FILED

2005 APR 29 P 4:33

OFFICE WEST VIRGINIA SECRETARY OF STATE

WEST VIRGINIA LEGISLATURE

Regular Session, 2005



(By Senator ______ Minard____)

PASSED _____ April 9, 2005

In Effect_90 days from Passage

2005 APR 29 P 4:33

GETTICE WEST VIRGINIA SECRETARY OF STATE

ENROLLED

COMMITTEE SUBSTITUTE

FOR

Senate Bill No. 30

(SENATOR MINARD, original sponsor)

[Passed April 9, 2005; in effect ninety days from passage.]

AN ACT to amend and reenact §33-2-20 of the Code of West Virginia, 1931, as amended; to amend said code by adding thereto a new section, designated §33-2-21; to amend and reenact §33-6-8 of said code; to amend said code by adding thereto a new section, designated §33-6-15a; to amend and reenact §33-16-2 of said code; to amend and reenact §33-16B-1 and §33-16B-3 of said code; to amend and reenact §33-17-8 and §33-17-9 of said code; to amend said code by adding thereto three new sections, designated §33-17A-4a, §33-17A-4b and §33-17A-4c; and to amend and reenact §33-20-4 of said code, all relating to insurance law reforms and modifications generally; allowing the Commissioner to permit automobile insurers to withdraw from doing business in this state; requiring insurer to submit a plan; permitting promulgation of rules; redesignating a section of the insurance code enacted as part of the bill assigning workers' compensation duties to the Insurance Commissioner; clarifying that certain

rules remain in effect; exempting commercial insurance lines from the requirement of prior approval of rates and forms; establishing requirements for prior approval; providing for suspension of review period when additional information is requested; providing definitions; clarifying that certain health insurance forms marketed to associations must be filed with the Commissioner; providing that commercial and certain health insurance forms marketed to associations are effective upon first use after filing; providing certain requirements for association policies; providing for a notation of savings on policies; clarifying that prior rate approval applies to health insurance certificates and endorsements; providing for filing of fire and marine insurance rider or endorsement review; adding a ground for nonrenewal of property insurance policies; providing an alternative method for nonrenewal of property insurance; providing a manner of electing an alternative method; requiring report to the Legislature; and making certain technical changes.

Be it enacted by the Legislature of West Virginia:

That §33-2-20 of the Code of West Virginia, 1931, as amended, be amended and reenacted; that said code be amended by adding thereto a new section, designated §33-2-21; that §33-6-8 of said code be amended and reenacted; that said code be amended by adding thereto a new section, designated §33-6-15a; that §33-16-2 of said code be amended and reenacted; that §33-16B-1 and §33-16B-3 of said code be amended and reenacted; that §33-17-8 and §33-17-9 of said code be amended and reenacted; that said code be amended by adding thereto three new sections, designated §33-17A-4a, §33-17A-4b and §33-17A-4c; and that §33-20-4 of said code be amended and reenacted, all to read as follows:

ARTICLE 2. INSURANCE COMMISSIONER.

§33-2-20. Authority of Commissioner to allow withdrawal of insurance carriers from doing business in the state.

1 (a) Notwithstanding any provision of the code to the 2 contrary, the Commissioner may, consistent with the 3 provisions of this section, authorize an insurer to with-4 draw from the line of automobile liability insurance for 5 personal, private passenger automobiles covered by article 6 six-a of this chapter or from doing business entirely in this 7 state if:

8 (1) The insurer has submitted and received approval9 from the Commissioner of a withdrawal plan; and

(2) The insurer demonstrates to the satisfaction of the
Commissioner that allowing the insurer to withdraw
would be in the best interest of the insurer, its policyholders and the citizens of this state.

(b) Any insurer that elects to nonrenew or cancel the
particular type or line of insurance coverage provided by
section five, article seventeen-a of this chapter shall
submit to the Insurance Commissioner a withdrawal plan
for informational purposes only prior to cancellation or
nonrenewal of all its business in this state.

20(c) The Commissioner shall promulgate rules pursuant to chapter twenty-nine-a of this code setting forth the 21 criteria for withdrawal plans: Provided, That the proce-2223dural rules previously promulgated setting forth the 24 criteria for withdrawal plans, which rules were made 25effective the twenty-fifth day of September, two thousand four, shall continue in effect in the same manner as if this 2627 section had not been amended during the first extraordinary session of the Legislature in two thousand five. 28

§33-2-21. Authority of Insurance Commissioner to regulate worker's compensation industry; authority of Insurance Commissioner to administer chapter twenty-three of the Code of West Virginia.

- 1 (a) Upon the termination of the Workers' Compensation
- 2 Commission pursuant to chapter twenty-three of this code,
- 3 the powers and duties heretofore imposed upon the Work-

4 ers' Compensation Commission as they relate to general
5 administration of the provisions of said chapter are hereby
6 transferred to and imposed upon the Insurance Commis7 sioner.

(b) Unless otherwise specified in chapter twenty-three of 8 this code, upon termination of the Workers' Compensation 9 Commission, the duties imposed upon the Workers' 10 Compensation Commission as they relate to the award and 11 12payment of disability and death benefits and the review of claims in articles four and five, chapter twenty-three of 13 14 this code will be imposed upon the Employers Mutual Insurance Company established pursuant to article two-c 15 of said chapter, a private carrier offering workers' com-16 17 pensation insurance in this state and self-insured employ-18 ers. Whenever reference is made to the Workers' Compen-19 sation Commissioner in those articles, the duty prescribed 20shall apply to the Employers Mutual Insurance Company, 21a private carrier or self-insured employer, as applicable.

(c) From the effective date of this enactment, the Insurance Commissioner shall regulate all insurers licensed to
transact workers' compensation insurance in this state and
all of the provisions of this chapter shall apply to such
insurers, unless otherwise exempted by statute.

ARTICLE 6. THE INSURANCE POLICY.

§33-6-8. Filing of forms.

(a) No insurance policy form, no group certificate form, 1 2 no insurance application form where a written application is required and is to be made a part of the policy and no 3 4 rider, endorsement or other form to be attached to any policy shall be delivered or issued for delivery in this state 5 6 by an insurer unless it has been filed with the Commis-7 sioner and, to the extent required by subdivision (1), subsection (b) of this section, approved by the Commis-8 9 sioner, except that as to group insurance policies delivered outside this state, only the group certificates to be deliv-10 ered or issued for delivery in this state shall be filed for 11

approval with the Commissioner. This section does not 12apply to policies, riders, endorsements or forms of unique 13 character designed for and used with relation to insurance 14 upon a particular subject, or which relate to the manner of 15 distribution of benefits or to the reservation of rights and 16 benefits under life or accident and sickness insurance 17 18 policies, and are used at the request of the individual 19 policyholder, contract holder or certificate holder, nor to the surety bond forms. 20

21(b)(1) Forms for non-commercial lines shall be filed by 22an insurer no less than sixty days in advance of any 23 delivery. At the expiration of the sixty-day period, unless 24 the period was extended by the commissioner to obtain 25additional information from the insurer, the form is 26deemed to be approved unless prior thereto it was affirma-27 tively approved or disapproved by the Commissioner. Approval of any form by the Commissioner constitutes a 28 29 waiver of any unexpired portion of the sixty-day period.

30 (2) Forms for: (A) Commercial lines property and casu-31 alty risks; and (B) any mass marketed life and/or health 32 insurance policy offered to members of any association by 33 the association, shall be filed with the Commissioner and 34 need not be approved by the Commissioner prior to use. 35 The Commissioner may, within the first thirty days after 36 receipt of the form, request information to ensure compliance with applicable statutory provisions and may disap-37 prove forms not in compliance with the provisions of this 38 39 chapter. If the Commissioner does not disapprove the 40 form within the thirty-day period, the form is effective 41 upon its first use after filing.

42 (c) When an insurer does not submit supporting informa43 tion with the form filing that allows the Commissioner to
44 determine whether the form meets all applicable statutory
45 requirements, the Commissioner shall require the insurer
46 to furnish supporting information. The sixty-day period
47 for personal lines risks shall be suspended on the date the
48 Commissioner requests additional information and shall

recommence on the date the Commissioner receives the 49 supporting information: *Provided*. That the Commissioner 50 shall have no less than fifteen days from receipt of the 51 supporting information to act. The Commissioner may 52request additional information after the initial sixty-day 53 period with respect to noncommercial lines, or thirty-day 54 period with respect to commercial lines and mass-mar-55 keted life and/or health insurance to associations, to 56 ensure continuing compliance with applicable statutory 57 provisions and may at any time, after notice and for cause 58 shown, withdraw any approval or disapprove any form: 59 Provided, however, That any disapproval by the Commis-60 sioner of any form or withdrawal of a previous approval 61 shall state the grounds therefor and shall include a notice 62 that the insurer may request a hearing on the denial or 63 withdrawal of approval. 64

(d) The Commissioner may, by order, exempt from the requirements of this section for so long as he or she considers proper any insurance document or form or type specified in the order, to which, in his or her opinion, this section may not practicably be applied, or the filing and approval of which are, in his or her opinion, not desirable or necessary for the protection of the public.

72 (e) For purposes of this section:

73 (1) An association must have a minimum of sixty-one 74 members at the outset of the issuance of the mass-mar-75 keted life and/or health insurance policy and shall have 76 been organized and maintained in good faith for purposes 77 other than that of obtaining or providing insurance. The 78 association shall also have been in active existence for at 79 least two years and shall have a constitution and bylaws 80 which provide that: (A) The association holds annual 81 meetings to further purposes of its members; (B) except in 82 the case of credit unions, the association collects dues or 83 solicits contributions from members; and (C) the members 84 have voting privileges and representation on the governing 85 board and committees that exist under the authority of the association: *Provided*, That upon written application by
an association and for good cause shown, the Commissioner may grant an exemption to the association from the
minimum member requirements of this section.

90 (2) "Commercial lines" means insurance for business and
91 professional interests, except that it does not include
92 medical malpractice insurance.

93 (3) "Noncommercial lines" means all insurance other94 than commercial lines and includes medical malpractice95 and insurance for personal, family and household needs.

96 (f) This section also applies to any form used by domestic 97 insurers for delivery in a jurisdiction outside West Virginia 98 if the insurance supervisory official of the jurisdiction 99 informs the Commissioner that the form is not subject to 100 approval or disapproval by the official and upon the Commissioner's order requiring the form to be submitted 101 102to him or her for that purpose. The same standards applicable to forms for domestic use apply to forms used 103 104 by domestic insurers for delivery in a jurisdiction outside 105 West Virginia.

§33-6-15a. Notation of consumer cost savings.

Each policy issued following enactment of this provision during the two thousand five regular session, during the year following the effective date, shall display in a prominent location on the policy itself or on an insert included with each policy and provided to each policyholder, statements as following:

7 (1) "YOUR COSTS FOR THIS POLICY (HAVE/HAVE
8 NOT) BEEN REDUCED BY (insert savings amount here)
9 BECAUSE OF INSURANCE LAW REFORMS ENACTED
10 BY THE WEST VIRGINIA LEGISLATURE IN 2005, AND
11 SIGNED INTO LAW BY THE GOVERNOR."

12 If the insurer did not offer the type of insurance pro-vided by the policy in two thousand four, the requirement14 for these statements do not apply.

ARTICLE 16. GROUP ACCIDENT AND SICKNESS.

§33-16-2. Eligible groups.

1 Any insurer licensed to transact accident and sickness 2 insurance in this state may issue group accident and 3 sickness policies coming within any of the following 4 classifications:

5 (1) A policy issued to an employer, who shall be consid-6 ered the policyholder, insuring at least ten employees of 7 the employer, for the benefit of persons other than the 8 employer, and conforming to the following requirements:

9 (A) If the premium is paid by the employer the group 10 shall comprise all employees or all of any class or classes 11 thereof determined by conditions pertaining to the em-12 ployment; or

(B) If the premium is paid by the employer and employees jointly, or by the employees, the group shall comprise
not less than seventy percent of all employees of the
employer or not less than seventy-five percent of all
employees of any class or classes determined by conditions
pertaining to the employment;

19 (C) The term "employee" as used herein is considered to include the officers, managers and employees of the 2021employer, the partners, if the employer is a partnership, 22the officers, managers and employees of subsidiary or 23affiliated corporations of a corporate employer, and the $\mathbf{24}$ individual proprietors, partners and employees of individ-25uals and firms, the business of which is controlled by the 26insured employer through stock ownership, contract or 27otherwise. The term "employer" as used herein may 28 include any municipal or governmental corporation, unit, 29 agency or department and the proper officers of any 30 unincorporated municipality or department, as well as 31 private individuals, partnerships and corporations.

(2) A policy issued to an association or to a trust or to thetrustees of a fund established, created or maintained for

the benefit of members of one or more associations. The 34 35 association or associations shall have at the issuance of the 36 policy a minimum of one hundred persons and have been 37 organized and maintained in good faith for purposes other than that of obtaining insurance: shall have been in active 38 39 existence for at least one year; and shall have a constitution and bylaws that provide that: The association or 40 associations hold regular meetings not less than annually 41 to further the purposes of the members; except for credit 42 unions, the association or associations collect dues or 43 solicit contributions from members; and the members have 44 voting privileges and representation on the governing 45 board and committees. The policy is subject to the follow-46 47 ing requirements:

(A) The policy may insure members of the association or
associations, employees thereof or employees of members,
or one or more of the preceding or all of any class or
classes for the benefit of persons other than the employee's
employer.

53 (B) The premium for the policy shall be paid from:

54 (i) Funds contributed by the association or associations;

55 (ii) Funds contributed by covered employer members;

56 (iii) Funds contributed by both covered employer57 members and the association or associations;

58 (iv) Funds contributed by the covered persons; or

(v) Funds contributed by both the covered persons andthe association, associations or employer members.

61 (C) Except as provided in paragraph (D) of this
62 subdivision, a policy on which no part of the premium is to
63 be derived from funds contributed by the covered persons
64 specifically for their insurance must insure all eligible
65 persons, except those who reject coverage in writing.

(D) An insurer may exclude or limit the coverage on any
person as to whom evidence of individual insurability is
not satisfactory to the insurer.

(E) A small employer, as defined in subdivision (r),
section two, article sixteen-d of this chapter, insured under
an eligible group policy provided in this subdivision shall
also be subject to the marketing and rate practices provisions in said article.

74 (3) A policy issued to a bona fide association;

(4) A policy issued to a college, school or other institution of learning or to the head or principal thereof, insuring at least ten students, or students and employees, of the
institution;

(5) A policy issued to or in the name of any volunteer fire
department, insuring all of the members of the department
or all of any class or classes thereof against any one or
more of the hazards to which they are exposed by reason
of the membership but in each case not less than ten
members;

(6) A policy issued to any person or organization to
which a policy of group life insurance may be issued or
delivered in this state, to insure any class or classes of
individuals that could be insured under the group life
policy; and

90 (7) A policy issued to cover any other substantially
91 similar group which in the discretion of the Commissioner
92 may be subject to the issuance of a group accident and
93 sickness policy or contract.

ARTICLE 16B. ACCIDENT AND SICKNESS RATES.

§33-16B-1. Filing and approval of accident and sickness rates.

- 1 Premium rate charges for any individual or group
- 2 accident and sickness insurance policy, certificate or other
- 3 evidence of insurance issued, endorsed or delivered in this

4 state shall be filed with the Commissioner for a waiting
5 period of sixty days before the charges become effective.
6 At the expiration of sixty days the premium rate charges
7 filed are deemed approved unless prior thereto the
8 charges have been affirmatively approved or disapproved
9 by the Commissioner.

10 The Commissioner shall disapprove accident and health insurance premium rates which are not in compliance with 11 the requirements of this chapter or any rule promulgated 12by the Commissioner pursuant to section two of this 13 14 article. The Commissioner shall send written notice of the disapproval to the insurer. The Commissioner may 15 approve the premium rates before the sixty-day period 16 expires by giving written notice of approval. 17

§33-16B-3. Exceptions.

- 1 This article does not apply to policies issued to group
- $2 \quad {\rm accident} \, {\rm and} \, {\rm health} \, {\rm insurance} \, {\rm plans} \, {\rm upon} \, {\rm which} \, {\rm premiums}$
- 3 are negotiated with the group policyholder and are
- 4 experienced rated.

ARTICLE 17. FIRE AND MARINE INSURANCE.

§33-17-8. Filing of forms.

(a) No fire or marine policy, rider or endorsement to be 1 2 attached to any policy covering any risk located or to be performed in West Virginia shall be delivered or issued for 3 delivery in this state unless that form is: (1) Filed with and 4 approved by the Commissioner; (2) conforms to applicable 5 6 legislative rules of the Commissioner; (3) is identical as to language to a policy, rider or endorsement approved by the 7 8 Commissioner; or (4) qualifies under subsection (c) of this section. If the use of any form under the provisions of 9 10 subdivision (2) of this subsection by any insurer or by the members and subscribers of any rating organization is so 11 extensive that in the opinion of the Commissioner the 1213public interest requires, the Commissioner may require 14 that the form be filed with him or her by the insurer or by

15 the rating organization on behalf of its members and16 subscribers.

(b) The procedure for filing and approval or disapproval 17 of forms under this section is provided in section eight, 18 19 article six of this chapter. Grounds for disapproval are those set forth in section nine of said article. Filings 2021may be made on behalf of any insurer by a rating organization licensed under the provisions of article twenty of 22this chapter. This section does not apply to ocean marine 23policies, riders or endorsements, or to forms on specially 24 rated inland marine risks. 25

(c) For commercial lines risks, a fire or marine policy,
rider or endorsement is subject to the provisions of section
six, article eight of this chapter governing other commercial lines form filings as defined in section eight, article six
of this chapter.

§33-17-9. Total or partial fire loss.

1 (a) All insurers providing fire insurance on real property 2 in West Virginia shall be liable, in case of total loss by fire 3 or otherwise, as stated in the policy, for the whole amount of insurance stated in the policy, upon such real property; 4 and in case of partial loss by fire or otherwise, as afore-5 said, of the real property insured, the liability shall be for 6 the total amount of the partial loss, not to exceed the 7 8 whole amount of insurance upon the real property as 9 stated in the policy. This section does not apply where 10 such insurance has been procured from two or more insurers covering the same interest in such real property. 11

ARTICLE 17A. PROPERTY INSURANCE DECLINATION, TERMINATION AND DISCLOSURE.

§33-17A-4a. Alternative method for nonrenewal for property insurance.

- 1 (a) On or after the first day of July, two thousand five, an
- 2 insurer may nonrenew a property insurance policy for any
- 3 reason that is consistent with its underwriting standards.

(b) Notwithstanding any other provisions in this section,
race, religion, nationality, ethnic group, age, sex, marital
status or other reason prohibited by the provisions of this
chapter may not be considered as a reason for nonrenewal.

8 (c) Notwithstanding the provisions of subsection (c), 9 section four of this article, a nonrenewal may only be 10 issued pursuant to the provisions of this section upon 11 notice to the named insured at least thirty days before the 12 end of the policy period of the insurer's election not to 13 renew the policy.

(d) Commencing the first day of July, two thousand five, 14 the total number of nonrenewal notices issued by the 15 insurer each year pursuant to this section that result in 16 nonrenewals may not exceed one percent per year of the 17 total number of the policies of the insurer in force at the 18 end of the previous calendar year in this state: *Provided*, 19 That the total number of such nonrenewal notices issued 2021each year to insureds within any given county in this state 22that result in nonrenewals may not exceed one percent per vear of the total number of policies in force in that county 23at the end of the previous calendar year: 24 Provided, however. That an insurer may nonrenew one policy per 2526year in any county if the applicable percentage limitation results in less than one policy. 27

28(e) A notice issued pursuant to this section shall state the specific reason or reasons for refusal to renew and shall 29 30 advise the named insured that nonrenewal of the policy for 31any reason is subject to a hearing and review as provided 32in section seven of this article: *Provided*, That the hearing 33 shall relate to whether the nonrenewal of the policy was issued for a discriminatory reason, was based upon 34 inadequate notice, was based on an underwriting standard 35 found by the Commissioner to be in violation of this 36 chapter or causes the insurer to exceed the percentage 37 limitations, or percentage limitations by county, of 38 nonrenewal notices set forth in this section. The notice 39 40 shall also advise the insured of possible eligibility for

41 coverage through the West Virginia Essential Property42 Insurance Association.

43 (f) Each insurer licensed to write property insurance policies in this state shall file with the Commissioner a 44 copy of its underwriting standards, including any amend-45 ments or supplements. The Commissioner shall review and 46 examine the underwriting standards to ensure that they 47 are consistent with generally accepted underwriting 48 principles. The underwriting standards filed with the 49 Commissioner shall be considered confidential by law and 50 privileged, are exempt from disclosure pursuant to chapter 51 twenty-nine-b of this code, are not open to public inspec-52tion, are not subject to subpoena, are not subject to 53discovery or admissible in evidence in any criminal, civil 54 55 or administrative action and are not subject to production pursuant to court order. The Commissioner may promul-56 57 gate legislative rules pursuant to chapter twenty-nine-a of this code to implement the provisions of this section. 58

(g) Each insurer that has elected to issue nonrenewal notices pursuant to the percentage limitations provided in this section shall report to the Commissioner, on or before the thirtieth day of September of each year, the total number of nonrenewal notices issued in this state and in each county of this state for the preceding year and the specific reason or reasons for the nonrenewals by county.

§33-17A-4b. Manner of making election relating to nonrenewals.

1 (a) Each insurer licensed to write property insurance 2 policies in this state as of the first day of July, two thou-3 sand five, may elect to issue all nonrenewal notices either 4 pursuant to subsection (c), section four of this article or section four-a of this article. Each insurer must notify the 5 Commissioner of its election on or before the first day of 6 July, two thousand five, and shall remain bound by the 7 8 election for a period of five years. For each subsequent five-year period, each insurer shall notify the Commis-9 sioner of its election to issue all nonrenewal notices either 10

pursuant to subsection (c), section four of this article or 11 12 section four-a of this article. The failure of an insurer to 13 notify the Commissioner of its election by the first day of 14 July, two thousand five, will be considered to be an election by the insurer to issue all nonrenewal notices 15 16 pursuant to subsection (c), section four of this article and 17 the insurer will be bound by the election for a period of 18 five years.

19 (b) An insurer that is not licensed to write property 20insurance policies in this state as of the first day of July, two thousand five, but which becomes licensed to write 21 22property insurance policies after that date shall, no later 23than four years after the date the insurer becomes licensed to write the policies, make an election to issue all 24 nonrenewal notices either pursuant to subsection (c), 25section four of this article or section four-a of this article 2627and shall notify the Commissioner of its election. If the 28 insurer elects to issue all nonrenewal notices pursuant to section four-a of this article, the total number of 29 30 nonrenewals may not exceed the percentage limitations set 31 forth in that section. An insurer first becoming licensed to 32 issue property insurance policies in this state after the first 33 day of July, two thousand five, shall be bound by its election for a period of five years and for each subsequent 34 35 five-year period shall notify the Commissioner of its election to issue all nonrenewal notices either pursuant to 36 37 subsection (c), section four of this article or section four-a of this article. 38

(c) An insurer that elects to issue nonrenewals pursuant
to subsection (c), section four of this article may include as
a permitted reason for nonrenewal of a policy, in addition
to the reasons enumerated in section five of this article,
two or more paid claims under a policy within a period of
thirty-six months, each of which occurs after the first day
of July, two thousand five.

§33-17A-4c. Report to the Legislature.

1 By the first day of January, two thousand ten, the 2 Commissioner shall submit a report to the Legislature. 3 The report shall contain the following:

4 (1) An analysis of the impact of legislation enacted
5 during the two thousand five legislative session upon rates
6 and insurance availability in the state; and

7 (2) Statistics reflecting the rate history of insurers
8 conducting business in West Virginia from the first day of
9 July, two thousand five, until the first day of July, two
10 thousand nine.

ARTICLE 20. RATES AND RATING ORGANIZATIONS.

§33-20-4. Rate filings.

(a) (1) Every insurer shall file with the Commissioner
 every manual of classifications, territorial rate areas
 established pursuant to subdivision (2), subsection (c),
 section three of this article, rules and rates, every rating
 plan and every modification of any of the foregoing which
 it proposes to use for casualty insurance to which this
 article applies.

8 (2) Every insurer shall file with the Commissioner, 9 except as to inland marine risks which by general custom 10 of the business are not written according to manual rates or rating plans, every manual, minimum, class rate, rating 11 12schedule or rating plan and every other rating rule and every modification of any of the foregoing which it 13 14 proposes to use for fire and marine insurance to which this 15article applies. Specific inland marine rates on risks 16specially rated, made by a rating organization, shall be 17 filed with the Commissioner.

(b) Every filing shall state the proposed effective date
and shall indicate the character and extent of the coverage
contemplated. When a filing is not accompanied by the
information upon which the insurer supports the filing and
the Commissioner does not have sufficient information to

23 determine whether the filing meets the requirements of 24 this article, he or she shall require the insurer to furnish 25the information upon which it supports the filing and in that event the waiting period shall commence as of the 26date the information is furnished. 27The information 28 furnished in support of a filing may include: (1) The 29 experience or judgment of the insurer or rating organiza-30 tion making the filing; (2) the experience or judgment of the insurer or rating organization in the territorial rate 31 32 areas established by subdivision (2), subsection (c), section 33 three of this article; (3) its interpretation of any statistical data it relies upon; (4) the experience of other insurers or 34 rating organizations; or (5) any other relevant factors. A 35 filing and any supporting information is open to public 36 37 inspection as soon as the filing is received by the Commissioner. Any interested party may file a brief with the 38 Commissioner supporting his or her position concerning 39 the filing. Any person or organization may file with the 40 41 Commissioner a signed statement declaring and support-42 ing his or her or its position concerning the filing. Upon receipt of the statement prior to the effective date of the 43 44 filing, the Commissioner shall mail or deliver a copy of the 45 statement to the filer, which may file a reply as it may 46 desire to make. This section is not applicable to any 47 memorandum or statement of any kind by any employee of 48 the Commissioner.

49 (c) An insurer may satisfy its obligation to make a filing
50 by becoming a member of, or a subscriber to, a licensed
51 rating organization which makes filings and by authoriz52 ing the Commissioner to accept filings on its behalf:
53 *Provided*, That nothing contained in this article shall be
54 construed as requiring any insurer to become a member of
55 or a subscriber to any rating organization.

(d) The Commissioner shall review filings as soon as
reasonably possible after they have been made in order to
determine whether they meet the requirements of this
article.

(e) Subject to the exceptions specified in subsections (f), 60 61 (g) and (h) of this section, each filing shall be on file for a waiting period of sixty days before it becomes effective. 62 Upon written application by an insurer or rating organiza-63 tion, the Commissioner may authorize a filing which he or 64 she has reviewed to become effective before the expiration 65 of the waiting period. A filing shall be deemed to meet the 66 requirements of this article unless disapproved by the 67 68 Commissioner within the waiting period.

(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
the Commissioner reviews the filing and so long thereafter
as the filing remains in effect.

(g) Specific inland marine rates on risks specially rated
by a rating organization shall become effective when filed
and shall be deemed to meet the requirements of this
article until the Commissioner reviews the filing and so
long thereafter as the filing remains in effect.

81 (h) Rates for commercial lines property and casualty 82 risks must be filed with the Commissioner and the filings 83 need not be approved by the Commissioner. The Commissioner may request additional information to ensure 84 85 compliance with applicable statutory standards, but if the Commissioner does not disapprove the filing within the 86 87 initial thirty-day period after receipt, the rate filing will 88 become effective upon first usage after filing: *Provided*, That the Commissioner may at any time thereafter, after 89 90 notice and for cause shown, disapprove any rate filing.

91 (i) Under legislative rules the Commissioner may, by
92 written order, suspend or modify the requirement of filing
93 as to any kind of insurance, subdivision or combination
94 thereof, or as to classes of risks, the rates for which cannot
95 practicably be filed before they are used. These orders and

96 rules shall be made known to insurers and rating organiza97 tions affected thereby. The Commissioner may make any
98 examination he or she may consider advisable to ascertain
99 whether any rates affected by an order meet the standards
100 set forth in subsection (b), section three of this article.

(j) Upon the written application of the insured, stating
his or her reasons therefor, filed with and approved by the
Commissioner, a rate in excess of that provided by a filing
otherwise applicable may be used on any specific risks.

(k) No insurer shall make or issue a contract or policy
except in accordance with the filings which are in effect
for that insurer as provided in this article. This subsection
does not apply to contracts or policies for inland marine
risks as to which filings are not required.

(1) In instances when an insurer files a request for an 110 increase of automobile liability insurance rates in the 111 amount of fifteen percent or more, the Insurance Commis-112 113 sioner shall provide notice of the increase with the office 114 of the Secretary of State to be filed in the state register and shall provide interested persons the opportunity to 115comment on the request up to the time the Commissioner 116 117 approves or disapproves the rate increase.

(m) For purposes of this section, "commercial" means
commercial lines as defined in subdivision (2), subsection
(e), section eight, article six of this chapter.

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

Chairman Senate Committee Chairman House Committee

Originated in the Senate.

In effect ninety days from passage.

Clerk of the Senate

Clerk of the House of Delegates

President of the Senate

Speaker House of Delegates

hoved this the. 292 The within. Day of, 2005. Governor R GCIU 326-C

PRESENTED TO True GOVERNOR

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