ASSEMBLY BILL NO. 539–COMMITTEE ON COMMERCE AND LABOR

MARCH 28, 2011

Referred to Committee on Commerce and Labor

SUMMARY—Revises provisions governing insurance. (BDR 57-773)

FISCAL NOTE: Effect on Local Government: Increases or Newly
Provides for Term of Imprisonment in County or City
Jail or Detention Facility.
Effect on the State: Yes.

EXPLANATION - Matter in bolded italics is new; matter between brackets [omitted material] is material to be omitted.

AN ACT relating to insurance; creating the Office of the Consumer Advocate within the Division of Insurance of the Department of Business and Industry; requiring the Governor to appoint a Consumer Advocate as the executive head of the Office; requiring the Consumer Advocate to provide an annual report card for each insurer transacting business in this State; requiring an insurer to publish on an Internet website certain information related to each policy, contract or plan of insurance offered by the insurer; requiring certain insurers to offer homeowner's insurance in this State; requiring the Commissioner of Insurance establish to restrictions on rates for policies and contracts of homeowner's insurance; requiring the Commissioner to issue an order directing an insurer to return certain excess profits to policyholders; requiring an insurer to provide a policyholder with certain options for each policy, contract or plan of insurance offered in this State; providing a penalty; and providing other matters properly relating thereto





Legislative Counsel's Digest:

Existing law authorizes the Commissioner of Insurance to issue a certificate of authority to insurers in this State, enforce the provisions of the Nevada Insurance Code and otherwise regulate the insurance industry in this State. (Chapter 679B of NRS, NRS 680A.160) **Section 2** of this bill creates the Office of the Consumer Advocate within the Division of Insurance of the Department of Business and Industry and requires the Governor to appoint a Consumer Advocate as executive head of the Office. **Section 3** of this bill requires the Consumer Advocate to prepare an annual report card for each insurer in this State and publish the report card and certain other information received from an insurer on an Internet website maintained by the Division.

Section 4 of this bill requires each insurer to publish on an Internet website certain information with respect to each policy, contract or plan of insurance offered by the insurer in this State. **Section 4** also requires the insurer to provide certain information to the Consumer Advocate.

Section 5 of this bill requires the Commissioner to establish by regulation a formula for determining whether an insurer has received excess profits from the premiums of a policy, contract or plan of insurance. **Section 5** provides that upon a determination by the Commissioner that an insurer has received excess profits, the Commissioner is required to issue an order directing the insurer to return to each insured a pro rata share of the excess profits.

Section 6 of this bill requires the Commissioner to establish by regulation the amount by which rates may fluctuate by market for a policy or contract of homeowner's insurance. **Section 6** prohibits an insurer that offers a policy or contract of homeowner's insurance from transacting business in this State if the rates for such homeowner's insurance exceed the amounts established by the Commissioner. **Section 15** of this bill requires an insurer to offer homeowner's insurance in this State if the insurer offers or issues a policy or contract of motor vehicle insurance in this State and offers motor vehicle insurance and homeowner's insurance in any other state.

Section 14 of this bill requires an insurer, for each policy, contract or plan of insurance offered by the insurer in this State, to offer a variety of options to policyholders with respect to the payment of premiums, deductibles or types of coverage for each such policy, contract or plan of insurance.

An insurer that violates the provisions of this bill is guilty of a misdemeanor. (NRS 679A.180)

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY. DO ENACT AS FOLLOWS:

Section 1. Chapter 679B of NRS is hereby amended by adding thereto the provisions set forth as sections 2 to 5, inclusive, of this act.

Sec. 2. 1. The Office of the Consumer Advocate is hereby created within the Division. The Governor shall appoint the Consumer Advocate as the executive head of the Office. The Consumer Advocate is not subject to the supervision or control of the Division or the Commissioner in carrying out his or her duties.

2. The Governor shall appoint the Consumer Advocate for a term of 4 years. The Governor may remove the Consumer





Advocate from office for inefficiency, neglect of duty or malfeasance in office.

- 3. The Consumer Advocate is in the unclassified service of the State.
- 4. The Consumer Advocate must be knowledgeable in the various areas of the regulation of insurance.
- 5. The Consumer Advocate must be independent of and have no pecuniary interest in any insurer or other person regulated by the Division.
- 6. The Consumer Advocate shall carry out his or her duties as prescribed by this section and section 3 of this act.
- 7. The Commissioner may apply for any available grants and may accept any gifts, grants and donations from any source to defray the costs of the Consumer Advocate in carrying out his or her duties.
- 8. To the extent money is available for this purpose, the Commissioner may employ in the unclassified service of the State any personnel necessary to assist with the duties and responsibilities of the Consumer Advocate.
 - Sec. 3. 1. The Consumer Advocate shall:
- (a) Based upon criteria established by the Commissioner pursuant to subsection 2, prepare an annual report card using a letter grade scale for each insurer that offers or issues any policy, contract or plan of insurance in this State.
 - (b) Publish on an Internet website maintained by the Division:
- (1) A link to the Internet website maintained by each insurer on which information is published by the insurer as required by section 4 of this act;
- (2) The annual report card for each insurer prepared pursuant to paragraph (a); and
- (3) Any information obtained from an insurer about a rate or proposed rate increase.
- 2. The Commissioner shall adopt regulations establishing a letter grade scale for the purpose of the preparation by the Consumer Advocate of an annual report card for each insurer as required by subsection 1.
- 3. As used in this section, "Consumer Advocate" means the person appointed by the Governor as the executive head of the Office of the Consumer Advocate pursuant to section 2 of this act.
- Sec. 4. 1. An insurer that offers or issues any policy, contract or plan of insurance in this State shall:
- (a) On or before a date established by the Commissioner, publish on an Internet website maintained by the insurer the provisions, terms, rates, premiums and loss ratio of each policy, contract or plan of insurance offered or issued by the insurer in





this State and any other state or territory of the United States. An insurer shall update the information published pursuant to this paragraph each time the insurer changes or modifies any provision, term, rate or premium of such a policy, contract or plan of insurance.

- (b) Provide to the Consumer Advocate:
 - (1) The information published pursuant to paragraph (a);
- (2) Information concerning any proposed changes in a rate; and
- 10 (3) Any information used to calculate a rate or proposed 11 rate increase.
 - 2. As used in this section:

- (a) "Consumer Advocate" means the person appointed by the Governor as the executive head of the Office of the Consumer Advocate pursuant to section 2 of this act.
- (b) "Loss ratio" means incurred losses from claims as a percentage of total revenue earned from premiums.
- Sec. 5. 1. The Commissioner shall adopt regulations establishing a formula to determine whether an insurer that offers or issues a policy, contract or plan of insurance in this State has received excess profits from the premiums of such policy, contract or plan of insurance.
- 2. If the Commissioner determines that an insurer has received excess profits from the premiums of a policy, contract or plan of insurance, the Commissioner shall issue an order directing the insurer to return to each insured a pro rata share of the excess profits.
- 3. If the Commissioner determines that an insurer has failed to comply with an order issued by the Commissioner pursuant to subsection 2, the Commissioner shall suspend or terminate the certificate of authority of the insurer until the insurer complies with the provisions of this section and any regulations adopted by the Commissioner pursuant thereto.
- **Sec. 6.** Chapter 686B of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. The Commissioner shall adopt regulations establishing the amount by which the rate may fluctuate by market for a policy or contract of homeowner's insurance.
 - 2. An insurer that offers a policy or contract of homeowner's insurance shall not transact business in this State if the rates of the policy or contract vary by market by an amount that exceeds the allowable amount of fluctuation in such rates established by the Commissioner pursuant to subsection 1.
 - 3. If the Commissioner determines that the rate of a policy or contract of homeowner's insurance offered by an insurer exceeds





the allowable amount of fluctuation in such rates established by the Commissioner pursuant to subsection 1, the Commissioner shall suspend or terminate the certificate of authority of the insurer until the insurer:

- (a) Provides proof satisfactory to the Commissioner that the rate of the policy or contract of homeowner's insurance does not exceed the allowable amount of fluctuation in such rates established by the Commissioner pursuant to subsection 1; and
- (b) Complies with the regulations adopted by the Commissioner pursuant to this section.

Sec. 7. NRS 686B.010 is hereby amended to read as follows:

686B.010 1. The Legislature intends that NRS 686B.010 to 686B.1799, inclusive, *and section 6 of this act* be liberally construed to achieve the purposes stated in subsection 2, which constitute an aid and guide to interpretation but not an independent source of power.

- 2. The purposes of NRS 686B.010 to 686B.1799, inclusive, and section 6 of this act are to:
- (a) Protect policyholders and the public against the adverse effects of excessive, inadequate or unfairly discriminatory rates;
- (b) Encourage, as the most effective way to produce rates that conform to the standards of paragraph (a), independent action by and reasonable price competition among insurers;
- (c) Provide formal regulatory controls for use if independent action and price competition fail;
- (d) Authorize cooperative action among insurers in the ratemaking process, and to regulate such cooperation in order to prevent practices that tend to bring about monopoly or to lessen or destroy competition;
- (e) Encourage the most efficient and economic marketing practices; and
- (f) Regulate the business of insurance in a manner that will preclude application of federal antitrust laws.
 - **Sec. 8.** NRS 686B.020 is hereby amended to read as follows: 686B.020 As used in NRS 686B.010 to 686B.1799, inclusive,

and section 6 of this act, unless the context otherwise requires:

- 1. "Advisory organization," except as limited by NRS 686B.1752, means any person or organization which is controlled by or composed of two or more insurers and which engages in activities related to rate making. For the purposes of this subsection, two or more insurers with common ownership or operating in this State under common ownership constitute a single insurer. An advisory organization does not include:
 - (a) A joint underwriting association;
 - (b) An actuarial or legal consultant; or





(c) An employee or manager of an insurer.

- 2. "Market segment" means any line or kind of insurance or, if it is described in general terms, any subdivision thereof or any class of risks or combination of classes.
- 3. "Rate service organization" means any person, other than an employee of an insurer, who assists insurers in rate making or filing by:
- 8 (a) Collecting, compiling and furnishing loss or expense 9 statistics;
 - (b) Recommending, making or filing rates or supplementary rate information; or
 - (c) Advising about rate questions, except as an attorney giving legal advice.
 - 4. "Supplementary rate information" includes any manual or plan of rates, statistical plan, classification, rating schedule, minimum premium, policy fee, rating rule, rule of underwriting relating to rates and any other information prescribed by regulation of the Commissioner.
 - **Sec. 9.** NRS 686B.030 is hereby amended to read as follows:
 - 686B.030 1. Except as otherwise provided in subsection 2, NRS 686B.010 to 686B.1799, inclusive, *and section 6 of this act* apply to all kinds and lines of direct insurance written on risks or operations in this State by any insurer authorized to do business in this State, except:
 - (a) Ocean marine insurance;
 - (b) Contracts issued by fraternal benefit societies;
 - (c) Life insurance and credit life insurance;
 - (d) Variable and fixed annuities;
- 29 (e) Group and blanket health insurance and credit health 30 insurance;
 - (f) Property insurance for business and commercial risks;
 - (g) Casualty insurance for business and commercial risks other than insurance covering the liability of a practitioner licensed pursuant to chapters 630 to 640, inclusive, of NRS; and
 - (h) Surety insurance.
 - 2. The exclusions set forth in paragraphs (f) and (g) of subsection 1 extend only to issues related to the determination or approval of premium rates.
 - Sec. 10. NRS 686B.080 is hereby amended to read as follows:
 - 686B.080 Each filing and any supporting information filed under NRS 686B.010 to 686B.1799, inclusive, *and section 6 of this act* must, as soon as filed, be open to public inspection at any reasonable time. Copies may be obtained by any person on request and upon payment of a reasonable charge therefor.





Sec. 11. NRS 686B.110 is hereby amended to read as follows:

686B.110 1. The Commissioner shall consider each proposed increase or decrease in the rate of any kind or line of insurance or subdivision thereof filed with the Commissioner pursuant to subsection 1 of NRS 686B.070. If the Commissioner finds that a proposed increase will result in a rate which is not in compliance with NRS 686B.050 or subsection 2 of NRS 686B.070, the

Commissioner shall disapprove the proposal. The Commissioner shall approve or disapprove each proposal no later than 60 days after it is determined by the Commissioner to be complete pursuant to subsection 4. If the Commissioner fails to approve or disapprove the

proposal within that period, the proposal shall be deemed approved.

2. Whenever an insurer has no legally effective rates as a result

of the Commissioner's disapproval of rates or other act, the Commissioner shall on request specify interim rates for the insurer that are high enough to protect the interests of all parties and may order that a specified portion of the premiums be placed in an escrow account approved by the Commissioner. When new rates become legally effective, the Commissioner shall order the escrowed funds or any overcharge in the interim rates to be distributed appropriately, except that refunds to policyholders that

3. If the Commissioner disapproves a proposed rate and an insurer requests a hearing to determine the validity of the action of the Commissioner, the insurer has the burden of showing compliance with the applicable standards for rates established in NRS 686B.010 to 686B.1799, inclusive [...], and section 6 of this act. Any such hearing must be held:

are de minimis must not be required.

(a) Within 30 days after the request for a hearing has been submitted to the Commissioner; or

(b) Within a period agreed upon by the insurer and the Commissioner.

→ If the hearing is not held within the period specified in paragraph (a) or (b), or if the Commissioner fails to issue an order concerning the proposed rate for which the hearing is held within 45 days after the hearing, the proposed rate shall be deemed approved.

4. The Commissioner shall by regulation specify the documents or any other information which must be included in a proposal to increase or decrease a rate submitted to the Commissioner pursuant to subsection 1. Each such proposal shall be deemed complete upon its filing with the Commissioner, unless the Commissioner, within 15 business days after the proposal is filed with the Commissioner, determines that the proposal is incomplete because the proposal does not comply with the regulations adopted by the Commissioner pursuant to this subsection.





- **Sec. 12.** NRS 686B.115 is hereby amended to read as follows: 686B.115 1. Any hearing held by the Commissioner to determine whether rates comply with the provisions of NRS 686B.010 to 686B.1799, inclusive, *and section 6 of this act* must be open to members of the public.
- 2. All costs for transcripts prepared pursuant to such a hearing must be paid by the insurer requesting the hearing.
- 3. At any hearing which is held by the Commissioner to determine whether rates comply with the provisions of NRS 686B.010 to 686B.1799, inclusive, *and section 6 of this act* and which involves rates for insurance covering the liability of a practitioner licensed pursuant to chapter 630, 631, 632 or 633 of NRS for a breach of the practitioner's professional duty toward a patient, if a person is not otherwise authorized pursuant to this title to become a party to the hearing by intervention, the person is entitled to provide testimony at the hearing if, not later than 2 days before the date set for the hearing, the person files with the Commissioner a written statement which states:
 - (a) The name and title of the person;
 - (b) The interest of the person in the hearing; and
- (c) A brief summary describing the purpose of the testimony the person will offer at the hearing.
- 4. If a person provides testimony at a hearing in accordance with subsection 3:
- (a) The Commissioner may, if the Commissioner finds it necessary to preserve order, prevent inordinate delay or protect the rights of the parties at the hearing, place reasonable limitations on the duration of the testimony and prohibit the person from providing testimony that is not relevant to the issues raised at the hearing.
- (b) The Commissioner shall consider all relevant testimony provided by the person at the hearing in determining whether the rates comply with the provisions of NRS 686B.010 to 686B.1799, inclusive [-], and section 6 of this act.
 - **Sec. 13.** NRS 686B.130 is hereby amended to read as follows:
- 686B.130 1. A rate service organization and an advisory organization shall not provide any service relating to the rates of any insurance subject to NRS 686B.010 to 686B.1799, inclusive, *and section 6 of this act* and an insurer shall not utilize the services of an organization for such purposes unless the organization has obtained a license pursuant to NRS 686B.140.
- 2. A rate service organization and an advisory organization shall not refuse to supply any services for which it is licensed in this state to any insurer authorized to do business in this state and offering to pay the fair and usual compensation for the services.





Sec. 14. Chapter 687B of NRS is hereby amended by adding thereto a new section to read as follows:

An insurer that offers or issues any policy, contract or plan of insurance in this State shall:

- 1. For each policy, contract or plan of insurance, provide:
- (a) A variety of options with respect to the payment of premiums, including, without limitation, plans for the quarterly and semiannual payment of premiums;
 - (b) A variety of options with respect to deductibles; and
- (c) The option for an insured to exclude any type of coverage that is otherwise included with the policy, contract or plan of insurance.
- 2. Submit to the Commissioner for approval each option developed pursuant to subsection 1 before making the option available to any policyholder or the public.
- Sec. 15. Chapter 690B of NRS is hereby amended by adding thereto a new section to read as follows:

An insurer that:

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- 1. Offers or issues a policy or contract of motor vehicle insurance in this State:
- 2. Offers or issues a policy or contract of motor vehicle insurance in any other state; and 22
- 3. Offers or issues a policy or contract of homeowner's 23 insurance in that other state, 24
 - ⇒ shall, subject to approval by the Commissioner of the policy or contract, offer a policy or contract of homeowner's insurance in this State that is substantially similar to the policy or contract of
- homeowner's insurance offered or issued in the other state. 28





