WEST VIRGINIA LEGISLATURE

REGULAR SESSION, 1957

ENROLLED

HOUSE BILL No. 126_

(By Mr. England Avhaly)

PASSED Much 6 1957
In Effect fam 1, 1958 Passage

ENROLLED

House Bill No. 126

(By Mr. England and Mr. Whaley)

[Passed March 6, 1957; in effect January 1, 1958.]

AN ACT to repeal article five and article thirteen of chapter thirty-one, and to amend and reenact chapter thirty-three of the code of West Virginia, one thousand nine hundred thirty-one, as amended, all relating to insurance and prescribing penalties for the violation thereof.

Be it enacted by the Legislature of West Virginia:

That article five and article thirteen of chapter thirty-one of the code of West Virginia, one thousand nine hundred thirtyone, as amended, be repealed and that chapter thirty-three of the code of West Virginia, one thousand nine hundred thirtyone, as amended, be amended and reenacted to read as follows:

CHAPTER 33. INSURANCE

Article 1. Definitions

- Section 1. *Insurance*.—Insurance is a contract whereby
- 2 one undertakes to indemnify another or to pay a specified
- 3 amount upon determinable contingencies.
- Sec. 2. Insurer.—Insurer is every person engaged in the
- 2 business of making contracts of insurance.
 - Sec. 3. Person.—Person includes an individual, com-
- 2 pany, insurer, association, organization, society, reciprocal,
- 3 partnership, syndicate, business trust, corporation or any
- 4 other legal entity.
- Sec. 4. Transacting Insurance.—Transacting insurance
- 2 includes solicitation and inducement, preliminary nego-
- 3 tiations, effecting a contract of insurance and transaction
- 4 of matters subsequent to effecting the contract and arising
- 5 out of it.

- Sec. 5. *Commissioner*.—Commissioner means the insur-2 ance commissioner of West Virginia.
- Sec. 6. *Domestic Insurer*.—A domestic insurer is an in-2 surer formed under the laws of West Virginia.
- Sec. 7. Foreign Insurer.—A foreign insurer is an insurer formed under the laws of the United States or of another state of the United States.
- Sec. 8. Alien Insurer.—An alien insurer is an insurer 2 formed under the laws of a country other than the United 3 States.
- Sec. 9. State; United States.—State means any state, 2 commonwealth, territory, or district of the United States. 3 United States includes the states, territories, districts and 4 commonwealths thereof.
- Sec. 10. Kinds of Insurance—Life; Accident and Sick-2 ness; Fire; Marine; Casualty; Surety.—The following 3 definitions of kinds of insurance are not mutually exclu-4 sive and, if reasonably adaptable thereto, a particular 5 coverage may be included under one or more of such 6 definitions:
- 7 (a) Life Insurance—Life insurance is insurance on hu8 man lives including endowment benefits, additional bene9 fits in the event of death or dismemberment by accident 10 or accidental means, additional benefits for disability, and 11 annuities.
- 12 (b) Accident and Sickness—Accident and sickness in-13 surance is insurance against bodily injury, disability or 14 death by accident or accidental means, or the expense 15 thereof, or against disability or expense resulting from 16 sickness, and insurance relating thereto.
- 17 (c) Fire—Fire insurance is insurance on real or per18 sonal property of every kind and interest therein, against
 19 loss or damage from any or all hazard or cause, and
 20 against loss consequental upon such loss or damage, other
 21 than noncontractual liability for any such loss or damage.
 22 Fire insurance shall also include miscellaneous insurance
 23 as defined in paragraph (e) (11) of this section.
- 24 (d) Marine—Marine insurance is insurance:

9

- (1) against any and all kinds of loss or damage to vessels, craft, aircraft, cars, automobiles and vehicles of every kind, as well as all goods, freight, cargoes, merchandise, effects, disbursements, profits, moneys, bullion, precious stones, securities, choses in action, evidences of debt, valuable papers, bottomry and respondentia interests and all other kinds of property and intersts therein, in respect to, appertaining to or in connection with any and all risks or perils of navigation, transit, or transportation, including war risks, on or under any seas or other waters, on land (above or below ground), or in the air, or while being assembled, packed, crated, baled, compressed or similarly prepared for shipment or while awaiting the same or during any delays, storage, transshipment, or reshipment incident thereto, including marine builders' risks and all personal property floater risks;
- (2) against any and all kinds of loss or damage to person or to property in connection with or appertaining to a marine, inland marine, transit or transportation insurance, including liability for loss of or damage to either, arising out of or in connection with the construction, repair, operation, maintenance or use of the subject matter of such insurance (but not including life insurance or surety bonds nor insurance against loss by reason of bodily injury to the person arising out of the ownership, maintenance or use of automobiles);
- (3) against any and all kinds of loss or damage to precious stones, jewels, jewelry, gold, silver and other precious metals, whether used in business or trade or otherwise and whether the same be in course of transportation or otherwise;
- (4) against any and all kinds of loss or damage to bridges, tunnels and other instrumentalities of transportation and communication (excluding buildings, their furniture and furnishings, fixed contents and supplies held in storage) unless fire, windstorm, sprinkler leakage, hail, explosion, earthquake, riot or civil commotion or any or all of them are the only hazards to be covered;
- (5) against any and all kinds of loss or damage to piers, wharves, docks and slips, excluding the risks of

69

70

71

72

80

81

82

83

84 85

86

87

89

91

93

94 95

96

fire, windstorm, sprinkler leakage, hail, explosion, earth-67 quake, riot and civil commotion and each of them;

- (6) against any and all kinds of loss or damage to other aids to navigation and transportation, including dry docks and marine railways, dams and appurtenant facilities for control of waterways;
- (7) marine protection and indemnity insurance, which 73 is insurance against, or against legal liability of the insured for, loss, damage or expense arising out of, or incident to, the ownership, operation, chartering, maintenance, use, repair or construction of any vessel, craft or instrumentality in use in ocean or inland waterways, including liability of the insured for personal injury, illness or death or for loss of or damage to the property of another person.
 - (e) Casualty—Casualty insurance includes:
- (1) Vehicle insurance, which is insurance against loss of or damage to any land vehicle or aircraft or any draft or riding animal or to property while contained therein or thereon or being loaded therein or therefrom, from any hazard or cause, and against any loss, liability or expense resulting from or incident to ownership, maintenance or use of any such vehicle, aircraft or animal; 88 together with insurance against accidental death or accidental injury to individuals, including the named insured, 90 while in, entering, alighting from, adjusting, repairing or 92 cranking, or caused by being struck by any vehicle, aircraft or draft or riding animal, if such insurance is issued as a part of insurance on the vehicle, aircraft or draft or riding animal.
- (2) Liability insurance, which is insurance against 97 legal liability for the death, injury, or disability of any 98 human being, or for damage to property; and provision 99 for medical, hospital, surgical, disability benefits to injured persons and funeral and death benefits to depend-100 101 ents, beneficiaries or personal representatives of persons 102 killed, irrespective of legal liability of the insured, when 103 issued as an incidental coverage with or supplemental to 104 liability insurance.
- 105 (3) Burglary and theft insurance, which is insurance 106 against loss or damage by burglary, theft, larceny, rob-

bery, forgery, fraud, vandalism, malicious mischief, con-fiscation, or wrongful coversion, disposal, or concealment, or from any attempt at any of the foregoing, including supplmental coverages for medical, hospital, surgical, and funeral benefits sustained by the named insured or other person as a result of bodily injury during the commission of a burglary, robbery, or theft by another; also insurance against loss of or damage to moneys, coins, bullion, securities, notes, drafts, acceptances, or any other valuable papers and documents, resulting from any cause.

- (4) Personal property floater insurance, which is insurance upon personal effects against loss or damage from any cause.
- (5) Glass insurance, which is insurance against loss or damage to glass, including its lettering, ornamentation, and fittings.
- (6) Boiler and machinery insurance, which is insurance against any liability and loss or damage to property or interest resulting from accidents to or explosion of boilers, pipes, pressure containers, machinery, or apparatus, and to make inspection of and issue certificates of inspection upon boilers, machinery, and apparatus of any kind, whether or not insured.
- (7) Leakage and fire extinguishing equipment insurance, which is insurance against loss or damage to any property or interest caused by the breakage or leakage of sprinklers, hoses, pumps, and other fire extinguishing equipment or apparatus, water mains, pipes and containers, or by water entering through leaks or openings in buildings, and insurance against loss or damage to such sprinklers, hoses, pumps and other fire extinguishing equipment or apparatus.
- (8) Credit insurance, which is insurance against loss or damage resulting from failure of debtors to pay their obligations to the insured.
- 142 (9) Malpractice insurance, which is insurance against 143 legal liability of the insured, and against loss, damage, or 144 expense incidental to a claim of such liability, and includ-145 ing medical, hospital, surgical, and funeral benefits to 146 injured persons, irrespective of legal liability of the in-147 sured, arising out of the death, injury, or disablement of

any person, or arising out of damage to the economic interest of any person, as the result of negligence in rendering expert, fiduciary, or professional service.

- (10) Entertainment insurance, which is insurance indemnifying the producer of any motion picture, television, radio, theatrical, sport, spectacle, entertainment, or similar production, event, or exhibition against loss from interruption, postponement, or cancellation thereof due to death, accidental injury, or sickness of performers, participants, directors, or other principals.
- (11) Miscellaneous insurance, which is insurance against any other kind of loss, damage, or liability properly a subject of insurance and not within any other kind of insurance as defined in this chapter, if such insurance is not disapproved by the commissioner as being contrary to law or public policy.
 - (f) Surety—Surety insurance includes:
- (1) Fidelity insurance, which is insurance guaranteeing the fidelity of persons holding positions of public or private trust.
- (2) Insurance guaranteeing the performance of contracts, other than insurance policies, and guaranteeing and executing bonds, undertakings, and contracts of suretyship.
- (3) Insurance indemnifying banks, bankers, brokers, financial or monied corporations or associations against loss, resulting from any cause, of bills of exchange, notes, bonds, securities, evidences of debt, deeds, mortgages, warehouse receipts or other valuable papers, documents, money, precious metals and articles made therefrom, jewelry, watches, necklaces, bracelets, gems, precious and semi-precious stones, including any loss while they are being transported in armored motor vehicles, or by messenger, but not including any other risks of transportation or navigation, and also insurance against loss or damage to such an insured's premises or to his furnishings, fixtures, equipment, safes and vaults therein, caused by burglary, robbery, theft, vandalism or malicious mischief, or any attempt to commit such crimes.
- 187 (4) Title insurance, which is insurance of owners of 188 property or others having an interest therein, or liens or

- 189 encumbrances thereon, against loss by encumbrance, de-190 fective title, invalidity or adverse claim to title.
 - Sec. 11. Reinsurance.—Reinsurance is a contract of in-2 demnity against liability by which an insurer procures
 - 3 another insurer to insure it against loss or liability by
 - 4 reason of the original insurance.
 - Sec. 12. Agent.—An insurance agent is an individual
 - 2 appointed by an insurer to solicit, negotiate, effect or
 - 3 countersign insurance contracts in its behalf.
 - Sec. 13. Solicitor.—An insurance solicitor is an indi-
 - 2 vidual appointed and authorized by an agent to solicit
 - 3 and receive applications for insurance as a representative
 - 4 of such agent.
 - Sec. 14. Broker.—A broker is an individual who for
 - 2 compensation in any manner solicits, negotiates or pro-
 - 3 cures insurance or the renewal or continuance thereof on
 - 4 behalf of insureds or prospective insureds.
 - Sec. 15. Reciprocal Insurance.—Reciprocal insurance is
 - 2 insurance resulting from an inter-exchange among per-
 - 3 sons known as subscribers of reciprocal agreements of
 - 4 indemnity, the inter-exchange being effected through an
 - 5 attorney-in-fact common to all such persons, and the
 - 6 group of such subscribers being a reciprocal insurer.
 - Sec. 16. Policy.—Policy means the contract effecting
 - 2 insurance, or the certificate thereof, by whatever name
 - 3 called, and includes all clauses, riders, endorsements and
 - 4 papers attached thereto and a part thereof.
 - Sec. 17. Premium.—Premium is the consideration for 2 insurance, by whatever name called.

 - Sec. 18. Stock Insurer.—Stock insurer is an incorporated
 - 2 insurer with capital divided into shares and owned by its
 - 3 shareholders.
 - Sec. 19. Mutual Insurer.—Mutual Insurer is an incorpor-
 - 2 ated insurer without permanent capital stock and the
- 3 governing body of which is elected by the policyholders.

Article 2. Insurance Commissioner

Section 1. Office of Insurance Commissioner; Appoint-2 ment, Qualification and Term.—There is hereby continued

3 in effect the state agency heretofore created and known as 4 the "Insurance Commissioner of West Virginia" which agency shall consist of an insurance commissioner and such employees as may be authorized by law. The term of the present commissioner shall continue until July first, 8 one thousand nine hundred fifty-nine. All appointments 9 to said office made thereafter shall be for a period of six 10 years, except that in case of a vacancy the appointment 11 shall be made to fill the unexpired term. The commissioner 12 shall be a citizen and resident of this State and shall be 13 appointed by the governor, by and with the advice and 14 consent of the senate. Before taking the oath of office 15 the commissioner shall sever all connections either direct 16 or indirect with any and all insurers subject to his super-17 vision and with any person representing any such insurer, 18 except as a policyholder or claimant.

Sec. 2. Commissioner's Compensation, Expenses and Assistants.—The commissioner shall receive an annual salary of at least nine thousand dollars and actual expenses incurred in the performance of official business, which compensation shall be in full for all services. The office of the commissioner shall be maintained in the capitol or other suitable place in Charleston. The commissioner may employ such persons and incur such expenses as may be necessary in the discharge of his duties and shall fix the compensation of such employees, but such compensation shall not exceed the appropriation therefor. All compensation for salaries and expenses of the commissioner and his employees shall be paid monthly out of the state treasury by requisition upon the auditor, properly certified by the commissioner.

Sec. 3. General Duties of Commissioner.—The commissioner shall enforce the provisions of this chapter and perform the duties required of him thereunder; shall affix his official seal to all documents and papers required to be filed in other states by domestic insurers and to other papers when an official seal is required; and shall on or before the tenth day of each month pay into the state treasury all fees and monies which he has received during the preceding calendar month.

Sec. 4. Authority to Subpoena Witnesses and Records.

The commissioner, or any person conducting a hearing or investigation by his authority, shall have power to take depositions, subpoena witnesses and compel their attendance, administer oaths, examine any person under oath, compel any person to subscribe to his testimony after it has been correctly reduced to writing and require the production of any books, papers, records, correspondence or other documents which he deems relevant to the inquiry.

Sec. 5. Witness Fees.—No person shall be excused from attending and testifying in obedience to a subpoena issued hereunder on the ground of failure of tender or payment of a witness fee or mileage fee unless the witness makes demand for such payment as a condition precedent to the giving of testimony or the production of documents required by the subpoena, and unless such payment is not thereupon made. No insurer, agent, broker, solicitor or 8 9 other person subject to the provisions of this chapter whose conduct, condition or practices are being investi-10 gated, and no officer, director or employee of any such 11 person, shall be entitled to witness or mileage fees. In 12 13 the event that witness or mileage fees are demanded and paid, the amount of same shall be determined as ten 14 dollars for each day of attendance and ten cents per mile 15 16 for each mile necessarily traveled to the place of attend-17 ance, and the same for returning. The sum to which a 18 witness is entitled shall be paid out of the treasury in any case in which the attendance is for the commissioner. In 19 20 all other cases, it shall be paid by the person at whose 21 instance the summons is issued.

Sec. 6. Service of Subpoena; Compelling Compliance.—

The subpoena shall be served in the manner as if issued from a circuit court unless otherwise provided. In case a person refuses to obey any subpoena issued hereunder or to testify with respect to any matter concerning which he may be lawfully interrogated, the commissioner or his representative may invoke the aid of any circuit court in order that the testimony or evidence be produced. Upon proper showing, such court shall issue a subpoena or order

10 requiring such person to appear before the commissioner

11 or his representative and produce all evidence and give all

12 testimony touching the matter in question. A person fail-

13 ing to obey such order may be punished by such court

14 as for contempt.

Sec. 7. Immunity of Witness.—If any person shall ask to 2 be excused from attending and testifying or from pro-3 ducing any books, papers, records, correspondence or other documents at any hearing conducted pursuant to this chapter or in any cause or proceeding instituted by the commissioner pursuant to this chapter on the ground that the testimony or evidence required of him may tend to incriminate him or subject him to a penalty or forfeiture, and shall notwithstanding be directed by the commissioner to give such testimony or produce such evidence, he must 10 none the less comply with such direction, but he shall not 11 thereafter be prosecuted or sujected to any penalty or 12 13 forfeiture for or on account of any matter or thing concerning which he may testify or produce evidence, pursuant 14 thereto, and no testimony so given or evidence produced 15 shall be received against him upon any criminal action, 16 investigation or proceeding: Provided, however, That no 17 18 such individual so testifying shall be exempt from prosecution or punishment for any perjury or false swearing, com-19 20 mitted by him while so testifying and the testimony or 21 evidence so given or produced shall be admissible against 22 him upon any criminal action, investigation or proceeding 23 concerning such perjury or false swearing, nor shall he be 24 exempt from the refusal, revocation or suspension of any 25 license, permission or authority conferred, or to be conferred, pursuant to this chapter. Any such individual may 26 27 execute, acknowledge and file in the office of the com-28 missioner a statement expressly waiving such immunity or privilege in respect to any transaction, matter or thing 29 specified in such statement and thereupon the testimony 30 of such person or such evidence in relation to such trans-31 action, matter or thing may be received or produced before 32 any judge or justice, court, tribunal, grand jury or other-33 wise, and if so received or produced such individual shall

35 not be entitled to any immunity or privilege on account of any testimony he may so give or evidence so produced.

Sec. 8. Records of Insureds.—Upon request of the commissioner any person in West Virginia who is the insured under any policy issued by an insurer upon a subject of insurance resident, located or to be performed in West Vir-5 ginia, shall produce for examination all policies and other documents evidencing and relating to such insurance, and 6 shall disclose the amount of the gross premiums paid or 8 agreed to be paid for the insurance, all persons through 9 whom such insurance was procured or who participated in 10 the transaction in any manner, and such other information 11 relative to the placing of such insurance as may reason-12 ably be required.

Sec. 9. Examination of Insurers and Others.—(a) The 2 commissioner or his accredited examiners shall, at least once each three years, visit each domestic insurer and 4 thoroughly examine its financial condition and methods of doing business and ascertain whether it has complied with 5 6 all the laws and regulations of this State; all expenses of such examination to be borne by such insurer. The commissioner at such times as he deems necessary may cause 8 an examination to be conducted of any foreign or alien insurer licensed to transact insurance in this State; all 10 expenses of such examination to be borne by such insurer. 11 12 The commissioner shall make a full written report of each 13 such examination of an insurer, certified to by the com-14 missioner or the examiner in charge of such examination. 15 The commissioner shall furnish a copy of the report to 16 the insurer examined not less than ten days prior to filing 17 the same in his office. If such insurer so requests in writing, within such ten-day period, the commissioner 18 19 shall consider the objections of such insurer to the report 20 as proposed, and shall not so file the report until after 21 such modifications, if any, have been made therein as the 22 commissioner deems proper. The report, when filed, shall 23 be admissible in evidence in any action or proceeding 24 brought by the commissioner against the insurer examined, or its officers or agents, and shall be prima facie 25 26 evidence of the facts stated therein. The commissioner

43 44

45

46

47

50

52

or his examiners may at any time testify and offer other proper evidence as to information secured during the 29 course of an examination, whether or not a written report 30 of the examination has at that time been either made, 31 served, or filed in the commissioner's office. The exami-32 nation of an alien insurer shall be limited to its United 33 States business. In lieu of making his own examination, 34 the commissioner may accept a full report of the last recent examination of a foreign or alien insurer, certified to by the insurance supervisory official of the state of domicile of a foreign insurer or the state of entry into the United States of an alien insurer.

- (b) The commissioner may also cause to be examined 40 at such times as he deems necessary the books, records, papers, documents, correspondence and methods of doing business of any agent, broker or solicitor licensed by this
 - (c) For such purposes the commissioner, his deputies and employees shall have free access to all books, records, papers, documents and correspondence of all such insurers (whether domestic, foreign or alien), agents, brokers and solicitors wherever such books, records, papers, documents and records are situate.
- (d) The commissioner may revoke the license of any 51 such insurer, agent, broker or solicitor who refuses to submit to such examination.
- 53 (e) The commissioner may withhold from public in-54 spection any examination or investigation report for so 55 long as he deems prudent.
- Sec. 10. Rules and Regulations.—The commissioner is 2 authorized to promulgate and adopt such rules and regu-3 lations relating to insurance as are necessary to discharge 4 his duties and exercise his powers and to effectuate the 5 provisions of this chapter and to protect and safeguard the 6 interests of policyholders and the public of this State.
- Sec. 11. Enforcement of Orders; Revocation; Court 2 Action.—In addition to examinations and investigations 3 expressly authorized by this chapter, the commissioner 4 may conduct such examinations and investigation of in-5 surance matters as he may deem proper to determine

6 whether any person has violated any provision of this chapter or to secure informatioon useful in the lawful administration of his duties. If the commissioner deter-9 mines, after notice and hearing, that any person is transacting insurance in an illegal, improper or unjust manner 10 11 or is failing to pay losses and obligations when they become due, excepting claims to which there is a substan-12 13 tial defense, he may order such person to discontinue such 14 illegal, improper or unjust manner of transacting insurance or may order such person to adjust and pay his obli-15 16 gations as they become due. If any person shall fail or 17 refuse within twenty days after notice to obey such order, the commissioner may revoke any license issued by him 19 and held by such person and in addition may apply to the 20 circuit court, or the judge thereof in vacation, having 21 jurisdiction for an injunction or the appointment of a receiver, or for both, and such court or judge may enforce 22 such order of the commissioner by injunction or by ap-23 pointment of a receiver to take charge of the affairs and property of such person, or both, and may make such 26 further orders as may be necessary and proper to effectu-27 ate such injunction or receivership.

Sec. 12. Notice.—Whenever under the provisions of this chapter the commissioner is required to give notice to any person the service of such notice shall be deemed proper and effective with regard to any licensee of the commissioner (including insurers, agents, brokers and solicitors) 6 or any employee of such licensee when such notice directed 7 to such person to be notified shall have been deposited in the United States mails, postage prepaid, addressed to 8 9 the principal place of business or residence of such licensee 10 as last of record in the commissioner's office. The verified 11 return of the person depositing such notice in the mails 12 as to the fact of such mailing shall be proof of service. 13 Notice to a person other than a licensee or employee of a licensee shall be served in the manner provided by law 14 15 for service of process in civil actions and such manner of service may also be used and shall constitute effective 16 notice to a licensee or employee of a licensee.

Sec. 13. Hearings.—The commissioner may call and hold

hearings for any purpose deemed necessary by him for the performance of his duties. He shall hold hearings when required by the provisions of this chapter or upon a written demand therefor by a person aggrieved by any act or failure to act by the commissioner or by any rule, regulation or order of the commissioner. Such demand shall specify the grounds to be relied upon as a basis for the relief to be requested at such hearing and such hearing shall be held within forty-five days of receipt by the com-10 11 missioner of written demand therefor, unless postponed to a later date by mutual agreement. The commissioner 12 may in his discretion stay the effect of any order, rule or regulation pending hearing. The commissioner shall give 15 at least fifteen days notice of the time, place and matters to be considered at a hearing to all persons directly affect-17 ed by such hearing. The commissioner shall allow any person directly affected by the hearing to appear in person 18 and by counsel, to be present during the giving of all 19 20 evidence, to have a reasonable opportunity to inspect all 21 documentary evidence, to examine witnesses and present relevant evidence, and to have subpoenas issued by the 22 23 commissioner to compel attendance of witnesses and pro-24 duction of evidence in his behalf. Formal rules of pleading or evidence need not be observed at any hearing. Upon 26 written request seasonably made by a person directly 27 affected by a hearing, and at such person's expense, or 28 upon his own motion and expense, the commissioner shall 29 cause a full stenographic record of the hearing to be made 30 by a competent reporter. If further requested in writing by a person directly affected by such hearing, the com-31 missioner shall cause such record to be transcribed and 33 made a part of the official record of the hearing, at the 34 expense of such person or may do so at his own motion 35 and expense, and shall furnish a copy thereof to any 36 party directly affected by such hearing at the request and 37 expense of such party. Within forty-five days after com-38 pletion of a hearing, unless the time be extended by mutual consent, the commissioner shall enter an order containing his findings of fact and conclusions upon the 40 41 subject matter of such hearing. Such order may affirm, modify or nullify action theretofore taken or may pre43 scribe new action within the scope of the notice of hearing, 44 and a copy thereof shall be mailed to all persons directly affected by such hearing. In the discretion of the com-45 46 missioner a rehearing may be granted to any party to a 47 hearing upon written request filed with the commissioner 48 within thirty days of the mailing of such order. Costs of 49 any hearing or rehearing for the attendance of witnesses, service of subpoenas, and stenographic record and trans-50 script may be taxed by the commissioner to any party or 51 52 parties against whom he shall find and may be recovered 53 in a civil action.

Sec. 14. Judicial Review.—An appeal from the commissioner shall be taken only from an order entered after hearing or an order refusing a hearing. Any person aggrieved by any such order may, within thirty days after the order has been mailed or delivered to the persons entitled to receive the same, or within thirty days after an order denying rehearing has been so mailed or delivered, appeal to the circuit court of Kanawha County, or the 8 judge thereof in vacation, by presenting a written petition to such court or judge and mailing a copy thereof to the 10 commissioner. Upon the receipt of such copy the com-11 12 missioner shall forthwith transmit to the clerk of such 13 court the record of the proceedings before him. The court 14 or judge shall fix a time for hearing upon said petition at 15 his earliest convenience. Notice in writing of the time and place of said hearing shall be given by petitioner to the 16 17 commissioner at least fifteen days prior thereto. The court 18 or judge shall, without a jury, hear and determine the 19 matter upon the record of proceedings before the com-20 missioner, except that for good cause shown the court may 21 permit the introduction of additional evidence, and may 22 enter an order revising or reversing the order of the com-23 missioner, or may affirm such order, or remand the action to the commissioner for further proceedings. Pending 24 such appeal the order of the commissioner shall be in full 25 26 force and effect until final determination, unless the commissioner shall in his discretion have stayed the effect of 27 28 his order pending final determination of the appeal or unless the court or judge thereof before whom the appeal

- 30 is pending shall enter an order staying the commissioner's 31 order until final determination. The judgment of the
- 32 circuit court may be reviewed upon appeal by the supreme
- 33 court of appeals in the same manner as other civil cases 34 to which the State is a party.
- Sec. 15. Report by Commissioner.—The commissioner shall annually, on or before the first day of November, 2 3 submit to the governor a report for the previous calendar 4 year of his official acts, and of the condition of insurers 5 doing business in this State, with a condensed statement 6 of their reports to him, abstracts of all accounts rendered 7 to any court by receivers of insolvent insurers, abstracts 8 of reports to the commissioner by such receivers, together
- 9 with a statement of all fees and taxes received from
- 10 insurers and other licensees and paid by him into the state
- 11 treasury.

Article 3. Licensing, Fees and Taxation of Insurers

- Section 1. License Required.—(a) No person shall act as an insurer and no insurer shall transact insurance in 3 West Virginia except as authorized by a valid license 4 issued by the commissioner, except as to such transactions 5 as are expressly otherwise provided for in this chapter.
- (b) No such license shall be required for an insurer, 6 7 formerly holding a valid license, to enable it to investigate and settle losses under its policies lawfully written in 9 West Virginia while such license was in effect, or to liqui-10 date such assets and liabilities of the insurer (other than 11 the collection of new premiums) as may have resulted 12 from its former authorized operations in West Virginia.
- 13 (c) An insurer not transacting new insurance busi-14 ness in West Virginia but continuing collection of prem-15 iums on and servicing of policies remaining in force as to 16 residents of or risks located in West Virginia, is transacting insurance in West Virginia for the purpose of 18 premium and annuity tax requirements but is not required 19 to have a license therefor.
- Sec. 2. General Qualifications for License.—(a) To 2 qualify for a license to transact insurance in West Vir-3 ginia an insurer must be otherwise in compliance with

4 the provisions of this chapter and with its charter, and 5 must be an incorporated stock insurer, or an incorporated 6 mutual insurer or a reciprocal insurer.

- 6b) No license to transact insurance in this State shall be issued, renewed or continued in effect to any domestic, foreign or alien insurer which is owned, or financially controlled, in whole or in part, by any state, or by a foreign government, or any political subdivision, instrumentality or agency of either, or which is an agency of any such state, government or subdivision, unless such insurer was so owned, controlled or constituted prior to the first day of January, one thousand nine hundred fifty-five and licensed to transact insurance in this State prior to the first day of January, one thousand nine hundred fifty-five.
- Sec. 3. Charter for Domestic Insurer.—The secretary of state of this State shall not issue a certificate of incorporation to any insurer until the commissioner shall have examined the charter of such insurer and approved same in writing upon being satisfied that such insurer is in a position to comply with the provisions of this chapter and that the incorporation and licensing of such insurer is in the public interest, and unless such charter shall provide that such insurer shall maintain its principal place of business in this State.
 - Sec. 4. Charter and Statement to be Filed.—Every insurer applying for an initial license shall file with the commissioner accompanying its application:

4

5

- (a) a certified copy of its charter with all amendments;
- (b) a certified copy of its bylaws with all amendments;
- (c) a copy of its annual statement as of December thirty-first last preceding;
- 8 (d) a copy of report of last examination, if any, made 9 of the insurer, certified by the insurance supervisory 10 official of the state of domicile of a foreign insurer or 11 the state of entry into the United States of an alien in-12 surer;
- 13 (e) if a foreign or alien insurer, a certificate of the 14 public official having supervision of insurance in the state 15 or country of domicile of such insurer showing that it is

- authorized to transact the kinds of insurance proposed tobe transacted in West Virginia;
- 18 (f) if an alien insurer, a copy of the appointment and 19 authority of its United States manager;
- 20 (g) certificate of deposit where deposits are required 21 by this chapter;
- 22 (h) such other information and documents as the com-23 missioner deems necessary for the protection of policy-24 holders or to assure compliance with this chapter.
- Sec. 5. Capital or Surplus Required.—To qualify for a 2 license to transact insurance, unless otherwise provided 3 in this chapter, an insurer shall possess paid-in capital 4 stock (if a stock insurer) or surplus (if a mutual insurer) 5 in the amount set forth below opposite the kinds of insur-6 ance for which license is requested: 7 (a) Life _ \$200,000.00 8 (b) Accident and Sickness \$200,000.00 9 (c) Life and Accident and Sickness \$300,000.00 10 (d) Fire and Marine \$100,000.00 11 (e) Casualty \$100,000.00 12 (f) Surety \$600,000.00 13 (g) Accident and Sickness together with any 14 one or more of the following: Fire and Marine, Casualty__ 15 \$300,000.00 (h) Fire and Marine, and Casualty \$200,000.00 16 (i) Surety together with any one or more of 17 18 the following: Accident and Sickness, 19 Fire and Marine, Casualty \$600,000.00 20 In addition the comissioner shall require of any insurer additional expendable surplus funds in an amount equal 22 to one-half such minimum capital or surplus listed above 23 for the kinds of insurance for which license is requested: 24 Provided, That insurers duly licensed to transact insur-25 ance in West Virginia on March thirtieth, one thousand 26 nine hundred fifty-seven shall have until March thirty-27 first, one thousand nine hundred sixty-one to meet the 28 requirement of additional expendable surplus funds in 29 the amount herein specified.
 - Sec. 6. Deposit Requirements.—The commissioner shall 2 not issue a license to any insurer unless it has deposited

3 and maintained in trust with the state treasurer, for the 4 protection of its policyholders or its policyholders and 5 creditors, cash or government securities eligible for the 6 investment of capital funds of domestic insurers (of the type described in section seven of article eight of this 8 chapter) under this chapter in the amount of one hundred thousand dollars; except:

10

11

12 13

14

15

16

17

18

19

21

27

- (a) as to foreign insurers in lieu of such deposit or part thereof with the state treasurer, the commissioner may accept the current certificate of the state insurance supervisory official of any other state that a like deposit by such insurer is being maintained in public custody or in a depository approved by such supervisory official in such state in trust for the purpose of protection of all policyholders or policyholders and creditors of such insurer in the United States.
- (b) as to alien insurers in lieu of such deposit or part 20 thereof with the state treasurer, the commissioner may accept evidence satisfactory to him that the insurer main-22 tains within the United States in public depositories, or in trust institutions within the United States approved by the commissioner, assets available for discharge of its United States insurance obligations which assets shall be in an amount not less than the outstanding liabilities 26 of the insurer arising out of its insurance transactions 28 in the United States, together with an amount equal to the deposit required nuder this section for other insurers 30 requesting license to transact like kinds of insurance.

Sec. 7. Issuance of License; Kinds of Insurance.—Upon receiving the application and supporting documents re-3 quired by section four of this article, if the commissioner 4 is satisfied that an insurer has complied with the terms of its charter and the provisions of this chapter and 6 other laws of this State and that such insurer is solvent and will transact insurance in a legal, proper and just 8 manner, he may issue to such insurer a license authorizing it to transact insurance in this State. Such license may authorize an insurer which otherwise qualifies therefor 11 to transact life and/or accident and sickness insurance, or an insurer other than a life insurer to transact any

- 13 of the kinds of insurance other than life for which it
- 14 otherwise qualifies. However, as to any life insurer which,
- 15 immediately prior to the effective date of this chapter,
- 16 lawfully held a license granting to it the right to trans-
- 17 act in West Virginia additional kinds of insurance other
- 18 than life and accident and sickness, the commissioner may
- 19 continue to license said insurer to transact the same kinds
- 20 of insurance as those specified in such prior license so
- 21 long as such insurer is otherwise in compliance with this
- 22 chapter.
 - Sec. 8. Term of License; Renewal.—All licenses of in-2 surers shall expire at midnight on the March thirty-first
 - 3 next following the date of issuance. The commissioner
 - 4 shall renew annually the licenses of all insurers who
 - 5 qualify and make application therefor upon a form pre-
 - 6 scribed by the commissioner.
 - Sec. 9. Refusal to License.—The commissioner may re-
 - 2 fuse to license an insurer when he determines that an 3 insurer has not complied with the laws of this State or

 - 4 that it is not in the best interests of the people of this
 - 5 State that such insurer be licensed or that such insurer
 - 6 would transact business in this State in an improper,
 - 7 illegal or unjust manner. In such event the commissioner
 - 8 shall enter an order refusing such license, and the ap-
 - 9 plicant therefor may demand a hearing in the manner
- 10 provided in article two of this chapter.
- Sec. 10. Mandatory Revocation or Suspension.-The 2 commissioner after notice and hearing shall refuse to
- 3 renew or shall revoke or suspend the license of any in-
- 4 surer:
- (a) if such action is required by any provision of this 5
- 6 chapter:
- 7 (b) if the insurer no longer meets the requirements for 8 the license originally granted, because of deficiency of
- 9 assets or otherwise.
- Sec. 11. Discretionary Revocation or Suspension; Pen-
- 2 alty in Lieu Thereof; Reissuance.—(a) The commissioner 3 may after notice and hearing refuse to renew, or may
- 4 revoke or suspend the license of an insurer, in addition
- 5 to other grounds therefor in this chapter, if the insurer:

- (1) violates any provision of this chapter other than 6 7 those as to which refusal, suspension or revocation is man-
- 9 (2) fails to comply with any lawful rule, regulation or order of the commissioner; 10

13

15

16 17

19 20

21 22

23

26

27

28

29

30

31

35

36

- (3) is transacting insurance in an illegal, improper or unjust manner;
- (4) is found by the commissioner to be in an unsound 14 condition or in such condition as to render its further transaction of insurance in West Virginia hazardous to its policyholders or to the people of West Virginia;
- (5) compels insureds under its policies to accept less 18 than the amount due them or to bring suit against it to secure full payment when it has no substantial defense;
 - (6) refuses to be examined or to produce its accounts, records and files for examination by the commissioner when required;
- (7) fails to pay any final judgment rendered against 24 it in West Virginia within thirty days after the judgment became final or time for appeal expired, whichever is later:
 - (8) fails to pay when due to the State of West Virginia any taxes, fees, charges or penalties required by this chapter.
 - (b) In lieu of refusing to renew, revoking or suspending the license of an insurer in any case except where such action is mandatory, the commissioner may, by order, require the insurer to pay to the State of West Virginia a penalty in a sum not exceeding one thousand dollars, and upon the failure of the insurer to pay such penalty within thirty days after notice thereof, the commissioner may revoke or suspend the license of such insurer.
- 39 (c) When any license has been revoked or suspended 40 or renewal thereof refused, the commissioner may reissue, terminate the suspension or renew such license when he 42 is satisfied that the conditions causing such revocation, suspension or refusal to renew have ceased to exist and 43 are unlikely to recur.

Sec. 12. Name of Insurer.—No insurer shall be licensed

to transact insurance in West Virginia which has or uses a name so similar to that of any insurer already so licensed as to cause uncertainty or confusion or which tends to deceive or mislead as to the type of organization of the insurer; except that in case of conflict of names between two insurers the commissioner may permit or require the newly licensed insurer to use in West Virginia such supplementation or modification of its name as is reasonably necessary to avoid such conflict.

Sec. 13. Fees; Fund for Maintenance of Commissioner's 2 Office.—(a) Except where it is otherwise specially pro-3 vided, the commissioner shall demand and receive the 4 following fees from all insurers: For annual fee for each 5 license, fifty dollars; for receiving and filing annual re-6 ports, fifty dollars; for valuation of policies of life insurers organized under the laws of this State, one and 8 one-half cents for each one thousand dollars of insurance; 9 for valuation of policies of life insurers organized under 10 the laws of any other state licensed to transact insurance 11 in this State such rate for each one thousand dollars of 12 insurance valued as is imposed by such other state upon 13 any similar insurer organized under the laws of this State 14 licensed to transact insurance in such other state; for 15 filing certified copy of articles of incorporation, twenty-16 five dollars; for filing copy of its charter, twenty-five dollars; for filing statements preliminary to admission, 17 fifty dollars; for filing any additional paper required by 18 19 law or furnishing copies thereof, one dollar; for every certificate of valuation, copy of report or certificate of 20 condition of company to be filed in any other state, five 21 dollars; for each licensed agent, five dollars. The commissioner may by regulation set reasonable charges for print-24 ed forms for the annual statements required by law. He may sell at cost publications purchased by, or printed on 25 behalf of the commissioner. 26

27 (b) The commissioner shall pay into the state treasury 28 all fees and charges collected by him under the provisions 29 of this section. Such fees and charges collected shall com-30 prise a special fund designated "insurance commissioner's 31 fund" to be appropriated as provided by law for the use of the commissioner in the administration of his office, and any portion of such fund not used during a calendar year shall be carried forward for such subsequent use. The state treasurer shall, at the end of each fiscal year, transfer any amount over and above the amount appropriated for the operation of the commissioner's office for the ensuing year to the general fund.

Sec. 14. Premium Tax.—Every insurer transacting insurance in West Virginia shall make a return to the commissioner annually on a form prescribed by the commissioner, on or before the first day of March, under the oath 5 of its president or secretary, of the gross amount of direct 6 premiums (whether designated as a premium or by some 7 other name) collected and received by it during the previous calendar year on policies covering risks resident, located or to be performed in this State and stating the 10 amount of tax due hereunder, together with payment to the commissioner in full for such tax due. Such tax shall be a sum equal to two percent of such gross direct 12 premiums, including dividends (by whatever name called) 13 14 on participating policies applied in reduction of premiums, 15 less premiums returned to policyholders because of cancellation of policies. All such taxes received by the com-16 missioner shall be paid by him into the state treasury 18 for the benefit of the state fund.

Sec. 15. Annuity Tax.—Every life insurer transacting insurance in West Virginia shall make a return to the commissioner annually on a form prescribed by the commissioner, on or before the first day of March, under the oath of its president or secretary, of the gross amount of annuity considerations collected and received by it 7 during the previous calendar year on business transacted in this State and stating the amount of tax due hereunder, 9 together with payment in full for such tax due. Such tax 10 shall be a sum equal to one per centum of the gross 11 amount of such annuity considerations, less annuity con-12 siderations returned and less termination allowances on group annuity contracts. All such taxes received by the 13 commissioner shall be paid by him into the state treasury for the benefit of the state fund.

Sec. 16. Retaliation.—(a) When by or pursuant to the laws of any other state or foreign country any premium 3 or income or other taxes, or any fees, fines, penalties, 4 licenses, deposit requirements or other material obliga-5 tions, prohibitions or restrictions are imposed upon West 6 Virginia insurers doing business, or that seek to do busi-7 ness in such other state or country, or upon the agents of such insurers, which in the aggregate are in excess of 9 such taxes, fees, fines, penalties, licenses, deposit require-10 ments or other obligations, prohibitions or restrictions 11 directly imposed in the aggregate upon similar insurers 12 of such other state or foreign country or upon the agents 13 of such insurers under the statutes of this State, so long 14 as such laws continue in force or are so applied, the same 15 obligations, prohibitions and restrictions of whatever kind 16 shall be imposed in the same manner upon similar insurers of such other state or foreign country doing busi-17 18 ness in West Virginia. Any tax, license or other obliga-19 tion imposed by any city, county or other political sub-20 division of a state or foreign country on West Virginia 21 insurers or their agents shall be deemed to be imposed 22 by such state or foreign country within the meaning of this section. The provisions of this section shall not apply 24 to ad valorem taxes on real or personal property or to 25 personal income taxes.

(b) If an insurer domiciled in West Virginia is refused 26 27 authority to transact in another state insurance upon a 28 plan and in a manner which is permitted for domestic 29 insurers of such other state, notwithstanding that the 30 West Virginia insurer be fully qualified for such authority in accordance with the applicable laws of such other state, and if such refusal be not accompanied by a written state-33 ment of the grounds therefor, then and thereafter, and 34 for so long as such refusal shall continue, the commis-35 sioner may refuse to grant an initial license (but not a renewal of an existing license) to any insurer domiciled 36 in such other state which may seek to transact in West Virginia a like kind or kinds of insurance.

Article 4. General Provisions

Section 1. Compliance Required.—No person shall trans-

- 2 act insurance in West Virginia or relative to a subject of
- 3 insurance resident, located or to be performed in West
- 4 Virginia without complying with the applicable provi-
- 5 sions of this chapter.
- Sec. 2. Application to Particular Types of Insurers.—2 No provision of this chapter shall apply to:
- 3 (a) hospital service corporations and medical service 4 corporations except as stated in article twenty-four of this 5 chapter;
- 6 (b) fraternal benefit societies except as stated in article 7 twenty-three of this chapter;
- 8 (c) farmers' mutual fire insurance companies except as 9 stated in article twenty-two of this chapter.
- Sec. 3. Existing Licenses.—The expiration dates of licenses in force immediately prior to the effective date of this chapter, and lawfully existing under any law repealed by this act, are hereby extended to midnight, March thirty-first next succeeding such effective date, at which time they shall expire. Any such license may be
- 6 which time they shall expire. Any such license may be
- 7 renewed, suspended or revoked as though originally issued 8 under this chapter.
- Sec. 4. Existing Contracts.—No provision of this chapter 2 shall be deemed to modify or invalidate any insurance 3 policy heretofore lawfully in force.
- Sec. 5. Existing Forms and Filings.—Every insurance form and every rate or other filing lawfully in use immediately prior to the effective date of this chapter shall continue in effect until the commissioner otherwise prescribes pursuant to this chapter.
- Sec. 6. Existing Actions, Violations.—Repeal by this act of any laws shall not affect or abate any right heretofore accrued, action or proceeding heretofore commenced or any unlawful act or violation heretofore committed under such laws and punishment or deprivation of license as a consequence thereof as provided by such laws. All such laws shall be deemed to continue in force to the extent made necessary by the foregoing provision.
- Sec. 7. Particular Provisions Prevail.—Provisions of 2 this chapter relative to a particular kind of insurance

10 prisonment.

3 or a particular type of insurer or to a particular matter

4 shall prevail over provisions relating to insurance in gen-

5 eral or insurers in general or to such matter in general.

Sec. 8. General Penalty.—In addition to the refusal to renew, suspension or revocation of a license, or penalty in lieu of the foregoing, because of violation of any provision of this chapter, it is a misdemeanor for any person to violate any provision of this chapter, and any person convicted of a misdemeanor for the violation of any provision of this chapter shall be punished by a fine of not more than one thousand dollars or by imprisonment for not more than six months, or by both such fine and im-

Sec. 9. Repeal.—The provisions of all acts or parts of acts, or of this Code, which are inconsistent with the provisions of this chapter are hereby repealed to the extent of such inconsistency. Repeal by this chapter or this act of any provision of any act or parts of acts or of this Code shall not have the effect of reviving any prior law theretofore repealed or superseded by such repealed provision.

Sec. 10. Severability.—If any provision of this chapter or the application of such provision to any circumstance is held to be unconstitutional or otherwise invalid, the remainder of this chapter or the application of the provisions to other circumstances shall not be affected thereby. The legislature hereby declares that it would have passed the remainder of this chapter if it had known that such provision, or its application to any circumstances, would be declared unconstitutional or otherwise invalid.

Sec. 11. Effective Date.—Except as otherwise expressly 2 stated herein, this chapter shall become effective on the 3 first day of January, one thousand nine hundred fifty-4 eight.

Sec. 12. Service of Process on Licensed Insurers.—The auditor of this State shall be, and is hereby constituted, the attorney-in-fact of every licensed insurer, domestic, foreign, or alien, transacting insurance in this State, upon whom all legal process in any action, suit or proceeding

6 against it shall be served, and he may accept service of 7 such process. Such process shall be served upon the 8 auditor, or accepted by him, in the same manner as provided for service of process upon unlicensed insurers under 10 subparagraphs (2) and (3) of paragraph (b) of section 11 thirteen of this article. Each licensed insurer shall pay 12 to the auditor an annual fee of ten dollars for services as 13 authorized agent for service of process.

Sec. 13. Service of Process on Unlicensed Insurers.— 2 (a) The purpose of this section is to subject certain insurers to the jurisdiction of the courts of this State in suits by or on behalf of insureds or beneficiaries under certain insurance contracts. The legislature declares that it is a subject of concern that many residents of this State hold policies of insurance issued or delivered in this State by insurers while not licensed to transact insurance in this State, thus presenting to such residents the often insuperable obstacle of resorting to distant forums for the purpose 10 of asserting legal rights under such policies. In further-11 ance of such state interest, the legislature herein provides 12 a method of substituted service of process upon such 13 insurers and declares that in so doing it exercises its power 15 to protect its residents and to define, for the purpose of 16 this section, what constitutes transacting insurance in this 17 State, and also exercises powers and privileges available 18 to the State by virtue of public law number fifteen, seven-19 ty-ninth congress of the United States, chapter twenty, 20 first session, senate number three hundred forty, as amended, which declares that the business of insurance and 21 22 every person engaged therein shall be subject to the laws 23 of the several states.

(b) (1) Any of the following acts in this State, effected by mail or otherwise, by an unlicensed foreign or alien insurer: (1) the issuance or delivery of contracts of insurance to residents of this State or to corporations authorized to do business therein, (2) the solicitation of applications for such contracts, (3) the collection of premiums, membership fees, assessments or other considerations for such contracts, or (4) any other transaction of business, is equivalent to and shall constitute an appointment by

24

25 26

27

28

29

30

31

69

70

71

such insurer of the auditor of the State and his successor in office, to be its true and lawful attorney, upon whom may be served all lawful process in any action, suit, or proceeding instituted by or on behalf of an insured or beneficiary arising out of any such contract of insurance, and any such act shall be signification of its agreement that such service of process is of the same legal force and validity as personal service of process in this State upon such insurer.

- 42 (2) Such service of process upon any such insurer in any such action or proceeding in any court of competent 43 jurisdiction of this State, may be made by serving the auditor of the State or his chief clerk with two copies thereof and the payment to him of a fee of two dollars. 47 The auditor shall forward a copy of such process by regis-48 tered mail to the defendant at its last known principal place of business, and shall keep a record of all process so 49 50 served upon him. Such service of process is sufficient, 51 provided notice of such service and a copy of the process 52 are sent within ten days thereafter by or on behalf of the 53 plaintiff to the defendant at its last known principal place 54 of business by registered mail with return receipt requested. The plaintiff shall file with the clerk of the court in 55 56 which the action is pending, or with the judge or justice of such court, in case there be no clerk, an affidavit of com-57 pliance herewith, a copy of the process, and either a return 58 receipt purporting to be signed by the defendant or a person qualified to receive its registered mail in accord-60 61 ance with the rules and customs of the post office depart-62 ment; or, if acceptance was refused by the defendant or 63 its agent, the original envelope bearing a notation by the postal authorities that receipt was refused. Service of 64 65 process so made shall be deemed to have been made 66 within the territorial jurisdiction of any court in this 67 State.
 - (3) Service of process in any such action, suit or proceeding shall in addition to the manner provided in subparagraph (2) of this paragraph (b) be valid if served upon any person within this State who, in this State on behalf of such insurer, is

73 A. Soliciting insurance, or

- 74 B. Making, issuing or delivering any contract of insur-75 ance, or
 - C. Collecting or receiving any premium, membership fee, assessment or other consideration for insurance; provided notice of such service and a copy of such process are sent within ten days thereafter, by or on behalf of the plaintiff to the defendant at the last known principal place of business of the defendant, by registered mail with return receipt requested. The plaintiff shall file with the clerk of the court in which the action is pending, or with the judge or justice of such court in case there be no clerk, an affidavit of compliance herewith, a copy of the process, and either a return receipt purporting to be signed by the defendant or a person qualified to receive its registered mail in accordance with the rules and customs of the post office department; or, if acceptance was refused by the defendant or its agent the original envelope bearing a notation by the postal authorities that receipt was refused.
 - (4) The papers referred to in subparagraphs (2) and (3) of this paragraph (b) shall be filed within thirty days after the return receipt or other official proof of delivery or the original envelope bearing a notation of refusal, as the case may be, is received by the plaintiff. Service of process shall be complete ten days after such process and the accompanying papers are filed in accordance with this section.
 - (5) Nothing in this section contained shall limit or abridge the right to serve any process, notice or demand upon any insurer in any other manner now or hereafter permitted by law.
 - (c) (1) Before any unlicensed foreign or alien insurer shall file or cause to be filed any pleading in any action, suit or proceeding instituted against it, such unlicensed insurer shall either (1) deposit with the clerk of the court in which such action, suit or proceeding is pending, cash or securities or file with such clerk a bond with good and sufficient sureties, to be approved by the court, in an amount to be fixed by the court sufficient to secure the payment of any final judgment which may be rendered in

such action: Provided, however, That the court may in its discretion make an order dispensing with such deposit or bond where the auditor of the State shall have certified to such court that such insurer maintains within this State funds or securities in trust or otherwise sufficient and available to satisfy any final judgment which may be entered in such action, suit or proceeding; or (2) procure a license to transact insurance in this State.

- (2) The court in any action, suit, or proceedings, in which service is made in the manner provided in subparagraphs (2) or (3) of paragraph (b) of this section may, in its discretion, order such postponement as may be necessary to afford the defendant reasonable opportunity to comply with the provisions of subparagraph (1) of this paragraph (c) and to defend such action.
- (3) Nothing in subparagraph (1) of this paragraph (c) is to be construed to prevent an unlicensed foreign or alien insurer from filing a motion to set aside service thereof made in the manner provided in paragraphs (2) or (3) of paragraph (b) of this section on the grounds either (1) that such unlicensed insurer has not done any of the acts enumerated in subparagraph (1) of paragraph (b) of this section, or (2) that the person on whom service was made pursuant to subparagraph (3) of paragraph (b) of this section was not doing any of the acts therein enumerated.
- (d) In any action against an unlicensed foreign or alien insurer upon a contract of insurance issued or delivered in this State to a resident thereof or to a corporation authorized to do business therein, if the insurer has failed for thirty days after demand prior to the commencement of the action to make payment in accordance with the terms of the contract, and it appears to the court that such refusal was vexatious and without reasonable cause, the court may allow to the plaintiff a reasonable attorney's fee and include such fee in any judgement that may be rendered in such action. Such fee shall not exceed twelve and one-half percent of the amount which the court finds the plaintiff is entitled to recover against the insurer, but in no event shall such fee be less than twenty-five dollars. Failure of an insurer to defend any such action shall be

153 deemed prima facie evidence that its failure to make pay-154 ment was vexatious and without reasonable cause.

155 156

157

161

6

7

8

10

11

12

13

- (e) The provisions of this section shall not apply to any suit, action or proceeding against any unlicensed foreign or alien insurer arising out of any contract of excess line insurance effected in accordance with article twelve of 158 159 this chapter where any such contract contains a provision designating the auditor or his successor in office its true 160 and lawful attorney upon whom may be served all lawful 162 process in any action, suit or proceeding instituted by or 163 on behalf of an insured or beneficiary arising out of such 164 contract of insurance.
 - Sec. 14. Annual Statement by Insurers.—Each licensed 2 insurer shall annually on or before March first, unless the time is extended by the commissioner for good cause 4 shown, file with the commissioner a true statement of its 5 financial condition, transactions and affairs as of the 6 December thirty-first preceding; said statement to be in 7 form and content as prescribed and required by the commissioner for the kinds of insurance to be reported upon. The statement of an alien insurer shall relate only to its 10 transactions and affairs in the United States unless the 11 commissioner requires otherwise.
 - Sec. 15. Reinsurance.—(a) An insurer shall reinsure its risks, or any part thereof, only in solvent insurers having surplus to policyholders not less in amount than the paid-in capital required under this chapter of a stock insurer licensed to transact like kinds of insurance.
 - (b) An insurer shall so reinsure in such alien insurers only as are authorized to transact insurance in at least one state of the United States or have in the United States a duly authorized attorney-in-fact to accept service of legal process against the insurer as to any liability which might arise on account of such reinsurance.
 - (c) No credit shall be allowed, as an asset or as a deduction from liability, to any ceding insurer for reinsurance unless the reinsurance is in insurers either licensed in West Virginia to transact insurance of the kind being reinsured or which have been approved by the commissioner in writing; nor unless the reinsurance is payable

- 18 by the assuming insurer on the basis of the liability of the ceding insurer under the contracts reinsured without 20 diminution because of the insolvency of the ceding insurer 21 nor unless under the reinsurance contract the liability for such reinsurance is assumed by the assuming insurer or insurers as of the same effective date.
 - (d) Any licensed insurer may accept reinsurance for the same kinds of insurance and within the same limits as it is authorized to transact direct insurance.
- 27 (e) No insurer shall reinsure all or substantially all of its risks on property or lives located in West Virginia, or 29 substantially all of a major class thereof, unless the rein-30 surance agreement be filed with and approved by the 31 commissioner.
- (f) This section shall not apply to insurance of ocean 33 marine risks or marine protection and indemnity risks.
 - Sec. 16. Limit of Risk.—(a) No insurer shall retain any risk on any one subject of insurance, whether located or to be performed in West Virginia or elsewhere, in an 4 amount exceeding ten percent of its surplus to policy-5 holders.
- 6 (b) A "subject of insurance" for the purpose of this section, as to insurance against fire and hazards other than windstorm or earthquake, include all properties insured by the same insurer which are customarily considered by insurers to be subject to loss or damage from the same 11 fire or other such hazard insured against.
- 12 (c) Reinsurance in licensed or approved insurers as 13 authorized by section fifteen of this article shall be deducted in determining risk retained. As to surety risk, deduction shall also be made of the amount assumed by any established incorporated co-surety and the value and 17 security deposited, pledged or held subject to the surety's consent and for the surety's protection. 18
- 19 (d) "Surplus to policyholders" for the purpose of this 20 section shall be deemed to include any voluntary reserves which are not required pursuant to law, and shall be determined from the last sworn statement of the insurer on file with the commissioner or by the last report of

examination by the commissioner, whichever is the more recent at time of assumption of such risk.

- (e) As to alien insurers this section shall apply only to risks and surplus to policyholders of the insurer's United States branch.
- (f) This section shall not apply to life or accident and sickness insurance, title insurance, insurance of ocean marine risks or marine protection and indemnity risks, nor to any policy or type of coverage as to which the maximum possible loss to the insurer is not reasonably ascertainable on issuance of the policy.
- Sec. 17. Prohibited Interests of Officers and Directors in Certain Transactions.—(a) No director or officer of an insurer shall accept, except for and on behalf of the insurer, or be the beneficiary of any fee, commission, brokerage, gift or other emolument or thing of value in addition to his fixed salary or compensation, because of any investment, loan, deposit, purchase, sale, exchange, or other similar transaction made by or for the insurer, or be pecuniarily interested therein in any capacity except on behalf of the insurer.
- 11 (b) No insurer shall guarantee the financial obligation 12 of any of its officers or directors.
 - (c) This section shall not prohibit such a director or officer from becoming a policyholder of the insurer and enjoying thereunder the rights customarily provided therein for holders of such policies, nor shall this section prohibit a director of an insurer other than a life insurer from receiving his share of the commission earnings of a stock exchange firm of which he is a partner, or a percentage of underwriting profits under a management contract, provided such contract is subject to review and termination by the board of directors, nor shall this section prohibit the payment to a director of a fee for legal services actually rendered to any such insurer provided such compensation is not in excess of the amounts customarily charged for the same type of service.
 - Sec. 18. Representation of Unlicensed Insurers Prohibited.—(a) No person in West Virginia shall in any manner, directly or indirectly, represent or assist any

- 4 insurer not then duly licensed to transact insurance in
- 5 West Virginia, in the soliciting, procuring, placing or
- 6 maintenance of any insurance coverage upon or with
- 7 relation to any subject of insurance resident, located, or
- 8 to be performed in West Virginia, or inspect or examine
- 9 any risk or collect or receive any premium on behalf of
- 10 such insurer.
- 11 (b) Any person transacting insurance in violation of 12 this section shall be personally liable to the insured for
- 13 the performance of any contract between the insured and
- 14 the insurer resulting from such transactions.
- (c) This section shall not apply to reinsurance procured 15
- 16 in accordance with this chapter, to excess line insurance
- 17 procured pursuant to the provisions of article twelve of
- 18 this chapter, to transactions exempt under the provisions
- 19 of section one of article three of this chapter, or to pro-
- 20 fessional services of an adjuster or attorney-at-law.

Article 5. Organization and Procedures of Domestic Stock and Mutual Insurers

- Section 1. Scope of Article.—This article shall govern
- domestic mutual and stock insurers hereafter formed and
- 3 shall govern existing domestic mutual and stock insurers
- 4 to the extent applicable.
- Sec. 2. Application of General Laws.—The statutes of
- 2 this State relating to corporations generally, except where
- 3 inconsistent with the provisions of this chapter, shall ap-
- 4 ply to domestic stock and mutual insurers.
 - Sec. 3. Articles of Incorporation.—In addition to the
- 2 matters and things required generally in articles of in-
- 3 corporation, those of a domestic stock or mutual insurer
- 4 shall state:
 - (a) the name of the corporation;
- (b) the duration of its existence, which may be per-7 petual;
- (c) the kinds of insurance the corporation is formed
- 9 to transact according to the definitions thereof in this
- 10 chapter:

- (d) if a stock insurer, its authorized capital, the classes 11
- 12 and number of shares into which divided, the par value

14

15

20 21

of each such share, and the respective rights of each such class. Shares without par value shall not be authorized;

- (e) if a mutual insurer, the maximum contingent liability of its members (other than as to nonassessable 16 17 policies) for payment of losses and expenses incurred, 18 which liability shall be as stated in the articles of in-19 corporation but not less than one nor more than six times the premium for the member's policy at the annual premium rate for a term of one year;
- (f) the number of directors, not less than five nor more 22 than fifteen, who shall conduct the affairs of the cor-23 24 poration;
- 25 (g) the city or town in West Virginia in which is to be 26 located the principal place of business, and states and 27 countries in which business may be transacted;
- 28 (h) the limitations, if any, on the corporation's indebt-29 edness;
- (i) if a stock insurer, the extent, if any, to which its 30 31 stock shall be assessable;
- 32 (j) such other provisions, not inconsistent with law, as **33** are deemed appropriate.
- Sec. 4. Certificate of Incorporation.—The articles of in-2 corporation shall be filed with the secretary of state of 3 this State in the same manner as for other corporations 4 and he shall issue a certificate of incorporation subject 5 to the provisions of section three of article three of this chapter.
- Sec. 5. Amendment of Articles of Incorporation. (a) A stock insurer may amend its articles of incorpora-3 tion in the same manner as other corporations, but no 4 such amendment shall reduce authorized capital below 5 the amount required by this chapter for the kinds of 6 insurance thereafter to be transacted and except that no such amendment shall be filed with or accepted by the secretary of state unless approved in writing by the com-8 missioner. 9
- (b) A mutual insurer may amend its articles of incor-10 11 poration by the affirmative vote of two-thirds of its members present in person or by proxy at a regular or special meeting of members of which notice in writing setting

- 14 forth the proposed amendment was mailed to all members
- 15 at least thirty days in advance, except that no such amend-
- 16 ment shall reduce the surplus below the amount required
- 17 by this chapter for the kinds of insurance thereafter to be
- 18 transacted and except that no such amendment shall be
- 19 filed with or accepted by the secretary of state unless
- 20 approved in writing by the commissioner.
 - Sec. 6. Formation of Mutuals, Applications for Insurance.—(a) Upon issuance of its certificate of incorporation as provided in section four of this article, the directors and officers of a domestic mutual corporation formed for the purpose of becoming a mutual insurer may open books for the registration of such requisite applications for insurance policies as they may accept, and may receive deposits of premiums thereon.
- 9 (b) All such applications shall be in writing signed by 10 the applicant, covering subjects of insurance resident, 11 located, or to be performed in West Virginia.
 - (c) All such applications shall provide that:
- 13 (1) Issuance of the policy is contingent upon comple-14 tion of organization of the insurer and issuance to it of 15 a proper license;
- 16 (2) No insurance is provided until the license has been 17 so issued; and
- 18 (3) The prepaid premium or deposit, and membership 19 or policy fee, if any, shall be refunded in full to the ap-20 plicant if the organization is not completed and license 21 issued before a specified reasonable date, which date shall 22 be not later than one year following date of issuance of 23 the certificate of incorporation.
 - (d) All qualifying premiums collected shall be in cash.
- (e) Solicitation for such qualifying applications for insurance shall be by licensed agents of the insurer, and the commissioner shall upon application therefor issue temporary agent's licenses expiring on the date specified pursuant to paragraph (3), above, to individuals appointed by the insurer and qualified as for a resident agent's license. The commissioner may suspend or revoke any such license for any of the same causes and pursuant to the same procedures as are appliable to suspension or

34 revocation of licenses of agents in general under article 35 twelve.

Sec. 7. Formation of Mutuals, Premium Deposit and Policy Issuance.—(a) All sums collected by a domestic mutual insurer as premiums and fees on qualifying ap-4 plications for insurance therein shall be deposited in trust in a West Virginia bank or trust company under a written trust agreement consistent with this section and with para-7 graph (3) of subsection (c) of section six of this article. 8 The corporation shall file an executed copy of such trust 9 agreement with the commissioner.

10

12

14

15

16

(b) Upon issuance to the insurer of a license as an in-11 surer for the kind of insurance for which such applications were solicited, all funds so held in trust shall become the funds of the insurer, and the insurer shall forthwith issue and deliver its policies for which premiums had been paid and accepted. The insurance provided by such policies shall be effective as of the date of the license.

Sec. 8. Formation of Mutuals, Assets Required, Temporary Capital Stock.—No such domestic mutual insurer shall be issued a license until bona fide applications have been received and cash premiums collected in the manner provided in sections six and seven of this article in such sum, which, together with any other funds that may 7 be legally available, will result in the insurer having unencumbered assets over and above all required reserves and other liabilities of at least an amount equal to that 10 required under section five of article three of this chapter for issuance of a license for the kinds of insurance pro-11 posed to be transacted. Such other funds may be provided 12 by the issuance of temporary capital stock in an amount 14 which together with such premiums collected will provide the amount necessary under section five of article 15 16 three of this chapter, the proceeds of said stock to be 17 invested in the manner provided for the investment of other funds of the insurer. In the event such temporary 19 capital stock shall be issued, the amount of premiums required to be collected prior to licensing shall be not 20 21 less than ten thousand dollars. Out of the net surplus of the insurer the holders of such temporary capital stock

17 18

23 may receive a dividend of not more than ten percent per 24 anual, which may be cumulative. The stock shall not be 25 a liability of the insurer, except that it shall be retired 26 as soon as the surplus of the insurer becomes sufficient to pay it at its par value and leave a surplus not less than 27 28 the amount of the temporary capital so retired.

Sec. 9. Mutual Bylaws.—(a) The initial board of direc-2 tors of a domestic mutual insurer shall adopt original 3 bylaws for the government of the corporation and conduct 4 of its business. Such bylaws shall be subject to the ap-5 proval of a majority of the insurer's members who are 6 present in person or by proxy at the next succeeding 7 annual meeting of members, and no bylaw provision shall 8 thereafter be effective which is not so approved. Bylaws 9 shall be revoked or modified only by vote of a majority of the insurer's members who are present in person or by 10 11 proxy at a meeting of which notice was given as provided 12 in the bylaws.

- (b) The bylaws shall provide that each member of the 14 insurer is entitled to one vote in the election of corporate 15 directors and on all matters coming before membership 16 meetings, and that such vote may be exercised in person or by proxy.
- (c) The insurer shall promptly file with the commis-19 sioner a copy, certified by the insurer's secretary, of such 20 bylaws and of every modification thereof or of addition thereto. The commissioner shall disapprove any bylaw 21 22 provision deemed by him to be unlawful, inadequate, unfair, or detrimental to the proper interests and protection 23 24 of the insurer's members or any class thereof. The in-25 surer shall not, after receiving written notice of such dis-26 approval and during the existence thereof, effectuate any 27 bylaw provision so disapproved.

Sec. 10. Mutual Quorum.—A domestic mutual insurer 2 may in its bylaws adopt a reasonable provision for de-3 termining a quorum of members at any meeting thereof. 4 This section shall not affect any other provision of law 5 requiring vote of a larger percentage of members for a 6 specified purpose.

Sec. 11. Mutual Membership.—Each holder of one or

- more insurance policies or contracts issued by a domestic mutual insurer, other than a contract of reinsurance, is a member of the insurer with all the rights and obligations of such membership and each such policy or contract so issued shall so specify. Any person, government or governmental agency, state or political subdivision thereof, public or private corporation, board, association, firm, estate, trustee or fiduciary may be a member of a domestic, foreign, or alien mutual insurer.
- Sec. 12. Corporate Rights of Mutual Members.—With respect to the management, records, and affairs of the insurer, a member of a domestic mutual insurer shall have the same character of rights and relationship as a stockholder has toward a domestic stock insurer.
- Sec. 13. Contingent Liability of Mutual Members.—
 2 (a) Each member of a domestic mutual insurer shall,
 3 except as otherwise hereinafter provided with respect to
 4 nonassessable policies, have a contingent liability, pro
 5 rata and not one for another, for the discharge of its
 6 obligations, which contingent liability shall be in such
 7 maximum amount as is stated in the insurer's articles of
 8 incorporation.
- 9 (b) Each policy issued by the insurer shall contain a 10 statement of the contingent liability, if any, of its mem-11 hers.
- 12 (c) Termination of the policy of any such member shall 13 not relieve the member of contingent liability for his pro-14 portion, if any, of the obligations of the insurer which 15 accrued while the policy was in force.
- (d) Unrealized contingent liability of members does
 not constitute an asset of the insurer in any determination
 of its financial condition,
- Sec. 14. Enforcement of Contingent Liability.—(a) If 2 at any time the assets of a domestic mutual insurer are 3 less than its liabilities and the minimum amount of sur-4 plus required of it by this chapter for authority to transact 5 the kinds of insurance being transacted, and the deficiency 6 is not cured from other sources, its directors shall levy an 7 assessment only upon its members who at any time within 8 the twelve months immediately preceding the date notice

- 9 of such assessment was mailed to them held policies pro-10 viding for contingent liability, and such members shall be 11 liable to the insurer for the amount so assessed.
 - (b) The assessment shall be for such an amount as is required to cure such deficiency and to provide a reasonable amount of working funds above such minimum amount of surplus, but such working funds so provided shall not exceed five percent of the insurer's liabilities as of the date as of which the amount of such deficiency was determined.
 - (c) No one policy or member as to such policy shall be assessed or charged with an aggregate of contingent liability as to obligations incurred by the insurer in any one calendar year, in excess of the number of times the premium as stated in the policy as computed solely upon premium earned on such policy during that year.
 - (d) No member shall have an offset against any assessment for which he is liable, on account of any claim for unearned premium or loss payable.
- 28 (e) As to life insurance, any part of such an assessment upon a member which remains unpaid following notice of assessment, demand for payment, and lapse of a reasonable waiting period as specified in such notice, may, if approved by the commissioner as being in the best interests of the insurer and its members, be secured by placing a lien upon the cash surrender values and accumulated dividends held by the insurer to the credit of such member.

Sec. 15. Mutual Nonassessable Policies.—While a domestic mutual insurer maintains the deposits and surplus funds necessary for the kinds of insurance it is transacting, and is otherwise in compliance with this chapter and in a sound condition, it may extinguish the contingent liability of its members as to all its policies in force and may omit provisions imposing contingent liability in all its policies currently issued upon receiving written approval by the commissioner. The commissioner shall revoke the authority of a domestic mutual insurer to issue policies without contingent liability at any time the insurer's assets are less than the sum of its liabilities and

- 13 the surplus required for such authority, or if the insurer,
- 14 by resolution of its board of directors approved by a
- 15 majority of its members, requests that such authority be
- 16 revoked.
- Sec. 16. Participating Policies.—(a) If so provided in its articles of incorporation, a domestic stock or domestic mutual insurer may issue any or all of its policies with or without participation in profits, savings, or unabsorbed portions of premiums, may classify policies issued on a participating or nonparticipating basis, and may determine the right to participate and the extent of participation of any class or classes of policies. Any such classification or determination shall be reasonable, and shall not unfairly discriminate as between policyholders within the same such classification. A life insurer may issue both participating and nonparticipating policies only if the right or absence of right to participate is reasonably related to the premium charged.
- 15 (b) No dividend, otherwise earned, shall be made con-16 tingent upon the payment of renewal premium on any 17 policy.
 - Sec. 17. Diviends to Stockholders.—(a) A domestic stock insurer shall not pay any cash dividend to stock-holders except out of that part of its available surplus funds which is derived from realized net profits on its business.
 - 6 (b) A stock dividend may be paid out of any available 7 surplus funds in excess of the aggregate amount of surplus 8 loaned to the insurer pursuant to section twenty of this 9 article.
- 10 (c) A dividend otherwise proper, may be payable out 11 of the insurer's earned surplus even though its total 12 surplus is then less than the aggregate of its past con-13 tributed surplus resulting from issuance of its capital 14 stock at a price in excess of the par value thereof.
- Sec. 18. Dividends to Mutual Members.—(a) The directors of a domestic mutual insurer may from time to time apportion and pay or credit to its members dividends only out of that part of its surplus funds which represents

- 5 net realized savings and net realized earnings from its 6 business.
- 7 (b) A dividend otherwise proper may be payable out 8 of such savings and earnings even though the insurer's 9 total surplus is then less than the aggregate of its contributed surplus.
- Sec. 19. Illegal Dividends, Penalty.—(a) Any director of a domestic stock or mutual insurer who votes for or concurs in declaration or payment of an illegal dividend to stockholders or members shall upon conviction thereof be guilty of a misdemeanor, and shall be jointly and severally liable, together with other such directors, for any loss thereby sustained by the insurer.
- 8 (b) The stockholders or members receiving such an 9 illegal dividend shall be liable in the amount thereof to the insurer.
- 11 (c) The commissioner may revoke or suspend the 12 license of an insurer which has declared or paid an illegal 13 dividend.
- Sec. 20. Borrowed Surplus.—(a) A domestic stock or mutual insurer may borrow money to defray the expenses of its organization, provide it with surplus funds, or for any purpose required by its business, upon a written agreement that such money is required to be repaid only out of the insurer's surplus in excess of that stipulated in such agreement. The agreement may provide for interest at the rate agreed upon but not exceeding six percent per annum. Such interest shall not constitute a liability of the insurer as to its funds other than such excess of surplus unless so stipulated in the agreement.
- 12 (b) Money so borrowed, together with the interest
 13 thereon if so stipulated in the agreement, shall not form
 14 a part of the insurer's legal liabilities except as to its
 15 surplus in excess of the amount thereof stipulated in the
 16 agreement, or be the basis of any set-off; but until repaid,
 17 financial statements filed or published by the insurer shall
 18 show as a footnote thereto the amount thereof then un19 paid together with any interest thereon accrued but un20 paid.
- 21 (c) Such insurer in advance of any such loan shall file

22 with the commissioner a statement of the purposes of the 23 loan and a copy of the proposed loan agreement, which shall be subject to the commissioner's approval. The loan 25 and agreement shall be deemed approved thirty days after 26 date of filing with the commissioner, unless within such 27 thirty day period the insurer is notified in writing of the 28 commissioner's disapproval and the reasons therefor. The 29 commissioner shall so disapprove any such proposed loan or agreement if he finds that the loan is reasonably unnecessary or excessive for the purpose intended, or that 32 the terms of the loan agreement are not fair and equitable 33 to the parties, and to other similar lenders, if any, to 34 the insurer, or is not fair to policyholders, or that the 35 information so filed by the insurer is inadequate.

(d) Any such loan to a mutual insurer or substantial portion thereof shall be repaid by the insurer when no longer reasonably necessary for the purpose originally intended. No repayment of such a loan shall be made by a mutual insurer unless in advance approved by the commissioner.

36

37

40

41 42

43

45

16

(e) This section shall not apply to loans obtained by the insurer in ordinary course of business from banks and other financial institutions, nor to loans secured by pledge of assets.

Sec. 21. Management and Exclusive Agency Contracts. —(a) No domestic stock or mutual insurer shall make 3 any contract whereby any person or persons is granted 4 or is to enjoy in fact the management of the insurer to 5 the substantial exclusion of its board of directors, or to 6 have the controlling or preemptive right to produce substantially all insurance business for the insurer, unless such contract is filed with the commissioner for his approval. The contract shall be deemed approved thirty 10 days after filing unless disapproved by the commissioner 11 within such thirty day period, subject to such reasonable 12 extension of time as the commissioner may require by 13 notice given within such thirty days. Any disapproval 14 shall be delivered to the insurer in writing, stating the 15 grounds therefor.

(b) The commissioner shall disapprove any such con-17 tract if he finds that it:

10

- 18 (1) Subjects the insurer to excessive charges; or
 - (2) Is to extend for an unreasonable length of time; or
- 20 (3) Does not contain fair and adequate standards of 21 performance; or
- 22 (4) Contains other inequitable provisions or provisions 23 which impair the proper interests of stockholders, policy-24 holders or members of the insurer.
- Sec. 22. Impairment of Capital or Assets.—(a) If the capital stock of a domestic stock insurer becomes impaired, or the assets of a domestic mutual insurer are less than its liabilities and the minimum amount of sur-5 plus required of it by this chapter for authority to transact the kinds of insurance being transacted, the commissioner shall at once determine the amount of the deficiency and serve notice upon the insurer to make good the deficiency within ninety days after service of such notice.
- (b) The deficiency may be made good in cash or in assets eligible under this chapter for the investment of 11 the insurer's funds; or if a stock insurer by reduction of the insurer's capital to an amount not below the minimum required for the kinds of insurance thereafter to be trans-14 15 acted; or if a mutual insurer, by amendment of its license 16 to cover only such kind or kinds of insurance for which 17 the insurer has on deposit sufficient surplus.
- (c) If the deficiency is not made good and proof thereof 19 filed with the commissioner within such ninety day period, 20 the insurer shall be deemed insolvent and the commissioner shall institute delinquency proceedings against it 21 22 as authorized by this chapter. If such deficiency exists 23 because of increased loss reserves required by the com-24 missioner, or because of disallowance by the commissioner of certain assets or reduction of the value at which carried in the insurer's accounts, the commissioner may 27 in his discretion and upon application and good cause 28 shown, extend for not more than an additional one hun-29 dred eighty days the period within which such deficiency 30 may be so made good and such proof thereof so filed.
 - Sec. 23. Mutualization of Stock Insurer.—(a) A domes-2 tic stock insurer may become a domestic mutual insurer

pursuant to such plan and procedure as may be approved in advance by the commissioner.

- (b) The commissioner shall not approve any such plan, procedure, or mutualization unless:
- 7 (1) It is equitable to both stockholders and policy-8 holders;

9

16

18

19

24

27

30

31

5 6

7

- (2) It is subject to approval by a vote of the holders 10 of not less than three-fourths of the insurer's capital stock 11 having voting rights and by a vote of not less than twothirds of the insurer's policyholders who vote on such plan in person, by proxy or by mail, pursuant to such 14 notice and procedure as may be approved by the com-15 missioner;
- (3) If a life insurer, the right to vote thereon is limited 17 to those policyholders whose policies have face amounts of not less than one thousand dollars and have been in force for one year or more:
- 20 (4) Mutualization will result in retirement of shares of the insurer's capital stock at a price not in excess of the 21 fair market value thereof as determined by competent 23 disinterested appraisers;
- (5) The plan provides for definite conditions to be ful-25 filled by a designated early date upon which such mutualization will be deemed effective; and 26
- (6) The mutualization leaves the insurer with surplus funds reasonably adequate for the security of its policy-28 holders and to continue successfully in business in the states in which it is then authorized to transact insurance. and for the kinds of insurance included in its license.
- 32 (c) This section shall not apply to mutualization under order of court pursuant to rehabilitation or reorganiza-34 tion of an insurer under article ten of this chapter.
 - Sec. 24. Converting Mutual Insurer.—(a) A domestic mutual insurer may become a domestic stock insurer pursuant to such plan and procedure as is approved in advance by the commissioner.
 - (b) The commissioner shall not approve any such plan or procedure unless:
 - (1) Equitable to the insurer's members;
 - (2) Subject to approval by vote of not less than three-

- 9 fourths of the insurer's current members voting thereon 10 in person, by proxy, or by mail at a meeting of members 11 called for the purpose pursuant to such notice and pro-12 cedure as may be approved by the commissioner; if a life 13 insurer, the right to vote may be limited to members 14 whose policies have face amounts of not less than one 15 thousand dollars and have been in force one year or more;
 - (3) The equity of each policyholder in the insurer is determinable under a fair formula approved by the commissioner, which such equity shall be based upon not less than the insurer's entire surplus (after deducting contributed or borrowed surplus funds) plus a reasonable present equity in its reserves and in all nonadmitted assets;
 - (4) The policyholders entitled to participate in the purchase of stock or distribution of assets shall include all current policyholders and all existing persons who had been a policyholder of the insurer within three years prior to the date such plan was submitted to the commissioner;
 - (5) The plan gives to each policyholder of the insurer as specified in paragraph (4), above, a preemptive right to acquire his proportionate part of all of the proposed capital stock of the insurer, within a designated reasonable period, and to apply upon the purchase thereof the amount of his equity in the insurer as determined under paragraph (3), above;
 - (6) Shares are so offered to policyholders at a price not greater than to be thereafter offered to others nor at more than double the par value of such shares;
 - (7) The plan provides for payment to each policyholder not electing to apply his equity in the insurer for or upon the purchase price of stock to which preemptively entitled, of cash in the amount of not less than fifty percent of the amount of his equity not so used for the purchase of stock, and which cash payment together with stock so purchased, if any, shall constitute full payment and discharge of the policyholder's equity as an owner of such mutual insurer; and
 - (8) The plan, when completed, would provide for the converted insurer paid-in capital stock in an amount not

- 50 less than the minimum paid-in capital required of a domestic stock insurer transacting like kinds of insurance, 51 52 together with surplus funds in amount not less than one-53 half of such required capital.
 - Sec. 25. Mergers and Consolidations of Stock Insurers.— 2 (a) A domestic stock insurer of any kind may merge or 3 consolidate with another domestic or foreign stock insurer 4 by complying with the provisions of general law governing 5 the merger or consolidation of stock corporations formed for profit, but subject to subsection (b), below.
- (b) No such merger or consolidation shall be effectuated unless in advance thereof the plan, agreement and other supporting documents have been filed with and approved in writing by the commissioner. The commissioner shall give such approval within a reasonable time after such 12 filing unless he finds such plan or agreement:
 - (1) Is contrary to law; or

9

10

11

13

14

16

19

5

- (2) Inequitable to the stockholders of any domestic 15 insurer involved; or
- (3) Would substantially reduce the security of and 17 service to be rendered to policyholders of the domestic 18 insurer in West Virginia or elsewhere.
- (c) If the commissioner does not approve any such plan 20 or agreement he shall so notify the insurer in writing 21 specifying his reasons therefor.
 - Sec. 26. Reinsurance by Stock Insurers.—(a) A domestic 2 stock insurer may accept reinsurance for the same kinds of insurance and within the same limits as it is authorized 4 to transact direct insurance, unless such reinsurance is prohibited by its articles of incorporation.
- (b) A domestic stock insurer may reinsure all or sub-7 stantially all its business in force, or substantially all of a major class thereof, with another insurer by an agreement 9 of bulk reinsurance; but no such agreement shall become effective unless filed with and approved in writing by the 10 11 commissioner.
- 12 (c) The commissioner shall approve such agreement 13 within a reasonable time after such filing unless he finds 14 that it is inequitable to the stockholders of the domestic insurer or would substantially reduce the protection or

7

8

11

20

3

service to its policyholders. If the commissioner does not approve the agreement he shall so notify the insurer in 18 writing specifying his reasons therefor.

Sec. 27. Reinsurance by Mutual Insurers.—(a) A domes-2 tic mutual insurer may accept reinsurance for the same 3 kinds of insurance and within the same limits as it is authorized to transact direct insurance unless such re-5 insurance is prohibited by its articles of incorporation.

- (b) A domestic mutual insurer may reinsure all or substantially all its business in force, or all or substantially all of a major class thereof, with another insurer, stock or mutual, by an agreement of bulk reinsurance after com-10 pliance with the following:
- (1) In advance of such reinsurance the agreement 12 therefor shall be filed with and be subject to the approval 13 of the commissioner within a reasonable time after such 14 filing. The commissioner shall not approve the agree-15 ment unless he finds it to be fair and equitable to each 16 domestic insurer involved, and that such reinsurance if effectuated would not substantially reduce the protection 17 18 or service to its policyholders. If the commissioner does not so approve, he shall so notify each insurer involved in writing specifying his reasons therefor.
- 21 (2) The plan and agreement for such reinsurance must 22 be approved by vote of not less than two-thirds of each 23 domestic mutual insurer's members voting thereon at 24 meetings of members called for the purpose, pursuant to such reasonable notice and procedure as the commissioner 26 may approve. If a life insurer, right to vote may be 27 limited to members whose policies have face amounts of 28 not less than one thousand dollars and have been in force 29 one year or more.

Sec. 28. Mergers and Consolidations of Mutual Insurers. 2 — (a) A domestic mutual insurer shall not merge or consolidate with a stock insurer.

- 4 (b) A domestic mutual insurer may merge or consolidate with another mutual insurer in accordance with procedures prescribed by general laws applying to corp-7 orations formed for profit, except as hereinbelow provided.
 - (c) The plan and agreement for merger or consolida-

9 tion shall be submitted to and approved by at least two-10 thirds of the members of each mutual insurer involved voting thereon at meetings called for the purpose pursuant 12 to such reasonable notice and procedure as has been approved by the commissioner. If a life insurer, right to 13 vote may be limited to members whose policies are in face 15 amount of not less than one thousand dollars and have 16 been in force one year or more.

17

18

19

20 21

22

25

26

27

28

29 30

11

13

15

16

- (d) No such merger or consolidation shall be effectuated unless in advance thereof the plan and agreement therefor have been filed with and approved in writing by the commissioner. The commissioner shall give such approval within a reasonable time after such filing unless he finds such plan or agreement:
- 23 (1) Inequitable to the policyholders of any domestic 24 insurer involved; or
 - (2) Would substantially reduce the security of and service to be rendered to policyholders of the domestic insurer in West Virginia or elsewhere.

If the commissioner does not approve such plan or agreement he shall so notify the insurer in writing specifying his reasons therefor.

Sec. 29. Mutual Member's Share of Assets on Liquidation.—(a) Upon any liquidation of a domestic mutual 3 insurer, its assets remaining after discharge of its indebted-4 ness, policy obligations, repayment of contributed or borrowed surplus, if any, and expenses of administration, shall be distributed to existing persons who were its members at any time within thirty-six months next preceding the date such liquidation was authorized or ordered, or date of last termination of the insurer's license, whichever 9 10 date is the earliest.

(b) The distributive share of each such member shall be in the proportion that the aggregate premiums earned by the insurer on the policies of the member during the combined periods of his membership, bear to the aggregate 14 of all premiums so earned on the policies of all such members. The insurer may, and a life insurer shall, make a reasonable classification of its policies so held by such members and a formula based upon such classification for

17

20

- determining the equitable distributive share of each such
- 20 member. Such classification and formula shall be subject
- 21 to the approval of the commissioner.

Article 6. The Insurance Policy

Section 1. Scope of Article.—This article shall not apply 2 to reinsurance or ocean marine and foreign trade insur-3 ance.

- Sec. 2. Insurable Interest, Personal Insurance.—(a) Any 2 individual of competent legal capacity may procure or effect an insurance contract upon his own life or body for 4 the benefit of any person. But no person shall procure or 5 cause to be procured any insurance contract upon the life 6 or body of another individual unless the benefits under 7 such contract are payable to the individual insured or his personal representative or to a person having, at the time 9 when such contract was made, an insurable interest in 10 the individual insured.
- (b) If the beneficiary, assignee, or other payee under 12 any contract made in violation of this section receives from 13 the insurer any benefits thereunder accruing upon the 14 death, disablement, or injury of the individual insured, the individual insured or his executor or administrator, as the 15 16 case may be, may maintain an action to recover such benefits from the person so receiving them.
- 18 (c) "Insurable interest" with reference to personal in-19 surance includes only interests as follows:
- (1) In the case of individuals related closely by blood 21 or by law, a substantial interest engendered by love and 22 affection.
- 23 (2) In the case of other persons, a lawful and substan-24 tial economic interest in having the life, health, or bodily 25 safety of the individual insured continue, as distinguished from an interest which would arise only by, or would be 26 enhanced in value by, the death, disablement or injury of 28 the individual insured.
- 29 (3) An individual heretofore or hereafter party to a 30 contract or option for the purchase or sale of an interest in a business partnership or firm, or of shares of stock of a closed corporation or of an interest in such shares, has

- 33 an insurable interest in the life of each individual party 34 to such contract and for the purposes of such contract only, 35 in addition to any insurable interest which may otherwise
- 36 exist as to the life of such individual.
 - Sec. 3. Insurable Interest in Property.—(a) No insurance contract on property or of any interest therein or arising therefrom shall be enforceable as to the insurance except for the benefit of persons having an insurable interest in the things insured.
- 6 (b) "Insurable interest" as used in this section means
 7 any actual, lawful, and substantial economic interest in
 8 the safety or preservation of the subject of the insurance
 9 free from loss, destruction, or pecuniary damage or im10 pairment.
- 11 (c) The measure of an insurable interest in property is 12 the extent to which the insured might be damnified by loss, 13 injury, or impairment thereof.
 - Sec. 4. Power of Minor to Contract.—(a) Any person of 2 competent legal capacity may contract for insurance.
- (b) A minor not less than fifteen years of age as at 3 nearest birthday, may notwithstanding such minority, contract for life or accident and sickness insurance on his own life or body, for his own benefit or for the benefit of his father or mother, spouse, child, brother, sister or grandparents. Such a minor shall, notwithstanding such minori-8 ty, be deemed competent to exercise all rights and powers with respect to or under any contract of life or accident 10 and sickness on his own life or body, as though of full 11 legal age, and may surrender his interest therein and give 12 a valid discharge for any benefit accruing or money pay-13 14 able thereunder. The minor shall not, by reason of his minority, be entitled to rescind, avoid or repudiate the 15 contract, nor to rescind, avoid or repudiate any exercise 16 17 of a right or privilege thereunder, except that such minor, not otherwise emancipated, shall not be bound by any un-18 performed agreement to pay, by promissory note or other-19 wise, any premium on any such insurance contract. 20
- Sec. 5. Application Required.—No life or accident and 2 sickness insurance contract upon an individual, except a

- 3 contract of group life insurance or of group accident and 4 sickness insurance, shall be made unless at the time of the 5 making of the contract the individual insured, being of 6 competent legal capacity to contract, applies therefor or consents thereto, except in the following cases:
- 8 (a) A spouse may procure such insurance upon the 9 other spouse.
- 1û (b) Any person having an insurable interest in the life 11 of a minor, or any person upon whom a minor is dependent 12 for support and maintenance, may procure insurance upon 13 the life of or pertaining to such minor.
 - Sec. 6. Application as Evidence.—(a) No application for the issuance of any life or accident and sickness insurance policy or contract shall be admissible in evidence in 4 any action relative to such policy or contract, unless a true 5 copy of the application was attached to or otherwise made 6 a part of the policy when issued. This paragraph shall not apply to industrial life insurance policies.
- (b) If any policy of life or accident and sickness insur-9 ance delivered in this State is reinstated or renewed, and 10 the insured or the beneficiary or assignee of the policy 11 makes written request, together with in the case of a 12 beneficiary evidence of the beneficiary's vested interest 13 in the policy, to the insurer for a copy of the application, 14 if any, for such reinstatement or renewal, the insurer 15 shall, within thirty days after receipt of such request at 16 its home office or at any of its branch offices, deliver or 17 mail to the person making such request a copy of such 18 application. If such copy is not so delivered or mailed 19 after having been so requested, the insurer shall be precluded from introducing the application in evidence in any 21 action or proceeding based upon or involving the policy 22 or its reinstatement or renewal.
- (c) As to kinds of insurance other than life and accident 24 and sickness insurance, no application for insurance signed by or on behalf of the insured shall be admissible in evi-26 dence in any action between the insured and the insurer 27 arising out of the policy so applied for, if the insurer has 28 failed, at expiration of thirty days after receipt by the 29 insurer of written demand therefor by or on behalf of the

- 30 insured, to furnish to the insured a copy of such applica-31 tion reproduced by any legible means.
 - Sec. 7. Representations in Applications.—All statements
 - 2 and descriptions in any application for an insurance policy
 - 3 or in negotiations therefor, by or in behalf of the insured,
 - 4 shall be deemed to be representations and not warranties.
- 5 Misrepresentations, omissions, concealments of facts, and
- 6 incorrect statements shall not prevent a recovery under
- 7 the policy unless:

11 12

13

20 21

forms.

- (a) Fraudulent; or
- 9 (b) Material either to the acceptance of the risk, or to 10 the hazard assumed by the insurer; or
 - (c) The insurer in good faith would either not have issued the policy, or would not have issued a policy in as large an amount, or would not have provided coverage
- 14 with respect to the hazard resulting in the loss, if the true
- 15 facts had been made known to the insurer as required
- 16 either by the application for the policy or otherwise.
- Sec. 8. Approval of Forms.—(a) Except as provided in section eight of article seventeen of this chapter (fire and marine forms), no insurance policy form, no group certificate form, no insurance application form where written application is required and is to be made a part of the 5 policy, and no rider, endorsement or other form to be 7 attached to any policy, shall be delivered or issued for delivery in this State by an insurer unless it has been filed with and approved by the commissioner, except that as 10 to group insurance policies delivered outside this State, only the group certificates to be delivered or issued for 11 12 delivery in this State shall be filed with the commissioner 13 upon his request. This section shall not apply to policies, 14 riders, endorsements, or forms of unique character design-15 ed for and used with relation to insurance upon a particu-16 lar subject, or which relate to the manner of distribution 17 of benefits or to the reservation of rights and benefits under life or accident and sickness insurance policies, and 18 are used at the request of the individual policyholder,

contract holder, or certificate holder, nor to surety bond

43

45

46

47

- 22 (b) Every such filing shall be made not less than thirty 23 days in advance of any such delivery. At the expiration of 24 such thirty days the form so filed shall be deemed approved 25 unless prior thereto it has been affirmatively approved or disapproved by the commissioner. Approval of any such 26 form by the commissioner shall constitute a waiver of any 27 unexpired portion of such waiting period. The commissioner may extend by not more than an additional thirty days the period within which he may so affirmatively approve or disapprove any such form, by giving notice of 31 32 such extension before expiration of the initial thirty day 33 period. At the expiration of any such period as so extended, and in the absence of such prior affirmative approval or disapproval, any such form shall be deemed approved. The commissioner may at any time, after notice and for cause shown, withdraw any such approval. 37
- 38 (c) Any order of the commissioner disapproving any 39 such form or withdrawing a previous approval shall state 40 the grounds therefor.
- (d) The commissioner may, by order, exempt from the 42 requirements of this section for so long as he deems proper any insurance document or form or type thereof as speci-44 fied in such order, to which, in his opinion, this sectin may not practicably be applied, or the filing and approval of which are, in his opinion, not desirable or necessary for the protection of the public.
- (e) This section shall apply also to any form used by domestic insurers for delivery in a jurisdiction outside 50 West Virginia, if the insurance supervisory official of such 51 jurisdiction informs the commissioner that such form is 52 not subject to approval or disapproval by such official, and upon the commissioner's order requiring the form to be 54 submitted to him for the purpose. The applicable same 55 standards shall apply to such forms as apply to forms for 56 domestic use.
 - Sec. 9. Grounds for Disapproval.—The commissioner 2 shall disapprove any such form of policy, application, 3 rider, or endorsement or withdraw any previous approval 4 thereof:

- comply with this chapter. 9 (a) If it is in any respect in violation of or does not G
- consistent, ambiguous, or misleading clauses, or excep-8 (b) If it contains or incorporates by reference any in-L
- tions and conditions which deceptively affect the risk pur-6
- tract, Π ported to be assumed in the general coverage of the connτ
- (c) If it has any title, heading, or other indication of its 15
- provisions which is misleading. 13
- (d) If the purchase of such policy is being solicited by ÐΙ
- (e) If the benefits provided therein are unreasonable 91 deceptive advertising, 32
- in relation to the premium charged. LI
- (f) If the coverages provided therein are not sufficiently
- broad to be in the public interest.

Sec. 10, Standard Provisions.—(a) Insurance contracts

6 insured and inconsistent with the purposes of the policy, 8 such provision unnecessary for the protection of the vision in a particular insurance policy form, if he finds may waive the required use of a particular standard prog tracts of particular kinds of insurance. The commissioner the applicable provisions of this chapter pertaining to conshall contain such standard provisions as are required by

with or contradictory to any standard provision used or 11 (b) No policy shall contain any provision inconsistent 10 and the policy is otherwise approved by him.

than the standard provisions or optional standard profavorable in any particular to the insured or beneficiary any substitute provision which is, in his opinion, not less required to be used, but the commissioner may approve

vision otherwise required. This section shall not apply

to the standard fire insurance policy.

LI

91

gŢ

14

13

17

61

81

intervals or termination, a statement of the basis and rates exact amount of premium is determinable only at stated which such coverage continues, the premium (or if the ance coverage becomes effective and the term during the insurance, the risks insured against, the time the insurparties to the contract, the insurer's name, the subject of surety and group policies, shall specify the names of the Sec. 11. General Policy Contents.—Every policy, except

Entricolous St. 23)

- 9 upon which the premium is to be determined), and the 10 conditions pertaining to the insurance.
 - Sec. 12. Additional Contents.—A policy may contain 2 additional provisions not inconsistent with this chapter 3 and which are:
- 4 (a) Required to be inserted by the laws of the insurer's domicile;
- (b) Necessary, because of the manner in which the insurer is constituted or operated, in order to state the rights and obligations of the parties; or
- 9 (c) Desired by the insurer and not prohibited by law 10 nor in conflict with any provisions required to be included 11 therein and which are considered reasonable and just.
- Sec. 13. Charter or Bylaw Provisions.—No policy shall contain any provision purporting to make any portion of the charter, bylaws or other constituent document of the insurer a part of the contract unless such portion is set forth in full in the policy. Any policy provision in violation of this section shall be invalid. This section shall not apply to the subscribers agreement or power of attorney of a reciprocal insurer.
- Sec. 14. Policy Restrictions Voided.—No policy delivered or issued for delivery in West Virginia and covering a subject of insurance resident, located, or to be performed in West Virginia, shall contain any condition, stipulation or agreement requiring such policy to be construed according to the laws of any other state or country, except as necessary to meet the requirements of the motor vehicle 8 financial responsibility laws or compulsory disability bene-9 fit laws of such other state or country, or preventing the 10 bringing of an action against any such insurer for more 11 than six months after the cause of action accrues, or limit-12 ing the time within which an action may be brought to a 13 period of less than two years from the time the cause of action accrues in connection with all insurances other than 15 marine insurances; in marine policies such time shall not 16 be limited to less than one year from the date of occur-17 rence of the event resulting in the loss. Any such condi-18 tion, stipulation or agreement shall be void, but such

- 19 voidance shall not affect the validity of the other pro-
- 20 visions of the policy. This section shall not apply to the
- 21 standard fire insurance policy.

16

17

- Sec. 15. Execution of Policies.—Every insurance policy shall be executed in the name of and on behalf of the insurer by its officer, attorney-in-fact, employee, or representative duly authorized by the insurer. A facsimile signature of any such executing individual may be used in lieu of an original signature, except that in all policies other than those approved for machine vending the countersignature shall be in original handwriting. No insurance contract heretofore or hereafter issued and which is otherwise valid shall be rendered invalid by 11 reason of the apparent execution thereof on behalf of the 12 insurer by the imprinted fascimile signature of an indi-13 vidual not authorized so to execute as of the date of the 14 policy.
 - Sec. 16. Underwriters' and Combination Policies.—(a)
 2 Two or more licensed insurers may jointly issue, and shall
 3 be jointly and severally liable on, an underwriters' policy
 4 bearing their names. Any one insurer may issue policies
 5 in the name of an underwriter's department and such
 6 policy shall plainly show the true name of the insurer.
 - (b) Two or more insurers may, with the approval of the commissioner, issue a combination policy which shall contain provisions substantially as follows:
- 10 (1) That the insurers executing the policy shall be 11 severally liable for the full amount of any loss or damage, 12 according to the terms of the policy, or for specified per-13 centages or amounts thereof, aggregating the full amount 14 of insurance under the policy, and
 - (2) That service of process, or of any notice or proof of loss required by such policy, upon any of the insurers executing the policy, shall constitute service upon all such insurers.
- (c) This section shall not apply to co-surety obligations.
 Sec. 17. Validity of Noncomplying Forms.—Any insurance policy, rider, or endorsement hereafter issued and otherwise valid which contains any condition or provision not in compliance with the requirements of this chapter,

- 5 shall not be thereby rendered invalid but shall be con-6 strued and applied in accordance with such conditions 7 and provisions as would have applied had such policy, 8 rider, or endorsement been in full compliance with this 9 chapter.
- Sec. 18. Binders.—(a) Binders or other contracts for temporary insurance may be made orally or in writing, and shall be deemed to include all the usual terms of the policy as to which the binder was given together with such applicable endorsements as are designated in the binder, except as superseded by the clear and express terms of the binder.
- 8 (b) No binder shall be valid beyond the issuance of the 9 policy with respect to which it was given, and no agent 10 or insurer shall issue a binder covering a period in excess 11 of ninety days from its effective date.
- 12 (c) If the policy has not been issued a binder may be
 13 extended or renewed beyond such ninety days with the
 14 written approval of the commissioner, or in accordance
 15 with such rules and regulations relative thereto as the
 16 commissioner may promulgate.
- 17 (d) This section shall not apply to conditional receipts 18 issued by life and accident and sickness insurers, nor to 19 policies of group insurance.
- Sec. 19. Renewal by Certificate.—Any insurance policy terminating by its terms at a specified expiration date and not otherwise renewable, may be renewed or extended at the option of the insurer and upon a currently authorized policy form and at the premium rate then required therefor for a specific additional period or periods by certificate or by endorsement of the policy, and without requiring the issuance of a new policy when such certificate and its use for such purpose have been approved by the commissioner.
- Sec. 20. Assignment of Policies.—Whenever the insured in a policy owned by him has reserved to himself the right to change the beneficiary thereunder, the insured shall have the right to and may assign said policy to the extent permitted by the terms thereof as collateral security for

- 6 a loan or loans, or for any other purpose without any
- 7 beneficiary thereunder joining therein or assenting there-
- 8 to, and such assignmnt shall subordinate the rights and
- 9 interests of any beneficiary in the proceeds of the policy
- 10 to the rights and interests of the assignee as created and
- 11 defined by such assignment.
 - Sec. 21. Annulment of Liability Policies.—No insurance
 - 2 policy insuring against loss or damage through legal
- 3 liability for the bodily injury or death by accident of any
- 4 individual, or for damage to the property of any person,
- 5 shall be retroactively annulled by any agreement between
- 6 the insurer and the insured after the occurrence of any
- 7 such injury, death, or damage for which the insured may
- 8 be liable, and any such attempted annulment shall be void.
 - Sec. 22. Payment Discharges Insurer.—Whenever the
- 2 proceeds of or payments under a life or accident and sick-
- 3 ness policy or annuity contract heretofore or hereafter
- 4 issued become payable in accordance with the terms of
- 5 such policy or contract, or the exercise of any right or
- 6 privilege thereunder, and the insurer makes payment
- 7 thereof in accordance with the terms of the policy or con-
- 8 tract or in accordance with any written assignment there-
- 9 of, the person then designated in the policy or contract or
- or, the person their designated in the point, or constant or
- 10 by such assignment as being entitled thereto shall be
- 11 entitled to receive such proceeds or payments and to give
- 12 full release therefor, and such payments shall fully dis-13 charge the insurer from all claims under the policy or
- 13 charge the insurer from all claims under the policy or 14 contract unless, before payment is made, the insurer has
- 15 received at its home office written notice by or on behalf
- 16 of some other person that such other person claims to be
- 17 entitled to such payment or some interest in the policy or
- 10 and the at
- 18 contract.
 - Sec. 23. Release by Minor.—Any minor domiciled in this
- 2 State who has attained the age of eighteen years shall be
- 3 deemed competent to receive and to give full acquittance
- 4 and discharge for a payment or payments in aggregate
- 5 amount not exceeding \$2,000 in any one year made by a
- 6 life insurer as benefits payable to such minor in com-
- 7 pliance with the provisions of an insurance policy, annuity

- 8 contract or settlement agreement. No such minor shall
- 9 be deemed competent to alienate the right to or to antici-
- 10 pate such payments. This section shall not be deemed to
- 11 restrict the rights of minors set forth in paragraph (b) of
- 12 section four of this article.
 - Sec. 24. Simultaneous Deaths.—Where the individual
 - 2 insured or the annuitant and the beneficiary designated
 - 3 in a life policy or policy insuring against accidental death
 - 4 or in an annuity contract have died and there is not suffi-
 - 5 cient evidence that they have died otherwise than simul-
 - 6 taneously, the proceeds of the policy or contract shall be
 - distributed as if the insured or annuitant had survived
 - 8 the beneficiary, unless otherwise specifically provided in
 - 9 the policy or contract.
 - Sec. 25. Proof of Loss Forms.—An insurer shall furnish,
 - 2 upon written request of any person claiming to have a
 - 3 loss under an insurance contract issued by such insurer,
 - 4 forms of proof of loss for completion by such person.
 - Sec. 26. Defenses Not Waived.--Without limitation of
 - any right or defense of an insurer otherwise, none of the
 - 3 following acts by or on behalf of an insurer shall be
 - 4 deemed to constitute a waiver of any provision of a policy
 - or of any defense of the insurer thereunder:
 - (a) Acknowledgment of the receipt of notice of loss or 7 claim under the policy.

 - (b) Furnishing forms for reporting a loss or claim, for
 - 9 giving information relative thereto, or for making proof
- 10 of loss, or receiving or acknowledging receipt of any such
- forms or proofs completed or uncompleted. 11
- 12 (c) Investigating any loss or claim under any policy
- 13 or engaging in negotiations looking toward a possible set-
- 14 tlement of any such loss or claim.
 - Sec. 27. Life Insurance Proceeds Exempt From Credi-
- 2 tors.—(a) If a policy of insurance, whether heretofore
- or hereafter issued, is effected by any person on his own
- 4 life or on another life, in favor of a person other than
- 5 himself, or, except in cases of transfer with intent to
- 6 defraud creditors, if a policy of life insurance is assigned
- or in any way made payable to any such person, the

8 lawful beneficiary or assignee thereof, other than the 9 insured or the person so effecting such insurance or exec-10 utors or administrators of such insured or the person so 11 effecting such insurance, shall be entitled to its proceeds 12 and avails against the creditors and representatives of the insured and of the person effecting the same, whether 14 or not the right to change the beneficiary is reserved or permitted, and whether or not the policy is made payable 15 to the person whose life is insured if the beneficiary or 16 17 assignee shall predecease such person.

18

19

20

22

23 24

25 26

27

28

29

31

32

- (b) Subject to the statute of limitations, the amount of any premiums for such insurance paid in fraud of creditors, with interest thereon, shall inure to their benefit from the proceeds of the policy, but the insurer issuing the policy shall be discharged of all liability thereon by payment of the proceeds in accordance with its terms, unless before such payment the insurer received written notice by or in behalf of some creditor, with specification of the amount claimed, claiming to recover for certain premiums paid in fraud of creditors.
- (c) For the purposes of paragraph (a), above, a policy shall also be deemed to be payable to a person other than the insured if and to the extent that a facility-of-payment clause or similar clause in the policy permits the insurer to discharge its obligations after the death of the individual insured by paying the death benefits to a person as permitted by such clause.
- Sec. 28. Group Life Insurance Proceeds Exempt From Creditors.—(a) A policy of group life insurance or the proceeds thereof payable to the individual insured or to the beneficiary thereunder, shall not be liable, either before or after payment, to be applied by any legal or equitable process to pay any liability of any person having a right under the policy.
- 8 (b) This section shall not apply to group life insurance 9 issued to a creditor covering his debtors, to the extent 10 that such proceeds are applied to payment of the obliga-11 tion for the purpose for which the insurance was so issued.
- Sec. 29. Policies to Cover Injuries to Guest Passengers.
 2 —No insurer shall issue any policy of bodily injury or

- 3 property damage liability insurance which excludes cov-
- 4 erage to the owner or operator of a motor vehicle on
- 5 account of bodily injury or property damage to any guest
- 6 or invitee who is a passenger in such motor vehicle.
 - Sec. 30. Construction of Policies.—Every insurance con-
- 2 tract shall be construed according to the entirety of its
- 3 terms and conditions as set forth in the policy and as
- 4 amplified, extended, or modified by any rider, endorse-
- 5 ment, or application attached to and made a part of the
- 6 policy.

Article 7. Assets and Liabilities

- Section 1. Assets Defined.—In any determination of the financial condition of an insurer, there shall be allowed as assets only such assets as are owned by the insurer and which consist of:
- (a) Cash in the possession of the insurer, or in transit under its control, and including the true balance of any deposit in a solvent bank or trust company.
- 8 (b) Investments, securities, properties and loans ac quired or held in accordance with this chapter, and in connection therewith the following items:
- (1) Interest due or accrued on any bond or evidence
 of indebtedness which is not in default and which is not
 valued on a basis including accrued interest.
- 14 (2) Declared and unpaid dividends on stock and shares, 15 unless such amount has otherwise been allowed as an 16 asset.
- 17 (3) Interest due or accrued upon a collateral loan in 18 an amount not to exceed one year's interest thereon.
- 19 (4) Interest due or accrued on deposits in solvent banks 20 and trust companies, and interest due or acrued on other 21 assets, if such interest is in the judgment of the commis-22 sioner a collectible asset.
- 23 (5) Interest due or accrued on a mortgage loan, in an amount not exceeding in any event the amount, if any, of the excess of the value of the property less delinquent taxes thereon over the unpaid principal; but in no event shall interest accrued for a period in excess of eighteen months be allowed as an asset.

29 (6) Rent due or accrued on real property if such rent 30 is not in arrears for more than three months, and rent more than three months in arrears if the payment of such rent be adequately secured by property held in the name of the tenant and conveyed to the insurer as collateral.

33

34

35

36

37

40

41 42

43

44

45

47

50

51 52

53

54

55

56 57

58

59

60

61

62

63

64

65

66

67

- (7) The unaccrued portion of taxes paid prior to the due date on real property.
- (c) Premium notes, policy loans, and other policy assets and liens on policies and certificates of life insurance and annuity contracts and interest due and accrued thereon, in an amount not exceeding the legal reserve and other policy liabilities carried on each individual policy.
- (d) The net amount of uncollected and deferred premiums and annuity considerations in the case of a life insurer.
- (e) Premiums in the course of collection, other than for life insurance, not more than three months past due, less commissions payable thereon. The foregoing limitation shall not apply to premiums payable directly or indirectly by the United States government or by any of its instrumentalities.
- (f) Instalment premiums other than life insurance premiums, in accordance with regulations prescribed by the commissioner.
- (g) Notes and like written obligations not past due, taken for premiums other than life insurance premiums, on policies permitted to be issued on such basis, to the extent of the unearned premium reserves carried thereon.
- (h) The full amount of reinsurance recoverable by a ceding insurer from a solvent reinsurer and which reinsurance is authorized under this chapter.
- (i) Amounts receivable by an assuming insurer representing funds withheld by a solvent ceding insurer under a reinsurance treaty.
- (i) Deposits or equities recoverable from underwriting associations, syndicates and reinsurance funds, or from any suspended banking institution, to the extent deemed by the commissioner available for the payment of losses and claims and at values to be determined by him,
 - (k) All assets, whether or not consistent with the pro-

- visions of this section, as may be allowed pursuant to the annual statement form approved by the commissioner for the kinds of insurance to be reported upon therein.
- 72 (1) Other assets, not inconsistent with the provisions of this section, deemed by the commissioner to be available for the payment of losses and claims, at values to be determined by him.
- Sec. 2. Deductions From Assets and Liabilities.—Assets may be allowed as deductions from corresponding liabili-3 ties, and liabilities may be charged as deductions from 4 assets, and deductions from assets may be charged as 5 liabilities, in accordance with the form of annual state-6 ment applicable to such insurer as prescribed by the commissioner, or otherwise in his discretion.
- Sec. 3. Assets Not Allowed.--In addition to assets impliedly excluded by the provisions of section one of this article, the following expressly shall not be allowed as 4 assets in any determination of the financial condition of 5 an insurer:
 - (a) Good will, trade names and other like intangible assets.
- 8 (b) Advances to officers (other than policy loans) whether secured or not, and advances to employees. agents, and other persons on personal security only. 10
- (c) Stock of such insurer, owned by it, or any equity 11 12 therein or loans secured thereby, or any proportionate interest in such stock acquired or held through the ownership by such insurer of an interest in another firm, 15 corporation or business unit.
- (d) Furniture, fixtures, furnishings, safes, vehicles, 16 17 libraries, stationery, literature and supplies, and except, in the case of any insurer, such personal property as the 19 insurer is permitted to hold pursuant to article eight of 20 this chapter, or which is acquired through foreclosure of chattel mortgages acquired pursuant to article eight of this chapter, or which is reasonably necessary for the maintenance and operation of real estate lawfully acquired and held by the insurer other than real estate used 25 by it for home office, branch office and similar purposes. 26
 - (e) The amount, if any, by which the aggregate book

- 27 value of investments as carried in the ledger assets of 28 the insurer exceeds the aggregate value thereof as de-29 termined under this chapter.
 - Sec. 4. Reporting Assets Not Allowed.—All assets not allowed and all other assets of doubtful value or character included as assets in any statement by an insurer to the commissioner, or in any examiner's report to him, shall also be reported, to the extent of the value disallowed, as deductions from the gross assets of such insurer except where the commissioner permits a reserve to be carried among the liabilities of such insurer in lieu of any such deduction.
 - Sec. 5. Liabilities.—In any determination of the financial condition of an insurer, capital stock and liabilities to be charged against its assets shall include:

5

9

12

13

14 15

18

19

20

21

22

23

24

- (a) The amount of its capital stock outstanding, if any;
- (b) The amount, estimated consistent with the provisions of this chapter, necessary to pay all of its unpaid losses and claims incurred on or prior to the date of statement, whether reported or unreported, together with the expenses of adjustment or settlement thereof;
- 10 (c) With reference to life and accident and sickness insurance and annuity contracts: 11
 - (1) The amount of reserves on life insurance policies and annuity contracts in force, valued according to the tables of mortality, rates of interest, and methods adopted pursuant to this chapter which are applicable thereto,
- 16 (2) Reserves for disability benefits, for both active and 17 disabled lives,
 - (3) Reserves for accidental death benefits, and
 - (4) Any additional reserves which may be reasonably required by the commissioner on account of such insurance.
- (d) With reference to insurance other than specified in paragraph (c) of this section, the amount of reserves equal to the unearned portions of the gross premiums charged on policies in force, computed in accordance with 26 this article.
- 27 (e) Taxes, expenses and other obligations due or ac-28 crued at the date of the statement.

- Sec. 6. Unearned Premium Reserve.—(a) With reference to insurance against loss or damage to property (except as provided in paragraph (e) of this section) and with reference to all general casualty insurance, and surety insurance, every insurer shall maintain an unearned premium reserve on all policies in force.
- 7 (b) The commissioner may require that such reserves 8 shall be equal to the unearned portions of the gross 9 premiums in force after deducting reinsurance in solvent 10 insurers effected in the manner provided in this chapter 11 as computed on each respective risk from the policy's 12 date of issue.
- 13 (c) All of such reserves may be computed, at the option 14 of the insurer, on a yearly or more frequent pro rata 15 basis.
- (d) After adopting a method for computing such reserve, an insurer shall not change methods without approval of the commissioner.
- 19 (e) With reference to marine insurance, premiums on 20 trip risks not terminated shall be deemed unearned, and 21 the commissioner may require the insurer to carry a re-22 serve thereon equal to one hundred percent on trip risks 23 written during the month ended as of the date of state-24 ment.
- Sec. 7. Reserves for Accident and Sickness Insurance.—
 2 For all accident and sickness policies the insurer shall
 3 maintain an active life reserve which shall place a sound
 4 value on its liabilities under such policies and which shall
 5 not be less than the reserve according to standards set
 6 forth in regulations issued by the commissioner and, in
 7 no event, less than the pro rata gross unearned premium
 8 reserve for such policies.
- Sec. 8. Increased Reserves.—(a) If the commissioner determines that an insurer's unearned premium reserve, however computed, is inadequate, he may require the insurer to compute such reserve or any part thereof according to such other method or methods as are prescribed in this article.
- 7 (b) If the loss experience of an insurer shows that its 8 loss reserves, however estimated, are inadequate, the

9 commissioner shall require the insurer to maintain loss 10 reserves in such increased amount as is needed to make 11 them adequate.

Sec. 9. Standard Valuation Law for Life Policies.— 2 (1) The commissioner shall annually value, or cause to 3 be valued, the reserve liabilities (hereinafter called reserves) for all outstanding life insurance policies and annuity and pure endowment contracts of every life insurer 6 transacting insurance in this State, except that in the case of an alien insurer such valuation shall be limited to its 8 United States business, and may certify the amount of any such reserves, specifying the mortality table or tables, 10 rate or rates of interest and methods (net level premium 11 method or other) used in the calculation of such reserves.

All valuations made by him or by his authority shall 13 be made upon the net premium basis.

12

14 15

16

17

18 19

23 24

25

26 27

28

29

30

31 32

35

37

In every case the standard of valuation employed shall be stated in his annual report.

In calculating such reserves, he may use group methods and approximate averages for fractions of a year or otherwise. In lieu of the valuation of the reserves herein required of any foreign or alien insurer, he may accept any 20 valuation made, or caused to be made, by the insurance supervisory official of any state or other jurisdiction when 21 such valuation complies with the minimum standard herein provided and if the official of such state or jurisdiction accepts as sufficient and valid for all legal purposes the certificate of valuation of the commissioner when such certificate states the valuation to have been made in a specified manner according to which the aggregate reserves would be at least as large as if they had been computed in the manner prescribed by the law of that state or jurisdiction.

Any such insurer which at any time shall have adopted any standard of valuation producing greater aggregate 33 reserves than those calculated according to the minimum standard herein provided may, with the approval of the commissioner, adopt any lower standard of valuation, but not lower than the minimum herein provided. 36

(2) This subsection shall apply to only those policies

38 and contracts issued prior to the original operative date of the Standard Nonforseiture Law (now section thirty 40 of article thirteen of this chapter). All valuations shall 41 be according to the standard of valuations adopted by the 42 insurer for the obligations to be valued. Any insurer may adopt different standards for obligations of different 44 dates or classes, but if the total value determined by any 45 such standard for the obligations for which it has been 46 adopted shall be less than that determined by the legal 47 minimum standard hereinafter prescribed, or if the in-48 surer adopts no standard, said legal minimum standard 49 shall be used.

50 The legal minimum standard for contracts issued before the first day of January, in the year one thousand nine 51 52 hundred one, shall be actuaries' or combined experience table of mortality with interest at four percent per annum, 54 and for contracts issued on or after said date shall be the 55 "American Experience Table" of mortality with interest at three and one-half percent per annum. Policies issued 56 by insurers doing business in this State may provide for 57 58 not more than one year preliminary term insurance: Pro-59 vided, however. That if the premium charged for term 60 insurance under a limited payment life preliminary term 61 policy providing for the payment of all premiums thereof 62 in less than twenty years from the date of the policy, or 63 under an endowment preliminary term policy, exceeds 64 that charged for like insurance under twenty payment 65 life preliminary term policies of the same insurer, the 66 reserve thereon at the end of any year, including the first, 67 shall not be less than the reserve on a twenty payment life preliminary term policy issued in the same year and 69 at the same age, together with an amount which shall be 70 equivalent to the accumulation of a net level premium sufficient to provide for a pure endowment at the end 71 72of the premium payment period, equal to the difference 73 between the value at the end of such period of such a 74 twenty payment life preliminary term policy and a full 75 reserve at such time of such a limited payment life or 76 endewment policy.

77 The commissioner may vary the standards of interest 78 and mortality in the case of alien insurers and in par79 ticular cases of invalid lives and other extra hazards.

80

81

82

83

84

85

86 87

88

89

90

91 92

93

94

95

96 97

98

100

Reserves for all such policies and contracts may be calculated, at the option of the insurer, according to any standards which produce greater aggregate reserves for all such policies and contracts than the minimum reserves required by this subsection.

- (3) This subsection shall apply to only those policies and contracts issued on or after the original operative date of the Standard Nonforfeiture Law (now section thirty of article thirteen of this chapter).
- (a) The minimum standard for the valuation of all such policies and contracts shall be the commissioner's reserve valuation method defined in paragraph (b), three and one-half percent interest, and the following tables:
- (i) For all ordinary policies of life insurance issued on the standard basis, excluding any disability and accidental death benefits in such policies,—the Commissioners 1941 Standard Ordinary Mortality Table.
- (ii) For all industrial life insurance policies issued on the standard basis, excluding any disability and accidental death benefits in such policies,—the 1941 Standard Industrial Mortality Table.
- 101 (iii) For annuity and pure endowment contracts, ex-102 cluding any disability and accidental death benefits in 103 such policies,—the 1937 Standard Annuity Mortality 104 Table.
- 105 (iv) For total and permanent disability benefits in or 106 supplementary to ordinary policies or contracts—Class 107 (3) Disability Table (1926) which, for active lives, shall 108 be combined with a mortality table permitted for calculating the reserves for life insurance policies.
- 110 (v) For accidental death benefits in or supplementary 111 to policies—the Inter-Company Double Indemnity Mor-112 tality Table combined with a mortality table permitted 113 for calculating the reserves for life insurance policies.
- 114 (vi) For group life insurance, life insurance issued on 115 the substandard basis and other special benefits—such 116 tables as may be approved by the commissioner.
- 117 (b) Reserves according to the commissioner's reserve 118 valuation method, for the life insurance and endowment

133

134

135

136

138

139

140

141

142

143

144

145

147

148

149

150

151

152

153

154

155

156

benefits of policies providing for a uniform amount of insurance and requiring the payment of uniform premiums shall be the excess, if any, of the present value, 122 at the date of valuation, of such future guaranteed bene-123 fits provided for by such policies, over the then present 124 value of any future modified net premiums therefor. The 125 modified net premiums for any such policy shall be such 126 uniform percentage of the respective contract premiums 127 for such benefits that the present value, at the date of 128 issue of the policy, of all such modified net premiums 129 shall be equal to the sum of the then present value of 130 such benefits provided for by the policy and the excess 131 of (A) over (B), as follows:

- (A) A net level annual premium equal to the present value, at the date of issue, of such benefits provided for after the first policy year, divided by the present value, at the date of issue, of an annuity of one per annum payable on the first and each subsequent anniversary 137 of such policy on which a premium falls due: *Provided*, however, That such net level annual premium shall not exceed the net level annual premium on the nineteen year premium whole life plan for insurance of the same amount at an age one year higher than the age at issue of such policy.
 - (B) A net one year term premium for such benefits provided for in the first policy year.

Reserves according to the commissioner's reserve valua-146 tion method for (i) life insurance policies providing for a varying amount of insurance or requiring the payment of varying premiums, (ii) annuity and pure endowment contracts, (iii) disability and accidental death benefits in all policies and contracts, and (iv) all other benefits, except life insurance and endowment benefits in life insurance policies, shall be calculated by a method consistent with the principles of this paragraph (b).

(c) In no event shall an insurer's aggregate reserves for all life insurance policies, excluding disability and accidental death benefits, be less than the aggregate reserves calculated in accordance with the method set forth in paragraph (b) and the modility table or tables

and rate or rates of interest used in calculating nonforfeiture benefits for such policies.

- 161 (d) Reserves for any category of policies, contracts or benefits as established by the commissioner may be cal-162 163 culated, at the option of the insurer, according to any 164 standards which produce greater aggregate reserves for 165 such category than those calculated according to the 166 minimum standard herein provided, but the rate or rates 167 of interest used shall not be higher than the correspond-168 ing rate or rates of interest used in calculating any non-169 forfeiture benefits provided for therein: Provided, how-170 ever, That reserves for participating life insurance poli-171 cies may, with the consent of the commissioner, be cal-172 culated according to a rate of interest lower than the rate 173 of interest used in calculating the nonforfeiture benefits 174 in such policies, with the further proviso that if such lower rate differs from the rate used in the calculation 175 176 of the nonforfeiture benefits by more than one-half per-177 cent the insurer issuing such policies shall file with the 178 commissioner a plan providing for such equitable in-179 creases, if any, in the cash surrender values and nonforfeiture benefits in such policies as the commissioner 180 181 shall approve.
- 182 (e) If the gross premium charged by any life insurer 183 on any policy or contract is less than the net premium 184 for the policy or contract according to the mortality table, 185 rate of interest and method used in calculating the re-186 serve thereon, there shall be maintained on such policy 187 or contract a deficiency reserve in addition to all other 188 reserves required by law. For each such policy or con-189 tract the deficiency reserve shall be the present value, 190 according to such standard of an annuity of the differ-191 ence between such net premium and the premium charged 192 for such policy or contract, running for the remainder of 193the premium-paying period.
 - Sec. 10. Valuation of Bonds.—(a) All bonds or other evidences of debt having a fixed term and rate of interest held by any insurer may, if amply secured and not in default as to principal or interest, be valued as follows:
 - 5 (1) If purchased at par, at the par value.

17

18

- 6 (2) If purchased above or below par, on the basis of 7 the purchase price adjusted so as to bring the value to par 8 at maturity and so as to yield in the meantime the effective 9 rate of interest at which the purchase was made, or in 10 lieu of such method, according to such accepted method of 11 valuation as is approved by the commissioner.
- 12 (3) Purchase price shall in no case be taken at a higher 13 figure than the actual market value at the time of pur-14 chase, plus actual brokerage, transfer, postage or express 15 charges paid in the acquisition of such securities.
 - (4) Unless otherwise provided by valuation established or approved by the commissioner, no such security shall be carried at above the call price for the entire issue during any period within which the security may be so called.
- 20 (b) The commissioner shall have full discretion in 21 determining the method of calculating values according 22 to the rules set forth in this section.
- Sec. 11. Valuation of Other Securities.—(a) Securities, 2 other than those referred to in section ten of this article, 3 held by an insurer shall be valued, in the discretion of the 4 commissioner, at their market value, or at their appraised 5 value, or at prices determined by him as representing their 6 fair market value, all consistent with any current method 7 for the valuation of any such security formulated or 8 approved by the commissioner.
- 9 (b) Preferred or guaranteed stocks or shares while 10 paying full dividends may be carried at a fixed value in 11 lieu of market value, at the discretion of the commissioner 12 and in accordance with such method of computation as he 13 may approve.
- Sec. 12. Valuation of Real Property.—(a) Real property acquired pursuant to a mortgage loan or contract for sale, in the absence of a recent appraisal deemed by the commissioner to be reliable, shall not be valued at an amount greater than the unpaid principal of the defaulted loan or contract at the date of such acquisition, together with any taxes and expenses paid or incurred in connection with such acquisition, and the cost of improvements thereafter made by the insurer and any amounts thereafter paid by

- 10 the insurer on assessments levied for improvements in 11 connection with the property.
- 12 (b) Other real property held by an insurer shall not be 13 valued at an amount in excess of fair value as determined 14 by recent appraisal. If valuation is based on an appraisal 15 more than three years old, the commissioner may at his 16 discretion call for and require a new appraisal in order
 - Sec. 13. Valuation of Mortgages.—Mortgages or deeds of trust on real property shall be valued in an amount equal to the unpaid balance but not exceeding sixty-six and two-thirds percent of the fair value of such real property, except that any amount in excess of sixty-six and two-thirds percent may be included to the extent the
 - 7 loan evidenced by such deed of trust or mortgage is 8 guaranteed by an agency of the federal government.

Article 8. Investments

to determine fair value.

- Section 1. Scope of Article.—Except for section twentytwo of this article which relates to investments of foreign and alien insurers, this article applies to domestic insurers only.
- Sec. 2. Authorized Investments.—The capital, surplus, assets and all other funds of insurers shall be invested only as provided in this article. The eligibility of an investment shall be determined as of the date of its making or acquisition. Any investment limitation based upon the amount of the insurer's assets or particular funds shall relate to assets or funds as shown by the insurer's annual statement as of the December thirty-first last preceding date of investment.
- Sec. 3. General Qualifications.—(a) No security or investment (other than real property acquired pursuant to
 section sixteen of this article) shall be eligible for acquisition unless it is interest bearing or interest accruing or
 dividend or income paying, is not then in default in any
 respect, and the insurer is entitled to receive for its exclusive account and benefit, the interest or income accruing
 thereon. Defaults in interest or income occurring sub-

- 9 sequent to acquisition of an investment shall not affect 10 allowance thereof as an asset.
- 11 (b) No security or investment shall be eligible for 12 purchase at a price above its market value.
- 13 (c) No provision of this article shall prohibit the ac-14 quisition by an insurer of other or additional securities or 15 property if received as a dividend or as a lawful distribu-16 tion of assets, or if acquired pursuant to a lawful and bona 17 fide agreement of bulk reinsurance, merger, or consolida-18 tion. Any investment so acquired through bulk reinsur-19 ance, merger, or consolidation, which is not otherwise 20 eligible under this article, shall be disposed of pursuant 21 to section seventeen of this article if securities, or pur-22 suant to section sixteen of this article if real property.
 - Sec. 4. Approval of Investments.—No investment or loan shall be made by an insurer unless the same has been authorized or approved by the insurer's board of directors or by a committee authorized thereby and charged with the duty of supervising or making such investment or loan. The minutes of any such committee shall be recorded and regular reports of such committee shall be submitted to the board of directors. This section does not apply to loans made by a life insurer on policies or annuity contracts.
- Sec. 5. Limitation of Investments in One Person.-An 2 insurer shall not, except with the consent of the commissioner, have at one time any combination of investments 4 in or loans upon the security of the obligations, property, or 5 securities of any one person, institution or corporation, aggregating an amount exceeding five percent of the 7 insurer's assets. This restriction shall not apply to investments in or loans upon the security of general obligations of the United States or fully guaranteed by the United 10 States or the District of Columbia or any state of the 11 United States or of political subdivisions of the State of 12 West Virginia or other states of the United States, made 13 pursuant to section seven of this article, or include policy 14 loans made under section nineteen of this article or investments in foreign securities pursuant to section eight of 16 this article.

Sec. 6. Class Limitations on Investments.—(a) Every insurer shall invest and maintain invested funds to the amount of the minimum paid-in capital or surplus required under this chapter to transact like kinds of insurance only in cash and the securities described in section seven of this article (government obligations).

- (b) The remaining assets of any insurer may be invested in the classes of securities described in the following sections of this article, and subject to restrictions or limitations contained in such sections: section seven (government securities), section eight (foreign securities) for those insurers who qualify under said section, section nine (bills of exchange, etc.), section eleven (corporate obligations), section twelve (building and loan shares, etc.), section thirteen (preferred or guaranteed stock), section fifteen (real property mortgages), section sixteen (real property), section eighteen (revenue bonds), and, subject to the limitations of paragraph (c) of this section, section ten (loans upon pledge of securities) and section fourteen (common stocks).
- (c) No insurer shall invest in more than five per centum of the total number of shares of any one corporation, nor more than two per centum of the assets of such insurer in the shares of any one corporation, nor shall any insurer invest in shares and securities of corporations in the aggregate exceeding the capital and/or surplus of such insurer, the foregoing limitations to apply to all investments made pursuant to sections ten and fourteen of this article.
- Sec. 7. Government Obligations.—An insurer may invest any of its funds in:
- 3 (a) Bonds or securities which are the direct obligation
 4 of or which are secured or guaranteed in whole or in part
 5 as to principal and interest by the United States, any state
 6 or territory of the United States, or the District of Co7 lumbia, where there exists the power to levy taxes for
 8 the prompt payment of the principal and interest of such
 9 bonds or evidences of indebtedness, and, in bonds issued
 10 by the federal land banks.
 - (b) Bonds or evidences of indebtedness which are direct

12 general obligations of any county, district, city, town, 13 village, school district, park district, or other political 14 subdivision of this State or any other state or territory 15 of the United States, or the District of Columbia, which 16 shall not be in default in the payment of any of its general obligation bonds, either principal or interest, at the date 17 18 of such investment; where they are payable from ad 19 valorem taxes levied on all the taxable property located 20 therein and the total indebtedness after deducting sink-21 ing funds and all debts incurred for self-sustaining public 22 works does not exceed ten per centum of the actual value of all taxable property therein on the basis of which the 24 last assessment was made before the date of such invest-25 ment.

- Sec. 8. Foreign Securities.—(a) An insurer authorized to transact insurance in a foreign country may invest any of its funds, in aggregate amount not exceeding by more than five percent its deposit and reserve obligations incurred in such country, in securities of or in such country possessing characteristics and of a quality similar to those required pursuant to this chapter for investments in the United States.
- 9 (b) An insurer may invest any of its funds, in an aggregate amount not exceeding five percent of its assets, in addition to any amount permitted pursuant to paragraph (a) of this section, in obligations of the governments of Canadian provinces or municipalities, and in obligations of Canadian corporations which are otherwise of equal quality to like United States public or corporate securities as prescribed in this article.
- Sec. 9. Certificates, Acceptances and Bills of Exchange.

 2 —Subject to the limit set forth in sections five and six of

 3 this article, an insurer may invest in bank certificates of

 4 deposit and bankers' acceptances, and other bills of ex
 5 change of the kind and maturities made eligible by law

 6 for purchase in the open market by federal reserve banks.
- Sec. 10. Loans Upon Pledge of Securities.—An insurer 2 may invest in loans upon the pledge of bonds, mortgages, 3 preferred or guaranteed stocks, debentures, securities or

4 evidence of indebtedness acceptable as investments for the lending insurer under the provisions of this article and subject to the same limits as to each security as is provided in this article for investment therein, if the face or current market value, whichever is less, of such mortgages is more than the amount loaned thereon, and the current market value of such bonds, preferred or guar-10 11 anteed stocks, debentures, securities or evidences of in-12 debtedness is at least twenty per centum more than the amount loaned thereon. These restrictions do not apply 13 to loans on the pledge of bonds or securities of or guaranteed by the United States.

Sec. 11. Corporate Obligations.—Subject to the limits 2 set forth in sections five and six of this article, an insurer 3 may invest in bonds or evidence of indebtedness of any 4 solvent corporation or corporations (other than those organized and chartered for the sole purpose of holding 6 the stock of other corporations), including public utility 7 corporations and bonds or evidence of indebtedness issued 8 or guaranteed by railroad corporations (including cer- 9 tificates of an equipment trust created on behalf of any 10 such railroad corporation), created under the laws of the 11 United States or of any state of the United States or the 12 District of Columbia.

Sec. 12. Building and Savings and Loan Shares, International Bank.—Subject to the limits set forth in sections five and six of this article, an insurer may invest in shares of insured state chartered building and loan associations and federal savings and loan associations, if such shares are insured by the Federal Savings and Loan Insurance Corporation and may invest in obligations issued or guaranteed by the International Bank for Reconstruction and Development.

Sec. 13. Preferred or Guaranteed Stock.—Subject to the limits set forth in sections five and six of this article, an insurer may invest in preferred or guaranteed stock issued or guaranteed by any solvent corporation or corporations created under the laws of the United States or any state, if such stock is not in default as to payment of any current dividends.

Sec. 14. Common Stocks.—Subject to the limits set forth in sections five and six of this article, an insurer may invest in the nonassessable shares of capital stock of any solvent corporation created under the laws of the United States or of any state if such corporation has paid cash dividends of not less than four percent per annum on the average market price of such common stock for a period of five fiscal years next preceding the date of acquisition by such insurer or shall have earned, during such period, an aggregate sum applicable to dividends on its common stock equal at least to an aggregate sum which would have been sufficient to pay dividends of four percent per annum on the average market price of all its common stocks outstanding during such period.

Sec. 15. Real Property Mortgages.—(a) An insurer may invest in entire first mortgages on improved unencumbered real estate or the entire issue of bonds secured thereby located within any state worth at least fifty per centum more than the amount loaned thereon, based on sound appraisal by a competent appraiser and duly certified by him, provided that the investment in any one mortgage or any one issue of bonds or any one contract for deed does not exceed twenty thousand dollars or two per centum of the insurer's assets, whichever is the greater.

- 12 (b) "Improved real estate", as used in this section, 13 means all farm land which has been reclaimed and is 14 used for the purpose of husbandry, whether for tillage 15 or pasture, and all real property on which permanent 16 buildings suitable for residence or commercial use are 17 situated.
- 18 (c) Real property shall not be deemed to be encum19 bered within the meaning of this section by reason of
 20 the existence of instruments reserving or excepting min21 eral rights and interests, rights-of-way, sewer rights and
 22 rights in walls or easements, nor by reason of building
 23 restrictions or other restrictive covenants, nor by reason
 24 of the fact that it is subject to lease under which rents
 25 or profits are reserved to the owners: *Provided*, That the
 26 security for such investment is a full and unrestricted

47

49

51

56 57

27 first lien upon such real property and that there is no 28 condition nor right of re-entry or forfeiture under which such investments can be cut off, subordinated or other-30 wise disturbed.

- (d) Notwithstanding the restrictions set forth in this 32 section any insurer may invest (1) in bonds or notes 33 secured by mortgage or trust deed insured by the federal 34 housing administration or in debentures issued by it 35 under the terms of an act of Congress of the United 36 States entitled the "National Housing Act", as heretofore 37 or hereafter amended and (2) in securities issued by 38 national mortgage associations established by or under 39 the authority of the National Housing Act, and (3) in 40 bonds or notes secured by mortgage or trust deed guar-41 anteed as to principal by the administrator of veterans' 42 affairs pursuant to the provisions of Title III of act of Congress of the United States as of June twenty-two, 43 44 one thousand nine hundred forty-four, entitled the "Serv-45 icemen's Re-Adjustment Act of one thousand nine hundred forty-four", as heretofore or hereafter amended. 46
- (e) Notwithstanding the restrictions herein set forth 48 the amount of any first mortgage investment is limited by paragraph (a) of this section may be exceeded if and 50 to the extent that such excess shall be guaranteed by the administrator of veterans' affairs pursuant to the pro-52 visions of Title III of an act of Congress of the United States of June twenty-two, one thousand nine hundred 54 forty-four, entitled the "Servicemen's Re-Adjustment Act 55 of one thousand nine hundred forty-four", as heretofore or hereafter amended.
- (f) No such insurer shall in any manner, either directly 58 or indirectly, by means of corporations, holding companies, trustees or otherwise, invest in real estate securities junior to first mortgages unless the first mortgage 60 61 in its entirety is owned by the insurer.
- Sec. 16. Real Property.—(a) No insurer may acquire or 2 hold real property except as follows:
- 3 (1) Such as shall be requisite for the convenient accommodation of the transaction of its own business; the amount invested in such real property shall not exceed

- ten per centum of the investing insurer's assets but the
- commissioner may grant permission to the insurer to
- invest in real property for such purpose, in such increased
- amount as he may deem proper on the showing made if,
- 10 upon a hearing held before him, he shall find that the
- amount represented by such percentage of the insurer's 11
- assets is insufficient to provide convenient accommoda-12
- 13 tions for the insurer's business;
- (2) Such as shall have been mortgaged to it in good 14 faith by way of security for loans previously contracted 15 or for monies due; 16
- (3) Such as shall have been conveyed to it in satis-17 faction of debts previously contracted in course of its 18 19 dealings;
- 20 (4) Such as shall have been purchased at sales or judg-21 ments, decrees or mortgages obtained or made for such 22 debts; and
- 23 (5) Such unencumbered real property as shall have been acquired in whole or in part, in exchange for real 24 property of approximately the same value theretofore 26 legally acquired and held by it;
- (6) Such as shall be held as security for contracts for 27 28 deeds;
- (7) (A) Such as may be acquired for the purpose of leasing the same to any person, firm, or corporation, or real estate already leased under the following conditions: 31
- 32 a. Where there has already been erected on said property a building or other improvements satisfactory to the purchaser, or where the lessee shall at its own cost erect thereon, free of liens, a building or other improvements 35 satisfactory to the lessor, or where the lessor under the 36 terms and conditions of a lease executed and entered into 37 simultaneously with the purchaser of the property agrees to erect a building or other improvements on said prop-39 40 erty.
- 41 b. That the said improvements shall remain on the said 42 property during the period of the lease, and in cases where the said improvements are put upon said property at the 43 cost of the lessee the said improvements at the termina-

tion of the lease shall vest, free of liens, in the owner of 46 the real estate.

47

48

49

50

51

52

53

54

55

56

57

58 59

60

61 62

63

64

65

66 67

68

69

70

71

72

73

74

75

77

78 79

- c. That during the term of the lease the lessee shall keep and maintain the said improvements in good repair. Real estate acquired pursuant to the provisions of this part (A) shall not be valued in any amount exceeding the amount actually invested reduced each year by equal decrements sufficient to write off at least seventy-five percent of the investment at the normal termination of the lease or at the end of thirty years should the term of the lease be for a longer period. The total investments of any insurer under this part (A) shall not exceed five percent of its assets, nor more than the sum of its capital and surplus, whichever is less.
- (B) Subject to approval of the commissioner, real estate for recreation, hospitalization, convalescence and retirement purposes of its employees. Such investment shall not exceed five percent of the company's surplus.
- (C) No investment shall be made by any insurer pursurant to this subparagraph (7) which will cause such insurer's investment in all real property owned or held by it directly or indirectly to exceed ten percent of its assets.
- (b) All real property acquired for purposes, or in the manner, specified in subparagraphs other than subparagraphs (1), (6) and (7) of paragraph (a) of this section may be held for a period of five years after the insurer shall have acquired title to the same and thereafter until the date specified in an order issued by the commissioner directing the insurer to dispose of the same. The date specified in such order shall be not less than six months 76 from the date of the service of the said order upon the insurer. No such order shall be issued without a hearing and a determination by the commissioner that the interests of the insurer will not suffer materially by the sale of the same within the period to be specified.
- Sec. 17. Disposal of Ineligible Securities.—(a) Secu-2 rities or other assets not proper investments under this article, but lawfully acquired through merger or consolidation with any other insurer or through a reinsurance

17 18

19

20

agreement, if such assets when originally acquired constituted legal investments for the merging, consolidating or ceding insurer which acquired them, and securities, obligations or other assets incident to the adjustment of any debt or investment when deemed by the board of directors 9 10 or investment committee to be in the best interests of the 11 insurer, shall not be considered to be acquired in viola-12 tion of this article; but all such securities, obligations or 13 other assets so acquired or accepted shall be disposed of 14 not later than five years after the date of such acquisition 15 or acceptance.

- (b) The commissioner may, upon application by the insurer, extend the time for the disposition of such securities, obligations or other assets described in paragraph (a) of this section, if he is satisfied that such insurer will suffer materially by the forced sale thereof.
- 21 (c) Any ineligible investment unlawfully acquired by 22 an insurer shall be disposed of forthwith.

Sec. 18. Revenue Bonds.—Any insurer may invest, subject to the limits prescribed by sections five and six of this article, in revenue bonds issued by any state or the United States, or any agency or instrumentality thereof, or any county, city, town, village or district of any state, if by statutory or other legal requirements applicable thereto such revenue bonds are payable as to both principal and interest from special revenues pledged or other-9 wise appropriated or by law required to be provided for the purpose of such payment (but not including any ob-10 ligations payable solely out of special assessments on 11 12 properties benefited by local improvements): Provided, 13 That such revenue bonds constitute a first and paramount 14 lien upon such special revenues and that such bonds are 15 not in default as to any payment of principal or interest. 16 No insurer shall invest in more than five percent of any 17 one issue of such revenue bonds, nor more than two per-18 cent of its assets in such revenue bonds payable from any 19 one public project, nor shall any insurer invest in such 20 revenue bonds in the aggregate exceeding ten percent of its assets, except that any insurer holding a valid license 22 in this State on the first day of January, one thousand

- 23 nine hundred fifty-six, and on such date possessed of such
- 24 revenue bonds in excess of such limits, may apply to the
- 25 commissioner for an extension of time for such period as
- 26 the commissioner deems proper for the disposal of such
- bonds under the provisions of section seventeen of this
- 28 article.
 - Sec. 19. Policy Loans.—A life insurer may lend to its
 - policyholders upon pledge of the policy as collateral se-
- curity a sum not exceeding the applicable cash surrender
- value specified in the policy.
- Sec. 20. Personal Liability of Officers, Directors, Em-
- ployees and Investment Committee; Misdemeanor.-Any
- 3 officer, director, employee, or member of the investment
- 4 committee of an insurer, who knowingly consents to a
- 5 loan or investment in violation of this article shall be
- 6 personally liable to the insurer for any loss resulting
- 7 therefrom and in addition thereto shall be guilty of a
- 8 misdemeanor.
- Sec. 21. Stock of Other Insurers; Investment in In-
- surer's Own Stock; State and National Bank Stocks.—
- (a) In addition to such insurance stocks as may be other-
- 4 wise eligible under this article, an insurer may, upon
- 5 receiving the written consent of the commissioner, use
- 6 its funds for the purchase of the controlling capital stock
- interest or of all the oustanding capital stock of another
- insurer.
- (b) No insurer shall invest in or loan any of its funds on its own stocks nor invest in or loan any of its funds 10
- on the stocks of any state or national bank. 11
 - Sec. 22. Investments of Foreign and Alien Insurers.-
 - (a) Foreign and alien insurers transacting insurance in
- 3 West Virginia shall have assets of the same general
- 4 quality as specified in this article for domestic insurers,
- 5 except that other investments authorized by the laws of
- 6 such foreign or alien insurer's state or country of domicile
- 7 may be recognized as assets in the discretion of the com-
- 8 missioner.
 - 9 (b) A foreign insurer domiciled in a state that requires
- 10 West Virginia domiciled insurers to invest in the secu-

6

- 11 rities of such state a stipulated percentage or amount of
- 12 its reserves under its policies in force in such state, shall
- 13 likewise be required to invest in similar securities of
- 14 West Virginia a like percentage or amount of its reserves
- 15 under its policies in force in West Virginia.

Article 9. Administration of Deposits

- Section 1. Deposits of Insurers.—The state treasurer of West Virginia shall accept and hold in trust, when made 3 through the commissioner, deposits of securities or funds 4 by insurers as follows:
- (a) Deposits required for a license to transact insurance 6 in West Virginia.
- 7 (b) Deposits of domestic, foreign, or alien insurers when made pursuant to the laws of other states, provinces, and countries as prerequisite for authority to transact in-10 surance in such state, province, or country.
- (c) Deposits in such additional amounts as are permit-11 12 ted to be made by section six of this article.
 - Sec. 2. Purpose of Deposits.-Such deposits shall be held for purposes as follows:
 - (a) When the deposit is required for authority to trans-4 act insurance in West Virginia the deposit shall be held 5 for the protection of all the insurer's policyholders and creditors within the United States.
- 7 (b) When the deposit is required pursuant to the laws of another state, province, or country, the deposit shall be held for such purposes as is required by such laws, and as specified by the commissioner at the time the deposit 11 is made.
- 12 (c) When the deposit is required pursuant to the re-13 taliatory provisions, section sixteen of article three of this 14 chapter, the deposit shall be held for purposes as specified in the commissioner's order requiring the deposit.
- Sec. 3. Assets Eligible for Deposit.—(a) All such deposits required for a license to transact insurance in West Virginia shall consist of cash or any combination of the 4 government obligations described in section seven of 5 article eight of this chapter.
- (b) All such deposits required pursuant to the laws of

7 another state, province, or country, or pursuant to the 8 retaliatory provision, section sixteen of article three of 9 this chapter, shall consist of such assets as are required or 10 permitted by such laws, or as required pursuant to such 11 retaliatory provision.

- Sec. 4. Trust Companies as Depositories; State of West 2 Virginia Responsible.—(a) Upon request of the insurer, the state treasurer may designate any solvent trust company or other solvent financial institution having trust powers domiciled in this State as the treasurer's depository to receive and hold any such deposit. Any such deposit so held shall be at the expense of the insurer.
- 8 (b) The State of West Virginia shall be responsible for 9 the safekeeping and return of all funds and securities deposited pursuant to this chapter with the state treasurer 10 or in any depository so designated by him. 11
- Sec. 5. Rights of Insurer During Solvency.—So long as 2 the insurer remains solvent and complies with this chap-3 ter it may:
- (a) Demand, receive, sue for and recover the income 5 from the securities or cash deposited,

4

- (b) Exchange and substitute for the deposited cash or 7 securities, or any part thereof, cash or eligible securities of equivalent or greater value, and
 - (c) Inspect, at reasonable times, any such deposit.
- Sec. 6. Excess Deposits.—An insurer may so deposit cash 2 or eligible securities in an amount exceeding its deposit required or otherwise permitted under this chapter, such 4 excess deposit to be held for the protection of such insurer's policyholders and creditors. During the solvency 6 of the insurer any such excess deposit or part thereof shall 7 be released to the insurer upon its request. During the insolvency of the insurer such excess deposit shall be 9 released only as provided in section seven of this article.
- Sec. 7. Release of Deposits.—Any deposit made in this 2 State under this chapter shall be released and returned:
- (a) To the insurer upon extinguishment by authorized reinsurance or otherwise of substantially all liability of 5 the insurer for the security of which the deposit is held;

- 6 (b) To the insurer to the extent such deposit is in 7 excess of the amount required; or
- 8 (c) Upon proper order of a court of competent jurisdic-9 tion to the receiver, conservator, rehabilitator or liquidator 10 of the insurer, or to any other properly designated official 11 or officials who succeed to the management and control of 12 the insurer's assets.
- Sec. 8. Release Only on Order.—No such release of deposited funds shall be made except upon application to and written order of the commissioner. The commissioner shall have no personal liability for any such release of any such deposit or part thereof so made by him in good faith.
- Sec. 9. Deposit Not Subject to Levy.—No judgment creditor or other claimant of an insurer shall levy upon any deposit held pursuant to this chapter, or upon any part thereof; except, that such levy may be permitted if so specified in the commissioner's order requiring the deposit pursuant to the retaliatory provision, section sixteen of article three of this chapter.

Article 10. Rehabilitation and Liquidation

Section 1. Definitions.—For the purpose of this article:

- 2 (a) "Impairment" or "insolvency". The capital of a stock insurer, or the surplus of a mutual or reciprocal insurer shall be deemed to be impaired and the insurer shall be deemed to be insolvent, when such insurer shall not be possessed of assets at least equal to all liabilities and required reserves together with its total issued and outstanding capital stock if a stock insurer, or the minimum surplus if a mutual or reciprocal insurer, required by this chapter to be maintained for the kind or kinds of insurance it is then licensed to transact.
- 12 (b) "Insurer" means any person, firm, corporation, 13 association or aggregation of persons doing an insurance 14 business and subject to the insurance supervisory author-15 ity of, or to liquidation, rehabilitation, reorganization or 16 conservation by the commissioner or the equivalent in-17 surance supervisory official of another state.
- 18 (c) "Delinquency proceeding" means any proceeding 19 commenced against an insurer pursuant to this article for

the purpose of liquidating, rehabilitating, reorganizing or conserving such insurer.

- (d) "State" means any state of the United States and also the District of Columbia, Alaska, Hawaii, and Puerto Rico.
 - (e) "Foreign country" means territory not in any state.
- (f) "Domiciliary state" means the state in which an insurer is incorporated or organized, or in the case of an insurer incorporated or organized in a foreign country, the state in which such insurer, having become authorized to do business in such state, has at the commencement of delinquency proceedings, the largest amount of its assets held in trust and assets held on deposit for the benefit of its policyholders or policyholders and creditors in the United States, and any such insurer is deemed to be domiciled in such state.
- (g) "Ancillary state" means any state other than a domiciliary state.
- (h) "Reciprocal state" means any state other than this State in which in substance and effect the provisions of the uniform insurers liquidation act, as defined in section twenty-one of this article, are in force, including the provisions requiring that the insurance commissioner or equivalent insurance supervisory official be the receiver of a delinquent insurer.
- (i) "General assets" means all property, real, personal or otherwise, not specifically mortgaged, pledged, deposited or otherwise encumbered for the security or benefit of specified persons or a limited class or classes of persons, and as to such specifically encumbered property the term includes all such property or its proceeds in excess of the amount necessary to discharge the sum or sums secured thereby. Assets held in trust and assets held on deposit for the security or benefit of all policyholders or all policyholders and creditors in the United States shall be deemed general assets.
- (j) "Preferred claim" means any claim with respect to which the law of the state or of the United States accords priority of payments from the general assets of the insurer.
 - (k) "Special deposit claim" means any claim secured

65

- by a deposit made pursuant to statute for the security or benefit of a limited class or classes of persons, but not 61 62 including any general assets.
- (1) "Secured claim" means any claim secured by mort-64 gage, trust deed, pledge, deposit as security, escrow, or otherwise, but not including special deposit claim or claims against general assets. The term also includes claims which more than four months prior to the commencement of delinquency proceedings in the state of the insurer's domicile have become liens upon specific assets by reason 70 of judicial process.
- (m) "Receiver" means receiver, liquidator, rehabilita-71 72 tor, or conservator as the context may require.
- Sec. 2. Jurisdiction, Venue and Appeal of Delinquency 2 Proceedings; Exclusive Remedy.—(a) The circuit courts 3 of this State or the judges thereof in vacation are vested 4 with exclusive original jurisdiction of delinquency pro-5 ceedings under this article, and are authorized to make 6 all necessary and proper orders to carry out the purposes 7 of this article.
- 8 (b) The venue of delinquency proceedings against a 9 domestic insurer shall be in the circuit court of the county of the insurer's principal place of business. The venue of 10 such proceedings against foreign and alien insurers shall 11 12 be in the circuit court of Kanawha County.
- 13 (c) Delinquency proceedings pursuant to this article 14 shall constitute the sole and exclusive method of liquidat-15 ing, rehabilitating, reorganizing or conserving an insurer, 16 and no court shall entertain a petition for the commencement of such proceedings unless the same has been filed 17 18 in the name of the State on the relation of the insurance 19 commissioner.
- 20 (d) An appeal shall lie to the supreme court of appeals 21 from an order granting or refusing rehabilitation, liquida-22 tion, or conservation, and from every other order in delinquency proceedings having the character of a final order as to the particular portion of the proceedings em-24 25 braced therein.
- Sec. 3. Commencement of Delinquency Proceedings.— 2 The insurance commissioner shall commence any such

3 proceeding by an application to the court for an order 4 directing the insurer to show cause why the commissioner 5 should not have the relief prayed for. On the return of 6 such order to show cause, and after a full hearing, the 7 court shall either deny the application or grant the application, together with such other relief as the nature of 9 the case and the interests of policyholders, creditors, stockholders, members, subscribers, or the public may 11 require.

- Sec. 4. *Injunctions.*—(a) Upon application by the commissioner for such an order to show cause, or at any time thereafter, the court may without notice issue an injunction restraining the insurer, its officers, directors, stockholders, members, subscribers, agents and all other persons from the transaction of its business or the waste or disposition of its property until the further order of the court.
 - (b) The court may at any time during a proceeding under this article issue such other injunctions or orders as may be deemed necessary to prevent interference with the commissioner or the proceeding, or waste of the assets of the insurer, or the commencement or prosecution of any actions, or the obtaining of preferences, judgments, attachments or other liens, or the making of any levy against the insurer or against its assets or any part thereof.
- 17 (c) Notwithstanding any other provision of law, no 18 bond shall be required of the commissioner as a prerequi-19 site for the issuance of any injunction or restraining order 20 pursuant to this section.
 - Sec. 5. Grounds For Rehabilitation of Domestic Insurers.

 —The commissioner may apply to the court for an order appointing him as receiver of and directing him to rehabilitate a domestic insurer upon one or more of the following grounds. That the insurer:
 - (a) Is impaired or insolvent.

9

10

11 12

13

14

15

16

- 7 (b) Has refused to submit its books, records, accounts 8 or affairs to reasonable examination by the commissioner.
- 9 (c) Has failed to comply with an order of the commis-10 sioner to make good an impairment of capital or surplus 11 or both.

20

26

27

28

29

36

37

- 12 (d) Has transferred or attempted to transfer substan-13 tially its entire property or business, or has entered into any transaction the effect of which is to merge substantially its entire property or business in that of any other 16 insurer without having first obtained the written approval 17 of the commissioner.
- (e) Has wilfully violated its charter or any law of this 19 State.
- (f) Has an officer, director, or manager who has refused 21 to be examined under oath concerning its affairs, for which purpose the commissioner is hereby authorized to 23 conduct and to enforce by all appropriate and available means any such examination under oath in any other state or territory of the United States, in which any such officer, director, or manager may then presently be, to the full extent permitted by the laws of such other state or territory, this special authorization considered.
- (g) Has been the subject of an application for the 30 appointment of a receiver, trustee, custodian, or sequestra-31 tor of the insurer or its property otherwise than pursuant to the provisions of this chapter, but only if such appoint-33 ment has been made or is imminent and its effect is or 34 would be to oust the courts of this State of jurisdiction 35 hereunder.
 - (h) Has consented to such an order through a majority of its directors, stockholders, members or subscribers.
- (i) Has failed to pay a final judgment rendered against it in this State upon any insurance contract issued or 39 assumed by it, within thirty days after the judgment became final or within thirty days after the time for taking an appeal has expired or within thirty days after 42 dismissal of an appeal before final determination, whichever date is the later. 44
 - Sec. 6. Grounds for Liquidation.—The commissioner 2 may apply to the court for an order appointing him as 3 receiver (if his appointment as receiver shall not be then 4 in effect) and directing him to liquidate the business of a 5 domestic insurer or of the United States branch of an 6 alien insurer having trusteed assets in this State, regard-7 less of whether or not there has been a prior order direct-

- 8 ing him to rehabilitate such insurer, upon any of the 9 grounds specified in section five of this article, or if such 10 insurer:
- 11 (a) Has ceased transacting business for a period of one 12 year, or
- 13 (b) Is an insolvent insurer and has commenced volun-14 tary liquidation or dissolution, or attempts to commence or prosecute any action or proceeding to liquidate its 15 business or affairs, or to dissolve its corporate charter, or 16 17 to procure the appointment of a receiver, trustee, cus-18 todian, or sequestrator under any law except this chapter.
 - Sec. 7. Grounds for Conserving Assets of Foreign Insurers.—The commissioner may apply to the court for an order appointing him as receiver or ancillary receiver, and directing him to conserve the assets within this State, of a foreign insurer upon any of the following grounds:
 - (a) Upon any of the grounds specified in sections five or six of this article, or

3

5

8

- 8 (b) Upon the ground that its property has been seques-9 trated in its domiciliary sovereignty or in any other 10 sovereignty.
 - Sec. 8. Grounds for Conserving Assets of Alien Insurers. —The commissioner may apply to the court for an order appointing him as receiver or ancillary receiver, and directing him to conserve the assets within this State, of any alien insurer upon any of the following grounds:
- (a) Upon any of the grounds specified in sections five or six of this article. 7
- (b) Upon the ground that the insurer has failed to comply, within the time designated by the commissioner, with an order made by him to make good an impairment 11 of its trusteed funds, or
- (c) Upon the ground that the property of the insurer 12 13 has been sequestrated in its domiciliary sovereignty or 14 elsewhere.
- Sec. 9. Grounds for Ancillary Liquidation of Foreign In-2 surers.—The commissioner may apply to the court for an 3 order appointing him as ancillary receiver of and directing 4 him to liquidate the business of a foreign insurer having

- 5 assets, business, or claims in this State upon the appoint-
- 6 ment in the domiciliary state of such insurer of a receiver,
- 7 liquidator, conservator, rehabilitator or other officer by
- 8 whatever name called for the purpose of liquidating the
- 9 business of such insurer.
- Sec. 10. Order of Rehabilitation.—(a) An order to rehabilitate a domestic insurer shall direct the commissioner forthwith to take possession of the property of the insurer and to conduct the business thereof, and to take such steps toward removal of the causes and conditions which have made rehabilitation necessary as the court may direct.
- 7 (b) If at any time the commissioner deems that further 8 efforts to rehabilitate the insurer would be useless, he 9 may apply to the court for an order of liquidation.
- 10 (c) The commissioner, or any interested person upon 11 due notice to the commissioner, at any time may apply to 12 the court for an order terminating the rehabilitation pro-13 ceedings and permitting the insurer to resume possession 14 of its property and the conduct of its business, but no such 15 order shall be granted except when, after a full hearing, 16 the court has determined that the purposes of the pro-17 ceeding have been fully accomplished.
- Sec. 11. Order of Liquidation of Domestic Insurers.—
 2 (a) An order to liquidate the business of a domestic in3 surer shall direct the commissioner forthwith to take
 4 possession of the property of the insurer, to liquidate its
 5 business, to deal with the insurer's property and business
 6 in his own name as insurance commissioner or in the name
 7 of the insurer, as the court may direct, and to give notice
 8 to all creditors who may have claims against the insurer
 9 to present such claims.
- 10 (b) The commissioner may apply for and secure an 11 order dissolving the corporate existence of a domestic 12 insurer upon his application for an order of liquidation of 13 such insurer or at any time after such order has been 14 granted.
- Sec. 12. Order of Liquidation of Alien Insurers.—An 2 order to liquidate the business of a United States branch 3 of an alien insurer having trusteed assets in this State shall

- 4 be in the same terms as those prescribed for domestic
- insurers, save and expect only that the assets of the busi-
- 6 ness of such United States branch shall be the only assets
- included therein.

10

11 12

13

15

17

18

19

20

21

22

- Sec. 13. Order of Conservation or Ancillary Liquidation of Foreign or Alien Insurers.—(a) An order to conserve the assets of a foreign or alien insurer shall require the commissioner forthwith to take possession of the property 5 of the insurer within this State and to conserve it, subject to the further direction of the court.
- 7 (b) An order to liquidate the assets in this State of a foreign insurer shall require the commissioner forthwith 8 9 to take possession of the property of the insurer within this State and to liquidate it subject to the orders of the 10 court and with due regard to the rights and powers of the 11 domiciliary receiver, as provided in this article. 12
- Sec. 14. Conduct of Delinquency Proceedings Against Domestic and Alien Insurers.—(a) Whenever under this article a receiver is to be appointed in delinquency proceedings for a domestic or alien insurer, the court shall 5 appoint the insurance commissioner as such receiver. The court shall order the commissioner forthwith to take possession of the assets of the insurer and to administer the 8 same under the orders of the court.
- (b) As domiciliary receiver, the commissioner shall be vested by operation of law with the title to all of the property, contracts, and rights of action and all of the books and records of the insurer, wherever located, as of the date of entry of the order directing him to rehabilitate 14 or liquidate a domestic insurer or to liquidate the United States branch of an alien insurer domiciled in this State. 16 and he shall have the right to recover the same and reduce the same to possession; except that ancillary receivers in reciprocal states shall have, as to assets located in their respective states, the rights and powers which are herein prescribed for ancillary receivers appointed in this State as to assets located in this State.
 - (c) The recording of a certified copy of the order directing possession to be taken in the office of the clerk of the county court of the county where the proceedings are

33

34

35

36

42

45

48

49

51

52

54

55

pending and in the office of the clerk of the county court 26 of any county wherein the insurer has property or other 27 assets, recorded in the same manner as deeds to real 28 property are recorded, shall impart the same notice as 29 would be imparted by a deed, bill of sale, or other evi-30 dence of title duly recorded or filed.

- (d) The commissioner as domiciliary receiver shall be 32 responsible for the proper administration of all assets coming into his possession or control. The court may at any time require a bond from him or his deputies if deemed desirable for the protection of such assets.
- (e) Upon taking possession of the assets of an insurer, the domiciliary receiver shall, subject to the direction of 38 the court, immediately proceed to conduct the business of the insurer or to take such steps as are authorized by this 40 article for the purpose of rehabilitating, liquidating, or conserving the affairs or assets of the insurer. 41
- (f) In connection with delinquency proceedings, the 43 commissioner may appoint one or more special deputy commissioners of insurance to act for him and may employ such counsel, clerks, and assistants as he deems necessary. The compensation of the special deputies, counsel, clerks, or assistants and all expenses of taking possession of the insurer and of conducting the proceedings shall be fixed by the receiver, subject to the approval of the court, and shall be paid out of the funds or assets of the insurer. 50 Within the limits of duties imposed upon them, special deputies shall possess all the powers given to and, in the exercise of those powers, shall be subject to all of the duties imposed upon the receiver with respect to such proceedings.
 - Sec. 15. Conduct of Delinquency Proceedings Against Foreign Insurers.—(a) Whenever under this article an ancillary receiver is to be appointed in delinquency proceedings for an insurer not domiciled in this State, the court shall appoint the insurance commissioner as ancillary receiver. The commissioner shall file a petition requesting the appointment on the grounds set forth in section nine of this article if he finds that there are sufficient 9 assets of the insurer located in this State to justify the

appointment of an ancillary receiver, or if ten or more persons resident in this State having claims against such insurer file a petition with the commissioner requesting the appointment of such ancillary receiver.

- 14 (b) The domiciliary receiver for the purpose of liqui-15 dating an insurer domiciled in a reciprocal state shall be vested by operation of law with the title to all of the 16 17 property, contracts, and rights of action and all of the 18 books and records of the insurer located in this State, and 19 he shall have the immediate right to recover balances due 20 from local agents and to obtain possession of any books 21 and records of the insurer found in this State. He shall also be entitled to recover the other assets of the insurer 23 located in this State, except that upon the appointment of 24 an ancillary receiver in this State, the ancillary receiver shall during the ancillary receivership proceedings have 26 the sole right to recover such other assets. The ancillary 27 receiver shall, as soon as practicable, liquidate from their 28 respective securities those special deposit claims and **2**9 secured claims which are proved and allowed in the 30 ancillary proceedings in this State, and shall pay the 31 necessary expenses of the proceedings. All remaining 32 assets he shall promptly transfer to the domiciliary receiver. Subject to the foregoing provisions, the ancillary receiver and his deputies shall have the same powers and 35 be subject to the same duties with respect to the adminis-36 tration of such assets as a receiver of an insurer domiciled 37 in this State.
- 38 (c) The domiciliary receiver of an insurer domiciled 39 in a reciprocal state may sue in this State to recover any 40 assets of such insurer to which he may be entitled under 41 the laws of this State.
 - Sec. 16. Claims of Nonresidents Against Domestic Insurers.—(a) In a delinquency proceeding begun in this State against a domestic insurer, claimants residing in reciprocal states may file claims either with the ancillary receivers, if any, in their respective states, or with the domiciliary receiver. All such claims must be filed on or before the last date fixed for the filing of claims in the domiciliary delinquency proceedings.

- 9 (b) Controverted claims belonging to claimants residing in reciprocal states may either be proved in this State, 10 or if ancillary proceedings have been commenced in such 12 reciprocal states, may be proved in those proceedings. In the event a claimant elects to prove his claim in ancillary 13 14 proceedings, if notice of the claim and opportunity to 15 appear and be heard is afforded the domiciliary receiver of this State as provided in section seventeen of this 17 article with respect to ancillary proceedings in this State, the final allowance of such claim by the courts in the 18 ancillary state shall be accepted in this State as conclusive 19 20 as to its amount and shall also be accepted as conclusive as to its priority, if any, against special deposits or other 21 security located within the ancillary state.
 - Sec. 17. Claims Against Foreign Insurers.—(a) In a delinquency proceeding in a reciprocal state against an insurer domiciled in that state, claimants against such insurer who reside within this State may file claims either with the ancillary receiver, if any, appointed in this State, or with the domiciliary receiver. All such claims must be filed on or before the last date fixed for the filing of claims in the domiciliary delinquency proceedings.
- (b) Controverted claims belonging to claimants resid-9 10 ing in this State may either be proved in the domiciliary state as provided by the law of that state, or if ancillary 11 proceedings have been commenced in this State, be proved 12 13 in those proceedings. In the event that any such claimant elects to prove his claim in this State, he shall file his claim 14 with the ancillary receiver and shall give notice in writing 15 16 to the receiver in the domiciliary state, either by registered 17 mail or by personal service at least forty days prior to the 18 date set for hearing. The notice shall contain a concise 19 statement of the amount of the claim, the facts on which 20 the claim is based, and the priorities asserted, if any. If the domiciliary receiver within thirty days after the giving 21 of such notice shall give notice in writing to the ancillary 22 receiver and to the claimant, either by registered mail or 23 by personal service, of his intention to contest such claim. 25 he shall be entitled to appear or to be represented in any proceeding in this State involving adjudication of the

claim. The final allowance of the claim by the courts of this State shall be accepted as conclusive as to its amount and shall also be accepted as conclusive as to its priority, if any, against special deposits or other security located within this State.

- Sec. 18. Proof of Claims.—(a) All claims against an insurer against which delinquency proceedings have been begun shall set forth in reasonable detail the amount of the claim, or the basis upon which such amount can be ascertained, the facts upon which the claim is based, and the priorities asserted, if any. All such claims shall be verified by the affidavit of the claimant, or someone authorized to act on his behalf and having knowledge of the facts, and shall be supported by such documents as may be material thereto.
 - (b) All claims filed in this State shall be filed with the receiver, whether domiciliary or ancillary, in this State, on or before the last date for filing as specified in this article.

- (c) Within ten days of the receipt of any claim, or within such further period as the court may, for good cause shown, fix, the receiver shall report the claim to the court, specifying in such report his recommendation with respect to the action to be taken thereon. Upon receipt of such report, the court shall fix a time for hearing the claim and shall direct that the claimant or the receiver, as the court shall specify, shall give such notice as the court shall determine to such persons as shall appear to the court to be interested therein. All such notices shall specify the time and place of the hearing and shall concisely state the amount and nature of the claim, the priorities asserted, if any, and the recommendation of the receiver with reference thereto.
- (d) At the hearing, all persons interested shall be entitled to appear and the court shall enter an order allowing, allowing in part, or disallowing the claim. Any such order shall be deemed to be an appealable order.
- Sec. 19. Priority of Certain Claims.—(a) In a delinquency proceeding against an insurer domiciled in this State, claims owing to residents of ancillary states shall

- 4 be preferred claims if like claims are preferred under 5 the laws of this State. All such claims owing to residents 6 or nonresidents shall be given equal priority of payment 7 from general assets regardless ●f where such assets are 8 located.
- 9 (b) In a delinquency proceeding against an insurer 10 domiciled in a reciprocal state, claims owing to residents 11 of this State shall be preferred if like claims are preferred 12 by the laws of that state.
- 13 (c) The owners of special deposit claims against an in-14 surer for which a receiver is appointed in this or any 15 other state shall be given priority against their several 16 special deposits in accordance with the provisions of the statutes governing the creation and maintenance of such 17 18 deposits. If there is a deficiency in any such deposit so 19 that the claims secured thereby are not fully discharged 20 therefrom, the claimants may share in the general assets, 21 but such sharing shall be deferred until general creditors, 22 and also claimants against other special deposits who 23 have received smaller percentages from their respective special deposits, have been paid percentages of their 25 claims equal to the percentage paid from the special de-26 posit.
- 27 (d) The owner of a secured claim against an insurer 28 for which a receiver has been appointed in this or any 29 other state may surrender his security and file his claim 30 as a general creditor, or the claim may be discharged 31 by resort to the security, in which case the deficiency, if 32 any, shall be treated as a claim against the general assets 33 of the insurer on the same basis as claims of unsecured 34 creditors. If the amount of the deficiency has been adju-35 dicated in ancillary proceedings as provided in this ar-36 ticle or if it has been adjudicated by a court of competent jurisdiction in proceedings in which the domiciliary re-38 ceiver has had notice and opportunity to be heard, such 39 amounts shall be conclusive; otherwise the amount shall 40 be determined in the delinquency proceeding in the domi-41 ciliary state.
- Sec. 20. Attachment or Garnishment of Assets.—Dur-2 ing the pendency of delinquency proceedings in this or

any reciprocal state, no action or proceeding in the nature of an attachment, garnishment or execution shall be com-5 menced or maintained in the courts of this State against 6 the delinquent insurer or its assets. Any lien obtained 7 by any such action or proceeding within four months prior to the commencement of any such delinquency pro-9 ceeding or at any time thereafter shall be void as against 10 any rights arising in such delinquency proceeding.

Sec. 21. Uniform Insurers Liquidation Act.—(a) Paragraphs (b) to (m), inclusive, of section one of this article, together with sections three, four, and fourteen to twenty, 4 inclusive, of this article constitute and may be referred to as the uniform insurers liquidation act.

5

6

7

(b) The uniform insurers liquidation act shall be so interpreted and construed as to effectuate its general purpose to make uniform the law of those states that enact 9 it. To the extent that its provisions when applicable con-10 flict with other provisions of this article the provisions of 11 such act shall control.

Sec. 22. Deposit of Monies Collected.—The monies collected by the commissioner in a proceeding under this article shall be from time to time deposited in one or 4 more state or national banks, savings banks, or trust 5 companies, and in the case of the insolvency or voluntary 6 or involuntary liquidation of any such depository which 7 is an institution organized and supervised under the laws 8 of this State, such deposits shall be entitled to priority of payment on an equality with any other priority given 10 by the banking laws of this State. The commissioner may 11 in his discretion deposit such monies or any part thereof 12 in a national bank or trust company as a trust fund.

Sec. 23. Exemption From Fees.—The commissioner shall not be required to pay any fee to any public officer in this State for filing, recording, issuing a transcript or cer-4 tificate or authenticating any paper or instrument per-5 taining to the exercise by the commissioner of any of 6 the powers or duties conferred upon him under this ar-7 ticle, whether or not such paper or instrument be exe-8 cuted by the commissioner or his deputies, employees or 9 attorneys of record and whether or not it is connected

10 with the commencement of any action or proceeding by

11 or against the commissioner, or with the subsequent con-

12 duct of such action or proceeding.

Sec. 24. Borrowing on Pledge of Asests. For the pur-2 pose of facilitating the rehabilitation, liquidation, con-3 servation or dissolution of an insurer pursuant to this 4 article, the commissioner may, subject to the approval 5 of the court, borrow money and execute, acknowledge 6 and deliver notes or other evidences of indebtedness 7 therefor and secure the repayment of the same by the 8 mortgage, pledge, assignment, transfer in trust, or hy-9 pothecation of any or all of the property, whether real, 10 personal or mixed, of such insurer, and the commissioner, 11 subject to the approval of the court, shall have power to 12 take any and all other action necessary and proper to 13 consummate any such loan and to provide for the repay-14 ment thereof. The commissioner shall be under no obli-15 gation personally or in his official capacity to repay any 16 loan made pursuant to this section.

Sec. 25. Date Rights Fixed on Liquidation.—The rights and liabilities of the insurer and of its creditors, policy-holders, stockholders, members, subscribers, and all other persons interested in its estate shall, unless otherwise directed by the court, be fixed as of the date on which the order directing the liquidation of the insurer is entered in the office of the clerk of the court which made the order, subject to the provisions of this article with respect to the rights of claimants holding contingent claims.

Sec. 26. Voidable Transfers.—(a) Any transfer of, or lien upon, the property of an insurer which is made or created within four months prior to the granting of an order to show cause under this article with the intent of giving to any creditor or of enabling him to obtain a greater percentage of his debt than any other creditor of the same class and which is accepted by such creditor having reasonable cause to believe that such preference will occur, shall be voidable.

10 (b) Every director, officer, employee, stockholder, 11 member, subscriber, and any other person acting on be-

12 half of such insurer who shall be concerned in any such act or deed and every person receiving thereby any property of such insurer or the benefit thereof shall be 15 personally liable therefor and shall be bound to account to the insurance commissioner. 16

17 18

19

22

23

25

26

- (c) The insurance commissioner as a receiver in any proceeding under this article may avoid any transfer of or lien upon the property of an insurer which any creditor, stockholder, subscriber or member of such insurer might have avoided and may recover the property so transferred unless such person was a bona fide holder for value prior to the date of the granting of an order to show 24 cause under this article. Such property or its value may be recovered from anyone who has received it except a bona fide holder for value as herein specified.
- Sec. 27. Priority of Claims for Compensation.—(a) 2 Compensation actually owing to employees other than 3 officers of an insurer, for services rendered within three 4 months prior to the commencement of a proceeding 5 against the insurer under this article, but not exceeding 6 three hundred dollars for each such employee, shall be paid prior to the payment of any other debt or claim, and in the discretion of the commissioner may be paid as soon as practicable after the proceeding has been com-10 menced; except that at all times the commissioner shall 11 reserve such funds as will in his opinion be sufficient for 12 the expenses of administration.
- (b) Such priority shall be in lieu of any other similar 14 priority which may be authorized by law as to wages or compensation of such employees.
- Sec. 28. Offsets.—(a) In all cases of mutual debts or mutual credits between the insurer and another person in connection with any action or proceeding under this 4 article, such credits and debts shall be set off and the balance only shall be allowed or paid, except as provided in subsection (b), below.
- 7 (b) No offset shall be allowed in favor of any such person where (1) the obligation of the insurer to such person would not at the date of the entry of any liquida-10 tion order or otherwise, as provided in section twenty-

- 11 five of this article, entitle him to share as a claimant 12 in the assets of the insurer, or (2) the obligation of the 13 insurer to such person was purchased by or transferred 14 to such person with a view of its being used as an offset, 15 or (3) the obligation of such person is to pay an assess-
- 16 ment levied against the members of a mutual insurer, or 17 against the subscribers of a reciprocal insurer, or is to
- 18 pay a balance upon the subscription to the capital stock
- 19 of a stock insurer.

12

17

19

21

22

23

25

26

27

28

29

30

31

- Sec. 29. Allowance of Certain Claims.—(a) No con-2 tingent claim shall share in a distribution of the assets 3 of an insurer which has been adjudicated to be insolvent 4 by an order made pursuant to this article, except that 5 such claim shall be considered, if properly presented, and 6 may be allowed to share where:
- (1) Such claim becomes absolute against the insurer 8 on or before the last day for filing proof of claims against the assets of such insurer, or
- (2) There is a surplus and the liquidation is thereafter 11 conducted upon the basis that such insurer is solvent.
- (b) Where an insurer has been so adjudicated to be 13 insolvent any person who has a cause of action against 14 an insured of such insurer under a liability insurance policy issued by such insurer shall have the right to file 15 16 a claim in the liquidation proceeding, regardless of the fact that such claim may be contingent, and such claim 18 may be allowed:
- (1) If it may be reasonably inferred from the proof 20 presented upon such claim that such person would be able to obtain a judgment upon such cause of action against such insured, and
- (2) If such person shall furnish suitable proof, unless 24 the court for good cause shown shall otherwise direct, that no further valid claim against such insurer arising out of his cause of action other than those already presented can be made, and
 - (3) If the total liability of such insurer to all claimants arising out of the same act of its insured shall be no greater than its maximum liability would be were it not in liquidation.
 - (c) No judgment against such an insured taken after

33 the date of entry of the liquidation order shall be con-34 sidered in the liquidation proceedings as evidence of lia-35 bility, or of the amount of damages, and no judgment 36 against an insured taken by default or by collusion prior 37 to the entry of the liquidation order shall be considered 38 as conclusive evidence in the liquidation proceedings, 39 either of the liability of such insured to such person upon 40 such cause of action or of the amount of damages to 41 which such person is therein entitled.

42

43

44

45

46

47

48 49

50

(d) No claim of any secured claimant shall be allowed at a sum greater than the difference between the value of the claim without security and the value of the security itself as of the date of the entry of the order of liquidation or such other date set by the court for determining rights and liabilities as provided in section twenty-five of this article unless the claimant shall surrender his security to the commissioner, in which event the claim shall be allowed in the full amount for which it is valued.

Sec. 30. Time to File Claims.—(a) If upon the granting of an order of liquidation under this article or at any time thereafter during the liquidation proceeding, the insurer shall not be clearly solvent, the court shall, after such notice and hearing as it deems proper, make an order declaring the insurer to be insolvent. Thereupon regard-7 less of any prior notice which may have been given to creditors, the commissioner shall notify all persons who 8 9 may have claims against such insurer and who have not filed proper proofs thereof to present the same to him, 10 11 at a place specified in such notice, within four months 12 from the date of entry of such order, or if the commis-13 sioner shall certify that it is necessary, within such longer 14 time as the court shall prescribe. The last day for filing of proofs of claims shall be specified in the notice, and 15 16 notice shall be given in a manner to be determined by 17 the court.

18 (b) Proofs of claim may be filed subsequent to the 19 date specified, but no such claim shall share in the dis-20 tribution of the assets until all allowed claims, proofs of 21 which have been filed before said date, have been paid 22 in full with interest.

25

26

Sec. 31. Report for Assessment.—Within three years from the date an order of rehabilitation or liquidation of a domestic mutual insurer or a domestic reciprocal insurer was entered in the office of the clerk of the court by which such order was made, the commissioner may make a report to the court setting forth:

- (a) The reasonable value of the assets of the insurer,
- 8 (b) The insurer's probable liabilities, and
- 9 (c) The probable necessary assessment, if any, to pay 10 all claims and expenses in full, including expenses of 11 administration.
- Sec. 32. Levy of Assessment.—(a) Upon the basis of the report provided for in section thirty-one of this article, including any amendments thereof, the court, ex parte, may levy one or more assessments against all members of such insurer who, as shown by the records of the insurer, were members (if a mutual insurer) or subscribers (if a reciprocal insurer) at any time within one year prior to the date of issuance of the order to show cause under section three of this article.
- 10 (b) Such assessment or assessments shall cover the 11 excess of the probable liabilities over the reasonable value of the assets, together with estimated cost of collection 13 and percent of uncollectibility thereof. The total of all assessments against any member or subscriber with re-15 spect to any policy, whether levied pursuant to this article or pursuant to any other provision of this chapter, 16 shall be for no greater amount than that specified in the 17 18 policy or policies of the member or subscriber and as 19 limited under this chapter, except that if the court finds 20 that the policy was issued at a rate of premium below 21 the minimum rate lawfully permitted for the risk insured. the court may determine the upper limit of such assess-23 ment upon the basis of such minimum rate.
 - (c) No assessment shall be levied against any member or subscriber with respect to any nonassessable policy issued in accordance with this chapter.

Sec. 33. Order to Pay Assessment.—After levy of assessment as provided in section thirty-two of this article, upon the filing of a further detailed report by the commissioner

- the court shall issue an order directing each member (if a mutual insurer) or each subscriber (if a reciprocal insurer), if he shall not pay the amount assessed against him to the commissioner on or before a day to be specified in the order, to show cause why he should not be held liable to pay such assessment, together with costs as provided in section thirty-five of this article, and to show cause why the commissioner should not have judgment therefor.
- Sec. 34. Publication and Service of Assessment Order.—

 2 The commissioner shall cause a notice of such assessment order, setting forth a brief summary of the contents of such order, to be (a) published in such manner as shall be directed by the court, and (b) enclosed in a sealed envelope, addressed and mailed postage prepaid, to each member or subscriber liable thereunder at his last known address as it appears on the records of the insurer, at least twenty days before the return day of the order to show cause provided for in section thirty-three of this article.
- Sec. 35. Judgment Upon the Assessment.—(a) Upon the return day of the order to show cause provided for in section thirty-three of this article, if the member or subscriber does not appear and serve duly verified objections upon the commissioner, the court shall make an order adjudging that such member or subscriber is liable for the amount of the assessment against him, together with costs, and that the commissioner may have judgment against the member or subscriber therefor.
 - (b) If, on such return day, the member or subscriber shall appear and serve duly verified objections upon the commissioner, there shall be a full hearing before the court which, after such hearing, shall make such order as the facts shall warrant.

11

12

13

14

15 (c) Any such order shall have the same force and 16 effect, shall be entered and docketed and may be appealed from, as if it were a judgment in an original action brought in the court in which the proceeding is 19 pending.

Article 11. Unfair Practices and Frauds

Section 1. Declaration of Purpose.—The purpose of this article is to regulate trade practices in the business of insurance in accordance with the intent of Congress as expressed in the act of Congress of March ninth, one thousand nine hundred forty-five (Public Law fifteen, seventy-ninth Congress), by defining, or providing for the determinatnion of, all such practices in this State which constitute unfair methods of competition or unfair or deceptive acts or practices and by prohibiting the trade practices so defined or determined.

- Sec. 2. Unfair Practices Prohibited.—No person shall engage in this State in any trade practices which is defined in this article as, or determined pursuant to this article to be, an unfair method of competition or unfair or deceptive act or practice in the business of insurance.
- Sec. 3. Misrepresentations and False Advertising of Policies.—No person shall make, issue, circulate, or cause to be made, issued or circulated, any estimate, illustration, circular or statement misrepresenting the terms of any policy issued or to be issued or the benefits or advantages promised thereby or the dividends or share of the surplus to be received thereon, or make any false or misleading statement as to the dividends or share of surplus previously paid on similar policies, or make any mis-10 leading representation or any misrepresentation as to the financial condition of any insurer, or as to the legal reserve system upon which any life insurer operates, or use any 13 name or title of any policy or class of policies misrep-14 resenting the true nature thereof, or make any misrepresentation to any policyholder insured in any company for the purpose of inducing or tending to induce such 17 policyholder to lapse, forfeit, or surrender his insurance.
- Sec. 4. False Information and Advertising Generally.—
 2 No person shall make, publish, disseminate, circulate, or
 3 place before the public or cause, directly or indirectly, to
 4 be made, published, disseminated, circulated or placed
 5 before the public, in a newspaper, magazine or other pub6 lication, or in the form of a notice, circular, pamphlet,

- 7 letter or poster, or over any radio or television station, 8 or in any other way, an advertisement, announcement 9 or statement containing any assertion, representation or 10 statement with respect to the business of insurance or
- 11 with respect to any person in the conduct of his insurance
- 12 business, which is untrue, deceptive or misleading.
- Sec. 5. Defamation.—No person shall make, publish, 2 disseminate or circulate, directly or indirectly, or aid, 3 abet or encourage the making, publishing, disseminating 4 or circulating of any oral or written statement or any pamphlet, circular, article or literature which is false or 6 maliciously critical of or derogatory to the financial condition of an insurer and which is calculated to injure any 8 person engaged in the business of insurance.
- Sec. 6. Boycott, Coercion and Intimidation.—(a) No person shall enter into any agreement to commit, or by any concerted action commit, any act of boycott, coercion or intimidation resulting in or tending to result in unreasonable restraint of, or monopoly in, the business of insurance.
- 7 (b) No person engaged in the business of financing the 8 purchase of real or personal property or of lending money on the security of real or personal property, nor any agent, 10 servant or employee of such person, shall directly or indirectly impose or require as a condition of any such 11 12 financing or loaning of money, whether the financing or 13 the security to be taken shall be in the form of a mortgage, 14 deed of trust, contract, pledge or otherwise, or as a con-15 dition to the renewal or extension of any such loan or 16 financing or to the performance of any other act in connection therewith, that the purchaser or borrower, or his 17 successors, shall negotiate for or procure any policy of 18 19 insurance or renewal thereof covering the property in-20 volved in the transaction from or through a particular 21 insurer, agent, solicitor, broker or other person; but the foregoing shall not be deemed to prevent such lender 23 from reasonably exercising the right to approve or disapprove the sufficiency of any policy or renewal thereof 24 or insurer issuing same tendered in connection with such 25

8

11 12

13

14

15

26 transaction by the person seeking or obtaining such financ-27 ing or loan.

Sec. 7. False Financial Statements.—(a) No person shall 2 file with any supervisory or other public official, or make, publish, disseminate, circulate or deliver to any person, 4 or place before the public, or cause directly or indirectly, 5 to be made, published, disseminated, circulated, delivered 6 to any person or placed before the public, any false statement of financial condition of an insurer with intent to 8 deceive.

- (b) No person shall make any false entry in any book, 10 report or statement of any insurer with intent to deceive 11 any agent or examiner lawfully appointed to examine 12 into its condition or into any of its affairs, or any public 13 official to whom such insurer is required by law to report, 14 or who has authority by law to examine into its condition 15 or into any of its affairs or, with like intent, wilfully omit 16 to make a true entry of any material fact pertaining to 17 the business of such insurer in any book ,report or state-18 ment of such insurer.
- Sec. 8. Unfair Discrimination.—(a) No person shall 2 make or permit any unfair discrimination between indi-3 viduals of the same class and equal expectation of life in 4 the rates charged for any contract of life insurance or of life annuity or in the dividends or other benefits payable thereon, or in any other of the terms and conditions of such contract.
- (b) No person shall make or permit any unfair dis-9 crimination between individuals of the same class and 10 of essentially the same hazard in the amount of premium, policy fees, or rates charged for any policy or contract of accident and sickness insurance or in the benefits payable thereunder, or in any of the terms or conditions of such contract, or in any other manner whatever.
- (c) As to kinds of insurance other than life and acci-16 dent and sickness, no person shall make or permit any 17 unfair discrimination in favor of particular persons, or 18 between insureds or subjects of insurance having sub-19 stantially like insuring, risk, and exposure factors, or 20 expense elements, in the terms or conditions of any in-21 surance contract, or in the rate or amount of premium

- 22 charged therefor. This subsection shall not apply as to 23 any premium or premium rate in effect pursuant to ar-24 ticle twenty of this chapter (rate laws).
- Sec. 9. Rebates on Life or Accident and Sickness Poli-2 cies.—Except as otherwise expressly provided by law, no person shall knowingly permit or offer to make or make any contract of life insurance, life annuity, or accident and sickness insurance, or agreement as to such contract other than as plainly expressed in the contract issued thereon, or pay or allow, or give or offer to pay, allow, or give, directly or indirectly, as an inducement to such insurance or annuity, any rebate of premiums payable on the contract, or any special favor or advan-10 tage in the dividends or other benefits thereon, or any 11 valuable consideration or inducement whatever not specified in the contract.
- Sec. 10. Exceptions to Discrimination and Rebate Provisions for Life and Accident and Sickness Policies.— 3 Nothing in sections eight or nine of this article shall be 4 construed as including within the definition of discrimi-5 nation or rebates any of the following practices:

7

10

11

12 13

14

15

16 17

18

19

20

21

- (a) In the case of any contract of life insurance or life annuity, paying bonuses to policyholders or otherwise abating their premiums in whole or part out of surplus accumulated from nonparticipating insurance: *Provided*, That any such bonuses or abatement of premiums shall be fair and equitable to policyholders and for the best interests of the insurer and its policyholders.
 - (b) In the case of life insurance policies issued on the debit plan, making allowance to policyholders who have continuously for a specified period made premium payments directly to an office of the insurer in an amount which fairly represents the saving in collection expense.
- (c) Readjustment of the rate of premium for a group insurance policy based on the loss or expense experience thereunder, at the end of the first or any subsequent policy year of insurance thereunder, which may be made retroactive only for such policy year.
- 23 (d) Issuing life or accident and sickness policies on a 24 salary savings or payroll deduction plan at a reduced rate

10

11

12

13

14

15 16

17

18

19

20

21

22

23

24

25

26

27

28

29

2

6

7

commensurate with the savings made by the use of such plan.

Sec. 11. Rebates on Insurance Other Than Life and Accident and Sickness.—No insurer or employee, agent or representative thereof, or broker shall knowingly charge, demand or receive a premium for any policy of insurance, other than life or accident and sickness insurance and ocean marine and marine protection and indemnity insurance, except in accordance with an applicable filing on file with the commissioner. No such insurer, employee, agent, representative, or broker shall pay, allow or give, directly or indirectly, as an inducement to insurance, or after insurance has been effected, any rebate, discount, abatement, credit or reduction of the premium named in a policy of insurance, or any special favor or advantage in the dividends or other benefits to accrue thereon, or any valuable consideration or inductment whatever, not specified in the policy of insurance, except to the extent provided for in an applicable filing. No insured named in a policy of insurance, nor any relative, representative or employee of such insured shall knowingly receive or indirectly, any such rebate, discount, abatement, credit or reduction of premium, or any such special favor or advantage or valuable consideration or inducement. Nothing in this section shall be construed as prohibiting the payment of commissions or other compensation to duly licensed agents and brokers, nor as prohibiting any insurer from allowing or returning to its participating policyholders, members, or subscribers, dividends, savings, or unabsorbed premium deposits. As used in this section the word "insurance" includes suretyship and the word "policy" includes bond.

Sec. 12. Inducements.—No insurer, agent, broker, solicitor, or other person shall, as an inducement to insurance, directly or indirectly, offer, sell, buy, or offer or promise to buy, sell, give, promise, or allow to the insured or prospective insured or to any other person in his behalf in any manner whatsoever:

- (a) Any employment.
- (b) Any shares of stock or other securities issued or

9 at any time to be issued or any interest therein or rights 10 thereto.

- 11 (c) Any advisory board contract, or any similar con-12 tract, agreement or understanding, offering, providing 13 for, or promising any special profits.
- 14 (d) Any prizes, goods, wares, merchandise, or tangible 15 property.
- 16 (e) Any loans except those made solely for the pur-17 pose of paying policy premiums, or policy loans pursuant 18 to section nineteen of article eight of this chapter.
- Sec. 13. Interlocking Owenership or Management; Multiple Directorship.—(a) Any insurer may retain, invest in or acquire the whole or any part of the capital stock of any other insurer or insurers, or have a common management with any other insurer or insurers, unless such retention, investment, acquisition or common management is inconsistent with any other provision of this chapter, or unless by reason thereof the business of such insurers with the public is conducted in a manner which substantially lessens competition generally in the insurance business or tends to create a monopoly therein.
- 12 (b) Any person otherwise qualified may be a director 13 of two or more insurers which are competitors, unless 14 the effect thereof is to substantially lessen competition 15 between insurers generally or tends to create a monopoly.
- Sec. 14. Violations, Cease and Desist Orders, Penalty.— 2 If, after notice and hearing, the commissioner determines that any person has engaged in or is engaging in any method of competition, act or practices in violation of the provisions of this article or any rules or regulations promulgated by the commissioner thereunder, the com-7 missioner shall issue an order directing such person to cease and desist from engaging in such method of competition, act or practice. No order of the commissioner pursuant to this section or order of court to enforce it, 10 or holding of a hearing, shall in any manner relieve or absolve any person affected by such order or hearing from any other liability, penalty or forfeiture under law. 13

Sec. 15. Undefined Acts or Practices.—If, after notice

- and hearing, the commissioner determines that any per-
- 3 son transacting insurance is engaging in this State in any
- 4 method of competition or act or practice in the transac-
- 5 tion of such insurance which is not defined in this article.
- 6 and that such method of competition is unfair or such act
- 7 or practice is unfair or deceptive, the commissioner shall
- 8 issue an order directing such person to cease and desist
- 9 from engaging in such method of competition, act or
- 10 practice.

Article 12. Agents, Brokers, Solicitors and Excess Line

- Section 1. License Required.—(a) No person shall in
- 2 West Virginia act as or hold himself out to be an agent,
- 3 broker or solicitor nor shall any person in any manner
- 4 solicit, negotiate, make or procure insurance covering
- 5 subjects of insurance resident, located or to be performed
- 6 in West Virginia, unless then licensed therefor pursuant
- 7 to this article.
- 8 (b) No agent, broker or solicitor or any representative 9 or employee thereof shall solicit or take application for,
- 10 negotiate, procure or place for others any kind of insur-
- 11 ance for which he is not then licensed.
- 12 (c) No insurer shall accept any business from any agent
- who does not then hold an appointment as agent for such
- 14 insurer pursuant to this article.
 - Sec. 2. General Qualifications.—For the protection of the people of West Virginia, the commissioner shall not
 - 3 issue, renew or permit to exist any agent's, broker's or
 - 4 solicitor's license except to an individual who:
 - 5 (a) Is twenty-one years of age or more, except that 6 present licensees who otherwise qualify may secure re7 newal even though they be less than twenty-one.
 - 8 (b) Is a resident of West Virginia, except that a broker's
 - 9 license shall be issued only to non-residents, and except
- 10 for non-resident life and accident and sickness agents as
- 11 provided in section eight of this article.
- 12 (c) Is, in the case of an agent applicant, appointed as
- agent by a licensed insurer for the kind or kinds of insurance for which application is made, subject to issuance of
- 15 license, or, in the case of a solicitor applicant, appointed as

16 solicitor by a licensed resident agent, subject to issuance 17 of license.

18

19

21

22

23

24

2627

28

29

30

31 32

33 34

35

8

9

10

11

12

13

14

15 16

17

18

19

- (d) Does not intend to use the license principally for the purpose, in the case of life or accident and sickness insurance, of procuring insurance on himself, members of his family or his relatives; or, as to insurance other than life and accident and sickness, upon his property or insurable interests or those of his family or his relatives or those of his employer, employees, or firm, or corporation in which he owns a substantial interest, or of the employees of such firm or corporation, or on property or insurable interests for which the applicant or any such relative, employer, firm or corporation is the trustee, bailee or receiver. For the purposes of this provision, a vendor's or lender's interest in property sold or being sold under contract or which is the security for any loan, shall not be deemed to constitute property or an insurable interest of such vendor or lender.
- (e) Satisfies the commissioner that he is trustworthy and competent.
- Sec. 3. Application.—(a) Application for an agent's, broker's or solicitor's license or renewal thereof shall be made to the commissioner upon a form prescribed by him and shall contain such information and be accompanied by such supporting documents as the commissioner may require, and the commissioner may require such application to be made under the applicant's oath.
- (b) If for an agent's license, the application shall show the kinds of insurance to be transacted, and shall be accompanied by the written appointment of the applicant as agent by at least one licensed insurer for each kind of insurance for which application is made.
- (c) If for a solicitor's license, the application shall be accompanied by written appointment of the applicant as solicitor by a licensed agent.
- (d) If for a broker's license, the application shall be accompanied by a statement upon a form prescribed by the commissioner as to the trustworthiness and competency of the applicant, signed by at least three licensed resident agents of this State.

17

18

19

20 21

22

23

24

25

- 21 (e) Wilful misrepresentation of any fact in any such 22 application or any documents in support thereof is a 23 violation of this chapter.
 - Sec. 4. Broker's Requirements and Restrictions.—(a)
 2 Broker's licenses shall be issued only to non-residents as
 3 provided in section two of this article and only to such
 4 applicants as are licensed agents or brokers in a state
 5 other than West Virginia and furnish to the commissioner
 6 satisfactory proof thereof.
- 7 (b) No license shall be issued to any such broker unless he shall file with the commissioner a power of attorney appointing the auditor of this State and his successors in office the agent of such broker for the service of process 10 in any suit or proceeding arising in this State out of or in 11 connection with the exercise of such license, and such 12 service of process shall be of the same legal force and 13 validity as personal service of process in this State upon 14 15 such broker.
 - (c) No such license shall be issued to any person who is an employer, employee or partner of a licensed agent of this State, nor shall such license be issued to any person who is a salaried employee of any insurer.
 - (d) No such broker shall solicit, negotiate, make or procure within this State, or aid in any manner in soliciting, negotiating, making or procuring within this State, any insurance contracts covering subjects of insurance resident, located, or to be performed in this State, either on account of any person desiring to procure insurance or on account of any insurer.
- 27 (e) A licensed broker lawfully soliciting, negotiating, 28 making or procuring outside this State, or aiding in soliciting, negotiating, making or procuring outside this State, 30 insurance contracts covering subjects of insurance resident, located, or to be performed in this State, shall place 32 all such contracts only with licensed resident agents of 33 this State for insurers licensed in this State.
 - Sec. 5. Issuance of License.—The commissioner may issue a license to any individual as agent, broker or solicitor who complies with the applicable provisions of this

4 chapter and who in the opinion of the commissioner is 5 trustworthy and competent.

Sec. 6. Fees.—The fee for an agent's license shall be five dollars as provided in section thirteen of article three of this chapter, the fee for a solicitor's license shall be five dollars, and the fee for a broker's license shall be ten dollars, except that when any other state imposes a tax, bond, fine, penalty, license fee or other obligation or prohibition on agents resident in this State, the same tax, bond, fine, penalty, license fee or other obligation or prohibition shall be imposed upon agents (where licensing of non-resident agents is permitted under this article) or brokers of such other state licensed or seeking a license in this State. All fees and monies so collected shall be deposited in the fund for the purposes set forth in section thirteen of article three of this chapter.

Sec. 7. Countersignature.—No contract of insurance 2 covering a subject of insurance, resident, located, or to be performed in this State, shall be executed, issued or de-4 livered by any insurer unless the contract, or in the case of an interstate risk a countersignature endorsement carrying full information as to the West Virginia risk, is signed or countersigned in writing by a licensed resident agent of the insurer, except that excess line insurance shall be countersigned by a duly licensed excess line broker. This section does not apply to: reinsurance; credit insurance; 10 any contract of insurance covering the rolling stock of any 11 12 railroad or covering any vessel, aircraft or motor carrier 13 used in interstate or foreign commerce, or covering any 14 liability or other risks incident to the ownership, maintenance or operation thereof; any contract of insurance cov-15 16 ering any property in interstate or foreign commerce, or 17 any liability or risks incident thereto. Countersignature of a duly licensed resident agent of the company originat-18 ing a contract of insurance participated in by other com-20 panies as co-sureties or co-indemnitors shall satisfy all 21 counted signature requirements in respect to such concract 22 of insurance.

Sec. 8. Non-Resident Life and Accident and Sickness

- 2 Agents.—(a) Non-residents otherwise complying with the 3 provisions of this chapter may be licensed as a life agent 4 but all policies issued as a result of solicitation on the part 5 of such non-resident in this State shall be reported placed
- of such non-resident in this State shall be reported, placed,
 countersigned, and consummated by and through a duly
- 7 licensed resident agent of the issuing insurer.
- 8 (b) Individuals otherwise complying with the provisions of this chapter, who are residents of a county in another state adjoining a county in this State, and a licensed accident and sickness agent of such state, may be licensed as a non-resident accident and sickness agent in this State, if the state of residence of such non-resident has established, by law or regulation, like requirements for licensing of residents of counties in this State adjoining a county in such state as non-resident accident and sickness agents. All policies issued as a result of solicitation by such non-resident accident and sickness agents shall be reported placed countersigned and consummated
- shall be reported, placed, countersigned and consummated by and through a duly licensed resident agent of the
- 21 issuing insurer.
- Sec. 9. Agent Resident in Contiguous Municipalities.—
 2 An agent who has his residence in an urban community
 3 composed of two immediately contiguous municipal corp4 orations not separated by a river or other stream, one of
 5 which is located in this State and the other located in
 6 another state, shall be considered a resident of this State
 7 for the purposes of this article if his residence is in any
 8 part of such urban community and the state wherein the
 9 other municipal corporation is located has established by
 10 law or regulation like requirements as to residence of
 11 agents in such urban community.
- Sec. 10. Excess Lines.—Any portion or all of an insurance coverage against loss or damage to property or person from any cause which cannot be procured from licensed insurers, which coverages are hereinafter designated as "excess line", may be procured from unlicensed insurers subject to the following conditions:
- 7 (a) The insurance must be procured only through a 8 licensed excess line broker.
- 9 (b) The insurance coverage must not be procurable,

- 10 after diligent effort has been made to do so, from licensed
- 11 insurers authorized to transact that kind of insurance in
- 12 this State, or has been procured to the full extent such
- 13 insurers are willing to insure, and the placing of insurance
- 14 with an unlicensed insurer must not be for the purpose of
- 15 securing advantages either as to premium rate or terms of
- 16 the insurance contract.

9

- Sec. 11. Excess Line Broker's Affidavit and Report.—
- At the time of procuring any excess line insurance, the
- 3 excess line broker shall execute and file with the com-
- 4 missioner his report thereof in duplicate and under oath,
- 5 setting forth facts from which it may be determined
- 6 whether the requirements of section ten of this article
- 7 have been met, and in addition thereto the following:
 - (a) Name and address of the insurer.
 - (b) Number of the policy issued.
 - (c) Name and address of the insured.
- 11 (d) Nature and amount of liability assumed by the 12 insurer.
- 13 (e) Premium, and premium rate if applicable.
- 14 (f) Other information reasonably required by the com-15 missioner.
 - Sec. 12. Excess Line Insurance Valid.—Insurance con-
- 2 tracts procured as excess line coverage from unlicensed
- 3 insurers in accordance with this article shall be fully valid
- 4 and enforceable as to all parties, and shall be given recog-
- 5 nition in all matters and respects to the same effect as like
- 6 contracts issued by licensed insurers.
 - Sec. 13. Licensing of Excess Line Brokers.—(a) Any
 - licensed insurance agent deemed by the commissioner to
- B be competent and trustworthy for the purpose, may be
- 4 licensed as an excess line broker.
- 5 (b) The license fee shall be fifty dollars, all fees so col-
- 6 lected to be deposited in the fund for the purposes set
- forth in section thirteen of article three of this chapter.
- 8 (c) Prior to issuance of the license, the applicant there-
- 9 for shall file with the commissioner and thereafter main-
- 10 tain in force for so long as the license or any renewal
- 11 thereof remains in effect, a bond in favor of the State of

- 12 West Virginia in the penal sum of two thousand dollars,
- 13 with an authorized corporate surety approved by the com-
- 14 missioner, conditioned that he will conduct business un-
- 15 der the license in accordance with this article, that he will
- 16 promptly remit the taxes provided by section sixteen of
- 17 this article, and that he will properly account to the person
- 18 entitled thereto for funds received by him through trans-
- 19 actions under the license. No such bond shall be termi-
- 20 nated unless at least thirty-days' prior written notice
- 21 thereof is filed with the commissioner.
 - Sec. 14. May Accept Business from Agents.—A licensed
- 2 excess line broker may accept and place authorized excess
- 3 line business from any insurance agent or broker licensed
- 4 in this State for the kind of insurance involved, and may
- 5 compensate such agent or broker therefor. The excess
- 6 line broker shall have the right to receive from the insurer
- 7 the customary commission.
- Sec. 15. Records of Excess Line Brokers.—Each excess
- 2 line broker shall keep in his office a full and true record of
- 3 each excess line contract procured by him, and such
- 4 record may be examined at any time thereafter by the
- commissioner. The record shall include such of the follow-
- 6 ing items as are applicable:
- 7 (a) Name and address of the insurer,
- 8 (b) Name and address of the insured,
- 9 (c) Amount of insurance,
- 10 (d) Gross premium charged,
- 11 (e) Return premium paid, if any,
- 12 (f) Rate of premium charged on the several items of 13 coverage,
- 14 (g) Effective date of the contract and the terms thereof,
- 15 and
- 16 (h) Brief general description of the risks insured 17 against and the property insured.
- Sec. 16. Annual Return of and Tax on Excess Line
- 2 Brokers.—Every excess line broker licensed pursuant to
- 3 the provisions of this article shall make a return annually,
- 4 under oath, on or before the first day of March to the com-

5 missioner of the gross amount of premiums charged the 6 insureds by the insurers for insurance procured by such 7 licensee, pursuant to such license during the previous calendar year, together with the amount of tax due thereon. The annual tax required to be paid, under the pro-10 visions of this section, shall be a sum equal to two percent of the gross premiums received on the gross business pro-12 cured by such licensee on subjects of insurance, resident, located or to be performed in this State and obtained 13 14 pursuant to the provisions of this article, including any so-called dividends on participating insurance policies 15 16 applied in reduction of premiums, less premiums returnable for cancellation. All such taxes paid to the commissioner shall be paid by him into the state treasury for the 19 benefit of the state fund.

- Sec. 17. Service of Process on Excess Line Insurers and Brokers.—As to every unlicensed insurer issuing or delivering an excess line policy through an excess line broker in this State, the state auditor of West Virginia shall be, and is hereby constituted the attorney-in-fact of each such insurer and broker for service of process in the same manner as for licensed insurers as provided in section twelve of article four of this chapter.
- Sec. 18. Term of Licenses.—All licenses of agents, solicitors, brokers and excess line brokers shall expire at midnight on the March thirty-first next following the date of issuance. The commissioner shall renew annually the license of all such licensees who qualify and make application therefor.
- Sec. 19. Agent to Deal Only With Licensed Insurer, Broker or Solicitor.—(a) No agent shall accept any risk, place any insurance or issue any policy except with an insurer licensed in this State and for which insurer such agent has been appointed and licensed.
- 6 (b) No agent shall accept any contract of insurance 7 from any broker not licensed in this State.
- 8 (c) No agent shall employ or accept the services of any
 9 solicitor not duly appointed and licensed as solicitor for
 10 such agent.

Sec. 20. Solicitor to Act Only Through Appointing Agent.—A solicitor shall solicit and receive applications for insurance only for the duly licensed agent who appointed such solicitor, and shall report all business through such agent. The expiration, cancellation, suspension or revocation of the license of the appointing agent shall automatically expire, cancel, suspend or revoke the solicitor's license in like manner, and the appointing agent may cancel a solicitor's license at any time by written request to the commissioner. No agent may apply for licenses for more than two solicitors. No solicitors shall be permitted for life insurance agents.

Sec. 21. Personal Liability of Agent or Broker.—Any agent or broker who participates directly or indirectly in effecting any insurance contract, except authorized reinsurance, upon any subject of insurance resident, located or to be performed in this State, where the insurer is not licensed to transact insurance in this State, shall be personally liable upon such contract as though such agent or broker were the insurer thereof. This section shall not apply to excess line insurance procured in the manner provided in sections ten to seventeen, inclusive, of this article, nor to ocean marine insurance or marine protection and indemnity insurance.

Sec. 22. Solvent Insurer Required.—No agent, broker or 2 excess line broker shall knowingly place any coverage in 3 an insolvent insurer.

Sec. 23. Person Soliciting Insurance is Agent of Insurer.

2 —Any person who shall solicit within this State an application for insurance shall, in any controversy between

4 the insured or his beneficiary and the insurer issuing any

5 policy upon such application, be regarded as the agent

6 of such insurer and not the agent of the insured.

Sec. 24. Payment of Commissions.—(a) The entire commission payable by any insurer licensed to transact insurance in this State on any insurance policy shall be paid directly to the licensed resident agent who countersigns the policy. The countersigning agent shall not pay any part of such commission to any person other than a

7 licensed agent or broker: Provided, That the portion of such commission paid to any licensed broker or brokers 9 shall not exceed ten percent of the gross policy premium 10 or fifty percent of the commission payable by the insurer as provided herein, whichever is the lesser amount. The 11 12 term "commission" as used herein shall include engineering fees, service fees or any other compensation incident 13 14 to the issuance of a policy payable by or to any insurer, 15 agent or broker. It shall be unlawful for any insurer or agent to pay, and any person to accept, directly or indi-16 17 rectly, any commission except as provided in this section.

18

20

22

23 24

25

27

28

(b) This section shall not apply to reinsurance, accident 19 and sickness insurance, or life insurance; nor to excess line insurance procured in accordance with the provisions of 21 this article relating thereto; nor to credit insurance, any contract of insurance covering the rolling stock of any railroad or covering any vessel, aircraft or motor carrier used in interstate or foreign commerce, any liability or other risks incident to the ownership, maintenance or op-26 eration thereof, any contract of insurance covering any property in interstate or foreign commerce, or any liability or risks incident thereto.

Sec. 25. Revocation, Suspension or Refusal to Renew License; Fine in Lieu Thereof .- Whenever, after notice and hearing, the commissioner is satisfied that any agent, solicitor, broker or excess line broker has violated any provision of this chapter, or is incompetent or untrust-6 worthy, he shall revoke, suspend, or, if renewal of license 7 is pending, refuse to renew the license of such agent, solicitor, broker or excess line broker. In lieu of revoking, suspending or refusing to renew such license, the com-10 missioner may in his discretion order such licensee to pay to the State of West Virginia a penalty in a sum not to 11 12 exceed one hundred dollars and upon the failure of such 13 licensee to pay such penalty by delivery of such sum to 14 the commissioner within thirty days of notice thereof, the 15 commissioner shall revoke, suspend or refuse to renew 16 such license.

Sec. 26. Insurance Vending Machines.—(a) A licensed 2 resident agent may solicit applications for and issue poli-

- 3 cies for trip accident insurance by means of mechanical 4 vending machines supervised by him, if:
- 5 (1) The commissioner finds that the kind of insurance 6 and form of policy to be so sold is reasonably suited for 7 sale and issuance through vending machines and other-8 wise complies with this chapter, and that use of such 9 machines therefor would be of convenience to the public, 10 and
- 11 (2) The commissioner finds that the type of vending 12 machines to be used is reasonably suitable and practical 13 for the purpose.
- (b) The commissioner shall issue to the agent a special 14 15 vending machine license as to each such machine to be 16 used. The license shall specify name and address of the insurer and agent, kind of insurance and type of policy 17 18 to be sold, and the place where the machine is to be in 19 operation. The license shall expire, be renewable, and be 20 suspended or revoked, coincidently with that of the agent. The license fee shall be five dollars for each year or part 21 22 thereof for each vending machine. Proof of existence of 23 the license shall be displayed on or about each such machine in such manner as the commissioner may reasonably 25 require. Fees so collected are subject to the provisions of 26 section thirteen of article three of this chapter.
- Sec. 27. Payment of Commission Under an Assigned Risk Plan.—An insurer participating in a plan for assignment of personal injury liability insurance or property damage liability insurance on owner's automobiles or operators, which plan has been approved by the commissioner, may pay a commission to a qualified agent who is licensed to act as agent for any insurer participating in such plan when such agent is designated by the insured as the producer of record under an automobile assigned risk plan pursuant to which a policy is issued under such plan, and sections seven and twenty-four of this article shall not be applicable thereto.

Article 13. Life Insurance

Section 1. Scope of Article.—This article applies to life 2 insurance (including annuities), other than reinsurance

- and group life insurance (including group annuities);
 except that sections sixteen (contestability as to excluded
 or restricted coverage), twenty-five (limitation of liability), twenty-six (incontestability after reinstatement),
 twenty-nine (dual pay policies), thirty (standard nonforfeiture law) and sections thirty-one to forty-six, inclusive (which specifically relate only to industrial life insurance), shall be the only sections of this article which apply
 to industrial life insurance.
- Sec. 2. Standard Provisions Required.—(a) No policy of life insurance other than industrial, group, and pure endowments with or without return of premiums or of premiums and interest, shall be delivered or issued for delivery in West Virginia unless it contains in substance all of the provisions required by sections three to fifteen, inclusive, of this article. This section shall not apply to annuity contracts nor to any provision of a life insurance policy or contract supplemental thereto relating to disability benefits or to additional benefits in the event of death by accident or accidental means.
- 12 (b) Any of such provisions or portions thereof not applicable to single premium or term policies shall to that 14 extent not be incorporated therein.
 - Sec. 3. Grace Period.—There shall be a provision that a grace period of thirty-one days shall be allowed within which the payment of any premium after the first may be made, during which period of grace the policy shall continue in full force; but if a claim arises under the policy during such period of grace before the overdue premium is paid the amount of such premium may be deducted from the policy proceeds.
 - Sec. 4. Incontestability.—There shall be a provision that the policy (exclusive of provisions relating to disability benefits or to additional benefits in the event of death by accident or accidental means) shall be incontestable, except for non-payment of premiums, after it has been in force during the lifetime of the insured for a period of two years from its date of issue.
 - Sec. 5. Entire Contract.—There shall be a provision that

the policy, or the policy and the application therefor if
 a copy of such application is endorsed upon or attached

4 to the policy when issued, shall constitute the entire con-

5 tract between the parties, and that all statements con-

6 tained in the application shall, in the absence of fraud, be

7 deemed representations and not warranties.

Sec. 6. Misstatement of Age.—There shall be a provision that if the age of the insured or of any other person whose age is considered in determining the premium has been misstated, any amount payable or benefit accruing under the policy shall be such as the premium would have purchased at the correct age or ages.

Sec. 7. Dividends.—There shall be a provision in parti-2 cipating policies that, beginning not later than the end of 3 the third policy year, the insurer shall annually ascertain 4 and apportion the divisible surplus, if any, that will 5 accrue on the policy anniversary or other dividend date 6 specified in the policy provided the policy is in force and 7 all premiums to that date are paid. Except as hereinafter 8 provided, any dividend so apportioned shall at the option 9 of the party entitled to elect such option be either (a) 10 payable in cash or (b) applied to any one of such other 11 dividend options as may be provided by the policy. If any 12 such other dividend options are provided, the policy shall 13 further state which option shall be automatically effective 14 if such party shall not have elected some other option. 15 If the policy specifies a period within which such other 16 dividend option may be elected, such period shall be not 17 less than thirty days following the date on which such 18 dividend is due and payable. The annually apportioned 19 dividend shall be deemed to be payable in cash within 20 the meaning of (a) above even though the policy provides 21 that payment of such dividend is to be deferred for a 22 specified period, provided such period does not exceed six 23 years from the date of apportionment and that interest 24 will be added to such dividend at a specified rate. If a 25 participating policy provides that the benefit under any 26 paid-up nonforfeiture provision is to be participating, it 27 may provide that any divisible surplus apportioned while 28 the insurance is in force under such nonforfeiture pro29 vision shall be applied in the manner set forth in the 30 policy.

Sec. 8. Loans on New Policies.—(a) There shall be a provision that after the policy has a cash surrender value and while no premium is in default beyond the grace period for payment, the insurer will advance, on proper assignment of pledge of the policy and on the sole security thereof, at a specified rate of interest not exceeding six percent per annum, an amount equal to or, at the option of the party entitled thereto, less than the loan value of the policy. The loan value of the policy shall be at least equal to the cash surrender value at the end of the then 10 current policy year, provided that the insurer may deduct, 11 12 either from such loan value or from the proceeds of the 13 loan, any existing indebtedness not already deducted in 14 determining such cash surrender value including any 15 interest then accrued but not due, any unpaid balance of premium for the current policy year, and interest on the 16 17 loan to the end of the current policy year. The policy may also provide that if interest on any indebtedness is not 18 19 paid when due it shall then be added to the existing indebtedness and shall bear interest at the same rate, and 20 21 that if and when the total indebtedness on the policy, 22 including interest due or accrued, equals or exceeds the 23 amount of the loan value thereof, then the policy shall 24 terminate and become void. The policy shall reserve to the insurer the right to defer the granting of a loan, other 25 26 than for the payment of any premium to the insurer, for 27 six months after application therefor. The policy, at the insurer's option, may provide for automatic premium loan, 28 29 subject to an election of the party entitled to elect. 30

(b) This section shall not apply to term policies nor to term insurance benefits provided by rider or supplemented policy provision.

31

32

Sec. 9. Nonforfeiture Benefits.—There shall be provisions for nonforfeiture benefits and cash surrender values as required by section thirty of this article.

Sec. 10. Table of Values.—There shall be a table showing in figures the loan value and the options available under the policy each year upon default in premium pay-

- 4 ments, during the first twenty years or during the term
- 5 of the policy, whichever is shorter.
- Sec. 11. Table of Instalments.—In case the policy pro-
- 2 vides that the proceeds may be payable in instalments
- 3 which are determinable at issue of the policy, there shall
- 4 be a table showing the amounts of the guaranteed instal-
- 5 ments.
 - Sec. 12. Reinstatements.—There shall be a provision
- 2 that unless the policy has been surrendered for its cash
- 3 surrender value or unless the paid-up term insurance, if
- 4 any, has expired, the policy will be reinstated at any time
- 5 within three years from the date of premium default upon
- 6 written application therefor, the production of evidence
- 7 of insurability satisfactory to the insurer, the payment
- 8 of all premiums in arrears, and the payment or reinstate-
- 9 ment of any other indebtedness to the insurer upon the
- 10 policy, all with interest at a rate not exceeding six per-
- 11 cent per annum compounded annually.
 - Sec. 13. Payment of Premiums.—There shall be a pro-
 - 2 vision that all premiums after the first shall be payable
- 3 in advance.
- Sec. 14. Payment of Claims.—There shall be a provision
- 2 that when a policy shall become a claim by the death of
- 3 the insured settlement shall be made upon receipt of
- 4 due proof of death and, at the insurer's option, surrender
- 5 of the policy and/or proof of the interest of the claimant.
- 6 If an insurer shall specify a particular period prior to the
- 7 expiration of which settlement shall be made, such period
- 8 shall not exceed two months from the receipt of such
- 9 proofs.
- Sec. 15. *Title.*—There shall be a title on the face of the policy, briefly describing the same.
- Sec. 16. Excluded or Restricted Coverage.—A clause in
- 2 any policy of life insurance providing that such policy 3 shall be incontestable after a specified period shall pre-
 - 4 clude only a contest of the validity of the policy, and
 - 5 shall not preclude the assertion at any time of defenses
 - 6 based upon provisions in the policy which exclude or

7 restrict coverage, whether or not such restrictions or 8 exclusions are excepted in such clause.

Sec. 17. Standard Provisions of Annuity Contracts.—2
(a) No annuity or pure endowment contract, other than reversionary annuities, survivorship annuities or group annuities and except as stated herein, shall be delivered or issued for delivery in this State unless it contains in substance each of the provisions specified in sections eighteen to twenty-three, inclusive, of this article. Any of such provisions not applicable to single premium annuities or single premium pure endowment contracts shall not, to that extent, be incorporated therein.

11 (b) This section shall not apply to contracts for de-12 ferred annuities included in, or upon the lives of bene-13 ficiaries under, life insurance policies.

Sec. 18. Annuity Grace Period.—In an annuity or pure 2 endowment contract, other than a reversionary, survivor-3 ship or group annuity, there shall be a provision that 4 there shall be a period of grace of not less than thirty-one 5 days, within which any stipulated payment to the insurer 6 falling due after the first may be made, subject at the 7 option of the insurer to an interest charge thereon at a 8 rate to be specified in the contract but not exceeding six 9 percent per annum for the number of days of grace 10 elapsing before such payment, during which period of 11 grace the contract shall continue in full force; but in 12 case a claim arises under the contract on account of death 13 prior to expiration of the period of grace before the over-14 due payment to the insurer or the deferred payments of 15 the current contract year, if any, are made, the amount 16 of such payments, with interest on any overdue pay-17 ments, may be deducted from any amount payable under 18 the contract in settlement.

Sec. 19. Annuity Incontestability.—If any statements, 2 other than those relating to age, sex and identity are 3 required as a condition to issuing an annuity or pure 4 endowment contract, other than a reversionary, survivorship, or group annuity, and subject to section twenty-one of this article, there shall be a provision that the contract shall be incontestable after it has been in force during

the lifetime of the person or of each of the persons as to whom such statements are required, for a period of two years from its date of issue, except for nonpayment of stipulated payments to the insurer; and at the option of the insurer such contract may also except any provisions relative to benefits in the event of disability and any provisions which grant insurance specifically against death by accident or accidental means.

Sec. 20. Annuity Entire Contract.—In an annuity or pure endowment contract, other than a reversionary, survivorship, or group annuity, there shall be a provision that the contract shall constitute the entire contract between the parties or, if a copy of the application is endorsed upon or attached to the contract when issued, a provision that the contract and the application therefor shall constitute the entire contract between the parties.

Sec. 21. Annuity Misstatement of Age or Sex.—In an 2 annuity or pure endowment contract, other than a re-3 versionary, survivorship, or group annuity, there shall 4 be a provision that if the age or sex of the person or persons upon whose life or lives the contract is made, or of any of them, has been misstated, the amount payable or benefits accruing under the contract shall be such 8 as the stipulated payment or payments to the insurer 9 would have purchased according to the correct age or 10 sex; and that if the insurer shall make or has made any 11 overpayment or overpayments on account of any such 12 misstatement, the amount thereof with interest at the 13 rate to be specified in the contract but not exceeding six 14 percent per annum, may be charged against the current 15 or next succeeding payment or payments to be made by 16 the insurer under the contract.

Sec. 22. Annuity Dividends.—If an annuity or pure endowment contract, other than a reversionary, survivorship, or group annuity, is participating, there shall be a provision that the insurer shall annually ascertain and apportion any divisible surplus accruing on the contract.

Sec. 23. Annuity Reinstatement.—In an annuity or pure 2 endowment contract, other than a reversionary, survivor-

- ship, or group annuity, there shall be a provision that the 4 contract may be reinstated at any time within one year from the default in making stipulated payments to the insurer, unless the cash surrender value has been paid, but all overdue stipulated payments and any indebtedness to the insurer on the contract shall be paid or reinstated with interest thereon at a rate to be specified in the con-10 tract but not exceeding six percent per annum payable annually, and in cases where applicable the insurer may 12 also include a requirement of evidence of insurability 13 satisfactory to the insurer.
- Sec. 24. Standard Provisions of Reversionary Annuities.—(a) Except as stated herein, no contract for a reversionary annuity shall be delivered or issued for delivery in this State unless it contains in substance each 5 of the following provisions:

15

17

18

19

21

- (1) Any such reversionary annuity contract shall con-7 tain the provisions specified in sections eighteen, nineteen, twenty, twenty-one and twenty-two of this article, except that under said section eighteen the insurer may at its option provide for an equitable reduction of the amount of the annuity payments in settlement of an 11 12 overdue or deferred payment in lieu of providing for de-13 duction of such payments from an amount payable upon 14 settlement under the contract.
- (2) In such reversionary annuity contracts there shall 16 be a provision that the contract may be reinstated at any time within three years from the date of default in making stipulated payments to the insurer, upon production of evidence of insurability satisfactory to the insurer, 20 and upon condition that all overdue payments and any indebtedness to the insurer on account of the contract be paid, or, within the limits permitted by the then cash values of the contract, reinstated, with interest as to both payments and indebtedness at a rate to be specified in the 25 contract but not exceeding six percent per annum com-26 pounded annually.
- (b) This section shall not apply to group annuities or 27 28 to annuities included in life insurance policies, and any

15

16 17

18

21 22

23

24

38

of such provisions not applicable to single premium an-30 nuities shall not to that extent be incorporated therein.

Sec. 25. Limitation of Liability.—(a) No policy of life insurance shall be delivered or issued for delivery in this 2 3 State if it contains a provision which excludes or restricts liability for death caused in a certain specified manner or occurring while the insured has a specified status, except that a policy may contain provisions excluding 6 7 or restricting coverage as specified therein in the event 8 of death under any one or more of the following cir-9 cumstances:

- (1) Death as a result, directly or indirectly, of war, declared or undeclared, or of action by military forces, or 11 12 of any act or hazard of such war or action, or of service in the military, naval, or air forces or in civilian forces auxiliary thereto, or from any cause while a member of such military, naval, or air forces of any country at war, declared or undeclared, or of any country engaged in such military action;
 - (2) Death as a result of aviation;
- 19 (3) Death as a result of a specified hazardous occupa-20 tion or occupations;
 - (4) Death while the insured is outside continental United States and Canada;
 - (5) Death within two years from the date of issue of the policy as a result of suicide, while sane or insane.
- 25 (b) A policy which contains any exclusion or restricttion pursuant to subsection (a) of this section shall also 26 provide that in the event of death under the circumstances 28 to which any such exclusion or restriction is applicable, 29 the insurer will pay an amount not less than a reserve determined according to the commissioners reserve valua-30 tion method upon the basis of the mortality table and 31 interest rate specified in the policy for the calculation of nonforfeiture benefits (or if the policy provides for no such benefits, computed according to a mortality table and interest rate determined by the insurer and specified in the policy) with adjustment for indebtedness or divi-36 37 dend credit.
 - (c) This section shall not apply to group life insurance,

39 accident and sickness insurance, reinsurance, or annuities, 40 or to any provision in a life insurance policy relating to 41 disability benefits or to additional benefits in the event of death by accident or accidental means.

43

(d) Nothing contained in this section shall prohibit any 44 provision which in the opinion of the commissioner is 45 more favorable to the policyholder than a provision per-46 mitted by this section.

Sec. 26. Incontestability After Reinstatement.—The re-2 instatement of any policy of life insurance or annuity con-3 tract hereafter delivered or issued for delivery in this 4 State may be contested on account of fraud or misrepre-5 sentation of facts material to the reinstatement only for 6 the same period following reinstatement and with the 7 same conditions and exceptions as the policy provides 8 with respect to contestability after original issuance.

Sec. 27. Policy Settlements.—Any life insurer shall have 2 the power to hold under agreement the proceeds of any 3 policy issued by it, upon such terms and restrictions as 4 to revocation by the policyholder and control by bene-5 ficiaries, and with such exemptions from the claims of 6 creditors of beneficiaries other than the policyholder as 7 set forth in the policy or as agreed to in writing by the 8 insurer and the policyholder. Upon maturity of a policy, 9 in the event the policyholder has made no such agree-10 ment, the insurer shall have the power to hold the pro-11 ceeds of the policy under an agreement with the bene-12 ficiaries. The insurer shall not be required to segregate 13 the funds so held but may hold them as part of its gen-14 eral assets.

Sec. 28. Indebtedness Deducted From Proceeds.—In de-2 termining the amount due under any life insurance policy 3 heretofore or hereafter issued, deduction may be made of:

- (a) Any unpaid premiums or instalments thereof for 4 5 the current policy year due under the terms of the policy, 6 and of
- 7 (b) The amount of principal and accrued interest of 8 any policy loan or other indebtedness against the policy 9 then remaining unpaid.

21

25 26

28

29

Sec. 29. Dual or Multiple Pay Policies Prohibited.—No 2 life insurance policy shall be delivered or issued for de-3 livery in this State if it provides that on the death of 4 anyone not insured thereunder, the owner or beneficiary 5 of the policy shall receive the payment or granting of 6 anything of value,

- Sec. 30. Standard Nonforfeiture Law.—(1) In the case 2 of policies issued on or after the original operative date of this provision, no policy of life insurance, except as 4 stated in subsection six, shall be delivered or issued for delivery in this State unless it shall contain in substance 6 the following provisions, or corresponding provisions which in the opinion of the commissioner are at least as favorable to the defaulting or surrendering policyholder;
- (a) That, in the event of default in any premium pay-10 ment, the insurer will grant, upon proper request not 11 later than sixty days after the due date of the premium 12 in default, a paid-up nonforfeiture benefit on a plan stipulated in the policy, effective as of such due date, of 13 14 such value as may be hereinafter specified;
- (b) That, upon surrender of the policy within sixty days after the due date of any premium payment in de-16 17 fault after premiums have been paid for at least three full years, the insurer will pay, in lieu of any paid-up non-19 feiture benefit, a cash surrender value of such amount as 20 may be hereinafter specified;
- (c) That a specified paid-up nonforfeiture benefit shall 22 become effective as specified in the policy unless the person entitled to make such election elects another avail-24 able option not later than sixty days after the due date of the premium in default;
- (d) That, if the policy shall have become paid up by completion of all premium payments or if it is continued 27 under any paid-up nonforfeiture benefit which became effective on or after the third policy anniversary the insurer will pay, upon surrender of the policy within thirty 30 days after any policy anniversary, a cash surrender value 32 of such amount as may be hereinafter specified;
- (e) A statement of the mortality table and interest rate 33 34 used in calculating the cash surrender values and the

paid-up nonforfeiture benefits available under the policy, together with a table showing the cash surrender value, if any, and paid-up nonforeifture benefits, if any, available under the policy on each policy anniversary either 38 39 during the first twenty policy years or during the term 40 of the policy, whichever is shorter, such values and benefits to be calculated upon the assumption that there are 41 no dividends or paid-up additions credited to the policy 42 43 and that there is no indebtedness to the insurer on the 44 policy;

45 46

47

48

49

50 51

52

54

55

56 57

58

59

60 61

62

63

64 65

66

67 68

69 **7**0

71 72

73

(f) A statement that the cash surrender values and the paid-up nonforfeiture benefits available under the policy are not less than the minimum values and benefits required by or pursuant to the insurance law of the state in which the policy is delivered; an explanation of the manner in which the cash surrender values and the paidup nonforeifture benefits are altered by the existence of any paid-up additions credited to the policy or any indebtedness to the company on the policy; if a detailed statement of the method of computation of the values and benefits shown in the policy is not stated therein, a statement that such method of computation has been filed with the insurance supervisory official of the state in which the policy is delivered; and a statement of the method to be used in calculating the cash surrender value and paid-up nonforfeiture benefit available under the policy on any policy anniversary beyond the last anniversary for which such values and benefits are consecutively shown in the policy.

Any of the foregoing provisions or portions thereof, not applicable by reason of the plan of insurance may, to the extent inapplicable, be omitted from the policy.

The insurer shall reserve the right to defer the payment of any cash surrender value for a period of six months after demand therefor with surrender of the policy.

(2) Any cash surrender value available under the policy in the event of default in a premium payment due on any policy anniversary, whether or not required by subsection one, shall be an amount not less than the excess, if any, of the present value, on such anniversary,

93

94

95

96

97

98

100

of the future guaranteed benefits which would have been provided for by the policy, including any existing paidup additions, if there had been no default, over the sum of (i) the then present value of the adjusted premiums 79 as defined in subsection four, corresponding to premiums 80 which would have fallen due on and after such anni-81 versary, and (ii) the amount of any indebtedness to the 82 insurer on the policy. Any cash surrender value avail-83 able within thirty days after any policy anniversary un-84 der any policy paid up by completion of all premium payments or any policy continued under any paid-up 86 nonforfeiture benefit, whether or not required by subsection one, shall be an amount not less than the present 88 value, on such anniversary, of the future guaranteed benefits provided for by the policy, including any exist-90 ing paid-up additions decreased by any indebtedness to 91 the insurer on the policy.

- (3) Any paid-up nonforfeiture benefit available under the policy in the event of default in a premium payment due on any policy anniversary shall be such that its present value as of such anniversary shall be at least equal to the cash surrender value then provided for by the policy or, if none is provided for, that cash surrender value which would have been required by this section in the absence of the condition that premiums shall have been paid for at least a specified period.
- 101 (4) The adjusted premiums for any policy shall be cal-102 culated on an annual basis and shall be such uniform percentage of the respective premiums specified in the 104 policy for each policy year, excluding extra premiums on a substandard policy, that the present value, at the 105 106 date of issue of the policy, of all such adjusted premiums 107 shall be equal to the sum of (i) the then present value 108 of the future guaranteed benefits provided for by the 109 policy; (ii) two percent of the amount of insurance, if 110 the insurance be uniform in amount, or of the equivalent 111 uniform amount, as hereinafter defined, if the amount of 112 insurance varies with duration of the policy; (iii) forty percent of the adjusted premium for the first policy year; (iv) twenty-five percent of either the adjusted

premium for the first policy year or the adjusted premium 115 116 for a whole life policy of the same uniform or equivalent 117 uniform amount with uniform premiums for the whole 118 of life issued at the same age for the same amount of 119 insurance, whichever is less: Provided, however, That in 120 applying the percentages specified in (iii) and (iv) above, 121 no adjusted premium shall be deemed to exceed four 122 percent of the amount of insurance or level amount 123 equivalent thereto. The date of issue of a policy for the 124 purpose of this subsection shall be the date as of which 125 the rated age of the insured is determined.

126

127

128

129

130

131

132

133

134

135

136

137

138

139

140

141

142

143

144

145

146

147

148

149

150

151

152

153

154

In the case of a policy providing an amount of insurance varying with duration of the policy, the equivalent uniform amount thereof for the purpose of this subsection shall be deemed to be the level amount of insurance provided by an otherwise similar policy, containing the same endowment benefit or benefits, if any, issued at the same age and for the same term, the amount of which does not vary with duration and the benefits under which have the same present value at the date of issue as the benefits under the policy.

All adjusted premiums and present values referred to in this section shall be calculated on the basis of the commissioners one thousand nine hundred forty-one standard ordinary mortality table for ordinary insurance and the one thousand nine hundred forty-one standard industrial mortality table for industrial insurance and the rate of interest, not exceeding three and one-half percent per annum, specified in the policy for calculating cash surrender values and paid-up nonforeifture benefits: Provided, That in calculating the present value of any paidup term insurance with accompanying pure endowment, if any, offered as a nonforfeiture benefit, the rate of motality assumed may be not more than one hundred and thirty percent of the rates of mortality according to such applicable table: Provided further, That for insurance issued on a substandard basis, the calculation of any such adjusted premiums and present values may be based on such other table of mortality as may be specified by the insurer and approved by the commissioner.

lec

183

184

186

188

189

190

191

192

193

194

155 (5) Any cash surrender value and any paid-up nonforfeiture benefit, available under the policy in the event 156 of default in a premium payment due at any time other 157 158 than on the policy anniversary, shall be calculated with 159 allowance for the lapse of time and the payment of frac-160 tional premiums beyond the last preceding policy anni-161 versary. All values referred to in subsections two, three and four may be calculated upon the assumption that any 162 163 death benefit is payable at the end of the policy year of 164 death. The net value of any paid-up additions, other than 165 paid-up term additions, shall be not less than the dividends 166 paid to provide such additions. Notwithstanding the pro-167 visions of subsection two, additional benefits payable (a) 168 in the event of death or dismemberment by accident or 169 accidental means, (b) in the event of total and permanent 170 disability, (c) as reversionary or deferred reversionary annuity benefits, (d) as ter minsurance benefits provided 171 172 by a rider or supplemental policy provision to which, if 173issued as a separate policy, this section would not apply and (e) as other policy benefits additional to life insur-174 175 ance and endowment benefits, and premiums for all such 176 additional benefits, shall be disregarded in ascertaining 177 cash surrender values and nonforfeiture benefits required 178 by this section, and no such additional benefits shall be 179 required to be included in any paid-up nonforfeiture 180 benefits. 181

(6) This section shall not apply to any reinsurance, group insurance, pure endowment, annuity or reversionary annuity contract, nor to any term policy of uniform amount, or renewal thereof, of fifteen years or less expiring before age sixty-six, for which uniform premiums are payable during the entire term of the policy, nor to any term policy of decreasing amount on which each adjusted premium, calculated as specified in subsection four, is less than the adjusted premium so calculated on a policy issued at the same age and for the same initial amount of insurance for a term defined as follows-for ages at issue that and under the term shall be fifteen years, thereafter, the terms shall decrease one year for each year of age beyond fifty, nor to any policy for which shall be delivered outside this State through an



196 agent or other representative of the insurer issuing the 197 policy.

Sec. 31. Required Provisions, Industrial Life Insurance.

—No policy of industrial life insurance, which is that form of life insurance provided by an individual insurance contract under which premiums are payable monthly or oftener, and bearing the words "industrial policy" or "weekly premium policy" printed upon the policy as a part of the descriptive matter, shall be delivered or be issued for delivery in this State unless it complies with sections sixteen, twenty-five, twenty-six, twenty-nine, and thirty of this article, nor unless such policy contains in substance the applicable provisions set forth in sections thirty-two to forty-four, inclusive, of this article.

Sec. 32. Grace Period, Industrial Life Insurance.—There shall be a provision in each industrial life insurance policy that the insured is entitled to a grace period of four weeks within which the payment of any premium after the first may be made, except that in policies the premiums for which are payable monthly, the period of grace shall be not less than thirty-one days, and that during the period of grace the policy shall continue in full force, but if during the grace period the policy becomes a claim, then any overdue and unpaid premiums may be deducted from any settlement under the policy.

Sec. 33. Entire Contract, Industrial Life Insurance.—
2 There shall be a provision in each industrial life insurance policy that the policy shall constitute the entire contract between the parties, or, if a copy of the application is endorsed upon or attached to the policy when issued, a provision that the policy and the application therefor shall constitute the entire contract. If the application is so made a part of the contract, the policy shall also provide that all statements made by the applicant in such application shall, in the absence of fraud, be deemed to be representations and not warranties.

Section 34. Incontestability, Industrial Life Insurance.—
2 There shall be a provision in each industrial life insurance policy that the policy (exclusive of provisions relating to

or ages.

4 disability benefits or to additional benefits in the event of 5 death by accident or accidental means) shall be incontest-6 able, except for non-payment of premiums, after it has 7 been in force during the lifetime of the insured for a

period of two years from its date of issue.

Sec. 35. Misstatement of Age, Industrial Life Insurance.

There shall be a provision in each industrial life insurance policy that if it is found that the age of the individual insured, or the age of any other individual considered in determining the premium, has been misstated, any amount payable or benefit accruing under the policy shall be such as the premium would have purchased at the correct age

Sec. 36. Dividends, Industrial Life Insurance.—If an industrial life insurance policy is a participating policy, there shall be a provision that the insurer shall annually ascertain and apportion any divisible surplus accruing on the policy, except that at the option of the insurer such participation may be deferred to the end of the fifth policy year. This provision shall not prohibit the payment of additional dividends on default of payment of premiums or termination of the policy.

Sec. 37. Nonforfeiture Benefits, Industrial Life Insur-2 ance.—There shall be in each policy of industrial life in-3 surance provisions for nonforfeiture benefits and cash 4 surrender values as required by section thirty of this 5 article.

Sec. 38. Reinstatement, Industrial Life Insurance.—
2 There shall be in each industrial life insurance policy a
3 provision that unless the policy has been surrendered for
4 its cash surrender value or unless the paid-up term insur5 ance, if any, has expired, the policy will be reinstated at
6 any time within two years from the date of premium
7 default upon written application therefor, the production
8 of evidence of insurability satisfactory to the insurer, the
9 payment of all premiums in arrears, and the payment or
10 reinstatement of any other indebtedness to the insurer
11 upon the policy, all with interest at a rate not exceeding
12 six percent per annum compounded annually.

- Sec. 39. Settlement, Industrial Life Insurance.—There shall be a provision in each industrial life insurance policy that when the policy becomes a claim by the death of the insured, settlement shall be made upon surrender of the policy and receipt of due proof of death.
- Sec. 40. Beneficiary and Facility of Payment Clause, Industrial Life Insurance.—(a) Each such industrial life insurance policy shall have a space on the front or back page of the policy for the name of the beneficiary designated with a reservation of the right to designate or change the beneficiary after the issuance of the policy.
- 7 (b) The policy may also provide that no designation or 8 change of beneficiary shall be binding on the insurer unless endorsed on the policy by the insurer, and that the insurer 10 may refuse to endorse the name of any proposed benefi-11 ciary who does not appear to the insured to have an 12 insurable interest in the life of the insured. Such a policy 13 may also provide that if the beneficiary designated in the 14 policy does not surrender the policy with due proof of death within the period stated in the policy, which shall 15 be not less than thirty days after the death of the insured, 17 or if the beneficiary is the estate of the insured or is a 18 minor, or dies before the insured, or is not legally compe-19 tent to give a valid release, then the insurer may make 20 payment thereunder to the executor or administrator of 21 the insured, or to any of the insured's relatives by blood or legal adoption or connection by marriage, or to any per-23 son appearing to the insurer to be equitably entitled 24 thereto by reason of having been named beneficiary, or 25 by reason of having incurred expense for the maintenance, 26 medical attention or burial of the insured. Such policy may also include a similar provision applicable to any 28 other payment due under the policy.
 - Sec. 41. Direct Payment of Industrial Life Insurance Premiums.—In the case of weekly premium industrial life insurance policies, there may be a provision that upon proper notice to the insurer, while premiums on the policy are not in default beyond the grace period, of the intention to pay future premiums directly to the insurer at its home office or any office designated by the insurer for the pur-

8 pose, the insurer will, at the end of each period of a year 9 from the due date of the first premium so paid, for which 10 period such premiums are so paid continuously without 11 default beyond the grace period, refund a stated percent-12 age of the premiums in an amount which fairly represents

13 the savings in collection expense.

Sec. 42. Conversion of Weekly Industrial Life Insurance 2 Policies.—There shall be a provision in the case of weekly 3 premium industrial life insurance policies granting to the 4 insured, upon proper written request and upon presenta-5 tion of evidence of insurability satisfactory to the insurer, 6 the privilege of converting a weekly premium industrial 7 insurance policy to any form of life insurance with less 8 frequent premium payments regularly issued by the in-9 surer, in accordance with terms and conditions agreed 10 upon with the insurer. The privilege of making such con-11 version need be granted only if the insurer's weekly 12 premium industrial policies on the life insured, in force 13 as premium paying insurance and on which conversion is 14 requested, grant benefits in event of death, exclusive of 15 additional accidental death benefits and exclusive of any 16 dividend additions, in an amount not less than the mini-17 mum amount of such insurance with less frequent pre-18 mium payments issued by the insurer at the age of the 19 insured on the plan of industrial or ordinary insurance 20 desired.

Sec. 43. Conversion of Monthly Industrial Life Insurance Policies.—There shall be a provision, in the case of monthly premium industrial life insurance policies, granting, upon proper written request and upon presentation of evidence of insurability satisfactory to the insurer, the privilege of converting a monthly premium industrial life insurance policy to any form of ordinary life insurance regularly issued by the insurer, in accordance with terms and conditions agreed upon with the insurer. The privilege of making such conversion need be granted only if the insurer's monthly premium industrial policies on the life insured, in force as premium paying insurance and on which conversion is requested, grant benefits in event of death, exclusive of additional accidental death

- 15 benefits and exclusive of any dividend additions, in an
- 16 amount not less than the minimum amount of ordinary
- 17 insurance issued by the insurer at the age of the insured
- 18 on the plan of ordinary insurance desired.
 - Sec. 44. Title of Industrial Life Insurance Policies.—
- 2 There shall be a title on the face of each industrial life
- 3 insurance policy briefly describing its form.
- Sec. 45. Application of Industrial Life Provisions to
- 2 Term or Specified Insurance.—Any of the provisions re-
- quired in industrial life insurance policies by sections
- 4 thirty-two to forty-four, inclusive, of this article or any
- 5 portion thereof which are not applicable to single pre-
- 6 ------- on town malicine on to malicine install on the malicine
- 6 mium or term policies or to policies issued or granted
- 7 pursuant to nonforfeiture provisions shall to that extent
- not be incorporated therein.

- Sec. 46. Prohibited Provisions in Industrial Life Insur-2 ance Policies.—No policy of industrial life insurance shall 3 contain any of the following provisions:
 - (a) A provision by which the insurer may deny liability under the policy for the reason that the insured has previously obtained other insurance from the same insurer.
- 6 viously obtained other insurance from the same insurer.
 7 (b) A provision giving the insurer the right to declare
 8 the policy void because the insured has had any disease
 9 or ailment, whether specified or not, or because the in-
- 10 sured has received institutional, hospital, medical or sur-
- gical treatment or attention, except a provision which gives the insurer the right to declare the policy void if
- 13 the insured has, within two years prior to the issuance
- 14 of the policy, received institutional, hospital, medical or
- 15 surgical treatment or attention and if the insured or
- 16 claimant under the policy fails to show that the condition
- 17 occasioning such treatment or attention was not of a
- 18 serious nature or was not material to the risk.
- 19 (c) A provision giving the insurer the right to declare 20 the policy void because the insured has been rejected for
- 21 insurance, unless such right be conditioned upon a show-
- 22 ing by the insurer that knowledge of such rejection would
- 23 have led to a refusal by the insurer to make such contract.

Sec. 47. Burial Insurance.—(a) Burial insurance is that

surance.

10

- 2 type of insurance whereby an insurer agrees to pay for 3 any or all of the incidents of the burial of the body of a 4 named or designated person, whether such insurance is 5 evidenced or effected by any kind of agreement, policy, 6 contract, bond, assurance, guarantee, by-law, regulation, 7 or otherwise. No provision of this article except this sec-8 tion shall apply to burial insurance, and no provision of 9 article fourteen of this chapter shall apply to burial in-
- 11 (b) Burial insurance shall be transacted only by in-12 surers licensed in this State to transact life insurance.
- 13 (c) All burial insurance benefits shall be paid in cash 14 to the beneficiary. No insurer issuing burial insurance 15 shall contract to pay or pay such benefits or any part 16 thereof to any official undertaker, designated undertaker 17 or undertaking concern, or to any particular tradesman 18 or business man.
- 19 (d) This section shall not apply to fraternal benefit 20 societies operating under article twenty-three of this 21 chapter or to any organization of employees under a 22 common employer.

Article 14. Group Life Insurance

Section 1. Contracts Must Meet Group Requirements.—
2 (a) No life insurance policy or certificate shall be de3 livered or issued for delivery in this State insuring the
4 lives of more than one individual unless to one of the
5 groups as provided for in sections two to five, inclusive,
6 of this article, and unless in compliance with the other
7 applicable provisions of those sections.

- 8 (b) Paragraph (a), above, shall not apply to life insur-9 ance policies:
- 10 (1) Insuring only individuals related by marriage, 11 blood or legal adoption;
- 12 (2) Insuring only individuals having a common interest 13 through ownership of a business enterprise, or a sub-14 stantial legal interest or equity therein, and who are ac-15 tively engaged in the management thereof; or
- 16 (3) Insuring only individuals otherwise having an in-17 surable interest in each other's lives.

- 18 (c) Nothing in this article validates any charge or practice illegal under any rule of law or regulation governing 20 usury, small loans, retail instalment sales, or the like, or 21 extends the application of any such rule of law or regulation to any transaction not otherwise subject thereto.
 - Sec. 2. Employee Groups.—The lives of a group of individuals may be insured under a policy issued to an employer, or to the trustees of a fund established by an employer, which employer or trustees shall be deemed the policyholder, to insure employees of the employer for the benefit of persons other than the employer, subject to the following requirements:
- 8 (a) The employees eligible for insurance under the 9 policy shall be all of the employees of the employer, or 10 all of any class or classes thereof determined by conditions pertaining to their employment. The policy may 11 12 provide that the term "employees" shall include the em-13 ployees of one or more subsidiary corporations, and the 14 employees, individual proprietors, and partners of one or more affiliated corporations, proprietors or partnerships 15 if the business of the employer and of such affiliated cor-16 17 porations, proprietors or partnerships is under common control through stock ownership, contract or otherwise. 18 19 The policy may provide that the term "employees" shall 20 include the individual proprietor or partners if the em-21 ployer is an individual proprietor or a partnership. The 22 policy may provide that the term "employees" shall include retired employees. No director of a corporate em-23 24 ployer shall be eligible for insurance under the policy 25 unless such person is otherwise eligible as a bona fide 26 employee of the corporation by performing services other 27 than the usual duties of a director. No individual pro-28 prietor or partner shall be eligible for insurance under 29 the policy unless he is actively engaged in and devotes a 30 substantial part of his time to the conduct of the business 31 of the proprietor or partnership. A policy issued to trus-32 tees may provide that the term "employees" shall include the trustees or their employees, or both, if their duties 33 are principally connected with such trusteeship. A policy 34 issued to insure the employees of a public body may pro-35

59

3

36 vide that the term "employees" shall include elected or37 appointed officials.

- 38 (b) The premium for the policy shall be paid by the 39 policyholder, either wholly from the employer's funds or 40 funds contributed by him or partly from such funds and party from funds contributed by the insured employees. 41 42 No policy may be issued on which the entire premium is to be derived from funds contributed by the insured em-43 ployees, except that the entire premium may be paid from funds contributed by the insured employees if the amount of insurance does not exceed one thousand dollars on the 46 47 life of any employee. A policy on which part of the 48 premium is to be derived from funds contributed by the insured employees may be placed in force only if at least 49 seventy-five percent of the then eligible employees, ex-50 51 cluding any as to whom evidence of individual insurability is not satisfactory to the insurer, elect to make the 52 required contributions. A policy on which no part of the 53 premium is to be derived from funds contributed by the insured employees must insure all eligible employees, or all except any as to whom evidence of individual insur-57 ability is not satisfactory to the insurer.
 - (c) The policy must cover at least ten employees at date of issue.
- 60 (d) The amounts of insurance under the policy must 61 be based upon some plan precluding individual selection 62 either by the employees or by the employer or trustees.
 - Sec. 3. *Debtor Groups.*—The lives of a group of individuals may be insured under a policy issued to a creditor, who shall be deemed the policyholder, to insure debtors of the creditor, subject to the following requirements:
- 6 (a) The debtors eligible for insurance under the policy shall be all of the debtors of the creditor whose indebted7 ness is repayable either (i) in instalments, or (ii) in one 8 sum at the end of a period not in excess of eighteen 9 months from the initial date of debt, or all of any class or classes thereof determined by conditions pertaining to 11 the indebtedness or to the purchase giving rise to the 12 indebtedness. The policy may provide that the term 13 "debtors" shall include the debtors of one or more sub-

14 sidiary corporations, and the debtors of one or more affi-15 liated corporation, proprietors, or partnerships if the 16 business of the policyholder and of such affiliated corporations, propietors or partnerships is under common 17 18 control through stock ownership, contract or otherwise. 19 No debtor shall be eligible unless the indebtedness con-20 stitutes an obligation to repay which is binding upon him 21 during his lifetime, at and from the date the insurance 22 becomes effective upon his life.

23

26

29

32

33

37

38

39

40 41

42

43

45

46 47

48

49

50

51

52

- (b) The premium for the policy shall be paid by the 24 policyholder, either from the creditor's funds, or from 25 charges collected from the insured debtors, or from both. A policy on which part or all of the premium is to be 27 derived from the collection from the insured debtors of 28 identifiable charges not required of uninsured debtors shall not include, in the class or classes of debtors eligible 30 for insurance, debtors under obligations outstanding at 31 its date of issue without evidence of individual insurability unless at least seventy-five percent of the then eligible debtors elect to pay the required charges. A policy on which no part of the premium is to be derived 34 35 from the collection of such identifiable charges must in-36 sure all eligible debtors, or all except any as to whom evidence of individual insurability is not satisfactory to the insurer.
 - (c) The policy may be issued only if the group of eligible debtors is then receiving new entrants at the rate of at least one hundred persons yearly, or may reasonably be expected to receive at least one hundred new entrants during the first policy year, and only if the policy reserves to the insurer the right to require evidence of individual insurability if less than seventy-five percent of the new entrants become insured. The policy may exclude from the classes eligible for insurance classes of debtors determined by age.
 - (d) The amount of insurance on the life of any debtor shall at no time exceed the amount owed by him which is repayable in instalments to the creditor, or ten thousand dollars, whichever is less. Where the indebtedness is repayable in one sum to the creditor, the insurance on the life of any debtor shall in no instance be in effect

for a period in excess of eighteen months except that such insurance may be continued for an additional period not exceeding six months in the case of default, extension or recasting of the loan. The amount of the insurance on the life of any debtor shall at no time exceed the amount of the unpaid indebtedness, or ten thousand dollors, whichever is less.

- 62 (e) The insurance shall be payable to the policyholder.
 63 Such payment shall reduce or extinguish the unpaid in64 debtedness of the debtor to the extent of such payment.
- Sec. 4. Labor Union Groups.—The lives of a group of 2 individuals may be insured under a policy issued to a 3 labor union, which shall be deemed the policyholder, to 4 insure members of such union for the benefit of persons other than the union or any of its officials, representatives 6 or agents, subject to the following requirements:
- 7 (a) The members eligible for insurance under the policy 8 shall be all of the members of the union, or all of any 9 class or classes thereof determined by conditions pertaining to their employment, or to membership in the union, or both.
- 12 (b) The premium for the policy shall be paid by the 13 policyholder, either wholly from the union's funds, or partly from such funds and partly from funds contributed by the insured members specifically for their insurance, 15 except that the entire premium may be paid from funds contributed by the insured members specifically for their 17 18 insurance if the amount of insurance does not exceed one 19 thousand dollars on the life of any member. A policy on 20 which part of the premium is to be derived from funds contributed by the insured members specifically for their insurance may be placed in force only if at least seventy-23 five percent of the then eligible members, excluding any as to whom evidence of individual insurability is not satis-24 25 factory to the insurer, elect to make the required contributions. A policy on which no part of the premium is 26 27 to be derived from funds contributed by the insured members specifically for their insurance must insure all eligible 28 members, or all except any as to whom evidence of individual insurability is not satisfactory to the insurer.

32

10

11 12

13

14

15

16

17

18 19

20

21

22

23

24

25

26 27

28 29

30

31

32

33

- (c) The policy must cover at least twenty-five members at date of issue.
- (d) The amounts of insurance under the policy must
 be based upon some plan precluding individual selection
 either by the members or by the union.
- Sec. 5. Trustee Groups.—The lives of a group of individuals may be insured under a policy issued to the
 trustees of a fund established by two or more employers
 in the same industry or by one or more labor unions, or
 by one or more employers and one or more labor unions,
 which trustees shall be deemed the policyholders, to
 insure employees of the employers or members of the
 union for the benefit of persons other than the employers
 or the unions, subject to the following requirements:
 - (a) The persons eligible for insurance shall be all of the employees of the employers or all of the members of the unions, or all of any class or classes thereof determined by conditions pertaining to their employment, or to membership in the unions, or to both. The policy may provide that the term "employees" shall include retired employees, and the individual proprietor or partner if an employer is an individual proprietor or a partnership. No director of a corporate employer shall be eligible for insurance under the policy unless such person is otherwise eligible as a bona fide employee of the corporation by performing services other than the usual duties of a director. No individual proprietor or partner shall be eligible for insurance under the policy unless he is actively engaged in and devotes a substantial part of his time to the conduct of the business of the proprietor or partnership. The policy may provide that the term "employees" shall include the trustees or their employees, or both, if their duties are principally connected with such trusteeship.
 - (b) The premium for the policy shall be paid by the trustees wholly from funds contributed by the employer or employers of the insured persons, or by the union or unions, or by both, or partly from such funds and partly from funds contributed by the insured persons. No policy may be issued on which the entire premium is to be derived from funds contributed by the insured persons

49

50

53

56

57

59

60

specifically for their insurance. A policy on which part of the premium is to be derived from funds contributed 38 by the insured persons specifically for their insurance may be placed in force only if at least seventy-five percent of the then eligible persons, excluding any as to 40 41 whom evidence of insurability is not satisfactory to the 42 insurer, elect to make the required contributions. A policy on which no part of the premium is to be derived from funds contributed by the insured persons specifically for their insurance must insure all eligible persons, or all except any as to whom evidence of individual insurability 46 47 is not satisfactory to the insurer.

- (c) The policy must cover at date of issue at least one hundred persons and not less than an average of five persons per employer unit; and if the fund is established by 51 the members of an association of employers the policy 52 may be issued only if (A) either (1) the participating employers constitute at date of issue at least sixty percent 54 of those employer members whose employees are not already covered for group life insurance or (2) the total number of persons covered at date of issue exceeds six hundred; and (B) the policy shall not require that, if a participating employer discontinues membership in the association, the insurance of his employees shall cease solely by reason of such discontinuance.
- (d) The amounts of insurance under the policy must 61 62 be based upon some plan precluding individual selection 63 either by the insured persons or by the policyholder, 64 employers, or unions.
- Sec. 6. Limit as to Amount.—No such policy of group 2 life insurance may be issued to an employer, or to a labor 3 union, or to the trustees of a fund established in whole or 4 in part by an employer or a labor union, which provides 5 term insurance on any person which together with any 6 other term insurance under any group life insurance policy or policies issued to the employer or employers of such person or to a labor union or labor unions of which such person is a member or to the trustees of a fund or funds established in whole or in part by such employer or em-10 ployers or such labor union or labor unions, exceeds

twenty thousand dollars, unless one hundred and fifty percent of the annual compensation of such person from 14 his employer or employers exceeds twenty thousand dol-15 lars, in which event all such term insurance shall not 16 exceed forty thousand dollars or one hundred and fifty percent of such annual compensation, whichever is the 17 18 lesser.

Sec. 7. Dependent Coverage.—Any policy issued pursu-2 ant to sections two, four and five of this article may be 3 extended to insure the employees or members against 4 loss due to the death of their spouses and minor children, or any class or classes thereof, subject to the following requirements:

6

24

25 26

27

- 7 (a) The premium for the insurance shall be paid by 8 the policyholder, either from the employer's or union's funds or funds contributed by the employer or union, or 10 from funds contributed by the insured employees or members, or from both. If any part of the premium is to be 11 12 derived from funds contributed by the insured employees 13 or members, the insurance with respect to spouses and 14 children may be placed in force only if at least seventy-15 five percent of the then eligible employees or members, excluding any as to whose family members evidence of insurability is not satisfactory to the insurer, elect to make 17 18 the required contribution. If no part of the premium is 19 to be derived from funds contributed by the employees 20 or members, all eligible employees or members, excluding 21 any as to whose family members evidence of insurability is not satisfactory to the insurer, must be insured with 23 respect to their spouses and children.
 - (b) The amounts of insurance must be based upon some plan precluding individual selection either by the employees or members or by the policyholder, employer or union, and shall not exceed, with respect to any spouse or child, the amount shown in the following schedule:

2 9	Age of Family Member	Maximum Amount		
30	at Death	of	Ir	isurance
31	Under 6 months		\$	100.00
32	6 months and under 2 years	ur Tear		200.00
	2 years and under 3 years			400.00

66

34	3 years and under 4 years	600.00
35	4 years and under 5 years	800.00
36	5 years and over	1,000.00

- 37 (c) Upon termination of the insurance with respect to 38 the members of the family of any employee or member by reason of the employee's or member's termination of 39 40 employment, termination of membership in the class or 41 classes eligible for coverage under the policy, or death, the 42 spouse shall be entitled to have issued by the insurer, without evidence of insurability, an individual policy of 44 life insurance without disability or other supplementary benefits, providing application for the individual policy 46 shall be made, and the first premium paid to the insurer, 47 within thirty-one days after such termination, subject to the requirements of paragraphs (a), (b) and (c) of sec-48 49 tion sixteen of this article. If the group policy terminates 50 or is amended so as to terminate the insurance of any class of employees or members and the employee or mem-51 52 ber is entitled to have issued an individual policy under section seventeen of this article, the spouse shall also be entitled to have issued by the insurer an individual policy, subject to the conditions and limitations provided above. If the spouse dies within the period during which he would have been entitled to have an individual policy **57** issued in accordance with this provision, the amount of life insurance which he would have been entitled to have 60 issued under such individual policy shall be payable as a claim under the group policy, whether or not application for the individual policy or the payment of the first 63 premium therefor has been made.
- (d) Notwithstanding section fifteen of this article, only 65 one certificate need be issued for delivery to an insured person if a statement concerning any dependent's coverage is included in such certificate.
- Sec. 8. Group Life Standard Provisions.—(a) Except as 2 set forth in subsection (b), below, no policy of group life 3 insurance shall be delivered in this State unless it con-4 tains in substance the standard provisions as required by 5 sections nine to eighteen, inclusive, of this article, or pro-6 visions which in the opinion of the commissioner are more

7 favorable to the persons insured, or at least as favorable 8 to the persons insured and more favorable to the policy-9 holder.

10 (b) The provisions of sections fourteen to eighteen, 11 inclusive, of this article shall not apply to policies issued 12 to a creditor to insure debtors of such creditor. The 13 standard provisions required for individual life insurance 14 policies shall not apply to group life insurance policies. 15 If the group life insurance policy is on a plan of insurance 16 other than the term plan, it shall contain a nonforfeiture provision or provisions which in the opinion of the com-17 18 missioner is or are equitable to the insured persons and to the policyholder, but nothing herein shall be construed 19 20 to require that group life insurance policies contain the same nonforfeiture provisions as are required for indi-22 vidual life insurance policies.

Sec. 9. Grace Period.—In group life policies there shall be a provision that the policyholder is entitled to a grace period of thirty-one days for the payment of any premium due except the first, during which grace period the death benefit coverage shall continue in force, unless the policyholder shall have given the insurer written notice of discontinuance in advance of the date of discontinuance and in accordance with the terms of the policy. The policy may provide that the policyholder shall be liable to the insurer for the payment of a pro rata premium for the time the policy was in force during such grace period.

Sec. 10. Incontestability.—In group life policies there shall be a provision that the validity of the policy shall not be contested, except for nonpayment of premiums, after it has been in force for two years from its date of issue; and that no statement made by any person insured under the policy relating to his insurability shall be used in contesting the validity of the insurance with respect to which such statement was made after such insurance has been in force prior to the contest for a period of two years during such person's lifetime nor unless it is contained in a written instrument signed by him.

Sec. 11. Application, Representations.—In group life

- 2 policies there shall be a provision that a copy of the appli3 cation, if any, of the policyholder shall be attached to the
 4 policy when issued, that all statements made by the
 5 policyholder or by the persons insured shall be deemed
 6 representations and not warranties, and that no state7 ment made by any person insured shall be used in any
 8 contest unless a copy of the instrument containing the
 9 statement is or has been furnished to such person or to
 10 his beneficiary.
- Sec. 12. Insurability.—In group life policies there shall 2 be a provision setting forth the conditions, if any, under 3 which the insurer reserves the right to require a person 4 eligible for insurance to furnish evidence of individual 5 insurability satisfactory to the insurer as a condition to 6 part or all of his coverage.
- Sec. 13. Misstatement of Age.—In group life policies there shall be a provision specifying an equitable adjustment of premiums or of benefits or of both to be made in the event the age of a person insured has been misstated, such provision to contain a clear statement of the method of adjustment to be used.
- Sec. 14. Beneficiary.—In group life policies there shall be a provision that any sum becoming due by reason of the death of the person insured shall be payable to the beneficiary designated by the person insured, subject to the provisions of the policy in the event there is no designated beneficiary, as to all or any part of such sum, living at the death of the person insured, and subject to any right reserved by the insurer in the policy and set forth in the certificate to pay at its option a part of such sum not exceeding five hundred dollars to any person appearing to the insurer to be equitably entitled thereto by reason of having incurred funeral or other expenses incident to the last illness or death of the person insured.
 - Sec. 15. Certificates.—In group life policies there shall 2 be a provision that the insurer will issue to the policy-3 holder for delivery to each person insured an individual 4 certificate setting forth a statement as to the insurance 5 protection to which he is entitled, to whom the insurance

6 benefits are payable, and the rights and conditions set 7 forth in sections sixteen, seventeen, and eighteen of this 8 article.

Sec. 16. Conversion on Termination of Eligibility.—In group life policies there shall be a provision that if the insurance, or any portion of it, on a person covered under the policy, other than the child of an employee insured 5 pursuant to section seven of this article, ceases because of termination of employment or of membership in the class or classes eligible for coverage under the policy, such person shall be entitled to have issued to him by the insurer. without evidence of insurability, an individual policy of life insurance without disability or other supplementary benefits, provided application for the individual policy 12 shall be made, and the first premium paid to the insurer, 13 within thirty-one days after such termination: Provided 14 further that

(a) The individual policy shall, at the option of such person, be on any one of the forms of insurance then customarily issued by the insurer, except term insurance, at the age and for the amount applied for, except that there shall be available to a person whose term insurance under the group policy ceases, as provided above, preliminary or interim term insurance for not more than one year from such termination;

15

16 17

18 19

20

21

22

23

2425

26

27

28

29

30

- (b) The individual policy shall be in an amount not in excess of the amount of life insurance which ceases because of such termination, provided that any amount of insurance which shall have matured on or before the date of such termination as an endowment payable to the person insured, whether in one sum or in instalments or in the form of an annuity, shall not, for the purposes of this provision, be included in the amount which is considered to cease because of such termination; and
- 32 (c) The premium on the individual policy shall be at the insurer's then customary rate applicable to the form 34 and amount of the individual policy, to the class of risk to 35 which such person then belongs, and to his age attained on the effective date of the individual policy.

Sec. 17. Conversion on Termination of Policy.—In group

life policies there shall be a provision that if the group policy terminates or is amended so as to terminate the 4 insurance of any class of insured persons, every person 5 insured thereunder at the date of such termination, other than a child of an employee insured pursuant to section seven of this article, whose insurance terminates and who 8 has been so insured for at least three years under a group policy issued five years or more prior to such termination date, shall be entitled to have issued to him by the insurer 10 11 an individual policy of life insurance, subject to the same conditions and limitations as are provided by section six-12 13 teen of this article, except that term insurance shall not 14 be available and, except that the group policy may provide 15 that the amount of such individual policy shall not exceed 16 the smaller of (a) the amount of the person's life insurance protection ceasing because of the termination or 17 18 amendment of the group policy, less the amount of any 19 life insurance for which he is or becomes eligible under 20 any group policy issued or reinstated by the same or 21 another insurer within thirty-one days after such termination, and (b) two thousand dollars.

Sec. 18. Death Pending Conversion.—In group life policies there shall be a provision that if a person insured under the group policy dies during the period within which he would have been entitled to have an individual policy issued to him in accordance with sections sixteen and seventeen of this article and before such an individual policy shall have become effective, the amount of life insurance which he would have been entitled to have issued to him under such individual policy shall be payable as a claim under the group policy, whether or not application for the individual policy or the payment of the first premium therefor has been made.

Sec. 19. Certificate or Statement of Coverage to Debtor.

2 —In the case of a group life policy issued to a creditor to

3 insure debtors of such creditor, there shall be a provision

4 in such policy that the insurer will furnish to the policy
5 holder for delivery to each debtor insured under the policy

6 a certificate or statement of coverage form which shall

7 contain a statement that the life of the debtor is insured

8 under the policy and that any death benefit paid there-9 under by reason of his death shall be applied to reduce or 10 extinguish the indebtedness.

Sec. 20. Notice of Conversion Rights.—If any individual insured under a group life insurance policy hereafter delivered in this State becomes entitled under the terms of such policy to have an individual policy of life insurance issued to him without evidence of insurability, subject to making of application and payment of the first premium within the period specified in such policy, and if such individual is not given notice of the existence of such right at least fifteen days prior to the expiration date of 9 10 such period, then, in such event the individual shall have an additional period within which to exercise such right, 11 12 but nothing contained in this section shall be construed to continue any insurance beyond the period provided in 13 such policy. Such additional period shall expire fifteen 15 days next after the individual is given such notice but in no event shall such additional period extend beyond 16 sixty days next after the expiration date of the period 17 provided in such policy. Written notice presented to the 18 19 individual or mailed by the policyholder to the last known address of the individual or mailed by the insurer to the last known address of the individual as furnished by the 21 22 policyholder shall constitute notice for the purpose of this 23 section.

Sec. 21. Application of Dividends; Rate Reductions.— Any policy dividends hereafter declared, or reduction in rate of premiums hereafter made or continued for the first or any subsequent year of insurance, under any policy of group life insurance heretofore or hereafter issued to any policyholder may be applied to reduce the policy-7 holder's part of the cost of such insurance, except that if the aggregate dividends or refunds or credits under such group life policy and any other group policy or contract issued to the policyholder exceed the aggregate contribu-10 tions of the policyholder toward the cost of the coverages, 11 12 including expenditures made in connection with administration of such policies, such excess shall be applied by the 14 policyholder for the sole benefit of insured employees or 15 members.

Sec. 22. Standard Provisions of Group Annuity Contracts.—No group annuity contract shall be delivered or issued for delivery in this State and no certificate shall be used in connection therewith unless it contains in substance the provisions set forth in sections twenty-three to twenty-seven, inclusive, of this article, to the extent that such provisions are applicable to such contract or to such certificate, as the case may be, or provisions which in the opinion of the commissioner are more favorable to annuitants, or not less favorable to annuitants and more favorable to the holders.

Sec. 23. Grace Period of Group Annuity.—In group annuity contracts there shall be a provision that there shall be a period of grace of thirty-one days within which any stipulated payment to be remitted by the holder to the insurer, falling due after one year from date of issue, may be made, subject, at the option of the insurer, to an interest charge thereon at a rate to be specified in the contract, which shall not exceed six percent per annum for the number of days of grace elapsing before such payment.

Sec. 24. Entire Contract of Group Annuity.—In group annuity contracts there shall be a provision specifying the document or documents which shall constitute the entire contract between parties. The document or documents so specified shall be only (a) the contract, (b) the contract together with the application of the holder of which a copy is attached thereto, or (c) the contract together with the application of the holder of which a copy is attached thereto, and the individual applications of annuitants on file with the insurer and referred to therein.

Sec. 25. Misstatements in Group Annuity.—In group 2 annuity contracts there shall be a provision, with an 3 appropriate reference thereto in the certificate, for the 4 equitable adjustment of the benefits payable under the 5 contract or of the stipulated payments thereunder, if it be

6 found that the sex, age, service, salary or any other fact
7 determining the amount of any stipulated payment or
8 the amount or date or dates of payment of any benefit
9 with respect to any annuitant covered thereby has been
10 misstated.

Sec. 26. Termination Benefits of Group Annuity.—In 2 group annuity contracts there shall be a provision or provisions, with an appropriate reference thereto in the certificate, specifying the nature and basis of ascertainment of the benefits which will be available to an annuitant who contributes to the cost of the annuity and the conditions of payment thereof in the event of either the termination of employment of the annuitant, except by death, 8 or the discontinuance of stipulated payments under the 10 contract. Such provision or provisions shall, in either of such events, make available to an annuitant who con-11 12 tributed to the cost of the annuity a paid-up annuity pay-13 able commencing at a fixed date in an amount at least 14 equal to that purchased by the contributions of the annuitant, determinable as of the respective dates of pay-16 ment of the several contributions, as shown by a schedule 17 in the contract for that purpose, based upon the same 18 mortality table, rate of interest and loading formula used 19 in computing the stipulated payments under such contract. 20 Such provision or provisions may, by way of exception to the foregoing, provide that if the amount of the annuity 21 22 determined as aforesaid from such fixed commencement 23 date would be less than one hundred twenty dollars 24 annually, the insurer may at its option, in lieu of granting 25 such paid-up annuity, pay a cash surrender value at least 26 equal to that hereinafter provided.

If a cash surrender value, in lieu of such paid-up annuity, is allowed to the annuitant by the terms of such contract, it may be either in a single sum or in equal instalments over a period of not more than twelve months and it shall at least equal either (a) or (b), whichever is less:

27

28

29

31

32

33 (a) The amount of reserve attributable to the annuit-34 ant's contributions less a surrender charge not exceeding

- 35 thirty-five percent of the average annual contribution 36 made by the annuitant; or
- 37 (b) The amount which would be payable as a death 38 benefit at the date of surrender.
- Such contract shall also provide that in case of the death of an annuitant before the commencement date of the
- 41 annuity, the insurer shall pay a death benefit at least
- 42 equal to the aggregate amount of the annuitant's contri-
- 43 butions without interest. If any benefits are available to
- 44 the holder in either of such events, the contract shall
- 45 contain a provision or provisions specifying the nature
- 46 and basis of ascertainment of such benefits.
 - Sec. 27. Group Annuity Certificates.—In group annuity
- 2 contracts there shall be a provision that the insurer will
- 3 issue to the holder of the contract for delivery to each
- 4 annuitant who contributes thereunder an individual cer-
- 5 tificate setting forth a statement in substance of the bene-
- 6 fits to which he is entitled under such contract.

Article 15. Accident and Sickness Insurance

- Section 1. Scope of Article.—Nothing in this article shall apply to or affect:
- 3 (a) Any policy of liability or workmen's compensation4 insurance.
- 5 (b) Any group accident and sickness policy issued in 6 accordance with article sixteen of this chapter.
- 7 (c) Life insurance (including endowment or annuity
- 8 contracts), or contracts supplemental thereto, which con-9 tain only such provisions relating to accident and sickness
- 10 insurance as (1) provide additional benefits in case of
- 11 death by accidental means, or as (2) operate to safe-
- 12 guard such contracts against lapse, or to give a special
- 13 surrender value or special benefit or an annuity in the
- 14 event that the insured shall become totally and per-
- 15 manently disabled as defined by the contract or supple-
- 16 mental contract.
- 17 (d) Reinsurance.
 - Sec. 2. Scope and Format of Policy.—No policy of acci-
- 2 dent and sickness insurance shall be delivered or issued
- 3 for delivery to any person in this State unless:

5

6

7

8

9

11

15

16

17

19 20

26

27

29

31 32

33

34 35

36

37 38

39

- (a) The entire money and other considerations therefor are expressed therein; and
- (b) The time at which the insurance takes effect and terminates is expressed therein; and
- (c) It purports to insure only one person, except that a policy may insure, originally or by subsequent amend-10 ment upon the application of an adult member of a family who shall be deemed the policyholder, any two or more 12 eligible members of that family, including husband, wife, dependent children or any children under a specified age 13 14 which shall not exceed nineteen years and any other person dependent upon the policyholder; and
- (d) The style, arrangement and over-all appearance of the policy give no undue prominence to any portion of the text, and unless every printed portion of the text of the 18 policy and of any endorsements or attached papers is plainly printed in light-faced type of a style in general use, the size of which shall be uniform and not less than 21 22 ten-point with a lower-case unspaced alphabet length not 23 less than one hundred and twenty-point (the "text" shall 24 include all printed matter except the name and address of the insurer, name or title of the policy, the brief 25 description, if any, and captions and subcaptions), the policy shall clearly indicate on the first page its optionally 28 renewable nature; and
- (e) The exceptions and reductions of indemnity are set 30 forth in the policy and, except those which are set forth in sections four and five of this article, are printed, at the insurer's option, either included with the benefit provision to which they apply, or under an appropriate caption such as "Exceptions", or "Exceptions and Reductions": Provided, That if an exception or reduction specifically applies only to a particular benefit of the policy, a statement of such exception or reduction shall be included with the benefit provision to which it applies; and
- 40 (f) Each such form, including riders and endorsements, 41 shall be identified by a form number in the lower left-42 hand corner of the first part thereof; and
 - (g) It contains no provision purporting to make any

portion of the charter, rules, constitution, or by-laws of the insurer a part of the policy unless such portion is set forth in full in the policy, except in the case of the incorporation of, or reference to, a statement of rates or classification of risks, or short-rate table filed with the commissioner.

Sec. 3. Age Limit.—If any such policy contains a provision establishing as an age limit or otherwise, a date after which the coverage provided by the policy will not 4 be effective, and if such date falls within a period for which premium is accepted by the insurer or if the insurer accepts a premium after such date, the coverage provided by the policy will continue in force until the end of the period for which premium has been accepted. In the event the age of the insured has been misstated and if, according to the correct age of the insured, the coverage 10 provided by the policy would not have become effective, 11 12 or would have ceased prior to the acceptance of such premium or premiums, then the liability of the insurer shall be limited to the refund, upon request, of all premiums paid for the period not covered by the policy.

Sec. 4. Required Policy Provisions.—Except as provided in section six of this article, each such policy delivered or issued for delivery to any person in this State shall contain the provisions specified in this section in the words in which the same appear in this section: Provided, however. That the insurer may, at its option, substitute for one or more of such provisions corresponding provisions of the different wording approved by the commissioner which are in each instance not less favorable 10 in any respect to the insured or the beneficiary. Such provisions shall be preceded individually by the caption 11 appearing in this section or, at the option of the insurer, 12 **13** by such appropriate individual or group captions or subcaptions as the commissioner may approve. 14

(a) A provision as follows:

15

"Entire Contract; Changes: This policy, including the endorsements and the attached papers, if any, constitutes the entire contract of insurance. No change in this policy shall be valid until approved by an executive officer of the insurer and unless such approval be endorsed hereon or attached hereto. No agent has authority to change this policy or to waive any of its provisions."

(b) A provision as follows:

"Time Limit on Certain Defenses: (1) After two years from the date of issue of this policy no misstatements, except fraudulent misstatements, made by the applicant in the application for such policy shall be used to void the policy or to deny a claim for loss incurred or disability (as defined in the policy) commencing after the expiration of such two year period."

The foregoing policy provision shall not be so construed as to affect any legal requirement for avoidance of a policy or denial of a claim during such intial two year period, nor to limit the application of clauses (a), (b), (c), (d) and (e) of section five of this article in the event of misstatement with respect to age or occupation or other insurance. A policy which the insured has the right to continue in force subject to its terms by the timely payment of premium (i) until at least age fifty, or (ii) in the case of a policy issued after age forty-four, for at least five years from its date of issue, may contain in lieu of the foregoing the following provision (from which the clause in parentheses may be omitted at the insurer's option) under the caption "Incontestable":

"After this policy has been in force for a period of two years during the lifetime of the insured (excluding any period during which the insured is disabled), it shall become incontestable as to the statements contained in the application.

"(2) No claim for loss incurred or disability (as defined in the policy) commencing after two years from the date of issue of this policy shall be reduced or denied on the ground that a disease or physical condition not excluded from coverage by name or specific description effective on the date of loss had existed prior to the effective date of coverage of this policy."

(c) A provision as follows:

"Grace Period: A grace period of._____ (insert a number not less than '7' for weekly premium policies,

б4

67

69

70 71

72

60 '10' for monthly premium policies and '31' for all other 61 policies) days will be granted for the payment of each premium falling due after the first premium, during which 63 grace period the policy shall continue in force."

A policy in which the insurer reserves the right to 65 refuse renewal shall have at the beginning of the above provision, "Unless not less than thirty days prior to the premium due date the insurer has delivered to the insured or has mailed to his last address as shown by the records of the insurer written notice of its intention not to renew this policy beyond the period for which the premium has been accepted. . . . "

(d) A provision as follows:

73 "Reinstatement: If any renewal premium be not paid within the time granted the insured for payment, a sub-74 75 sequent acceptance of premium by the insurer or by any 76 agent duly authorized by the insurer to accept such premium, without requiring in connection therewith an 78 application for reinstatement, shall reinstate the policy: Provided, however, That if the insurer or such agent requires an application for reinstatement and issues a con-81 ditional receipt for the permium tendered, the policy will 82 be reinstated upon approval of such application by the insurer or, lacking such approval, upon the forty-fifth 83 84 day following the date of such conditional receipt unless the insurer has previously notified the insured in writing 85 of its disapproval of such application. The reinstated 86 policy shall cover only loss resulting from such accidental 87 88 injury as may be sustained after the date of reinstate-89 ment and loss due to such sickness as may begin more than ten days after such date. In all other respects the 91 insured and insurer shall have the same rights thereunder as they had under the policy immediately before the due date of the defaulted premium, subject to any provisions endorsed hereon or attached hereto in connection with the reinstatement. Any premium accepted in connection with a reinstatement shall be applied to a period 97 for which premium has not been previously paid, but not 98 to any period more than sixty days prior to the date of reinstatement." 99

100 The last sentence of the above provision may be omitted

from any policy which the insured has the right to con-102 tinue in force subject to its terms by the timely payment 103 of premiums (1) until at least age fifty, or, (2) in the case 104 of a policy issued after age forty-four, for at least five 105 years from its date of issue.

(e) A provision as follows:

106

107

10\$

110

112

113

115

117

119

136

"Notice of Claim: Written notice of claim must be given to the insurer within twenty days after the occurrence or commencement of any loss covered by the policy, or as soon thereafter as is reasonably possible. Notice 111 given by or on behalf of the insured or the beneficiary to the insurer at.____ (insert the location of such office as the insurer may designate for the purpose), or 114 to any authorized agent of the insurer, with information sufficient to identify the insured, shall be deemed notice 116 to the insurer."

In a policy providing a loss-of-time benefit which may 118 be payable for at least two years, an insurer may at its option insert the following between the first and second 120 sentences of the above provision:

121 "Subject to the qualifications set forth below, if the 122 insured suffers loss of time on account of disability for which indemnity may be payable for at least two years, 124 he shall, at least once in every six months after having 125 given notice of claim give to the insurer notice of con-126 tinuance of said disability, except in the event of legal 127 incapacity. The period of six months following any filing 128 of proof by the insured or any payment by the insurer 129 on account of such claim or any denial of liability in 130 whole or in part by the insurer shall be excluded in 131 applying this provision. Delay in the giving of such 132 notice shall not impair the insured's right to any indem-133 nity which would otherwise have accrued during the pe-134 riod of six months preceding the date on which such 135 notice is actually given."

(f) A provision as follows:

137 "Claim Forms: The insurer, upon receipt of a notice of claim, will furnish to the claimant such forms as are 138 usually furnished by it for filing proofs of loss. If such 139 140 forms are not furnished within fifteen days after the

148

159

161

162

163

164

165

166

167 168

169

170

171 172

173

giving of such notice the claimant shall be deemed to have 142 complied with the requirements of this policy as to proof 143 of loss upon submitting, within the time fixed in the 144 policy for filing proofs of loss, written proof covering the 145 occurrence, the character and the extent of the loss for 146 which claim is made."

(g) A provision as follows:

"Proof of Loss: Written proof of loss must be furnished to the insurer at its said office in case of claim for loss 149 for which this policy provides any periodic payment con-150 tingent upon continuing loss within ninety days after the 151 152 termination of the period for which the insurer is liable and in case of claim for any other loss within ninety days 154 after the date of such loss. Failure to furnish such proof within the time required shall not invalidate nor reduce 155 156 any claim if it was not reasonably possible to give proof within such time, provided such proof is furnished as 157 158 soon as reasonably possible and in no event, except in the absence of legal capacity, later than one year from the 160 time proof is otherwise required."

(h) A provision as follows:

"Time of Payment of Claims: Indemnities payable under this policy for any loss other than loss for which this policy provides any periodic payment will be paid immediately upon receipt of due written proof of such loss. Subject to due written proof of loss, all accrued indemnities for loss for which this policy provides periodic payment will be paid (insert period for payment which must not be less frequently than monthly) and any balance remaining unpaid upon the termination of liability will be paid immediately upon receipt of due written proof."

(i) A provision as follows:

"Payment of Claims: Indemnity for loss of life will be 174 175 payable in accordance with the beneficiary designation and the provisions respecting such payment which may 176 177 be prescribed herein and effective at the time of payment. 178 If no such designation or provision is then effective, such 179 indemnity shall be payable to the estate of the insured. 180 Any other accrued indemnities unpaid at the insured's death may, at the option of the insurer, be paid either
to such beneficiary or to such estate. All other indemnities
will be payable to the insured."

The following provisions, or either of them, may be included with the foregoing provisions at the option of the insurer:

"If any indemnity of this policy shall be payable to the estate of the insured, or to an insured or beneficiary who is a minor or otherwise not competent to give a valid release, the insurer may pay such indemnity, up to an amount not exceeding \$ ______ (insert an amount which shall not exceed one thousand dollars), to any relative by blood or connection by marriage of the insured or beneficiary who is deemed by the insurer to be equitably entitled thereto. Any payment made by the insurer in good faith pursuant to this provision shall fully discharge the insurer to the extent of such payment.

"Subject to any written direction of the insured in the application or otherwise all or a portion of any indemnities provided by this policy on account of hospital nursing, medical, or surgical services may, at the insurer's option and unless the insured requests otherwise in writing not later than the time of filing proofs of such loss, be paid directly to the hospital or person rendering such services; but it is not required that the service be rendered by a particular hospital or person."

(j) A provision as follows:

"Physical Examinations and Autopsy: The insurer at its own expense shall have the right and opportunity to examine the person of the insured when and as often as it may reasonably require during the pendency of a claim hereunder and to make an autopsy in case of death where it is not forbidden by law."

(k) A provision as follows:

"Legal Actions: No action at law or in equity shall be brought to recover on this policy prior to the expiration of sixty days after written proof of loss has been furnished in accordance with the requirements of this policy. No such action shall be brought after the expiration of three years after the time written proof of loss is required to be furnished."

223

225

226

227

228

229

230

231

232

(1) A provision as follows:

"Change of Beneficiary: Unless the insured makes 224 an irrevocable designation of beneficiary, the right to change of beneficiary is reserved to the insured and the consent of the beneficiary or beneficiaries shall not be requisite to surrender or assignment of this policy or to any change of beneficiary or beneficiaries, or to any other changes in this policy."

The first clause of this provision, relating to the irrevocable designation of beneficiary, may be omitted at the insurer's option.

233 (m) In addition each policy, except accident insurance 234 only policies, in which the insurer reserves the right to 235 refuse renewal on an individual basis shall provide, in 236 substance, in a provision thereof or in an endorsement 237 thereon or in a rider attached thereto (entitled "Renew-238 ability"), that subject to the right to terminate the policy 239 upon non-payment of premiums when due, such right to 240 refuse renewal shall not be exercised before the renewal 241 date occurring on, or after and nearest, each anniversary, 242 or in the case of lapse and reinstatement at the renewal 243 date occurring on, or after and nearest, each anniversary of the last reinstatement, and that any refusal of renewal 245 shall be without prejudice to any claim originating while 246 the policy is in force.

Sec. 5. Optional Policy Provisions.—Except as provided 2 in section six of this article, no such policy delivered or issued for delivery to any person in this State shall contain provisions respecting the matters set forth below unless such provisions are in the words in which the same appear in this section: *Provided, however,* That the 7 insurer may, at its option, use in lieu of any such provision a corresponding provision of different wording approved by the commissioner which is not less favorable in any respect to the insured or the beneficiary. Any such 10 provision contained in the policy shall be preceded indi-11 vidually by the appropriate caption appearing in this section or, at the option of the insurer, by such appropriate individual or group captions or subcaptions as the commissioner may approve.

(a) A provision as follows:

16

45 46

47

48

49 50

51

17 "Change of Occupation: If the insured be injured or 18 contract sickness after having changed his occupation to one classified by the insurer as more hazardous than that 19 20 stated in this policy or while doing for compensation 21 anything pertaining to an occupation so classified, the 22 insurer will pay only such portion of the indemnities provided in this policy as the premium paid would have 23 24 purchased at the rates and within the limits fixed by the 25 insurer for such more hazardous occupation. If the in-26 sured changes his occupation to one classified by the insurer as less hazardous than that stated in this policy, the insurer, upon receipt of proof of such change of occu-29pation, will reduce the premium rate accordingly, and 30 will return the excess pro-rata unearned premium from 31 the date of change of occupation or from the policy anni-32 versary date immediately preceding receipt of such proof, 33 whichever is the more recent. In applying this provision, 34 the classification of occupational risk and the premium rates shall be such as have been last filed by the insurer prior to the occurrence of the loss for which the insurer 37 is liable or prior to date of proof of change in occupation with the state official having supervision of insurance 38 in the state where the insured resided at the time this 39 policy was issued; but if such filing was not required, 40 then the classification of occupational risk and the pre-41 mium rates shall be those last made effective by the 42 insurer in such state prior to the occurrence of the loss 43 44 or prior to the date of proof of change in occupation."

(b) A provision as follows:

"Misstatement of Age: If the age of the insured has been misstated, all amounts payable under this policy shall be such as the premium paid would have purchased at the correct age."

(c) A provision as follows:

"Other Insurance in This Insurer: If an accident or 52 sickness or accident and sickness policy or policies previously issued by the insurer to the insured be in force concurrently herewith, making the aggregate indemnity 54 for_____(insert type of coverage or coverages) in

66

76

77

89

excess of \$...___ (insert maximum limit of indemnity 56 57 or indemnities) the excess insurance shall be void and all 58 premiums paid for such excess shall be returned to the 59 insured or to his estate."

60 Or, in lieu thereof:

"Insurance effective at any one time on the insured 62 under a like policy or policies in this insurer is limited to the one such policy elected by the insured, his bene-64 ficiary or his estate, as the case may be, and the insurer 65 will return all premiums paid for all other such policies."

Provided that no policy hereafter issued for delivery 67 in this State which provides, with or without other bene-68 fits, for the payment of benefits or reimbursement for 69 expenses with respect to hospitalization, nursing care, 70 medical or surgical examination or treatment, or ambu-71 lance transportation shall contain any provision for a reduction of such benefits or reimbursement, or any pro-73 vision for avoidance of the policy, on account of other insurance of such nature carried by the same insured with the same or another insurer.

(d) A provision as follows:

"Insurance with Other Insurers: If there be other valid coverage, not with this insurer, providing benefits for the same loss on other than an expense incurred basis and of which this insurer has not been given written notice prior to the occurrence or commencement of loss. 81 the only liability for such benefits under this policy shall 83 be for such proportion of the indemnities otherwise pro-84 vided hereunder for such loss as the like indemnities of which the insurer had notice (including the indemnities under this policy) bear to the total amount of all like indemnities for such loss, and for the return of such por-87 tion of the premium paid as shall exceed the pro-rata portion for the indemnities thus determined."

The insurer may, at its option, include in this provision 90 a definition of "other valid coverage", approved as to 92 form by the commissioner, which definition shall be limited in subject matter to coverage provided by organi-94 zations subject to regulation by insurance law or by in-95 surance authorities of this or any other state of the United

96 States or any province of Canada, and to any other coverage the inclusion of which may be approved by the 97 98 commissioner. In the absence of such definition such term 99 shall not include group insurance, or benefits provided by union welfare plans or by employer or employee 100 101 benefit organizations. For the purpose of applying the 102 foregoing policy provision with respect to any insured 103 any amount of benefit provided for such insured pursuant 104 to any compulsory benefit statute (including any work-105 men's compensation or employer's liability statute) 106 whether provided by a governmental agency or otherwise shall in all cases be deemed to be "other valid cover-107108 age" of which the insurer has had notice. In applying the 109 foregoing policy provision no third party liability coverage shall be included as "other valid coverage." 110

(e) A provision as follows:

111

112 "Relation of Earnings to Insurance: If the total monthly amount of loss of time benefits promised for the same 113 114 loss under all valid loss of time coverage upon the in-115 sured, whether payable on a weekly or monthly basis, 116 shall exceed the monthly earnings of the insured at the 117 time disability commenced or his average monthly earn-118 ings for the period of two years immediately preceding 119 a disability for which claim is made, whichever is the 120 greater, the insurer will be liable only for such propor-121 tionate amount of such benefits under this policy as the 122 amount of such monthly earnings or such average monthly 123 earnings of the insured bears to the total amount of 124 monthly benefits for the same loss under all such cover-125 age upon the insured at the time such disability com-126 mences and for the return of such part of the premiums 127 paid during such two years as shall exceed the pro-rata 128 amount of the premiums for the benefits actually paid 129 hereunder; but this shall not operate to reduce the total 130 monthly amount of benefits payable under all such cover-131 age upon the insured below the sum of two hundred 132 dollars or the sum of the monthly benefits specified in 133 such coverages, whichever is the lesser, nor shall it op-134 erate to reduce benefits other than those payable for loss 135 of time."

158

159 160

162

163

165

166

167

168

170

136 The foregoing policy provision may be inserted only 137 in a policy which the insured has the right to continue 138 in force subject to its terms by the timely payment of premiums (1) until at least age fifty or, (2) in the case 139 of a policy issued after age forty-four, for at least five 140 141 years from its date of issue. The insurer may, at its op-142 tion, include in this provision a definition of "valid loss 143 of time coverage", approved as to form by the commis-144 sioner, which definition shall be limited in subject matter 145 to coverage provided by governmental agencies or by 146 organizations subject to regulation by insurance law or by insurance authorities of this or any other state of the 147 148 United States or any province of Canada, or to any other 149 coverage the inclusion of which may be approved by the 150 commissioner or any combination of such coverages. In 151 the absence of such definition such term shall not include any coverage provided for such insured pursuant to any 152 compulsory benefit statute (including any workmen's 153 154 compensation or employer's liability statute), or benefits 155 provided by union welfare plans or by employer or employee benefit organizations. 156

(f) A provision as follows:

"Unpaid Premium: Upon the payment of a claim under this policy, any premiums then due and unpaid or covered by any note or written order may be deducted there-161 from."

(g) A provision as follows:

"Return of Premium on Cancellation: If the insured 164 cancels this policy, the earned premium shall be computed by the use of the short-rate table last filed with the state official having supervision of insurance in the state where the insured resided when the policy was issued. Cancellation shall be without prejudice to any claim originating prior to the effective date of cancellation." 169

(h) A provision as follows:

171 "Conformity with State Statutes: Any provision of this policy which, on its effective date, is in conflict with the 172 statutes of the state in which the insured resides on such 173 date is hereby amended to conform to the minimum re-174 quirements of such statutes." 175

(i) A provision as follows:

176

177

179 180

181 182

"Illegal Occupation: The insurer shall not be liable for 178 any loss to which a contributing cause was the insured's commission of or attempt to commit a felony or to which a contributing cause was the insured's being engaged in an illegal occupation."

(j) A provision as follows:

183 "Intoxicants and Narcotics: The insurer shall not be 184 liable for any loss sustained or contracted in consequence 185 of the insured's being intoxicated or under the influence 186 of any narcotic unless administered on the advice of a 187 physician."

Sec. 6. Inapplicable or Inconsistent Provisions.—If any provision of this article is in whole or in part inapplicable to or inconsistent with the coverage provided by a particular form of policy, the insurer, with the approval of the commissioner, shall omit from such policy any inapplicable provision or part of a provision, and shall modify any inconsistent provision or part of the provision in such manner as to make the provision as contained in 9 the policy consistent with the coverage provided by the 10 policy.

Sec. 7. Order of Certain Provisions.—The provisions which are the subject of sections four and five of this article or any corresponding provisions which are used in lieu thereof in accordance with such sections, shall be printed in consecutive order of the provisions in such sections or, at the option of the insurer, any such provisions may appear as a unit in any part of the policy, 8 with other provisions to which it may be logically related, provided the resulting policy shall not be in whole 10 or in part unintelligible, uncertain, ambiguous, abstruse, or likely to mislead a person to whom the policy is offered, 11 delivered or issued. 12

Sec. 8. Third Party Ownership.—The word "insured" as used in this article, shall not be construed as preventing a person other than the insured with a proper insurable interest from making application for and owning a policy covering the insured or from being entitled under

6 such a policy to any indemnities, benefits and rights pro-7 vided therein.

- Sec. 9. Requirements of Other Jurisdictions.—(a) Any policy of a foreign or alien insurer, when delivered or issued for delivery to any person in this State, may contain any provision which is not less favorable to the insured or the beneficiary than the provisions of this article and which is prescribed or required by the law of the state under which the insurer is organized.
- 8 (b) Any policy of a domestic insurer may, when issued 9 for delivery in any other state or country, contain any 10 provision permitted or required by the laws of such other 11 state or country.
 - Sec. 10. Franchise Insurance.—Accident and sickness 2 insurance on a franchise plan is hereby declared to be 3 that form of accident and sickness insurance issued to:
 - (a) Five or more employees of any corporation, copartnership or individual employer or any governmental corporation, agency or department thereof, or
- 7 (b) Five or more members of any trade or professional 8 association or of a labor union or of any other association 9 having had an active existence for at least two years 10 where such association or union has a constitution or by-11 laws and is formed in good faith for purposes other than 12 that of obtaining insurance;
- 13 where such persons, with or without their dependents,
- 14 are issued the same form of an individual policy varying
- 15 only as to amounts and kinds of coverage applied
- 16 for by such persons, under an arrangement whereby the
- 17 premiums on such policies may be paid to the insurer
- 18 periodically by the employer, with or without payroll
- 19 deductions, or by the association or union for its mem-
- is deductions, or by the association of union for its mem-
- 20 bers, or by some designated person acting on behalf of
- 21 such employer or association or union. The term "em-
- 22 ployees" as used in this section shall be deemed to include
- 23 the officers, managers, employees and retired employees
- 24 of the employer and the individual proprietor or partners
- 25 if the employer is an individual proprietor or partner-
- 26 ship.

Article 16. Group Accident and Sickness Insurance

7

2

9

10 11

12

13 14

15

16

17

18

19

21

22

23

5

6

8

Section 1. Scope of Article.—(a) Nothing in this article shall apply to or affect any policy of liability or workmen's compensation insurance, or any policy of individual accident and sickness insurance issued in accordance with article fifteen of this chapter, or any policy issued by a fraternal benefit society.

- (b) Nothing in this article shall apply to or in any way affect life insurance, endowment or annuity contracts or contracts supplemental thereto which contain no provisions relating to accident or sickness insurance except (a) such as provide additional benefits in case of death by accidental means and except (b) such as operate to safeguard such contracts against lapse, or to give a special surrender value or special benefit or an annuity in the event that the insured or annuitant shall become totally and permanently disabled as defined by the contract or supplemental contract.
- (c) No accident and sickness policy or certificate shall be delivered or issued for delivery in this State insuring more than one individual (subject to the same exceptions provided for group life insurance in section one of article fourteen of this chapter) unless to one of the groups set forth in section two of this article and unless otherwise 24 in compliance with this article.
 - Sec. 2. Eligible Groups.—Any insurer licensed to transact accident and sickness insurance in this State may issue group accident and sickness policies coming within any of the following classifications:
 - (a) A policy issued to an employer, who shall be deemed the policyholder, insuring at least ten employees of such employer, for the benefit of persons other than the employer, and conforming to the following requirements:
- 9 (1) If the premium is paid by the employer the group 10 shall comprise all employees or all of any class or classes thereof determined by conditions pertaining to the em-11 12 ployment, or
- 13 (2) If the premium is paid by the employer and em-14 ployees jointly, or by the employees, the group shall comprise not less than seventy percent of all employees

35

36

43

of the employer or not less than seventy-five percent of all employees of any class or classes thereof determined by conditions pertaining to the employment.

- (3) The term "employee" as used herein shall be deem-19 ed to include the officers, managers, and employees of the 20 21 employer, the partners, if the employer is a partnership, the officers, managers, and employees of subsidiary or 22 affiliated corporations of a corporation employer, and 24 the individual proprietors, partners and employees of individuals and firms, the business of which is controlled by the insured employer through stock ownership, con-26 tract, or otherwise. The term "employer" as used herein may be deemed to include any municipal or governmental 29 corporation, unit, agency or department thereof and the 30 proper officers, as such, of any unincorporated munici-31 pality or department thereof, as well as private indi-32 viduals, partnerships and corporations.
- (b) A policy issued to an association which has a con-34 stitution and by-laws and which has been organized and is maintained in good faith for purposes other than that of obtaining insurance, insuring at least ten members of the association for the benefit of persons other than the association or its officers or trustees, as such;
- 39 (c) A policy issued to a college, school or other institu-40 tion of learning or to the head or principal thereof, insur-41 ing at least ten students, or students and employees, of such institution; 42
- (d) A policy issued to or in the name of any volunteer 44 fire department, insuring all of the members of such department or all of any class or classes thereof against any 46 one or more of the hazards to which they are exposed by reason of such membership but in each case not less than ten such members:
- (e) A policy issued to any person or organization to 49 50 which a policy of group life insurance may be issued or delivered in this State, to insure any class or classes of 52 individuals that could be insured under such group life 53 policy.

Sec. 3. Required Policy Provisions.—Each such policy

- 2 hereafter delivered or issued for delivery in this State shall contain in substance the following provisions:
- (a) A provision that the policy, the application of the 5 policyholder, a copy of which shall be attached to such policy, and the individual applications, if any, submitted 7 in connection with such policy by the employees or mem-8 bers, shall constitute the entire contract between the 9 parties, and that all statements made by any applicant or applicants shall be deemed representations and not war-10 11 ranties, and that no such statement shall void the insur-12 ance or reduce benefits thereunder unless contained in a 13 written application.

15

16

17

18 19

20

22

23

24

25

26

- (b) A provision that the insurer will furnish to the policyholder, for delivery to each employee or member of the insured group, an individual certificate setting forth in substance the essential features of the insurance coverage of such employee or member and to whom benefits thereunder are payable. If dependents are included in the coverage, only one certificate need be issud for each 21 family unit.
 - (c) A provision that all new employees or members, as the case may be, in the groups or classes eligible for insurance, shall from time to time be added to such groups or classes eligible to obtain such insurance in accordance with the terms of the policy.
- (d) No provision relative to notice or proof of loss or 28 the time for paying benefits or the time within which suit 29 may be brought upon the policy shall be less favorable to the insured than would be permitted in the case of an 30 31 individual policy by the provisions set forth in article 32 fifteen of this chapter.
 - Sec. 4. Size of Type.—Every printed portion of every 2 such policy shall be plainly printed in type of which the 3 face shall be not smaller than ten point, and the exceptions 4 shall be printed with the same prominence as the benefits 5 to which they apply.
 - Sec. 5. Expense Reimbursement Permitted.—Any such 2 policy may provide, in addition to such other indemnities, 3 if any, as are provided in the policy on account of sick-4 ness or bodily injury or death of insured employees or

- 5 members by accident, for the payment of benefits or re-
- 6 imbursement for expenses with respect to any one or
- 7 more of the following contingencies: Hospitalization,
- 8 nursing care, medical or surgical examination or treat-
- 9 ment, or ambulance transportation, of insured employees
- 10 or members, or of their spouses or children, or of depend-
- 11 ents living with them.
 - Sec. 6. Rider Changing Individual Policy to Group
- 2 Policy Prohibited.—No endorsement or rider shall here-
- 3 after be used in this State to transform an individual
- 4 policy issued under article fifteen of this chapter into a
- 5 group policy.

Article 17. Fire and Marine Insurance

- Section 1. Scope of Article.—This article shall apply to
- 2 fire insurance and marine insurance, except that it shall
- 3 not apply to reinsurance.
- Sec. 2. Standard Fire Policy.-No policy of fire insur-
- 2 ance covering property located in West Virginia shall be
- 3 made, issued or delivered unless it conforms as to all pro-
- 4 visions and the sequence thereof with the basic policy
- 5 commonly known as the New York standard fire policy,
- 6 edition of one thousand nine hundred forty-three, which
- 7 is designated as the West Virginia standard fire policy;
- 8 except that with regard to multiple line coverages pro-
- 9 viding casualty insurance combined with fire insurance
- 10 this section shall not apply if the policy contains, with
- 11 respect to the fire portion thereof, language at least as
- 12 favorable to the insured as the applicable portions of the
- 13 standard fire policy and such multiple line policy has been
- 14 approved by the commissioner. As of the effective date
- of this chapter, the commissioner shall file in his office,
- 16 and thereafter maintain on file in his office, a true copy of
- 17 such West Virginia standard fire policy, designated as
- 18 such and bearing the commissioner's authenticating certi-
- 19 ficate and signature and the date of filing. Provisions to 20 be contained on the first page of the policy may be re-
- 21 written, and rearranged to facilitate policy issuance and
- 22 to include matter which may otherwise properly be added
- 23 by endorsement. The standard fire insurance policy shall

24 not be required for casualty insurance, marine insurance nor insurance on growing crops.

Sec. 3. Arrangement of Policy.—The pages of the standard fire insurance policy may be renumbered and the 3 format rearranged for convenience in the preparation of individual contracts, and to provide space for the listing 5 of rates and premiums for coverages insured thereunder or under endorsements attached or printed thereon, and such other data as may be conveniently included for duplication on daily reports for office records.

Sec. 4. Information as to Insurer.—There shall be 2 printed on such standard fire insurance policy the name of the insurer or insurers issuing the policy, the location device or emblem as the insurer or insurers issuing such policy may desire. If the policy is issued by a mutual or reciprocal insurer having special regulation to the payment of assessments. of the home office or United States office of the insurer or 10 11 12 scriber, such regulations shall be printed on the policy, and 13 any such insurer may print upon the policy such regula-14 tions as may be appropriate to or required by its form of organization. Any insurer organized under special charter 15 16 provisions may so indicate upon its policy, and may add a 17 statement of the plan under which it operates in this State. There may be substituted for the word "company" a more 18 19 accurate descriptive term for the type of insurer. There 20 may also be added a statement of the group of insurers 21 with which the insurer is financially affiliated. In lieu of 22 the facsimile signatures of the president and secretary of 23 the insurer there may be used the name or names of such 24 officers or managers as are authorized to execute the con-25 tract.

Sec. 5. Provisions Required by Charter or Laws of Other States.—A domestic insurer may print in the standard fire policy any provisions which it is authorized or required by law to insert therein; a foreign or alien

- 5 insurer may print in the policy any provision required by
- 6 its charter or deed of settlement, or by the laws of its
- 7 own state or country, not contrary to the laws of this
- State.
- Sec. 6. Riders, Endorsements, Additional Perils.—Appropriate forms of additional contracts, riders or endorsements, insuring against indirect or consequential loss or damage, or against any one or more perils other than those of fire and lightning, or providing coverage which the insurer issuing the policy is authorized by the laws of this State and by its license to assume or issue, may be used in connection with the standard fire policy. Such other perils or coverages may include those excluded in the standard fire insurance policy, and may include any of the perils or coverages permtted to be insured against or issued by fire, marine and casualty insurers. Such forms of contracts, riders and endorsements may contain provisions and stipulations inconsistent with such standard fire insurance policy, if such provisions and stipulations are fire insurance policy if such provisions and stipulations inconsistent with such standard fire insurance policy if such provisions and stipulations are stipulations.
- ard fire insurance policy, if such provisions and stipulations are applicable only to such additional coverage or to the additional peril or perils insured against.
- Sec. 7. Designation as Standard Policy, Agent's Name.—
 2 There may be printed upon the standard fire policy the
 3 words, "Standard Fire Insurance Policy for West Vir4 ginia", and there may be inserted before and after the
 5 words "West Virginia" a designation of any state or
 6 states in which such form of policy is standard. There
 7 may be endorsed on any such policy the name, with the
- 8 word "agent" or "agents" and place of business, of any
- 9 insurance agent or agents, either by writing, printing,
- 10 stamping or otherwise.
- Sec. 8. Approval of Forms.—(a) No fire or marine policy, rider, or endorsement to be attached to any policy, covering any risk located or to be performed in West Virginia shall be delivered or issued for delivery in this State unless either (1) filed with and approved by the commissioner, or (2) conforms to applicable rules approved by the commissioner or is identical as to language to a policy, rider or endorsement approved by the com-

9 missioner. If the use of any such form under the pro-10 visions of clause (2) above by any insurer or by the mem-11 bers and subscribers of any rating organization shall be 12 so extensive that in the opinion of the commissioner the 13 public interest requires, the commissioner may require 14 that such form be filed with him by such insurer or by 15 such rating organization on behalf of its members and 16 subscribers.

17

19

20

21

22

25

26

27

(b) The procedure for filing and approval or disap-18 proval of forms under this section shall be that provided in paragraphs (b), (c), (d), and (e) of section eight of article six of this chapter. Grounds for disapproval shall be those set forth in section nine of article six of this chapter. Such filings may be made on behalf of any 23 insurer by a rating organization licensed as such under 24 the provisions of article twenty of this chapter. This section shall not apply to ocean marine policies, riders or endorsements, or to forms on specially rated inland marine risks.

Sec. 9. Total or Partial Fire Loss.—All insurers issuing policies providing fire insurance on real property situate in West Virginia, shall be liable, in case of total loss by 4 fire or otherwise, as stated in the policy, for the whole amount of insurance stated in the policy, upon such real 5 property; and in case of partial loss by fire or otherwise, as aforesaid, of the real property insured, the liability shall 8 be for the total amount of such partial loss, not to exceed 9 the whole amount of insurance upon such real property as stated in the policy. This section shall not apply where 10 11 such insurance has been procured from two or more 12 insurers covering the same interest in such real property.

Sec. 10. Auditing and Stamping Office.—Every insurer licensed in West Virginia and effecting insurance against 3 the risk of loss or damage by fire shall maintain or be a 4 member or subscriber of an auditing and stamping office. 5 Any insurance rating organization licensed under the pro-6 visions of article twenty of this chapter may establish and 7 maintain such office and any advisory organization of the 8 type described in section ten of article twenty of this chap-9 ter may establish and maintain such office, subject to the

provisions of this section. Each such office serving more 11 than one insurer shall admit to membership or as a sub-12 scriber any licensed fire insurer applying therefor, and 13 where such office is maintained by a rating organization 14 or advisory organization any such insurer, whether or not 15 a member or subscriber for other services of such rating 16 organization or advisory organization, may subscribe to 17 any of the services of such office for auditing and stamp-18 ing separately, without being a member or subscriber of 19 such rating organization or advisory organization for 20 rate filings of the business to be audited and stamped. 21 Every such insurer shall submit to such office daily re-22 ports of all policies written, and copies of binders, renewal 23 certificates, endorsements or other evidence of insurance, containing any coverage against loss or damage by fire, or allied lines, including any type or kind of insurance 26 written as a part of, or as an endorsement to, or in con-27 nection with, a fire insurance policy, and reports of the 28 cancellation or termination thereof. Each such office shall 29 examine all such documents so submitted and shall report 30 all errors and omissions to the insurer and the representa-31 tive or agent of the insurer to whom the error or omission 32 is charged. In the event any such insurer shall fail to furnish to such auditing and stamping office within sixty 34 days of receipt of a report of errors or omissions, satis-35 factory evidence that all errors or omissions so reported 36 have been corrected, it shall be the duty of such office 37 promptly to report such failure to the commissioner. 38 Each such office shall promulgate rules governing the 39 writing and examining of such coverages and shall distribute same to its members and subscribers. The expenses 40 of such office shall be borne by its members and sub-41 scribers under reasonable rules and regulations of such 43 office. Every such insurer shall, in its annual application 44 for license, specify the auditing and stamping office of 45 which it is, or will upon receiving such license become, a 46 member. Each such office shall be subject to examination by the commissioner at such times as he deems necessary and if the commissioner finds that the operation of such 48 office involves any act or practice which is unfair, unreasonable or discriminatory, he may issue a written order

- 51 specifying in what respects such operations are unfair,
- 52 unreasonable or discriminatory and such office shall com-
- 53 ply with all orders so issued. This section shall not apply
- 54 to marine insurance or automobile or aircraft physical
- 55 damage insurance.

Article 18. Casualty Insurance

- Section 1. Article Reserved.—The number and location
- 2 of this article in this chapter is reserved to accommodate
- 3 future legislation governing casualty insurance.

Article 19. Surety Insurance

- Section 1. Article Reserved.—The number and location
- 2 of this article in this chapter is reserved to accommodate
- 3 future legislation governing surety insurance.

Article 20. Rates and Rating Organizations

- Section 1. Purpose of Article.—The purpose of this
- 2 article is to promote the public welfare by regulating
- 3 insurance rates to the end that they shall not be excessive,
- 4 inadequate or unfairly discriminatory, and to authorize
- 5 and regulate cooperative action among insurers in rate
- 6 making and in other matters within the scope of this
- 7 article. Nothing in this article is intended (1) to prohibit
- 8 or discourage reasonable competition, or (2) to prohibit,
- 9 or encourage, except to the extent necessary to accom-
- 10 plish the aforementioned purpose, uniformity in insur-
- 11 ance rates, rating systems, rating plans or practices. This
- 12 article shall be liberally interpreted to carry into effect
- 13 the provisions of this section.
 - Sec. 2. Scope of Article.—(a) This article applies to
- 2 fire, marine, casualty, and surety insurance, on risks or
- 3 operations in this State.

- (b) This article shall not apply:
- 5 (1) To reinsurance, other than joint reinsurance to the
- 6 extent stated in section eleven of this article;
- 7 (2) To life or accident and sickness insurance;
- 8 (3) To insurance of vessels or craft, their cargoes, ma-
- 9 rine builders' risks, marine protection and indemnity, or

- 10 other risks commonly insured under marine, as distin-11 guished from inland marine, insurance policies:
- 12 (4) To insurance against loss of or damage to aircraft, 13 including their accessories and equipment, or against lia-14 bility, other than workmen's compensation and employers' 15 liability, arising out of the ownership, maintenance or 16 use of aircraft;
 - (5) To title insurance.
- 18 (c) If any kind of insurance, subdivision or combina-19 tion thereof, or type of coverage, is subject to both the 20 provisions of this article expressly applicable to casualty 21 and surety insurance and to those expressly applicable 22 to fire and marine insurance, the commissioner may apply 23 to filings made for such kind of insurance the provisions 24 of this article which are in his judgment most suitable.
- Sec. 3. Making of Rates.—All rates shall be made in 2 accordance with the following provisions:
- 3 (a) Due consideration shall be given to past and pros-4 pective loss experience within and outside this State, to 5 catastrophe hazards, if any, to a reasonable margin for 6 underwriting profit and contingencies, to dividends, sav-7 ings or unabsorbed premium deposits allowed or returned 8 by insurers to their policyholders, members or subscrib-9 ers, to past and prospective expenses both countrywide 10 and those specially applicable to this State, and to all 11 other relevant factors within and outside this State.
- 12 (b) Rates shall not be excessive, inadequate or unfairly 13 discriminatory.
- 14 (c) Rates for casualty and surety insurance to which 15 this article applies shall also be subject to the following 16 provisions:
- (1) The systems of expense provisions included in the rates for use by any insurer or group of insurers may differ from those of other insurers or groups of insurers to reflect the requirements of the operating methods of any such insurer or group with respect to any kind of insurance, or with respect to any subdivision or combination thereof for which subdivision or combination separate expense provisions are applicable.
- 25 (2) Risks may be grouped by classifications for the

26 establishment of rates and minimum premiums. Classification rates may be modified to produce rates for indi-28 vidual risks in accordance with rating plans which estab-29 lish standards for measuring variations in hazards or ex-30 pense provisions, or both. Such standards may measure 31 any differences among risks that can be demonstrated to 32 have a probable effect upon losses or expenses.

33

35

36 37

38

39

40

41

42

44

45

46

51

52

55

- (3) Due consideration shall be given to such factors 34 as expense, management, individual experience, underwriting judgment, degree or nature of hazard or any other reasonable considerations, provided such factors apply to all risks under the same or substantially the same circumstances or conditions.
 - (d) Rates for fire and marine insurance to which this article applies shall also be subject to the following provisions:
- (1) Manual, minimum, class rates, rating schedules or 43 rating plans, shall be made and adopted, except in the case of specific inland marine rates on risks specially rated.
- (2) Due consideration shall be given to the conflagra-47 tion hazard, and in the case of fire insurance rates consideration shall be given to the experience of the fire 49 insurance business during a period of not less than the 50 most recent five year period for which such experience is available.
- (e) Except to the extent necessary to meet the pro-53 visions of paragraph (b) of this section, uniformity among 54 insurers in any matters within the scope of this section is neither required nor prohibited.
- (f) Rates made in accordance with this section may be 57 used subject to the provisions of this article.
- Sec. 4. Rate Filings.—(a) (1) Every insurer shall file 2 with the commissioner every manual of classifications, 3 rules and rates, every rating plan and every modification 4 of any of the foregoing which it proposes to use for casualty insurance to which this article applies.
- (2) Every insurer shall file with the commissioner, 7 except as to inland marine risks which by general custom 8 of the business are not written according to manual rates

37

39

40

- or rating plans, every manual, minimum, class rate, rating schedule or rating plan and every other rating rule 10 and every modification of any of the foregoing which it 11 12 proposes to use for fire and marine insurance to which 13 this article applies. Specific inland marine rates on risks 14 specially rated, made by a rating organization, shall be filed with the commissioner.
- 16 (b) Every such filing shall state the proposed effective 17 date thereof and shall indicate the character and extent of the coverage contemplated. When a filing is not accompanied by the information upon which the insurer 19 20 supports such filing, and the commissioner does not have 21 sufficient information to determine whether such filing meets the requirements of this article, he shall require such insurer to furnish the information upon which it sup-24 ports such filing and in such event the waiting period shall commence as of the date such information is furnished. 25 26 The information furnished in support of a filing may in-27 clude (1) the experience or judgment of the insurer or 28 rating organization making the filing, (2) its interpreta-29 tion of any statistical data it relies upon, (3) the experi-30 ence of other insurers or rating organizations, or (4) any other relevant factors. A filing and any supporting information shall be open to public inspection after the filing becomes effective.
- (c) An insurer may satisfy its obligation to make such 35 filings by becoming a member of, or a subscriber to, a licensed rating organization which makes such filings, and by authorizing the commissioner to accept such filings on its behalf: Provided, That nothing contained in this article shall be construed as requiring any insurer to become a member of or a subscriber to any rating organization.
- 42 (d) The commissioner shall review filings as soon as 43 reasonably possible after they have been made in order to determine whether they meet the requirements of 45 this article.
- 46 (e) Subject to the exceptions specified in paragraphs 47 (f) and (g) of this section, each filing shall be on file for a waiting period of thirty days before it becomes

49 effective, which period may be extended by the commis-50 sioner for an additional period not to exceed fifteen days 51 if he gives written notice within such waiting period to the insurer or rating organization which made the filing 52 53 that he needs such additional time for the consideration of such filing. Upon written application by such insurer 54 or rating organization, the commissioner may authorize 55 a filing which he has reviewed to become effective before the expiration of the waiting period or any extension thereof. A filing shall be deemed to meet the require-59 ments of this article unless disapproved by the commissioner within the waiting period or any extension thereof. 60

61

62

63

64

65

67 68 69

70

72

73

74 75

77

78

79

80 81

83

84 85

86

- (f) Any special filing with respect to a surety bond required by law or by court or executive order or by order, rule or regulation of a public body, not covered by a previous filing, shall become effective when filed and shall be deemed to meet the requirements of this article until such time as the commissioner reviews the filing and so long thereafter as the filing remains in
- (g) Specific inland marine rates on risks specially rated by a rating organization shall become effective when filed 71 and shall be deemed to meet the requirements of this article until such time as the commissioner reviews the filing and so long thereafter as the filing remains in
- (h) Under such rules and regulations as he shall adopt 76 the commissioner may, by written order, suspend or modify the requirement of filing as to any kind of insurance, subdivision or combination thereof, or as to classes of risks, the rates for which cannot practicably be filed before they are used. Such orders, rules and regulations shall be made known to insurers and rating organizations affected thereby. The commissioner may make such examination as he may deem advisable to ascertain whether any rates affected by such order meet the standards set forth in paragraph (b) of section three of this article.
- (i) Upon the written application of the insured, stating 88 his reasons therefor, filed with and approved by the com-

92

93

94

95

96

25

26 27

28

29

30 31

89 missioner, a rate in excess of that provided by a filing 90 otherwise applicable may be used on any specific risk.

- (j) No insurer shall make or issue a contract or policy except in accordance with the filings which are in effect for said insurer as provided in this article or in accordance with paragraphs (h) or (i) of this section. This paragraph shall not apply to contracts or policies for inland marine risks as to which filings are not required.
- Sec. 5. Disapproval of Filings.—(a) If within the waiting period or any extension thereof as provided in paragraph (e) of section four of this article, the commissioner finds that a filing does not meet the requirements of this article, he shall send to the insurer or rating organization which made such filing, written notice of disapproval of such filing specifying therein in what respects he finds such filing fails to meet the requirements of this article and stating that such filing shall not become effective.
- (b) If within thirty days after a special surety filing 10 subject to paragraph (f) of section four of this article 11 or if within thirty days after a specific inland marine 12 rate on a risk specially rated by a rating organization 14 subject to paragraph (g) of section four of this article 15 has become effective, the commissioner finds that such 16 filing does not meet the requirements of this article, he 17 shall send to the rating organization which made such filing written notice of disapproval of such filing specify-18 ing therein in what respects he finds that such filing fails 19 20 to meet the requirements of this article and stating when, 21 within a reasonable period thereafter, such filing shall be deemed no longer effective. Said disapproval shall not affect any contract made or issued prior to the expiration 24 of the period set forth in said notice.
 - (c) If at any time subsequent to the applicable review period provided for in paragraphs (a) or (b) of this section, the commissioner finds that a filing does not meet the requirements of this article, he shall, after notice and hearing to every insurer and rating organization which made such filing, issue an order specifying in what respects he finds that such filing fails to meet the requirements of this article, and stating when, within a reason-

able period thereafter, such filing shall be deemed no longer effective. Copies of said order shall be sent to 35 every such insurer and rating organization. Said order shall not affect any contract or policy made or issued prior to the expiration of the period set forth in said order.

- (d) Any person or organization aggrieved with respect to any filing which is in effect may demand a hearing thereon. If, after such hearing, the commissioner finds that the filing does not meet the requirements of this article, he shall issue an order specifying in what respects he finds that such filing fails to meet the requirements of this article, and stating when, within a reasonable period thereafter, such filing shall be deemed no longer effective. Said order shall not affect any contract or policy made or issued prior to the expiration of the period set forth in said order.
- (e) Any insurer or rating organization, in respect to any filing made by it which is not approved by the commissioner, may demand a hearing thereon.
- (f) No manual of classifications, rules, rating plans, or and modification of any of the foregoing which establishes standards for measuring variations in hazards or expense provisions, or both, in the case of casualty insurance to which this article applies and no manual, minimum, class rate, rating schedule, rating plan, rating rule, or any modification of any of the foregoing, in the case of fire insurance to which this article applies, and which has been filed pursuant to the requirements of section four of this article, shall be disapproved if the rates thereby produced meet the requirements of this article.

Sec. 6. Rating Organizations.—(a) A corporation, an 2 unincorporated association, a partnership or an individual, whether located within or outside this State, may make 3 application to the commissioner for license as a rating 5 organization for such kinds of casualty insurance or sub-6 divisions thereof, or for such kinds of fire and marine insurance or subdivision or class of risk or a part or combination thereof as are specified in its application and shall file therewith (1) a copy of its constitution, its articles

36 37

38 39

40

42

44 45

46

47

48 49

50

51

53

54

56

57

58

59 60

61

62

or agrement or association or its certificate of incorporation, and of its by-laws, rules and regulations governing

the conduct of its business, (2) a list of its memebrs and 13 subscribers, (3) the name and address of a resident of 14 this State as attorney-in-fact upon whom notices or orders of the commissioner or process affecting such rat-15 ing organization may be served and (4) a statement of 16 17 its qualifications as a rating organization. If the com-18 missioner finds that the applicant is competent, trust-19 worthy and otherwise qualified to act as a rating organi-20 zation and that its constitution, articles of agreement or 21 association or certificate of incorporation, and its by-laws, 22 rules and regulations governing the conduct of its busi-23 ness conform to the requirements of law, he shall issue a license specifying the kinds of insurance or subdivisions thereof for which the applicant is authoized to act as a rating organization. Every such application shall be granted or denied in whole or in part by the commissioner within sixty days of the date of its filing with him. 29 Licenses issued pursuant to this section shall remain in 30 effect for three years unless sooner suspended or revoked by the commissioner. The fee for said license shall be 31 32 twenty-five dollars, and said fee shall be in lieu of all 33 other fees, licenses or taxes to which a rating organiza-34 tion might otherwise be subject, all fees so collected to 35 go into the fund provided and for the purposes specified in section thirteen of article three of this chapter. Licenses 36 issued pursuant to this section may be suspended or re-38 voked by the commissioner, after notice and hearing, in 39 the event the rating organization ceases to meet the re-40 quirements of this article. Every rating organization shall 41 notify the commissioner promptly of every change in 42 (1) its constitution, its articles of agreement or associa-43 tion or its certificate of incorporation, and its by-laws, rules and regulations governing the conduct of its busi-45 ness, (2) its list of members and subscribers and (3) the 46 name and address of the resident of this State designated as attorney-in-fact by it upon whom notices or orders 48 of the commissioner or process affecting such rating or-49 ganization may be served. (b) Subject to rules and regulations which have been 50

51 approved by the commissioner as reasonable, each rating 52 organization shall permit any insurer, not a member, to be a subscriber to its rating services for any kind of 53 54 casualty insurance or subdivision thereof, or for any kind of fire and marine insurance or subdivision or class of 55 56 risk or a part or combination thereof, or any kind of 57 surety insurance or subdivision thereof, for which it is authorized to act as a rating organization. Notice of pro-58 59 posed changes in such rules and regulations shall be given to subscribers. Each rating organization shall furnish its rating services without discrimination to its members and 61 subscribers. The reasonableness of any rule or regulation 62 63 in its application to subscribers, or the refusal of any 64 rating organization to admit an insurer as a subscriber. shall, at the request of any subscriber or any such in-65 surer, be reviewed by the commissioner. If, after notice 66 67 and hearing, the commissioner finds that such rule or 68 regulation is unreasonable in its application to subscribers, he shall order that such rule or regulation shall not be 69 applicable to subscribers. If the rating organization fails 70 to grant or reject an insurer's application for subscriber-71 ship within thirty days after it was made, the insurer 72 73 may request a review by the commissioner as if the ap-74 plication had been rejected. If, after notice and hearing, 75 the commissioner finds that the insurer has been refused 76 admittance to the rating organziation as a subscriber 77 without justification, he shall order the rating organization to admit the insurer as a subscriber. If he finds that 78 79 the action of the rating organization was justified, he 80 shall make an order affirming its action. 81

(c) No rating organization shall adopt any rule the effect of which would be to prohibit or regulate the payment of dividends, savings or unabsorbed premium deposits allowed or returned by insurers to their policyholders, members or subscribers.

82

84 85

86

88 89

91

(d) Cooperation among rating organizations or among 87 rating organizations and insurers in rate making or in other matters within the scope of this article is hereby authorized, provided the filings resulting from such cooperation are subject to all the provisions of this article which are applicable to filings generally. The commis-

sioner may review such cooperative activities and prac-93 tices, and if after a hearing he finds that any such ac-94 tivity or practice is unfair or unreasonable or otherwise 95 inconsistent with the provisions of this article, he may 96 issue a written order specifying in what respects such activity or practice is unfair or unreasonable or otherwise inconsistent with the provisions of this article, and re-99 quiring the discontinuance of such activity or practice.

- (e) Any rating organization for casualty, marine or 101 surety insurance may provide for the examination of 102 policies, daily reports, binders, renewal certificates, en-103 dorsements or other evidences of insurance, or the can-104 cellation thereof, and may make reasonable rules govern-105 ing their submission. Such rules shall contain a pro-106 vision that in the event any insurer does not within sixty 107 days furnish satisfactory evidence to the rating organiza-108 tion of the correction of any error or omission previously 109 called to its attention by the rating organization, it shall 110 be the duty of the rating organization to notify the commissioner thereof. All information so submitted for ex-111 amination shall be confidential. Such services for fire 112 113 insurance shall be governed by the provisions of section 114 ten of article seventeen of this chapter.
- 115 (f) Any rating organization may subscribe for or pur-116 chase actuarial, technical or other services, and such services shall be available to all members and subscribers 118 without discrimination.
 - Sec. 7. Deviations.—(a) Every member of or subscriber to a rating organization shall adhere to the filings made on its behalf by such organization except that:
- 4 (1) In the case of casualty and surety insurance to 5 which this article applies any such insurer may make written application to the commissioner for permission 7 to file a uniform percentage decrease or increase to be applied to the premiums produced by the rating system so filed for a kind of insurance, or for a class of insurance 10 which is found by the commissioner to be a proper rating 11 unit for the application of such uniform percentage de-12 crease or increase, or for a subdivision of a kind of insur-13 ance (a) comprised of a group of manual classifications

18

19

20

21

22

23

24 25

26

27

28

29

30

31

32

33

34

35 36

37

39

40

41

42

- which is treated as a separate unit for rate making purposes, or (b) for which separate expense provisions are included in the filings of the rating organization. Such 17 application shall specify the basis for the modification and shall be accompanied by the data upon which the applicant relies. A copy of the application and data shall be sent simultaneously to such rating organization; and
 - (2) In the case of fire and marine insurance to which this article applies any such insurer may make written application to the commissioner for permission to file a deviation from the class rates, schedules, rating plans or rules respecting any kind of insurance, or class of risk within a kind of insurance or combination thereof. Such application shall specify the basis for the modification and a copy thereof shall also be sent simultaneously to such rating organization. In considering the application for permission to file such deviation the commissioner shall give consideration to the available statistics and the applicable principles for rate making as provided in section three of this article.
 - (b) The commissioner shall, after notice to such insurer and rating organization, and hearing, unless hearing is waived by such insurer and rating organization, issue an order permitting the modification for such insurer to be filed if he finds it to be justified and it shall thereupon become effective or issue an order denying such application if he finds that the modification is not justified or that the resulting premiums would be excessive, inadequate or unfairly discriminatory. Each deviation permitted to be filed shall be effective for a period of one year from the date of such permission unless terminated sooner with the approval of the commissioner.
- Sec. 8. Appeal by Minority.—(a) Any member of or 2 subscriber to a rating organization may appeal to the commissioner from the action or decision of such rating 4 organization in approving or rejecting any proposed change in or addition to the filings of such rating organization and the commissioner shall, after notice and hearing, issue an order approving the action or decision of such rating organization or directing it to give further

18

19 20

21

24

25

26

27

consideration to such proposal, or, if such appeal is from 10 the action or decision of the rating organization in rejecting a proposed addition to its filings, he may, in the 12 event he finds that such action or decision was unreasonable, issue an order directing the rating organization to 13 14 make an addition to its filings, on behalf of its members 15 and subscribers, in a manner consistent with his findings, within a reasonable time after the issuance of such order. 16

- (b) In the case of casualty and surety insurance to which this article applies, if such appeal is based upon the failure of the rating organization to make a filing on behalf of such member or subscriber which is based on a system of expense provisions which differs, in accordance with the right granted in subdivision (1) of paragraph (c) of section three of this article, from the system of expense provisions included in a filing made by the rating organization, the commissioner shall, if he grants the appeal, order the rating organization to make the requested filing for use by the appellant. In deciding such appeal the commissioner shall apply the standards set 28 forth in section three of this article.
 - Sec. 9. Information to be Furnished Insureds; Hearings and Appeals of Insureds.—(a) Every rating organization and every insurer which makes its own rates shall, within a reasonable time after receiving written request therefor and upon payment of such reasonable charge as it may 5 make, furnish to any insured affected by a rate made by it, or to the authorized representative of such insured, 8 all pertinent information as to such rate.
- 9 (b) Every rating organization and every insurer which 10 makes its own rates shall provide within this State reasonable means whereby any person aggrieved by the ap-11 plication of its rating system may be heard, in person or 12 by his authorized representative, on his written request 13 to review the manner in which such rating system has been applied in connection with the insurance afforded 15 16 him. If the rating organization or insurer fails to grant or reject such request within thirty days after it is made, 17 the applicant may proceed in the same manner as if his 18 application had been rejected. Any party affected by the

- action of such rating organization or such insurer on such 21 request may, within thirty days after written notice of 22 such action, appeal to the commissioner, who, after notice
- 23 and hearing, may affirm or reverse such action.

8

g

10

11

12

13 14

15 16

17

19

20

21 22

23

25

26

27

28

29

30

31 32

- Sec. 10. Advisory Organizations.—(a) Every group, association or other organization of insurers, whether located within or outside this State, which assists insurers which make their own filings or rating organizations in rate making, by the collection and furnishing of loss or expense statistics, or by the submission of recommendations, but which does not make filings under this article, shall be known as an advisory organization.
- (b) Every advisory organization shall file with the commissioner (1) a copy of its constitution, its articles of agreement or association or its certificate of incorporation and of its by-laws, rules and regulations governing its activities, (2) a list of its members, (3) the name and address of a resident of this State as its attorney-in-fact upon whom notices or orders of the commissioner or process may be served, and (4) an agreement that the commissioner may examine such advisory organization in accordance with the provisions of section twelve of this article.
- (c) If after notice and hearing the commissioner finds that the furnishing of such information or assistance involves any act or practice which is unfair or unreasonable or otherwise inconsistent with the provisions of this article, he may issue a written order specifying in what respects such act or practice is unfair or unreasonable or otherwise inconsistent with the provisions of this article, and requiring the discontinuance of such act or practice.
- (d) No insurer which makes it own filings nor any rating organization shall support its filings by statistics or adopt rate making recommendations, furnished to it by an advisory organization which has not complied with 33 this section or with an order of the commissioner involving such statistics or recommendations issued under paragraph (c) of this section. If the commissioner finds such 36 insurer or rating organization to be in violation of this

37 paragraph he may issue an order requiring the discon-38 tinuance of such violation.

Sec. 11. Joint Underwriting or Joint Reinsurance.—
2 (a) Every group, association or other organization of in3 surers which engages in joint underwriting or joint re4 insurance, shall be subject to regulation with respect
5 thereto as herein provided, subject, however, with respect
6 to joint underwriting, to all other provisions of this ar7 ticle and, with respect to joint reinsurance, to section
8 twelve of this article.

9 (b) If after notice and hearing the commissioner finds
10 that any activity or practice of any such group, associa11 tion or other organization is unfair or unreasonable or
12 otherwise inconsistent with the provisions of this article,
13 he may issue a written order specifying in what respects
14 such activity or practice is unfair or unreasonable or
15 otherwise inconsistent with the provisions of this article,
16 and requiring the discontinuance of such activity or prac17 tice.

Sec. 12. Examinations.—(a) The commissioner shall, at 2 least once in five years, make or cause to be made an 3 examination of each rating organization licensed under 4 the provisions of section six of this article and he may, 5 as often as he may deem it expedient, make or cause to 6 be made an examination of each advisory organization referred to in section ten of this article and of each group, association or other organization referred to in section 9 eleven of this article. The reasonable costs of any such examination shall be paid by the rating organization, 10 advisory organization, or group, association or other organization examined upon presentation to it of a detailed account of such costs. The officers, managers, agents and employees of such rating organization, advisory organization, or group, association or other organization may 15 be examined at any time under oath and shall exhibit 16 all books, records, accounts, documents, or agreements 17 18 governing its method of operation. The commissioner 19 shall furnish two copies of the examination report to the 20 organization, group or association examined not less than ten days prior to filing same in his office. If such organi-

zation, group or association so requests in writing, within such ten-day period, the commissioner shall consider the objections, if any, to such report as proposed, and shall not 25 file such report until such modifications, if any, have been 26 made therein as the commissioner deems proper. The 27 report when so filed shall be admissible in any action or 28 proceeding brought by the commissioner against the or-29 ganization, group or association examined, or its officers or agents, and shall be prima facie evidence of the facts 31 stated therein. The commissioner may withhold the re-32 port of any such examination for such time as he may 33 deem proper.

(b) In lieu of any such examination the commissioner 35 may accept the report of an examination made by the insurance supervisory official of another state, pursuant to the laws of such state.

34

37

Sec. 13. Rate Administration.—(a) Recording the Rereporting of Loss and Expense Experience. The commissioner shall promulgate reasonable rules and statistical plans, reasonably adapted to each of the rating systems on 5 file with him, which may be modfied from time to time and 6 which shall be used thereafter by each insurer in the recording and reporting of its loss and countrywide expense experience, in order that the experience of all insurers may be made available at least annually in such form and detail as may be necessary to aid him in determining 10 11 whether rating systems comply with the standards set 12 forth in section three of this article. Such rules and plans 13 may also provide for the recording and reporting of loss 14 and expense experience items which are specially applicable to this State and are not susceptible of determination 16 by a prorating of countrywide experience. In promulgating such rules and plans, the commissioner shall give due 17 consideration to the rating systems on file with him, and 19 in order that such rules and plans may be as uniform as is practicable among the several states, to the rules 21 and to the form of the plans used for such rating systems 22 in other states. No insurer shall be required to record or report its loss experience on a classification basis that is 23 inconsistent with the rating system filed by it. The com-

- missioner may designate one or more rating organizations or other agencies to assist him in gathering such experience and making compilations thereof, and such compilations shall be made available, subject to reasonable rules promulgated by the commissioner, to insurers and rating organizations.
- 31 (b) Interchange of Rating Plan Data. Reasonable rules 32 and plans may be promulgated by the commissioner for 33 the interchange of data necessary for the application of 34 rating plans.
- 35 (c) Consultation with Other States. In order to further 36 uniform administration of rate regulatory laws, the commissioner and every insurer and rating organization may 38 exchange information and experience data with insurance supervisory officials, insurers and rating organizations in other states and may consult with them with 41 respect to rate making and the application of rating systems.
- Sec. 14. False or Misleading Information.—No person or organization shall wilfully withhold information from, or knowingly give false or misleading information to, the commissioner, any statistical agency designated by the commissioner, any rating organization, or any insurer, which will affect the rates or premiums chargeable under this article.
- Sec. 15. Assigned Risks.—With respect to casualty in2 surance to which this article applies, agreements may be
 3 made among insurers with respect to the equitable ap4 portionment among them of insurance which may be
 5 afforded applicants who are in good faith entitled to but
 6 who are unable to procure such insurance through ordi7 nary methods and such insurers may agree among them8 selves on the use of reasonable rate modifications for such
 9 insurance, such agreements and rate modifications to be
 9 subject to the approval of the commissioner.
- Sec. 16. Penalties.—(a) The commissioner may suspend, 2 revoke or refuse to renew the license of any rating orga-3 nization which violates any provision of this article or 4 chapter or which fails to comply with an order of the

- 5 commissioner issued pursuant to this chapter, within the
- 6 time limited by such order, or any extension thereof
- 7 which the commissioner may grant. The commissioner
- B may determine when a suspension of license shall become
- 9 effective and it shall remain in effect for the period fixed
- 10 by him, unless he modifies or recines such suspension, or
- 11 until the order upon which such suspension is based is
- 12 modified, rescinded or reversed.
- 13 (b) No license shall be suspended or revoked except
- 14 upon a written order of the commissioner made after
- 15 notice and hearing. The commissioner shall not suspend
- 16 or revoke the license of any rating organization for failure
- 17 to comply with an order of the commissioner until the
- 18 time prescribed for an appeal therefrom has expired or,
- 10 if an annual least term to be a set it and a set in a least term in the set in a set in a
- 19 if an appeal has been taken, until such order has been
- 20 affirmed.

Article 21. Reciprocal Insurers

- Section 1. Scope of Article.—This article applies to
- reciprocal insurers and reciprocal insurance. Foreign and
- 3 alien reciprocal insurers shall be governed by all pro-
- 4 visions of this article not expressly made applicable only
- 5 to domestic reciprocal insurers, and domestic reciprocal
- 6 insurers shall be governed by all the provisions of this
- 7 article.
- Sec. 2. General Laws Applicable.—Except as otherwise
- 2 provided, and except where the context clearly requires
- 3 otherwise, all the provisions of this chapter relating to
- 4 insurers generally, and all the provisions of this chapter
- 5 relating to insurers transacting the same kinds of insur-
- 6 ance which reciprocal insurers are permitted to transact,
- 7 are applicable to reciprocal insurers, except that article
- 8 twelve of this chapter shall not apply to reciprocal in-
- 9 surers.
- Sec. 3. Kinds of Insurance.—A reciprocal insurer, upon
- being licensed therefor as provided in this article, when
- 3 possessed of and maintaining on deposit surplus funds
- 4 equal to the minimum capital required of a stock in-
- 5 surer to transact like kinds of insurance, may transact
- 6 fire, marine, casualty or surety insurance, and may pur-

- chase reinsurance upon the risk of any subscriber, and
- 8 may grant reinsurance as to any kind of insurance it
- 9 is licensed to transact direct. No reciprocal insurer shall
- 10 be licensed to transact, nor shall any reciprocal insurer
- 11 transact, life or accident and sickness insurance.
- Sec. 4. Name.—A reciprocal insurer shall have and use
- 2 a business name, which shall include the word "recipro-
- cal", or "inter-insurer", or "inter-insurance", or "ex-
- 4 change", or "underwriters", or "underwriting", in which
- 5 name such insurer may sue and be sued.
- Sec. 5. Attorney.—"Attorney", as used in this article,
- 2 refers to the attorney-in-fact of a reciprocal insurer, and
- such attorney may be an individual, firm or corporation.
- Sec. 6. Application for License.—A reciprocal insurer
- 2 desiring to transact insurance may apply to the commis-
- sioner for a license. The attorney shall execute under his
- oath and file with the commissioner such application set-
- 5 ting forth:

- (a) The name of the insurer;
- (b) The location of the insurer's principal office, which
- shall be the same as that of the attorney, and in the case of a domestic reciprocal insurer shall be maintained with-
- 10 in this State;
 - (c) The kinds of insurance proposed to be transacted;
- (d) The designation and appointment of the proposed 12
- 13 attorney and a copy of the power of attorney;
- 14 (e) The names and addresses of the officers and direc-
- 15 tors of the attorney, if a corporation, or its members, if a
- 16 firm;
- 17 (f) In the case of a domestic reciprocal insurer, the
- 18 powers of the subscribers' advisory committee, and in the
- case of domestic, foreign or alien reciprocal insurers, the
- 20 names and terms of office of the members thereof;
- 21 (g) In the case of a domestic reciprocal insurer that all
- monies paid to the reciprocal shall, after deducting there-
- from any sum payable to the attorney, be held in the name
- 24 of the insurer and for the purposes specified in the sub-
- scribers' agreement;
- 26 (h) A copy of the subscribers' agreement;

28

30

32

37

39

5

6

8 9

- (i) A statement of the financial condition of the insurer, a schedule of its assets, and a statement that the surplus as required by section three of this article is on hand;
- (j) A copy of each policy, endorsement, and application 31 form it then proposes to issue or use;
- (k) In the case of a foreign or alien reciprocal insurer a statement from the insurance supervisory official of its 33 34 state of domicile or entry that it is licensed in such state 35 to transact the kinds of insurance it proposes to transact 36 in West Virginia;
- (1) In the case of a domestic reciprocal insurer, the 38 names and adresses of the original subscribers who must number at least twenty-five;
- (m) In the case of a domestic reciprocal insurer, a state-41 ment that each of the original subscribers has in good 42 faith applied for insurance of a kind proposed to be trans-43 acted, and that the insurer has received from each such subscriber the full premium or premium deposit required for the policy applied for, for a term of not less than six 46 months at an adequate rate theretofore filed with and approved by the commissioner; 47
- 48 (n) Such other information as the commissioner deems 49 necessary.
 - Sec. 7. License.—The license of a reciprocal insurer 2 shall be issued to its attorney in the name of the insurer 3 and may be suspended, revoked or renewal refused in the 4 same manner and upon the same grounds as other insurers.
 - Sec. 8. Power of Attorney.—(a) The rights and powers of the attorney of a reciprocal insurer shall be as provided in the power of attorney given it by the subscribers, which power of attorney must set forth:
 - (1) The powers of the attorney;
 - (2) That the attorney is empowered to accept service of process on behalf of the insurer;
 - (3) The general services to be performed by the attorney;
- (4) The maximum amount to be deducted from advance 10 premiums or deposits to be paid to the attorney and the 11 12 general items of expense in addition to losses, to be paid by the insurer;

23

- 14 (5) Except as to nonassessable policies, a provision for a contingent several liability of each subscriber in a specified 15 amount, which amount shall be not less than one nor more 17 than ten times the annual premium or premium deposit 18 stated in the policy.
 - (b) The power of attorney may:
- 20 (1) Provide for the right of substitution of the attorney 21 and revocation of the power of attorney and rights there-22 under:
- (2) Impose such restrictions upon the exercise of the 24 power as are agreed upon by the subscribers;
- (3) Provide for the exercise of any right reserved to 25 26 the subscribers directly or through their advisory com-27 mittee;
 - (4) Contain other lawful provisions deemed advisable.
- 29 (c) The terms of any power of attorney or agreement 30 collateral thereto shall be reasonable and equitable.
- Sec. 9. Modifications.-Modification of the terms of the subscribers' agreement or of the power of attorney of a 3 domestic reciprocal insurer shall be made jointly by the 4 attorney and the subscribers' advisory committee. No 5 modification of a domestic, foreign or alien reciprocal 6 insurer's power of attorney or subscribers' agreement shall 7 be effective retroactively, nor as to any insurance contract issued prior thereto, and such modification shall be rea-9 sonable and equitable, and shall be filed with the commis-10 sioner.
- Sec. 10. Attorney's Bond.—(a) Concurrently with the 2 filing of the application provided for in section six of this 3 article, the attorney of a domestic reciprocal insurer shall 4 file with the commissioner a bond in favor of the State of 5 West Virginia for the benefit of all persons damaged as a 6 result of breach by the attorney of the conditions of his bond as set forth in paragraph (b) of this section. The bond shall be executed by the attorney and by an authorized corporate surety, and shall be subject to the commis-10 sioner's approval.
- 11 (b) The bond shall be in the penal sum of twenty-five 12 thousand dollars, aggregate in form, conditioned that the 13 attorney will faithfully account for all monies and other

14 property of the insurer coming into his hands, and that he 15 will not withdraw or appropriate to his own use from the 16 funds of the insurer, any monies or property to which he is not entitled under the power of attorney. 17

18

20

21

22

23

24

25

26

27

28

29

30

31 32

- (c) The bond shall provide that it is not subject to can-19 cellation unless thirty days' advance notice in writing of cancellation is given both the attorney and the commissioner.
 - (d) In lieu of such bond, the attorney may maintain on deposit with the state treasurer through the office of the commissioner a like amount in cash or in value of securities qualified under this chapter as insurers' deposit investments, and subject to the same conditions as the bond.
- (e) Action on the attorney's bond or to recover against any such deposit made in lieu thereof may be brought at any time by one or more subscribers suffering loss through a violation of its conditions, or by a receiver or liquidator of the insurer. Amounts recovered on the bond shall be deposited in and become part of the insurer's funds. The total aggregate liability of the surety shall be limited to 34 the amount of the penalty of such bond.
 - Sec. 11. Annual Report.—(a) The annual report of a reciprocal insurer shall be made and filed by its attorney.
- (b) The report shall be supplemented by such informa-3 4 tion as may be required by the commissioner relative to the affairs and transactions of the attorney insofar as they pertain to the reciprocal insurer.
- Sec. 12. Process and Venue.—(a) Concurrently with the filing of the application provided for by the terms of section six of this article, the attorney shall file with the commissioner an instrument in writing, executed by him 5 for said subscribers, conditioned that upon the issuance of the license provided for in section seven of this article any action, suit or other proceeding arising out of any 8 insurance contract or policy issued under such license, 9 may be brought in the county of this State wherein the property insured was situated either at the date of the 10 policy or at the time when the right of action accrued, or 11 in the county of this State wherein the person insured had a legal residence at the date of his death or at the time

the right of action accrued, and that service of any process or notice may be had upon the auditor of this State in all actions, suits or other proceedings in this State arising out of such policies, contracts, agreements or other business of insurance transacted under such license, and that said auditor may accept service of any such process or notice.

- 20 (b) Such service or acceptance of service shall be valid 21 and binding upon such attorney and upon all subscribers 22 exchanging at any time reciprocal or inter-insurance contracts through such attorney. Two copies of such process 23 24 or notice, in addition to the original, shall be furnished the auditor, and he shall file one copy, forward one copy 25 26 to said attorney and return the original with his acceptance of service or for return of service. But no process or notice shall be served on the auditor or accepted by him less than ten days before the return day thereof. Where the principal office of the attorney is located in this State, 30 service of process may be had upon all subscribers by 31 32 serving same upon the attorney at said office. Service of 33 process shall not be had upon said subscribers or any of them in any suit or other proceeding in this State except 34 in the manner provided in this section, and any action, suit, or other proceeding may be begun and prosecuted against or defended by them under the name or designa-38 tion adopted by them.
- 39 (c) The attorney shall pay to the auditor an annual fee 40 of ten dollars.
- Sec. 13. Fees and Taxes.—(a) The attorney for each reciprocal insurer shall pay on behalf of such insurer all fees and taxes prescribed by this chapter for other insurers transacting like kinds of insurance, except that the amount of the premium tax shall be computed upon the gross premiums on business transacted in this State less premiums returnable because of cancellation and less amounts returned to subscribers or credited to their accounts as savings.
- 10 (b) In addition such attorney shall pay annually on 11 behalf of such reciprocal insurer the fire marshal's tax 12 provided by section twenty-four, article three, chapter 13 twenty-nine of this Code, to the extent such tax is applic-

able to the kinds of insurance transacted in this state by such reciprocal insurer.

- 16 (c) No reciprocal insurer shall be liable for any taxes 17 except those described in this section and property taxes 18 upon real and personal property, unless reciprocal in-19 surers be specifically mentioned in the law imposing such 20 taxes.
- Sec. 14. Who May be Subscribers.—Individuals, part-2 nerships, and corporations of this State may make appli-3 cation, enter into agreement for and hold policies or con-4 tracts in or with and be a subscriber of any domestic, 5 foreign, or alien reciprocal insurer. Any public or private 6 corporation now or hereafter created by or organized 7 under the laws of this State shall, in addition to the rights, 8 powers, and franchises specified in its articles of incorpora-9 tion, have full power and authority as a subscriber to 10 exchange insurance contracts through such reciprocal 11 insurance. The right to exchange such contracts is hereby 12 declared to be incidental to the purposes for which such 13 corporations are organized and to be as fully granted as 14 the rights and powers expressly conferred upon such corporations. Any officer, representative, trustee, receiver, 16 or legal representative of any such subscriber shall be 17 recognized as acting for or on its behalf for the purpose 18 of such contract but shall not be personally liable upon 19 such contract by reason of acting in such representative 20 capacity.
 - Sec. 15. Subscriber's Advisory Committee.—(a) The advisory committee of a domestic reciprocal insurer exercising the subscribers' rights shall be selected under such rules as the subscribers adopt.
 - (b) Not less than two-thirds of such committee shall be subscribers other than the attorney, or any person employed by, representing, or having a financial interest in the attorney.
 - (c) The committee shall:

5

6

8

9

- (1) Supervise the finances of the insurer;
- 11 (2) Supervise the insurer's operations to such extent 12 as to assure conformity with the subscribers' agreement 13 and power of attorney;

- 14 (3) Procure the audit of the accounts and records of 15 the insurer and of the attorney at the expense of the in-16 surer;
- 17 (4) Have such additional powers and functions as may 18 be conferred by the subscribers' agreement.
- Sec. 16. Subscriber's Liability.—(a) The liability of 2 each subscriber, other than as to a nonassessable policy, 3 for the obligations of the reciprocal insurer shall be an 4 individual, several, and proportionate liability, and not 5 joint.
- 6 (b) Except as to a nonassessable policy each subscriber 7 shall have a contingent assessment liability, in the amount 8 provided for in the power of attorney or in the subscribers' 9 agreement, for payment of actual losses and expenses incurred while his policy was in force. Such contingent 11 liability may be at the rate of not less than one nor more 12 than ten times the premium or premium deposit stated in 13 the policy, and the maximum aggregate thereof shall be 14 computed in the manner set forth in section twenty of 15 this article.
- 16 (c) Each assessable policy issued by the insurer shall 17 contain a statement of the contingent liability, set in type 18 of the same prominence as the insuring clause.
 - Sec. 17. Subscriber's Limbility on Judgments.—(a) No action shall lie against any subscriber upon any obligation claimed against the insurer until a final judgment has been obtained against the insurer and remains unsatisfied for thirty days.
 - 6 (b) Any such judgment shall be binding upon each 7 subscriber only in such proportion as his interests may 8 appear and in amount not exceeding his contingent liabili-9 ty, if any.
 - Sec. 18. Assessments.—(a) Assessments may from time to time be levied upon subscribers of a domestic reciprocal insurer liable therefor under the terms of their policies by the attorney upon approval in advance by the subscribers' advisory committee; or by the receiver, conservator, rehabilitator or liquidator, in liquidation proceedings of the insurer.

8 (b) Each such subscriber's share of a deficiency for 9 which an assessment is made, but not exceeding in any event his aggregate contingent liability as computed in accordance with section twenty of this article, shall be computed by applying to the premium earned on the 12 subscriber's policy or policies during the period to be 13 covered by the assessment, the ratio of the total deficiency 14 to the total premiums earned during such period upon all 16 policies subject to the assessment.

15

17

18

19 20

21

- (c) In computing the earned premiums for the purposes of this section, the gross premium received by the insurer for the policy shall be used as a base, deducting therefrom only charges not recurring upon the renewal or extension of the policy.
- (d) No such subscriber shall have an offset against any 23 assessment for which he is liable, on account of any claim 24 for unearned premium or losses payable.
- Sec. 19. Time Limit for Assessment.—Every subscriber of a domestic reciprocal insurer having contingent liability 2 shall be liable for, and shall pay his share of any assess-4 ment, as computed and limited in accordance with this 5 article, if,
- 6 (a) While his policy is in force or within one year after its termination, he is notified by either the attorney or the receiver, conservator, rehabilitator or liquidator of his intentions to levy such assessment, or
- (b) If an order to show cause why a receiver, conserva-10 tor, rehabilitator, or liquidator of the insurer should not 11 be appointed is issued while his policy is in force or within 13 one year after its termination.
 - Sec. 20. Aggregate Liability.—In the case of a domestic reciprocal insurer no one policy or subscriber as to such policy, shall be assessed or charged with an aggregate of contingent liability as to obligations incurred by a reciprocal insurer in any one calendar year, in excess of the amount provided for in the power of attorney or in the subscribers' agreement, computed solely upon premium earned on such policy during that year.

Sec. 21. Nonassessable Policies.—(a) If a reciprocal in-

2 surer has a surplus of assets over all liabilities in an 3 amount equal to the minimum capital stock generally 4 required of a domestic stock insurer authorized to transact 5 like kinds of insurance, upon application of the attorney 6 and as approved by the subscribers' advisory committee, 7 the commissioner may issue his certificate authorizing the 8 insurer to extinguish the contingent liability of subscribers 9 under its policies then in force in this State, and to omit 10 provisions imposing contingent liability in all policies 11 delivered or issued for delivery in this State for so long 12 as such surplus funds remain unimpaired.

- (b) Upon impairment of such surplus, the commissioner may revoke such certificate. Such revocation shall not render subject to contingent liability any policy then in force and for the remainder of the period for which the premium has theretofore been paid; but after such revocation no policy shall be issued or renewed without providing for contingent assessment liability of the subscriber.
- (c) The commissioner shall not authorize a reciprocal insurer so to extinguish the contingent liability of any of its subscribers or in any of its policies to be issued, unless it qualifies to and does extinguish such liability of all its subscribers and in all such policies for all kinds of insurance transacted by it. Except, that if required by the laws of another state in which the insurer is transacting insurance as an authorized insurer, the insurer may issue policies providing for the contingent liability of such of its subscribers as may acquire such policies in such state, and need not extinguish the contingent liability applicable to policies theretofore in force in such state.
- (d) No reciprocal insurer shall deliver or issue for delivery in this State assessable policies imposing a contingent liability upon subscribers, if such reciprocal insurer is issuing for delivery to subscribers in this or any other state nonassessable policies insuring risks of substantially the same hazard and class.

Sec. 22. Distribution of Savings.—A reciprocal insurer 2 may from time to time return to its subscribers any unused 3 premiums, savings, or credits accruing to their accounts. 4 Any such distribution shall not unfairly discriminate

- 5 between classes of risks, or policies, or between sub-6 scribers, but such distribution may vary as to classes of 7 subscribers based upon the experience of such subscribers.
- Sec. 23. Contributions.—The attorney or other parties 2 may advance to a reciprocal insurer upon reasonable 3 terms such funds as it may require from time to time in 4 its operations. Sums so advanced shall not be treated as 5 a liability of the insurer, and, except upon liquidation of 6 the insurer, shall not be withdrawn or repaid except out 7 of the insurer's realized earned surplus in excess of its 8 minimum required surplus.
- Sec. 24. Financial Condition.—In determining the fii-2 nancial condition of a reciprocal insurer the commissioner 3 shall apply the following rules:
- (a) He shall charge as liabilities the same reserves as 4 are required of incorporated insurers issuing nonassessable policies on a reserve basis.
- (b) The surplus deposits of subscribers shall be allowed 7 8 as assets, except that any premium deposit delinquent for ninety days shall first be charged against such surplus deposit. 10
- 11 (c) The surplus deposits of subscribers shall not be charged as a liability. 12

15

16

- (d) All premium deposits delinquent less than ninety days shall be allowed as assets. 14
 - (e) An assessment levied upon subscribers, and not collected, shall not be allowed as an asset.
- (f) The contingent liability of subscribers shall not be 17 18 allowed as an asset.
- 19 (g) The computation of reserves shall be based upon 20 premium deposits other than membership fees and without any deduction for the compensation of the attorney.

Sec. 25. Subscriber's Share in Assets.—Upon the liquida-2 tion of a domestic reciprocal insurer, its assets remaining 3 after discharge of its indebtedness and policy obligations, 4 the return of any contributions of the attorney or other 5 persons to its surplus made as provided in section twenty-6 three of this article, and the return of any unused pre-7 mium, savings, or credits then standing on subscribers'

- 8 accounts, shall be distributed to its subscribers who were 9 such within the twelve months prior to the last termina-
- 10 tion of its license, according to such reasonable formula
- 11 as the commissioner may approve.
 - Sec. 26. Merger or Conversion.—(a) A domestic recipro-
 - 2 cal insurer upon affirmative vote of not less than two-
- 3 thirds of its subscribers who vote on such merger pursuant
- 4 to due notice and the approval of the commissioner of the
- 5 terms therefor, may merge with another reciprocal insurer
- 6 or be converted to a stock or mutual insurer.
- 7 (b) Such a stock or mutual insurer shall be subject to
- 8 the same capital requirements and shall have the same
- 9 rights as a like domestic insurer transacting like kinds of
- 10 insurance.
- 11 (c) The commissioner shall not approve any plan for
- 12 such merger or conversion which is inequitable to sub-
- 13 scribers, or which, if for conversion to a stock insurer,
- 14 does not give each subscriber preferential right to acquire
- 15 stock of the proposed insurer proportionate to his interest
- 16 in the reciprocal insurer as determined in accordance with
- 17 section twenty-five of this article and a reasonable length
- 18 of time within which to exercise such right.

Article 22. Farmers' Mutual Fire Insurance Companies

- Section 1. Scope of Article.—Every farmers' mutual fire
- 2 insurance company, hereinafter called "company", orga-
- 3 nized under the laws of this State shall be governed by the
- 4 provisions of this article and by no other provisions of
- 5 this chapter except such provisions as are specifically
- 6 made applicable and referred to in this article. No law
- 7 hereafter enacted shall apply to such companies unless
- 8 such law shall declare that it is specifically applicable to
- 9 farmers' mutual fire insurance companies.
- Sec. 2. Other Provisions Applicable.—Each such com-
- 2 pany to the same extent such provisions are applicable to
- 3 domestic mutual insurers shall be governed by and be
- 4 subject to the following articles of this chapter: article 5 one (definitions), article two (insurance commissioner),
- 6 article four (general provisions) except that section six-
- 7 teen of article four shall not be applicable thereto, article

ten (rehabilitation and liquidation) except that under the provisions of section thirty-two of said article ten no assessment shall be levied against any former member of a farmers' mutual fire insurance company who was no longer a member of such company at the time the order to show cause was issued, article eleven (unfair practices and frauds), and article twelve (agents, brokers and solicitors) except that the agents' license fee shall be one dollar; but only to the extent such provisions are not inconsistent with the provisions of this article.

Sec. 3. Incorporation.—Such company may be organized and incorporated without capital stock for the purpose of insuring property against loss or damage as hereinafter authorized, in the same manner as non-stock companies generally are organized and incorporated, except that the secretary of state of this State shall not issue a certificate of incorporation until the commissioner shall have examined the charter and approved same in writing upon being satisfied that the company is in a position to comply with the provisions of this article.

Sec. 4. License.—No such company shall transact insur-2 ance in West Virginia except as authorized by a license 3 issued by the commissioner. Such company shall apply to 4 the commissioner for such license and shall file with such 5 application a certified copy of its charter and by-laws, 6 together with applications from residents of this State for not less than one hundred thousand dollars of insurance 8 of the type such companies are permitted to transact on 9 property located in this State. The term of such license, 10 renewal, refusal to license, revocation, suspension or pen-11 alty in lieu thereof, and reissuance, shall be governed by the provisions of sections eight, nine, ten, and eleven, of 12 13 article three of this chapter, in the same manner that such 14 sections are applicable to insurers generally, to the extent 15 such provisions are not inconsistent with the provisions 16 of this article.

Sec. 5. Corporate Organization and Procedure.—(a) The number of directors of any such company shall not be less than six nor more than fifteen, a majority of whom shall

22

25

26

27

28

29

31 32

33

34

35

36

37

- 4 constitute a quorum to do business, to be elected from the 5 incorporators by ballot, of whom one-third shall be elected 6 for one year, one-third for two years and one-third for 7 three years, until their successors are elected and qualified. 8 At all subsequent elections, except to fill vacancies, onethird of such board of directors shall be elected for three 10 years, such election to be held at the annual meeting of 11 the company. In the election of the first board of directors 12 each incorporator shall be entitled to one vote. At every subsequent election every member shall be entitled to one 13 14 vote and may cast the same in person or by proxy. Regular meetings of the board of directors shall be held as often 15 as the by-laws may provide, and special meetings may be 16 17 held at the call of the president, secretary, or a majority of the board of directors. 18
- (b) The directors shall elect from their number a president and a treasurer, and shall also employ a secretary, 20 who may or may not be a member of the company, all of whom shall hold their office for one year and until their successors are elected and qualified. Any two of the above 24 named offices except the office of president may be held by the same person. The directors shall also prescribe the duties of the officers and fix their compensation, not inconsistent with the charter and by-laws.
 - (c) The treasurer and secretary shall give bonds to the company for the faithful performance of their duties in such amounts as shall be prescribed by the board of directors, only one bond being required where the office of treasurer and secretary is held by the same person. Bonds may be required of other employees and agents of the company at the discretion of the board of directors.
 - (d) The board of directors shall notify all members of the time and place of the annual meeting of such members, either by printing the same on their policies or by written notice.
- (e) Each such company when so licensed to transact insurance shall possess all the powers necessary to carry 41 out its corporate purposes and not inconsistent with this article or the laws of this State. Amendments to the charter or by-laws may be offered by the board or any

member at any regular or special meeting of the members upon written notice to all members of the intention to propose such amendments not less than thirty days prior to such meeting, and such amendments may be adopted by the approval of a majority of the members present and voting in person or by proxy. No such amendment shall be effective unless and until approved by the commissioner.

52

53

54

- (f) The president or vice-president, and secretary or assistant secretary of every such company shall prepare annually, under oath, a full, true and complete statement of the condition of such company as of the thirty-first day of December, and present the same to the annual meeting.
- Sec. 6. Members.—(a) Each policyholder of such company is a member thereof and is entitled to all the rights and privileges and is subject to all liabilities connected with such membership.
- (b) Whenever any public or private corporation, board 5 or association in this State holds a policy in any such company, any officer, stockholder or trustee of any such corporation, board or association may be recognized as 9 acting for or on its behalf for the purpose of such mem-10 bership, but shall not be personally liable upon such con-11 tract of insurance by reason of acting in such representa-12 tive capacity. The right of any corporation organized 13 under the laws of this State to participate as a member of 14 such company is hereby declared to be incidental to the purpose for which such corporation is organized and as 16 much granted as the rights and powers expressly con-17 ferred.
- Sec. 7. Policy Approval.—(a) No policy form shall be issued or used by any such company unless such form has been filed with and approved by the commissioner. The filing, approval and disapproval of such forms shall be governed by the provisions of sections eight and nine of article six of this chapter in the same manner as form filings of other insurers.
- 8 (b) All terms and conditions of such policies shall be 9 set forth in full in the policy or endorsements attached 10 thereto including the contingent liability, if any, of the

11 12

13

14

15

16

17

18

19 20

21

- policyholder, and no provision purporting to make any portion of the charter, by-laws or other documents a part of the policy shall be valid unless such portion is set forth in full in the policy. 14
- 15 (c) Policies may limit the liability of the company to a 16 fixed percent of the value of the property insured.
- 17 (d) Whenever the commissioner believes the public 18 interest requires a standard form for a particular kind of 19 coverage, the commissioner may prescribe a standard form 20 of policy for such companies, or a standard specific pro-21 vision to be inserted in such policies, and all policies thereafter issued by such companies shall conform to such standard forms or provisions.
 - Sec. 8. Insuring Powers.—(a) Every such company may issue policies of insurance on property located anywhere in this State, signed by its president and secretary, providing insurance against:
 - (1) Loss or damage to dwelling houses, stores and all 6 kinds of buildings and household furniture, goods, merchandise and chattels of every description, and all other property by fire, and allied coverages, including lightning, aircraft, windstorm, tornado, cyclone, hail, frost or snow, smoke, weather or climatic conditions, including excess or deficiency of moisture, flood, rain or drought, business interruptions, riot attending a strike or civil commotion, riot, vehicle and by explosion whether fire ensues or not;
 - (2) Loss or damage by insects or disease to farm crops or products and loss of rental value of land used in producing such crops or products;
 - (3) Loss or damage by water or other fluid to any goods or premises arising from the breakage or leakage of sprinklers, pumps or other apparatus erected for extinguishing fires, or of other conduits or containers, or by water entering through leaks or openings in buildings and of water pipes, and against accidental injury to such sprinklers, pumps, apparatus, conduits, containers or water pipes;
- (4) Loss or damage to domestic farm animals by dogs 25 26 or wild animals.
- (b) The commissioner may, for good cause shown or 27

28 on application of the company, limit the license of a 29 company to make insurance to any one or more of the 30 perils or coverages set forth in paragraph (a) of this 31 section.

32

33

35

37

39 **40**

41

42

43

46

47

48

49 50

51

53

- (c) In addition any such company may apply to the commissioner for an extension of its license, and upon complying with reasonable standards established by the commissioner to assure the solvency of such company and the protection of its policyholders, may in the discretion of the commissioner be granted an extension of its license to permit such company to issue policies of insurance on risks located in this State insuring against one or more of the following:
- (1) Legal liability for the death, injury, or disability of any human being, or for damage to property, excluding liability resulting from the ownership, maintenance, or use of vehicles or aircraft; and provisions for medical, hospital, surgical and disability benefits to injured persons and funeral and death benefits to dependents, beneficiaries or personal representatives of persons killed, irrespective of legal liability of the insured, when issued as an incidental coverage with or supplemental to such liability coverage.
- (2) Loss or damage to property by burglary, theft, larceny, robbery, vandalism, malicious mischief, or wrongful conversion, or any attempt at any of the foregoing.
 - (3) Personal property floater insurance.
- Sec. 9. Premiums, Membership Fees, Assessments and 2 Dividends.—(a) Such company shall collect from its 3 members such initial fees or charges as its by-laws pro-4 vide.
- 5 (b) Any such company may levy assessments or collect 6 premiums for the purpose of paying losses and expenses 7 already incurred, or for estimated future losses and expenses, and for reserve or surplus fund purposes. The 9 secretary of any such company shall notify every member 10 of the company of the amount due by a written or printed 11 notice, mailed to the last known address of each member, 12 stating the amount due the company from the member 13 and the time and place and to whom it shall be paid.

- Such payment shall be made by the member within sixty days from date of mailing such notice, or within a lesser period, as the by-laws may provide. The company may maintain an action against any member thereof to recover all such assessments which he may neglect or refuse to pay when legally due and payable.
- 20 (c) Any such company issuing policies at rates other 21 than uniform or class rates or levying assessments on 22 other than a uniform or class basis shall as to such policies 23 be a subscriber to a rating organization licensed under 24 the provisions of article twenty of this chapter.
- 25 (d) Such company may return to its members in the 26 form of dividends or otherwise savings or earnings of 27 such company.
- Sec. 10. Contingent Liability of Member.—The contingent liability of a member of such company may, with the approval of the commissioner, be limited to one or more times the annual premium as computed for the policy, and the company may issue a policy without contingent liability to the member if at the time of issuance it has a surplus of not less than one hundred thousand dollars and maintains unearned premium and other reserves on the same basis as that required of domestic insurers transacting like kinds of insurance. In the absence of such limitation of contingent liability each member shall be liable for his pro-rata share of losses and expenses of the company, including a reasonable contribution to a surplus fund.
- Sec. 11. Reserves, Surplus or Emergency Fund.—(a) 2 Each such company is authorized to accumulate a surplus 3 or emergency fund in such amount as may be deemed 4 advisable by its board of directors.
- 5 (b) The first twenty-five thousand dollars of such accumulated surplus shall be in cash or invested in government securities described in section seven of article eight of this chapter, and the balance of such surplus may be invested in any of the other classes of investments described in said article eight, subject to the limitations as to each such class provided therein.
- 12 (c) All assets of such company other than such accu-

- 13 mulated surplus shall be in cash or invested in the gov-
- 14 ernment securities described in section seven of article
- 15 eight of this chapter.
- Sec. 12. Limit of Risk.—No such company shall insure 2 any single risk comprising a building and contents or 3 other property so located as to be subject to destruction 4 by a single fire for a greater amount than one thousand 5 dollars until its insurance in force shall be as much as 6 five hundred thousand dollars, nor shall it then insure 7 any such risks for an amount greater than one-fifth of 8 one percent of the net insurance in force under its policies, 9 or ten percent of its surplus, whichever is greater, unless 10 the risks insured by the company in excess of the amounts
- 11 above stipulated are simultaneously covered by rein-12 surance.
- Sec. 13. Reinsurance; Joint Policies.—(a) Such com-
- 2 pany may procure reinsurance on any or all of its risks
- 3 in licensed insurers transacting like kinds of insurance; 4 and such company may issue policies of reinsurance to
- 5 other licensed insurers transacting like kinds of insur-
- 6 ance.
- (b) Two or more such companies may issue policies 7 8 jointly.
- Sec. 14. Notices to Members.—All notices of cancella-
- 2 tion of policies or reduction thereof and all other notices
- 3 to members required by this article shall be delivered 4 personally or mailed in a sealed envelope addressed to the
- 5 last known address of the member and when so given
- 6 they shall be deemed sufficient and binding upon the
- 7 member so notified.
- Sec. 15. Termination, Cancellation and Suspension of
- 2 Membership.—(a) Any member of a company may with-3 draw therefrom upon written notice to the company.
- 4 Every member so withdrawing shall immediately sur-
- 5 render his policy and pay to the extent of his liability
- as stated in the policy, all of his indebtedness legally due
- 7 the company.
 - (b) No member shall be liable for losses or expenses

- 9 occurring subsequent to the time of termination of his 10 membership.
- 11 (c) The company may cancel any policy upon at least 12 five days written notice to the holder.
- (d) A company may, in its by-laws, provide for the suspension of its liability for loss upon any policy from the date when an unpaid assessment becomes due if notice is given to the member five days before the suspension is to become effective, and the payment of such assessment shall only reinstate such policy from the date of such payment, but no allowance shall be made in any
- 20 assessment because of such suspension.
 - Sec. 16. Fees.—Such company at the time of making its annual report shall pay to the commissioner a filing fee of five dollars, all fees so collected to go into the fund for the purposes specified in section thirteen of article three of this chapter. No other fees or taxes shall be levied against such companies except the agent's license
 - 7 fee and the expenses of examination thereof by the com-
 - 8 missioner.
 - Sec. 17. Dissolution, Member's Share of Assets.—Upon the liquidation of any such company, the share of each member in the assets shall be computed and distributed in the manner provided in section twenty-nine of article five of this chapter for computing and distributing the share of members of other types of domestic mutual insurers.
 - Sec. 18. Mergers and Consolidations.—(a) No farmers' mutual fire insurance company shall merge or consolidate with any stock insurer or with any other type of mutual insurer.
 - 5 (b) A farmers' mutual fire insurance company may 6 merge or consolidate with another farmers' mutual fire 7 insurance company in the manner provided in section 8 twenty-eight of article five of this chapter for the merger 9 or consolidation of other types of domestic mutual insurers.
 - Sec. 19. Conversion to Stock or Mutual Insurer.—(a) A 2 farmers' mutual fire insurance company may become a

- 3 stock insurer in the manner provided in section twenty-4 four of article five of this chapter for converting other
- 5 types of domestic mutual insurers to domestic stock in-
- 6 surers, or
- 7 (b) A farmers' mutual fire insurance company may be-
- 8 come a domestic mutual insurer pursuant to such plan
- 9 and procedure as may be approved in advance by the
- 10 commissioner, subject to approval by vote of not less
- 11 than three-fourths of the company's current members vot-
- 12 ing thereon in person, by proxy, or by mail at a meeting
- 13 of members called for that purpose pursuant to such
- 14 notice and procedure as may be approved by the commis-
- 15 sioner, and subject to such company as reorganized com-
- 16 plying with all requirements of this chapter relating to
- 17 the initial organization and licensing of a domestic mutual
- the initial organization and licensing of a domestic mutual
- 18 insurer transacting like kinds of insurance as those pro-
- 19 posed to be transacted by the reorganized company.

Article 23. Fraternal Benefit Societies

- Section 1. Scope of Article.—Every fraternal benefit
- 2 society shall be governed by the provisions of this article
- 3 and by no other provisions of this chapter except such
- 4 provisions as are specifically made applicable and referred
- 5 to in this article.
- Sec. 2. Other Provisions Applicable.—Every fraternal
- 2 benefit society shall be governed and be subject, to the
- 3 same extent as other insurers transacting like kinds of
- 4 insurance, to the following articles of this chapter: article
- 5 one (definitions), article two (insurance commissioner),
- 6 article four (general provisions), article ten (rehabilita-
- 7 tion and liquidation), and article eleven (unfair practices
- 8 and frauds).
- Sec. 3. Fraternal Benefit Societies Defined.—Any in-
- 2 corporated society, order or supreme lodge, without capital
- 3 stock, including one exempted under the provisions of
- 4 subparagraph (2) of paragraph (a) of section thirty-four
- 5 of this article whether incorporated or not, conducted
- 6 solely for the benefit of its members and their benefici-
- 7 aries and not for profit, operated on a lodge system with
- 8 ritualistic form of work, having a representative form of

- government, and which makes provision for the payment
- 10 of benefits in accordance with this article, is hereby de-
- 11 clared to be a fraternal benefit society. When used in
- 12 this article the word "society", unless otherwise indicated,
- 13 shall mean fraternal benefit society.
- Sec. 4. Lodge System Defined.—A society having a 2 supreme legislative or governing body and subordinate 3 lodges or branches by whatever name known, into which 4 members are elected, initiated or admitted in accordance 5 with its constitution, laws, ritual and rules, which sub-6 ordinate lodges or branches shall be required by the laws 7 of the society to hold regular meetings at least once in each month, shall be deemed to be operating on the lodge 9 system.
 - Sec. 5. Representative Form of Government Defined.— A society shall be deemed to have a representative form of government when:
- (a) it provides in its constitution or laws for a supreme 5 legislative or governing body, composed of representa-6 tives elected either by the members or by delegates elected 7 directly or indirectly by the members, together with such 8 other members of such body as may be prescribed by the 9 society's constitution and laws;
- (b) the representatives elected constitute a majority 10 11 in number and have not less than two-thirds of the votes 12 nor less than the votes required to amend its constitution 13 and laws:
- (c) the meetings of the supreme legislative or govern-15 ing body and the election of officers, representatives or 16 delegates are held as often as once in four calendar years;
- (d) each insured member shall be eligible for election 18 to act or serve as a delegate to such meeting:
- (e) the society has a board of directors charged with 19 20 the responsibility for managing its affairs in the interim between meetings of its supreme legislative or governing 21 body, subject to control by such body and having powers 23 and duties delegated to it in the constitution or laws of 24 the society:
- 25 (f) such board of directors is elected by the supreme 26 legislative or governing body, except in case of filling a

- 27 vacancy in the interim between meetings of such body;
- 28 (g) the officers are elected either by the supreme legis-29 lative or governing body or by the board of directors; 30 and
- 31 (h) the members, officers, representatives or delegates 32 shall not vote by proxy.

- Sec. 6. *Organization*.—The organization of a domestic society shall be governed as follows:
- (a) Seven or more citizens of the United States, a majority of whom are citizens of this State, who desire to form a fraternal benefit society, may make, sign and acknowledge before some officer, competent to take acknowledgment of deeds, articles of incorporation, in which shall be stated:
- (1) the proposed corporate name of the society, which shall not so closely resemble the name of any society or insurance company as to be misleading or confusing;
- (2) the purposes for which it is being formed and the mode in which its corporate powers are to be exercised. Such purposes shall not include more liberal powers than are granted by this article: *Provided*, That any lawful, social, intellectual, educational, charitable, benevolent, moral, fraternal or religious advantages may be set forth among the purposes of the society; and
- (3) the names and residences of the incorporators and the names, residences and official titles of all the officers, trustees, directors, or other persons who are to have and exercise the general control of the management of the affairs and funds of the society for the first year or until the ensuing election at which all such officers shall be elected by the supreme legislative or governing body, which election shall be held not later than one year from the date of the issuance of the permanent certificate.
- (b) Such articles of incorporation, duly certified copies of the constitution, laws and rules, copies of all proposed forms of certificates, applications therefor, and circulars to be issued by the society and a bond conditioned upon the return to applicants of the advanced payments if the organization is not completed within one year, such bond to be in an amount to be determined by the com-

49

50

51

52

53

54

55

59

60

61

62 63

64

65

66

67

68 69

70

71

72

missioner not to exceed the sum of twenty-five thousand 36 dollars with sureties approved by the commmissioner, 37 shall be filed with the commissioner, who may require 38 such further information as he deems necessary. All 39 documents filed are to be in the English language. If the 40 purposes of the society conform to the requirements of 41 this article and all provisions of law have been complied 42 with, the commissioner shall approve same in writing, 43 whereupon the incorporators may file such approved ar-44 ticles with the secretary of state of this State and receive a certificate of incorporation in the same manner as such 46 certificates are issued to other non-stock corporations.

- (c) No certificate granted under the provisions of this 48 section shall be valid after one year from its date or after such further period, not exceeding one year, as may be authorized by the commissioner upon cause shown, unless the five hundred applicants hereinafter required have been secured and the organization has been completed as herein provided. The articles of incorporation and all other proceedings thereunder shall become null and void in one year from the date of the certificate, or at the 56 expiration of the extended period, unless the society shall 57 have completed its organization and received a license as 58 hereinafter provided.
 - (d) Upon receipt of the certificate of incorporation, the society may solicit members for the purpose of completing its organization, shall collect from each applicant the amount of not less than one regular monthly premium in accordance with its table of rates as provided by its constitution and laws, and shall issue to each such applicant a receipt for the amount so collected. No society shall incur any liability other than for the return of such advance premium, nor issue any certificate, nor pay, allow, or offer or promise to pay or allow, any death or disability benefit to any person until:
 - (1) actual bona fide applications for death benefits have been secured aggregating at least five hundred thousand dollars on not less than five hundred lives:
- 73 (2) all such applicants for death benefits shall have 74 furnished evidence of insurability satisfactory to the so-75 ciety.

- 36 (3) certificates of examinations or acceptable declara-77 tions of insurability have been duly filed and approved 78 by the chief medical examiner of the society;
- (4) ten subordinate lodges or branches have been established into which the five hundred applicants have
- been admitted;

 (5) there has been submitted to the commissioner, under oath of the president or secretary, or corresponding officer of the society, a list of such applicants, giving their names, addresses, date each was admitted, name and number of the subordinate branch of which each applicant is a member, amount of benefits to be granted and premiums therefor; and
- (6) it shall have been shown to the commissioner, by sworn statement of the treasurer, or corresponding officer of such society, that at least five hundred applicants have each paid in each at least one regular monthly premium as herein provided, which premiums in the aggregate shall amount to at least twenty-five hundred dollars, all of which shall be credited to the fund or funds from which benefits are to be paid and no part of which may be used for expenses. Said advance premiums shall be held in trust during the period of organization and if the society has not qualified for a certificate of authority within one trust during the period of organization and it the society has not qualified for a certificate of authority within one to said applicants.
- (e) The commissioner may make such examination and require such further information as he deems advisable. Upon presentation of satisfactory evidence that the society has complied with all the provisions of law, he shall issue to the society a license to transact insurance pursuant to the provisions of this article. The license shall be prima facie evidence of the existence of the society at the date of such license. The commissioner society at the date of such license to be made. A certified shall cause a record of such license to be made. A certified copy of such record may be given in evidence with like effect as the original license.
- (f) Every society shall have the power to adopt a constitution and laws for the government of the society, the admission of its members, the management of its affairs

GII

FII

113

211

III

OII

60I

801

40I

90I

901

70t

103

105

IOI

001

66

86

46

96

96

₹6

63

76

16

06

68

88

78

98

98

₽8

83

28

18

90

- and the fixing and readjusting of the rates of its members from time to time. It shall have the power to change,
- 118 alter, add to or amend such constitution and laws and
- 119 shall have such other powers as are necessary and inci-
- 120 dental to carrying into effect the objects and purposes of
- 121 the society.

8 incorporate.

- Sec. 7. Corporate Powers Retained.—Any incorporated 2 society licensed to transact insurance in this State at the 3 time this article becomes effective may thereafter exer-4 cise all the rights, powers and privileges prescribed in 5 this article and in its charter, articles of incorporation 6 and license as far as consistent with this article. A do-7 mestic incorporated society shall not be required to re-
- Sec. 8. Existing Voluntary Associations.—(a) After one year from the effective date of this article, no unincorporated or voluntary association shall be permitted 4 to transact business in this State.
- (b) Any domestic voluntary association now licensed 6 to transact insurance in this State may incorporate and 7 shall receive from the commissioner a license as a fraternal benefit society when:
- (1) it shall have completed its conversion to an incorporated society not later than one year from the effective date of this article: 11
- 12 (2) it has filed its articles of incorporation and has satisfied the other requirements described in section six 14 of this article: and
- 15 (3) the commissioner shall have made such examina-16 tion and procured whatever additional information he 17 shall deem advisable.
- 18 (c) Every voluntary association so incorporated shall 19 incur the obligations and enjoy the benefits thereof the 20 same as though originally incorporated, and such cor-21 poration shall be deemed a continuation of the original 22 voluntary association. The officers thereof shall serve 23 through their respective terms as provided in its original 24 articles of association, but their successors shall be elected 25 and serve as provided in its articles of incorporation.

- 26 Incorporation of a voluntary association shall not affect 27 existing suits, claims or contracts.
- Sec. 9. Office and Meetings of Domestic Society.—The principal office of any domestic society shall be located in this State. The meetings of its supreme legislative or 4 governing body may be held in any state, district, prov-5 ince or territory wherein such society has at least five 6 subordinate branches and all business transacted at such 7 meetings shall be as valid in all respects as if such meet-8 ings were held in this State.
 - Sec. 10. Consolidations and Mergers.—(a) A domestic society may make application to consolidate or merge with any other society by filing with the commissioner:
- (1) a certified copy of the written contract containing 5 in full the terms and conditions of the consolidation or 6 merger:

7

12

16

18

20

22

23

24 25

- (2) a sworn statement by the president and secretary or corresponding officers of each society showing the 8 financial condition thereof on a date fixed by the com-10 missioner but not earlier than December thirty-first, next preceding the date of the contract; 11
- (3) a certificate of such officers, duly verified by their 13 respective oaths, that the consolidation or merger has been approved by a two-thirds vote of the supreme legis-14 lative or governing body of each society; and 15
- (4) evidence that at least sixty days prior to the ac-17 tion of the supreme legislative or governing body of each society, the text of the contract has been furnished to 19 all members of each society either by mail or by publication in full in the official organ of each society.
- (b) If the commissioner finds that the contract is in conformity with the provisions of this section, that the financial statements are correct and that the consolidation or merger is just and equitable to the members of each society, he shall approve the contract and issue his 26 certificate to such effect. Upon such approval, the con-27 tract shall be in full force and effect unless any society 28 which is a party to the contract is incorporated under 29 the laws of any other state or territory. In such event 30 the consolidation or merger shall not become effective

40

41 42

44 45

46

48

49

50

52

53

54

58

unless and until it has been approved as provided by the laws of such state or territory and a certificate of such approval filed with the commissioner or, if the laws of 34 such state or territory contain no such provision, then the consolidation or merger shall not become effective unless and until it has been approved by the insurance 37 supervisory official of such state or territory and a cer-38 tificate of such approval filed with the commissioner.

- (c) Upon the consolidation or merger becoming effective as herein provided, all the rights, franchises and interests of the consolidated or merged societies in and to every species of property, real, personal or mixed, and things in action thereunto belonging shall be vested in the society resulting from or remaining after the consolidation or merger without any other instrument, except that conveyances of real property may be evidenced by proper deeds, and the title to any real estate or interest therein, vested under the laws of this State in any of the societies consolidated or merged, shall not revert or be in any way impaired by reason of the consolidation 51 or merger, but shall vest absolutely in the society resulting from or remaining after such consolidation or merger.
- (d) The affidavit of any officer of the society or of any-55 one authorized by it to mail any notice or document, stating that such notice or document has been duly addressed and mailed, shall be prima facie evidence that such notice or document has been furnished the ad-59 dressees.

Sec. 11. Conversion of Society to Mutual Life Insurer.— Any domestic fraternal benefit society may be converted and licensed as a mutual life insurance company by compliance with all the requirements of this chapter for the 5 initial licensing of a domestic mutual life insurer, if such plan of conversion has been approved by the commissioner. 7 Such plan shall be prepared in writing setting forth in 8 full the terms and conditions thereof. The board of di-9 rectors shall submit such plan to the supreme legislative or governing body of such society at any regular or special meeting thereof, by giving a full, true and complete copy

12 of such plan with the notice of such meeting. Such notice shall be given as provided in the laws of the society for 14 the convocation of a regular or special meeting of such 15 body, as the case may be. The affirmative vote of two-16 thirds of all members of such body shall be necessary for 17 the approval of such agreement. No such conversion shall 18 take effect unless and until approved by the commissioner 19 who may give such approval if he finds that the proposed 20 change is in conformity with the requirements of law and 21 not prejudicial to the certificate holders of the society.

Sec. 12. Qualifications for Membership.—(a) A society may admit to benefit membership any person not less than fifteen years of age, nearest birthday, who has furnished 4 evidence of insurability acceptable to the society. Any such member who shall apply for additional benefits more 5 6 than six months after becoming a benefit member shall 7 pass an additional medical examination, or make an 8 additional declaration of insurability, as required by the 9 society.

10

11

12

13

(b) Any person admitted prior to attaining the full age of twenty-one years shall be bound by the terms of the application and certificate and by all the laws and rules of the society and shall be entitled to all the rights and privileges of membership therein to the same extent as 15 though the age of majority had been attained at the time 16 of application. A society may also admit general or social 17 members who shall have no voice or vote in the manage-18 ment of its insurance affairs.

Sec. 13. Amendment of Articles of Incorporation, Constitution and Laws.—(a) A domestic society may amend 3 its articles of incorporation, constitution or laws in accord-4 ance with the provisions thereof by action of its supreme legislative or governing body at any regular or special meeting thereof or, if its articles of incorporation, constitution or laws so provide, by referendum. Such referen-8 dum may be held in accordance with the provisions of 9 its article of incorporation, constitution or laws by the 10 vote of the voting members of the society, by the vote 11 of delegates or representative of voting members or by the vote of local lodges or branches. No amend-

Call landerseled

19

20

21

22

24 25

26

27

28

29

30

31

32

35 36

37

41

42

43

44

- ment submitted for adoption by referendum shall be adopted unless, within six months from the date of submission thereof, a majority of all of the voting members 16 of the society shall have signified their consent to such 17 amendment by one of the methods herein specified.
 - (b) No amendment to the articles of incorporation, constitution or laws of any domestic society shall take effect unless approved by the commissioner who shall approve such amendment if he finds that it has been duly adopted and is not inconsistent with any requirement of the laws of this State or with the character, objects and purposes of the society. Unless the commissioner shall disapprove any such amendment within sixty days after the filing of same, such amendment shall be considered approved. The approval or disapproval of the commissioner shall be in writing and mailed to the secretary or corresponding officer of the society at its principal office. In case he disapproves such amendment, the reasons therefore shall be stated in such written notice.
- (c) Within ninety days from the approval thereof by the commissioner, all such amendments, or a synopsis 33 34 thereof, shall be furnished to all members of the society either by mail or by publication in full in the official organ of the society. The affidavit of any officer of the society or of anyone authorized by it to mail any amendments or synopsis thereof, stating facts which show that same have been duly addressed and mailed, shall be prima 40 facie evidence that such amendments or synopsis thereof, have been furnished the addressee.
- (d) Every foreign or alien society authorized to do business in this State shall file with the commissioner a duly certified copy of all amendments of, or additions to, its articles of incorporation, constitution or laws within 46 ninety days after the enactment of same.
- 47 (e) Printed copies of the constitution or laws as amended, certified by the secretary or corresponding officer of 48 49 the society shall be prima facie evidence of the legal 50 adoption thereof.
- Sec. 14. Institutions.— (a) It shall be lawful for a society to create, maintain and operate charitable, benevolent or

- 3 educational institutions for the benefit of its members and
 4 their families and dependents and for the benefit of child-
- 5 ren insured by the society. For such purpose it may own,
- 6 hold or lease personal property or real property located
- 7 within or without this State, with necessary buildings
- 8 thereon. Such property shall be reported in every annual
- 9 statement but shall not be allowed as an admitted asset of
- such society.
- 11 (b) Maintenance, treatment and proper attendance in 12 any such institution may be furnished free or a reasonable
- 13 charge may be made therefor, but no such institution
- 14 shall be operated for profit. The society shall maintain a
- 15 separate accounting of any income and disbursements
- 16 under this section and report them in its annual statement.
- 17 No society shall own or operate funeral homes or under-
- 18 taking establishments.
 - Sec. 15. Benefits Other Than Insurance Benefits.—(a)
- 2 A society may pay benefits, other than insurance benefits
- 3 to its members from any special account or fund main-
- 4 tained for such purpose; provided that if such benefits
- 5 are of such a nature that they could constitute benefits
- 6 within the classes of insurance set forth in section seven-
- 7 teen of this article, a society making such payments may
- 8 not:
- 9 (1) make any separate charge therefor;
- 10 (2) issue any certificate, policy or other document 11 promising such payments;
- 12 (3) provide in its constitution, laws or any other docu-13 ment that such payments may be received by the member 14 as a matter of right; or
- 15 (4) advertise such payments as insurance or as pay-16 ments to which the member has any right.
- 17 (b) The society shall maintain a separate accounting 18 of all disbursements made under this section and report 19 them in its annual statement.
 - Sec. 16. No Personal Liability.—The officers and mem-
- 2 bers of the supreme, grand or any subordinate body of a
- 3 society shall not be personally liable for payment of any
- 4 benefits provided by a society.

Sec. 17. Benefits.—A society licensed in this State may provide for the payment of:

- (a) death benefits in any form;
- 4 (b) endowment benefits;
 - (c) annuity benefits;
- 6 (d) temporary or permanent disability benefits as a 7 result of disease occurring before age sixty-five or accident 8 at any age;
- 9 (e) hospital, medical or nursing benefits due to sickness 10 or bodily infirmity occurring before age sixty-five or acci-11 dent at any age; and
- 12 (f) monument or tombstone benefits to the memory of 13 deceased members not exceeding in any case the sum of 14 three hundred dollars.
- Sec. 18. Benefits on Lives of Children.—(a) A society may provide for benefits on the lives of children under the minimum age for adult membership but not greater than twenty-one years of age at time of application therefor, upon the application of some adult person, as its laws or rules may provide, which benefits shall be in accordance with the provisions of section seventeen of this article. A society may, at its option, organize and operate branches for such children. Membership and initiation in local lodges shall not be required of such children, nor shall they have a voice in the management of the society.
- 12 (b) Children insured under certificates issued pursuant 13 to this section shall be transferred to and become mem-14 bers of the adult branch of the society upon attaining the 15 minimum age for adult membership under the laws of the 16 society.
- 17 (c) A society shall have power to provide for the designation and changing of designation of beneficiaries in the certificates providing for such benefits and to provide in all other respects for the regulation, government and control of such certificates and all rights, obligations and liabilities incident thereto and connected therewith.
 - Sec. 19. Nonforfeiture Benefits, Cash Surrender Values, 2 Loans and Options.—(a) A society may grant paid-up 3 nonforfeiture benefits, cash surrender values, certificate 4 loans and such other options as its laws may permit. As

11 12

15

16

17

19

21

22

24

27

2

31

32

33

35 36

37

38 39

40

41

to certificates issued on and after the effective date of this 6 article, a society shall grant at least one paid-up nonfor-7 feiture benefit.

- (b) In the case of certificates other than those for which 9 reserves are computed on the Commissioners 1941 Stan-10 dard Ordinary Mortality Table or the 1941 Standard Industrial Table, the value of every paid-up nonforfeiture benefit and the amount of any cash surrender value, loan 13 or other option granted shall not be less than the excess, 14 if any, of (1) over (2) as follows:
 - (1) the reserve under the certificate determined on the basis specified in the certificate; and
- (2) the sum of any indebtedness to the society on the 18 certificate, including interest due and accrued, and a surrender charge equal to two and one-half percent of the 20 face amount of the certificate, which, in the case of insurance on the lives of children, shall be the ultimate face amount of the certificate, if death benefits provided therein 23 are graded.
- (c) However, in the case of certificates issued on a sub-25 standard basis or in the case of certificates, the reserves 26 for which are computed upon the American Men Ultimate Table of Mortality, the term of any extended insurance benefit granted including accompanying pure endowment, 29 if any, may be computed upon the rates of mortality not 30 greater than one hundred thirty percent of those shown by the mortality table specified in the certificate for the computation of the reserve.
- (d) In the case of certificates for which reserves are 34 computed on the Commissioners 1941 Standard Ordinary Mortality Table or the 1941 Standard Industrial Table, every paid-up nonforfeiture benefit and the amount of any cash surrender value, loan or other option granted shall not be less than the corresponding amount ascertained in accordance with the provisions of the laws of this State applicable to life insurance companies issuing policies containing like insurance benefits based upon such tables.
- Sec. 20. Beneficiaries.—(a) The member shall have the 2 right at all times to change the beneficiary or beneficiaries 3 in accordance with the constitution, laws or rules of the

- 4 society. Every society by its constitution, laws or rules 5 may limit the scope of beneficiaries and shall provide that 6 no beneficiary shall have or obtain any vested interest in 7 the proceeds of any certificate until the certificate has 8 become due and payable in conformity with the provisions 9 of the insurance contract.
- 10 (b) A society may make provision for the payment of 11 funeral benefits to the extent of such portion of any payment under a certificate as might reasonably appear to be 13 due to any person equitably entitled thereto by reason of 14 having incurred expense occasioned by the burial of the 15 member, provided the portion so paid shall not exceed the 16 sum of five hundred dollars.
- 17 (c) If, at the death of any member ,there is no lawful 18 beneficiary to whom the insurance benefits shall be pay-19 able, the amount of such benefits, except to the extent 20 that funeral benefits may be paid as hereinbefore pro-21 vided, shall be payable to the personal representative of 22 the deceased member.
 - Sec. 21. Benefits Not Attachable.—No money or other benefit, charity, relief or aid to be paid, provided or rendered by any society, shall be liable to attachment, garnishment or other process, or to be seized, taken, appropriated or applied by any legal or equitable process or operation of law to pay any debt or liability of a member or beneficiary, or any other person who may have a right thereunder, either before or after payment by the society.
- Sec. 22. The Contract.—(a) Every society licensed in this State shall issue to each benefit member a certificate specifying the amount of benefits provided thereby. The certificate, together with any riders or endorsements attached thereto, the charter or articles of incorporation, the constitution and laws of the society, the application for membership, and declaration of insurability, if any, signed by the applicant, and all amendments to each there- of, shall constitute the agreement, as of the date of issuance, between the society and the member, and the certificate shall so state. A copy of the application for membership and of the declaration of insurability, if any, shall be endorsed upon or attached to the certificate.

14 (b) All statements purporting to be made by the mem-15 ber shall be representations and not warranties. Any waiver of this provision shall be void. 16

17

25

28

29

31

32

34

35

36 37

41

- (c) Any changes, additions or amendments to the char-18 ter or articles of incorporation, constitution or laws duly 19 made or enacted subsequent to the issuance of the certificate, shall bind the member and the beneficiaries, and 21 shall govern and control the agreement in all respects the same as though such changes, additions or amendments 2**2** 23 had been made prior to and were in force at the time of 24 the application for membership, except that no change, addition, or amendment shall destroy or diminish benefits 26 which the society contracted to give the member as of the 27 date of issuance.
- (d) Copies of any of the documents mentioned in this section, certified by the secretary or corresponding officer 30 of the society, shall be received as evidence of the terms and conditions thereof.
- (e) A society shall provide in its constitution or laws 33 and in its certificates that if its reserves as to all or any class of certificates become impaired its board of directors or corresponding body may require that there shall be paid by the member to the society the amount of the member's equitable proportion of such deficiency as ascertained 38 by its board, and that if the payment be not made it shall 39 stand as an indebtedness against the certificate and draw 40 interest not to exceed five percent per annum compounded annually.
- Sec. 23. Standard and Prohibited Provisions.—(a) No 2 life benefit certificate shall be delivered or issued for delivery in this State unless a copy of the form shall have been filed with the commissioner and approved by him as 5 conforming to the requirements of this section and not 6 inconsistent with any other provisions of law applicable thereto. A certificate shall be deemed approved unless disapproved by the commissioner within sixty days of the 9 date of such filing.
- (b) The certificate shall contain in substance the follow-11 ing standard provisions or, in lieu thereof, provisions which 12 are more favorable to the member:

19

20

23

25

26

38

39

40 41

45

- 13 (1) title on the face and filing page of the certificate 14 clearly and correctly describing its form;
- 15 (2) a provision stating the amount of rates, premiums 16 or other required contributions, by whatever name known, which are payable by the insured under the certificate; 17
 - (3) a provision that the member is entitled to a grace period of not less than a full month (or thirty days at the option of the society) in which the payment of any premium after the first, may be made. During such grace period the certificate shall continue in full force, but in case the certificate becomes a claim during the grace period before the overdue payment is made, the amount of such overdue payment or payments may be deducted in any settlement under the certificate;
- 27 (4) a provision that the member shall be entitled to 28 have the certificate reinstated at any time within three 29 years from the due date of the premium in default, unless 30 the certificate has been completely terminated through the application of a nonforfeiture benefit, cash surrender 31 value or certificate loan, upon the production of evidence of insurability satisfactory to the society and the payment 33 34 of all overdue premiums and any other indebtedness to 35 the society upon the certificate, together with interest on 36 such premiums and such indebtedness, if any, at a rate 37 not exceeding six percent per annum compounded annually;
- (5) except in the case of pure endowment, annuity or reversionary annuity contracts, reducing term insurance contracts, or contracts of term insurance of uniform 42 amount of fifteen years or less expiring before age sixty-43 six, a provision that, in the event of default in payment 44 of any premium after three full years' premiums have been paid or after premiums for a lesser period have been paid if the contract so provides, the society will grant, upon proper request not later than sixty days after the 47 48 due date of the premium in default, a paid-up nonforfeiture benefit on the plan stipulated in the certificate, 49 50 effective as of such due date, of such value as specified in this article. The certificate may provide, if the society's 51 laws so specify or if the member shall so elect prior to the

58 59

60 61

62

63

64

65 66

67

68 69

70

71 72

73

74

75

76 77

78 79

80

81

82

83 84

86

87

88

89

90

91

92

53 expiration of the grace period of any overdue premium, 54 that default shall not occur so long as premiums can be 55 paid under the provisions of an arrangement for auto-56 matic premium loan as may be set forth in the certificate;

- (6) a provision that one paid-up nonforfeiture benefit as specified in the certificate shall become effective automatically unless the member elects another available paid-up nonforfeiture benefit, not later than sixty days after the due date of the premium in default;
- (7) a statement of the mortality table and rate of interest used in determining all paid-up nonforfeiture benefits and cash surrender options available under the certificate, and a brief general statement of the method used in calculating such benefits;
- (8) a table showing in figures the value of every paid-up nonforfeiture benefit and cash surrender option available under the certificate for each certificate anniversary either during the first twenty certificate years or during the term of the certificate whichever is shorter;
- (9) a provision that the certificate shall be incontestable after it has been in force during the lifetime of the member for a period of two years from its date of issue except for nonpayment of premiums, violation of the provisions of the certificate relating to military, aviation, or naval service and violation of the provisions relating to suspension or expulsion as substantially set forth in the certificate. At the option of the society, supplemental provisions relating to benefits in the event of temporary or permanent disability or hospitalization and provisions which grant additional insurance specifically against death by accident or accidental means, may also be excepted. The certificate shall be incontestable on the ground of suicide after it has been in force during the lifetime of the member for a period of two years from date of issue. The certificate may provide, as to statements made to procure reinstatement, that the society shall have the right to contest a reinstated certificate within a period of two years from date of reinstatement with the same exceptions as herein provided;
- (10) a provision that in case the age of the member or of the beneficiary is considered in determining the prem-

123

124

125

126

- ium and it is found at any time before final settlement 94 under the certificate that the age has been misstated, and the discrepancy and premium involved have not been adjusted, the amount payable shall be such as the premium would have purchased at the correct age; but if the correct 98 age was not an insurable age under the society's charter 99 or laws, only the premium paid to the society, less any pay-100 ments previously made to the member, shall be returned 101 or, at the option of the society, the amount payable under 102 the certificate shall be such as the premium would have 103 purchased at the correct age according to the society's 104 promulgated rates and any extension thereof based on 105 actuarial principles;
- 106 (11) a provision or provisions which recite fully, or 107 which set forth the substance of, all sections of the charter, 108 constitution, laws, rules or regulations of the society, in 109 force at the time of issuance of the certificate, the violation 110 of which will result in the termination of, or in the re-111 duction of, the benefit or benefits payable under the cer-112 tificate;
- 113 (12) if the constitution or laws of the society provide 114 for expulsion or suspension of a member, any member so 115 expelled or suspended, except for non-payment of a prem-116 ium or within the contestable period for material mis-117 representations in such member's application for member-118 ship shall have the privilege of maintaining his insurance 119 in force by continuing payment of the required premium; 120 and
- (13) in the case of a certificate issued by a foreign or 122 alien society, a provision that the rights or obligations of the member or of any person rightfully claiming under the certificate shall be governed by the laws of this State.
- (c) Any of the foregoing provisions set forth in paragraph (b) of this section, or portions thereof, not applicable by reason of the plan of insurance or because the 128 certificate is an annuity certificate may, to the extent in-129 applicable, be omitted from the certificate.
- 130 (d) No life benefit certificate shall be delivered or 131 issued for delivery in this State containing in substance 132 any of the following provisions:

133 (1) any provision limiting the time within which any 134 action at law or in equity may be commenced to less than 135 two years after the cause of action shall accrue;

136 137

138 139

140 141

142

- (2) any provision by which the certificate shall purport to be issued or to take effect more than six months before the original application for the certificate was made, except in case of transfer from one form of certificate to another in connection with which the member is to receive credit for any reserve accumulation under the form of certificate from which the transfer is made; or
- 143 (3) any provision for forfeiture of the certificate for 144 failure to repay any loan thereon or to pay interest on 145 such loan while the total indebtedness, including interest, 146 is less than the loan value of the certificate.
- 147 (e) The word "premiums" as used in this article means 148 premiums, rates, or other required contributions by what-149 ever name known.

Sec. 24. Filing and Approval of Accident and Sickness 2 Insurance Certificates.—No domestic, foreign or alien society licensed in this State shall issue or deliver in this State any certificate or other evidence of any contract of accident and sickness insurance unless and until the form 5 6 thereof, together with the form of application and all 7 riders or endorsements for use in connection therewith, 8 shall have been filed with the commissioner and approved by him as conforming to reasonable rules and regulations 10 from time to time made by him and as not inconsistent with any other provisions of law applicable thereto. The 11 12 commissioner shall, within a reasonable time after the filing of any such form, notify the society filing the same 13 either of his approval or of his disapproval of such form. 14 The commissioner may approve any such form which in 16 his opinion contains provisions on any one or more of the 17 several requirements made by him which are more favor-18 able to the members than the one or ones so required. Pursuant to the foregoing provisions the commissioner 19 shall have power, from time to time, to make, alter and 20 21 supersede reasonable regulations prescribing the required, 22 optional and prohibited provisions in such contracts, and such regulations shall conform, as far as practicable, to

- 24 the provisions of article fifteen (accident and sickness 25 insurance) and article sixteen (group accident and sick-26 ness insurance) of this chapter. Where the commissioner 27 deems inapplicable, either in part or in their entirety, the 28 provisions of the foregoing articles, he may prescribe the portions or summary thereof of the contract to be printed
- 30 on the certificate issued to the member. Any filing made
- 31 hereunder shall be deemed approved unless disapproved
- 32 within sixty days from the date of such filing.
- Sec. 25. Waiver.—The constitution and laws of the 2 society may provide that no subordinate body, nor any of 3 its subordinate officers or members shall have the power 4 or authority to waive any of the provisions of the laws and 5 constitution of the society. Such provision shall be binding 6 on the society and every member and beneficiary of a 7 member.
- Sec. 26. Reinsurance.—A domestic society may, by an 2 authorized reinsurance agreement, cede any individual 3 risk or risks in whole or in part to an insurer (other than 4 another fraternal benefit society) having the power to 5 make such reinsurance; but no such society may reinsure 6 substantially all of its insurance in force without the 7 written permission of the commissioner.
- Sec. 27. Licensing of Foreign and Alien Societies.—(a) 2 No foreign or alien society shall transact business in this 3 State without a license issued by the commissioner. Any 4 such society may be licensed to transact business in this State upon filing with the commissioner:
- 6 (1) a duly certified copy of its charter or articles of incorporation; 7
- (2) a copy of its constitution and laws, certified by its 9 secretary or corresponding officer;
- 10 (3) a statement of its business under oath of its presi-11 dent and secretary or corresponding officers in a form prescribed by the commissioner, duly verified by an ex-12 amination made by the supervising insurance official of its 14 home state or other state, territory, province or country, satisfactory to the commissioner; 15
- (4) a certificate from the proper official of its home 16

- 17 state, territory, province or country that the society is 18 legally incorporated and licensed to transact business 19 therein;
 - (5) copies of its certificate forms; and

- 21 (6) such other information as he may deem necessary; 22 and upon a showing that its assets are invested in accord-23 ance with the provisions of this article.
- 24 (b) No license shall be issued to a foreign or alien 25 society desiring admission to this State unless such society 26 has the qualifications required of domestic societies orga-27 nized under this article.
- Sec. 28. Term of License, Renewal, Refusal to License, Revocation or Suspension, Penalty in Lieu Thereof, Resissuance.—The term of license, renewal thereof, refusal to license, revocation or suspension of license or penalty in lieu thereof, and reissuance of license of all societies shall be governed by the provisions of sections eight, nine, ten, and eleven of article three of this chapter, to the same extent that such sections are applicable to other insurers.
- Sec. 29. Fees and Taxation.—(a) Each society shall pay to the commissioner an annual license fee of twenty-five dollars and a fee of ten dollars for filing the annual statement of such society, all fees so collected to go into the fund for the purposes specified in section thirteen of article three of this chapter.
- 7 (b) Every society licensed under this article is hereby 8 declared to be a charitable and benevolent institution, and 9 all of its funds and assets shall be exempt from all state, county, district and municipal taxes except taxes on real 11 property and office equipment.
- Sec. 30. Funds.—(a) All assets shall be held, invested and disbursed for the use and benefit of the society and no member or beneficiary shall have or acquire individual rights therein or become entitled to any apportionment or the surrender of any part thereof, except as provided in the contract.
- (b) A society may create, maintain, invest, disburse and apply any special fund or funds necessary to carry out any purpose permitted by the laws of such society.

- 10 (c) Every society, the admitted assets of which are less 11 than the sum of its accrued liabilities and reserves under 12 all of its certificates when valued according to standards 13 required for certificates issued after one year from the 14 effective date of this article, shall, in every provision of 15 the laws of the society for payments by members of such 16 society, in whatever form made, distinctly state the pur-17 pose of the same and the proportion thereof which may be 18 used for expenses, and no part of the money collected for mortuary or disability purposes or the net accretions 19 20 thereto shall be used for expenses.
 - Sec. 31. Investments.—(a) A domestic society shall invest its funds only in such investments as are authorized by article eight of this chapter for the investment of the assets of domestic insurers, except that paragraph (a) of section six of article eight of this chapter shall not apply to societies.
- 7 (b) Foreign and alien societies shall have investments 8 of the same general quality as required of domestic socie9 ties, except that other investments authorized by the laws 10 of such foreign or alien society's state or country of domi11 cile may be recognized as assets in the discretion of the 12 commissioner.
- Sec. 32. Reports and Valuations.—In addition to the 2 annual statement required by section fourteen of article 3 four of this chapter, reports shall be filed and synopses 4 of annual statements shall be published in accordance 5 with the provisions of this section as follows:
- 6 (a) A synopsis of its annual statement providing an 7 explanation of the facts concerning the condition of the 8 society thereby disclosed shall be printed and mailed to 9 each benefit member of the society not later than the first day of June of each year, or, in lieu thereof, such synopsis 11 may be published in the society's official publication.
- 12 (b) As a part of the annual statement required of each society, it shall, on or before the first day of March, file 14 with the commissioner a valuation of its certificates in 15 force on December thirty-first last preceding provided, 16 the commissioner may, in his discretion for cause shown, 17 extend the time for filing such valuation for not more

18 than two calendar months. Such report of valuation shall 19 show, as reserve liabilities, the difference between the 20 present mid-year value of the promised benefits provided 21 in the certificates of such society in force and the present 22 mid-year value of the future net premiums as the same 23 are in practice actually collected, not including therein 24 any value for the right to make extra assessments and 25 not including any amount by which the present mid-year 26 value of future net premiums exceeds the present mid-27 year value of promised benefits on individual certificates. 28 At the option of any society, in lieu of the above, the 29 valuation may show the net tabular value. Such net 30 tabular value as to certificates issued prior to one year 31 after the effective date of this article shall be determined 32 in accordance with the provisions of law applicable prior 33 to the effective date of this article and as to certificates 34 issued on or after one year from the effective date of this 35 article shall not be less than the reserves determined 36 according to the Commissioners' Reserve Valuation 37 method as hereinafter defined. If the premium charged 38 is less than the tabular net premium according to the 39 basis of valuation used, an additional reserve equal to 40 the present value of the deficiency in such premiums 41 shall be set up and maintained as a liability. The reserve 42 liabilities shall be properly adjusted in the event that the 43 mid-year or tabular values are not appropriate.

(c) Reserves according to the Commissioners' Reserve Valuation method, for the life insurance and endowment benefits of certificates providing for a uniform amount of insurance and requiring the payment of uniform premiums shall be the excess, if any, of the present value, at the date of valuation, of such future guaranteed benefits provided for by such certificates, over the then present value of any future modified net premiums therefor. The modified net premiums for any such certificate shall be such uniform percentage of the respective contract pre-54 miums for such benefits that the present value, at the date of issue of the certificate, of all such modified net premiums shall be equal to the sum of the then present value of such benefits provided for by the certificate and 58 the excess of (1) over (2), as follows:

44

45

46

47

48

49

50

52

53

55

82

83

84

86

88 89

90

93

94

- 59 (1) a net level premium equal to the present value, at the date of issue, of such benefits provided for after 61 the first certificate year, divided by the present value, at the date of issue, of an annuity of one per annum 63 payable on the first and each subsequent anniversary of 64 such certificate on which a premium falls due: Provided, 65 however. That such net level annual premium shall not 66 exceed the net level annual premium on the nineteen year premium whole life plan for insurance of the same 67 68 amount at an age one year higher than the age at issue of such certificate; and 69
- 70 (2) a net one-year term premium for such benefits pro-71 vided for in the first certificate year.
- 72 (d) Reserves according to the Commissioners' Reserve 73 Valuation method for (1) life insurance benefits for vary-74 ing amounts of benefits or requiring the payment of varying premiums, (2) annuity and pure endowment benefits, 75 76 (3) disability and accidental death benefits in all cer-77 tificates and contracts, and (4) all other benefits except 78 life insurance and endowment benefits, shall be calculated by a method consistent with the principles of para-79 80 graph (c) of this section.
- (e) The present value of deferred payments due under incurred claims or matured certificates shall be deemed a liability of the society and shall be computed upon mortality and interest standards prescribed in the following 85 subsection.
- (f) Such valuation and underlying data shall be certified by a competent actuary or, at the expense of the 87 society, verified by the actuary of the department of insurance of the state of domicile of the society.
- (g) The minimum standards of valuation for certificates 91 issued prior to one year from the effective date of this article shall be those provided by the law applicable immediately prior to the effective date of this article but not lower than the standards used in the calculating of rates for such certificates.
- 96 (h) The minimum standard of valuation for certificates 97 issued after one year from the effective date of this article

- shall be three and one-half percent interest and the following tables:
- (1) for certificates of life insurance—American Men 100 101 Ultimate Table of Mortality, with Bowerman's or Davis' 102 Extension thereof or with the consent of the commissioner, the Commissioner's 1941 Standard Ordinary Mortality 103 Table or the Commissioner's 1941 Standard Industrial 104 105 Table of Mortality;

107

108

109

124

125

126

- (2) for annuity certificates, including life annuities provided or available under optional modes of settlement in such certificates—the 1937 Standard Annuity Table:
- (3) for disability benefits issued in connection with 110 life benefit certificates—Hunter's Disability Table, which, for active lives, shall be combined with a mortality table 111 112 permitted for calculating the reserves on life insurance 113 certificates, except that the table known as Class III Dis-114 ability Table (1926) modified to conform to the con-115 tractual waiting period, shall be used in computing re-116 serves for disability benefits under a contract which 117 presumes that total disability shall be considered to be 118 permanent after a specified period;
- 119 (4) for accidental death benefits issued in connection 120 with life benefit certificates—the Inter-Company Double 121 Indemnity Mortality Table combined with a mortality 122 table permitted for calculating the reserves for life insur-123 ance certificates; and
 - (5) for non-cancellable accident and sickness benefits the Class III Disability Table (1926) with conference modifications or, with the consent of the commissioner, tables based upon the society's own experience.
- 128 (i) The commissioner may, in his discretion, accept 129 other standards for valuation if he finds that the reserves 130 produced thereby will not be less in the aggregate than 131 reserves computed in accordance with the minimum valu-132 ation standard herein prescribed. The commissioner may, 133 in his discretion, vary the standards of mortality applic-134 able to all certificates of insurance on substandard lives 135 or other extra hazardous lives by any society authorized to do business in this State. Whenever the mortality 136 experience under all certificates valued on the same mortality table is in excess of the expected mortality accord-

- ing to such table for a period of three consecutive years, the commissioner may require additional reserves when deemed necessary in his judgment on account of such 141 142 certificates.
- 143 (j) Any society, with the consent of the insurance su-144 pervisory official of the state of domicile of the society and under such conditions, if any, which he may impose, 146 may establish and maintain reserves on its certificates in excess of the reserves required thereunder, but the con-147 148 tractual rights of any insured member shall not be 149 affected thereby.
 - Sec. 33. Agents.—Agents for societies shall not be re-2 required to be licensed, but every society shall employ 3 or authorize only trustworthy and competent persons as 4 their agents.
 - Sec. 34. Exemption of Certain Societies.—(a) Nothing contained in this article shall be so construed as to affect or apply to:
 - (1) grand or subordinate lodges of societies, orders or associations now doing busines in this State which provide benefits exclusively through local or subordinate 7 lodges;
 - (2) orders, societies or associations which admit to membership only persons engaged in one or more crafts 10 or hazardous occupations, in the same or similar lines of 11 business insuring only their own members, their families and descendants of members and the ladies' societies or 12 13 ladies' auxiliaries to such orders, societies or associations: (3) domestic societies which limit their membership 15 to employees of a particular city or town, designated 16 firm, business house or corporation which provide for a 17 death benefit of not more than four hundred dollars or 18 disability benefits of not more than three hundred fifty 19 dollars to any person in any one year, or both; or
 - (4) domestic societies or associations of a purely religious, charitable or benevolent description, which provide for a death benefit of not more than four hundred dollars or for disability benefits of not more than three hundred 24 fifty dollars to any one person in any one year, or both.
 - (b) Any such society or association described in sub-25

paragraphs (3) or (4) of paragraph (a) of this section which provides for death or disability benefits for which benefit certificates are issued, and any such society or association included in subparagraph (4) which has more than one thousand members, shall not be exempted from the provisions of this article but shall comply with all requirements thereof.

33

34

35

36

37

38

39

40

41

42

43

44

45

46

- (c) No society which, by the provisions of this section, is exempt from the requirements of this article, except any society described in subparagraph (2) of paragraph (a) of this section, shall give or allow, or promise to give or allow to any person any compensation for procuring new members.
- (d) Every society which provides for benefits in case of death or disability resulting solely from accident, and which does not obligate itself to pay natural death or sick benefits shall have all of the privileges and be subject to all the applicable provisions and regulations of this article except that the provisions thereof relating to medical examination, valuations of benefit certificates, and incontestability, shall not apply to such society.
- 47 (e) The commissioner may require from any society or 48 association, by examination or otherwise, such informa-49 tion as will enable him to determine whether such society 50 or association is exempt from the provisions of this ar-51 ticle.
- 52 (f) Societies, exempted under the provisions of this 53 section, shall also be exempt from all other provisions of 54 this chapter.

Article 24. Hospital Service Corporations and Medical Service Corporations

Section 1. Declaration of Policy.—In view of the desirability of making available to the people of this State increased hospital, medical services and other health services, the declared policy of the legislature in the enactment of this article is to encourage the organization, promotion and expansion of hospital service corporations and medical service corporations by exempting them from the payment of all taxes and from the operation of the general insurance laws of this State, but at the same time

- subjecting them to such regulation as may be necessary
- for the adequate protection of those members of the pub-
- 12 lic who subscribe for the services offered by such cor-
- 13 porations.

11

31

33

- Sec. 2. Definitions.—For the purposes of this article:
- (a) "Corporation" shall mean either a hospital service corporation or a medical service corporation.
- (b) "Hospital service corporation" shall mean a nonprofit, nonstock corporation, organized in accordance with the provisions of article one of chapter thirty-one of this Code for the sole purpose of contracting with the public and with hospitals and other health agencies for hospital 9 or other health services to be furnished to subscribers 10 under terms of their contract with the corporation.
- (c) "Hospital service" shall mean only such hospital 12 or other health care, to be provided by hospitals or other 13 health agencies, or such payment therefor, as may be 14 specified in the contract made by the subscriber with the 15 corporation.
- 16 (d) "Medical service corporation" shall mean a non-17 profit, nonstock corporation, organized in accordance with 18 the provisions of article one of chapter thirty-one of this Code for the sole purpose of contracting with the public and with duly licensed physicians for medical or surgical 21 services and with other health agencies for other health 22 services to be furnished to subscribers under terms of 23 their contracts with the corporation, and controlled by a 24 board of directors, the majority of whom are duly licensed 25 physicians.
- 26 (e) "Medical service" shall mean only such medical, 27 surgical or other health care, to be provided by duly licensed physicians or other health agencies, or such payment therefor, as may be specified in the contract made by the subscriber with the corporation. 30
- (f) "Service" shall mean such hospital, medical or other 32 health service as shall be provided under the terms of the contracts issued by the corporation to subscribers.
- (g) "Commissioner" shall mean the insurance commis-34 35 sioner of West Virginia.

Sec. 3. Corporations Affected; Eligibility of Hospitals

and Physicians.—(a) Every such corporation operating
 within this State shall be subject to the provisions of this
 article.

- 5 (b) Every hospital or other health agency in this State 6 meeting the standards prescribed by the board of directors of each such corporation shall be eligible for participation in any hospital service plan operating in this State. Every duly licensed physician or other health agency in this 10 State meeting the standards prescribed by the board of directors of each such corporation shall be eligible for 11 participation in any medical service plan operating in this 12 13 State. The board of directors of every such corporation 14 may also prescribe standards for hospitals, physicians and 15 other health agencies located in states adjoining this 16 State, and all such hospitals, physicians and other health 17 agencies meeting such standards shall be eligible for par-18 ticipation in such plans.
- Sec. 4. Exemptions; Other Laws Applicable.—Every such corporation is hereby declared to be a scientific, nonprofit institution, and as such exempt from the payment of all property and other taxes. Every such corporation, to the same extent such provisions are applicable to insurers transacting similar kinds of insurance and not inconsistent with the provisions of this article, shall be 8 governed by and be subject to the provisions of the fol-9 lowing articles of this chapter: article two (insurance 10 commissioner) except that under section nine of article 11 two examinations shall be conducted at least once every 12 four years, article four (general provisions) except that 13 section sixteen of article four shall not be applicable 14 thereto, article ten (rehabilitation and liquidation), ar-15 ticle eleven (unfair practices and frauds), and article twelve (agents, brokers and solicitors) except that the 16 17 agent's license fee shall be one dollar; and no other provision of this chapter shall apply to such corporations 18 19 unless specifically made applicable by the provisions of 20 this article. If, however, any such corporation shall be converted into a corporation organized for a pecuniary 22 profit, or if it shall transact business without having obtained a license as required by section five of this article, 24 it shall thereupon forfeit its right to these exemptions.

- Sec. 5. Licenses.—(a) No such corporation shall enter 2 into any contract with a subscriber until it has obtained 3 from the commissioner a license as provided in this section. Application for a license shall be made on forms 5 to be prescribed and furnished by the commissioner.
- 6 (b) Such application shall be accompanied by a copy
 7 of the following documents: (1) Certificate of incorpora8 tion; (2) By-laws; (3) Contracts between the corporation
 9 and participating hospitals, physicians or other health
 10 agencies; (4) Proposed contracts to be issued to sub11 scribers, setting forth the hospital or medical service to
 12 which subscribers are entitled, and the table of rates
 13 to be charged for such service; and (5) Financial state14 ment, showing the amount of contributions paid, or agreed
 15 to be paid, to the corporation for working capital, the
 16 name or names of each contributor, and the terms of each
 17 contribution.
- 18 (c) Within thirty days after receipt of an application, the commissioner shall, upon payment to him of a license 19 fee of one hundred dollars, issue a license authorizing the 20 21 corporation to transact business in this State in the area 22 to be served by it, if he is satisfied (1) that the applicant is incorporated in this State under the provisions of 24 article one of chapter thirty-one of this Code as a bona fide nonprofit corporation. (2) that the contracts between 25 the corporation and participating hospitals, physicians 26 and other health agencies contain all the terms required 27 by section seven of this article, (3) that the working capital available to the corporation will be sufficient to pay all operating expenses, other than payment for hos-31 pital or medical services, for a reasonable period after the issuance of the license, and (4) that the proposed plan 32 will serve the best interests of all of the people of the 34 area in which the corporation intends to operate, regard-35 less of their race, color or economic status. Any license so issued may be renewed annually upon payment to the 36 37 commissioner of a renewal fee of one hundred dollars.
- (d) The term of such license, renewal, refusal to license,
 revocation, suspension, or penalty in lieu thereof, shall
 be governed by the provisions of sections eight, nine, ten

- and eleven, of article three of this chapter, in the same manner that such sections are applicable to insurers generally.
- 44 (e) No such corporation shall include in its name the
 45 words "insurance", "casualty", "surety", "health and acci46 dent", "accident and sickness", "mutual", or any other
 47 words descriptive of the insurance business; nor shall
 48 such name be so similar to that of any insurer which was
 49 licensed to transact insurance in this State when such
 50 corporation was formed, as to tend, in the opinion of the
 51 commissioner, to confuse the public.
 - Sec. 6. Supervision by Commissioner; Approval of Con-2 tracts, Forms, Rates and Fees.—(a) It shall be the duty 3 of the commissioner to enforce the provisions of this 4 article.
- 5 (b) No such corporation shall deliver or issue for de-6 livery any subscriber's contract, changes in the terms of such contract, application, rider, or endorsement, until a copy thereof and the rates pertaining thereto have been 9 filed with and approved by the commissioner. All such 10 forms filed with the commissioner shall be deemed ap-11 proved after the expiration of thirty days from the date 12 of such filing unless the commisioner shall have disapproved the same, stating his reasons for such disapproval in writing, except that such period may be extended for 15 an additional period not to exceed fifteen days upon writ-16 ten notice thereof from the commissioner to the applicant. 17 Such forms may be used prior to the expiration of such 18 periods if written approval thereof has been received from 19 the commissioner.
- 20 (c) No rates to be charged subscribers shall be used or established by any such corporation unless and until the 22 same have been filed with the commissioner and approved 23 by him. The procedure for such filing and approval shall 24 be the same as that prescribed in paragraph (b) of this 25 section for the approval of forms. The commissioner shall 26 approve all such rates which are not excessive, inadequate 27 or unfairly discriminatory.
 - (d) The commissioner shall pass upon the actuarial

- 29 soundness of the schedule of fees to be paid hospitals, 30 physicians and other health agencies.
 - Sec. 7. Required Provisions in Contracts Made by the 2 Corporations with Hospitals, Physicians and Other Health 3 Agencies.—Each contract made by the corporation with 4 participating hospitals, physicians and other health 5 agencies shall contain the following provisions:
 - (a) That the hospital, physician or other health agency will render to any subscriber such service as he may be entitled to under the terms and conditions of the contract issued to the subscriber by the corporation.
- 10 (b) That in submitting bills to the corporation for 11 services rendered to subscribers under the terms of their 12 contract, the hospitals, physicians and other health 13 agencies will make only such charges as are set forth in 14 an agreed schedule of fees to be paid by the corporation.
- 15 (c) That, in case of a deficit in available funds of the 16 corporation, each participating hospital, physician or other 17 health agency will, on the basis stated in this section, 18 accept a pro rata share of available funds in full settle-19 ment of any bill submitted.
- (d) That, in the event a surplus remains after an annual accounting of the financial condition of the corporation, such surplus may be used by the corporation, upon an affirmative vote of a majority of its board of directors, for the following purposes, in the order of priority stated below:
- 26 (1) To liquidate on a pro rata basis any losses incurred 27 by hospitals, physicians or other health agency upon the 28 settlement of bills in previous years.
- 29 (2) To return the original contributions for working 30 capital, or any part thereof, on a pro rata basis.
- 31 (3) To reduce rates charged subscribers, or to expand 32 the services rendered them.
 - Sec. 8. Contract or Certificate to be Furnished to Policyholders and Subscribers; Contracts with Needy Persons.—(a) Every such corporation shall deliver to each contract holder a copy of the contract and to each holder of a master group contract for delivery to each sub-

4

5

7

8

13

17

18

scriber to such group contract a certificate setting forth the essential terms of the contract to be performed.

- (b) A corporation may accept from governmental 9 agencies payment of all or part of the cost of subscriptions for hospital, medical or other health care rendered 10 11 needy persons, and may accept from private agencies, corporations, associations, groups or individuals, similar payment for such service to be rendered needy or other **13** 14 persons.
- Sec. 9. Payroll Deduction of Governmental Employees. 2 —The officer charged with the duty of preparing the payroll of any subscriber, who is an employee of the state 4 government or of any of its political subdivisions, includ-5 ing state operated educational institutions, may upon 6 request of the subscriber deduct from his payroll the amount of the fee owed by the subscriber to any hospital service corporation or medical service corporation, provided enrollment regulations of the particular corporation are satisfied, in which case the officer shall pay over 10 11 such amount to the corporation.
- Sec. 10. Investments: Bonds of Corporate Officers and Employees.--(a) The funds of any such corporation shall 2 3 be invested only as follows:
- (1) Fifty percent of such funds shall be in cash or government securities of the type described in section seven 6 of article eight of this chapter.
- (2) The balance of such funds may be in cash or invested in the classes of investments described in the fol-9 lowing sections of article eight of this chapter: section eleven (corporate obligations), section twelve (building 10 and savings and loan shares, international bank), section 11 12 thirteen (preferred or guaranteed stock), section fourteen (common stock), section sixteen (real property) and 14 section eighteen (revenue bonds). All such investments shall be subject to all the restrictions and conditions con-15 16 tained in said article eight as applying to similar investments of insurers generally.
- (b) Every officer or employee of any such corporation, 19 who is entrusted with the handling of its funds, shall 20 furnish, in such amount as may with the approval of the

21 commissioner be fixed by the board of directors of the

corporation, a bond with corporate surety, conditioned upon the faithful performance of all his duties.

Sec. 11. Reciprocity with Other Service Plans Defined:

2 Payment Authorized.—Hospital and medical service cor-

3 porations licensed and operating under provisions of this

4 article are hereby authorized to promote and encourage

5 reciprocity with other licensed hospital and medical

6 plans, both within and without this State, in expanding

7 their services to subscribers. In the event that a sub-

8 scriber to a plan requires emergency hospital or medical

9 service, or, in the event that the particular services that

10 he receives are not available through the plan to which

11 he subscribes, such plan is hereby authorized to make

12 payment on behalf of such subscriber for such service

13 on a basis not to exceed its schedule of fees to be paid

14 hospitals or physicians, previously approved by the com-

15 missioner and on file in his office.

The Joint Committee on Enrolled Bills hereby certifies that the foregoing bill is correctly enrolled.

Chairman Senate Committee Chairman House Committee Originated in the House of Delegates Takes effect President of the Senate Speaker, House of Delegates The within approved this the 15th day of Mauh (1, 1957) Governor

pf West Virginia

D. PITT O'BRIEN
SECRETARY OF STATE