

94TH GENERAL ASSEMBLY

State of Illinois

2005 and 2006

SB0552

Introduced 2/17/2005, by Sen. James A. DeLeo

SYNOPSIS AS INTRODUCED:

215 ILCS 5/155.18

from Ch. 73, par. 767.18

Amends the Illinois Insurance Code. Makes a technical change in a Section concerning medical liability insurance.

LRB094 10621 LJB 40962 b

SB0552

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AN ACT concerning regulation.

2 Be it enacted by the People of the State of Illinois, 3 represented in the General Assembly:

4 Section 5. The Illinois Insurance Code is amended by 5 changing Section 155.18 as follows:

6 (215 ILCS 5/155.18) (from Ch. 73, par. 767.18)

7 Sec. 155.18. (a) This This Section shall apply to insurance on risks based upon negligence by a physician, hospital or 8 other health care provider, referred to herein as medical 9 liability insurance. This Section shall not apply to contracts 10 of reinsurance, nor to any farm, county, district or township 11 mutual insurance company transacting business under an Act 12 entitled "An Act relating to local mutual district, county and 13 14 township insurance companies", approved March 13, 1936, as now 15 or hereafter amended, nor to any such company operating under a 16 special charter.

(b) The following standards shall apply to the making and use of rates pertaining to all classes of medical liability insurance:

(1) Rates shall not be excessive or inadequate, as herein defined, nor shall they be unfairly discriminatory. No rate shall be held to be excessive unless such rate is unreasonably high for the insurance provided, and a reasonable degree of competition does not exist in the area with respect to the classification to which such rate is applicable.

No rate shall be held inadequate unless it is unreasonably low for the insurance provided and continued use of it would endanger solvency of the company.

(2) Consideration shall be given, to the extent applicable,
to past and prospective loss experience within and outside this
State, to a reasonable margin for underwriting profit and
contingencies, to past and prospective expenses both

- 2 - LRB094 10621 LJB 40962 b

SB0552

1 countrywide and those especially applicable to this State, and 2 to all other factors, including judgment factors, deemed 3 relevant within and outside this State.

4 Consideration may also be given in the making and use of 5 rates to dividends, savings or unabsorbed premium deposits 6 allowed or returned by companies to their policyholders, 7 members or subscribers.

8 (3) The systems of expense provisions included in the rates 9 for use by any company or group of companies may differ from 10 those of other companies or groups of companies to reflect the 11 operating methods of any such company or group with respect to 12 any kind of insurance, or with respect to any subdivision or 13 combination thereof.

(4) Risks may be grouped by classifications for the 14 15 establishment of rates and minimum premiums. Classification 16 rates may be modified to produce rates for individual risks in 17 accordance with rating plans which establish standards for measuring variations in hazards or expense provisions, or both. 18 19 Such standards may measure any difference among risks that have 20 a probable effect upon losses or expenses. Such classifications or modifications of classifications of risks may be established 21 based upon size, expense, management, individual experience, 22 23 location or dispersion of hazard, or any other reasonable considerations and shall apply to all risks under the same or 24 substantially the same circumstances or conditions. The rate 25 26 for an established classification should be related generally 27 to the anticipated loss and expense factors of the class.

(c) Every company writing medical liability insurance
 shall file with the Director of Insurance the rates and rating
 schedules it uses for medical liability insurance.

31 (1) This filing shall occur at least annually and as often32 as the rates are changed or amended.

33 (2) For the purposes of this Section any change in premium 34 to the company's insureds as a result of a change in the 35 company's base rates or a change in its increased limits 36 factors shall constitute a change in rates and shall require a - 3 - LRB094 10621 LJB 40962 b

SB0552

1 filing with the Director.

(3) It shall be certified in such filing by an officer of
the company and a qualified actuary that the company's rates
are based on sound actuarial principles and are not
inconsistent with the company's experience.

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(d) If after a hearing the Director finds:

7 (1) that any rate, rating plan or rating system violates 8 the provisions of this Section applicable to it, he may issue 9 an order to the company which has been the subject of the 10 hearing specifying in what respects such violation exists and 11 stating when, within a reasonable period of time, the further 12 use of such rate or rating system by such company in contracts 13 of insurance made thereafter shall be prohibited;

14 (2) that the violation of any of the provisions of this 15 Section applicable to it by any company which has been the 16 subject of hearing was wilful, he may suspend or revoke, in 17 whole or in part, the certificate of authority of such company 18 with respect to the class of insurance which has been the 19 subject of the hearing.

20 (Source: P.A. 79-1434.)