MAR 8 2004 Place On Calendar

4.

HOUSE FILE 2429 BY COMMITTEE ON COMMERCE, REGULATION AND LABOR

(SUCCESSOR TO HSB 658)

Passed	House,	Date		Passed	Senate,	Date
Vote:	Ayes _	Nay	s	Vote:	Ayes	Nays
	I	Approved				

A BILL FOR

1	An	Act relating to the regulation of various industries by the
2		insurance division, including modifications related to the
3		interstate insurance product regulation compact;
4		investigations and penalties; procedures and contempt orders;
5		insurance company investments; insurance producer licensing;
6		individual health insurance programs; coverage obligations of
7		the Iowa comprehensive health insurance association; coverage
8		of federal Trade Adjustment Act recipients; penalties and
9		discipline applicable to holders of establishment and sales
10		permits for cemetery and funeral merchandise and services; and
11		providing and applying penalties.
12	BE	IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:
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TLSB 5319HV 80 av/gg/14 HF 2489

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Section 1. Section 272C.1, subsection 6, paragraph z, Code 2 2003, is amended by striking the paragraph.

3 Sec. 2. Section 272C.3, subsection 2, paragraph a, Code 4 Supplement 2003, is amended to read as follows:

a. Revoke a license, or suspend a license either until
further order of the board or for a specified period, upon any
of the grounds specified in section 147.55, 148.6, 148B.7,
152.10, 153.34, 154A.24, 169.13, 455B.219, 542.10, 542B.21,
543B.29, 544A.13, 544B.15, or 602.3203 or chapter 1517 or 155,
507B7-or-522B7 as applicable, or upon any other grounds
specifically provided for in this chapter for revocation of
the license of a licensee subject to the jurisdiction of that
board, or upon failure of the licensee to comply with a
decision of the board imposing licensee discipline;

15 Sec. 3. Section 272C.4, subsection 6, Code 2003, is 16 amended to read as follows:

17 6. Define by rule acts or omissions which that are grounds 18 for revocation or suspension of a license under section 19 147.55, 148.6, 148B.7, 152.10, 153.34, 154A.24, 169.13, 20 455B.219, 542.10, 542B.21, 543B.29, 544A.13, 544B.15, or 21 602.3203 or chapter 1517 or 155, 507B-or-522B7 as applicable, 22 and to define by rule acts or omissions which that constitute 23 negligence, careless acts, or omissions which that constitute 23 negligence, careless acts, or omissions within the meaning of 24 section 272C.3, subsection 2, paragraph "b", which licensees 25 are required to report to the board pursuant to section 26 272C.9, subsection 2;

27 Sec. 4. Section 432.5, Code Supplement 2003, is amended to 28 read as follows:

29 432.5 RISK RETENTION GROUPS.

A risk retention group organized and operating pursuant to Pub. L. No. 99-563, also known as the risk retention amendments of 1986, shall pay as taxes to the director of revenue an amount equal to two-percent the applicable percent, as provided in section 432.1, subsection 4, of the gross amount of the premiums received during the previous calendar

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1 year for risks placed in this state. A resident or 2 nonresident agent producer shall report and pay the taxes on 3 the premiums for risks that the agent producer has placed in 4 this state with or on behalf of a risk retention group. The 5 failure of a risk retention group to pay the tax imposed in 6 this section shall result in the risk retention group being 7 considered an unauthorized insurer under chapter 507A.

8 Sec. 5. <u>NEW SECTION</u>. 505.7A CIVIL PENALTIES.

9 Unless specifically provided for in this subtitle, 10 penalties imposed under this subtitle by order of the 11 commissioner of insurance after hearing shall not exceed one 12 thousand dollars for each act or violation of this subtitle, 13 up to an aggregate of ten thousand dollars, unless the person 14 knew or reasonably should have known the person was in 15 violation of this subtitle, in which case the penalty shall 16 not exceed five thousand dollars for each act or violation, up 17 to an aggregate of fifty thousand dollars in any one six-month 18 period.

19 Sec. 6. Section 505A.1, article III, subsections 1 and 2, 20 Code Supplement 2003, are amended to read as follows:

1. The compacting states hereby create and establish an entity a joint public agency known as the interstate insurance product regulation commission. Pursuant to article IV, the commission has the power to develop uniform standards for product lines, receive and provide prompt review of products filed therewith, and give approval to those product filings ratisfying applicable uniform standards, provided it is not intended for the commission to be the exclusive entity for preceipt and review of insurance product filings. Nothing herein shall prohibit any insurer from filing its product in any state wherein the insurer is licensed to conduct the business of insurance, and any such filing shall be subject to the laws of the state where filed.

34 2. The commission is a body corporate comprising-each and
35 politic, and an instrumentality of the compacting state.

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Sec. 7. Section 505A.1, article III, subsection 3, Code
 Supplement 2003, is amended by striking the subsection.

3 Sec. 8. Section 505A.1, article V, subsection 1, paragraph 4 c, subparagraphs (3) and (4), Code Supplement 2003, are 5 amended to read as follows:

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(3) Providing reasonable standards and procedures:

7 (a) For the establishment <u>and meetings</u> of other8 committees.

9 (b) Governing any general or specific delegation of any 10 authority or function of the commission.

11 (4) Providing reasonable procedures for calling and 12 conducting meetings of the commission7-and that consists of a 13 <u>majority of commission members</u> ensuring reasonable <u>advance</u> 14 notice of each such meeting, and providing for the right of 15 <u>citizens to attend each such meeting with enumerated</u> 16 <u>exceptions designed to protect the public's interest, the</u> 17 <u>privacy of individuals, and insurers' proprietary information,</u> 18 <u>including trade secrets</u>. <u>The commission may meet in camera</u> 19 <u>only after a majority of the entire membership votes to close</u> 20 <u>a meeting en toto or in part. As soon as practicable, the</u> 21 <u>commission shall make public:</u>

22 (a) A copy of the vote to close the meeting, revealing the
23 vote of each member, with no proxy votes allowed.

24 (b) Votes taken during such meeting.

Sec. 9. Section 505A.1, article V, subsection 1, paragraph c, Code Supplement 2003, is amended by adding the following rew subparagraph:

28 <u>NEW SUBPARAGRAPH</u>. (8) Promulgating a code of ethics to 29 address permissible and prohibited activities of commission 30 members and employees.

31 Sec. 10. Section 505A.1, article V, subsection 1, Code 32 Supplement 2003, is amended by adding the following new 33 paragraph:

34 <u>NEW PARAGRAPH</u>. d. The commission shall publish its bylaws 35 in a convenient form and file a copy of the bylaws, along with

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1 any amendments, with the appropriate agency or officer in each 2 of the compacting states.

3 Sec. 11. Section 505A.1, article VII, subsection 2, Code 4 Supplement 2003, is amended to read as follows:

2. RULEMAKING PROCEDURE. Rules and operating procedures
shall be made pursuant to a rulemaking process that conforms
to the model state administrative procedure act of 1981 as
amended, as may be appropriate to the operations of the
commission. Before the commission adopts a uniform standard,
the commission shall give written notice to the relevant state
legislative committee or committees in each compacting state
responsible for insurance issues of its intention to adopt the
uniform standard. The commission, in adopting a uniform
standard, shall consider fully all submitted materials and
issue a concise explanation of its decision.

16 Sec. 12. Section 505A.1, article VIII, subsection 1, Code
17 Supplement 2003, is amended to read as follows:

18 1. The commission shall promulgate rules to-establish 19 establishing conditions and procedures under-which-the 20 commission-shall-make-its-information-and-official-records 21 available-to-the-public-for-inspection-or-copying for public 22 inspection and copying of its information and official 23 records, except such information and records involving the 24 privacy of individuals and insurers' trade secrets. The 25 commission may promulgate additional rules under which it may 26 make available to federal and state agencies, including law 27 enforcement agencies, records, and information otherwise 28 exempt from disclosure, and may enter into agreements with 29 such agencies to receive or exchange information or records 30 subject to nondisclosure and confidentiality provisions.

31 Sec. 13. Section 505A.1, article VIII, subsection 4, 32 paragraphs a and b, Code Supplement 2003, are amended to read 33 as follows:

34 a. With respect to the commissioner's market regulation of35 a product or advertisement that is approved or certified to

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1 the commission, no-activity-of-an-insurer the content of the 2 product or advertisement shall not constitute a violation of 3 the provisions, standards, or requirements of this compact 4 except upon a final order of the commission, issued at the 5 request of a commissioner after prior notice to the insurer 6 and an opportunity for hearing before the commission.

7 b. Before a commissioner may bring an action for violation 8 of any provision, standard, or requirement of this compact 9 relating to the use content of an advertisement not approved 10 or certified to the commission, the commission, or an 11 authorized commission officer or employee, must authorize the 12 action. However, authorization pursuant to this paragraph 13 does not require notice to the insurer, opportunity for 14 hearing, or disclosure of requests for authorization or 15 records of the commission's action on such requests.

16 Sec. 14. Section 505A.1, article XI, subsection 1, Code 17 Supplement 2003, is amended to read as follows:

Not later than thirty days after the commission has 18 1. 19 given notice of a disapproved product or advertisement filed 20 with the commission, the insurer or third-party filer whose 21 filing was disapproved may appeal the determination to a 22 review panel appointed by the commission. The commission 23 shall adopt rules to establish procedures for appointing such 24 review panels and provide for notice and hearing. The 25 decision-of-the-review-panel-shall-be-the-final-action-of-the 26 commission-and-not-subject-to-review-by-any-court. 27 Notwithstanding-the-foregoing7-an An allegation that the 28 commission, in disapproving a product or advertisement filed 29 with the commission, acted arbitrarily, capriciously, or in a 30 manner that is an abuse of discretion or otherwise not in 31 accordance with the law, is subject to judicial review in 32 accordance with article III, section 5.

33 Sec. 15. Section 505A.1, article XII, subsection 6, Code 34 Supplement 2003, is amended to read as follows: 35 The commission shall keep complete and accurate 6.

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1 accounts of all its internal receipts, including grants and 2 donations, and disbursements of all funds under its control. 3 The internal financial accounts of the commission shall be 4 subject to the accounting procedures established under its The financial accounts and reports, including the 5 bylaws. 6 system of internal controls and procedures of the commission, 7 shall be audited annually by an independent certified public 8 accountant. Upon the determination of the commission, but no 9 less frequently than every three years, the review of the 10 independent auditor shall include a management and performance 11 audit of the commission. The commission shall make an annual 12 report to the governor and legislature of the compacting 13 states, which shall include a report of the independent audit. 14 The commission's internal accounts, -any-work-papers-related-to 15 any-internal-audit,-and-any-work-papers-related-to-the 16 independent-audit, shall not be confidential, -provided-that 17 and such materials may be shared with the commissioner of any 18 compacting state and-shall-remain-confidential-pursuant-to 19 article-VII upon request; provided, however, that any work 20 papers related to any internal or independent audit and any 21 information regarding the privacy of the individuals and 22 insurers' proprietary information, including trade secrets, 23 shall remain confidential.

Sec. 16. Section 505A.1, article XVI, subsection 1, 25 paragraph b, Code Supplement 2003, is amended to read as 26 follows:

27 b. For any product approved or certified to the 28 commission, the rules, uniform standards, and any other 29 requirements of the commission shall constitute the exclusive 30 provisions applicable to the content, approval, and 31 certification of such products. For advertisement that is 32 subject to the commission's authority, any rule, uniform 33 standard, or other requirement of the commission which governs 34 the content of the advertisement shall constitute the 35 exclusive provision that a commissioner may apply to the

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1 content of the advertisement. Notwithstanding the foregoing, 2 action taken by the commission shall not abrogate or restrict:

3 (1) The access of any person₇-including-the-attorney 4 general₇ to state courts.

5 (2) Remedies available under state law related to breach 6 of contract, tort, general consumer protection laws, or 7 general consumer protection regulations that apply to the sale 8 or advertisement of the product or other laws not specifically 9 directed to the content of the product.

10 (3) State law relating to the construction of insurance 11 contracts.

12 (4) The authority of the attorney general of the state, 13 including but not limited to maintaining any actions or 14 proceedings, as authorized by law.

15 Sec. 17. Section 507.14, Code 2003, is amended by adding 16 the following new unnumbered paragraph:

17 <u>NEW UNNUMBERED PARAGRAPH</u>. Analysis notes, work papers, or 18 other documents related to the analysis of an insurer are not 19 public records under chapter 22.

20 Sec. 18. Section 507.16, Code 2003, is amended to read as 21 follows:

22 507.16 UNLAWFUL SOLICITATION OF BUSINESS.

Any It shall be unlawful for any officer, manager, agent, or representative of any insurance company contemplated by this chapter, who, with knowledge that its certificate of authority has been suspended or revoked, or that it is rinsolvent, or is doing an unlawful or unauthorized business, solicits to solicit or receive applications for insurance for and the company, or-receives-applications-therefor, or does to do any other act or thing toward receiving or procuring any new business for said the company, -shall-be-deemed-guilty-of-a serious-misdemeanor, and-the. The provisions of sections all lo and 511.17 are hereby extended to all companies contemplated by this chapter.

35 Sec. 19. Section 507A.10, Code 2003, is amended to read as

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1 follows:

2 507A.10 CEASE AND DESIST ORDER ORDERS -- CIVIL PENALTY AND 3 CRIMINAL PENALTIES.

4 <u>1.</u> Upon a determination by the commissioner, after a 5 hearing conducted pursuant to chapter 17A, that a person or 6 insurer has violated a provision of this chapter, the 7 commissioner shall reduce the findings of the hearing to 8 writing and deliver a copy of the findings to the person or 9 insurer, may issue an order requiring the person or insurer to 10 cease and desist from engaging in the conduct resulting in the 11 violation, and may assess a civil penalty of not more than 12 fifty thousand dollars against the person or insurer.

2. a. Upon a determination by the commissioner that a
person or insurer has engaged, is engaging, or is about to
engage in any act or practice constituting a violation of this
chapter or a rule adopted or order issued under this chapter,
the commissioner may issue a summary order, including a brief
statement of findings of fact, conclusions of law, and policy
reasons for the decision, and directing the person or insurer
to cease and desist from engaging in the act or practice or to
take other affirmative action as is in the judgment of the
commissioner necessary to comply with the requirements of this

b. A person to whom a summary order has been issued under
this subsection may contest the order by filing a request for
a contested case proceeding and hearing as provided in chapter
17A and in accordance with rules adopted by the commissioner.
However, the person shall have at least thirty days from the
date that the order is issued in order to file the request.
Section 17A.18A is inapplicable to a summary order issued
under this subsection. If a hearing is not timely requested,
the summary order becomes final by operation of law. The
order shall remain effective from the date of issuance until
the date the order becomes final by operation of law or is
overturned by a presiding officer or court following a request

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1 for hearing.

T	tor hearing.
2	c. A person or insurer violating a summary order issued
3	under this subsection shall be deemed in contempt of that
4	order. The commissioner may petition the district court to
5	enforce the order as certified by the commissioner. The
6	district court shall find the person in contempt of the order
7	if the court finds after hearing that the person or insurer is
8	not in compliance with the order. The court may assess a
9	civil penalty against the person or insurer and may issue
10	further orders as it deems appropriate.
11	3. A person acting as an insurance producer, as defined in
12	chapter 522B, without proper licensure, or an insurer who
13	willfully violates any provision of this chapter, or any rule
14	adopted or order issued under this chapter, is guilty of a
15	class "D" felony.
16	4. A person acting as an insurance producer, as defined in
17	chapter 522B, without proper licensure, or an insurer who
18	willfully violates any provision of this chapter, or any rule
19	adopted or order issued under this chapter, and when such
20	violation results in a loss of more than ten thousand dollars,
2 1	is guilty of a class "C" felony.
22	5. The commissioner may refer such evidence as is
23	available concerning violations of this chapter or of any rule
24	adopted or order issued under this chapter, or of the failure
25	of a person to comply with the licensing requirements of
26	chapter 522B, to the attorney general or the proper county
27	attorney who may, with or without such reference, institute
28	the appropriate criminal proceedings under this chapter.
29	6. This chapter does not limit the power of the state to
30	punish any person for any conduct that constitutes a crime
31	under any other statute.
32	Sec. 20. Section 507B.2, subsection 1, Code 2003, is
33	amended to read as follows:
34	1. "Person" shall mean any individual, corporation,
35	association, partnership, reciprocal exchange, interinsurer,

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1 fraternal beneficiary association, and any other legal entity 2 engaged in the business of insurance, including agents; 3 brokers insurance producers and adjusters. "Person" shall 4 also mean any corporation operating under the provisions of 5 chapter 514 and any benevolent association as defined and 6 operated under chapter 512A. For purposes of this chapter, 7 corporations operating under the provisions of chapter 514 and 8 chapter 512A shall be deemed to be engaged in the business of 9 insurance.

10 Sec. 21. Section 507B.3, Code Supplement 2003, is amended 11 by adding the following new subsection:

NEW SUBSECTION. 3. Information obtained by the commissioner in the course of investigating a consumer complaint may, in the discretion of the commissioner, be provided to the insurance company or insurance producer which is the subject of the complaint or to the consumer who filed the complaint or the individual insured who is the subject of the complaint without waiving the confidentiality afforded by this section to the commissioner or other persons.

20 Sec. 22. Section 507B.6, subsection 5, Code 2003, is 21 amended to read as follows:

22 5. Statements of charges, notices, orders, subpoenas, and 23 other processes of the commissioner under this chapter may be 24 served by anyone duly authorized by the commissioner, either 25 in the manner provided by law for service of process in civil 26 actions, or by mailing a copy thereof by restricted certified 27 mail to the person affected by such the statement, notice, 28 order, subpoena, or other process at the person's residence or 29 principal office or place of business. The verified return by 30 the person so serving such the statement, notice, order, 31 subpoena, or other process, setting forth the manner of such 32 service, shall be proof of the-same service, and the return 33 receipt for such the statement, notice, order, subpoena, or 34 other process, and mailed by restricted certified mail as 35 aforesaid, shall be proof of the service of-the-same.

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1 Sec. 23. <u>NEW SECTION</u>. 507B.6A SUMMARY CEASE AND DESIST 2 ORDERS.

1. Upon a determination by the commissioner that a person 4 or insurer has engaged, is engaging, or is about to engage in 5 any act or practice constituting a violation of this chapter 6 or a rule adopted or order issued under this chapter, the 7 commissioner may issue a summary order, including a brief 8 statement of findings of fact, conclusions of law, and policy 9 reasons for the decision, and directing the person or insurer 10 to cease and desist from engaging in the act or practice or to 11 take other affirmative action as is in the judgment of the 12 commissioner necessary to comply with the requirements of this 13 chapter.

14 2. A person who has been issued a summary order under this 15 section may contest the order by filing a request for a 16 contested case proceeding and hearing as provided in chapter 17 17A and in accordance with the rules adopted by the 18 commissioner. However, the person shall have at least thirty 19 days from the date that the order is issued in order to file 20 the request. Section 17A.18A is inapplicable to a summary 21 order issued under this section. The order shall remain 22 effective from the date of issuance unless overturned by a 23 presiding officer or court following a request for hearing. 24 If a hearing is not timely requested, the summary order 25 becomes final by operation of law.

3. A person or insurer violating a summary order issued under this section shall be deemed in contempt of that order. The commissioner may petition the district court to enforce the order as certified by the commissioner. The district court shall adjudge the person in contempt of the order if the court finds after hearing that the person or insurer is not in compliance with the order. The court may assess a civil penalty against the person or insurer and may issue further dorders as it deems appropriate.

35 Sec. 24. Section 507B.7, Code 2003, is amended to read as

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1 follows:

2 507B.7 CEASE AND DESIST ORDERS AND MODIFICATIONS-THEREOF 3 PENALTIES.

1. If, after such hearing, the commissioner determines 5 that the <u>a</u> person charged has engaged in an unfair method of 6 competition or an unfair or deceptive act or practice, the 7 commissioner shall reduce the findings to writing and shall 8 issue and cause to be served upon the person charged with the 9 violation a copy of such findings, an order requiring such 10 person to cease and desist from engaging in such method of 11 competition, act, or practice, and <u>if-the-act-or-practice-is-a</u> 12 violation-of-section-507B.47-507B.4A7-or-507B.57 the 13 commissioner may at the commissioner's discretion order any 14 one or more of the following:

a. Payment of a civil penalty of not more than one thousand dollars for each act or violation <u>of this subtitle</u>, thus not to exceed an aggregate of ten thousand dollars, unless the person knew or reasonably should have known the person was in violation of section-507B-47-507B-4A7-or-507B-5 <u>this</u> <u>subtitle</u>, in which case the penalty shall be not more than if ive thousand dollars for each act or violation, but not to exceed an aggregate penalty of fifty thousand dollars in any one six-month period. If the commissioner finds that a violation of section-507B-47-507B-4A7-or-507B-5 <u>this subtitle</u> was directed, encouraged, condoned, ignored, or ratified by the employer of the person or by an insurer, the commissioner shall also assess a fine to the employer or insurer.

b. Suspension or revocation of the license of a person as
defined in section 507B.2, subsection 1, if the person knew or
reasonably should have known the person was in violation of
section-507B.47-507B.4A7-or-507B.5 this subtitle.

32 c. Payment of interest at the rate of ten percent per
33 annum if the commissioner finds that the insurer failed to pay
34 interest as required under section 507B.4, subsection 12.
35 2. Until the expiration of the time allowed under section

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1 507B.8 for filing a petition for review if no such petition 2 has been duly filed within such time, or, if a petition for 3 review has been filed within such time, then until the 4 transcript of the record in the proceeding has been filed in 5 the district court, as hereinafter provided, the commissioner 6 may at any time, upon such notice and in such manner as the 7 commissioner may deem proper, modify or set aside in whole or 8 in part any order issued by the commissioner under this 9 section.

10 3. After the expiration of the time allowed for filing 11 such a petition for review if no such petition has been duly 12 filed within such time, the commissioner may at any time, 13 after notice and opportunity for hearing, reopen and alter, 14 modify, or set aside, in whole or in part, any order issued by 15 the commissioner under this section, whenever in the 16 commissioner's opinion conditions of fact or of law have so 17 changed as to require such action, or if the public interest 18 shall so require.

19 <u>4. Any person who violates a cease and desist order of the</u> 20 <u>commissioner, and while such order is in effect, may, after</u> 21 <u>notice and hearing and upon order of the commissioner, be</u> 22 <u>subject at the discretion of the commissioner to any one or</u> 23 <u>more of the following:</u>

24 a. A monetary penalty of not more than ten thousand
25 dollars for each and every act or violation.

26 b. Suspension or revocation of such person's license.
27 Sec. 25. Section 507C.6, subsection 4, Code 2003, is
28 amended by striking the subsection and inserting in lieu
29 thereof the following:

30 4. It shall be unlawful for a person as defined in 31 subsection 1 to fail to cooperate with the commissioner, or to 32 obstruct or interfere with the commissioner in the conduct of 33 a delinquency proceeding or an investigation preliminary or 34 incidental to a delinquency proceeding, or to violate a valid 35 order of the commissioner.

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1 Sec. 26. Section 507C.11, unnumbered paragraph 1, Code 2 2003, is amended to read as follows:

3 Notwithstanding chapter 22, in all administrative 4 proceedings pursuant to sections 507C.9 and 507C.10 all 5 <u>orders</u>, records, and documents pertaining to or a part of the 6 record of the proceedings are confidential except as is 7 necessary to obtain compliance with a proceeding. However, 8 the records may be released if either of the following occurs: 9 Sec. 27. Section 509.18, Code 2003, is amended to read as 10 follows:

11 509.18 PROHIBITED DEPOSIT IN FINANCIAL INSTITUTION.

12 A company or its agent licensed to sell a policy of credit 13 life or credit accident and health insurance or certificate 14 under a policy of group credit life or credit accident and 15 health insurance shall not deposit or offer to deposit funds 16 in a financial institution of this state in exchange for the 17 privilege of selling such insurance to or on behalf of the 18 financial institution. Any-person-violating-the-provisions-of 19 this-section-shall-be-guilty-of-a-simple-misdemeanor.

20 Sec. 28. Section 511.8, subsection 1, Code Supplement 21 2003, is amended to read as follows:

22 1. UNITED STATES GOVERNMENT OBLIGATIONS.

<u>a.</u> Bonds or other evidences of indebtedness issued,
24 assumed, or guaranteed by the United States of America, or by
25 any agency or instrumentality thereof of the United States of
26 <u>America</u>.

b. Bonds or other evidences of indebtedness issued,
assumed, or guaranteed by the United States of America, or by
any agency or instrumentality of the United States of America
include investments in an open-end management investment
company registered with the federal securities and exchange
commission under the federal Investment Company Act of 1940,
15 U.S.C. § 80(a), and operated in accordance with 17 C.F.R. §
270.2a-7, the portfolio of which is limited to the United
States government obligations described in paragraph "a", and

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1 which are included in the national association of insurance 2 commissioners' securities valuation office's United States 3 direct obligations-full faith and credit exempt list.

4 Sec. 29. Section 511.8, subsection 19, unnumbered 5 paragraph 1, Code Supplement 2003, is amended to read as 6 follows:

Bonds or other evidences of indebtedness, not to include 7 8 currency, issued, assumed, or guaranteed by a foreign 9 government other than Canada, or by a corporation incorporated 10 under the laws of a foreign government other than Canada. 11 Such governmental obligations must be valid, legally 12 authorized and issued, and on the date of acquisition have 13 predominantly investment qualities and characteristics as 14 provided by rule. Such corporate obligations must meet the 15 qualifications established in subsection 5 for bonds and other 16 evidences of indebtedness issued, assumed, or guaranteed by a 17 corporation incorporated under the laws of the United States 18 or Canada. Foreign investments authorized by this subsection 19 are not eligible in excess of ten twenty percent of the legal 20 reserve of the life insurance company or association. 21 Investments in obligations of a foreign government, other than 22 Canada and the United Kingdom, are not eligible in excess of 23 two percent of the legal reserve in the securities of foreign 24 governments of any one foreign nation. Investments in 25 obligations of the United Kingdom are not eligible in excess 26 of four percent of the legal reserve. Investments in a 27 corporation incorporated under the laws of a foreign 28 government other than Canada are not eligible in excess of two 29 percent of the legal reserve in the securities of any one 30 foreign corporation.

31 Sec. 30. Section 511.8, subsection 22, paragraph e, Code 32 Supplement 2003, is amended to read as follows:

e. Investments in financial instruments of foreign
governments or foreign corporate obligations, other than
Canada, used in hedging transactions are not eligible in

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1 excess of ten twenty percent of the legal reserve, less any 2 foreign investment authorized by subsection 19 owned by the 3 company or association and in which its legal reserve is 4 invested, except insofar as the financial instruments are 5 collateralized by cash or United States government obligations 6 as authorized by subsection 1 deposited with a custodian bank 7 as defined in subsection 21, and held under a written 8 agreement with the custodian bank that complies with 9 subsection 21 and provides for the proceeds of the collateral, 10 subject to the terms and conditions of the applicable 11 collateral or other credit support agreement, to be remitted 12 to the legal reserve deposit of the company or association and 13 to vest in the state in accordance with section 508.18 14 whenever proceedings under that section are instituted. Section 511.8, Code Supplement 2003, is amended 15 Sec. 31. 16 by adding the following new subsection:

17 NEW SUBSECTION. 23. SECURITY LOANS.

a. A life insurance company or association may loan
securities held by it in its legal reserve to a broker-dealer
registered under the Securities Exchange Act of 1934, a
national bank, or a state bank, foreign bank, or trust company
that is a member of the United States federal reserve system,
and the loaned securities shall continue to be eligible for
inclusion in the legal reserve of the life insurance company
or association.

b. The loan shall be fully collateralized by cash, cash
equivalents, or obligations issued or guaranteed by the United
States or an agency or instrumentality of the United States.
The life insurance company or association shall take delivery
of the collateral either directly or through an authorized
custodian.

32 c. If the loan is collateralized by cash or cash 33 equivalents, the cash or cash equivalent collateral may be 34 reinvested by the life insurance company or association in 35 either individual securities which are eligible for inclusion

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1 in the legal reserve of the life insurance company or 2 association or in repurchase agreements fully collateralized 3 by such securities if the life insurance company or 4 association takes delivery of the collateral either directly 5 or through an authorized custodian or pooled fund comprised of 6 individual securities which are eligible for inclusion in the 7 legal reserve of the life insurance company or association. 8 If such reinvestment is made in individual securities or in 9 repurchase agreements, the individual securities or the 10 securities which collateralize the repurchase agreements shall 11 mature in less than two hundred seventy days. If such 12 reinvestment is made in a pooled fund, the average maturity of 13 the securities comprising such pooled fund must be less than 14 two hundred seventy days. Individual securities and 15 securities comprising the pooled fund shall be investment 16 grade.

The loan shall be evidenced by a written agreement 17 d. 18 which provides all of the following:

19 (1) That the loan will be fully collateralized at all 20 times during the term of the loan, and that the collateral 21 will be adjusted as necessary each business day during the 22 term of the loan to maintain the required collateralization in 23 the event of market value changes in the loaned securities or 24 collateral.

(2) If the loan is fully collateralized by cash or cash 25 26 equivalents, the cash or cash equivalent may be reinvested by 27 the life insurance company or association as provided in 28 paragraph "c".

(3) That the loan may be terminated by the life insurance 29 30 company or association at any time, and that the borrower 31 shall return the loaned stocks or obligations or equivalent 32 stocks or obligations within five business days after 33 termination.

(4) That the life insurance company or association has the 34 35 right to retain the collateral or use the collateral to

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1 purchase investments equivalent to the loaned securities if 2 the borrower defaults under the terms of the agreement, and 3 that the borrower remains liable for any losses and expenses 4 incurred by the life insurance company or association due to 5 default that are not covered by the collateral.

6 Securities loaned pursuant to this subsection are not e. 7 eligible for inclusion in the legal reserve of the life 8 insurance company or association in excess of twenty percent 9 of the legal reserve.

10 Sec. 32. Section 511.16, Code 2003, is amended to read as 11 follows:

12 511.16 ILLEGAL BUSINESS.

13 Any It shall be unlawful for any officer, manager, or agent 14 of any life insurance company or association who, with 15 knowledge that it is doing business in an unlawful manner or 16 is insolvent, solicits to solicit or receive applications for 17 insurance with said the company or association, or-receives 18 applications-therefor, or does to do any other act or thing 19 towards toward procuring or receiving any new business for 20 such the company or association--shall-be-guilty-of-an 21 aggravated-misdemeanor.

Section 512A.8, Code 2003, is amended to read as 22 Sec. 33. 23 follows:

24 512A.8 PENALTIES VIOLATION.

25 Except as otherwise provided by law, it shall be unlawful 26 for any person or corporation to operate a benevolent 27 association in this state except as provided for in this 28 chapter. Any-person-violating-the-provisions-of-this-chapter 29 shall-be-guilty-of-a-serious-misdemeanor.

30 Sec. 34. Section 512B.35, Code 2003, is amended to read as 31 follows:

32 512B.35 PENALTIES FALSE OR FRAUDULENT STATEMENTS.

33 1. A-person-who It shall be unlawful for a person 34 knowingly makes to make a false or fraudulent statement or 35 representation in or relating to an application for membership

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1 or for the purpose of obtaining money from or a benefit in a
2 society-is-guilty-of-a-fraudulent-practice.

2. A-person-who-willfully-makes It shall be unlawful for a
4 person to willfully make a false or fraudulent statement in a
5 verified report or declaration under oath required or
6 authorized by this chapter, or of a material fact or thing
7 contained in a sworn statement concerning the death or
8 disability of an insured for the purpose of procuring payment
9 of a benefit named in the certificate7-is-guilty-of-perjury.
10 3. A-person-who-solicits It shall be unlawful for a person
11 to solicit membership for, or in any manner assists to assist
12 in procuring membership in, a society not licensed to do
13 business in this state7-is-guilty-of-a-serious-misdemeanor.

14 4:--A-person-guilty-of-a-willful-violation-of;-or-neglect 15 or-refusal-to-comply-with;-a-provision-of-this-chapter-for 16 which-a-penalty-is-not-otherwise-prescribed;-is-guilty-of-a 17 simple-misdemeanor.

18 Sec. 35. Section 513C.3, subsection 15, Code Supplement 19 2003, is amended by adding the following new unnumbered 20 paragraph:

21 <u>NEW UNNUMBERED PARAGRAPH</u>. For purposes of this subsection, 22 an association policy under chapter 514E is not considered 23 "qualifying existing coverage" or "qualifying previous 24 coverage".

25 Sec. 36. Section 513C.8, Code 2003, is amended to read as 26 follows:

27 513C.8 HEALTH BENEFIT PLAN STANDARDS.

The commissioner board of directors of the Iowa comprehensive health insurance association, with the approval of the commissioner, shall adopt by-rule the form and level of coverage of the basic health benefit plan and the standard health benefit plan for the individual market which shall provide benefits substantially similar to those-as-provided for-under-chapter-513B-with-respect-to-small-group-coverage, but-which-shall-be-appropriately-adjusted-at-least-every-three

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1 years-to-reflect the current state of the individual market. 2 Sec. 37. Section 513C.10, subsection 1, paragraph a, Code 3 Supplement 2003, is amended to read as follows:

a. All persons that provide health benefit plans in this
5 state including insurers providing accident and sickness
6 insurance under chapter 509, 514, or 514A, whether on an
7 individual or group basis; fraternal benefit societies
8 providing hospital, medical, or nursing benefits under chapter
9 512B; and health maintenance organizations, organized delivery
10 systems, and-all other entities providing health insurance or
11 health benefits subject to state insurance regulation, and all
12 other insurers as designated by the board of directors of the
13 Iowa comprehensive health insurance association with the
14 approval of the commissioner shall be members of the

15 association.

16 Sec. 38. Section 513C.10, subsection 4, Code Supplement
17 2003, is amended to read as follows:

4. The board shall develop procedures <u>and assessment</u> <u>mechanisms</u> and make assessments and distributions as required to equalize the individual carrier and organized delivery system gains or losses so that each carrier or organized delivery system receives the same ratio of paid claims to aninety percent of earned premiums as the aggregate of all hasic and standard plans insured by all carriers and organized belivery systems in the state.

26 Sec. 39. Section 514E.1, subsection 2, Code Supplement 27 2003, is amended to read as follows:

28 2. "Association policy" means an individual or group
29 policy issued by the association that provides the coverage
30 specified-in-section-514E-4 as set forth in the benefit plans
31 adopted by the association's board of directors and approved
32 by the commissioner.

33 Sec. 40. Section 514E.1, subsections 7, 8, and 12, Code
34 Supplement 2003, are amended by striking the subsections.
35 Sec. 41. Section 514E.1, subsection 9, Code Supplement

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1 2003, is amended by adding the following new paragraph:

2 NEW PARAGRAPH. f. Who has been confirmed eligible under 3 the federal Trade Adjustment Act of 2002, Pub. L. No. 107-4 210, as a recipient under that Act, by the department of 5 workforce development and the federal internal revenue 6 service.

Sec. 42. Section 514E.1, subsection 13, Code Supplement 7 8 2003, is amended to read as follows:

9 13. "Health care services" means services, the coverage of 10 which is authorized under chapter 509, chapter 514, chapter 11 514A, or chapter 514B as limited by sections-514E-4-and-514E-5 12 benefit plans established by the association's board of 13 directors, with the approval of the commissioner and includes 14 services for the purposes of preventing, alleviating, curing, 15 or healing human illness, injury or physical disability. Section 514E.2, subsection 1, unnumbered 16 Sec. 43. 17 paragraph 1, Code Supplement 2003, is amended to read as 18 follows:

The Iowa comprehensive health insurance association is 19 20 established as a nonprofit corporation. The association shall 21 assure that health-insurance;-as-limited-by-sections-514E-4 22 and-514E-57-is benefit plans as authorized in section 514E.1, 23 subsection 2, for an association policy, are made available to 24 each eligible Iowa resident and each federally eligible 25 individual applying to the association for coverage. The 26 association shall also be responsible for administering the 27 Iowa individual health benefit reinsurance association 28 pursuant to all of the terms and conditions contained in 29 chapter 513C.

Sec. 44. Section 514E.2, subsection 1, paragraph a, Code 30 31 Supplement 2003, is amended to read as follows:

32 a. All carriers as-defined-in-section-514E-17-subsection 33 37 and all organized delivery systems licensed by the director 34 of public health providing health insurance or health care 35 services in Iowa and all other insurers designated by the

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1 association's board of directors and approved by the

2 commissioner shall be members of the association.

Sec. 45. Section 514E.2, subsection 6, Code Supplement 3 4 2003, is amended by striking the subsection and inserting in 5 lieu thereof the following:

6. Rates for coverages issued by the association shall 6 7 reflect rating characteristics used in the individual 8 insurance market. The rates for a given classification shall 9 not be more than one hundred fifty percent of the average 10 premium or payment rate for the classification charged by the 11 five carriers with the largest health insurance premium or 12 payment volume in the state during the preceding calendar 13 year. In determining the average rate of the five largest 14 carriers, the rates or payments charged by the carriers shall 15 be actuarially adjusted to determine the rate or payment that 16 would have been charged for benefits similar to those issued 17 by the association.

Section 514E.4, Code 2003, is amended by striking 18 Sec. 46. 19 the section and inserting in lieu thereof the following: 20 514E.4 ASSOCIATION POLICY -- COVERAGE AND BENEFIT 21 REOUIREMENTS -- DEDUCTIBLES -- COINSURANCE.

The association policy shall pay for medically necessary 22 23 eligible health care services as established in the benefit 24 plans adopted by the association's board of directors and 25 approved by the commissioner. The plans shall provide 26 benefits, deductibles, and coinsurance that reflect the 27 current state of the individual insurance market. The board 28 may modify the benefits provided under the plans to reflect 29 the current state of the individual insurance market with the 30 approval of the commissioner.

Section 514E.7, subsection 1, Code 2003, is 31 Sec. 47. 32 amended by adding the following new unnumbered paragraph: 33 NEW UNNUMBERED PARAGRAPH. The association shall rescind 34 coverage for an individual who no longer resides in the state. 35 Sec. 48. Section 514E.7, subsection 5, Code 2003, is

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1 amended by adding the following new paragraph:

2 <u>NEW PARAGRAPH</u>. f. The individual is eligible for Medicare 3 based upon age.

4 Sec. 49. Section 514E.8, subsection 1, Code 2003, is 5 amended to read as follows:

6 1. An association policy shall contain provisions under 7 which the association is obligated to renew the contract 8 <u>coverage for an individual</u> until the day on-which the 9 individual in-whose-name-the-contract-is-issued-first becomes 10 eligible for Medicare coverage7-except-that-in-a-family-policy 11 covering-both-husband-and-wife7-the-age-of-the-younger-spouse 12 shall-be-used-as-the-basis-for-meeting-the-durational 13 requirements-of-this-subsection.--However7-when-the-individual 14 in-whose-name-the-contract-is-issued-becomes-eligible-for 15 Medicare-coverage7-the-person-shall-be-eligible-for-the 16 Medicare-supplement-plan-offered-by-the-association <u>based on</u> 17 age.

18 Sec. 50. Section 514E.11, Code 2003, is amended to read as 19 follows:

20 514E.11 NOTICE OF ASSOCIATION POLICY.

21 Every carrier, including a health maintenance organization 22 subject to chapter 514B and an organized delivery system, 23 authorized to provide health care insurance or coverage for 24 health care services in Iowa, shall provide a notice of the 25 availability of coverage by the association to any person who 26 receives a rejection of coverage for health insurance or 27 health care services, or a-notice-to-any-person-who-is 28 informed-that a rate for health insurance or coverage for 29 health care services that will exceed the rate of an 30 association policy, and that person is eligible to apply for 31 health insurance provided by the association. Application for 32 the health insurance shall be on forms prescribed by the 33 association's board of directors and made available to the 34 carriers and organized delivery systems and other entities 35 providing health care insurance or coverage for health care

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1 services regulated by the commissioner.

Sec. 51. Section 515.35, subsection 3, paragraph a,
3 subparagraph (2), Code Supplement 2003, is amended by striking
4 the subparagraph and inserting in lieu thereof the following:

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5 (2) A company may loan securities held by it to a broker-6 dealer registered under the Securities Exchange Act of 1934, a 7 national bank, or a state bank, foreign bank, or trust company 8 that is a member of the United States federal reserve system, 9 and the loaned securities shall continue to be allowable 10 investments of the company.

11 (a) The loan shall be fully collateralized by cash, cash 12 equivalents, or obligations issued or guaranteed by the United 13 States or an agency or instrumentality of the United States. 14 The company shall take delivery of the collateral either 15 directly or through an authorized custodian.

(b) If the loan is collateralized by cash or cash 16 17 equivalents, the cash or cash equivalent collateral may be 18 reinvested by the company in either individual securities 19 which are allowable investments of the company or in 20 repurchase agreements fully collateralized by such securities 21 if the company takes delivery of the collateral either 22 directly or through an authorized custodian or a pooled fund 23 comprised of individual securities which are allowable 24 investments of the company. If such reinvestment is made in 25 individual securities or in repurchase agreements, the 26 individual securities or the securities which collateralize 27 the repurchase agreements shall mature in less than two 28 hundred seventy days. If such reinvestment is made in a 29 pooled fund, the average maturity of the securities comprising 30 such pooled fund must be less than two hundred seventy days. 31 Individual securities and securities comprising the pooled 32 fund shall be investment grade.

33 (c) The loan shall be evidenced by a written agreement 34 which provides all of the following:

35 (i) That the loan will be fully collateralized at all

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1 times during the term of the loan, and that the collateral
2 will be adjusted as necessary each business day during the
3 term of the loan to maintain the required collateralization in
4 the event of market value changes in the loaned securities or
5 collateral.

6 (ii) If the loan is fully collateralized by cash or cash 7 equivalents, the cash or cash equivalent collateral may be 8 reinvested by the company as provided in subparagraph 9 subdivision (b).

10 (iii) That the loan may be terminated by the company at 11 any time, and that the borrower shall return the loaned stocks 12 and obligations or equivalent stocks or obligations within 13 five business days after termination.

14 (iv) That the company has the right to retain the 15 collateral or use the collateral to purchase investments 16 equivalent to the loaned securities if the borrower defaults 17 under the terms of the agreement, and that the borrower 18 remains liable for any losses and expenses incurred by the 19 company due to default that are not covered by the collateral. 20 (d) Securities loaned pursuant to this subparagraph (2) 21 are not eligible for investment of the company in excess of 22 twenty percent of admitted assets.

Sec. 52. Section 515.35, subsection 4, paragraph a, Code 24 Supplement 2003, is amended by adding the following new 25 unnumbered paragraph:

<u>NEW UNNUMBERED PARAGRAPH</u>. Bonds or other evidences of indebtedness issued, assumed, or guaranteed by the United States of America, or by any agency or instrumentality of the United States of America include investments in an open-end management investment company registered with the federal securities and exchange commission under the federal Investment Company Act of 1940, 15 U.S.C. § 80(a) and operated in accordance with 17 C.F.R. § 270.2a-7, the portfolio of which is limited to the United States government obligations described in this paragraph "a", and which are included in the

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1 national association of insurance commissioners' securities
2 valuation office's United States direct obligation-full faith
3 and credit list.

Sec. 53. Section 515.35, subsection 4, paragraph i,
5 subparagraphs (3) and (4), Code Supplement 2003, are amended
6 to read as follows:

7 (3) A company may invest in the obligations of a foreign 8 government other than Canada or of a corporation incorporated 9 under the laws of a foreign government other than Canada. Any 10 such governmental obligation must be valid, legally authorized 11 and issued, and on the date of acquisition have predominantly 12 investment qualities and characteristics as provided by rule. 13 Any such corporate obligation must on the date of acquisition 14 have investment qualities and characteristics, and must not 15 have speculative elements which are predominant, as provided 16 by rule. A company shall not invest more than two percent of 17 its admitted assets in the obligations of a foreign government 18 other than Canada and the United Kingdom. Investments in 19 obligations of the United Kingdom are not eligible in excess 20 of four percent of admitted assets. A company shall not 21 invest more than two percent of its admitted assets in the 22 obligations of a corporation incorporated under the laws of a 23 foreign government other than a corporation incorporated under 24 the laws of Canada.

25 (4) A company shall not invest more than ten twenty
26 percent of its admitted assets in foreign investments pursuant
27 to this paragraph.

28 Sec. 54. Section 515.120, Code 2003, is amended to read as 29 follows:

30 515.120 VIOLATIONS.

31 Any It shall be unlawful for any officer, manager, or agent 32 of any insurance company or association who, with knowledge 33 that it is doing business in an unlawful manner, or is 34 insolvent, solicits to solicit or receive applications for 35 insurance with said the company or association, or-receives

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1 applications-therefor, or does to do any other act or thing 2 towards toward procuring or receiving any new business for 3 such company or association,-shall-be-guilty-of-a-serious 4 misdemeanor.

5 Sec. 55. Section 515.121, Code 2003, is amended to read as 6 follows:

7 515.121 OFFICERS PUNISHED.

8 Any It shall be unlawful for any of the following to fail 9 to comply with or to violate any of the requirements of this 10 chapter:

11 <u>1. The</u> president, secretary, or other officer of any 12 company organized under the laws of this state₇-or-any.

13 <u>2. Any</u> officer or person doing or attempting to do 14 business in this state for any insurance company organized 15 either within or without this state₇-failing-to-comply-with 16 any-of-the-requirements-of-this-chapter₇-or-violating-any-of 17 the-provisions-thereof₇-shall-be-guilty-of-a-simple 18 misdemeanor.

19 Sec. 56. Section 515.140, Code 2003, is amended to read as
20 follows:

21 515.140 VIOLATIONS -- STATUS OF POLICY.

Any It shall be unlawful for any insurance company, its officers or agents, or either of them, violating to violate any of the provisions of section 515.138, by issuing, belivering, or offering to issue or deliver any policy of fire insurance on property in this state other or-different-from than the standard form,-herein as provided for,-shall-be guilty-of-a-simple-misdemeanor in statute, but any policy so issued or delivered shall, nevertheless, be binding upon the company issuing or delivering the same,-and-such policy. The company shall, until the payment of such-fine a penalty assessed by order after hearing, be disqualified from doing any insurance business in this state;-but-any-policy-so-issued or-delivered-shall,-nevertheless,-be-binding-upon-the-company issuing-or-delivering-the-same. Sec. 57. Section 518A.41, Code 2003, is amended to read as
follows:

3 518A.41 INSURANCE PRODUCERS TO BE LICENSED.

No <u>A</u> person or corporation shall <u>not</u> solicit <u>any an</u> 5 application for insurance for any association in this state 6 without having procured from the commissioner of insurance a 7 license authorizing the person or corporation to act as an 8 insurance producer. Violation-of-this-provision-shall 9 constitute-a-serious-misdemeanor.

10 Sec. 58. Section 520.14, Code 2003, is amended to read as 11 follows:

12 520.14 VIOLATIONS -- EXCEPTIONS.

Any It shall be unlawful for an attorney who-shall to exchange any contracts of insurance of the kind and character specified in this chapter, or any for an attorney or representative of such the attorney,-who-shall to solicit or representative of such the attorney,-who-shall to solicit or representative of such the foregoing provisions,-shall-be having first complied with the foregoing provisions,-shall-be deemed-guilty-of-a-simple-misdemeanor. For the purpose of organization and upon issuance of permit by the commissioner of insurance, powers of attorney and applications for such contracts may be solicited without compliance with the provisions of this chapter, but no an attorney, agent, or other person shall not make any such contracts of indemnity until all of the provisions of this chapter shall have been complied with.

27 Sec. 59. Section 522B.11, subsection 1, Code 2003, is 28 amended by adding the following new paragraph:

29 <u>NEW PARAGRAPH</u>. q. Is the subject of an order of the 30 securities administrator of this state or any other state, 31 province, district, or territory, denying, suspending, 32 revoking, or otherwise taking action against a registration as 33 a broker-dealer, agent, investment adviser, or investment 34 adviser representative.

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35 Sec. 60. Section 522B.11, subsection 5, Code 2003, is

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1 amended to read as follows:

5. The commissioner <u>may conduct an investigation of any</u> <u>suspected violation of this chapter pursuant to section 507B.6</u> <u>and may enforce the provisions and impose any penalty or</u> <u>remedy authorized by this chapter and chapter 507B against any</u> <u>person who is under investigation for, or charged with, a</u> <u>violation of either chapter even if the person's license has</u> <u>been surrendered or has lapsed by operation of law.</u>

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9 Sec. 61. Section 522B.11, Code 2003, is amended by adding 10 the following new subsection:

11 6. a. In order to assure a free flow of NEW SUBSECTION. 12 information for accomplishing the purposes of this section, 13 all complaint files, investigation files, other investigation 14 reports, and other investigative information in the possession 15 of the commissioner or the commissioner's employees or agents 16 that relates to licensee discipline are privileged and 17 confidential, and are not subject to discovery, subpoena, or 18 other means of legal compulsion for their release to a person 19 other than the licensee, and are not admissible in evidence in 20 a judicial or administrative proceeding other than the 21 proceeding involving licensee discipline. A final written 22 decision of the commissioner in a disciplinary proceeding is a 23 public record.

24 b. Investigative information in the possession of the 25 commissioner or the commissioner's employees or agents that 26 relates to licensee discipline may be disclosed, in the 27 commissioner's discretion, to appropriate licensing 28 authorities within this state, the appropriate licensing 29 authority in another state, the District of Columbia, or a 30 territory or country in which the licensee is licensed or has 31 applied for a license.

32 c. If the investigative information in the possession of 33 the commissioner or the commissioner's employees or agents 34 indicates a crime has been committed, the information shall be 35 reported to the proper law enforcement agency.

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d. Pursuant to the provisions of section 17A.19,
 subsection 6, upon an appeal by the licensee, the commissioner
 shall transmit the entire record of the contested case to the
 reviewing court.

5 e. Notwithstanding the provisions of section 17A.19,
6 subsection 6, if a waiver of privilege has been involuntary
7 and evidence has been received at a disciplinary hearing, the
8 court shall issue an order to withhold the identity of the
9 individual whose privilege was waived.

522B.16A DUTIES OF LICENSEES. Sec. 62. NEW SECTION. 10 An insurance producer has a continuing duty and 11 1. 12 obligation to keep, at the insurance producer's place of 13 business, usual and customary records pertaining to 14 transactions undertaken by the insurance producer. All such 15 records shall be kept available and open for inspection by the 16 commissioner or the commissioner's representative at any time 17 during regular business hours, provided that the commissioner 18 or the commissioner's representative is not entitled to 19 inspect any records prepared in anticipation of litigation or 20 that are subject to any privilege recognized in chapter 622. 21 Such records shall be maintained for a minimum of three years 22 following the completion of an insurance transaction.

23 2. An insurance producer who willfully fails to comply 24 with this section commits a violation of this chapter and is 25 subject to sanctions under section 522B.11.

26 Sec. 63. Section 523A.401, subsection 6, paragraph c, Code 27 2003, is amended to read as follows:

c. The insurance policy shall not allow-for-contesting coverage, be contestable, or limit death benefits in the case of suicide, with respect to that portion of the face amount of the policy that is required by paragraph "b". The policy shall not refer to physical examination, or otherwise operate as an exclusion, limitation, or condition other than requiring submission of proof of death or surrender of policy at the time the prepaid purchase agreement is funded, matures, or is

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1 canceled, as the case may be.

2 Sec. 64. Section 523A.402, subsection 6, paragraph c, Code 3 2003, is amended to read as follows:

4 c. The annuity shall not allow-for-contesting-coverage; be 5 contestable, or limit death benefits in the case of suicide, 6 with respect to that portion of the face amount of the annuity 7 which is required by paragraph "b". The annuity shall refer 8 to physical examination, or otherwise operate as an exclusion, 9 limitation, or condition other than requiring submission of 10 proof of death or surrender of the annuity at the time the 11 prepaid purchase agreement is funded, matures, or is canceled, 12 as the case may be.

13 Sec. 65. Section 523A.501, subsection 6, Code 2003, is 14 amended to read as follows:

15 6. If no denial order is in effect and no proceeding is 16 pending under section 523A.503, the application becomes 17 effective at noon of the thirtieth day after a completed 18 application or an amendment completing the application is 19 filed, unless waived by the applicant. The commissioner may 20 specify an earlier effective date. Automatic effectiveness 21 under this subsection shall not be deemed approval of the 22 application. If the commissioner does not grant the permit, 23 the commissioner shall notify the person in writing of the 24 reasons for the denial. The-permit-shall-disclose-on-its-face 25 the-permit-holder's-employer-or-the-establishment-on-whose 26 behalf-the-applicant-will-be-making-or-attempting-to-make 27 sales7-the-permit-number7-and-the-expiration-dater

28 Sec. 66. Section 523A.502, subsection 7, Code 2003, is 29 amended to read as follows:

30 7. A sales permit is not assignable or transferable. A 31 permit holder selling all or part of a business shall cancel 32 the permit establishment's sales permits and the purchaser 33 shall apply for a new permit sales permits in the purchaser's 34 name within thirty days of the sale.

35 Sec. 67. Section 523A.503, subsection 1, unnumbered

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1 paragraph 1, Code 2003, is amended to read as follows: 2 The commissioner may, pursuant to chapter 17A, deny any 3 permit application, or immediately suspend, or revoke, or 4 <u>otherwise impose disciplinary action related to</u> any permit 5 issued under this chapter for several reasons, including but 6 not limited to:

7 Sec. 68. Section 523A.503, subsection 3, Code 2003, is 8 amended to read as follows:

9 3. Except as provided in subsection 2, a permit shall not 10 be revoked, or suspended, or otherwise be the subject of 11 <u>disciplinary action</u> except after notice and hearing under 12 chapter 17A.

13 Sec. 69. Section 523A.503, Code 2003, is amended by adding 14 the following new subsection:

NEW SUBSECTION. 6. The commissioner may impose a civil l6 penalty in an amount not exceeding ten thousand dollars per l7 violation against any person violating this chapter. Each day l8 of a continuing violation constitutes a separate offense.

19 Sec. 70. Sections 506.7, 507B.11, 508.27, 511.18, 514.6, 20 514A.9, 514B.29, 515.132, 515.145, and 521.15, Code 2003, are 21 repealed.

22 Sec. 71. Sections 514.6, 514E.5, and 514E.6, Code 2003, 23 are repealed.

24

EXPLANATION

This bill contains revisions throughout the various chapters comprising the insurance code. The bill also contains certain revisions to Code chapter 523A, pertaining to semetery and funeral merchandise and services.

The bill deletes references to Code chapters 507B and 522B, regarding unfair trade practices in insurance and the licensing of insurance producers, respectively, throughout Code chapter 272C, which relates to continuing education and regulation for certain professions and occupations.

The bill modifies terminology in Code section 432.5 to 35 refer to "producer" instead of "agent", and also to conform to

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1 the current insurance premium tax rate provision in Code 2 chapter 432. Code section 507B.2 also makes a similar change 3 in terminology from "agents" and "brokers" to "producers".

The bill creates a new centralized civil penalty section in 4 5 Code section 505.7A, in conjunction with other changes 6 throughout the bill that eliminate or modify penalties in many 7 provisions throughout the insurance code. The new provision 8 is intended to apply to all prohibited acts in Title XIII, 9 subtitle 1, regarding insurance and related regulation, where 10 a penalty is imposed by order of the insurance commissioner 11 after hearing. Penalties shall not exceed \$1,000 for each 12 violation, or \$10,000 in the aggregate, unless the person knew 13 or reasonably should have known the behavior violated an Iowa 14 statute, in which case the penalty shall not exceed \$5,000 for 15 each violation, or \$50,000 in the aggregate in any one six-16 month period. Code sections 507C.6, 509.18, 512A.8, 512B.35, 17 515.120, 515.121, 515.140, 518A.41, and 520.14 are updated in 18 form and language, as part of this consolidation of general 19 penalties in new Code section 505.7A.

20 Code sections 507.16, 511.16, and 515.120, relating to 21 unlawful solicitation of business for insolvent or unlawful 22 insurers, are also all updated in form and language, according 23 to the penalty provision now in Code section 505.7A, as 24 described above.

The bill makes a number of modifications to certain terminology and terms used in the interstate insurance product regulation compact in Code section 505A.1, enacted in 2003. The change to article III, for example, now specifies that the entity to be formed will be a joint public agency, and not only a body corporate, but also a body politic and an instrumentality of the compacting state. Modifications to article V provide for more specific rights relating to meetings of the commission, including advance notice, public attendance, and protection of proprietary information. A specific procedure is mandated for closed meetings. Similar

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1 types of specification are made through modifications to 2 articles VII, VIII, XI, XII, and XVI.

3 The bill adds a new unnumbered paragraph to Code section 4 507.14 to provide specifically that analysis notes, work 5 papers, or other documents related to the analysis of an 6 insurer are not public records under Code chapter 22, in 7 addition to the specified reports, notes, and work papers 8 already not considered public documents under Code chapter 22.

9 Code section 507A.10, relating to civil penalties and cease 10 and desist orders for unauthorized insurers, is expanded to 11 provide additional procedures relating to summary orders, 12 requests for contested case proceedings, contempt orders, 13 criminal penalties, and referral to criminal authorities. 14 Code section 507B.3 is amended to add a new paragraph to 15 allow the commissioner to provide information from an 16 investigation regarding insurance trade practices to a company 17 or producer that is the subject of the complaint or to the 18 consumer who filed the complaint without being deemed to have

19 waived confidentiality provisions.

20 Code section 507B.6 is amended to allow the service of 21 subpoenas, in addition to other documents currently listed, by 22 restricted certified mail. The language is also updated.

23 Similarly, new Code section 507B.6A is added to provide 24 procedures for the issuance of summary cease and desist 25 orders, requests for contested case proceedings, and contempt 26 orders in insurance trade practices cases.

27 Code section 507B.7, regarding cease and desist orders for 28 insurance trade practices, alters the penalty provisions 29 related to the cease and desist orders by removing the 30 connection of the violation to knowledge of violation of 31 certain statutory provisions before the imposition of a civil 32 penalty, and instead requiring only a general standard that 33 the person knew or reasonably should have known that the 34 conduct was in violation of Iowa law. In addition, the 35 commissioner is newly empowered to impose an additional

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1 penalty when a person violates a cease and desist order, after 2 notice and hearing, and upon order.

3 The word "orders" is added to Code section 507C.11 to 4 specify that such documents, in addition to other records and 5 documents comprising the record of a proceeding, are 6 confidential.

7 Code sections 511.8 and 515.35 are amended to specify that 8 certain investments in open-end management investment 9 companies, the portfolio of which is limited to United States 10 government obligations, as further delineated in the 11 respective Code sections, meet the definition of certain bonds 12 specified under those Code sections.

Code sections 511.8 and 515.35 are also modified regarding the allowable percentage insurance companies or associations may invest in foreign government bonds. Code section 511.8 is further modified regarding the amount that may be used for hedging transactions, and a new subsection is added regarding security loans. Code section 515.35 is further modified pregarding the loaning of securities by an insurance company. Regarding program eligibility under the individual health insurance market reforms chapter, the bill modifies Code section 513C.3 by specifying that an association policy under Code chapter 514E is not considered "qualifying existing

24 coverage" or "qualifying previous coverage".

With regard to program administration, basic and standard plan offerings are eliminated over time, which the bill implements through the amendments to Code section 513C.4 and repeals of Code sections 513E.5 and 513E.6, effective January 1, 2005.

30 The bill amends Code section 513C.8 to provide that the 31 board of directors of the Iowa comprehensive health insurance 32 association, instead of the commissioner but with commissioner 33 approval, shall adopt forms and levels of coverage of basic 34 and standard individual health benefit plans for the 35 individual market that are substantially similar to the

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1 current state of the individual market.

2 The bill amends Code section 513C.10, subsection 1, 3 paragraph "a", to provide that all insurers, as designated by 4 the board of directors of the Iowa comprehensive health 5 insurance association with the approval of the commissioner, 6 shall be included as members of the Iowa individual health 7 benefit reinsurance association.

The bill amends Code section 513C.10, subsection 4, to 8 9 provide that the Iowa individual health benefit reinsurance 10 association shall develop not only procedures but assessment 11 mechanisms to make assessments and distributions as required 12 to equalize individual carrier and organized delivery system 13 gains or losses.

14 The bill amends Code chapter 514E relating to the Iowa 15 comprehensive health insurance association (ICHA) and 16 specifically amends Code section 514E.7 to limit eligible 17 participants to residents. Code section 514E.11, regarding 18 notification of potential eligibility for ICHA, is also 19 modified. The bill also modifies Code sections 514E.1 and 20 514E.2 related to the federal Trade Adjustment Act, Pub. L. 21 No. 107-210, because the ICHA is the mechanism designated by 22 the governor pursuant to the trade Act.

23 Code section 514E.4 is amended relating to the payment of 24 medically necessary health care services. The bill also 25 addresses the provision of benefits, deductibles, and 26 coinsurance reflective of current individual insurance market 27 conditions in that Code section. The ICHA board is authorized 28 to make benefit changes from time to time to remain current 29 with market conditions. Code sections 514E.5 and 514E.6, 30 containing lists of excluded expenses and benefit limitations, 31 are repealed effective January 1, 2005. Corresponding changes 32 are made to delete unused definitions from Code section 33 514E.1. Changes are also made to Code section 513C.8 to 34 remove an outdated reference to Code chapter 513B, and to Code 35 sections 514E.7 and 514E.8 to coordinate that Code language

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1 with Medicare requirements.

2 Regarding rate structures, Code section 514E.2 is amended
3 to allow for adjustments in ICHA rates to reflect rating
4 characteristics in the marketplace.

5 Code section 522B.11, regarding insurance producer license 6 denial, nonrenewal, or revocation, is modified in several 7 respects. A new paragraph is added relating to discipline or 8 penalty relative to an order against an individual as a 9 broker-dealer, agent, investment adviser, or investment 10 adviser representative. A new reference is added to the 11 commissioner's power to investigate suspected violations of 12 Code chapter 522B pursuant to Code section 507B.6. Finally, a 13 new provision is added to address the status of investigative 14 files as confidential, but final written decisions of the 15 commissioner as public records, although the commissioner has 16 the discretion to share investigative information with other 17 licensing authorities, and evidence of a crime must be 18 referred to law enforcement.

New Code section 522B.16A addresses duties of licensees, including a duty to keep certain records pertaining to insurance transactions undertaken by a producer, available for inspection by the commissioner or the commissioner's representative, for at least three years. Licensure sanctions and civil penalties apply to a violation.

The bill modifies Code sections 523A.401 and 523A.402 in the cemetery and funeral merchandise and services chapter, relating to contestability clauses and death benefit limitations in certain policies and annuities.

The bill also makes several changes to establishment and sales permits for cemetery and funeral merchandise and services. The bill deletes the requirement in Code section 2523A.501 that a permit disclose on its face the permit and holder's employer or establishment, the permit number, and expiration date. Code section 523A.502 is modified to refer to the establishment's sales permits. Several changes are

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1 made to Code section 523A.503 to refer to disciplinary action 2 which may be imposed in relation to a permit, as well as a 3 civil penalty not to exceed \$10,000 for violations of the Code 4 chapter.

5 The bill repeals Code sections 506.7 (general penalty 6 provision), 507B.11 (penalty for violation of cease and desist 7 order), 508.27 (penalty provision related to Code section 8 508.25, relating to use of form for which prior approval has 9 not been obtained), 511.18 (fraud in procuring insurance), 10 514.6 (rate approval for nonprofit health service 11 corporations), 514A.9 (general penalty provision), 514B.29 12 (general penalty provision), 514E.5 and 514E.6 (lists of 13 excluded expenses and benefit limitations), 515.132 (general 14 penalty provision), 515.145 (penalty provision for violation 15 of Code section 515.142, relating to operation of fire 16 insurance companies), and 521.15 (general penalty provision). 17 These repeals are made in conjunction with the consolidation 18 of general penalties and the new general penalty provision in 19 Code section 505.7A.

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	HOUSE FILE 2489					
S-5156						
1	Amend House File 2489, as passed by the House, as					
2 f	ollows:					
3	1. Page 20, by inserting after line 25, the					
4 f	ollowing:					
5	"Sec NEW SECTION. 514A.3A REFUND OF					
6 U	NEARNED PREMIUM UPON DEATH OF INSURED.					
7	In the event of the death of the insured of any					
	olicy covered by this chapter, the insurer, upon					
	receipt of notice of the insured's death supported by					
	certified copy of a valid death certificate and a					
	equest for a pro rata refund by a party entitled to					
	laim such a refund, shall refund the unearned premium					
	rorated to the month of the insured's death. Refund					
	f the premium and termination of the coverage shall e without prejudice to any claim originating prior to					
	he date of the insured's death. The commissioner of					
	nsurance shall adopt by rule the minimum amount					
	equired for issuance of a refund."					
19	2. Title page, line 7, by inserting after the					
20 w	ord "association;" the following: "refunds of					
	nearned premium;".					
	By COMMITTEE ON COMMERCE					
	JERRY BEHN, CHAIRPERSON					
S-51	56 FILED MARCH 29, 2004					

HOUSE FILE 2489

S-5187

Amend House File 2489, as passed by the House, as 1 2 follows:

- Page 32, by striking lines 13 through 18.
 By renumbering as necessary.
 By RON WIECK 3
- 4

S-5187 FILED MARCH 30, 2004

HOUSE FILE 2489

S-5168 Amend House File 2489, as passed by the House, as 1 2 follows: 3 1. Page 20, by inserting after line 25 the 4 following: NEW SECTION. 5 "Sec. 514C.21 MANDATED 6 COVERAGE FOR MENTAL HEALTH CONDITIONS. 7 For purposes of this section, unless the 1. 8 context otherwise requires: "Mental health condition" means a condition or 9 a. 10 disorder involving mental illness or alcohol or 11 substance abuse that falls under any of the diagnostic 12 categories listed in the mental disorders section of 13 the international classification of disease, as 14 periodically revised. 15 "Rates, terms, and conditions" means any b. 16 lifetime payment limits, deductibles, copayments, 17 coinsurance, and any other cost-sharing requirements, 18 out-of-pocket limits, visit limitations, and any other 19 financial component of benefits coverage that affects 20 the covered individual. 21 2. a. Notwithstanding section 514C.6, a policy or 22 contract providing for third-party payment or 23 prepayment of health or medical expenses shall provide 24 coverage benefits for mental health conditions based 25 on rates, terms, and conditions which are no more 26 restrictive than the rates, terms, and conditions for 27 coverage benefits provided for other health or medical 28 conditions under the policy or contract. 29 Additionally, any rates, terms, and conditions 30 involving deductibles, copayments, coinsurance, and 31 any other cost-sharing requirements shall be 32 cumulative for coverage of both mental health 33 conditions and other health or medical conditions 34 under the policy or contract. 35 Coverage required under this subsection shall b. 36 be as follows: 37 For the treatment of mental illness, coverage (1)38 shall be for services provided by a licensed mental 39 health professional, or services provided in a 40 licensed hospital or health facility. 41 (2)For the treatment of alcohol or substance 42 abuse, coverage shall be for services provided by a 43 substance abuse counselor, as approved by the 44 department of human services, a licensed health 45 facility providing a program for the treatment of 46 alcohol or substance abuse approved by the department 47 of human services, or a substance abuse treatment and 48 rehabilitation facility, as licensed by the department 49 of public health pursuant to chapter 125. 50 3. This section applies to the following classes S-5168 -1-

Page 14

S - 51682 Page 1 of third-party payment provider contracts or policies 2 delivered, issued for delivery, continued, or renewed 3 in this state on or after January 1, 2005: Individual or group accident and sickness 4 a. 5 insurance providing coverage on an expense-incurred 6 basis. 7 b. An individual or group hospital or medical 8 service contract issued pursuant to chapter 509, 514, 9 or 514A. c. A plan established pursuant to chapter 509A for 10 11 public employees. d. An individual or group health maintenance 12 13 organization contract regulated under chapter 514B. 14 e. An individual or group Medicare supplemental 15 policy, unless coverage pursuant to such policy is 16 preempted by federal law. 17 f. Any other entity engaged in the business of 18 insurance, risk transfer, or risk retention, which is 19 subject to the jurisdiction of the commissioner. 20 g. An organized delivery system licensed by the 21 director of public health. 22 4. This section shall not apply to employers 23 actively engaged in business who, on at least fifty 24 percent of the employer's working days during the 25 preceding year, employed twenty-five or fewer full-26 time eligible employees. In determining the number of 27 eligible employees, companies that are affiliated 28 companies or that are eligible to file a combined tax 29 return for purposes of state taxation are considered 30 one employer. 31 5. The commissioner shall adopt rules to 32 administer this section after consultation with the 33 mental health insurance advisory committee. 34 a. The commissioner shall appoint members to a 35 mental health insurance advisory committee. Members 36 shall include all sectors of society impacted by 37 issues associated with coverage of mental health 38 treatment by third-party payors including, but not 39 limited to, representatives of the insurance industry, 40 small and large employers, employee representatives 41 including labor, individual consumers, health care 42 providers, and other groups and individuals that may 43 be identified by the insurance division of the 44 department of commerce. 45 The committee shall meet upon the request of b.

46 the commissioner to review rules proposed under this 47 section by the commissioner, and to make suggestions 48 as appropriate."

By MATT McCOY

S-5168 FILED MARCH 29, 2004

APRIL 7, 2004

SENATE AMENDMENT TO HOUSE FILE 2489

H-8435

Amend House File 2489, as passed by the House, as 1 2 follows: 3 1. Page 20, by inserting after line 25, the 4 following: 5 "Sec. . NEW SECTION. 514A.3A REFUND OF 6 UNEARNED PREMIUM UPON DEATH OF INSURED. 7 In the event of the death of the insured of any 8 policy covered by this chapter, the insurer, upon 9 receipt of notice of the insured's death supported by 10 a certified copy of a valid death certificate and a 11 request for a pro rata refund by a party entitled to 12 claim such a refund, shall refund the unearned premium 13 prorated to the month of the insured's death. Refund 14 of the premium and termination of the coverage shall 15 be without prejudice to any claim originating prior to 16 the date of the insured's death. The commissioner of 17 insurance shall adopt by rule the minimum amount 18 required for issuance of a refund." 19 2. Title page, line 7, by inserting after the 20 word "association;" the following: "refunds of 21 unearned premium;". RECEIVED FROM THE SENATE

H-8435 FILED APRIL 6, 2004

SF 02489 HSB 658 COMMERCE, REGULATION & LABOR

HOFFMAN, CH WILDERDYKE OLDSON

SENATE/HOUSE FILE BY (PROPOSED DEPARTMENT OF COMMERCE/INSURANCE DIVISION BILL)

Passed	Senate,	Date	Passed	House,	Date
Vote:	Ayes	Nays	Vote:	Ayes	Nays
	Ar	proved			_

A BILL FOR

1 An Act relating to the regulation of various industries by the 2 insurance division, including modifications related to the interstate insurance product regulation compact; 3 4 investigations and penalties; procedures and contempt orders; insurance company investments; insurance producer licensing; 5 6 individual health insurance programs; coverage obligations and 7 tax offsets of the Iowa comprehensive health insurance 8 association; phaseout of certain individual insurance plans; 9 coverage of federal Trade Adjustment Act recipients; penalties 10 and discipline applicable to holders of establishment and sales permits for cemetery and funeral merchandise and 11 12 services; providing and applying penalties; and providing 13 effective dates. 14 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA: 15 16 17 18 19 20 21 22

23

Section 1. Section 272C.1, subsection 6, paragraph z, Code
 2 2003, is amended by striking the paragraph.

3 Sec. 2. Section 272C.3, subsection 2, paragraph a, Code 4 Supplement 2003, is amended to read as follows:

a. Revoke a license, or suspend a license either until
further order of the board or for a specified period, upon any
of the grounds specified in section 147.55, 148.6, 148B.7,
152.10, 153.34, 154A.24, 169.13, 455B.219, 542.10, 542B.21,
543B.29, 544A.13, 544B.15, or 602.3203 or chapter 1517 or 155,
507B7-or-522B7 as applicable, or upon any other grounds
specifically provided for in this chapter for revocation of
the license of a licensee subject to the jurisdiction of that
board, or upon failure of the licensee to comply with a
decision of the board imposing licensee discipline;
Sec. 3. Section 272C.4, subsection 6, Code 2003, is

16 amended to read as follows:

17 6. Define by rule acts or omissions which that are grounds 18 for revocation or suspension of a license under section 19 147.55, 148.6, 148B.7, 152.10, 153.34, 154A.24, 169.13, 20 455B.219, 542.10, 542B.21, 543B.29, 544A.13, 544B.15, or 21 602.3203 or chapter 1517 or 155, 507B-or-522B7 as applicable, 22 and to define by rule acts or omissions which that constitute 23 negligence, careless acts, or omissions which the meaning of 24 section 272C.3, subsection 2, paragraph "b", which licensees 25 are required to report to the board pursuant to section 26 272C.9, subsection 2;

27 Sec. 4. Section 432.5, Code Supplement 2003, is amended to 28 read as follows:

29 432.5 RISK RETENTION GROUPS.

A risk retention group organized and operating pursuant to Pub. L. No. 99-563, also known as the risk retention amendments of 1986, shall pay as taxes to the director of revenue an amount equal to two-percent the applicable percent, <u>as provided in section 432.1, subsection 4,</u> of the gross amount of the premiums received during the previous calendar

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1 year for risks placed in this state. A resident or 2 nonresident agent producer shall report and pay the taxes on 3 the premiums for risks that the agent producer has placed in 4 this state with or on behalf of a risk retention group. The 5 failure of a risk retention group to pay the tax imposed in 6 this section shall result in the risk retention group being 7 considered an unauthorized insurer under chapter 507A.

Sec. 5. <u>NEW SECTION</u>. 505.7A CIVIL PENALTIES.

8

9 Unless specifically provided for in this subtitle, 10 penalties imposed under this subtitle by order of the 11 commissioner of insurance after hearing shall not exceed one 12 thousand dollars for each act or violation of this subtitle, 13 up to an aggregate of ten thousand dollars, unless the person 14 knew or reasonably should have known the person was in 15 violation of this subtitle, in which case the penalty shall 16 not exceed five thousand dollars for each act or violation, up 17 to an aggregate of fifty thousand dollars in any one six-month 18 period.

Sec. 6. Section 505A.1, article III, subsections 1 and 2,
Code Supplement 2003, are amended to read as follows:
1. The compacting states hereby create and establish an

22 entity a joint public agency known as the interstate insurance 23 product regulation commission. Pursuant to article IV, the 24 commission has the power to develop uniform standards for 25 product lines, receive and provide prompt review of products 26 filed therewith, and give approval to those product filings 27 satisfying applicable uniform standards, provided it is not 28 intended for the commission to be the exclusive entity for 29 receipt and review of insurance product filings. Nothing 30 herein shall prohibit any insurer from filing its product in 31 any state wherein the insurer is licensed to conduct the 32 business of insurance, and any such filing shall be subject to 33 the laws of the state where filed.

34 2. The commission is a body corporate comprising-each and 35 politic, and an instrumentality of the compacting state.

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30 members and employees.

1

Sec. 7. Section 505A.1, article III, subsection 3, Code 2 Supplement 2003, is amended by striking the subsection. 3 Sec. 8. Section 505A.1, article V, subsection 1, paragraph 4 c, subparagraphs (3) and (4), Code Supplement 2003, are 5 amended to read as follows: (3) Providing reasonable standards and procedures: 6 7 (a) For the establishment and meetings of other 8 committees. (b) Governing any general or specific delegation of any 9 10 authority or function of the commission. 11 (4) Providing reasonable procedures for calling and 12 conducting meetings of the commission,-and that consists of a 13 majority of commission members ensuring reasonable advance 14 notice of each such meeting, and providing for the right of 15 citizens to attend each such meeting with enumerated 16 exceptions designed to protect the public's interest, the 17 privacy of individuals, and insurers' proprietary information, 18 including trade secrets. The commission may meet in camera 19 only after a majority of the entire membership votes to close 20 a meeting en toto or in part. As soon as practicable, the 21 commission shall make public: (a) A copy of the vote to close the meeting, revealing the 22 23 vote of each member, with no proxy votes allowed. 24 (b) Votes taken during such meeting. 25 Sec. 9. Section 505A.1, article V, subsection 1, paragraph 26 c, Code Supplement 2003, is amended by adding the following 27 new subparagraph: 28 NEW SUBPARAGRAPH. (8) Promulgating a code of ethics to 29 address permissible and prohibited activities of commission ⁻

Sec. 10. Section 505A.1, article V, subsection 1, Code 31 32 Supplement 2003, is amended by adding the following new 33 paragraph:

NEW PARAGRAPH. d. The commission shall publish its bylaws 34 35 in a convenient form and file a copy of the bylaws, along with

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1 any amendments, with the appropriate agency or officer in each 2 of the compacting states.

S.F. H.F.

3 Sec. 11. Section 505A.1, article VII, subsection 2, Code 4 Supplement 2003, is amended to read as follows:

5 2. RULEMAKING PROCEDURE. Rules and operating procedures 6 shall be made pursuant to a rulemaking process that conforms 7 to the model state administrative procedure act <u>of 1981 as</u> 8 <u>amended</u>, as may be appropriate to the operations of the 9 commission. Before the commission adopts a uniform standard, 10 the commission shall give written notice to the relevant state 11 legislative committee or committees in each compacting state 12 responsible for insurance issues of its intention to adopt the 13 uniform standard. <u>The commission, in adopting a uniform</u> 14 <u>standard, shall consider fully all submitted materials and</u> 15 <u>issue a concise explanation of its decision.</u>

16 Sec. 12. Section 505A.1, article VIII, subsection 1, Code 17 Supplement 2003, is amended to read as follows: 18 1. The commission shall promulgate rules to-establish 19 establishing conditions and procedures under-which-the 20 commission-shall-make-its-information-and-official-records 21 available-to-the-public-for-inspection-or-copying for public 22 inspection and copying of its information and official 23 records, except such information and records involving the 24 privacy of individuals and insurers' trade secrets. The 25 commission may promulgate additional rules under which it may 26 make available to federal and state agencies, including law 27 enforcement agencies, records, and information otherwise 28 exempt from disclosure, and may enter into agreements with 29 such agencies to receive or exchange information or records 30 subject to nondisclosure and confidentiality provisions. Sec. 13. Section 505A.1, article VIII, subsection 4, 31 32 paragraphs a and b, Code Supplement 2003, are amended to read 33 as follows:

34 a. With respect to the commissioner's market regulation of 35 a product or advertisement that is approved or certified to

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1 the commission, no-activity-of-an-insurer the content of the 2 product or advertisement shall not constitute a violation of 3 the provisions, standards, or requirements of this compact 4 except upon a final order of the commission, issued at the 5 request of a commissioner after prior notice to the insurer 6 and an opportunity for hearing before the commission.

b. Before a commissioner may bring an action for violation 8 of any provision, standard, or requirement of this compact 9 relating to the use <u>content</u> of an advertisement not approved 10 or certified to the commission, the commission, or an 11 authorized commission officer or employee, must authorize the 12 action. However, authorization pursuant to this paragraph 13 does not require notice to the insurer, opportunity for 14 hearing, or disclosure of requests for authorization or 15 records of the commission's action on such requests.

16 Sec. 14. Section 505A.1, article XI, subsection 1, Code
17 Supplement 2003, is amended to read as follows:

Not later than thirty days after the commission has 18 1. 19 given notice of a disapproved product or advertisement filed 20 with the commission, the insurer or third-party filer whose 21 filing was disapproved may appeal the determination to a 22 review panel appointed by the commission. The commission 23 shall adopt rules to establish procedures for appointing such 24 review panels and provide for notice and hearing. The 25 decision-of-the-review-panel-shall-be-the-final-action-of-the 26 commission-and-not-subject-to-review-by-any-court-27 Notwithstanding-the-foregoing7-an An allegation that the 28 commission, in disapproving a product or advertisement filed 29 with the commission, acted arbitrarily, capriciously, or in a 30 manner that is an abuse of discretion or otherwise not in 31 accordance with the law, is subject to judicial review in 32 accordance with article III, section 5.

33 Sec. 15. Section 505A.1, article XII, subsection 6, Code
34 Supplement 2003, is amended to read as follows:
35 6. The commission shall keep complete and accurate

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1 accounts of all its internal receipts, including grants and 2 donations, and disbursements of all funds under its control. 3 The internal financial accounts of the commission shall be 4 subject to the accounting procedures established under its 5 bylaws. The financial accounts and reports, including the 6 system of internal controls and procedures of the commission, 7 shall be audited annually by an independent certified public 8 accountant. Upon the determination of the commission, but no 9 less frequently than every three years, the review of the 10 independent auditor shall include a management and performance 11 audit of the commission. The commission shall make an annual 12 report to the governor and legislature of the compacting 13 states, which shall include a report of the independent audit. 14 The commission's internal accounts, -any-work-papers-related-to 15 any-internal-audit,-and-any-work-papers-related-to-the 16 independent-audit; shall not be confidential; -provided-that 17 and such materials may be shared with the commissioner of any 18 compacting state and-shall-remain-confidential-pursuant-to 19 article-VII upon request; provided, however, that any work 20 papers related to any internal or independent audit and any 21 information regarding the privacy of the individuals and 22 insurers' proprietary information, including trade secrets, 23 shall remain confidential.

Sec. 16. Section 505A.1, article XVI, subsection 1, paragraph b, Code Supplement 2003, is amended to read as follows:

27 b. For any product approved or certified to the 28 commission, the rules, uniform standards, and any other 29 requirements of the commission shall constitute the exclusive 30 provisions applicable to the content, approval, and 31 certification of such products. For advertisement that is 32 subject to the commission's authority, any rule, uniform 33 standard, or other requirement of the commission which governs 34 the content of the advertisement shall constitute the 35 exclusive provision that a commissioner may apply to the

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1 content of the advertisement. Notwithstanding the foregoing, 2 action taken by the commission shall not abrogate or restrict:

3 (1) The access of any person--including-the-attorney
4 general-7 to state courts.

5 (2) Remedies available under state law related to breach 6 of contract, tort, general consumer protection laws, or 7 general consumer protection regulations that apply to the sale 8 or advertisement of the product or other laws not specifically 9 directed to the content of the product.

10 (3) State law relating to the construction of insurance
11 contracts.

12 (4) The authority of the attorney general of the state, 13 including but not limited to maintaining any actions or 14 proceedings, as authorized by law.

15 Sec. 17. Section 507.14, Code 2003, is amended by adding 16 the following new unnumbered paragraph:

17 <u>NEW UNNUMBERED PARAGRAPH</u>. Analysis notes, work papers, or 18 other documents related to the analysis of an insurer are not 19 public records under chapter 22.

20 Sec. 18. Section 507.16, Code 2003, is amended to read as 21 follows:

22 507.16 UNLAWFUL SOLICITATION OF BUSINESS.

Any It shall be unlawful for any officer, manager, agent, or representative of any insurance company contemplated by this chapter, who, with knowledge that its certificate of authority has been suspended or revoked, or that it is rinsolvent, or is doing an unlawful or unauthorized business, solicits to solicit or receive applications for insurance for and the company, or-receives-applications-therefor, or does to do any other act or thing toward receiving or procuring any new business for said the company, -shall-be-deemed-guilty-of-a serious-misdemeanor, and-the. The provisions of sections and 511.17 are hereby extended to all companies contemplated by this chapter.

35 Sec. 19. Section 507A.10, Code 2003, is amended to read as

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1 follows:

2 507A.10 CEASE AND DESIST ORDER ORDERS -- CIVIL PENALTY AND 3 CRIMINAL PENALTIES.

4 <u>1.</u> Upon a determination by the commissioner, after a 5 hearing conducted pursuant to chapter 17A, that a person or 6 insurer has violated a provision of this chapter, the 7 commissioner shall reduce the findings of the hearing to 8 writing and deliver a copy of the findings to the person or 9 insurer, may issue an order requiring the person or insurer to 10 cease and desist from engaging in the conduct resulting in the 11 violation, and may assess a civil penalty of not more than 12 fifty thousand dollars against the person or insurer.

13 2. a. Upon a determination by the commissioner that a 14 person or insurer has engaged, is engaging, or is about to 15 engage in any act or practice constituting a violation of this 16 chapter or a rule adopted or order issued under this chapter, 17 the commissioner may issue a summary order directing the 18 person or insurer to cease and desist from engaging in the act 19 or practice or to take other affirmative action as is in the 20 judgment of the commissioner necessary to comply with the 21 requirements of this chapter.

b. A person to whom a summary order has been issued under
this subsection may contest the order by filing a request for
a contested case proceeding and hearing as provided in chapter
17A and in accordance with rules adopted by the commissioner.
However, the person shall have at least thirty days from the
date that the order is issued in order to file the request.
Section 17A.18A is inapplicable to a summary order issued
under this subsection. If a hearing is not timely requested,
the summary order becomes final by operation of law. The
order shall remain effective from the date of issuance until
the date the order becomes final by operation of law or is
overturned by a presiding officer or court following a request
for hearing.



35 <u>c. A person or insurer violating a summary order issued</u>

1 under this subsection shall be deemed in contempt of that 2 order. The commissioner may petition the district court to 3 enforce the order as certified by the commissioner. The 4 district court shall find the person in contempt of the order 5 if the court finds after hearing that the person or insurer is 6 not in compliance with the order. The court may assess a 7 civil penalty against the person or insurer and may issue 8 further orders as it deems appropriate. 3. A person acting as an insurance producer, as defined in 9 10 chapter 522B, without proper licensure, or an insurer who 11 willfully violates any provision of this chapter, or any rule 12 adopted or order issued under this chapter, is guilty of a 13 class "D" felony. 4. A person acting as an insurance producer, as defined in 14 15 chapter 522B, without proper licensure, or an insurer who 16 willfully violates any provision of this chapter, or any rule 17 adopted or order issued under this chapter, and when such 18 violation results in a loss of more than ten thousand dollars, 19 is guilty of a class "C" felony. 20 5. The commissioner may refer such evidence as is 21 available concerning violations of this chapter or of any rule 22 adopted or order issued under this chapter, or of the failure 23 of a person to comply with the licensing requirements of 24 chapter 522B, to the attorney general or the proper county 25 attorney who may, with or without such reference, institute 26 the appropriate criminal proceedings under this chapter. 27 6. This chapter does not limit the power of the state to 28 punish any person for any conduct that constitutes a crime 29 under any other statute. Sec. 20. Section 507B.2, subsection 1, Code 2003, is 30 31 amended to read as follows: "Person" shall mean any individual, corporation, 32 1. 33 association, partnership, reciprocal exchange, interinsurer, 34 fraternal beneficiary association, and any other legal entity 35 engaged in the business of insurance, including agents,

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1 brokers insurance producers and adjusters. "Person" shall 2 also mean any corporation operating under the provisions of 3 chapter 514 and any benevolent association as defined and 4 operated under chapter 512A. For purposes of this chapter, 5 corporations operating under the provisions of chapter 514 and 6 chapter 512A shall be deemed to be engaged in the business of 7 insurance.

8 Sec. 21. Section 507B.3, Code Supplement 2003, is amended 9 by adding the following new subsection:

NEW SUBSECTION. 3. Information obtained by the commissioner in the course of investigating a consumer complaint may, in the discretion of the commissioner, be provided to the insurance company or insurance producer which is the subject of the complaint or to the consumer who filed the complaint or the individual insured who is the subject of the complaint without waiving the confidentiality afforded by this section to the commissioner or other persons.

18 Sec. 22. <u>NEW SECTION</u>. 507B.5A INVESTIGATIONS.

Prior to the commencement of a contested case, the commissioner may subpoena books, papers, records, and any content evidence necessary for the commissioner to determine whether a contested case proceeding should be instituted. The commissioner shall not be required to pay the costs of production of the subpoenaed documents or records. Sec. 23. Section 507B.6, subsection 5, Code 2003, is

26 amended to read as follows:

5. Statements of charges, notices, orders, <u>subpoenas</u>, and other processes of the commissioner under this chapter may be served by anyone duly authorized by the commissioner, either in the manner provided by law for service of process in civil actions, or by mailing a copy thereof by restricted certified mail to the person affected by such the statement, notice, and order, <u>subpoena</u>, or other process at the person's residence or principal office or place of business. The verified return by the person so serving such the statement, notice, order,

1 <u>subpoena</u>, or other process, setting forth the manner of such 2 service, shall be proof of the-same <u>service</u>, and the return 3 receipt for such the statement, notice, order, <u>subpoena</u>, or 4 other process, and mailed by restricted certified mail as 5 aforesaid, shall be proof of the service of-the-same. 6 Sec. 24. <u>NEW SECTION</u>. 507B.6A SUMMARY CEASE AND DESIST 7 ORDERS.

8 1. Upon a determination by the commissioner that a person 9 or insurer has engaged, is engaging, or is about to engage in 10 any act or practice constituting a violation of this chapter 11 or a rule adopted or order issued under this chapter, the 12 commissioner may issue a summary order directing the person or 13 insurer to cease and desist from engaging in the act or 14 practice or to take other affirmative action as is in the 15 judgment of the commissioner necessary to comply with the 16 requirements of this chapter.

17 2. A person who has been issued a summary order under this 18 section may contest the order by filing a request for a 19 contested case proceeding and hearing as provided in chapter 20 17A and in accordance with the rules adopted by the 21 commissioner. However, the person shall have at least thirty 22 days from the date that the order is issued in order to file 23 the request. Section 17A.18A is inapplicable to a summary 24 order issued under this section. The order shall remain 25 effective from the date of issuance unless overturned by a 26 presiding officer or court following a request for hearing. 27 If a hearing is not timely requested, the summary order 28 becomes final by operation of law.

3. A person or insurer violating a summary order issued under this section shall be deemed in contempt of that order. The commissioner may petition the district court to enforce the order as certified by the commissioner. The district court shall adjudge the person in contempt of the order if the district finds after hearing that the person or insurer is not in compliance with the order. The court may assess a civil

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1 penalty against the person or insurer and may issue further 2 orders as it deems appropriate.

Sec. 25. Section 507B.7, Code 2003, is amended to read as 3 4 follows:

507B.7 CEASE AND DESIST ORDERS AND MODIFICATIONS-THEREOF 5 6 PENALTIES.

If, after such hearing, the commissioner determines 7 1. 8 that the a person charged has engaged in an unfair method of 9 competition or an unfair or deceptive act or practice, the 10 commissioner shall reduce the findings to writing and shall 11 issue and cause to be served upon the person charged with the 12 violation a copy of such findings, an order requiring such 13 person to cease and desist from engaging in such method of 14 competition, act, or practice, and if-the-act-or-practice-is-a 15 violation-of-section-507B-47-507B-4A7-or-507B-57 the 16 commissioner may at the commissioner's discretion order any 17 one or more of the following:

Payment of a civil penalty of not more than one 18 a. 19 thousand dollars for each act or violation of this subtitle, 20 but not to exceed an aggregate of ten thousand dollars, unless 21 the person knew or reasonably should have known the person was 22 in violation of section-507B-47-507B-4A7-or-507B-5 this 23 subtitle, in which case the penalty shall be not more than 24 five thousand dollars for each act or violation, but not to 25 exceed an aggregate penalty of fifty thousand dollars in any 26 one six-month period. If the commissioner finds that a 27 violation of section-507B-47-507B-4A7-or-507B-5 this subtitle 28 was directed, encouraged, condoned, ignored, or ratified by 29 the employer of the person or by an insurer, the commissioner 30 shall also assess a fine to the employer or insurer. 31 Suspension or revocation of the license of a person as b. 32 defined in section 507B.2, subsection 1, if the person knew or 33 reasonably should have known the person was in violation of 34 section-507B-47-507B-4A7-or-507B-5 this subtitle. 35

с. Payment of interest at the rate of ten percent per

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1 annum if the commissioner finds that the insurer failed to pay 2 interest as required under section 507B.4, subsection 12. 3 2. Until the expiration of the time allowed under section 4 507B.8 for filing a petition for review if no such petition 5 has been duly filed within such time, or, if a petition for 6 review has been filed within such time, then until the 7 transcript of the record in the proceeding has been filed in 8 the district court, as hereinafter provided, the commissioner 9 may at any time, upon such notice and in such manner as the 10 commissioner may deem proper, modify or set aside in whole or 11 in part any order issued by the commissioner under this 12 section.

13 3. After the expiration of the time allowed for filing 14 such a petition for review if no such petition has been duly 15 filed within such time, the commissioner may at any time, 16 after notice and opportunity for hearing, reopen and alter, 17 modify, or set aside, in whole or in part, any order issued by 18 the commissioner under this section, whenever in the 19 commissioner's opinion conditions of fact or of law have so 20 changed as to require such action, or if the public interest 21 shall so require.

Any person who violates a cease and desist order of the commissioner, and while such order is in effect, may, after notice and hearing and upon order of the commissioner, be subject at the discretion of the commissioner to any one or for the following:

27 <u>a. A monetary penalty of not more than ten thousand</u>
28 <u>dollars for each and every act or violation.</u>

b. Suspension or revocation of such person's license.
Sec. 26. Section 507C.6, subsection 4, Code 2003, is
amended by striking the subsection and inserting in lieu
thereof the following:

33 4. It shall be unlawful for a person as defined in
34 subsection 1 to fail to cooperate with the commissioner, or to
35 obstruct or interfere with the commissioner in the conduct of

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1 a delinquency proceeding or an investigation preliminary or 2 incidental to a delinquency proceeding, or to violate a valid 3 order of the commissioner.

4 Sec. 27. Section 507C.ll, unnumbered paragraph 1, Code 5 2003, is amended to read as follows:

6 Notwithstanding chapter 22, in all administrative 7 proceedings pursuant to sections 507C.9 and 507C.10 all 8 <u>orders</u>, records, and documents pertaining to or a part of the 9 record of the proceedings are confidential except as is 10 necessary to obtain compliance with a proceeding. However, 11 the records may be released if either of the following occurs: 12 Sec. 28. Section 509.18, Code 2003, is amended to read as 13 follows:

14 509.18 PROHIBITED DEPOSIT IN FINANCIAL INSTITUTION. 15 A company or its agent licensed to sell a policy of credit 16 life or credit accident and health insurance or certificate 17 under a policy of group credit life or credit accident and 18 health insurance shall not deposit or offer to deposit funds 19 in a financial institution of this state in exchange for the 20 privilege of selling such insurance to or on behalf of the 21 financial institution. Any-person-violating-the-provisions-of 22 this-section-shall-be-guilty-of-a-simple-misdemeanor.

23 Sec. 29. Section 511.8, subsection 1, Code Supplement 24 2003, is amended to read as follows:

25 1. UNITED STATES GOVERNMENT OBLIGATIONS.

<u>a.</u> Bonds or other evidences of indebtedness issued,
27 assumed, or guaranteed by the United States of America, or by
28 any agency or instrumentality thereof of the United States of
29 America.

b. Bonds or other evidences of indebtedness issued,
assumed, or guaranteed by the United States of America, or by
any agency or instrumentality of the United States of America
include investments in an open-end management investment
company registered with the federal securities and exchange
commission under the federal Investment Company Act of 1940,

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1 15 U.S.C. § 80(a), and operated in accordance with 17 C.F.R. §
2 270.2a-7, the portfolio of which is limited to the United
3 States government obligations described in paragraph "a", and
4 which are included in the national association of insurance
5 commissioners' securities valuation office's United States
6 direct obligations-full faith and credit exempt list.

7 Sec. 30. Section 511.8, subsection 19, unnumbered 8 paragraph 1, Code Supplement 2003, is amended to read as 9 follows:

Bonds or other evidences of indebtedness, not to include 10 11 currency, issued, assumed, or guaranteed by a foreign 12 government other than Canada, or by a corporation incorporated 13 under the laws of a foreign government other than Canada. 14 Such governmental obligations must be valid, legally 15 authorized and issued, and on the date of acquisition have 16 predominantly investment qualities and characteristics as 17 provided by rule. Such corporate obligations must meet the 18 gualifications established in subsection 5 for bonds and other 19 evidences of indebtedness issued, assumed, or guaranteed by a 20 corporation incorporated under the laws of the United States 21 or Canada. Foreign investments authorized by this subsection 22 are not eligible in excess of ten twenty percent of the legal 23 reserve of the life insurance company or association. 24 Investments in obligations of a foreign government, other than 25 Canada and the United Kingdom, are not eligible in excess of 26 two percent of the legal reserve in the securities of foreign 27 governments of any one foreign nation. Investments in 28 obligations of the United Kingdom are not eligible in excess 29 of four percent of the legal reserve. Investments in a 30 corporation incorporated under the laws of a foreign 31 government other than Canada are not eligible in excess of two 32 percent of the legal reserve in the securities of any one 33 foreign corporation.

34 Sec. 31. Section 511.8, subsection 22, paragraph e, Code 35 Supplement 2003, is amended to read as follows:

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1 Investments in financial instruments of foreign e. 2 governments or foreign corporate obligations, other than 3 Canada, used in hedging transactions are not eligible in 4 excess of ten twenty percent of the legal reserve, less any 5 foreign investment authorized by subsection 19 owned by the 6 company or association and in which its legal reserve is 7 invested, except insofar as the financial instruments are 8 collateralized by cash or United States government obligations 9 as authorized by subsection 1 deposited with a custodian bank 10 as defined in subsection 21, and held under a written ll agreement with the custodian bank that complies with 12 subsection 21 and provides for the proceeds of the collateral, 13 subject to the terms and conditions of the applicable 14 collateral or other credit support agreement, to be remitted 15 to the legal reserve deposit of the company or association and 16 to vest in the state in accordance with section 508.18 17 whenever proceedings under that section are instituted. 18 Sec. 32. Section 511.8, Code Supplement 2003, is amended 19 by adding the following new subsection:

20 NEW SUBSECTION. 23. SECURITY LOANS.

a. A life insurance company or association may loan
securities held by it in its legal reserve to a broker-dealer
registered under the Securities Exchange Act of 1934, a
national bank, or a state bank, foreign bank, or trust company
that is a member of the United States federal reserve system,
and the loaned securities shall continue to be eligible for
inclusion in the legal reserve of the life insurance company
or association.

b. The loan shall be fully collateralized by cash, cash quivalents, or obligations issued or guaranteed by the United States or an agency or instrumentality of the United States. The life insurance company or association shall take delivery of the collateral either directly or through an authorized custodian.

35 c. If the loan is collateralized by cash or cash

1 equivalents, the cash or cash equivalent collateral may be 2 reinvested by the life insurance company or association in 3 either individual securities which are eligible for inclusion 4 in the legal reserve of the life insurance company or 5 association or in repurchase agreements fully collateralized 6 by such securities if the life insurance company or 7 association takes delivery of the collateral either directly 8 or through an authorized custodian or pooled fund comprised of 9 individual securities which are eligible for inclusion in the 10 legal reserve of the life insurance company or association. 11 If such reinvestment is made in individual securities or in 12 repurchase agreements, the individual securities or the 13 securities which collateralize the repurchase agreements shall 14 mature in less than two hundred seventy days. If such 15 reinvestment is made in a pooled fund, the average maturity of 16 the securities comprising such pooled fund must be less than 17 two hundred seventy days. Individual securities and 18 securities comprising the pooled fund shall be investment 19 grade.

20 d. The loan shall be evidenced by a written agreement21 which provides all of the following:

(1) That the loan will be fully collateralized at all times during the term of the loan, and that the collateral will be adjusted as necessary each business day during the term of the loan to maintain the required collateralization in the event of market value changes in the loaned securities or collateral.

(2) If the loan is fully collateralized by cash or cash 29 equivalents, the cash or cash equivalent may be reinvested by 30 the life insurance company or association as provided in 31 paragraph "c".

32 (3) That the loan may be terminated by the life insurance 33 company or association at any time, and that the borrower 34 shall return the loaned stocks or obligations or equivalent 35 stocks or obligations within five business days after

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1 termination.

2 (4) That the life insurance company or association has the 3 right to retain the collateral or use the collateral to 4 purchase investments equivalent to the loaned securities if 5 the borrower defaults under the terms of the agreement, and 6 that the borrower remains liable for any losses and expenses 7 incurred by the life insurance company or association due to 8 default that are not covered by the collateral.

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9 e. Securities loaned pursuant to this subsection are not 10 eligible for inclusion in the legal reserve of the life 11 insurance company or association in excess of twenty percent 12 of the legal reserve.

13 Sec. 33. Section 511.16, Code 2003, is amended to read as 14 follows:

15 511.16 ILLEGAL BUSINESS.

Any It shall be unlawful for any officer, manager, or agent of any life insurance company or association who, with knowledge that it is doing business in an unlawful manner or is insolvent, solicits to solicit or receive applications for insurance with said the company or association, or-receives applications-therefor, or does to do any other act or thing towards toward procuring or receiving any new business for such the company or association, -shall-be-guilty-of-an aggravated-misdemeanor.

25 Sec. 34. Section 512A.8, Code 2003, is amended to read as 26 follows:

27 512A.8 PENALTIES VIOLATION.

Except as otherwise provided by law, it shall be unlawful for any person or corporation to operate a benevolent association in this state except as provided for in this chapter. Any-person-violating-the-provisions-of-this-chapter shall-be-guilty-of-a-serious-misdemeanor.

33 Sec. 35. Section 512B.35, Code 2003, is amended to read as 34 follows:

35 512B.35 **PENALTIES** FALSE OR FRAUDULENT STATEMENTS.

1. A-person-who It shall be unlawful for a person
 2 knowingly makes to make a false or fraudulent statement or
 3 representation in or relating to an application for membership
 4 or for the purpose of obtaining money from or a benefit in a
 5 society7-is-guilty-of-a-fraudulent-practice.

2. A-person-who-willfully-makes It shall be unlawful for a 6 7 person to willfully make a false or fraudulent statement in a 8 verified report or declaration under oath required or 9 authorized by this chapter, or of a material fact or thing 10 contained in a sworn statement concerning the death or 11 disability of an insured for the purpose of procuring payment 12 of a benefit named in the certificate -- is-guilty-of-perjury. 13 3. A-person-who-solicits It shall be unlawful for a person 14 to solicit membership for, or in any manner assists to assist 15 in procuring membership in, a society not licensed to do 16 business in this state--is-guilty-of-a-serious-misdemeanor. 17 4---A-person-guilty-of-a-willful-violation-of-or-neglect 18 or-refusal-to-comply-with,-a-provision-of-this-chapter-for 19 which-a-penalty-is-not-otherwise-prescribed,-is-guilty-of-a 20 simple-misdemeanor.

Sec. 36. Section 513C.3, subsection 15, Code Supplement 22 2003, is amended by adding the following new unnumbered 23 paragraph:

24 <u>NEW UNNUMBERED PARAGRAPH</u>. For purposes of this subsection, 25 an association policy under chapter 514E is not considered 26 "qualifying existing coverage" or "qualifying previous 27 coverage".

Sec. 37. Section 513C.7, subsections 1, 2, and 5, Code Supplement 2003, are amended by striking the subsections. Sec. 38. Section 513C.8, Code 2003, is amended to read as Sec. 31 follows:

32 513C.8 HEALTH BENEFIT PLAN STANDARDS.

33 The commissioner board of directors of the Iowa

34 <u>comprehensive health insurance association</u> shall adopt by-rule 35 the form and level of coverage of the basic health benefit

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1 plan and the standard health benefit plan for the guaranteed 2 individual market which shall provide benefits substantially 3 similar to those-as-provided-for-under-chapter-513B-with 4 respect-to-small-group-coverage;-but-which-shall-be 5 appropriately-adjusted-at-least-every-three-years-to-reflect 6 the current state of the individual market.

7 Sec. 39. Section 513C.10, subsection 1, paragraph a, Code8 Supplement 2003, is amended to read as follows:

9 a. All persons that provide health benefit plans in this
10 state including insurers providing accident and sickness
11 insurance under chapter 509, 514, or 514A, whether on an
12 individual or group basis; fraternal benefit societies
13 providing hospital, medical, or nursing benefits under chapter
14 512B; and health maintenance organizations, organized delivery
15 systems, and-all other entities providing health insurance or
16 health benefits subject to state insurance regulation, and all
17 other insurers as designated by the board of directors of the
18 Iowa comprehensive health insurance association with the
19 approval of the commissioner shall be members of the
20 association.

21 Sec. 40. Section 513C.10, subsection 4, Code Supplement 22 2003, is amended to read as follows:

4. The board shall develop procedures <u>and assessment</u> <u>rechanisms</u> and make assessments and distributions as required to equalize the individual carrier and organized delivery system gains or losses so that each carrier or organized delivery system receives the same ratio of paid claims to ninety percent of earned premiums as the aggregate of all basic and standard plans insured by all carriers and organized delivery systems in the state.

31 Sec. 41. Section 514E.1, subsection 2, Code Supplement 32 2003, is amended to read as follows:

33 2. "Association policy" means an individual or group 34 policy issued by the association that provides the coverage 35 specified-in-section-514E-4 as set forth in the benefit plans

1 adopted by the association's board of directors and approved 2 by the commissioner.

3 Sec. 42. Section 514E.1, subsections 7, 8, 12, and 22,
4 Code Supplement 2003, are amended by striking the subsections.
5 Sec. 43. Section 514E.1, subsection 13, Code Supplement
6 2003, is amended to read as follows:

7 13. "Health care services" means services, the coverage of 8 which is authorized under chapter 509, chapter 514, chapter 9 514A, or chapter 514B as limited-by-sections-514E.4-and-514E.5 10 <u>established by the association's board of directors</u>, and 11 includes services for the purposes of preventing, alleviating, 12 curing, or healing human illness, injury or physical 13 disability.

14 Sec. 44. Section 514E.2, subsection 1, unnumbered 15 paragraph 1, Code Supplement 2003, is amended to read as 16 follows:

17 The Iowa comprehensive health insurance association is 18 established as a nonprofit corporation. The association shall 19 assure that health insurance, as *limited-by-sections-514E-4* 20 and-514E-57 established by the association's board of 21 directors and subject to the approval of the commissioner, is 22 made available to each eligible Iowa resident, and each 23 federally eligible individual applying to the association for 24 coverage, and each individual who has been confirmed eligible 25 under the federal Trade Adjustment Act of 2002, Pub. L. No. 26 107-210, as a recipient under that Act by the department of 27 workforce development and the federal internal revenue 28 service. The association shall also be responsible for 29 administering the Iowa individual health benefit reinsurance 30 association pursuant to all of the terms and conditions 31 contained in chapter 513C.

32 Sec. 45. Section 514E.2, subsection 1, paragraph a, Code 33 Supplement 2003, is amended to read as follows:

34 a. All carriers as-defined-in-section-514E-17-subsection 35 37 and all organized delivery systems licensed by the director

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1 of public health providing health insurance or health care 2 services in Iowa and all other insurers designated by the 3 association's board of directors and approved by the 4 commissioner shall be members of the association.

5 Sec. 46. Section 514E.2, subsection 6, Code Supplement 6 2003, is amended by striking the subsection and inserting in 7 lieu thereof the following:

6. Rates for coverages issued by the association shall 8 9 reflect rating characteristics used in the individual 10 insurance market. The rates for a given classification shall 11 not be more than one hundred fifty percent of the average 12 premium or payment rate for the classification charged by the 13 five carriers with the largest health insurance premium or 14 payment volume in the state during the preceding calendar 15 year. In determining the average rate of the five largest 16 carriers, the rates or payments charged by the carriers shall 17 be actuarially adjusted to determine the rate or payment that 18 would have been charged for benefits similar to those issued 19 by the association.

20 Section 514E.2, subsection 13, Code Supplement Sec. 47. 21 2003, is amended by striking the subsection and inserting in 22 lieu thereof the following:

23 13. An insurer may offset an assessment made pursuant to 24 this chapter against its premium tax liability pursuant to 25 chapter 432 to the extent of twenty percent of the amount of 26 the assessment for each of the five calendar years following 27 the year in which the assessment was paid. If an insurer 28 ceases doing business, all uncredited assessments may be 29 credited against its premium tax liability for the year it 30 ceases doing business.

31 Sec. 48. Section 514E.4, Code 2003, is amended by striking 32 the section and inserting in lieu thereof the following: 33 514E.4 ASSOCIATION POLICY -- COVERAGE AND BENEFIT 34 REQUIREMENTS -- DEDUCTIBLES -- COINSURANCE. 35

The association policy shall pay for medically necessary

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1 eligible health care services as established in the benefit 2 plans adopted by the association's board of directors and 3 approved by the commissioner. The plans shall provide 4 benefits, deductibles, and coinsurance that reflect the 5 current state of the individual insurance market. The board 6 may modify the benefits provided under the plans to reflect 7 the current state of the individual insurance market with the 8 approval of the commissioner.

9 Sec. 49. Section 514E.7, subsection 1, Code 2003, is
10 amended by adding the following new unnumbered paragraph:
11 <u>NEW UNNUMBERED PARAGRAPH</u>. The association shall rescind
12 coverage for an individual who no longer resides in the state.
13 Sec. 50. Section 514E.7, subsection 4, paragraph b, Code
14 2003, is amended by adding the following new subparagraph:
15 <u>NEW SUBPARAGRAPH</u>. (4) In the case of an individual
16 transferring to an association policy from a basic or standard
17 health benefit plan under chapter 513C beginning on or after
18 January 1, 2005.

19 Sec. 51. Section 514E.7, subsection 5, Code 2003, is 20 amended by adding the following new paragraph:

21 <u>NEW PARAGRAPH</u>. f. The individual is eligible for Medicare 22 based upon age.

23 Sec. 52. Section 514E.8, subsection 1, Code 2003, is 24 amended to read as follows:

1. An association policy shall contain provisions under which the association is obligated to renew the contract until the day on which the individual in-whose-name-the-contract-is issued-first becomes eligible for Medicare coverage;-except that-in-a-family-policy-covering-both-husband-and-wife;-the age-of-the-younger-spouse-shall-be-used-as-the-basis-for meeting-the-durational-requirements-of-this-subsection; However;-when-the-individual-in-whose-name-the-contract-is issued-becomes-eligible-for-Medicare-coverage;-the-person shall-be-eligible-for-the-Medicare-supplement-plan-offered-by the-association based on age.

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Sec. 53. Section 514E.11, Code 2003, is amended to read as
follows:

514E.11 NOTICE OF ASSOCIATION POLICY.

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Every carrier, including a health maintenance organization 4 5 subject to chapter 514B and an organized delivery system, 6 authorized to provide health care insurance or coverage for 7 health care services in Iowa, shall provide a notice of the 8 availability of coverage by the association to any person who 9 receives a rejection of coverage for health insurance or 10 health care services - or - a - notice - to - any - person - who - is 11 informed-that-a-rate-for-health-insurance-or-coverage-for 12 health-care-services-will-exceed-the-rate-of-an-association 13 policy, and that the person is eligible to apply for health 14 insurance provided by the association. Application for the 15 health insurance shall be on forms prescribed by the 16 association's board of directors and made available to the 17 carriers and organized delivery systems and other entities 18 providing health care insurance or coverage for health care 19 services regulated by the commissioner.

Sec. 54. Section 515.35, subsection 3, paragraph a, subparagraph (2), Code Supplement 2003, is amended by striking the subparagraph and inserting in lieu thereof the following: (2) A company may loan securities held by it to a brokerdealer registered under the Securities Exchange Act of 1934, a national bank, or a state bank, foreign bank, or trust company that is a member of the United States federal reserve system, and the loaned securities shall continue to be allowable investments of the company.

(a) The loan shall be fully collateralized by cash, cash
equivalents, or obligations issued or guaranteed by the United
States or an agency or instrumentality of the United States.
The company shall take delivery of the collateral either
directly or through an authorized custodian.

34 (b) If the loan is collateralized by cash or cash 35 equivalents, the cash or cash equivalent collateral may be

1 reinvested by the company in either individual securities 2 which are allowable investments of the company or in 3 repurchase agreements fully collateralized by such securities 4 if the company takes delivery of the collateral either 5 directly or through an authorized custodian or a pooled fund 6 comprised of individual securities which are allowable 7 investments of the company. If such reinvestment is made in 8 individual securities or in repurchase agreements, the 9 individual securities or the securities which collateralize 10 the repurchase agreements shall mature in less than two 11 hundred seventy days. If such reinvestment is made in a 12 pooled fund, the average maturity of the securities comprising 13 such pooled fund must be less than two hundred seventy days. 14 Individual securities and securities comprising the pooled 15 fund shall be investment grade.

16 (c) The loan shall be evidenced by a written agreement 17 which provides all of the following:

18 (i) That the loan will be fully collateralized at all 19 times during the term of the loan, and that the collateral 20 will be adjusted as necessary each business day during the 21 term of the loan to maintain the required collateralization in 22 the event of market value changes in the loaned securities or 23 collateral.

(ii) If the loan is fully collateralized by cash or cash
equivalents, the cash or cash equivalent collateral may be
reinvested by the company as provided in subparagraph
subdivision (b).

(iii) That the loan may be terminated by the company at any time, and that the borrower shall return the loaned stocks and obligations or equivalent stocks or obligations within al five business days after termination.

32 (iv) That the company has the right to retain the 33 collateral or use the collateral to purchase investments 34 equivalent to the loaned securities if the borrower defaults 35 under the terms of the agreement, and that the borrower

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remains liable for any losses and expenses incurred by the
 company due to default that are not covered by the collateral.

3 (d) Securities loaned pursuant to this subparagraph (2) 4 are not eligible for investment of the company in excess of 5 twenty percent of admitted assets.

6 Sec. 55. Section 515.35, subsection 4, paragraph a, Code
7 Supplement 2003, is amended by adding the following new
8 unnumbered paragraph:

9 <u>NEW UNNUMBERED PARAGRAPH</u>. Bonds or other evidences of 10 indebtedness issued, assumed, or guaranteed by the United 11 States of America, or by any agency or instrumentality of the 12 United States of America include investments in an open-end 13 management investment company registered with the federal 14 securities and exchange commission under the federal 15 Investment Company Act of 1940, 15 U.S.C. § 80(a) and operated 16 in accordance with 17 C.F.R. § 270.2a-7, the portfolio of 17 which is limited to the United States government obligations 18 described in this paragraph "a", and which are included in the 19 national association of insurance commissioners' securities 20 valuation office's United States direct obligation-full faith 21 and credit list.

Sec. 56. Section 515.35, subsection 4, paragraph i, subparagraphs (3) and (4), Code Supplement 2003, are amended to read as follows:

(3) A company may invest in the obligations of a foreign government other than Canada or of a corporation incorporated runder the laws of a foreign government other than Canada. Any such governmental obligation must be valid, legally authorized and issued, and on the date of acquisition have predominantly investment qualities and characteristics as provided by rule. Any such corporate obligation must on the date of acquisition have investment qualities and characteristics, and must not have investment qualities and characteristics, and must not have speculative elements which are predominant, as provided by rule. A company shall not invest more than two percent of its admitted assets in the obligations of a foreign government

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1 other than Canada and the United Kingdom. Investments in 2 obligations of the United Kingdom are not eligible in excess 3 of four percent of admitted assets. A company shall not 4 invest more than two percent of its admitted assets in the 5 obligations of a corporation incorporated under the laws of a 6 foreign government other than a corporation incorporated under 7 the laws of Canada.

8 (4) A company shall not invest more than ten twenty
9 percent of its admitted assets in foreign investments pursuant
10 to this paragraph.

11 Sec. 57. Section 515.120, Code 2003, is amended to read as
12 follows:

13 515.120 VIOLATIONS.

Any It shall be unlawful for any officer, manager, or agent of any insurance company or association who, with knowledge that it is doing business in an unlawful manner, or is resolvent, solicits to solicit or receive applications for number and the company or association, or-receives applications-therefor, or does to do any other act or thing towards toward procuring or receiving any new business for such company or association, or-shall-be-guilty-of-a-serious misdemeanor.

23 Sec. 58. Section 515.121, Code 2003, is amended to read as 24 follows:

25 515.121 OFFICERS PUNISHED.

26 Any It shall be unlawful for any of the following to fail 27 to comply with or to violate any of the requirements of this 28 chapter:

29 <u>1. The</u> president, secretary, or other officer of any 30 company organized under the laws of this state₇-or-any.

31 <u>2. Any</u> officer or person doing or attempting to do 32 business in this state for any insurance company organized 33 either within or without this state₇-failing-to-comply-with 34 any-of-the-requirements-of-this-chapter₇-or-violating-any-of 35 the-provisions-thereof₇-shall-be-guilty-of-a-simple

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1 misdemeanor.

2 Sec. 59. Section 515.140, Code 2003, is amended to read as 3 follows:

4 515.140 VIOLATIONS -- STATUS OF POLICY.

5 Any It shall be unlawful for any insurance company, its 6 officers or agents, or either of them, violating to violate 7 any of the provisions of section 515.138, by issuing, 8 delivering, or offering to issue or deliver any policy of fire 9 insurance on property in this state other or-different-from 10 than the standard form,-herein as provided for,-shall-be 11 guilty-of-a-simple-misdemeanor in statute, but any policy so 12 issued or delivered shall, nevertheless, be binding upon the 13 company issuing or delivering the same,-and-such policy. The 14 company shall, until the payment of such-fine a penalty 15 assessed by order after hearing, be disgualified from doing 16 any insurance business in this state,-but-any-policy-so-issued 17 or-delivered-shall,-nevertheless,-be-binding-upon-the-company 18 issuing-or-delivering-the-same.

19 Sec. 60. Section 515A.6, subsection 7, Code 2003, is 20 amended by striking the subsection.

21 Sec. 61. Section 518A.41, Code 2003, is amended to read as 22 follows:

23 518A.41 INSURANCE PRODUCERS TO BE LICENSED.

No <u>A</u> person or corporation shall <u>not</u> solicit any <u>an</u> 25 application for insurance for any association in this state 26 without having procured from the commissioner of insurance a 27 license authorizing the person or corporation to act as an 28 insurance producer. Violation-of-this-provision-shall 29 constitute-a-serious-misdemeanor.

30 Sec. 62. Section 520.14, Code 2003, is amended to read as 31 follows:

32 520.14 VIOLATIONS -- EXCEPTIONS.

Any It shall be unlawful for an attorney who-shall to
34 exchange any contracts of insurance of the kind and character
35 specified in this chapter, or any for an attorney or

1 representative of such the attorney,-who-shall to solicit or 2 negotiate any applications for the same without the attorney 3 having first complied with the foregoing provisions,-shall-be 4 deemed-guilty-of-a-simple-misdemeanor. For the purpose of 5 organization and upon issuance of permit by the commissioner 6 of insurance, powers of attorney and applications for such 7 contracts may be solicited without compliance with the 8 provisions of this chapter, but no an attorney, agent, or 9 other person shall not make any such contracts of indemnity 10 until all of the provisions of this chapter shall have been 11 complied with.

12 Sec. 63. Section 522B.11, subsection 1, paragraph b, Code 13 2003, is amended to read as follows:

b. Violating any <u>state</u> insurance laws, <u>federal Act</u>
<u>relating to the business of insurance, or any order of any</u>
<u>court of competent jurisdiction</u>, or violating any <u>informal</u>
<u>settlement agreement</u>, regulation, subpoena, or order of the
commissioner or of a commissioner of another state.

19 Sec. 64. Section 522B.11, subsection 1, Code 2003, is 20 amended by adding the following new paragraph:

21 <u>NEW PARAGRAPH</u>. q. Is the subject of an order of the 22 securities administrator of this state or any other state, 23 province, district, or territory, denying, suspending, 24 revoking, or otherwise taking action against a registration as 25 a broker-dealer, agent, investment adviser, or investment 26 adviser representative.

27 Sec. 65. Section 522B.11, subsection 5, Code 2003, is 28 amended to read as follows:

5. The commissioner <u>may conduct an investigation of any</u> <u>suspected violation of this chapter pursuant to section 507B.6</u> <u>and may enforce the provisions and impose any penalty or</u> <u>remedy authorized by this chapter and chapter 507B against any</u> <u>person who is under investigation for, or charged with, a</u> <u>violation of either chapter even if the person's license has</u> <u>been surrendered or has lapsed by operation of law.</u>

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Sec. 66. Section 522B.11, Code 2003, is amended by adding 2 the following new subsection:

In order to assure a free flow of NEW SUBSECTION. 6. a. 3 4 information for accomplishing the purposes of this section, 5 all complaint files, investigation files, other investigation 6 reports, and other investigative information in the possession 7 of the commissioner or the commissioner's employees or agents 8 that relates to licensee discipline are privileged and 9 confidential, and are not subject to discovery, subpoena, or 10 other means of legal compulsion for their release to a person 11 other than the licensee, and are not admissible in evidence in 12 a judicial or administrative proceeding other than the 13 proceeding involving licensee discipline. A final written 14 decision of the commissioner in a disciplinary proceeding is a 15 public record.

b. Investigative information in the possession of the commissioner or the commissioner's employees or agents that relates to licensee discipline may be disclosed, in the commissioner's discretion, to appropriate licensing authorities within this state, the appropriate licensing authority in another state, the District of Columbia, or a territory or country in which the licensee is licensed or has applied for a license.

c. If the investigative information in the possession of
the commissioner or the commissioner's employees or agents
indicates a crime has been committed, the information shall be
reported to the proper law enforcement agency.

d. Pursuant to the provisions of section 17A.19,
subsection 6, upon an appeal by the licensee, the commissioner
shall transmit the entire record of the contested case to the
reviewing court.

e. Notwithstanding the provisions of section 17A.19,
subsection 6, if a waiver of privilege has been involuntary
and evidence has been received at a disciplinary hearing, the
court shall issue an order to withhold the identity of the

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1 individual whose privilege was waived.

2 NEW SECTION. 522B.16A DUTIES OF LICENSEES. Sec. 67. An insurance producer, as a condition of licensure, is 3 1. 4 under a duty to submit to a physical or mental examination 5 when directed in writing by the commissioner for cause. All 6 objections shall be waived as to the admissibility of the 7 examining physician's testimony or reports on the grounds of 8 privileged communications. The medical testimony or report 9 shall not be used against the insurance producer in any 10 proceeding other than one relating to licensee discipline by 11 the commissioner. The commissioner, upon probable cause, may 12 order a physical or mental examination to be performed, and 13 upon refusal of the licensee to submit to the examination, the 14 commissioner may order that the allegations pursuant to which 15 the order of physical or mental examination was made shall be 16 taken to be established.

A licensee has a continuing duty to report to the
 commissioner those acts or omissions found in section 522B.11,
 subsection 1, when committed by another insurance producer.

3. Unless prohibited by court order or agreement of the parties, an insurance producer shall have a continuing duty and obligation, as a condition of licensure, to report to the commissioner every adverse judgment in a professional or cocupational malpractice action to which the licensee is a party, and every settlement of a claim against the licensee alleging malpractice.

4. An insurance producer has a continuing duty and
obligation to keep at the insurance producer's place of
business the usual and customary records pertaining to
transactions undertaken by the insurance producer. Records
shall be maintained for a minimum of three years following the
completion of any insurance transaction.

33 5. An insurance producer who willfully fails to comply 34 with subsection 2, 3, or 4 commits a violation of this chapter 35 and is subject to sanction under section 522B.11.

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Sec. 68. Section 523A.401, subsection 6, paragraph c, Code 2 2003, is amended to read as follows:

3 c. The insurance policy shall not allow-for-contesting 4 coverage, be contestable, or limit death benefits in the case 5 of suicide, with respect to that portion of the face amount of 6 the policy that is required by paragraph "b". The policy 7 shall not refer to physical examination, or otherwise operate 8 as an exclusion, limitation, or condition other than requiring 9 submission of proof of death or surrender of policy at the 10 time the prepaid purchase agreement is funded, matures, or is 11 canceled, as the case may be.

12 Sec. 69. Section 523A.402, subsection 6, paragraph c, Code
13 2003, is amended to read as follows:

14 c. The annuity shall not allow-for-contesting-coverage, be 15 contestable, or limit death benefits in the case of suicide, 16 with respect to that portion of the face amount of the annuity 17 which is required by paragraph "b". The annuity shall refer 18 to physical examination, or otherwise operate as an exclusion, 19 limitation, or condition other than requiring submission of 20 proof of death or surrender of the annuity at the time the 21 prepaid purchase agreement is funded, matures, or is canceled, 22 as the case may be.

23 Sec. 70. Section 523A.501, subsection 6, Code 2003, is 24 amended to read as follows:

6. If no denial order is in effect and no proceeding is pending under section 523A.503, the application becomes effective at noon of the thirtieth day after a completed application or an amendment completing the application is filed, unless waived by the applicant. The commissioner may specify an earlier effective date. Automatic effectiveness under this subsection shall not be deemed approval of the application. If the commissioner does not grant the permit, the commissioner shall notify the person in writing of the reasons for the denial. The-permit-shall-disclose-on-its-face the-permit-holder's-employer-or-the-establishment-on-whose



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1 behalf-the-applicant-will-be-making-or-attempting-to-make 2 sales7-the-permit-number7-and-the-expiration-date.

3 Sec. 71. Section 523A.502, subsection 7, Code 2003, is 4 amended to read as follows:

5 7. A sales permit is not assignable or transferable. A 6 permit holder selling all or part of a business shall cancel 7 the permit establishment's sales permits and the purchaser 8 shall apply for a new permit sales permits in the purchaser's 9 name within thirty days of the sale.

Sec. 72. Section 523A.503, subsection 1, unnumbered ll paragraph 1, Code 2003, is amended to read as follows: The commissioner may, pursuant to chapter 17A, deny any sermit application, or immediately suspend, or revoke, or explicitly disciplinary action related to any permit sissued under this chapter for several reasons, including but not limited to:

17 Sec. 73. Section 523A.503, subsection 3, Code 2003, is 18 amended to read as follows:

19 3. Except as provided in subsection 2, a permit shall not 20 be revoked, or suspended, or otherwise be the subject of 21 <u>disciplinary action</u> except after notice and hearing under 22 chapter 17A.

23 Sec. 74. Section 523A.503, Code 2003, is amended by adding 24 the following new subsection:

25 <u>NEW SUBSECTION</u>. 6. The commissioner may impose a civil 26 penalty in an amount not exceeding ten thousand dollars per 27 violation against any person violating this chapter. Each day 28 of a continuing violation constitutes a separate offense.

29 Sec. 75. Sections 506.7, 507B.11, 508.27, 511.18, 514.6, 30 514A.9, 514B.29, 515.132, 515.145, and 521.15, Code 2003, are 31 repealed.

32 Sec. 76. Sections 514E.5 and 514E.6, Code 2003, are 33 repealed.

34 Sec. 77. EFFECTIVE DATE. The sections of this Act 35 amending section 513C.7 and section 514E.2, subsection 13, and

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1 repealing sections 514E.5 and 514E.6 take effect January 1, 2 2005.

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EXPLANATION

4 This bill contains revisions throughout the various 5 chapters comprising the insurance code. The bill also 6 contains certain revisions to Code chapter 523A, pertaining to 7 cemetery and funeral merchandise and services.

8 The bill deletes references to Code chapters 507B and 522B, 9 regarding unfair trade practices in insurance and the 10 licensing of insurance producers, respectively, throughout 11 Code chapter 272C, which relates to continuing education and 12 regulation for certain professions and occupations.

13 The bill modifies terminology in Code section 432.5 to 14 refer to "producer" instead of "agent", and also to conform to 15 the current insurance premium tax rate provision in Code 16 chapter 432. Code section 507B.2 also makes a similar change 17 in terminology from "agents" and "brokers" to "producers".

The bill creates a new centralized civil penalty section in 18 19 Code section 505.7A, in conjunction with other changes 20 throughout the bill that eliminate or modify penalties in many 21 provisions throughout the insurance code. The new provision 22 is intended to apply to all prohibited acts in Title XIII, 23 subtitle 1, regarding insurance and related regulation, where 24 a penalty is imposed by order of the insurance commissioner 25 after hearing. Penalties shall not exceed \$1,000 for each 26 violation, or \$10,000 in the aggregate, unless the person knew 27 or reasonably should have known the behavior violated an Iowa 28 statute, in which case the penalty shall not exceed \$5,000 for 29 each violation, or \$50,000 in the aggregate in any one six-30 month period. Code sections 507C.6, 509.18, 512A.8, 512B.35, 31 515.120, 515.121, 515.140, 518A.41, and 520.14 are updated in 32 form and language, as part of this consolidation of general 33 penalties in new Code section 505.7A.

Code sections 507.16, 511.16, and 515.120, relating to 35 unlawful solicitation of business for insolvent or unlawful 1 insurers, are also all updated in form and language, according
2 to the penalty provision now in Code section 505.7A, as
3 described above.

4 The bill makes a number of modifications to certain 5 terminology and terms used in the interstate insurance product 6 regulation compact in Code section 505A.1, enacted in 2003. 7 The change to article III, for example, now specifies that the 8 entity to be formed will be a joint public agency, and not 9 only a body corporate, but also a body politic and an 10 instrumentality of the compacting state. Modifications to 11 article V provide for more specific rights relating to 12 meetings of the commission, including advance notice, public 13 attendance, and protection of proprietary information. A 14 specific procedure is mandated for closed meetings. Similar 15 types of specification are made through modifications to 16 articles VII, VIII, XI, XII, and XVI.

17 The bill adds a new unnumbered paragraph to Code section 18 507.14 to provide specifically that analysis notes, work 19 papers, or other documents related to the analysis of an 20 insurer are not public records under Code chapter 22, in 21 addition to the specified reports, notes, and work papers 22 already not considered public documents under Code chapter 22.

Code section 507A.10, relating to civil penalties and cease and desist orders for unauthorized insurers, is expanded to provide additional procedures relating to summary orders, requests for contested case proceedings, contempt orders, criminal penalties, and referral to criminal authorities. Code section 507B.3 is amended to add a new paragraph to allow the commissioner to provide information from an investigation regarding insurance trade practices to a company

31 or producer that is the subject of the complaint or to the 32 consumer who filed the complaint without being deemed to have 33 waived confidentiality provisions.

New Code section 507B.5A, also in the chapter regarding insurance trade practices, is added to allow the commissioner

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1 to subpoena books, papers, and other records, without cost, 2 prior to commencing a contested case proceeding in order to 3 determine whether a contested case should be instituted. 4 Code section 507B.6 is amended to allow the service of

5 subpoenas, in addition to other documents currently listed, by 6 restricted certified mail. The language is also updated.

7 Similarly, new Code section 507B.6A is added to provide 8 procedures for the issuance of summary cease and desist 9 orders, requests for contested case proceedings, and contempt 10 orders in insurance trade practices cases.

11 Code section 507B.7, regarding cease and desist orders for 12 insurance trade practices, alters the penalty provisions 13 related to the cease and desist orders by removing the 14 connection of the violation to knowledge of violation of 15 certain statutory provisions before the imposition of a civil 16 penalty, and instead requiring only a general standard that 17 the person knew or reasonably should have known that the 18 conduct was in violation of Iowa law. In addition, the 19 commissioner is newly empowered to impose an additional 20 penalty when a person violates a cease and desist order, after 21 notice and hearing, and upon order.

The word "orders" is added to Code section 507C.11 to 3 specify that such documents, in addition to other records and 4 documents comprising the record of a proceeding, are 5 confidential.

Code sections 511.8 and 515.35 are amended to specify that certain investments in open-end management investment companies, the portfolio of which is limited to United States government obligations, as further delineated in the respective Code sections, meet the definition of certain bonds specified under those Code sections.

32 Code sections 511.8 and 515.35 are also modified regarding 33 the allowable percentage insurance companies or associations 34 may invest in foreign government bonds. Code section 511.8 is 35 further modified regarding the amount that may be used for

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hedging transactions, and a new subsection is added regarding
 security loans. Code section 515.35 is further modified
 regarding the loaning of securities by an insurance company.

4 Regarding program eligibility under the individual health 5 insurance market reforms chapter, the bill modifies Code 6 section 513C.3 by specifying that an association policy under 7 Code chapter 514E is not considered "qualifying existing 8 coverage" or "qualifying previous coverage".

9 Certain subsections of Code section 513C.7 regarding basic 10 and standard health plans are stricken effective January 1, 11 2005.

With regard to program administration, basic and standard I3 plan offerings are eliminated over time, which the bill i4 implements through the amendments to Code section 513C.4 and i5 repeals of Code sections 513E.5 and 513E.6, effective January 16 1, 2005.

17 The bill amends Code section 513C.8 to provide that the 18 board of directors of the Iowa comprehensive health insurance 19 association, instead of the commissioner, shall adopt forms 20 and levels of coverage of basic and standard individual health 21 benefit plans for the guaranteed individual market that are 22 substantially similar to the current state of the individual 23 market.

The bill amends Code section 513C.10, subsection 1, paragraph "a", to provide that all insurers, as designated by the board of directors of the Iowa comprehensive health insurance association with the approval of the commissioner, shall be included as members of the Iowa individual health penefit reinsurance association.

30 The bill amends Code section 513C.10, subsection 4, to 31 provide that the Iowa individual health benefit reinsurance 32 association shall develop not only procedures but assessment 33 mechanisms to make assessments and distributions as required 34 to equalize individual carrier and organized delivery system 35 gains or losses.

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1 The bill amends Code chapter 514E relating to the Iowa 2 comprehensive health insurance association (ICHA) and 3 specifically amends Code section 514E.7 to limit eligible 4 participants to residents, and, due to the sunset of basic and 5 standard plans beginning January 1, 2005, to allow new 6 participants in the ICHA plan to transfer from a basic and 7 standard plan without a limitation on preexisting conditions. 8 Code section 514E.11, regarding notification of potential 9 eligibility for ICHA, is also modified. The bill also 10 modifies Code section 514E.2 related to the federal Trade 11 Adjustment Act, Pub. L. No. 107-210, because the ICHA is the 12 mechanism designated by the governor pursuant to the trade 13 Act.

Code section 514E.4 is amended relating to the payment of medically necessary health care services. The bill also addresses the provision of benefits, deductibles, and coinsurance reflective of current individual insurance market conditions in that Code section. The ICHA board is authorized to make benefit changes from time to time to remain current with market conditions. Code sections 514E.5 and 514E.6, containing lists of excluded expenses and benefit limitations, are repealed effective January 1, 2005. Corresponding changes are made to delete unused definitions from Code section 514E.1. Changes are also made to Code section 513C.8 to remove an outdated reference to Code chapter 513B, and to Code sections 514E.7 and 514E.8 to coordinate that Code language with Medicare requirements.

Regarding rate structures, Code section 514E.2 is amended of allow for adjustments in ICHA rates to reflect rating characteristics in the marketplace and is amended to allow an insurer to offset an assessment made under this chapter against its premium tax liability pursuant to Code chapter 3432. The amendment to Code section 514E.2, subsection 13, allowing the offset, takes effect January 1, 2005. The bill amends Code section 514E.2, regarding the Iowa

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comprehensive health insurance association, to provide for the
 coverage of individuals applying for coverage pursuant to the
 federal Trade Adjustment Act of 2002.

Code section 522B.11, regarding insurance producer license 5 denial, nonrenewal, or revocation, is modified in several 6 respects. The provision regarding discipline or penalty for 7 violation of insurance laws is made more specific, by 8 reference to state insurance laws, federal Acts relating to 9 insurance, orders of courts of competent jurisdiction, and 10 informal settlement agreements. A new paragraph is added 11 relating to discipline or penalty relative to an order against 12 an individual as a broker-dealer, agent, investment adviser, 13 or investment adviser representative. A new reference is 14 added to the commissioner's power to investigate suspected 15 violations of Code chapter 522B pursuant to Code section 16 507B.6. Finally, a new provision is added to address the 17 status of investigative files as confidential, but final 18 written decisions of the commissioner as public records, 19 although the commissioner has the discretion to share 20 investigative information with other licensing authorities, 21 and evidence of a crime must be referred to law enforcement.

New Code section 522B.16A addresses duties of licensees, including duty to submit to physical or mental examination when directed in writing by the commissioner for cause, duty to report certain acts or omissions by another producer, duty to report adverse judgments in professional malpractice actions and settlements, and a duty to keep certain records for at least three years.

The bill modifies Code sections 523A.401 and 523A.402 in 30 the cemetery and funeral merchandise and services chapter, 31 relating to contestability clauses and death benefit 32 limitations in certain policies and annuities.

33 The bill also makes several changes to establishment and 34 sales permits for cemetery and funeral merchandise and 35 services. The bill deletes the requirement in Code section

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1 523A.501 that a permit disclose on its face the permit 2 holder's employer or establishment, the permit number, and 3 expiration date. Code section 523A.502 is modified to refer 4 to the establishment's sales permits. Several changes are 5 made to Code section 523A.503 to refer to disciplinary action 6 which may be imposed in relation to a permit, as well as a 7 civil penalty not to exceed \$10,000 for violations of the Code 8 chapter.

9 The bill repeals Code sections 506.7 (general penalty 10 provision), 507B.11 (penalty for violation of cease and desist 11 order), 508.27 (penalty provision related to Code section 12 508.25, relating to use of form for which prior approval has 13 not been obtained), 511.18 (fraud in procuring insurance), 14 514.6 (rate approval for nonprofit health service 15 corporations), 514A.9 (general penalty provision), 514B.29 16 (general penalty provision), 514E.5 and 514E.6 (lists of 17 excluded expenses and benefit limitations), 515.132 (general 18 penalty provision), 515.145 (penalty provision for violation 19 of Code section 515.142, relating to operation of fire 20 insurance companies), and 521.15 (general penalty provision). 21 These repeals are made in conjunction with the consolidation 22 of general penalties and the new general penalty provision in 23 Code section 505.7A.

The repeals of Code sections 514E.5 and 514E.6 take effect January 1, 2005.

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HOUSE FILE 2489

AN ACT

RELATING TO THE REGULATION OF VARIOUS INDUSTRIES BY THE INSURANCE DIVISION, INCLUDING MODIFICATIONS RELATED TO THE INTERSTATE INSURANCE PRODUCT REGULATION COMPACT; INVESTIGA-TIONS AND PENALTIES; PROCEDURES AND CONTEMPT ORDERS; INSURANCE COMPANY INVESTMENTS; INSURANCE PRODUCER LICENSING; INDIVIDUAL HEALTH INSURANCE PROGRAMS; COVERAGE OBLIGATIONS OF THE IOWA COMPREHENSIVE HEALTH INSURANCE ASSOCIATION; REFUNDS OF UNEARNED PREMIUM; COVERAGE OF FEDERAL TRADE ADJUSTMENT ACT RECIPIENTS; PENALTIES AND DISCIPLINE APPLICABLE TO HOLDERS OF ESTABLISHMENT AND SALES PERMITS FOR CEMETERY AND FUNERAL MERCHANDISE AND SERVICES; AND PROVIDING AND APPLYING PENALTIES.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

Section 1. Section 272C.1, subsection 6, paragraph z, Code 2003, is amended by striking the paragraph.

Sec. 2. Section 272C.3, subsection 2, paragraph a, Code Supplement 2003, is amended to read as follows:

a. Revoke a license, or suspend a license either until further order of the board or for a specified period, upon any of the grounds specified in section 147.55, 148.6, 148B.7, 152.10, 153.34, 154A.24, 169.13, 455B.219, 542.10, 542B.21, 543B.29, 544A.13, 544B.15, or 602.3203 or chapter 151r or 155, 507Br-er-522Br as applicable, or upon any other grounds specifically provided for in this chapter for revocation of the license of a licensee subject to the jurisdiction of that board, or upon failure of the licensee to comply with a decision of the board imposing licensee discipline;

Sec. 3. Section 272C.4, subsection 6, Code 2003, is amended to read as follows:

6. Define by rule acts or omissions which that are grounds for revocation or suspension of a license under section 147.55, 148.6, 148B.7, 152.10, 153.34, 154A.24, 169.13, 455B.219, 542.10, 542B.21, 543B.29, 544A.13, 544B.15, or 602.3203 or chapter 1517 or 155, 507B-or-522B7 as applicable, and to define by rule acts or omissions which that constitute negligence, careless acts, or omissions within the meaning of section 272C.3, subsection 2, paragraph "b", which licensees are required to report to the board pursuant to section 272C.9, subsection 2;

Sec. 4. Section 432.5, Code Supplement 2003, is amended to read as follows:

432.5 RISK RETENTION GROUPS.

A risk retention group organized and operating pursuant to Pub. L. No. 99-563, also known as the risk retention amendments of 1986, shall pay as taxes to the director of revenue an amount equal to two-percent the applicable percent, as provided in section 432.1, subsection 4, of the gross amount of the premiums received during the previous calendar year for risks placed in this state. A resident or nonresident agent producer shall report and pay the taxes on

the premiums for risks that the agent producer has placed in this state with or on behalf of a risk retention group. The failure of a risk retention group to pay the tax imposed in this section shall result in the risk retention group being considered an unauthorized insurer under chapter 507A.

Sec. 5. <u>NEW SECTION</u>. 505.7A CIVIL PENALTIES.

Unless specifically provided for in this subtitle, penalties imposed under this subtitle by order of the commissioner of insurance after hearing shall not exceed one thousand dollars for each act or violation of this subtitle, up to an aggregate of ten thousand dollars, unless the person knew or reasonably should have known the person was in violation of this subtitle, in which case the penalty shall not exceed five thousand dollars for each act or violation, up to an aggregate of fifty thousand dollars in any one six-month period.

Sec. 6. Section 505A.1, article III, subsections 1 and 2, Code Supplement 2003, are amended to read as follows:

1. The compacting states hereby create and establish an entity <u>a joint public agency</u> known as the interstate insurance product regulation commission. Pursuant to article IV, the commission has the power to develop uniform standards for product lines, receive and provide prompt review of products filed therewith, and give approval to those product filings satisfying applicable uniform standards, provided it is not intended for the commission to be the exclusive entity for receipt and review of insurance product filings. Nothing herein shall prohibit any insurer from filing its product in any state wherein the insurer is licensed to conduct the business of insurance, and any such filing shall be subject to the laws of the state where filed.

2. The commission is a body corporate comprising-each and politic, and an instrumentality of the compacting state.

Sec. 7. Section 505A.1, article III, subsection 3, Code Supplement 2003, is amended by striking the subsection.

Sec. 8. Section 505A.1, article V, subsection 1, paragraph c, subparagraphs (3) and (4), Code Supplement 2003, are amended to read as follows:

(3) Providing reasonable standards and procedures:

(a) For the establishment <u>and meetings</u> of other committees.

(b) Governing any general or specific delegation of any authority or function of the commission.

(4) Providing reasonable procedures for calling and conducting meetings of the commission,-and that consists of a majority of commission members ensuring reasonable advance notice of each such meeting, and providing for the right of citizens to attend each such meeting with enumerated exceptions designed to protect the public's interest, the privacy of individuals, and insurers' proprietary information, including trade secrets. The commission may meet in camera only after a majority of the entire membership votes to close a meeting en toto or in part. As soon as practicable, the commission shall make public:

(a) A copy of the vote to close the meeting, revealing the vote of each member, with no proxy votes allowed.

(b) Votes taken during such meeting.

Sec. 9. Section 505A.1, article V, subsection 1, paragraph c, Code Supplement 2003, is amended by adding the following new subparagraph:

<u>NEW SUBPARAGRAPH</u>. (8) Promulgating a code of ethics to address permissible and prohibited activities of commission members and employees.

Sec. 10. Section 505A.1, article V, subsection 1, Code Supplement 2003, is amended by adding the following new paragraph:

<u>NEW PARAGRAPH</u>. d. The commission shall publish its bylaws in a convenient form and file a copy of the bylaws, along with any amendments, with the appropriate agency or officer in each of the compacting states.

Sec. 11. Section 505A.1, article VII, subsection 2, Code Supplement 2003, is amended to read as follows:

2. RULEMAKING PROCEDURE. Rules and operating procedures shall be made pursuant to a rulemaking process that conforms to the model state administrative procedure act of 1981 as <u>amended</u>, as may be appropriate to the operations of the commission. Before the commission adopts a uniform standard, the commission shall give written notice to the relevant state legislative committee or committees in each compacting state responsible for insurance issues of its intention to adopt the uniform standard. <u>The commission, in adopting a uniform</u> standard, shall consider fully all submitted materials and issue a concise explanation of its decision.

Sec. 12. Section 505A.1, article VIII, subsection 1, Code Supplement 2003, is amended to read as follows:

1. The commission shall promulgate rules to-establish establishing conditions and procedures under-which-the commission-shall-make-its-information-and-official-records available-to-the-public-for-inspection-or-copying for public inspection and copying of its information and official records, except such information and records involving the privacy of individuals and insurers' trade secrets. The commission may promulgate additional rules under which it may make available to federal and state agencies, including law enforcement agencies, records, and information otherwise exempt from disclosure, and may enter into agreements with such agencies to receive or exchange information or records subject to nondisclosure and confidentiality provisions.

Sec. 13. Section 505A.1, article VIII, subsection 4, paragraphs a and b, Code Supplement 2003, are amended to read as follows:

a. With respect to the commissioner's market regulation of a product or advertisement that is approved or certified to the commission, no-activity-of-an-insurer the content of the product or advertisement shall not constitute a violation of House File 2489, p. 6

the provisions, standards, or requirements of this compact except upon a final order of the commission, issued at the request of a commissioner after prior notice to the insurer and an opportunity for hearing before the commission.

b. Before a commissioner may bring an action for violation of any provision, standard, or requirement of this compact relating to the use <u>content</u> of an advertisement not approved or certified to the commission, the commission, or an authorized commission officer or employee, must authorize the action. However, authorization pursuant to this paragraph does not require notice to the insurer, opportunity for hearing, or disclosure of requests for authorization or records of the commission's action on such requests.

Sec. 14. Section 505A.1, article XI, subsection 1, Code Supplement 2003, is amended to read as follows:

1. Not later than thirty days after the commission has given notice of a disapproved product or advertisement filed with the commission, the insurer or third-party filer whose filing was disapproved may appeal the determination to a review panel appointed by the commission. The commission shall adopt rules to establish procedures for appointing such review panels and provide for notice and hearing. The decision-of-the-review-panel-shall-be-the-final-action-of-the commission-and-not-subject-to-review-by-any-court. Notwithstanding-the-foregoing, an <u>An</u> allegation that the commission, in disapproving a product or advertisement filed with the commission, acted arbitrarily, capriciously, or in a manner that is an abuse of discretion or otherwise not in accordance with the law, is subject to judicial review in accordance with article III, section 5.

Sec. 15. Section 505A.1, article XII, subsection 6, Code Supplement 2003, is amended to read as follows:

 The commission shall keep complete and accurate accounts of all its internal receipts, including grants and donations, and disbursements of all funds under its control.

The internal financial accounts of the commission shall be subject to the accounting procedures established under its bylaws. The financial accounts and reports, including the system of internal controls and procedures of the commission. shall be audited annually by an independent certified public accountant. Upon the determination of the commission, but no less frequently than every three years, the review of the independent auditor shall include a management and performance audit of the commission. The commission shall make an annual report to the governor and legislature of the compacting states, which shall include a report of the independent audit. The commission's internal accounts, any work papers related to any-internal-audity-and-any-work-papers-related-to-the independent-audity shall not be confidentialy-provided-that and such materials may be shared with the commissioner of any compacting state and-shall-remain-confidential-pursuant-to article-VII upon request; provided, however, that any work papers related to any internal or independent audit and any information regarding the privacy of the individuals and insurers' proprietary information, including trade secrets, shall remain confidential.

Sec. 16. Section 505A.1, article XVI, subsection 1, paragraph b, Code Supplement 2003, is amended to read as follows:

b. For any product approved or certified to the commission, the rules, uniform standards, and any other requirements of the commission shall constitute the exclusive provisions applicable to the content, approval, and certification of such products. For advertisement that is subject to the commission's authority, any rule, uniform standard, or other requirement of the commission which governs the content of the advertisement shall constitute the exclusive provision that a commissioner may apply to the content of the advertisement. Notwithstanding the foregoing, action taken by the commission shall not abrogate or restrict: The access of any person-including-the-attorney general; to state courts.

(2) Remedies available under state law related to breach of contract, tort, general consumer protection laws, or general consumer protection regulations that apply to the sale or advertisement of the product or other laws not specifically directed to the content of the product.

(3) State law relating to the construction of insurance contracts.

(4) The authority of the attorney general of the state, including but not limited to maintaining any actions or proceedings, as authorized by law.

Sec. 17. Section 507.14, Code 2003, is amended by adding the following new unnumbered paragraph:

<u>NEW UNNUMBERED PARAGRAPH</u>. Analysis notes, work papers, or other documents related to the analysis of an insurer are not public records under chapter 22.

Sec. 18. Section 507.16, Code 2003, is amended to read as follows:

507.16 UNLAWFUL SOLICITATION OF BUSINESS.

Any <u>It shall be unlawful for any</u> officer, manager, agent, or representative of any insurance company contemplated by this chapter, who, with knowledge that its certificate of authority has been suspended or revoked, or that it is insolvent, or is doing an unlawful or unauthorized business, selicits to solicit or receive applications for insurance for said the company, or-receives-applications-therefor, or does to do any other act or thing toward receiving or procuring any new business for said the company, shall-be-deemed-guilty-of-a serious-misdemeanor, and-the. The provisions of sections 511.16 and 511.17 are hereby extended to all companies contemplated by this chapter.

Sec. 19. Section 507A.10, Code 2003, is amended to read as follows:

507A.10 CEASE AND DESIST ORDER ORDERS -- CIVIL PENALTY AND CRIMINAL PENALTIES.

1. Upon a determination by the commissioner, after a hearing conducted pursuant to chapter 17A, that a person or insurer has violated a provision of this chapter, the commissioner shall reduce the findings of the hearing to writing and deliver a copy of the findings to the person or insurer, may issue an order requiring the person or insurer to cease and desist from engaging in the conduct resulting in the violation, and may assess a civil penalty of not more than fifty thousand dollars against the person or insurer.

2. a. Upon a determination by the commissioner that a person or insurer has engaged, is engaging, or is about to engage in any act or practice constituting a violation of this chapter or a rule adopted or order issued under this chapter, the commissioner may issue a summary order, including a brief statement of findings of fact, conclusions of law, and policy reasons for the decision, and directing the person or insurer to cease and desist from engaging in the act or practice or to take other affirmative action as is in the judgment of the commissioner necessary to comply with the requirements of this chapter.

b. A person to whom a summary order has been issued under this subsection may contest the order by filing a request for a contested case proceeding and hearing as provided in chapter 17A and in accordance with rules adopted by the commissioner. However, the person shall have at least thirty days from the date that the order is issued in order to file the request. Section 17A.18A is inapplicable to a summary order issued under this subsection. If a hearing is not timely requested, the summary order becomes final by operation of law. The order shall remain effective from the date of issuance until the date the order becomes final by operation of law or is overturned by a presiding officer or court following a request for hearing. c. A person or insurer violating a summary order issued under this subsection shall be deemed in contempt of that order. The commissioner may petition the district court to enforce the order as certified by the commissioner. The district court shall find the person in contempt of the order if the court finds after hearing that the person or insurer is not in compliance with the order. The court may assess a civil penalty against the person or insurer and may issue further orders as it deems appropriate.

3. A person acting as an insurance producer, as defined in chapter 522B, without proper licensure, or an insurer who willfully violates any provision of this chapter, or any rule adopted or order issued under this chapter, is guilty of a class "D" felony.

4. A person acting as an insurance producer, as defined in chapter 522B, without proper licensure, or an insurer who willfully violates any provision of this chapter, or any rule adopted or order issued under this chapter, and when such violation results in a loss of more than ten thousand dollars, is guilty of a class "C" felony.

5. The commissioner may refer such evidence as is available concerning violations of this chapter or of any rule adopted or order issued under this chapter, or of the failure of a person to comply with the licensing requirements of chapter 522B, to the attorney general or the proper county attorney who may, with or without such reference, institute the appropriate criminal proceedings under this chapter.

6. This chapter does not limit the power of the state to punish any person for any conduct that constitutes a crime under any other statute.

Sec. 20. Section 507B.2, subsection 1, Code 2003, is amended to read as follows:

1. "Person" shall mean any individual, corporation, association, partnership, reciprocal exchange, interinsurer, fraternal beneficiary association, and any other legal entity

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engaged in the business of insurance, including agents; brokers insurance producers and adjusters. "Person" shall also mean any corporation operating under the provisions of chapter 514 and any benevolent association as defined and operated under chapter 512A. For purposes of this chapter, corporations operating under the provisions of chapter 514 and chapter 512A shall be deemed to be engaged in the business of insurance.

Sec. 21. Section 507B.3, Code Supplement 2003, is amended by adding the following new subsection:

<u>NEW SUBSECTION.</u> 3. Information obtained by the commissioner in the course of investigating a consumer complaint may, in the discretion of the commissioner, be provided to the insurance company or insurance producer which is the subject of the complaint or to the consumer who filed the complaint or the individual insured who is the subject of the complaint without waiving the confidentiality afforded by this section to the commissioner or other persons.

Sec. 22. Section 507B.6, subsection 5, Code 2003, is amended to read as follows:

5. Statements of charges, notices, orders, <u>subpoenas</u>, and other processes of the commissioner under this chapter may be served by anyone duly authorized by the commissioner, either in the manner provided by law for service of process in civil actions, or by mailing a copy thereof by restricted certified mail to the person affected by such <u>the</u> statement, notice, order, <u>subpoena</u>, or other process at the person's residence or principal office or place of business. The verified return by the person so serving such <u>the</u> statement, notice, order, <u>subpoena</u>, or other process, setting forth the manner of such service, shall be proof of the-same <u>service</u>, and the return receipt for such <u>the</u> statement, notice, order, <u>subpoena</u>, or other process, and mailed by restricted certified mail as aforesaid, shall be proof of the service of the-same. Sec. 23. <u>NEW SECTION</u>. 507B.6A SUMMARY CEASE AND DESIST ORDERS.

1. Upon a determination by the commissioner that a person or insurer has engaged, is engaging, or is about to engage in any act or practice constituting a violation of this chapter or a rule adopted or order issued under this chapter, the commissioner may issue a summary order, including a brief statement of findings of fact, conclusions of law, and policy reasons for the decision, and directing the person or insurer to cease and desist from engaging in the act or practice or to take other affirmative action as is in the judgment of the commissioner necessary to comply with the requirements of this chapter.

2. A person who has been issued a summary order under this section may contest the order by filing a request for a contested case proceeding and hearing as provided in chapter 17A and in accordance with the rules adopted by the commissioner. However, the person shall have at least thirty days from the date that the order is issued in order to file the request. Section 17A.18A is inapplicable to a summary order issued under this section. The order shall remain effective from the date of issuance unless overturned by a presiding officer or court following a request for hearing. If a hearing is not timely requested, the summary order becomes final by operation of law.

3. A person or insurer violating a summary order issued under this section shall be deemed in contempt of that order. The commissioner may petition the district court to enforce the order as certified by the commissioner. The district court shall adjudge the person in contempt of the order if the court finds after hearing that the person or insurer is not in compliance with the order. The court may assess a civil penalty against the person or insurer and may issue further orders as it deems appropriate.

Sec. 24. Section 507B.7, Code 2003, is amended to read as follows:

507B.7 CEASE AND DESIST ORDERS AND MODIFICATIONS-THEREOF PENALTIES.

1. If, after such hearing, the commissioner determines that the <u>a</u> person charged has engaged in an unfair method of competition or an unfair or deceptive act or practice, the commissioner shall reduce the findings to writing and shall issue and cause to be served upon the person charged with the violation a copy of such findings, an order requiring such person to cease and desist from engaging in such method of competition, act, or practice, and if-the-act-or-practice-is-a violation-of-section-507Br47-507Br4A7-or-507Br57 the commissioner may at the commissioner's discretion order any one or more of the following:

a. Payment of a civil penalty of not more than one thousand dollars for each act or violation <u>of this subtitle</u>, but not to exceed an aggregate of ten thousand dollars, unless the person knew or reasonably should have known the person was in violation of section-507Br47-507Br4A7-or-507Br5 <u>this</u> <u>subtitle</u>, in which case the penalty shall be not more than five thousand dollars for each act or violation, but not to exceed an aggregate penalty of fifty thousand dollars in any one six-month period. If the commissioner finds that a violation of section-507Br47-507Br4A7-or-507Br5 <u>this subtitle</u> was directed, encouraged, condoned, ignored, or ratified by the employer of the person or by an insurer, the commissioner shall also assess a fine to the employer or insurer.

b. Suspension or revocation of the license of a person as defined in section 507B.2, subsection 1, if the person knew or reasonably should have known the person was in violation of section-507B.47-507B.4A7-or-507B.5 this subtitle.

c. Payment of interest at the rate of ten percent per annum if the commissioner finds that the insurer failed to pay interest as required under section 507B.4, subsection 12. 2. Until the expiration of the time allowed under section

507B.8 for filing a petition for review if no such petition has been duly filed within such time, or, if a petition for review has been filed within such time, then until the transcript of the record in the proceeding has been filed in the district court, as hereinafter provided, the commissioner may at any time, upon such notice and in such manner as the commissioner may deem proper, modify or set aside in whole or in part any order issued by the commissioner under this section.

3. After the expiration of the time allowed for filing such a petition for review if no such petition has been duly filed within such time, the commissioner may at any time, after notice and opportunity for hearing, reopen and alter, modify, or set aside, in whole or in part, any order issued by the commissioner under this section, whenever in the commissioner's opinion conditions of fact or of law have so changed as to require such action, or if the public interest shall so require.

4. Any person who violates a cease and desist order of the commissioner, and while such order is in effect, may, after notice and hearing and upon order of the commissioner, be subject at the discretion of the commissioner to any one or more of the following:

a. A monetary penalty of not more than ten thousand dollars for each and every act or violation.

b. Suspension or revocation of such person's license.

Sec. 25. Section 507C.6, subsection 4, Code 2003, is amended by striking the subsection and inserting in lieu thereof the following:

4. It shall be unlawful for a person as defined in subsection 1 to fail to cooperate with the commissioner, or to obstruct or interfere with the commissioner in the conduct of a delinquency proceeding or an investigation preliminary or incidental to a delinquency proceeding, or to violate a valid order of the commissioner.

Sec. 26. Section 507C.11, unnumbered paragraph 1, Code 2003, is amended to read as follows:

Notwithstanding chapter 22, in all administrative proceedings pursuant to sections 507C.9 and 507C.10 all <u>orders</u>, records, and documents pertaining to or a part of the record of the proceedings are confidential except as is necessary to obtain compliance with a proceeding. However, the records may be released if either of the following occurs:

Sec. 27. Section 509.18, Code 2003, is amended to read as follows:

509.18 PROHIBITED DEPOSIT IN FINANCIAL INSTITUTION.

A company or its agent licensed to sell a policy of credit life or credit accident and health insurance or certificate under a policy of group credit life or credit accident and health insurance shall not deposit or offer to deposit funds in a financial institution of this state in exchange for the privilege of selling such insurance to or on behalf of the financial institution. Any-person-violating-the-provisions-of this-section-shall-be-guilty-of-a-simple-misdemeanor.

Sec. 28. Section 511.8, subsection 1, Code Supplement 2003, is amended to read as follows:

1. UNITED STATES GOVERNMENT OBLIGATIONS.

<u>a.</u> Bonds or other evidences of indebtedness issued, assumed, or guaranteed by the United States of America, or by any agency or instrumentality thereof of the United States of America.

b. Bonds or other evidences of indebtedness issued, assumed, or guaranteed by the United States of America, or by any agency or instrumentality of the United States of America include investments in an open-end management investment company registered with the federal securities and exchange commission under the federal Investment Company Act of 1940, 15 U.S.C. § 80(a), and operated in accordance with 17 C.F.R. § 270.2a-7, the portfolio of which is limited to the United States government obligations described in paragraph "a", and which are included in the national association of insurance commissioners' securities valuation office's United States direct obligations-full faith and credit exempt list.

Sec. 29. Section 511.8, subsection 19, unnumbered paragraph 1, Code Supplement 2003, is amended to read as follows:

Bonds or other evidences of indebtedness, not to include currency, issued, assumed, or guaranteed by a foreign government other than Canada, or by a corporation incorporated under the laws of a foreign government other than Canada. Such governmental obligations must be valid, legally authorized and issued, and on the date of acquisition have predominantly investment gualities and characteristics as provided by rule. Such corporate obligations must meet the qualifications established in subsection 5 for bonds and other evidences of indebtedness issued, assumed, or guaranteed by a corporation incorporated under the laws of the United States or Canada. Foreign investments authorized by this subsection are not eligible in excess of ten twenty percent of the legal reserve of the life insurance company or association. Investments in obligations of a foreign government, other than Canada and the United Kingdom, are not eligible in excess of two percent of the legal reserve in the securities of foreign governments of any one foreign nation. Investments in obligations of the United Kingdom are not eligible in excess of four percent of the legal reserve. Investments in a corporation incorporated under the laws of a foreign government other than Canada are not eligible in excess of two percent of the legal reserve in the securities of any one foreign corporation.

Sec. 30. Section 511.8, subsection 22, paragraph e, Code Supplement 2003, is amended to read as follows:

e. Investments in financial instruments of foreign governments or foreign corporate obligations, other than Canada, used in hedging transactions are not eligible in



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excess of ten <u>twenty</u> percent of the legal reserve, less any foreign investment authorized by subsection 19 owned by the company or association and in which its legal reserve is invested, except insofar as the financial instruments are collateralized by cash or United States government obligations as authorized by subsection 1 deposited with a custodian bank as defined in subsection 21, and held under a written agreement with the custodian bank that complies with subsection 21 and provides for the proceeds of the collateral, subject to the terms and conditions of the applicable collateral or other credit support agreement, to be remitted to the legal reserve deposit of the company or association and to vest in the state in accordance with section 508.18 whenever proceedings under that section are instituted.

Sec. 31. Section 511.8, Code Supplement 2003, is amended by adding the following new subsection:

NEW SUBSECTION. 23. SECURITY LOANS.

a. A life insurance company or association may loan securities held by it in its legal reserve to a broker-dealer registered under the Securities Exchange Act of 1934, a national bank, or a state bank, foreign bank, or trust company that is a member of the United States federal reserve system, and the loaned securities shall continue to be eligible for inclusion in the legal reserve of the life insurance company or association.

b. The loan shall be fully collateralized by cash, cash equivalents, or obligations issued or guaranteed by the United States or an agency or instrumentality of the United States. The life insurance company or association shall take delivery of the collateral either directly or through an authorized custodian.

c. If the loan is collateralized by cash or cash equivalents, the cash or cash equivalent collateral may be reinvested by the life insurance company or association in either individual securities which are eligible for inclusion in the legal reserve of the life insurance company or association or in repurchase agreements fully collateralized by such securities if the life insurance company or association takes delivery of the collateral either directly or through an authorized custodian or pooled fund comprised of individual securities which are eligible for inclusion in the legal reserve of the life insurance company or association. If such reinvestment is made in individual securities or in repurchase agreements, the individual securities or the securities which collateralize the repurchase agreements shall mature in less than two hundred seventy days. If such reinvestment is made in a pooled fund, the average maturity of the securities comprising such pooled fund must be less than two hundred seventy days. Individual securities and securities comprising the pooled fund shall be investment grade.

d. The loan shall be evidenced by a written agreement which provides all of the following:

(1) That the loan will be fully collateralized at all times during the term of the loan, and that the collateral will be adjusted as necessary each business day during the term of the loan to maintain the required collateralization in the event of market value changes in the loaned securities or collateral.

(2) If the loan is fully collateralized by cash or cash equivalents, the cash or cash equivalent may be reinvested by the life insurance company or association as provided in paragraph "c".

(3) That the loan may be terminated by the life insurance company or association at any time, and that the borrower shall return the loaned stocks or obligations or equivalent stocks or obligations within five business days after termination.

(4) That the life insurance company or association has the right to retain the collateral or use the collateral to

purchase investments equivalent to the loaned securities if the borrower defaults under the terms of the agreement, and that the borrower remains liable for any losses and expenses incurred by the life insurance company or association due to default that are not covered by the collateral.

e. Securities loaned pursuant to this subsection are not eligible for inclusion in the legal reserve of the life insurance company or association in excess of twenty percent of the legal reserve.

Sec. 32. Section 511.16, Code 2003, is amended to read as follows:

511.16 ILLEGAL BUSINESS.

Any It shall be unlawful for any officer, manager, or agent of any life insurance company or association who, with knowledge that it is doing business in an unlawful manner or is insolvent, solicits to solicit or receive applications for insurance with said the company or association, or-receives applications-therefor, or does to do any other act or thing towards toward procuring or receiving any new business for such the company or association, -shall-be-guilty-of-an aggravated-misdemeanor.

Sec. 33. Section 512A.8, Code 2003, is amended to read as follows:

512A.8 PENALTIES VIOLATION.

Except as otherwise provided by law, it shall be unlawful for any person or corporation to operate a benevolent association in this state except as provided for in this chapter. Any-person-violating-the-provisions-of-this-chapter shall-be-guilty-of-a-serious-misdemeanor.

Sec. 34. Section 512B.35, Code 2003, is amended to read as follows:

512B.35 PENALTIES FALSE OR FRAUDULENT STATEMENTS.

 A-person-who It shall be unlawful for a person knowingly makes to make a false or fraudulent statement or representation in or relating to an application for membership or for the purpose of obtaining money from or a benefit in a society-is-guilty-of-a-fraudulent-practice.

2. A-person-who-willfully-makes It shall be unlawful for a person to willfully make a false or fraudulent statement in a verified report or declaration under oath required or authorized by this chapter, or of a material fact or thing contained in a sworn statement concerning the death or disability of an insured for the purpose of procuring payment of a benefit named in the certificater-is-guilty-of-perjury.

3. A-person-who-solicits It shall be unlawful for a person to solicit membership for, or in any manner assists to assist in procuring membership in, a society not licensed to do business in this state-is-guilty-of-a-serious-misdemeanor.

4---A-person-guilty-of-a-willful-violation-of-or-neglect or-refusal-to-comply-with-a-provision-of-this-chapter-for which-a-penalty-is-not-otherwise-prescribed--is-guilty-of-a simple-misdemeanor.

Sec. 35. Section 513C.3, subsection `15, Code Supplement 2003, is amended by adding the following new unnumbered paragraph:

<u>NEW UNNUMBERED PARAGRAPH</u>. For purposes of this subsection, an association policy under chapter 514E is not considered "qualifying existing coverage" or "qualifying previous coverage".

Sec. 36. Section 513C.8, Code 2003, is amended to read as follows:

513C.8 HEALTH BENEFIT PLAN STANDARDS.

The commissioner board of directors of the Iowa comprehensive health insurance association, with the approval of the commissioner, shall adopt by-rule the form and level of coverage of the basic health benefit plan and the standard health benefit plan for the individual market which shall provide benefits substantially similar to these-as-provided for-under-chapter-513B-with-respect-to-small-group-coverage; but-which-shall-be-appropriately-adjusted-at-least-every-three years-to-reflect the current state of the individual market.

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Sec. 37. Section 513C.10, subsection 1, paragraph a, Code Supplement 2003, is amended to read as follows:

a. All persons that provide health benefit plans in this state including insurers providing accident and sickness insurance under chapter 509, 514, or 514A, whether on an individual or group basis; fraternal benefit societies providing hospital, medical, or nursing benefits under chapter 512B; and health maintenance organizations, organized delivery systems, and-all other entities providing health insurance or health benefits subject to state insurance regulation, and all other insurers as designated by the board of directors of the Iowa comprehensive health insurance association with the approval of the commissioner shall be members of the association.

Sec. 38. Section 513C.10, subsection 4, Code Supplement 2003, is amended to read as follows:

4. The board shall develop procedures <u>and assessment</u> <u>mechanisms</u> and make assessments and distributions as required to equalize the individual carrier and organized delivery system gains or losses so that each carrier or organized delivery system receives the same ratio of paid claims to ninety percent of earned premiums as the aggregate of all basic and standard plans insured by all carriers and organized delivery systems in the state.

Sec. 39. <u>New Section</u>. 514A.3A REFUND OF UNEARNED PREMIUM UPON DEATH OF INSURED.

In the event of the death of the insured of any policy covered by this chapter, the insurer, upon receipt of notice of the insured's death supported by a certified copy of a valid death certificate and a request for a pro rata refund by a party entitled to claim such a refund, shall refund the unearned premium prorated to the month of the insured's death. Refund of the premium and termination of the coverage shall be without prejudice to any claim originating prior to the date of the insured's death. The commissioner of insurance shall adopt by rule the minimum amount required for issuance of a refund.

Sec. 40. Section 514E.1, subsection 2, Code Supplement 2003, is amended to read as follows:

2. "Association policy" means an individual or group policy issued by the association that provides the coverage specified-in-section-5148-4 as set forth in the benefit plans adopted by the association's board of directors and approved by the commissioner.

Sec. 41. Section 514E.1, subsections 7, 8, and 12, Code Supplement 2003, are amended by striking the subsections.

Sec. 42. Section 514E.1, subsection 9, Code Supplement 2003, is amended by adding the following new paragraph:

<u>NEW PARAGRAPH</u>. f. Who has been confirmed eligible under the federal Trade Adjustment Act of 2002, Pub. L. No. 107-210, as a recipient under that Act, by the department of workforce development and the federal internal revenue service.

Sec. 43. Section 514E.1, subsection 13, Code Supplement 2003, is amended to read as follows:

13. "Health care services" means services, the coverage of which is authorized under chapter 509, chapter 514, chapter 514A, or chapter 514B as limited by sections-514E-4-and-514E-5 benefit plans established by the association's board of directors, with the approval of the commissioner and includes services for the purposes of preventing, alleviating, curing, or healing human illness, injury or physical disability.

Sec. 44. Section 514E.2, subsection 1, unnumbered paragraph 1, Code Supplement 2003, is amended to read as follows:

The Iowa comprehensive health insurance association is established as a nonprofit corporation. The association shall assure that health-insurancey-as-limited-by-sections-514Er4 and-514Er5y-is benefit plans as authorized in section 514E.1, subsection 2, for an association policy, are made available to each eligible Iowa resident and each federally eligible

individual applying to the association for coverage. The association shall also be responsible for administering the Iowa individual health benefit reinsurance association pursuant to all of the terms and conditions contained in chapter 513C.

Sec. 45. Section 514E.2, subsection 1, paragraph a, Code Supplement 2003, is amended to read as follows:

a. All carriers as-defined-in-section-514Erly-subsection \exists_7 and all organized delivery systems licensed by the director of public health providing health insurance or health care services in Iowa and all other insurers designated by the association's board of directors and approved by the commissioner shall be members of the association.

Sec. 46. Section 514E.2, subsection 6, Code Supplement 2003, is amended by striking the subsection and inserting in lieu thereof the following:

6. Rates for coverages issued by the association shall reflect rating characteristics used in the individual insurance market. The rates for a given classification shall not be more than one hundred fifty percent of the average premium or payment rate for the classification charged by the five carriers with the largest health insurance premium or payment volume in the state during the preceding calendar year. In determining the average rate of the five largest carriers, the rates or payments charged by the carriers shall be actuarially adjusted to determine the rate or payment that would have been charged for benefits similar to those issued by the association.

Sec. 47. Section 514E.4, Code 2003, is amended by striking the section and inserting in lieu thereof the following:

514E.4 ASSOCIATION POLICY -- COVERAGE AND BENEFIT REQUIREMENTS -- DEDUCTIBLES -- COINSURANCE.

The association policy shall pay for medically necessary eligible health care services as established in the benefit plans adopted by the association's board of directors and House File 2489, p. 24

approved by the commissioner. The plans shall provide benefits, deductibles, and coinsurance that reflect the current state of the individual insurance market. The board may modify the benefits provided under the plans to reflect the current state of the individual insurance market with the approval of the commissioner.

Sec. 48. Section 514E.7, subsection 1, Code 2003, is amended by adding the following new unnumbered paragraph:

NEW UNNUMBERED PARAGRAPH. The association shall rescind coverage for an individual who no longer resides in the state. Sec. 49. Section 514E.7, subsection 5, Code 2003, is

amended by adding the following new paragraph:

NEW PARAGRAPH. f. The individual is eligible for Medicare based upon age.

Sec. 50. Section 514E.8, subsection 1, Code 2003, is amended to read as follows:

1. An association policy shall contain provisions under which the association is obligated to renew the contract <u>coverage for an individual</u> until the day on-which the individual in-whose-name-the-contract-is-issued-first becomes eligible for Medicare coveragey-except-that-in-a-family-policy covering-both-husband-and-wifey-the-age-of-the-younger-spouse shall-be-used-as-the-basis-for-meeting-the-durational requirements-of-this-subsection---Howevery-when-the-individual in-whose-name-the-contract-is-issued-becomes-eligible-for Medicare-coveragey-the-person-shall-be-eligible-for-the Medicare-supplement-plan-offered-by-the-association based on age.

Sec. 51. Section 514E.11, Code 2003, is amended to read as follows:

514E.11 NOTICE OF ASSOCIATION POLICY.

Every carrier, including a health maintenance organization subject to chapter 514B and an organized delivery system, authorized to provide health care insurance or coverage for health care services in Iowa, shall provide a notice of the

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availability of coverage by the association to any person who receives a rejection of coverage for health insurance or health care services, or a-notice-to-any-person-who-is informed-that a rate for health insurance or coverage for health care services that will exceed the rate of an association policy, and that person is eligible to apply for health insurance provided by the association. Application for the health insurance shall be on forms prescribed by the association's board of directors and made available to the carriers and organized delivery systems and other entities providing health care insurance or coverage for health care services regulated by the commissioner.

Sec. 52. Section 515.35, subsection 3, paragraph a, subparagraph (2), Code Supplement 2003, is amended by striking the subparagraph and inserting in lieu thereof the following:

(2) A company may loan securities held by it to a brokerdealer registered under the Securities Exchange Act of 1934, a national bank, or a state bank, foreign bank, or trust company that is a member of the United States federal reserve system, and the loaned securities shall continue to be allowable investments of the company.

(a) The loan shall be fully collateralized by cash, cash equivalents, or obligations issued or guaranteed by the United States or an agency or instrumentality of the United States. The company shall take delivery of the collateral either directly or through an authorized custodian.

(b) If the loan is collateralized by cash or cash equivalents, the cash or cash equivalent collateral may be reinvested by the company in either individual securities which are allowable investments of the company or in repurchase agreements fully collateralized by such securities if the company takes delivery of the collateral either directly or through an authorized custodian or a pooled fund comprised of individual securities which are allowable investments of the company. If such reinvestment is made in individual securities or in repurchase agreements, the individual securities or the securities which collateralize the repurchase agreements shall mature in less than two hundred seventy days. If such reinvestment is made in a pooled fund, the average maturity of the securities comprising such pooled fund must be less than two hundred seventy days. Individual securities and securities comprising the pooled fund shall be investment grade.

(c) The loan shall be evidenced by a written agreement which provides all of the following:

(i) That the loan will be fully collateralized at all times during the term of the loan, and that the collateral will be adjusted as necessary each business day during the term of the loan to maintain the required collateralization in the event of market value changes in the loaned securities or collateral.

(ii) If the loan is fully collateralized by cash or cash equivalents, the cash or cash equivalent collateral may be reinvested by the company as provided in subparagraph subdivision (b).

(iii) That the loan may be terminated by the company at any time, and that the borrower shall return the loaned stocks and obligations or equivalent stocks or obligations within five business days after termination.

(iv) That the company has the right to retain the collateral or use the collateral to purchase investments equivalent to the loaned securities if the borrower defaults under the terms of the agreement, and that the borrower remains liable for any losses and expenses incurred by the company due to default that are not covered by the collateral.

(d) Securities loaned pursuant to this subparagraph (2) are not eligible for investment of the company in excess of twenty percent of admitted assets.

Sec. 53. Section 515.35, subsection 4, paragraph a, Code Supplement 2003, is amended by adding the following new unnumbered paragraph:

<u>NEW UNNUMBERED PARAGRAPH</u>. Bonds or other evidences of indebtedness issued, assumed, or guaranteed by the United States of America, or by any agency or instrumentality of the United States of America include investments in an open-end management investment company registered with the federal securities and exchange commission under the federal Investment Company Act of 1940, 15 U.S.C. § 80(a) and operated in accordance with 17 C.F.R. § 270.2a-7, the portfolio of which is limited to the United States government obligations described in this paragraph "a", and which are included in the national association of insurance commissioners' securities valuation office's United States direct obligation-full faith and credit list.

Sec. 54. Section 515.35, subsection 4, paragraph i, subparagraphs (3) and (4), Code Supplement 2003, are amended to read as follows:

(3) A company may invest in the obligations of a foreign government other than Canada or of a corporation incorporated under the laws of a foreign government other than Canada. Any such governmental obligation must be valid, legally authorized and issued, and on the date of acquisition have predominantly investment qualities and characteristics as provided by rule. Any such corporate obligation must on the date of acquisition have investment qualities and characteristics, and must not have speculative elements which are predominant, as provided by rule. A company shall not invest more than two percent of its admitted assets in the obligations of a foreign government other than Canada and the United Kingdom. Investments in obligations of the United Kingdom are not eligible in excess of four percent of admitted assets. A company shall not invest more than two percent of its admitted assets in the obligations of a corporation incorporated under the laws of a foreign government other than a corporation incorporated under the laws of Canada.

(4) A company shall not invest more than ten <u>twenty</u> percent of its admitted assets in foreign investments pursuant to this paragraph.

Sec. 55. Section 515.120, Code 2003, is amended to read as follows:

515.120 VIOLATIONS.

Any <u>It shall be unlawful for any</u> officer, manager, or agent of any insurance company or association who, with knowledge that it is doing business in an unlawful manner, or is insolvent, solicits to solicit or receive applications for insurance with said the company or association, or-receives applications-therefor, or does to do any other act or thing towards toward procuring or receiving any new business for such company or association,-shall-be-guilty-of-a-serious misdemeanor.

Sec. 56. Section 515.121, Code 2003, is amended to read as follows:

515.121 OFFICERS PUNISHED.

Any It shall be unlawful for any of the following to fail to comply with or to violate any of the requirements of this chapter:

<u>1. The</u> president, secretary, or other officer of any company organized under the laws of this state₇-or-any.

2. Any officer or person doing or attempting to do business in this state for any insurance company organized either within or without this stater-failing-to-comply-with any-of-the-requirements-of-this-chapter,-or-violating-any-of the-provisions-thereof,-shall-be-guilty-of-a-simple misdemeanor.

Sec. 57. Section 515.140, Code 2003, is amended to read as follows:

515.140 VIOLATIONS -- STATUS OF POLICY.

Any It shall be unlawful for any insurance company, its officers or agents, or either of them, violating to violate any of the provisions of section 515.138, by issuing,

delivering, or offering to issue or deliver any policy of fire insurance on property in this state other or-different-from than the standard formy-herein as provided fory-shall-be guilty-of-a-simple-misdemeanor in statute, but any policy so issued or delivered shall, nevertheless, be binding upon the company issuing or delivering the samey-and-such policy. The company shall, until the payment of such-fine a penalty assessed by order after hearing, be disqualified from doing any insurance business in this state;-but-any-policy-so-issued or-delivered-shall;-nevertheless;-be-binding-upon-the-company issuing-or-delivering-the-same.

Sec. 58. Section 518A.41, Code 2003, is amended to read as follows:

518A.41 INSURANCE PRODUCERS TO BE LICENSED.

No <u>A</u> person or corporation shall <u>not</u> solicit any <u>an</u> application for insurance for any association in this state without having procured from the commissioner of insurance a license authorizing the person or corporation to act as an insurance producer. Violation-of-this-provision-shall constitute-a-serious-misdemeanor

Sec. 59. Section 520.14, Code 2003, is amended to read as follows:

520.14 VIOLATIONS -- EXCEPTIONS.

Any It shall be unlawful for an attorney who-shall to exchange any contracts of insurance of the kind and character specified in this chapter, or any for an attorney or representative of such the attorney,-who-shall to solicit or negotiate any applications for the same without the attorney having first complied with the foregoing provisions,-shall-be deemed-guilty-of-a-simple-misdemeanor. For the purpose of organization and upon issuance of permit by the commissioner of insurance, powers of attorney and applications for such contracts may be solicited without compliance with the provisions of this chapter, but no an attorney, agent, or other person shall not make any such contracts of indemnity until all of the provisions of this chapter shall have been complied with.

Sec. 60. Section 522B.11, subsection 1, Code 2003, is amended by adding the following new paragraph:

<u>NEW PARAGRAPH</u>. q. Is the subject of an order of the securities administrator of this state or any other state, province, district, or territory, denying, suspending, revoking, or otherwise taking action against a registration as a broker-dealer, agent, investment adviser, or investment adviser representative.

Sec. 61. Section 522B.11, subsection 5, Code 2003, is amended to read as follows:

5. The commissioner <u>may conduct an investigation of any</u> <u>suspected violation of this chapter pursuant to section 507B.6</u> <u>and may enforce the provisions and impose any penalty or</u> remedy authorized by this chapter and chapter 507B against any person who is under investigation for, or charged with, a violation of either chapter even if the person's license has been surrendered or has lapsed by operation of law.

Sec. 62. Section 522B.11, Code 2003, is amended by adding the following new subsection:

<u>NEW SUBSECTION</u>. 6. a. In order to assure a free flow of information for accomplishing the purposes of this section, all complaint files, investigation files, other investigation reports, and other investigative information in the possession of the commissioner or the commissioner's employees or agents that relates to licensee discipline are privileged and confidential, and are not subject to discovery, subpoena, or other means of legal compulsion for their release to a person other than the licensee, and are not admissible in evidence in a judicial or administrative proceeding other than the proceeding involving licensee discipline. A final written decision of the commissioner in a disciplinary proceeding is a public record.

b. Investigative information in the possession of the commissioner or the commissioner's employees or agents that relates to licensee discipline may be disclosed, in the commissioner's discretion, to appropriate licensing authorities within this state, the appropriate licensing authority in another state, the District of Columbia, or a territory or country in which the licensee is licensed or has applied for a license.

c. If the investigative information in the possession of the commissioner or the commissioner's employees or agents indicates a crime has been committed, the information shall be reported to the proper law enforcement agency.

d. Pursuant to the provisions of section 17A.19, subsection 6, upon an appeal by the licensee, the commissioner shall transmit the entire record of the contested case to the reviewing court.

e. Notwithstanding the provisions of section 17A.19, subsection 6, if a waiver of privilege has been involuntary and evidence has been received at a disciplinary hearing, the court shall issue an order to withhold the identity of the individual whose privilege was waived.

Sec. 63. NEW SECTION. 522B.16A DUTIES OF LICENSEES.

1. An insurance producer has a continuing duty and obligation to keep, at the insurance producer's place of business, usual and customary records pertaining to transactions undertaken by the insurance producer. All such records shall be kept available and open for inspection by the commissioner or the commissioner's representative at any time during regular business hours, provided that the commissioner or the commissioner's representative is not entitled to inspect any records prepared in anticipation of litigation or that are subject to any privilege recognized in chapter 622. Such records shall be maintained for a minimum of three years following the completion of an insurance transaction. 2. An insurance producer who willfully fails to comply with this section commits a violation of this chapter and is subject to sanctions under section 522B.11.

Sec. 64. Section 523A.401, subsection 6, paragraph c, Code 2003, is amended to read as follows:

c. The insurance policy shall not allow-for-contesting coverage, be contestable, or limit death benefits in the case of suicide, with respect to that portion of the face amount of the policy that is required by paragraph "b". The policy shall not refer to physical examination, or otherwise operate as an exclusion, limitation, or condition other than requiring submission of proof of death or surrender of policy at the time the prepaid purchase agreement is funded, matures, or is canceled, as the case may be.

Sec. 65. Section 523A.402, subsection 6, paragraph c, Code 2003, is amended to read as follows:

c. The annuity shall not allow-for-contesting-coverage, <u>be</u> <u>contestable</u>, or limit death benefits in the case of suicide, with respect to that portion of the face amount of the annuity which is required by paragraph "b". The annuity shall refer to physical examination, or otherwise operate as an exclusion, limitation, or condition other than requiring submission of proof of death or surrender of the annuity at the time the prepaid purchase agreement is funded, matures, or is canceled, as the case may be.

Sec. 66. Section 523A.501, subsection 6, Code 2003, is amended to read as follows:

6. If no denial order is in effect and no proceeding is pending under section 523A.503, the application becomes effective at noon of the thirtieth day after a completed application or an amendment completing the application is filed, unless waived by the applicant. The commissioner may specify an earlier effective date. Automatic effectiveness under this subsection shall not be deemed approval of the application. If the commissioner does not grant the permit,

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the commissioner shall notify the person in writing of the reasons for the denial. The-permit-shall-disclose-on-its-face the-permit-holder's-employer-or-the-establishment-on-whose behalf-the-applicant-will-be-making-or-attempting-to-make salesy-the-permit-numbery-and-the-expiration-dater

Sec. 67. Section 523A.502, subsection 7, Code 2003, is amended to read as follows:

7. A sales permit is not assignable or transferable. A permit holder selling all or part of a business shall cancel the permit establishment's sales permits and the purchaser shall apply for a new permit sales permits in the purchaser's name within thirty days of the sale.

Sec. 68. Section 523A.503, subsection 1, unnumbered paragraph 1, Code 2003, is amended to read as follows:

The commissioner may, pursuant to chapter 17A, deny any permit application, or immediately suspend, or revoke, or otherwise impose disciplinary action related to any permit issued under this chapter for several reasons, including but not limited to:

Sec. 69. Section 523A.503, subsection 3, Code 2003, is amended to read as follows:

3. Except as provided in subsection 2, a permit shall not be revoked, or suspended, or otherwise be the subject of <u>disciplinary action</u> except after notice and hearing under chapter 17A.

Sec. 70. Section 523A.503, Code 2003, is amended by adding the following new subsection:

<u>NEW SUBSECTION</u>. 6. The commissioner may impose a civil penalty in an amount not exceeding ten thousand dollars per violation against any person violating this chapter. Each day of a continuing violation constitutes a separate offense.

Sec. 71. Sections 506.7, 507B.11, 508.27, 511.18, 514.6, 514A.9, 514B.29, 515.132, 515.145, and 521.15, Code 2003, are repealed.

Sec. 72. Sections 514.6, 514E.5, and 514E.6, Code 2003, are repealed.

CHRISTOPHER C. RANTS Speaker of the House

JEFFREY M. LAMBERTI President of the Senate

I hereby certify that this bill originated in the House and is known as House File 2489, Eightieth General Assembly.

, 2004

MARGARET THO**MSON** Chief Clerk of the Hou**se**

Approved

THOMAS J. VILSACK Governor