S.B. NO. ¹⁰⁹⁶ S.D. 1 H.D. 1 C.D. 1

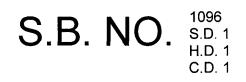
A BILL FOR AN ACT

RELATING TO INSURANCE.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1	SECTI	ON 1. Chapter 431, Hawaii Revised Statutes, is
2	amended by	adding a new section to part II of article 9 to be
3	appropriat	ely designated and to read as follows:
4	" <u>§</u> 431	:9- Contracts between public adjuster and insured.
5	(a) All c	ontracts for services provided by a public adjuster
6	shall be i	n writing and contain the following terms:
7	(1)	Title of "Public Adjuster Contract";
8	(2)	Description of services to be provided to the insured;
9	(3)	Full salary, fee, commission, or other consideration
10		the public adjuster is to receive for services;
11	(4)	Initial expenses to be reimbursed to the public
12		adjuster from the proceeds of the claim payment,
13		specified by type, with dollar estimates set forth in
14		the contract, and with any additional expenses first
15		approved by the insured;
16	(5)	Attestation language stating that the public adjuster
17		is fully bonded pursuant to section 431:9-223;





1	(6)	Insured's full name, street address, insurance company
2		name, and policy number, if known;
3	(7)	Description of the loss and its location, if
4		applicable;
5	(8)	Legible full name of the public adjuster signing the
6		contract;
7	(9)	The public adjuster's permanent home state, business
8		address, and phone number;
9	(10)	License number on record with the insurance division;
10	(11)	Signatures of the public adjuster and the insured; and
11	(12)	Date the contract was signed by the public adjuster
12		and date the contract was signed by the insured.
13	(b)	A public adjuster contract shall not contain any
14	contract	term that:
15	(1)	Requires the insured to authorize an insurance company
16		to issue a check only in the name of the public
17		adjuster;
18	(2)	Imposes collection costs or late fees; or
19	(3)	Precludes the insured from pursuing civil remedies.
20	<u>(c)</u>	No public adjuster shall charge, agree to, or accept
21	as compen	sation or reimbursement any payment, fee, commission,

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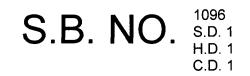
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1	or other	thing of value that is determined to be unreasonable by
2	the commi	ssioner. If the compensation is based on a share of
3	the insur	ance settlement or proceeds, the exact percentage shall
4	be specif	ied in the contract.
5	(d)	If the insurer, no later than seventy-two hours after
6	the date	on which the loss is reported to the insurer, either
7	pays or c	ommits in writing to pay the insured the limits of any
8	coverage	that are or may be applicable to the specific claim,
9	the publi	c adjuster shall:
10	(1)	Not receive a commission consisting of a percentage of
11		the total amount paid by an insurer to resolve a
12		claim;
13	(2)	Inform the insured that the amount of a recovered loss
14		might not be increased by the insurer; and
15	(3)	Be entitled only to reasonable compensation from the
16		insured for services provided by the public adjuster
17		on behalf of the insured, based on the time spent on a
18		claim and expenses incurred by the public adjuster,
19		until the claim is paid or the insured receives a
20		written commitment to pay from the insurer.

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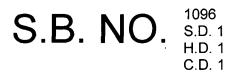
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1	(e) A public adjuster shall provide the insured a written
2	disclosure concerning any direct or indirect financial interest
3	that the public adjuster has with any other party who is
4	involved in any aspect of the claim, other than the salary, fee,
5	commission, or other consideration established in the written
6	contract with the insured, including but not limited to any
7	ownership of, other than as a minority stockholder, or any
8	compensation expected to be received from, any construction
9	firm, salvage firm, building appraisal firm, motor vehicle
10	repair shop, or any other firm that provides estimates for work,
11	or that performs any work, in conjunction with damages caused by
12	the insured loss on which the public adjuster is engaged. For
13	purposes of this subsection, "firm" includes any corporation,
14	partnership, association, joint-stock company, or person.
15	(f) The insured shall have the right to rescind the
16	contract within three business days after the date the contract
17	was signed. The rescission shall be in writing and mailed or
18	delivered to the public adjuster at the address in the contract
19	within the three business-day period.
20	(g) If the insured exercises the right to rescind the
21	contract pursuant to subsection (f), anything of value given by

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1	the insured under the contract shall be returned to the insured
2	within fifteen business days following the receipt of the
3	cancellation notice by the public adjuster.
4	(h) Compensation provisions in a public adjusting contract
5	shall be made available to the commissioner upon request."
6	SECTION 2. Chapter 431, Hawaii Revised Statutes, is
7	amended by adding a new section to part II of article 9A to be
8	appropriately designated and to read as follows:
9	" <u>\$431:9A-</u> Standard of conduct. A person issued a
10	limited lines motor vehicle rental company producer license
11	shall act in good faith, abstain from deception, and practice
12	honesty and equity in all insurance matters."
13	SECTION 3. Chapter 431, Hawaii Revised Statutes, is
14	amended by adding a new section to part IV of article 9A to be
15	appropriately designated and to read as follows:
16	" <u>\$431:9A-</u> Standard of conduct. An owner issued a
17	limited lines self-service storage producer license shall act in
18	good faith, abstain from deception, and practice honesty and
19	equity in all insurance matters."

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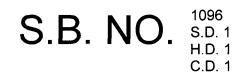
1	SECTION 4. Chapter 431, Hawaii Revised Statutes, is
2	amended by adding a new section to article 31 to be
3	appropriately designated and to read as follows:
4	"§431:31- Standard of conduct. A vendor issued a
5	limited lines license shall act in good faith, abstain from
6	deception, and practice honesty and equity in all insurance
7	matters."
8	SECTION 5. Section 431:2-201, Hawaii Revised Statutes, is
9	amended by amending subsection (c) to read as follows:
10	"(c) The commissioner may:
11	(1) Make reasonable rules for effectuating any provision
12	of this code, except those relating to the
13	commissioner's appointment, qualifications, or
14	compensation. The commissioner shall adopt rules to
15	effectuate article 10C of chapter 431, subject to the
16	approval of the governor's office and the requirements
17	of chapter 91;
18	(2) Conduct examinations and investigations to determine
19	whether any person has violated any provision of this
20	code or to secure information useful in the lawful
21	administration of any provision;

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1	(3)	Require applicants to provide fingerprints and pay a
2		fee to allow the commissioner to make a determination
3		of license eligibility after obtaining state and
4		national criminal history record checks from the
5		Hawaii criminal justice data center and the Federal
6		Bureau of Investigation; [and]
7	(4)	Require, upon reasonable notice, that insurers report
8		any claims information the commissioner may deem
9		necessary to protect the public interest[-]; and
10	(5)	Upon showing of good cause, waive or modify, in whole
11		or part, any or all fees by order."
12	SECT	ION 6. Section 431:7-202, Hawaii Revised Statutes, is
13	amended b	y amending subsection (f) to read as follows:
14	"(f)	The taxes imposed by subsections (a), (b), (c), and
15	(d) shall	be paid monthly. The monthly tax shall be due and
16	payable b	y electronic payment via the [Automated Clearing House
17	debit-or	eredit payment system] National Association of
18	Insurance	Commissioners' Online Premium Tax for Insurance or an
19	equivalen	t service approved by the commissioner on or before the
20	twentieth	day of the calendar month following the month in which

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it accrues, coinciding with the filing of the statement provided
 for in section 431:7-201.

In addition to the monthly tax and monthly tax statement, the annual tax shall be due and payable by electronic payment via the [Automated Clearing House debit or credit payment system] National Association of Insurance Commissioners' Online Premium Tax for Insurance or an equivalent service approved by the commissioner on or before March 1 coinciding with the filing of the statement provided for in section 431:7-201.

10 All amounts paid under this subsection, other than fines, 11 shall be allowed as a credit on the annual tax imposed by 12 subsections (a), (b), (c), and (d).

13 If the total amount of installment payments for any 14 calendar year exceeds the amount of annual tax for that year, 15 the excess shall be treated as an overpayment of the annual tax 16 and be allowed as a refund under section 431:7-203.

Any insurer failing or refusing to pay the required taxes above stated when due and payable shall be liable for a fine of \$500 or ten per cent of the tax due, whichever is greater; plus interest at a rate of twelve per cent per annum on the delinquent taxes. The taxes may be collected by distraint, or

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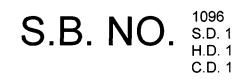
1 the taxes, fine, and interest may be recovered by an action to
2 be instituted by the commissioner in the name of this State, in
3 any court of competent jurisdiction. The commissioner may
4 suspend the certificate of authority of the delinquent insurer
5 until the taxes, fine, and interest, should any be imposed, are
6 fully paid.

7 [As used in this subsection, "Automated Clearing House 8 debit or credit payment system" means the network for the 9 interbank clearing of electronic payments for participating 10 depository financial institutions.]"

SECTION 7. Section 431:8-313, Hawaii Revised Statutes, is amended by amending subsection (a) to read as follows:

13 "(a) Each [surplus lines broker shall file with the 14 commissioner on or before March 15, 2011, a verified statement 15 of all surplus lines insurance transacted during 2010. Each 16 surplus lines broker shall file with the commissioner on or 17 before September 15, 2011, a verified statement of all surplus 18 lines insurance transacted after December 31, 2010, and before 19 July 1, 2011. After June 30, 2011, each] surplus lines broker 20 shall file electronically with the commissioner within 21 forty-five days of the end of each calendar quarter a verified

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1	statement of all surplus lines insurance transacted during the
2	calendar quarter as follows:
3	(1) The statement for the quarter ending March 31 shall be
4	filed on or before May 15;
5	(2) The statement for the quarter ending June 30 shall be
6	filed on or before August 15;
7	(3) The statement for the quarter ending September 30
8	shall be filed on or before November 15; and
9	(4) The statement for the quarter ending December 31 shall
10	be filed on or before February 15."
11	SECTION 8. Section 431:8-315, Hawaii Revised Statutes, is
12	amended by amending subsection (a) to read as follows:
13	"(a) [On or before March 15, 2011, each surplus lines
14	broker shall pay to the director of finance, through the
15	commissioner, a premium tax on surplus lines insurance
16	transacted by the broker during 2010. On or before
17	September 15, 2011, each surplus lines broker shall pay to the
18	director of finance, through the commissioner, a premium tax on
19	surplus lines insurance transacted by the broker-after
20	December 31, 2010, and before July 1, 2011. After June 30,
21	2011, within] <u>Within</u> forty-five days after the end of each

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1 calendar quarter, each surplus lines broker shall pay to the director of finance, through the commissioner $[\tau]$ via the 2 3 National Association of Insurance Commissioners' Online Premium 4 Tax for Insurance or an equivalent service approved by the 5 commissioner, a premium tax on surplus lines insurance 6 transacted by the broker during the calendar guarter for 7 insurance for which this State is the home state of the insured. 8 The tax rate shall be in the amount of 4.68 per cent of gross 9 premiums, less return premiums, on surplus lines insurance for 10 which the home state is this State.

As used in this subsection, "gross premiums" means the amount of the policy or coverage premium charged by the insurer in consideration for the insurance contract. Any charges for policy, survey, inspection, service, or similar fees or other charges added by the broker shall not be considered part of gross premiums."

SECTION 9. Section 431:9-230, Hawaii Revised Statutes, isamended to read as follows:

19 "§431:9-230 Reporting and accounting for [premiums.]
 20 <u>funds.</u> (a) Every licensed adjuster shall have the

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1	responsib	ilities of a trustee for all [premium] <u>funds</u> and return
2	[premium]	funds received or collected under this article.
3	(b)	The licensee, upon receipt of the funds, shall either:
4	(1)	Remit the [premiums (less commissions)] funds and
5		return [premiums] <u>funds</u> received or held by the
6		licensee to the [insurers or the] persons entitled to
7		[such] <u>the</u> funds; or
8	(2)	Maintain the funds at all times in a federally insured
9		account with a bank, savings and loan association, or
10		financial services loan company situated in Hawaii,
11		separate from the licensee's own funds or funds held
12		by the licensee in any other capacity, [in an amount
13		at least equal to the premiums (net of commissions)]
14		and return [premiums] <u>funds</u> received by [such] <u>the</u>
15		licensee and unpaid to the insurers or persons
16		entitled to [such] the funds. Return [premiums] funds
17		shall be returned within thirty days, unless directed
18		otherwise in writing by the person entitled to the
19		funds.
20	The licen	see shall not be required to maintain a separate bank

21 account or other account for the funds of each [insurer or]

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1 person entitled to [such] the funds, [if and] so long as the 2 funds held for the [insurer or] person entitled to [such] the 3 funds are reasonably ascertainable from the books of account and 4 records of the licensee. Only [such] additional funds [as may 5 be] reasonably necessary to pay bank, savings and loan 6 association, or financial services loan company charges may be 7 commingled with the [premium] funds. In the event the bank, 8 savings and loan association, or financial services loan company 9 account is an interest earning account, [such] the licensee may 10 not retain the interest earned on [such] the funds to the 11 licensee's own use or benefit without the prior written consent 12 of the [insurers or] person entitled to [such] the funds. A 13 [premium] trustee account shall be designated on the records of 14 the bank, savings and loan association, or financial services 15 loan company as a "trustee account established pursuant to 16 section 431:9-230, Hawaii Revised Statutes", or words of similar 17 import.

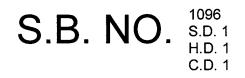
(c) Any [such] licensee who, not being lawfully entitled
to [such] the funds, diverts or appropriates [such] the funds or
any portion of them [to] for the licensee's own use, shall be

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guilty of embezzlement $[\tau]$ and shall be punished as provided in 1 the criminal statutes of this State." 2 SECTION 10. Section 431:9-235, Hawaii Revised Statutes, is 3 amended to read as follows: 4 "§431:9-235 Denial, suspension, revocation of licenses. 5 (a) The commissioner may suspend, revoke, or refuse to extend 6 any license issued under this article for any cause specified in 7 any other provision of this article, or for any of the following 8 9 causes: 10 (1) For any cause for which issuance of the license could have been refused had it then existed and been known 11 to the commissioner; 12 If the licensee wilfully violates or knowingly 13 (2) 14 participates in the violation of any provision of this 15 code; If the licensee has obtained or attempted to obtain 16 (3) any license issued under this article through wilful 17 misrepresentation or fraud, or has failed to pass any 18 19 examination required by section 431:9-206;

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1	(4)	If the licensee has misappropriated, converted to the
2		licensee's own use, or illegally withheld moneys
3		required to be held in a fiduciary capacity;
4	(5)	If the licensee, with intent to deceive, has
5		materially misrepresented the terms or effect of any
6		insurance contract; or has engaged or is about to
7		engage in any fraudulent transaction;
8	(6)	If the licensee has been [guilty of] found to have
9		committed any unfair practice or fraud as defined in
10		article 13;
11	(7)	If in the conduct of the licensee's affairs under the
12		license, the licensee has shown oneself to be a source
13		of injury and loss to the public; or
14	(8)	If the licensee has dealt with, or attempted to deal
15		with, insurance or to exercise powers relative to
16		insurance outside the scope of the licensee's
17		licenses.
18	(b)	The license of any partnership or corporation may be
19	[so] suspe	ended, revoked, or refused for any of the causes that
20	relate to	any individual designated in the license to exercise
21	its power:	3.

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1	(c)	The holder of any license, which has been revoked or
2	suspended	, shall surrender the license certificate to the
3	commissio	ner at the commissioner's request.
4	(d)	The commissioner may suspend, revoke, or refuse to
5	<u>extend an</u>	y license for any cause specified in this article by an
6	order:	
7	(1)	Given to the licensee at least fifteen days prior to
8		the order's effective date, subject to the right of
9		the licensee to have a hearing as provided in
10		section 431:2-308. The license shall be suspended
11		pending the hearing; or
12	(2)	Made after a hearing as provided in section 431:2-308.
13		The effective date of the order shall be ten days
14		after the date the order is given to the licensee.
15		The order may be appealed to the circuit court of the
16		first judicial circuit of this State as provided in
17		chapter 91."
18	SECT	ION 11. Section 431:9A-107.5, Hawaii Revised Statutes,
19	is amende	d to read as follows:
20	"§43	1:9A-107.5 Limited license. (a) Notwithstanding any
21	other pro	vision of this article, the commissioner may issue:

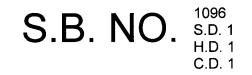
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1	(1)	A limited license to persons selling travel tickets of
2		a common carrier of persons or property who shall act
3		only as to travel ticket policies of accident and
4		health or sickness insurance or baggage insurance on
5		personal effects;
6	(2)	A limited license to each individual who has charge of
7		vending machines used in this State for the
8		effectuation of travel insurance;
9	(3)	A limited license to any individual who sells policies
10		of accident and health or sickness insurance as a
11		promotional device to improve the circulation of a
12		newspaper in this State;
13	(4)	A limited line credit insurance producer license to
14		any individual who sells, solicits, or negotiates
15		limited line credit insurance; or
16	(5)	A limited license to any owner of a self-service
17		storage facility, as defined in section 507-61, to
18		sell stored property insurance, as defined in
19		section 431:9A-171.
20	(b)	The commissioner may prescribe and furnish forms

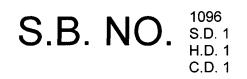
21 calling for any information that the commissioner deems proper

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in connection with the application for or extension of these 1 2 limited licenses. The limited license shall not be issued until the 3 (C) license fee has been paid. 4 (d) A person issued a limited license shall act in good 5 6 faith, abstain from deception, and practice honesty and equity in all insurance matters." 7 SECTION 12. Section 431:10C-405, Hawaii Revised Statutes, 8 9 is amended by amending subsection (a) to read as follows: 10 "(a) The commissioner shall establish a board of governors within the bureau [, a board of governors for the purpose of 11 12 providing] to provide expertise and consultation on all matters pertaining to the operation of the bureau and the joint 13 14 underwriting plan. The [board] commissioner shall appoint members to the board, which shall be composed of: 15 16 (1) [Five] Four persons from, and members or representatives of, nationally organized insurers or 17 their domestic insurer affiliates; 18 19 (2) One person to represent insurance producers;

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1	[(3)	Two members, each a self-insurer under this-article,
2		and nominated by all the certified self-insurers in
3		the State;
4	(4)	Two members, not affiliated with the foregoing
5		organizations, nominated by such nonaffiliated
6		insurers;] and
7	[(5)]	(3) Two members [each, to be] selected by the
8		commissioner or nominated by each of the
9		classifications provided for in
10		section 431:10C-407(b)."
11	SECT	ION 13. Section 431:10D-107, Hawaii Revised Statutes,
12	is amende	d by amending subsection (e) to read as follows:
13	"(e)	The interest rate used in determining minimum
14	nonforfei	ture amounts shall be an annual rate of interest
15	determine	d as the lesser of three per cent a year and the
16	following	, which shall be specified in the contract if the
17	interest :	rate will be reset:
18	(1)	The five-year constant maturity treasury rate reported
19		by the Federal Reserve as of a date, or average over a
20		period, rounded to the nearest one-twentieth of one
21		per cent, specified in the contract not later than

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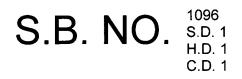


1		fifteen months prior to the contract issue date or
2		redetermination date under paragraph (4);
3	(2)	Reduced by one hundred twenty-five basis points;
4	(3)	Where the resulting interest rate is [not] <u>no</u> less
5		than fifteen-hundredth of one per cent; and
6	(4)	The interest rate shall apply for an initial period
7		and may be redetermined for additional periods. The
8		redetermination date, basis, and period, if any, shall
9		be stated in the contract. As used in this paragraph,
10		"basis" means the date or average over a specified
11		period that produces the value of the five-year
12		constant maturity treasury rate to be used at each
13		redetermination date."
14	SECT	ION 14. Section 431:13-103, Hawaii Revised Statutes,
15	is amended	d by amending subsection (a) to read as follows:
16	"(a)	The following are defined as unfair methods of
17	competitio	on and unfair or deceptive acts or practices in the
18	business o	of insurance:
19	(1)	Misrepresentations and false advertising of insurance
20		policies. Making, issuing, circulating, or causing to
21		be made, issued, or circulated, any estimate,





1	illu	stration, circular, statement, sales presentation,
2	omis	sion, or comparison [which:] <u>that:</u>
3	(A)	Misrepresents the benefits, advantages,
4		conditions, or terms of any insurance policy;
5	(B)	Misrepresents the dividends or share of the
6		surplus to be received on any insurance policy;
7	(C)	Makes any false or misleading statement as to the
8		dividends or share of surplus previously paid on
9		any insurance policy;
10	(D)	Is misleading or is a misrepresentation as to the
11		financial condition of any insurer, or as to the
12		legal reserve system upon which any life insurer
13		operates;
14	(E)	Uses any name or title of any insurance policy or
15		class of insurance policies misrepresenting the
16		true nature thereof;
17	(F)	Is a misrepresentation for the purpose of
18		inducing or tending to induce the lapse,
19		forfeiture, exchange, conversion, or surrender of
20		any insurance policy;



1		(G)	Is a misrepresentation for the purpose of
2			effecting a pledge or assignment of or effecting
3			a loan against any insurance policy;
4		(H)	Misrepresents any insurance policy as being
5			shares of stock;
6		(I)	Publishes or advertises the assets of any insurer
7			without publishing or advertising with equal
8			conspicuousness the liabilities of the insurer,
9			both as shown by its last annual statement; or
10		(J)	Publishes or advertises the capital of any
11			insurer without stating specifically the amount
12			of paid-in and subscribed capital;
13	(2)	Fals	e information and advertising generally. Making,
14		publ	ishing, disseminating, circulating, or placing
15		befo	re the public, or causing, directly or indirectly,
16		to b	e made, published, disseminated, circulated, or
17		plac	ed before the public, in a newspaper, magazine, or
18		othe	r publication, or in the form of a notice,
19		circ	ular, pamphlet, letter, or poster, or over any
20		radi	o or television station, or in any other way, an
21		adve	rtisement, announcement, or statement containing





1		any assertion, representation, or statement with
2		respect to the business of insurance or with respect
3		to any person in the conduct of the person's insurance
4		business, which is untrue, deceptive, or misleading;
5	(3)	Defamation. Making, publishing, disseminating, or
6		circulating, directly or indirectly, or aiding,
7		abetting, or encouraging the making, publishing,
8		disseminating, or circulating of any oral or written
9		statement or any pamphlet, circular, article, or
10		literature which is false, or maliciously critical of
11		or derogatory to the financial condition of an
12		insurer, and which is calculated to injure any person
13		engaged in the business of insurance;
14	(4)	Boycott, coercion, and intimidation.
15		(A) Entering into any agreement to commit, or by any
16		action committing, any act of boycott, coercion,
17		or intimidation resulting in or tending to result
18		in unreasonable restraint of, or monopoly in, the
19		business of insurance; or
20		(B) Entering into any agreement on the condition,
21		agreement, or understanding that a policy will



S.B. NO. ¹⁰⁹⁶ S.D. 1 H.D. 1 C.D. 1

1			not be issued or renewed unless the prospective
2			insured contracts for another class or an
3			additional policy of the same class of insurance
4			with the same insurer;
5	(5)	Fals	e financial statements.
6		(A)	Knowingly filing with any supervisory or other
7			public official, or knowingly making, publishing,
8			disseminating, circulating, or delivering to any
9			person, or placing before the public, or
10			knowingly causing, directly or indirectly, to be
11			made, published, disseminated, circulated,
12			delivered to any person, or placed before the
13			public, any false statement of a material fact as
14			to the financial condition of an insurer; or
15		(B)	Knowingly making any false entry of a material
16			fact in any book, report, or statement of any
17			insurer with intent to deceive any agent or
18			examiner lawfully appointed to examine into its
19			condition or into any of its affairs, or any
20			public official to whom the insurer is required
21			by law to report, or who has authority by law to



S.B. NO. ¹⁰⁹⁶ S.D. 1 H.D. 1 C.D. 1

1		examine into its condition or into any of its
2		affairs, or, with like intent, knowingly omitting
3		to make a true entry of any material fact
4		pertaining to the business of the insurer in any
5		book, report, or statement of the insurer;
6	(6)	Stock operations and advisory board contracts.
7		Issuing or delivering or permitting agents, officers,
8		or employees to issue or deliver, agency company stock
9		or other capital stock, or benefit certificates or
10		shares in any common-law corporation, or securities or
11		any special or advisory board contracts or other
12		contracts of any kind promising returns and profits as
13		an inducement to insurance;
14	(7)	Unfair discrimination.
15		(A) Making or permitting any unfair discrimination
16		between individuals of the same class and equal
17		expectation of life in the rates charged for any
18		policy of life insurance or annuity contract or
19		in the dividends or other benefits payable
20		thereon, or in any other of the terms and
21		conditions of the contract;





1	(B)	Making or permitting any unfair discrimination in
2		favor of particular individuals or persons, or
3		between insureds or subjects of insurance having
4		substantially like insuring, risk, and exposure
5		factors, or expense elements, in the terms or
6		conditions of any insurance contract, or in the
7		rate or amount of premium charge therefor, or in
8		the benefits payable or in any other rights or
9		privilege accruing thereunder;
10	(C)	Making or permitting any unfair discrimination
11		between individuals or risks of the same class
12		and of essentially the same hazards by refusing
13		to issue, refusing to renew, canceling, or
14		limiting the amount of insurance coverage on a
15		property or casualty risk because of the
16		geographic location of the risk, unless:
17		(i) The refusal, cancellation, or limitation is
18		for a business purpose which is not a mere
19		pretext for unfair discrimination; or
20		(ii) The refusal, cancellation, or limitation is
21		required by law or regulatory mandate;





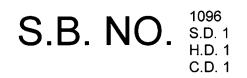
1	(D)	Making or permitting any unfair discrimination
2		between individuals or risks of the same class
3		and of essentially the same hazards by refusing
4		to issue, refusing to renew, canceling, or
5		limiting the amount of insurance coverage on a
6		residential property risk, or the personal
7		property contained therein, because of the age of
8		the residential property, unless:
9		(i) The refusal, cancellation, or limitation is
10		for a business purpose which is not a mere
11		pretext for unfair discrimination; or
12		(ii) The refusal, cancellation, or limitation is
13		required by law or regulatory mandate;
14	(E)	Refusing to insure, refusing to continue to
15		insure, or limiting the amount of coverage
16		available to an individual because of the sex or
17		marital status of the individual; however,
18		nothing in this subsection shall prohibit an
19		insurer from taking marital status into account
20		for the purpose of defining persons eligible for
21		dependent benefits;





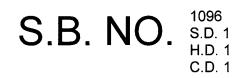
1	(F)	Terminating or modifying coverage, or refusing to
2		issue or renew any property or casualty policy or
3		contract of insurance solely because the
4		applicant or insured or any employee of either is
5		mentally or physically impaired; provided that
6		this subparagraph shall not apply to accident and
7		health or sickness insurance sold by a casualty
8		insurer; provided further that this subparagraph
9		shall not be interpreted to modify any other
10		provision of law relating to the termination,
11		modification, issuance, or renewal of any
12		insurance policy or contract;
13	(G)	Refusing to insure, refusing to continue to
14		insure, or limiting the amount of coverage
15		available to an individual based solely upon the
16		individual's having taken a human
17		immunodeficiency virus (HIV) test prior to
18		applying for insurance; or
19	(H)	Refusing to insure, refusing to continue to
20		insure, or limiting the amount of coverage
21		available to an individual because the individual





1		refuses to consent to the release of information
2		which is confidential as provided in
3		section 325-101; provided that nothing in this
4		subparagraph shall prohibit an insurer from
5		obtaining and using the results of a test
6		satisfying the requirements of the commissioner,
7		which was taken with the consent of an applicant
8		for insurance; provided further that any
9		applicant for insurance who is tested for HIV
10		infection shall be afforded the opportunity to
11		obtain the test results, within a reasonable time
12		after being tested, and that the confidentiality
13		of the test results shall be maintained as
14		provided by section 325-101;
15	(8)	Rebates. Except as otherwise expressly provided by
16		law:
17		(A) Knowingly permitting or offering to make or
18		making any contract of insurance, or agreement as
19		to the contract other than as plainly expressed
20		in the contract, or paying or allowing, or giving
21		or offering to pay, allow, or give, directly or

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1		indirectly, as inducement to the insurance, any
2		rebate of premiums payable on the contract, or
3		any special favor or advantage in the dividends
4		or other benefits, or any valuable consideration
5		or inducement not specified in the contract; or
6		(B) Giving, selling, or purchasing, or offering to
7		give, sell, or purchase as inducement to the
8		insurance or in connection therewith, any stocks,
9		bonds, or other securities of any insurance
10		company or other corporation, association, or
11		partnership, or any dividends or profits accrued
12		thereon, or anything of value not specified in
13		the contract;
14	(9)	Nothing in paragraph (7) or (8) shall be construed as
15		including within the definition of discrimination or
16		rebates any of the following practices:
17		(A) In the case of any life insurance policy or
18		annuity contract, paying bonuses to policyholders
19		or otherwise abating their premiums in whole or
20		in part out of surplus accumulated from
21		nonparticipating insurance; provided that any





1		bonus or abatement of premiums shall be fair and
2		equitable to policyholders and in the best
3		interests of the insurer and its policyholders;
4	(B)	In the case of life insurance policies issued on
5		the industrial debit plan, making allowance to
6		policyholders who have continuously for a
7		specified period made premium payments directly
8		to an office of the insurer in an amount which
9		fairly represents the saving in collection
10		expense;
11	(C)	Readjustment of the rate of premium for a group
12		insurance policy based on the loss or expense
13		experience thereunder, at the end of the first or
14		any subsequent policy year of insurance
15		thereunder, which may be made retroactive only
16		for the policy year; [and]
17	(D)	In the case of any contract of insurance, the
18		distribution of savings, earnings, or surplus
19		equitably among a class of policyholders, all in
20		accordance with this article; and

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1	(E) A re	ward under a wellness program established
2	unde	r a health care plan that favors an
3	indi	vidual if the wellness program meets the
4	foll	owing requirements:
5	<u>(i)</u>	The wellness program is reasonably designed
6		to promote health or prevent disease;
7	<u>(ii)</u>	An individual has an opportunity to qualify
8		for the reward at least once a year;
9	<u>(iii)</u>	The reward is available for all similarly
10		situated individuals;
11	<u>(iv)</u>	The wellness program has alternative
12		standards for individuals who are unable to
13		obtain the reward because of a health
14		factor;
15	(v)	Alternative standards are available for an
16		individual who is unable to participate in a
17		reward program because of a health
18		condition;
19	<u>(vi)</u>	The insurer provides information explaining
20		the standard for achieving the reward and
21		discloses the alternative standards; and





1		-	(vii)	The total rewards for all wellness programs
2				under the health care plan do not exceed
3				twenty per cent of the cost of coverage;
4	(10)	Refi	using	to provide or limiting coverage available to
5		an :	indivi	dual because the individual may have a third-
6		part	cy cla	im for recovery of damages; provided that:
7		(A)	Wher	e damages are recovered by judgment or
8			sett	lement of a third-party claim, reimbursement
9			of p	ast benefits paid shall be allowed pursuant
10			to s	ection 663-10;
11		(B)	This	paragraph shall not apply to entities
12			lice	nsed under chapter 386 or 431:10C; and
13		(C)	For	entities licensed under chapter 432 or 432D:
14			(i)	It shall not be a violation of this section
15				to refuse to provide or limit coverage
16				available to an individual because the
17				entity determines that the individual
18				reasonably appears to have coverage
19				available under chapter 386 or 431:10C; and
20			(ii)	Payment of claims to an individual who may
21				have a third-party claim for recovery of

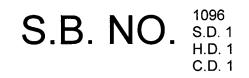




1damages may be conditioned upon the2individual first signing and submitting to3the entity documents to secure the lien and4reimbursement rights of the entity and5providing information reasonably related to6the entity's investigation of its liability7for coverage.

8 Any individual who knows or reasonably should 9 know that the individual may have a third-party claim for recovery of damages and who fails to 10 11 provide timely notice of the potential claim to the entity, shall be deemed to have waived the 12 prohibition of this paragraph against refusal or 13 limitation of coverage. "Third-party claim" for 14 15 purposes of this paragraph means any tort claim for monetary recovery or damages that the 16 individual has against any person, entity, or 17 insurer, other than the entity licensed under 18 19 chapter 432 or 432D;

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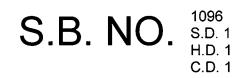


1	(11)	Unfair claim settlement practices. Committing or
2		performing with such frequency as to indicate a
3		general business practice any of the following:
4		(A) Misrepresenting pertinent facts or insurance
5		policy provisions relating to coverages at issue;
6		(B) With respect to claims arising under its
7		policies, failing to respond with reasonable
8		promptness, in no case more than fifteen working
9		days, to communications received from:
10		(i) The insurer's policyholder;
11		(ii) Any other persons, including the
12		commissioner; or
13		(iii) The insurer of a person involved in an
14		incident in which the insurer's policyholder
15		is also involved.
16		The response shall be more than an acknowledgment
17		that such person's communication has been
18		received[$_{ au}$] and shall adequately address the
19		concerns stated in the communication;



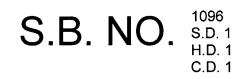
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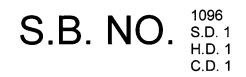
1	(I)	Compelling insureds to institute litigation to
2		recover amounts due under an insurance policy by
3		offering substantially less than the amounts
4		ultimately recovered in actions brought by the
5		insureds;
6	(J)	Attempting to settle a claim for less than the
7		amount to which a reasonable person would have
8		believed the person was entitled by reference to
9		written or printed advertising material
10		accompanying or made part of an application;
11	(K)	Attempting to settle claims on the basis of an
12		application [which] <u>that</u> was altered without
13		notice, knowledge, or consent of the insured;
14	(L)	Making claims payments to insureds or
15		beneficiaries not accompanied by a statement
16		setting forth the coverage under which the
17		payments are being made;
18	(M)	Making known to insureds or claimants a policy of
19		appealing from arbitration awards in favor of
20		insureds or claimants for the purpose of
21		compelling them to accept settlements or





1		compromises less than the amount awarded in
2		arbitration;
3	(N)	Delaying the investigation or payment of claims
4		by requiring an insured, claimant, or the
5		physician or advanced practice registered nurse
6		of either to submit a preliminary claim report
7		and then requiring the subsequent submission of
8		formal proof of loss forms, both of which
9		submissions contain substantially the same
10		information;
11	(0)	Failing to promptly settle claims, where
12		liability has become reasonably clear, under one
13		portion of the insurance policy coverage to
14		influence settlements under other portions of the
15		insurance policy coverage;
16	(P)	Failing to promptly provide a reasonable
17		explanation of the basis in the insurance policy
18		in relation to the facts or applicable law for
19		denial of a claim or for the offer of a
20		compromise settlement; and

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Indicating to the insured on any payment draft, 1 (Q) check, or in any accompanying letter that the 2 payment is "final" or is "a release" of any claim 3 4 if additional benefits relating to the claim are 5 probable under coverages afforded by the policy; unless the policy limit has been paid or there is 6 7 a bona fide dispute over either the coverage or the amount payable under the policy; 8 9 (12)Failure to maintain complaint handling procedures. 10 Failure of any insurer to maintain a complete record 11 of all the complaints [which] that it has received 12 since the date of its last examination under section 431:2-302. This record shall indicate the 13 total number of complaints, their classification by 14 line of insurance, the nature of each complaint, the 15 disposition of [these] the complaints, and the time it 16 took to process each complaint. For purposes of this 17 18 section, "complaint" means any written communication 19 primarily expressing a grievance;

20 (13) Misrepresentation in insurance applications. Making
 21 false or fraudulent statements or representations on

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1		or relative to an application for an insurance policy,
2		for the purpose of obtaining a fee, commission, money,
3		or other benefit from any insurer, producer, or
4		individual; and
5	(14)	Failure to obtain information. Failure of any
6		insurance producer, or an insurer where no producer is
7		involved, to comply with section 431:10D-623(a), (b),
8		or (c) by making reasonable efforts to obtain
9		information about a consumer before making a
10		recommendation to the consumer to purchase or exchange
11		an annuity."
12	SECT	ION 15. Section 431K-3.5, Hawaii Revised Statutes, is
13	amended t	o read as follows:
14	" [+]	§431K-3.5[]] Registration fees and service fees of
15	risk rete	ntion groups not chartered in this State. (a) A risk
16	retention	group chartered in states other than this State and
17	seeking t	o do business as a risk retention group in this State
18	shall pay	an initial registration fee of \$300 to the
19	commissio	ner and shall thereafter pay annually a service fee of
20	\$150 on o	r before [August 16 of each year in which the risk
21	retention	group intends to do business in this State.] the

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extension date of the certificate of authority, as established
 pursuant to section 431:3-214. The commissioner may, upon
 showing of good cause, waive or modify, in whole or part, all
 fees in this subsection by order.

5 If the service fee is not paid on or before [August 16 (b) of the year in which payment is due,] the extension date, a 6 penalty shall be imposed in the amount of fifty per cent of the 7 8 service fee. The commissioner shall provide written notice of 9 the delinquency of payment and the imposition of the authorized 10 penalty. If the service fee and the penalty are not paid within thirty days immediately following the date of the notice of 11 12 delinquency, the commissioner may revoke the registration of the 13 risk retention group and may not reinstate the registration 14 until the service fee and the penalty have been paid."

15 SECTION 16. Section 431K-7.1, Hawaii Revised Statutes, is 16 amended by amending subsection (a) to read as follows:

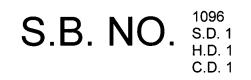
17 "(a) A purchasing group that intends to do business in 18 this State shall pay an initial registration fee of \$300 to the 19 commissioner and shall thereafter pay annually a service fee of 20 \$150 on or before [August 16 of each year in which the

21 purchasing group intends to do business in this State.] the

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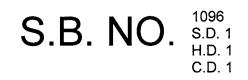


1 extension date of the certificate of authority, as established 2 pursuant to section 431:3-214. The commissioner may, upon showing of good cause, waive or modify, in whole or part, all 3 4 fees in this subsection by order." SECTION 17. Section 431S-3, Hawaii Revised Statutes, is 5 amended by amending subsection (b) to read as follows: 6 7 Each person seeking to register as a pharmacy benefit "(b) manager shall file with the commissioner an application on a 8 9 form prescribed by the commissioner. The application shall 10 include: The name, address, official position, and professional 11 (1)12 qualifications of each individual who is responsible 13 for the conduct of the affairs of the pharmacy benefit 14 manager, including all members of the board of directors; board of trustees; executive commission; 15 16 other governing board or committee; principal officers, as applicable; partners or members, as 17 18 applicable; and any other person who exercises control 19 or influence over the affairs of the pharmacy benefit 20 manager;



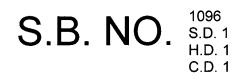
1	(2) The name and address of the applicant's agent for
2	service of process in the State; and
3	(3) A nonrefundable [application] issuance fee of \$140.
4	The commissioner may, upon showing of good cause, waive or
5	modify, in whole or part, the fee in this subsection by order."
6	SECTION 18. Section 431S-4, Hawaii Revised Statutes, is
7	amended to read as follows:
8	"[-f]§4315-4[]] Annual renewal requirement. (a) Each
9	pharmacy benefit manager shall renew its registration by
10	March 31 each year.
11	(b) When renewing its registration, a pharmacy benefit
12	manager shall submit to the commissioner the following:
13	(1) An application for renewal on a form prescribed by the
14	commissioner; and
15	(2) A [renewal] <u>service</u> fee of \$140.
16	The commissioner may, upon showing of good cause, waive or
17	modify, in whole or part, the fee in this subsection by order.
18	[(c) Failure on the part of a pharmacy benefit manager to
19	renew its registration as provided in this section shall result
20	in a penalty of \$140 and may cause the registration to be

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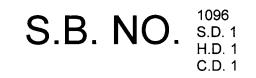
1	revoked o	r sus	pended by the commissioner until the requirements
2	for renewa	al ha	ve been met.]"
3	SECT	ION 1	9. Section 432:1-108, Hawaii Revised Statutes, is
4	amended by	y ame	nding subsection (a) to read as follows:
5	"(a)	The	commissioner shall collect, in advance, the
6	following	fees	:
7	(1)	Cert	ificate of authority:
8		(A)	Application for a certificate of authority:
9			\$900; and
10		(B)	Issuance of certificate of authority: \$600;
11	(2)	Orga	nization of domestic mutual benefit societies:
12		(A)	Application for a certificate of registration:
13			\$1,500; and
14		(B)	Issuance of certificate of registration: \$150;
15			and
16	(3)	For	all services subsequent to the issuance of a
17		cert	ificate of authority, including extension of the
18		cert	ificate of authority: \$600 per year.
19	The commi	ssion	er may, upon showing of good cause, waive or
20	modify, i:	n who	le or part, all fees in this subsection by order."

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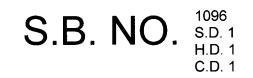
1	SECT	ION 2	0. Section 432:2-108, Hawaii Revised Statutes, is
2	amended by	y ame	nding subsection (a) to read as follows:
3	"(a)	The	commissioner shall collect, in advance, the
4	following	fees	:
5	(1)	Cert	ificate of authority:
6		(A)	Application for a certificate of authority:
7			\$900;
8		(B)	Issuance of certificate of authority: \$600;
9	(2)	Orga	nization of domestic fraternal benefit societies:
10		(A)	Application for a preliminary certificate of
11			authority: \$1,500;
12		(B)	Issuance of preliminary certificate of authority:
13			\$150; and
14	(3)	For	all services subsequent to the issuance of a
15		cert	ificate of authority, including extension of the
16		cert	ificate of authority: \$600 per year.
17	The commis	ssion	er may, upon showing of good cause, waive or
18	modify, in	n who	le or part, all fees in this subsection by order."
19	SECT	ION 2	1. Section 432D-17, Hawaii Revised Statutes, is
20	amended by	y ame	nding subsection (a) to read as follows:

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1	"(a) The commissioner shall collect, in advance, the	
2	following fees:	
3	(1) Certificate of authority:	
4	(A) Application for a certificate of authority:	
5	\$900; and	
6	(B) Issuance of certificate of authority: \$600; and	d
7	(2) For all services subsequent to the issuance of	
8	certificate of authority, including extension of the	
9	certificate of authority: \$600 per year.	
10	The commissioner may, upon showing of good cause, waive or	
11	modify, in whole or part, all fees in this subsection by order	<u> </u>
12	SECTION 22. Section 432G-12, Hawaii Revised Statutes, is	
13	amended by amending subsection (a) to read as follows:	
14	"(a) The commissioner shall collect, in advance, the	
15	following fees:	
16	(1) Certificate of authority:	
17	(A) Application for a certificate of authority:	
18	\$900; and	
19	(B) Issuance of certificate of authority: \$600; an	d

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1	(2) For all services subsequent to the issuance of a
2	certificate of authority, including extension of the
3	certificate of authority: \$600 per year.
4	The commissioner may, upon showing of good cause, waive or
5	modify, in whole or part, all fees in this subsection by order."
6	SECTION 23. If any provision of this Act, or the
7	application thereof to any person or circumstance, is held
8	invalid, the invalidity does not affect other provisions or
9	applications of the Act that can be given effect without the
10	invalid provision or application, and to this end the provisions
11	of this Act are severable.
12	SECTION 24. Statutory material to be repealed is bracketed
13	and stricken. New statutory material is underscored.
14	SECTION 25. This Act shall take effect upon its approval.





Report Title:

Insurance; Public Adjuster; Bill Reviewer; Motor Vehicle Rental Company; Portable Electronic; Self-service Storage; Limited Line License; Fee; National Association of Insurance Commissioners; Surplus Line; Hawaii Joint Underwriting Plan; Wellness Program

Description:

Institutes various consumer protections with regard to public adjusters, including requiring contractual terms and disclosures and granting a right to rescind. Imposes a standard of conduct on various entities. Authorizes the insurance commissioner to waive or modify certain fees by order. Reinstates the right to an administrative hearing and appeal from an order. Amends the Hawaii joint underwriting plan board of governors. Lowers the minimum nonforfeiture interest rate. Clarifies that rewards under wellness programs do not qualify as prohibited rebates. (CD1)

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

