- not to renew, or for any information provided or evidence submitted at any hearings conducted in connection with reasons for cancellation or intent not to renew.
  - SEC. 13. If any provision of this Act or the application of the Act to any person or circumstance is held invalid, such invalidity shall not affect other provisions or applications of the Act which can be given effect without the invalid provision and to this end the provisions of this Act are declared to be severable.

Approved February 12, 1970.

#### CHAPTER 1249

#### INSURANCE HOLDING COMPANIES

S. F. 1203

AN ACT to regulate insurance holding company systems.

Be It Enacted by the General Assembly of the State of Iowa:

1 Section 1. Definitions.

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For the purpose of this Act, unless the context otherwise requires:

1. Affiliate of, or a person affiliated with, a specific person, shall mean a person who directly, or indirectly through one or more intermediaries, controls, or is controlled by, or is under common control with, the person specified.

2. The term "commissioner" shall mean the insurance commissioner, his deputies, or the insurance department, as appropriate.

3. Control, including controlling, controlled by, and under common control with, shall mean the possession, direct or indirect, of the power to direct or cause the direction of the management and policies of a person, whether through the ownership of voting securities, by contract other than a commercial contract for goods or nonmanagement services, or otherwise, unless the power is solely the result of an official position with or a corporate office held by the person. Control shall be presumed to exist if any person, directly or indirectly, owns, controls, holds with the power to vote, or holds proxies representing, ten percent or more of the voting securities of any other person. This presumption may be rebutted by showing that control does not exist in fact.

4. Insurance holding company system shall consist of two or more

22 affiliated persons, one or more of which is an insurer.
23 5. Insurer shall mean a company qualified and l

5. Insurer shall mean a company qualified and licensed by the insurance department of Iowa to transact the business of insurance in this state by certificate issued pursuant to chapters five hundred eight (508), five hundred fifteen (515), five hundred eighteen A (518A), and five hundred twenty (520) of the Code, except that it shall not include:

a. Agencies, authorities or instrumentalities of the United States, its possessions and territories, the Commonwealth of Puerto Rico,

- the District of Columbia, or a state or political subdivision of a state.
  - b. Fraternal benefit societies.

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- c. Nonprofit medical, hospital or dental service associations.
- 6. A "person" is an individual, a corporation, a partnership, an association, a joint stock company, a trust, an unincorporated organization, any similar entity or any combination of the foregoing acting in concert, but shall not include any securities broker performing no more than the usual and customary broker's function.
- 7. A "subsidiary" of a specified person is an affiliate controlled by such person directly, or indirectly through one or more intermediaries.
- 8. A "securityholder" of a specified person is one who owns any security of such person, including common stock, referred stock, debt obligations, and any other security convertible into or evidencing the right to acquire any of the foregoing.
- right to acquire any of the foregoing.

  9. The term "voting security" shall include any security convertible into or evidencing a right to acquire a voting security.

## SEC. 2. Subsidiaries of insurers.

- 1. Authorization. Any domestic insurer, either by itself or in cooperation with one or more persons, subject to the limitations set forth herein or elsewhere in this Act, may organize or acquire one or more subsidiaries engaged or registered to engage in one or more of the following businesses or activities:
- a. Any kind of insurance business authorized by the jurisdiction in which it is incorporated.
- b. Acting as an insurance broker or as an insurance agent for its parent or for any of its parent's insurer subsidiaries or intermediate insurer subsidiaries.
- c. Investing, reinvesting or trading in securities for its own account, that of its parent, any subsidiary of its parent, or any affiliate or subsidiary.
- d. Management of any investment company subject to or registered pursuant to the Investment Company Act of 1940, as amended, including related sales and services.
- e. Acting as a broker dealer subject to or registered pursuant to the Securities Exchange Act of 1934 as amended.
- f. Rendering financial services and/or advice to individuals, governments, government agencies, corporations, or other organizations or groups.
- g. Rendering other services related to the operations of an insurance business including, but not limited to, actuarial, loss prevention, safety engineering, data processing, accounting, claims, appraisal, and collection services.
- h. Ownership and management of assets which the parent corporation could itself own and manage.
- *i*. Acting as administrative agent for a government instrumentality which is performing an insurance function.
- j. Financing of insurance premiums, agents and other forms of
  consumer financing.
  k. Any other business or service activity reasonably ancillary to
  - k. Any other business or service activity reasonably ancillary to an insurance business.
    - l. Owning a corporation or corporations engaged or organized to

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 engage exclusively in one or more of the businesses specified in paragraphs a to k inclusive.

2. Exception. Nothing contained in subsection one (1) of this section shall prohibit a domestic insurer, either by itself or in cooperation with one or more persons, from investing amounts up to a total of ten percent of surplus in one or more subsidiaries or affiliates organized to do any lawful business.

3. Additional investment authority. In addition to investments in common stock, preferred stock, debt obligations and other securities permitted under all other sections of this Title, a domestic insurer may also:

a. Invest, in common stock, preferred stock, debt obligations, and other securities of one or more subsidiaries, amounts which do not exceed the lesser of ten percent of such insurer's assets or fifty percent of such insurer's surplus as regards policyholders, provided that after such investments the insurer's surplus as regards policyholders will be reasonable in relation to the insurer's outstanding liabilities and adequate to its financial needs. In calculating the amount of such investments both of the following shall be included:

(1) Total net monies or other consideration expended and obligations assumed in the acquisition or formation of a subsidiary, including all organizational expenses and contributions to capital and surplus of such subsidiary whether or not represented by the purchase of capital stock or issuance of other securities.

(2) All amounts expended in acquiring additional common stock, preferred stock, debt obligations, and other securities and all contributions to the capital or surplus, of a subsidiary subsequent to its acquisition or formation.

 $\hat{b}$ . If the insurer's total liabilities, as calculated for National Association of Insurance Commissioners annual statement purposes, are less than ten percent of assets, invest any amount in common stock, preferred stock, debt obligations, and other securities of one or more subsidiaries, provided that after such investment the insurer's surplus as regards policyholders, considering such investment as if it were a disallowed asset, will be reasonable in relation to the insurer's outstanding liabilities and adequate to its financial needs.

c. Invest any amount in common stock, preferred stock, debt obligations and other securities of one or more subsidiaries provided that each such subsidiary agrees to limit its investments in any asset so that such investments will not cause the amount of the total investment of the insurer to exceed any of the investment limitations specified in paragraph a of this subsection or in chapters five hundred eleven (511), five hundred fifteen (515), five hundred eighteen A (518A), and five hundred twenty (520) of the Code applicable to the insurer. For the purpose of this paragraph, "total investment of the insurer" shall include both:

(1) Any direct investment by the insurer in an asset.

(2) The insurer's proportionate share of any investment in an asset by any subsidiary of the insurer, which shall be calculated by multiplying the amount of the subsidiary's investment by the percentage of the insurer's ownership of such subsidiary.

d. With the approval of the commissioner, invest any amount in

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common stock, preferred stock, debt obligations, or other securities of one or more subsidiaries, provided that after such investment the insurer's surplus as regards policyholders will be reasonable in relation to the insurer's outstanding liabilities and adequate to its financial needs.

e. Invest any amount in the common stock, preferred stock, debt obligations, or other securities of any subsidiary exclusively engaged in holding title to or holding title to and managing or developing real or personal property, if after considering as a disallowed asset so much of the investment as is represented by subsidiary assets which if held directly by the insurer would be considered as a disallowed asset, the insurer's surplus as regards policyholders will be reasonable in relation to the insurer's outstanding liabilities and adequate to its financial needs, and if following such investment all voting securities of such subsidiary would be owned by the insurer.

4. Exemption from investment restrictions. Investments in common stock, preferred stock, debt obligations or other securities of subsidiaries made pursuant to subsection three (3) of this section hereof shall not be subject to any of the otherwise applicable restrictions or prohibitions contained in the Code applicable to such investments of insurers.

5. Qualification of investment: when determined, Whether any investment pursuant to subsection three (3) of this section meets the applicable requirements thereof is to be determined immediately after such investment is made, taking into account the then outstanding principal balance on all previous investments in debt obligations, and the value of all previous investments in equity securities as of the date they were made.

6. Cessation of control. If an insurer ceases to control a subsidiary, it shall dispose of any investment therein made pursuant to this section within three years from the time of the cessation of control or within such further time as the commissioner may prescribe, unless at any time after such investment shall have been made, such investment shall have met the requirements for investment under any other section of the Code, and the insurer has notified the commissioner thereof.

Acquisition of control of or merger with domestic insurer. 1. Filing requirements. No person other than the issuer shall make a tender offer for or a request or invitation for tenders of, or enter into any agreement to exchange securities for, seek to acquire, or acquire, in the open market or otherwise, any voting security of a domestic insurer if, after the consummation thereof, such person would, directly or indirectly, or by conversion or by exercise of any right to acquire, be in control of such insurer, and no person shall enter into an agreement to merge with or otherwise to acquire control of a domestic insurer unless, at the time any such offer, request, or invitation is made or any such agreement is entered into, or prior to the acquisition of such securities if no offer or agreement is involved, such person has filed with the commissioner and has sent to such insurer, and such insurer has sent to its shareholders, a statement containing the information required by this section and such offer, request, invitation, agreement or acquisition has been approved by the commissioner in the manner hereinafter prescribed.

a. For purposes of this section: a domestic insurer shall include any other person controlling a domestic insurer unless such other person is either directly or through its affiliates primarily engaged in business other than the business of insurance.

2. Content of statement. The statement to be filed with the commissioner hereunder shall be made under oath or affirmation and

shall contain the following information:

a. The name and address of each person by whom or on whose behalf the merger or other acquisition of control referred to in subsection one (1) of this section is to be effected, hereinafter called "acquiring party".

(1) If such person is an individual, his principal occupation and all offices and positions held during the past five years, and any conviction of crimes other than minor traffic violations during the

past ten years.

(2) If such person is not an individual, a report of the nature of its business operations during the past five years or for such lesser period as such person and any predecessors thereof shall have been in existence; an informative description of the business intended to be done by such person and such person's subsidiaries; and a list of all individuals who are or who have been selected to become directors or executive officers of such person, or who perform or will perform functions appropriate to such positions. Such list shall include for each such individual the information required by subparagraph (1) of this subsection.

b. The source, nature and amount of the consideration used or to be used in effecting the merger or other acquisition of control, a description of any transaction wherein funds were or are to be obtained for any such purpose, and the identity of persons furnishing such consideration, provided, however, that where a source of such consideration is a loan made in the lender's ordinary course of business, the identity of the lender shall remain confidential, if the

person filing such statement so requests.

c. Fully audited financial information as to the earnings and financial condition of each acquiring party for the preceding five fiscal years of each such acquiring party, or for such lesser period as such acquiring party and any predecessors thereof shall have been in existence, and similar unaudited information as of a date not earlier than ninety days prior to the filing of the statement.

d. Any plans or proposals which each acquiring party may have to liquidate such insurer, to sell its assets or merge or consolidate it with any person, or to make any other material change in its business

or corporate structure or management.

e. The number of shares of any security referred to in subsection one (1) of this section which each acquiring party proposes to acquire, and the terms of the offer, request, invitation, agreement, or acquisition referred to in subsection one (1) of this section, and a statement as to the method by which the fairness of the proposal was arrived at.

f. The amount of each class of any security referred to in subsection one (1) of this section which is beneficially owned or con-

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cerning which there is a right to acquire beneficial ownership by 69 each acquiring party.

g. A full description of any contracts, arrangements or understandings with respect to any security referred to in subsection one (1) of this section in which any acquiring party is involved, including but not limited to transfer of any of the securities, joint ventures, loan or option arrangements, puts or calls, guarantees of loans, guarantees against loss or guarantees of profits, division of losses or profits, or the giving or withholding of proxies. Such description shall identify the persons with whom such contracts, arrangements or understandings have been entered into.

h. A description of the purchase of any security referred to in subsection one (1) of this section during the twelve calendar months preceding the filing of the statement, by any acquiring party, including the dates of purchase, names of the purchasers, and consideration paid or agreed to be paid therefor.

i. A description of any recommendations to purchase any security referred to in subsection one (1) of this section made during the twelve calendar months preceding the filing of the statement, by any acquiring party, or by anyone based upon interview or at the suggestion of such acquiring party.

j. Copies of all tender offers for, requests or invitations for tenders of, exchange offers for, and agreements to acquire or exchange any securities referred to in subsection one (1) of this section, and, if distributed, of additional soliciting material relating thereto.

k. The terms of any agreement, contract or understanding made with any broker-dealer as to solicitation of securities referred to in subsection one (1) of this section for tender, and the amount of any fees, commissions or other compensation to be paid to broker-dealers with regard thereto.

l. Such additional information as the commissioner may by rule or regulation prescribe as necessary or appropriate for the protection of policyholders and securityholders of the insurer or in the public interest.

If the person required to file the statement referred to in subsection one (1) of this section is a partnership, limited partnership, syndicate or other group, the commissioner may require that the information called for by paragraphs a through l of this subsection shall be given with respect to each partner of such partnership or limited partnership, each member of such syndicate or group, and each person who controls such partner or member. If any such partner, member or person is a corporation or the person required to file the statement referred to in subsection one (1) of this section is a corporation, the commissioner may require that the information called for by paragraphs a through l of this subsection shall be given with respect to such corporation, each officer and director of such corporation, and each person who is directly or indirectly the beneficial owner of more than ten percent of the outstanding voting securities of such corporation. If any material change occurs in the facts set forth in the statement filed with the commissioner and sent to such insurer pursuant to this section, an amendment setting forth such change, together with copies of all documents and other material relevant to such change, shall be filed with the commissioner and sent to such insurer within two business days after the person learns of such change. Such insurer shall send such amendment to its shareholders.

- 3. Alternative filing materials. If any offer, request, invitation, agreement or acquisition referred to in subsection one (1) of this section is proposed to be made by means of a registration statement under the Securities Act of 1933 or in circumstances requiring the disclosure of similar information under the Securities Exchange Act of 1934, or under a state law requiring similar registration, or disclosure, the person required to file the statement referred to in subsection one (1) of this section may utilize such documents in furnishing the information called for by that statement.
  - 4. Approval by the commissioner: hearings.

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- a. The commissioner shall approve any merger or other acquisition of control referred to in subsection one (1) of this section unless, after a public hearing thereon, he finds any of the following:
- (1) After the change of control the domestic insurer referred to in subsection one (1) of this section would not be able to satisfy the requirements for the issuance of a license to write the line or lines of insurance for which it is presently licensed.
- (2) The effect of the merger or other acquisition of control would be substantially to lessen competition in insurance in this state or tend to create a monopoly therein.
- (3) The financial condition of any acquiring party is such as might jeopardize the financial stability of the insurer, or prejudice the interest of its policyholders or the interests of any remaining securityholders who are unaffiliated with such acquiring party.
- (4) The terms of the offer, request, invitation, agreement or acquisition referred to in subsection one (1) of this section are unfair and unreasonable to the securityholders of the insurer.
- (5) The plans or proposals which the acquiring party has to liquidate the insurer, sell its assets or consolidate or merge it with any person, or to make any other material change in its business or corporate structure or management, are unfair and unreasonable to policyholders of the insurer and not in the public interest.
- (6) The competence, experience and integrity of those persons who would control the operation of the insurer are such that it would not be in the interest of policyholders of the insurer and of the public to permit the merger or other acquisition of control.
- b. The public hearing referred to in paragraph a of this subsection shall be held within thirty days after the statement required by subsection one (1) of this section is filed, and at least twenty days' notice thereof shall be given by the commissioner to the person filing the statement. Not less than seven days' notice of such public hearing shall be given by the person filing the statement to the insurer and to such other persons as may be designated by the commissioner. The insurer shall give such notice to its securityholders. The commissioner shall make a determination within thirty days after the conclusion of such hearing. At such hearing, the person filing the statement, the insurer, any person to whom notice of hearing was sent, and any other person whose interests may be affected thereby

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- shall have the right to present evidence, examine and cross-examine witnesses, and offer oral and written arguments and in connection therewith shall be entitled to conduct discovery proceedings in the same manner as is presently allowed in the district court of this state. All discovery proceedings shall be concluded not later than three days prior to the commencement of the public hearing.
- 5. Mailings to shareholders; payment of expenses. All statements, amendments, or other material filed pursuant to subsections one (1) or two (2) of this section, and all notices of public hearings held pursuant to subsection four (4) of this section, shall be mailed by the insurer to its shareholders within five business days after the insurer has received such statements, amendments, other material, or notices. The expenses of mailing shall be borne by the person making the filing. As security for the payment of such expenses, such person shall file with the commissioner an acceptable bond or other deposit in an amount to be determined by the commissioner.
- 6. Exemptions. The provisions of this section shall not apply to: a. Any offers, requests, invitations, agreements or acquisitions by the person referred to in subsection one (1) of this section of any voting security referred to in subsection one (1) of this section which, immediately prior to the consummation of such offer, request, invitation, agreement or acquisition, was not issued and outstanding.
- b. Any offer, request, invitation, agreement or acquisition which the commissioner by order shall exempt therefrom for one of the following reasons:
- (1) It has not been made or entered into for the purpose and does not have the effect of changing or influencing the control of a domes-
- (2) It is otherwise not comprehended within the purposes of this section.
  - 7. Violations. The following shall be violations of this section:
- a. The failure to file any statement, amendment, or other material required to be filed pursuant to subsection one (1) or two (2) of this section.
- b. The effectuation or any attempt to effectuate an acquisition of control of, or merger with, a domestic insurer unless the commissioner has given his approval thereto.
- 8. Jurisdiction; consent to service of process. The district court is hereby vested with jurisdiction over every person not resident, domiciled, or authorized to do business in this state who files a statement with the commissioner under this section, and over all actions involving such person arising out of violations of this section, and each such person shall be deemed to have performed acts equivalent to and constituting an appointment by such a person of the commissioner to be his true and lawful attorney upon whom may be served all lawful process, notice or demand in any action, suit or proceeding arising out of violations of this section. Copies of all such lawful process, notice or demand shall be served on the commissioner and transmitted by registered or certified mail by the commissioner to such person at his last known address.
- Registration of insurers.
- 2 1. Registration. Every insurer which is authorized to do business

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53 54 2. Information and form required. Every insurer subject to registration shall file a registration statement on a form provided by the commissioner, which shall contain current information about:

a. The capital structure, general financial condition, ownership and management of the insurer and any person controlling the insurer.

b. The identity of every member of the insurance holding company system.

c. The following agreements in force, relationships subsisting, and transactions currently outstanding between such insurer and its affiliates:

- (1) Loans, other investments, or purchases, sales or exchanges of securities of the affiliates by the insurer or of the insurer by its affiliates.
  - (2) Purchases, sales, or exchanges of assets.
  - (3) Transactions not in the ordinary course of business.
- (4) Guarantees or undertakings for the benefit of an affiliate which result in an actual contingent exposure of the insurer's assets to liability, other than insurance contracts entered into in the ordinary course of the insurer's business.
- (5) All management and service contracts and all cost-sharing arrangements, other than cost allocation arrangements based upon generally accepted accounting principles.
- (6) Reinsurance agreements covering all or substantially all of one or more lines of insurance of the ceding company.
- d. Other matters concerning transactions between registered insurers and any affiliates as may be included from time to time in any registration forms adopted or approved by the commissioner.
- 3. Materiality. No information need be disclosed on the registration statement filed pursuant to subsection two (2) of this section if such information is not material for the purposes of this section. Unless the commissioner by rule, regulation or order provides otherwise, sales, purchases, exchanges, loans or extensions of credit, or investments, involving one-half of one percent or less of an insurer's admitted assets as of the thirty-first day of December next preceding shall not be deemed material for purposes of this section.
  - 4. Amendments to registration statements. Each registered in-

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surer shall keep current the information required to be disclosed in its registration statement by reporting all material changes or additions on amendment forms provided by the commissioner within fifteen days after the end of the month in which it learns of each such change or addition, provided, however, that subject to subsection three (3) of section five (5) of this Act, each registered insurer shall so report all dividends and other distributions to shareholders within two business days following the declaration thereof.

5. Termination of registration. The commissioner shall terminate the registration of any insurer which demonstrates that it no longer

is a member of an insurance holding company system.

6. Consolidated filing. The commissioner may require or allow two or more affiliated insurers subject to registration hereunder to file a consolidated registration statement or consolidated reports amending their consolidated registration statement or their individual registration statements.

7. Alternative registration. The commissioner may allow an insurer which is authorized to do business in this state and which is part of an insurance holding company system to register on behalf of any affiliated insurer which is required to register under subsection one (1) of this section and to file all information and material required to be filed under this section.

8. Exemptions. The provisions of this section shall not apply to any insurer, information or transaction if and to the extent that the commissioner by rule, regulation, or order shall exempt the same

from the provisions of this section.

- 9. Disclaimer. Any person may file with the commissioner a disclaimer of affiliation with any authorized insurer or such a disclaimer may be filed by such insurer or any member of an insurance holding company system. The disclaimer shall fully disclose all material relationships and basis for affiliation between such person and such insurer as well as the basis for disclaiming such affiliation. After a disclaimer has been filed, the insurer shall be relieved of any duty to register or report under this section which may arise out of the insurer's relationship with such person unless and until the commissioner disallows such a disclaimer. The commissioner shall disallow such a disclaimer only after furnishing all parties in interest with notice and opportunity to be heard and after making specific findings of fact to support such disallowance.
- 94 10. Violations. The failure to file a registration statement or any 95 amendment thereto required by this section within the time specified for such filing shall be a violation of this section. 96

#### Standards. SEC. 5.

- 1. Transactions with affiliates. Material transactions by registered insurers with their affiliates shall be subject to all of the following standards:
  - a. The terms shall be fair and reasonable.
- b. The books, accounts and records of each party shall be so maintained as to clearly and accurately disclose the precise nature and details of the transactions.
- c. The insurer's surplus as regards policyholders following any dividends or distributions to shareholder affiliates shall be reasonable

11 in relation to the insurer's outstanding liabilities and adequate to its 12 financial needs.

- 2. Adequacy of surplus. For purposes of this Act in determining whether an insurer's surplus as regards policyholders is reasonable in relation to the insurer's outstanding liabilities and adequate to its financial needs, the following factors, among others, shall be considered:
- a. The size of the insurer as measured by its assets, capital and surplus, reserves, premium writings, insurance in force and other appropriate criteria.

b. The extent to which the insurer's business is diversified among the several lines of insurance.

- c. The number and size of risks insured in each line of business.
- d. The extent of the geographical dispersion of the insurer's insured risks.
  - e. The nature and extent of the insurer's reinsurance program.
- f. The quality, diversification, and liquidity of the insurer's investment portfolio.
- g. The recent past and projected future trend in the size of the insurer's surplus as regards policyholders.
- h. The surplus as regards policyholders maintained by other comparable insurers.

i. The adequacy of the insurer's reserves.

- j. The quality and liquidity of investments in subsidiaries made pursuant to section two (2) of this Act. The commissioner may treat any such investment as a disallowed asset for purposes of determining the adequacy of surplus as regards policyholders whenever in his judgment such investment so warrants.
  - 3. Dividends and other distributions.

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No insurer subject to registration under section four (4) of this Act shall pay any extraordinary dividend or make any other extraordinary distribution to its shareholders until either thirty days after the commissioner has received notice of the declaration thereof and has not within such period disapproved such payment, or the commissioner shall have approved such payment within such thirty day period.

For purposes of this section, an extraordinary dividend or distribution includes any dividend or distribution of cash or other propperty, whose fair market value together with that of other dividends or distributions made within the preceding twelve months exceeds the greater of either ten percent of such insurer's surplus as regards policyholders as of the thirty-first day of December next preceding, or the net gain from operations of such insurer, if such insurer is a life insurer or the net investment income if such insurer is not a life insurer, for the twelve month period ending the thirty-first day of December next preceding, but shall not include pro rata distributions of any class of the insurer's own securities.

Notwithstanding any other provision of law, an insurer may declare an extraordinary dividend or distribution which is conditional upon the commissioner's approval thereof, and such a declaration shall confer no rights upon shareholders until either the commissioner has approved the payment of such dividend or distribution,

or the commissioner has not disapproved such payment within the thirty day period referred to above.

#### SEC. 6. Examination.

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- 1. Power of commissioner. Subject to the limitation contained in this section and in addition to the powers which the commissioner has under chapter five hundred seven (507) of the Code relating to the examination of insurers, the commissioner shall also have the power to order any insurer registered under section four (4) of this Act to produce such records, books, or other information papers in the possession of the insurer or its affiliates as shall be necessary to ascertain the financial condition or legality of conduct of such insurer. In the event such insurer fails to comply with such order, the commissioner shall have the power to examine such affiliates to obtain such information.
- 2. Purpose and limitation of examination. The commissioner shall exercise his power under subsection one (1) of this section only if the examination of the insurer under chapter five hundred seven (507) of the Code is inadequate or the interests of the policyholders of such insurer may be adversely affected.
- 3. Use of consultants. The commissioner may retain at the registered insurer's expense such attorneys, actuaries, accountants and other experts not otherwise a part of the commissioner's staff as shall be reasonably necessary to assist in the conduct of the examination under subsection one (1) of this section. Any persons so retained shall be under the direction and control of the commissioner and shall act in a purely advisory capacity.
- 4. Expenses. Each registered insurer producing for examination records, books and papers pursuant to subsection one (1) of this section shall be liable for and shall pay the expense of such examination in accordance with section five hundred seven point seven (507.7) of the Code.

#### SEC. 7. Confidential treatment.

All information, documents and copies thereof obtained by or disclosed to the commissioner or any other person in the course of an examination or investigation made pursuant to section six (6) of this Act and all information reported pursuant to section four (4) of this Act, shall be given confidential treatment and shall not be subject to subpoena and shall not be made public by the commissioner or any other person, except to insurance departments of other states, without the prior written consent of the insurer to which it pertains unless the commissioner, after giving the insurer and its affiliates who would be affected thereby, notice and opportunity to be heard, determines that the interests of policyholders, shareholders or the public will be served by the publication thereof, in which event he may publish all or any part thereof in such manner as he may deem appropriate.

#### SEC. 8. Rules and regulations.

The commissioner may, upon notice and opportunity for all interested persons to be heard, issue such rules, regulations, and orders as shall be necessary to carry out the provisions of this Act.

Injunctions; prohibitions against voting securities; sequestration of voting securities.

1. *Injunctions*. Whenever it appears to the commissioner that any insurer or any director, officer, employee or agent thereof has committed or is about to commit a violation of this Act or any rule, regulation, or order issued by the commissioner hereunder, the commissioner may apply to the district court of the county in which the principal office of the insurer is located or if such insurer has no such office in this state then to the district court of Polk County for an order enjoining such insurer or such director, officer, employee or agent thereof from violating or continuing to violate this Act or any such rule, regulation or order, and for such other equitable relief as the nature of the case and the interests of the insurer's policyholders,

creditors and shareholders or the public may require.

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2. Voting of securities; when prohibited. No security which is the subject of any agreement or arrangement regarding acquisition, or which is acquired or to be acquired, in contravention of the provisions of this Act or of any rule, regulation or order issued by the commissioner hereunder may be voted at any shareholders' meeting, or may be counted for quorum purposes, and any action of shareholders requiring the affirmative vote of a percentage of shares may be taken as though such securities were not issued and outstanding; but no action taken at any such meeting shall be invalidated by the voting of such securities, unless the action would materially affect control of the insurer or unless the district court has so ordered. If any insurer or the commissioner has reason to believe that any security of the insurer has been or is about to be acquired in contravention of the provisions of this Act or of any rule, regulation or order issued by the commissioner hereunder the insurer or the commissioner may apply to the district court of Polk County or to the district court for the county in which the insurer has its principal place of business to enjoin any offer, request, invitation, agreement or acquisition made in contravention of section three (3) of this Act or any rule, regulation, or order issued by the commissioner thereunder to enjoin the voting of any security so acquired, to void any vote of such security already cast at any meeting of shareholders, and for such other equitable relief as the nature of the case and the interests of the insurer's policyholders, creditors and shareholders or the public may require.

3. Sequestration of voting securities. In any case where a person has acquired or is proposing to acquire any voting securities in violation of this Act or any rule, regulation or order issued by the commissioner hereunder, the district court of Polk County or the district court for the county in which the insurer has its principal place of business may, on such notice as the court deems appropriate. upon the application of the insurer or the commissioner seize or sequester any voting securities of the insurer owned directly or indirectly by such person, and issue such orders with respect thereto as may be appropriate to effectuate the provisions of this Act. Notwithstanding any other provisions of law, for the purposes of this Act the situs of the ownership of the securities of domestic insurers

shall be deemed to be in this state.

SEC. 10. Criminal proceedings.

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Whenever it appears to the commissioner that any insurer or any director, officer, employee or agent thereof has committed a willful violation of this Act, the commissioner may cause criminal proceedings to be instituted by the district court for the county in which the principal office of the insurer is located or if such insurer has no such office in the state, then by the district court of Polk County against such insurer or the responsible director, officer, employee or agent thereof. Any insurer which willfully violates this Act may be fined not more than one hundred dollars. Any individual who willfully violates this Act may be fined not more than one thousand dollars or, if such willful violation involves the deliberate perpetration of a fraud upon the commissioner, imprisoned not more than two years or both.

## SEC. 11. Receivership.

Whenever it appears to the commissioner that any person has committed a violation of this Act which so impairs the financial condition of a domestic insurer as to threaten insolvency or make the further transaction of business by it hazardous to its policyholders, creditors, shareholders or the public, then the commissioner may proceed as provided in section five hundred five point nine (505.9) of the Code to take possession of the property of such domestic insurer and to conduct the business thereof.

# SEC. 12. Revocation, suspension, or nonrenewal of insurer's license.

Whenever it appears to the commissioner that any person has committed a violation of this Act which makes the continued operation of an insurer contrary to the interest of policyholders or the public, the commissioner may, after giving notice and an opportunity to be heard, determine to suspend, revoke or refuse to renew such insurer's license or authority to do business in this state for such period as he finds is required for the protection of policyholders or the public. Any such determination shall be accompanied by specific findings of fact and conclusions of law.

# SEC. 13. Judicial review; mandamus.

1. Any person aggrieved by any Act, determiniation, rule, regulation or order or any other action of the commissioner pursuant to this Act may appeal therefrom to the district court of Polk County. The court shall conduct its review without a jury and by trial de novo, except that if all parties, including the commissioner, so stipulate, the review shall be confined to the record. Portions of the record may be introduced by stipulation into evidence in a trial de novo as to those parties so stipulating.

2. The filing of an appeal pursuant to this section shall stay the application of any rule, regulation, order or other action of the commissioner to the appealing party unless the court, after giving such party notice and an opportunity to be heard, determines that such a stay would be detrimental to the interests of policyholders, shareholders, creditors or the public.

3. Any person aggrieved by any failure of the commissioner to act

- 17 or make a determination required by this Act may petition the dis-
- 18 trict court of Polk County for a writ in the nature of a mandamus or
- 19 a peremptory mandamus directing the commissioner to act or make
- 20 such determination forthwith.

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# Approved April 14, 1970.

#### CHAPTER 1250

#### LICENSING INSURANCE AGENTS

H. F. 231

AN ACT relating to the licensing of insurance agents in Iowa.

Be It Enacted by the General Assembly of the State of Iowa:

SECTION 1. Section five hundred twenty-two point one (522.1), Code 1966, is hereby amended by striking from lines six (6) and seven (7) the words "other than fraternal beneficiary associations," and inserting in lieu thereof the following: "unless exempt from the

5 provisions of this chapter by reason of section five hundred twelve

6 point thirty-three (512.33) of the Code, and".

SEC. 2. Section five hundred twelve point thirty-three (512.33), Code 1966, is hereby amended by striking all of said section and inserting in lieu thereof the following:

Such associations may employ agents in the soliciting or procuring of new members and such agents shall be subject to the provisions of chapter five hundred twenty-two (522) of the Code. The term "agent" as used in this section means any authorized or acknowledged agent of a society who acts as such in the solicitation, negotiation or procurement or making of a life insurance, accident and health insurance or annuity contract. Notwithstanding the above definition of the term "agent", a society may appoint one individual to act as an agent for each lodge, or other subordinate unit by whatever name known, of the society and licensing under chapter five hundred twenty-two (522) shall not be required of such individual so long as the life insurance contracts solicited and procured by such individual do not exceed twenty-five thousand dollars in any calendar year, or, in the case of any other kind or kinds of insurance which the society is authorized to write, on the persons of more than twenty-five individuals in any calendar year. Licensing in accordance with chapter five hundred twenty-two (522) shall be required on and after the effective date of this Act. Any examination which may be required under the provisions of said chapter five hundred twenty-two (522) shall not be applicable to any agent of a society who is in the service of a society on the effective date of this Act, and who on said date is authorized to represent a fraternal beneficiary society. The provisions of said chapter five hundred twenty-two (522) shall not apply to the member representatives of any society organized or licensed under this chapter which insures its members against death, dismemberment and