nonforfeiture net_level premium applicable prior to the change multiplied by the present value of an annuity of one per annum payable on each anniversary of the policy on or subsequent to the date of the change on which a premium would have fallen due had the change not occurred, and

- (ii) The present value of the increase in future_guaranteed benefits provided for by the policy; and
- (2) Equals the present value of an annuity of one per annum payable on each anniversary of the policy on or subsequent to the date of change on which a premium falls due.
 - (g) Notwithstanding any other provisions of this section to the contrary, in the case of a policy issued on a substandard basis which that provides reduced graded amounts of insurance so that, in each policy year, the policy has the same tabular mortality cost as a similar policy issued on the standard basis which that provides for a higher uniform amount of insurance, adjusted premiums and present values for the substandard policy may be calculated as if it were issued to provide higher uniform amounts of insurance on the standard basis.
 - (h) All adjusted premiums and present values referred to in this chapter shall for all policies of ordinary insurance be calculated on the basis of the eCommissioners 1980 sStandard eOrdinary mMortality tTable or, at the election of the company for any one or more specified plans of life insurance, the eCommissioners 1980 sStandard eOrdinary mMortality tTable with ten_(10) year (10) select mortality factors; adjusted premiums and present values shall for all policies of industrial insurance be calculated on the basis of the eCommissioners 1961 sStandard iIndustrial mMortality tTable; for all policies issued in a particular calendar year be calculated on the basis of a rate of interest not exceeding the nonforfeiture interest rate as defined in this section, for policies issued in that calendar year. Provided, however that:
 - (1) At the option of the insurance company, calculations for all policies issued in a particular calendar year may be made on the basis of a rate of interest not exceeding the nonforfeiture interest rate, as defined in this section, for policies issued in the immediately preceding calendar year;
- (2) Under any paid-up nonforfeiture benefit, including any paid-up dividend additions, any cash surrender value available, whether or not required by section §27-4.3-2, shall be calculated on the basis of the mortality table and rate of interest used in determining the amount of any paid-up nonforfeiture benefit and paid-up dividend additions, if any;
- (3) An insurance company may calculate the amount of any guaranteed paid-up nonforfeiture benefit including any paid-up additions under the policy on the basis of an interest rate no lower than that specified in the policy for calculating cash surrender values;

- 1 (4) In calculating the present value of any paid-up term insurance with accompanying
 2 pure endowment, if any, offered as a nonforfeiture benefit, the rates of mortality assumed may be
 3 not more than those shown in the eCommissioners 1980 eExtended tTerm iInsurance tTable for
 4 policies of ordinary insurance and not more than the eCommissioners 1961 iIndustrial eExtended
 5 tTerm iInsurance tTable for policies of industrial insurance;
 - (5) For insurance issued on a substandard basis, the calculation of any adjusted premiums and present values may be based on appropriate modifications of the tables mentioned in this subsection;

- (6) (i) For policies issued prior to the operative date of the valuation manual, any commissioners' standard Commissioners Standard eOrdinary mMortality tTables, adopted after 1980 by the National Association of Insurance Commissioners, that are approved by regulation promulgated by the commissioner of insurance for use in determining the minimum nonforfeiture standard, may be substituted for the eCommissioners 1980 sStandard eOrdinary mMortality tTable with or without ten_(10) year (10) select mortality factors or for the eCommissioners 1980 eExtended tTerm iInsurance tTable.
- (ii) For policies issued on or after the operative date of the valuation manual the valuation manual shall provide the commissioners' standard Commissioners Standard mMortality Table for use in determining the minimum nonforfeiture standard that may be substituted for the commissioners 1980 Standard Ordinary Mortality Table with or without ten-(10) year (10) Select Mortality Factors or for the Commissioners 1980 Extended-Term Insurance Table. If the commissioner approves by regulation any commissioners' standard Commissioners Standard commissioners Mortality Table adopted by the NAIC for use in determining the minimum nonforfeiture standard for policies issued on or after the operative date of the valuation manual, then that minimum nonforfeiture standard supersedes the minimum nonforfeiture standard provided by the valuation manual.
- (7) (i) For policies issued prior to the operative date of the valuation manual, any ecommissioners' standard Commissioners Standard iIndustrial mMortality tTables, adopted after 1980 by the National Association of Insurance Commissioners, that are approved by regulation promulgated by the commissioner of insurance for use in determining the minimum nonforfeiture standard, may be substituted for the eCommissioners 1961 sStandard iIndustrial mMortality tTables or the eCommissioners 1961 iIndustrial eExtended tTerm iInsurance tTable.
- (ii) For policies issued on or after the operative date of the valuation manual the valuation manual shall provide the commissioners' standard Commissioners Standard mMortality the for use in determining the minimum nonforfeiture standard that may be substituted for the

1	Commissioners 1961 Standard Industrial Mortality Table or the Commissioners 1961 Industrial
2	Extended_Term Insurance Table. If the commissioner approves by regulation any commissioners'
3	standard Commissioners Standard iIndustrial mMortality tTable adopted by the NAIC for use in
4	determining the minimum nonforfeiture standard for policies issued on or after the operative date
5	of the valuation manual then that minimum nonforfeiture standard supersedes the minimum
6	nonforfeiture standard provided by the valuation manual.
7	(i) The nonforfeiture interest rate is defined below:
8	(A) For policies issued prior to the operative date of the valuation manual, the
9	nonforfeiture interest rate per annum for any policy issued in a particular calendar year shall be
10	equal to one hundred and twenty-five percent (125%) of the calendar year statutory valuation
11	interest rate for the policy as defined in chapter 4.5 of this title, rounded to the nearer one-quarter
12	of one percent (.25%); provided, however, that the nonforfeiture interest rate shall not be less than
13	four percent (4%).
14	(B) For policies issued on and after the operative date of the valuation manual, the
15	nonforfeiture interest rate per annum for any policy issued in a particular calendar year shall be
16	provided by the valuation manual.
17	(j) Notwithstanding any other provision in this title to the contrary, any re-filing of
18	nonforfeiture values or their methods of computation for any previously approved policy form
19	which that involves only a change in the interest rate or mortality table used to compute
20	nonforfeiture values shall not require re-filing of any other provisions of that policy form.
21	SECTION 2. Sections 27-4.5-1, 27-4.5-13 and 27-4.5-16 of the General Laws in Chapter
22	27-4.5 entitled "The Standard Valuation Law" are hereby amended to read as follows:
23	27-4.5-1. Short title and definitions (a) This chapter shall be known as the "Standard
24	Valuation Law."
25	(b) For the purpose of this chapter, the following definitions shall apply on or after the
26	operative date of the valuation manual:
27	(1) "Accident and health insurance" means contracts that incorporate morbidity risk and
28	provide protection against economic loss resulting from accident, sickness, or medical conditions
29	and as may be specified in the valuation manual.
30	(2) "Appointed actuary" means a qualified actuary who is appointed in accordance with
31	the valuation manual to prepare the actuarial opinion required in subsection §27-4.5-3(a)(b).
32	(3) "Commissioner of insurance" means the director of the department of business
33	regulation, or his or her designee.

(4) "Company" means an entity, which that: (i) Has written, issued, or reinsured life

1	insurance contracts, accident and health insurance contracts, or deposit-type contracts in this state
2	and has at least one such policy in force or one claim; or (ii) Has written, issued, or reinsured life
3	insurance contracts, accident and health insurance contracts, or deposit-type contracts in any state
4	and is required to hold a certificate of authority to write life insurance, accident and health
5	insurance, or deposit-type contracts in this state.
6	(5) "Deposit-type contract" means contracts that do not incorporate mortality or
7	morbidity risks and as may be specified in the valuation manual.
8	(6) "Life insurance" means contracts that incorporate mortality risk, including annuity
9	and pure endowment contracts, and as may be specified in the valuation manual.
10	(7) "NAIC" means the National Association of Insurance Commissioners.
11	(8) "Policyholder behavior" means any action a policyholder, contract holder, or any
12	other person with the right to elect options, such as a certificate holder, may take under a policy
13	or contract subject to this chapter including, but not limited to, lapse, withdrawal, transfer
14	deposit, premium payment, loan, annuitization, or benefit elections prescribed by the policy or
15	contract, but excluding events of mortality or morbidity that result in benefits prescribed in their
16	essential aspects by the terms of the policy or contract.
17	(9) "Principle-based valuation" means a reserve valuation that uses one or more methods
18	or one or more assumptions determined by the insurer and is required to comply with section §27
19	4.5-14 as specified in the valuation manual.
20	(10) "Qualified actuary" means an individual who is qualified to sign the applicable
21	statement of actuarial opinion in accordance with the American Academy of Actuaries
22	qualification standards for actuaries signing such statements and who meets the requirements
23	specified in the valuation manual.
24	(11) "Tail risk" means a risk that occurs either where the frequency of low probability
25	events is higher than expected under a normal probability distribution or where there are observed
26	events of very significant size or magnitude.
27	(12) "Valuation manual" means the manual of valuation instructions adopted by the
28	NAIC as specified in this chapter or as subsequently amended.
29	27-4.5-13. Valuation manual for policies issued on or after the operative date of the
30	valuation manual (a) For policies issued on or after the operative date of the valuation
31	manual, the standard prescribed in the valuation manual is the minimum standard of valuation
32	required under subsection §27-4.5-2(b), except as provided under subsections (e) or (g) of this
33	section.

(b) The operative date of the valuation manual is January 1 of the first calendar year

1	following the first July 1 as of which all of the following have occurred:
2	(1) The valuation manual has been adopted by the NAIC by an affirmative vote of at
3	least forty-two (42) members, or three-fourths (3/4) of the members voting, whichever is greater.
4	(2) The Standard Valuation Law, as amended by the NAIC in 2009, or legislation
5	including substantially similar terms and provisions, has been enacted by states representing
6	greater than seventy-five percent (75%) of the direct premiums written as reported in the
7	following annual statements submitted for 2008: life, accident and health annual statements:
8	health annual statements; or fraternal annual statements.
9	(3) The Standard Valuation Law, as amended by the NAIC in 2009, or legislation
10	including substantially similar terms and provisions, has been enacted by at least forty-two (42)
11	of the following fifty-five (55) jurisdictions: The fifty (50) States of the United States, American
12	Samoa, the American Virgin Islands, the District of Columbia, Guam, and Puerto Rico.
13	(c) Unless a change in the valuation manual specifies a later effective date, changes to
14	the valuation manual shall be effective on January 1 following the date when all of the following
15	have occurred:
16	(1) The change to the valuation manual has been adopted by the NAIC by an affirmative
17	vote representing:
18	(i) At least three-fourths (3/4) of the members of the NAIC voting, but not less than a
19	majority of the total membership, and
20	(ii) Members of the NAIC representing jurisdictions totaling greater than seventy-five
21	percent (75%) of the direct premiums written as reported in the following annual statements most
22	recently available prior to the vote in subsection (c)(1)(i): life, accident and health annual
23	statements; health annual statements; or fraternal annual statements.
24	(2) The valuation manual becomes effective pursuant to a regulation adopted by the
25	commissioner.
26	(d) The valuation manual must specify all of the following:
27	(1) Minimum-valuation standards for and definitions of the policies or contracts subject
28	to subsection §27-4.5-2(b). Such minimum_valuation standards shall be:
29	(i) The commissioner's Commissioners reserve valuation method for life insurance
30	contracts, other than annuity contracts, subject to subsection §27-4.5-2(b);
31	(ii) The commissioner's Commissioners annuity reserve valuation method for annuity
32	contracts subject to subsection §27-4.5-2(b); and
33	(iii) Minimum reserves for all other policies or contracts subject to subsection §27-4.5-
34	2(b).

1	(2) Which policies or contracts or types of policies or contracts that are subject to the
2	requirements of a principle-based valuation in subsection §27-4.5-14(a) and the minimum-
3	valuation standards consistent with those requirements;
4	(3) For policies and contracts subject to a principle-based valuation under section §27-
5	4.5-14:
6	(i) Requirements for the format of reports to the commissioner under subdivision 27 4.5-
7	14(b)(2) §27-4.5-14(b)(3) and which shall include information necessary to determine if the
8	valuation is appropriate and in compliance with this chapter;
9	(ii) Assumptions shall be prescribed for risks over which the company does not have
10	significant control or influence.
11	(iii) Procedures for corporate governance and oversight of the actuarial function, and a
12	process for appropriate waiver or modification of such procedures.
13	(4) For policies not subject to a principle-based valuation under section §27-4.5-14, the
14	minimum valuation standard shall either:
15	(i) Be consistent with the minimum standard of valuation prior to the operative date of
16	the valuation manual; or
17	(ii) Develop reserves that quantify the benefits and guarantees, and the funding,
18	associated with the contracts and their risks at a level of conservatism that reflects conditions that
19	include unfavorable events that have a reasonable probability of occurring.
20	(5) Other requirements, including, but not limited to, those relating to reserve methods,
21	models for measuring risk, generation of economic scenarios, assumptions, margins, use of
22	company experience, risk measurement, disclosure, certifications, reports, actuarial opinions and
23	memorandums, transition rules and internal controls; and
24	(6) The data and form of the data required under section §27-4.5-15, with whom which
25	the data must be submitted, and may specify other requirements including data analyses and
26	reporting of analyses.
27	(e) In the absence of a specific_valuation requirement or if a specific_valuation
28	requirement in the valuation manual is not, in the opinion of the commissioner, in compliance
29	with this chapter, then the company shall, with respect to such requirements, comply with
30	minimum_valuation standards prescribed by the commissioner by regulation.
31	(f) The commissioner may engage a qualified actuary, at the expense of the company, to
32	perform an actuarial examination of the company and opine on the appropriateness of any reserve
33	assumption or method used by the company, or to review and opine on a company's compliance
34	with any requirement set forth in this chapter. The commissioner may rely upon the opinion,

regarding provisions contained within this chapter, of a qualified actuary engaged by the commissioner of another state, district or territory of the United States. As used in this subsection, term "engage" includes employment and contracting.

- (g) The commissioner may require a company to change any assumption or method that, in the opinion of the commissioner, is necessary in order to comply with the requirements of the valuation manual or this chapter; and the company shall adjust the reserves as required by the commissioner. The commissioner may take other disciplinary action as permitted pursuant to section §42-14-16.
- 9 <u>27-4.5-16. Confidentiality. --</u> (a) For purposes of this section, "confidential information" shall mean:
 - (1) A memorandum in support of an opinion submitted under section §27-4-3 and any other documents, materials, and other information, including, but not limited to, all working papers, and copies thereof, created, produced, or obtained by, or disclosed to, the commissioner or any other person in connection with such memorandum;
 - (2) All documents, materials, and other information, including, but not limited to, all working papers, and copies thereof, created, produced, or obtained by, or disclosed to, the commissioner or any other person in the course of an examination made under subsection §27-4.5-13(f); provided, however, that if an examination report or other material prepared in connection with an examination made under chapter 27-13.1 of title 27 is not held as private and confidential information under chapter 27-13.1 of title 27, an examination report or other material prepared in connection with an examination made under subsection §27-4.5-13(f) of this chapter shall not be "confidential information" to the same extent as if such examination report or other material had been prepared in accordance with chapter 27-13.1 of title 27;
 - (3) Any reports, documents, materials, and other information developed by a company in support of, or in connection with, an annual certification by the company under subdivision §27-4.5-14(b)(1)(2) of this chapter evaluating the effectiveness of the company's internal controls with respect to a principle-based valuation and any other documents, materials and other information, including, but not limited to, all working papers, and copies thereof, created, produced, or obtained by, or disclosed to, the commissioner or any other person in connection with such reports, documents, materials and other information;
 - (4) Any principle-based valuation report developed under subdivision §27-4.5-14(b)(2)(3) and any other documents, materials, and other information, including, but not limited to, all working papers, and copies thereof, created, produced, or obtained by, or disclosed to, the commissioner or any other person in connection with such report; and

- (5) Any documents, materials, data, and other information submitted by a company under section §27-4.5-15 (collectively, "experience data") and any other documents, materials, data, and other information, including, but not limited to, all working papers, and copies thereof, created or produced in connection with such experience data, in each case that include any potentially company-identifying or personally identifiable information, that is provided to, or obtained by, the commissioner (together with any "experience data", the "experience materials") and any other documents, materials, data, and other information, including, but not limited to, all working papers, and copies thereof, created, produced, or obtained by, or disclosed to, the commissioner or any other person in connection with such experience materials.
 - (b) Privilege for, and confidentiality of, confidential information.

- (1) Except as provided in this section §27-4.5-16, a company's confidential information is confidential by law and privileged, and shall not be subject to chapter 38-2 of title 38, shall not be subject to subpoena and shall not be subject to discovery or admissible in evidence in any private civil action; provided, however, that the commissioner is authorized to use the confidential information in the furtherance of any regulatory or legal action brought against the company as a part of the commissioner's official duties.
- (2) Neither the commissioner, nor any person who received confidential information while acting under the authority of the commissioner, shall be permitted or required to testify in any private civil action concerning any confidential information.
- (3) In order to assist in the performance of the commissioner's duties, the commissioner may share confidential information:
- (i) With other state, federal, and international regulatory agencies and with the NAIC and its affiliates and subsidiaries; and (ii) In the case of confidential information specified in subdivisions §§27-4.5-16(a)(1) and 27-4.5-16(a)(4) only, with the actuarial board for counseling and discipline or its successor upon request stating that the confidential information is required for the purpose of professional disciplinary proceedings, and with state, federal, and international law enforcement officials; in the case of subsections (a) and (b), provided, that, such recipient agrees, and has the legal authority to agree, to maintain the confidentiality and privileged status of such documents, materials, data, and other information in the same manner, and to the same extent, as required for the commissioner.
- (4) The commissioner may receive documents, materials, data, and other information, including otherwise confidential and privileged documents, materials, data, or information, from the NAIC and its affiliates and subsidiaries, from regulatory or law enforcement officials of other foreign or domestic jurisdictions and from the actuarial board for counseling and discipline or its

- successor and shall maintain as confidential or privileged any document, material, data, or other information received with notice or the understanding that it is confidential or privileged under
- 3 the laws of the jurisdiction that is the source of the document, material or other information.
- 4 (5) The commissioner may enter into agreements governing sharing and use of information consistent with subsection §27-4.5-16(b).
- 6 (6) No waiver of any applicable privilege or claim of confidentiality in the confidential
 7 information shall occur as a result of disclosure to the commissioner under this section or as a
 8 result of sharing as authorized in subdivision §27-4.5-16(b)(3).
- 9 (7) A privilege established under the law of any state or jurisdiction that is substantially similar to the privilege established under subsection §27-4.5-16(b) shall be available and enforced in any proceeding in, and in any court of, this state.
- 12 (8) In section §27-4.5-16 "regulatory agency," "law enforcement agency" and the "NAIC" include, but are not limited to, their employees, agents, consultants, and contractors.
- 14 (c) Notwithstanding subsection §27-4.5-16(b), any confidential information specified in subdivisions §27-4.5-16(a)(1) and 27-4.5-14(a)(4):

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- (1) May be subject to subpoena for the purpose of defending an action seeking damages from the appointed actuary submitting the related memorandum in support of an opinion submitted under section §27-4.5-3 or principle-based valuation report developed under subdivision §27-4.5-14(b)(3) by reason of an action required by this chapter or by regulations promulgated hereunder;
- (2) May otherwise be released by the commissioner with the written consent of the company; and
- (3) Once any portion of a memorandum in support of an opinion submitted under section §27-4.5-3 or a principle-based valuation report developed under subdivision §27-4.5-14(b)(3) is cited by the company in its marketing, or is publicly volunteered to or before a governmental agency other than a state insurance department, or is released by the company to the news media, all portions of such memorandum or report shall no longer be confidential.
- 28 SECTION 3. Section 42-14-18 of the General Laws in Chapter 42-14 entitled 29 "Department of Business Regulation" is hereby amended to read as follows:
- 42-14-18. Form and rate filing fees. -- The following fees shall be charged for the services of the division of insurance in reviewing policy or certificate forms, as those terms are defined in section §27-29-2(f)(7), and related forms and rates that are required by law to be submitted by insurers, as that term is defined in section §27-29-2(e)(4), for review and approval by the director prior to use:

1	(1) For each policy or certificate form included in a single package, including any related
2	forms, rates, and other documents submitted in the same package forty dollars (\$40.00); and
3	(2) For related forms or revised rates in connection with a policy that has been
4	previously approved, submitted in a single package, charged based upon the number of policies
5	involved twenty-five dollars (\$25.00).
6	(3) Fees shall be submitted with each filing and shall be deposited as general revenue.
7	These fees shall be in addition to any taxes and fees otherwise payable to the state.
8	(4) Before any form approved pursuant to chapter 27-2.5 of title 27 may be used in the
9	state of Rhode Island, the fees specified in this section must be paid.
10	SECTION 4. Section 27-20.7-14 of the General Laws in Chapter 27-20.7 of title 27
11	entitled "Third Party Health Insurance Administrators" is hereby amended to read as follows:
12	27-20.7-14. Annual report and filing fee (a) Each administrator shall file an annual
12 13	<u>27-20.7-14. Annual report and filing fee</u> (a) Each administrator shall file an annual report for the preceding calendar year with the commissioner on or before March 1 of each year,
13	report for the preceding calendar year with the commissioner on or before March 1 of each year,
13 14	report for the preceding calendar year with the commissioner on or before March 1 of each year, or within any extension of time for filing as the commissioner for good cause may grant. The
13 14 15	report for the preceding calendar year with the commissioner on or before March 1 of each year, or within any extension of time for filing as the commissioner for good cause may grant. The report shall be in the form and contain any matters that the commissioner prescribes and shall be
13 14 15 16	report for the preceding calendar year with the commissioner on or before March 1 of each year, or within any extension of time for filing as the commissioner for good cause may grant. The report shall be in the form and contain any matters that the commissioner prescribes and shall be verified by at least two (2) officers of the administrator.
13 14 15 16 17	report for the preceding calendar year with the commissioner on or before March 1 of each year, or within any extension of time for filing as the commissioner for good cause may grant. The report shall be in the form and contain any matters that the commissioner prescribes and shall be verified by at least two (2) officers of the administrator. (b) The annual report shall include the complete names and addresses of all insurers with
13 14 15 16 17 18	report for the preceding calendar year with the commissioner on or before March 1 of each year, or within any extension of time for filing as the commissioner for good cause may grant. The report shall be in the form and contain any matters that the commissioner prescribes and shall be verified by at least two (2) officers of the administrator. (b) The annual report shall include the complete names and addresses of all insurers with which the administrator had an agreement during the preceding fiscal year.
13 14 15 16 17 18	report for the preceding calendar year with the commissioner on or before March 1 of each year, or within any extension of time for filing as the commissioner for good cause may grant. The report shall be in the form and contain any matters that the commissioner prescribes and shall be verified by at least two (2) officers of the administrator. (b) The annual report shall include the complete names and addresses of all insurers with which the administrator had an agreement during the preceding fiscal year. (c) At the time of filing its annual report, the administrator shall pay a filing fee as

LC004223/SUB A

EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

AN ACT

RELATING TO INSURANCE -- THE STANDARD NON-FORFEITURE LAW FOR LIFE INSURANCE

This act would make technical changes to the standard valuation and standard nonforfeiture provisions of the general laws relating to insurance.

This act would take effect upon passage.

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