

93RD GENERAL ASSEMBLY State of Illinois 2003 and 2004 HB4471

Introduced 02/03/04, by Frank J. Mautino

SYNOPSIS AS INTRODUCED:

215 ILCS 5/143 215 ILCS 5/408 from Ch. 73, par. 755 from Ch. 73, par. 1020

Amends the Illinois Insurance Code. In provisions regarding policy forms, requires the Department of Insurance to mail a quarterly invoice to insurance companies for the appropriate filing fees. Removes language indicating that fees charged for a policy filed as it will be issued regardless of the number of forms comprising that policy shall not exceed \$500 or \$1,000 for advisory or rating organizations. Effective immediately.

LRB093 16356 SAS 41994 b

FISCAL NOTE ACT MAY APPLY

1 AN ACT concerning insurance.

Be it enacted by the People of the State of Illinois, represented in the General Assembly:

- Section 5. The Illinois Insurance Code is amended by changing Section 143 and 408 as follows:
- 6 (215 ILCS 5/143) (from Ch. 73, par. 755)
- 7 Sec. 143. Policy forms.
- (1) Life, accident and health. No company transacting the 8 kind or kinds of business enumerated in Classes 1 (a), 1 (b) 9 and 2 (a) of Section 4 shall issue or deliver in this State a 10 policy or certificate of insurance or evidence of coverage, 11 attach an endorsement or rider thereto, incorporate 12 reference bylaws or other matter therein or use an application 13 14 blank in this State until the form and content of such policy, 15 certificate, evidence of coverage, endorsement, rider, bylaw 16 or other matter incorporated by reference or application blank 17 has been filed with and approved by the Director. The Department shall mail a quarterly invoice to the company for 18 19 the appropriate filing fees required under Section 408. and the appropriate filing fee under Section 408 has been paid, except 20 that Any such endorsement or rider that unilaterally reduces 21 22 benefits and is to be attached to a policy subsequent to the date the policy is issued must be filed with, reviewed, and 23 formally approved by the Director prior to the date it is 24 25 attached to a policy issued or delivered in this State. It 26 shall be the duty of the Director to withhold approval of any such policy, certificate, endorsement, rider, bylaw or other 27 28 matter incorporated by reference or application blank filed 29 him if it contains provisions which 30 misrepresentation or are unjust, unfair, inequitable, ambiguous, misleading, inconsistent, deceptive, contrary to 31 32 law or to the public policy of this State, or contains

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exceptions and conditions that unreasonably or deceptively affect the risk purported to be assumed in the general coverage of the policy. In all cases the Director shall approve or disapprove any such form within 60 days after submission unless the Director extends by not more than an additional 30 days the period within which he shall approve or disapprove any such form by giving written notice to the insurer of such extension before expiration of the initial 60 days period. The Director shall withdraw his approval of a policy, certificate, evidence endorsement, rider, bylaw, or other of coverage, incorporated by reference or application blank if subsequently determines that such policy, certificate, evidence of coverage, endorsement, rider, bylaw, other matter, or application blank is misrepresentative, unjust, unfair, inequitable, ambiguous, misleading, inconsistent, deceptive, contrary to law or public policy of this State, or contains exceptions or conditions which unreasonably or deceptively affect the risk purported to be assumed in the general coverage of the policy or evidence of coverage.

If a previously approved policy, certificate, evidence of rider, bylaw coverage, endorsement, or other incorporated by reference or application blank is withdrawn for use, the Director shall serve upon the company an order of withdrawal of use, either personally or by mail, and if by mail, such service shall be completed if such notice be deposited in the post office, postage prepaid, addressed to the company's last known address specified in the records of the Department of Insurance. The order of withdrawal of use shall take effect 30 days from the date of mailing but shall be stayed if within the 30-day period a written request for hearing is filed with the Director. Such hearing shall be held at such time and place as designated in the order given by the Director. The hearing may be held either in the City of Springfield, the City of Chicago or in the county where the principal business address of the company is located. The action of the Director in disapproving or withdrawing such form

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shall be subject to judicial review under the Administrative Review Law.

This subsection shall not apply to riders or endorsements issued or made at the request of the individual policyholder relating to the manner of distribution of benefits or to the reservation of rights and benefits under his life insurance policy.

(2) Casualty, fire, and marine. The Director shall require the filing of all policy forms issued or delivered by any company transacting the kind or kinds of business enumerated in Classes 2 (except Class 2 (a)) and 3 of Section 4. In addition, he may require the filing of any generally used riders, endorsements, certificates, application blanks, and other matter incorporated by reference in any such policy or contract of insurance. The Department shall mail a quarterly invoice to the company for the appropriate filing fees required under Section 408 along with the appropriate filing fee under Section 408. Companies that are members of an organization, bureau, or association may have the same filed for them by the organization, bureau, or association. If the Director shall find from an examination of any such policy form, rider, endorsement, certificate, application blank, or other matter incorporated by reference in any such policy so filed that it (i) violates any provision of this Code, (ii) contains inconsistent, ambiguous, or misleading clauses, or (iii) contains exceptions and conditions that will unreasonably or deceptively affect the risks that are purported to be assumed by the policy, he shall order the company or companies issuing these forms to discontinue their use. Nothing in this subsection shall require a company transacting the kind or kinds of business enumerated in Classes 2 (except Class 2 (a)) and 3 of Section 4 to obtain approval of these forms before they are issued nor in any way affect the legality of any policy that has been issued and found to be in conflict with this subsection, but such policies shall be subject to the provisions of Section 442.

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- 1 (3) This Section shall not apply (i) to surety contracts or 2 fidelity bonds, (ii) to policies issued to an industrial 3 insured as defined in Section 121-2.08 except for workers' 4 compensation policies, nor (iii) to riders or endorsements 5 prepared to meet special, unusual, peculiar, or extraordinary 6 conditions applying to an individual risk.
- 7 (Source: P.A. 90-794, eff. 8-14-98.)
- 8 (215 ILCS 5/408) (from Ch. 73, par. 1020)
- 9 Sec. 408. Fees and charges.
- 10 (1) The Director shall charge, collect and give proper 11 acquittances for the payment of the following fees and charges:
 - (a) For filing all documents submitted for the incorporation or organization or certification of a domestic company, except for a fraternal benefit society, \$2,000.
 - (b) For filing all documents submitted for the incorporation or organization of a fraternal benefit society, \$500.
 - (c) For filing amendments to articles of incorporation and amendments to declaration of organization, except for a fraternal benefit society, a mutual benefit association, a burial society or a farm mutual, \$200.
 - (d) For filing amendments to articles of incorporation of a fraternal benefit society, a mutual benefit association or a burial society, \$100.
 - (e) For filing amendments to articles of incorporation of a farm mutual, \$50.
 - (f) For filing bylaws or amendments thereto, \$50.
 - (g) For filing agreement of merger or consolidation:
 - (i) for a domestic company, except for a fraternal benefit society, a mutual benefit association, a burial society, or a farm mutual, \$2,000.
 - (ii) for a foreign or alien company, except for a fraternal benefit society, \$600.
 - (iii) for a fraternal benefit society, a mutual

1	benefit	association,	a	burial	society,	or	a	farm
2	mutual,	\$200.						

- (h) For filing agreements of reinsurance by a domestic company, \$200.
- (i) For filing all documents submitted by a foreign or alien company to be admitted to transact business or accredited as a reinsurer in this State, except for a fraternal benefit society, \$5,000.
- (j) For filing all documents submitted by a foreign or alien fraternal benefit society to be admitted to transact business in this State, \$500.
- (k) For filing declaration of withdrawal of a foreign or alien company, \$50.
- (1) For filing annual statement, except a fraternal benefit society, a mutual benefit association, a burial society, or a farm mutual, \$200.
- (m) For filing annual statement by a fraternal benefit society, \$100.
- (n) For filing annual statement by a farm mutual, a mutual benefit association, or a burial society, \$50.
- (o) For issuing a certificate of authority or renewal thereof except to a fraternal benefit society, \$200.
- (p) For issuing a certificate of authority or renewal thereof to a fraternal benefit society, \$100.
- (q) For issuing an amended certificate of authority, \$50.
- (r) For each certified copy of certificate of authority, \$20.
- (s) For each certificate of deposit, or valuation, or compliance or surety certificate, \$20.
 - (t) For copies of papers or records per page, \$1.
- (u) For each certification to copies of papers or records, \$10.
- (v) For multiple copies of documents or certificates listed in subparagraphs (r), (s), and (u) of paragraph (1) of this Section, \$10 for the first copy of a certificate of

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\$500;

1	any type and \$5 for each additional copy of the same
2	certificate requested at the same time, unless, pursuant to
3	paragraph (2) of this Section, the Director finds these
4	additional fees excessive.
5	(w) For issuing a permit to sell shares or increase
6	paid-up capital:
7	(i) in connection with a public stock offering,
8	\$300 ;
9	(ii) in any other case, \$100.
10	(x) For issuing any other certificate required or
11	permissible under the law, \$50.
12	(y) For filing a plan of exchange of the stock of a
13	domestic stock insurance company, a plan of
14	demutualization of a domestic mutual company, or a plan of
15	reorganization under Article XII, \$2,000.
16	(z) For filing a statement of acquisition of a domestic
17	company as defined in Section 131.4 of this Code, \$2,000.
18	(aa) For filing an agreement to purchase the business
19	of an organization authorized under the Dental Service Plan
20	Act or the Voluntary Health Services Plans Act or of a
21	health maintenance organization or a limited health
22	service organization, \$2,000.
23	(bb) For filing a statement of acquisition of a foreign
24	or alien insurance company as defined in Section 131.12a of
25	this Code, \$1,000.
26	(cc) For filing a registration statement as required in
27	Sections 131.13 and 131.14, the notification as required by
28	Sections 131.16, 131.20a, or 141.4, or an agreement or
29	transaction required by Sections 124.2(2), 141, 141a, or
30	141.1, \$200.
31	(dd) For filing an application for licensing of:
32	(i) a religious or charitable risk pooling trust or
33	a workers' compensation pool, \$1,000;
34	(ii) a workers' compensation service company,

(iii) a self-insured automobile fleet, \$200; or

reinsurance intermediary, \$500.

1	(iv) a renewal of or amendment of any license
2	issued pursuant to (i), (ii), or (iii) above, \$100.
3	(ee) For filing articles of incorporation for a
4	syndicate to engage in the business of insurance through
5	the Illinois Insurance Exchange, \$2,000.
6	(ff) For filing amended articles of incorporation for a
7	syndicate engaged in the business of insurance through the
8	Illinois Insurance Exchange, \$100.
9	(gg) For filing articles of incorporation for a limited
10	syndicate to join with other subscribers or limited
11	syndicates to do business through the Illinois Insurance
12	Exchange, \$1,000.
13	(hh) For filing amended articles of incorporation for a
14	limited syndicate to do business through the Illinois
15	Insurance Exchange, \$100.
16	(ii) For a permit to solicit subscriptions to a
17	syndicate or limited syndicate, \$100.
18	(jj) For the filing of each form as required in Section
19	143 of this Code, \$50 per form. The fee for advisory and
20	rating organizations shall be \$200 per form.
21	(i) For the purposes of the form filing fee,
22	filings made on insert page basis will be considered
23	one form at the time of its original submission.
24	Changes made to a form subsequent to its approval shall
25	be considered a new filing.
26	(ii) Only one fee shall be charged for a form,
27	regardless of the number of other forms or policies
28	with which it will be used.
29	(iii) (Blank). Fees charged for a policy filed as
30	it will be issued regardless of the number of forms
31	comprising that policy shall not exceed \$1,000 or
32	\$2,000 for advisory or rating organizations.
33	(iv) The Director may by rule exempt forms from
34	such fees.
35	(kk) For filing an application for licensing of a

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- 1 (11) For filing an application for renewal of a license 2 of a reinsurance intermediary, \$200.
 - (2) When printed copies or numerous copies of the same paper or records are furnished or certified, the Director may reduce such fees for copies if he finds them excessive. He may, when he considers it in the public interest, furnish without charge to state insurance departments and persons other than companies, copies or certified copies of reports of examinations and of other papers and records.
 - (3) The expenses incurred in any performance examination authorized by law shall be paid by the company or person being examined. The charge shall be reasonably related to the cost of the examination including but not limited to compensation of examiners, electronic data processing costs, supervision and preparation of an examination report and lodging and travel expenses. All lodging and travel expenses shall be in accord with the applicable travel regulations as published by the Department of Central Management Services and approved by the Governor's Travel Control Board, except that out-of-state lodging and travel expenses related to examinations authorized under Section 132 shall be in accordance with travel rates prescribed under paragraph 301-7.2 of the Federal Travel C.F.R. 301-7.2, for reimbursement Regulations, 41 of subsistence expenses incurred during official travel. lodging and travel expenses may be reimbursed directly upon authorization of the Director. With the exception of the direct reimbursements authorized by the Director, all performance examination charges collected by the Department shall be paid to the Insurance Producers Administration Fund, however, the electronic data processing costs incurred by the Department in the performance of any examination shall be billed directly to the company being examined for payment to the Statistical Services Revolving Fund.
 - (4) At the time of any service of process on the Director as attorney for such service, the Director shall charge and collect the sum of \$20, which may be recovered as taxable costs

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- by the party to the suit or action causing such service to be
 made if he prevails in such suit or action.
 - (5) (a) The costs incurred by the Department of Insurance in conducting any hearing authorized by law shall be assessed against the parties to the hearing in such proportion as the Director of Insurance may determine upon consideration of all relevant circumstances including: (1) the nature of the hearing; (2) whether the hearing was instigated by, or for the benefit of a particular party or parties; (3) whether there is a successful party on the merits of the proceeding; and (4) the relative levels of participation by the parties.
 - (b) For purposes of this subsection (5) costs incurred shall mean the hearing officer fees, court reporter fees, and travel expenses of Department of Insurance officers and employees; provided however, that costs incurred shall not include hearing officer fees or court reporter fees unless the Department has retained the services of independent contractors or outside experts to perform such functions.
 - The Director shall make the assessment of costs incurred as part of the final order or decision arising out of the proceeding; provided, however, that such order or decision shall include findings and conclusions in support of the assessment of costs. This subsection (5) shall not be construed as permitting the payment of travel expenses unless calculated in accordance with the applicable travel regulations of the Department of Central Management Services, as approved by the Governor's Travel Control Board. The Director as part of such order or decision shall require all assessments for hearing officer fees and court reporter fees, if any, to be paid directly to the hearing officer or court reporter by the party(s) assessed for such costs. The assessments for travel expenses of Department officers and employees shall reimbursable to the Director of Insurance for deposit to the fund out of which those expenses had been paid.
 - (d) The provisions of this subsection (5) shall apply in the case of any hearing conducted by the Director of Insurance

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- (6) The Director shall charge and collect an annual financial regulation fee from every domestic company for examination and analysis of its financial condition and to fund the internal costs and expenses of the Interstate Insurance Receivership Commission as may be allocated to the State of Illinois and companies doing an insurance business in this State pursuant to Article X of the Interstate Insurance Receivership Compact. The fee shall be the greater fixed amount based upon the combination of nationwide direct premium income and nationwide reinsurance assumed premium income or upon admitted assets calculated under this subsection as follows:
 - (a) Combination of nationwide direct premium income and nationwide reinsurance assumed premium.
 - (i) \$150, if the premium is less than \$500,000 and there is no reinsurance assumed premium;
 - (ii) \$750, if the premium is \$500,000 or more, but less than \$5,000,000 and there is no reinsurance assumed premium; or if the premium is less than \$5,000,000 and the reinsurance assumed premium is less than \$10,000,000;
 - (iii) \$3,750, if the premium is less than \$5,000,000 and the reinsurance assumed premium is \$10,000,000 or more;
 - (iv) \$7,500, if the premium is \$5,000,000 or more, but less than \$10,000,000;
 - (v) \$18,000, if the premium is \$10,000,000 or more, but less than \$25,000,000;
 - (vi) \$22,500, if the premium is \$25,000,000 or more, but less than \$50,000,000;
 - (vii) \$30,000, if the premium is \$50,000,000 or more, but less than \$100,000,000;
- 33 (viii) \$37,500, if the premium is \$100,000,000 or more.
- 35 (b) Admitted assets.
- 36 (i) \$150, if admitted assets are less than

1	\$1,000,000;
2	(ii) \$750, if admitted assets are \$1,000,000 or
3	more, but less than \$5,000,000;
4	(iii) \$3,750, if admitted assets are \$5,000,000 or
5	more, but less than \$25,000,000;
6	(iv) \$7,500, if admitted assets are \$25,000,000 or
7	more, but less than \$50,000,000;
8	(v) \$18,000, if admitted assets are \$50,000,000 or
9	more, but less than \$100,000,000;
10	(vi) \$22,500, if admitted assets are \$100,000,000
11	or more, but less than \$500,000,000;
12	(vii) \$30,000, if admitted assets are \$500,000,000
13	or more, but less than \$1,000,000,000;
14	(viii) \$37,500, if admitted assets are
15	\$1,000,000,000 or more.
16	(c) The sum of financial regulation fees charged to the
17	domestic companies of the same affiliated group shall not
18	exceed \$250,000 in the aggregate in any single year and
19	shall be billed by the Director to the member company
20	designated by the group.
21	(7) The Director shall charge and collect an annual
22	financial regulation fee from every foreign or alien company,
23	except fraternal benefit societies, for the examination and
24	analysis of its financial condition and to fund the internal
25	costs and expenses of the Interstate Insurance Receivership
26	Commission as may be allocated to the State of Illinois and
27	companies doing an insurance business in this State pursuant to
28	Article X of the Interstate Insurance Receivership Compact. The
29	fee shall be a fixed amount based upon Illinois direct premium
30	income and nationwide reinsurance assumed premium income in
31	accordance with the following schedule:
32	(a) \$150, if the premium is less than \$500,000 and
33	there is no reinsurance assumed premium;
34	(b) $$750$, if the premium is $$500,000$ or more, but less
35	than \$5,000,000 and there is no reinsurance assumed

premium; or if the premium is less than \$5,000,000 and the

reinsurance assumed premium is less than \$10,000,000;

- 2 (c) \$3,750, if the premium is less than \$5,000,000 and the reinsurance assumed premium is \$10,000,000 or more;
 - (d) \$7,500, if the premium is \$5,000,000 or more, but less than \$10,000,000;
- 6 (e) \$18,000, if the premium is \$10,000,000 or more, but
 7 less than \$25,000,000;
 - (f) \$22,500, if the premium is \$25,000,000 or more, but less than \$50,000,000;
 - (g) \$30,000, if the premium is \$50,000,000 or more, but less than \$100,000,000;
 - (h) \$37,500, if the premium is \$100,000,000 or more.

The sum of financial regulation fees under this subsection (7) charged to the foreign or alien companies within the same affiliated group shall not exceed \$250,000 in the aggregate in any single year and shall be billed by the Director to the member company designated by the group.

- (8) Beginning January 1, 1992, the financial regulation fees imposed under subsections (6) and (7) of this Section shall be paid by each company or domestic affiliated group annually. After January 1, 1994, the fee shall be billed by Department invoice based upon the company's premium income or admitted assets as shown in its annual statement for the preceding calendar year. The invoice is due upon receipt and must be paid no later than June 30 of each calendar year. All financial regulation fees collected by the Department shall be paid to the Insurance Financial Regulation Fund. The Department may not collect financial examiner per diem charges from companies subject to subsections (6) and (7) of this Section undergoing financial examination after June 30, 1992.
- (9) In addition to the financial regulation fee required by this Section, a company undergoing any financial examination authorized by law shall pay the following costs and expenses incurred by the Department: electronic data processing costs, the expenses authorized under Section 131.21 and subsection (d) of Section 132.4 of this Code, and lodging and travel expenses.

Electronic data processing costs incurred by the Department in the performance of any examination shall be billed directly to the company undergoing examination for payment to the Statistical Services Revolving Fund. Except for direct reimbursements authorized by the Director or direct payments made under Section 131.21 or subsection (d) of Section 132.4 of this Code, all financial regulation fees and all financial examination charges collected by the Department shall be paid to the Insurance Financial Regulation Fund.

All lodging and travel expenses shall be in accordance with applicable travel regulations published by the Department of Central Management Services and approved by the Governor's Travel Control Board, except that out-of-state lodging and travel expenses related to examinations authorized under Sections 132.1 through 132.7 shall be in accordance with travel rates prescribed under paragraph 301-7.2 of the Federal Travel Regulations, 41 C.F.R. 301-7.2, for reimbursement of subsistence expenses incurred during official travel. All lodging and travel expenses may be reimbursed directly upon the authorization of the Director.

In the case of an organization or person not subject to the financial regulation fee, the expenses incurred in any financial examination authorized by law shall be paid by the organization or person being examined. The charge shall be reasonably related to the cost of the examination including, but not limited to, compensation of examiners and other costs described in this subsection.

- (10) Any company, person, or entity failing to make any payment of \$150 or more as required under this Section shall be subject to the penalty and interest provisions provided for in subsections (4) and (7) of Section 412.
- (11) Unless otherwise specified, all of the fees collected under this Section shall be paid into the Insurance Financial Regulation Fund.
- (12) For purposes of this Section:
 - (a) "Domestic company" means a company as defined in

- Section 2 of this Code which is incorporated or organized under the laws of this State, and in addition includes a not-for-profit corporation authorized under the Dental Service Plan Act or the Voluntary Health Services Plans Act, a health maintenance organization, and a limited health service organization.
- (b) "Foreign company" means a company as defined in Section 2 of this Code which is incorporated or organized under the laws of any state of the United States other than this State and in addition includes a health maintenance organization and a limited health service organization which is incorporated or organized under the laws of any state of the United States other than this State.
- (c) "Alien company" means a company as defined in Section 2 of this Code which is incorporated or organized under the laws of any country other than the United States.
- (d) "Fraternal benefit society" means a corporation, society, order, lodge or voluntary association as defined in Section 282.1 of this Code.
- (e) "Mutual benefit association" means a company, association or corporation authorized by the Director to do business in this State under the provisions of Article XVIII of this Code.
- (f) "Burial society" means a person, firm, corporation, society or association of individuals authorized by the Director to do business in this State under the provisions of Article XIX of this Code.
- (g) "Farm mutual" means a district, county and township mutual insurance company authorized by the Director to do business in this State under the provisions of the Farm Mutual Insurance Company Act of 1986.
- 32 (Source: P.A. 93-32, eff. 7-1-03.)
- 33 Section 99. Effective date. This Act takes effect upon 34 becoming law.