Session of 2001

SENATE BILL No. 359

By Committee on Ways and Means

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9 AN ACT concerning the Kansas life and health insurance guaranty as-10 sociation; amending K.S.A. 40-3006, 40-3008, as amended by section 3 of 2001 House Bill No. 2115, 40-3011, 40-3016 and 40-3017 and 11 12 repealing the existing sections. 13

14 Be it enacted by the Legislature of the State of Kansas:

15 Section 1. K.S.A. 40-3006 is hereby amended to read as follows: 40-3006. (a) There is hereby created a nonprofit legal entity to be known as 16 17 the Kansas life and health insurance guaranty association. All member insurers shall be and remain members of the association as a condition 18 of their authority to transact insurance in this state. The association shall 19 20 perform its functions under the plan of operation established and ap-21 proved under K.S.A. 40-3010 and amendments thereto and shall exercise its powers through a board of directors established under K.S.A. 40-3007 22 23 and amendments thereto. For purposes of administration and assessment, 24 the association shall maintain three accounts: (1) The health insurance 25 account:

the life insurance account; and (2)

the annuity account, excluding unallocated annuities. (3)

(b) (1) The association shall come under the immediate supervision 28 29 of the commissioner and shall be subject to the applicable provisions of 30 the insurance laws of this state.

(2) Meetings or records of the association may be opened upon ma-31 32 jority vote of the board of directors of the association shall be subject to the provisions of the Kansas open meetings act, K.S.A. 75-4317 et seq. 33 and amendments thereto. 34

35 The records of the association shall be subject to the Kansas open (3) records act, K.S.A. 45-215 et seq. and amendments thereto. 36

37 Sec. 2. K.S.A. 40-3008 as amended by section 3 of 2001 House Bill No. 2115 is hereby amended to read as follows: 40-3008. (a) If a member 38 insurer is an impaired domestic insurer, the association may, in its dis-39 40 cretion and subject to any conditions imposed by the association that do not impair the contractual obligations of the impaired insurer, that are 41 42 approved by the commissioner and that are, except in cases of court-

43 ordered conservation or rehabilitation, also approved by the impaired

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1 insurer:

2 Guarantee, assume or reinsure, or cause to be guaranteed, as-(1) 3 sumed or reinsured, any or all of the policies or contracts of the impaired insurer:

(2) provide such moneys, pledges, notes, guarantees or other means 5 as are proper to effectuate the provisions of paragraph (1) of this subsec-6 tion and assure payment of the contractual obligations of the impaired 7 insurer pending action under paragraph (1); or 8

(3) lend money to the impaired insurer.

10 (b) (1) If a member insurer is an impaired insurer, whether domes-11 tic, foreign or alien, and the insurer is not paying claims timely, then subject to the preconditions specified in paragraph (2) of this subsection, 12 the association shall, in its discretion, either: (A) Take any of the actions 13 specified in subsection (a), subject to the conditions therein; or 14

15 (B) provide substitute benefits in lieu of the contractual obligations of the impaired insurer solely for health claims, periodic annuity benefit 16 payments, death benefits, supplemental benefits and cash withdrawals for 17 policy or contract owners who petition therefor under claims of emer-18 gency or hardship in accordance with standards proposed by the associ-19 20 ation and approved by the commissioner.

21 The association shall be subject to the requirements of paragraph (2) (1) of this subsection only if: (A) The laws of the impaired insurer's state 22 23 of domicile provide that: (i) The delinquency proceeding shall not be 24 dismissed:

25 (ii) neither the impaired insurer nor its assets shall be returned to the 26 control of its shareholders or private management; and

27 (iii) it shall not be permitted to solicit or accept new business or have any suspended or revoked license restored; and until all payments of or 28 on account of the impaired insurer's contractual obligations by all guar-29 30 anty associations, along with all expenses thereof and interest on all such 31 payments and expenses, shall have been repaid to the guaranty associa-32 tions or a plan of repayment by the impaired insurer shall have been approved by the guaranty associations; and 33

(B) (i) with respect to the impaired insurer who is a domestic insurer, 34 35 it has been placed under an order of rehabilitation by a court of competent jurisdiction in this state; or 36

37 (ii) with respect to the impaired insurer who is a foreign or alien insurer: (aa) It has been prohibited from soliciting or accepting new busi-38 39 ness in this state;

40 (bb) its certificate of authority has been suspended or revoked in this 41 state: and

42 (cc) a petition for rehabilitation or liquidation has been filed in a court 43 of competent jurisdiction in its state of domicile by the commissioner of

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the state.

2 (c) If a member insurer is an insolvent insurer, the association shall,
3 in its discretion, either: (1) (A) Guarantee, assume or reinsure, or cause
4 to be guaranteed, assumed or reinsured, the policies or contracts of the
5 insolvent insurer;

6 (B) assure payment of the contractual obligations of the insolvent 7 insurer; and

8 (C) provide such moneys, pledges, guarantees or other means as are 9 reasonably necessary to discharge such duties; or

10 (2) with respect only to life and health policies, provide benefits and 11 coverages in accordance with subsection (d).

(d) When proceeding under subsection (b)(1)(B) or (c)(2), the asso-12 ciation shall, with respect only to life and health insurance policies: (1) 13 Assure payment of benefits for premiums identical to the premiums and 14 15 benefits, except for terms of conversion and renewability, that would have been payable under the policies of the insolvent insurer, for claims in-16 curred: (A) With respect to group policies, not later than the earlier of 17 the next renewal date under such policies or contracts or 45 days, but in 18 no event less than 30 days, after the date on which the association be-19 20 comes obligated with respect to such policies;

(B) with respect to individual policies, not later than the earlier of
the next renewal date, if any, under such policies or one year, but in no
event less than 30 days, from the date on which the association becomes
obligated with respect to such policies;

(2) make diligent efforts to provide all known insureds or group policyholders with respect to group policies 30 days' notice of the termination
of the benefits provided; and

with respect to individual policies, make available to each known 28 (3) 29 insured, or owner if other than the insured, and with respect to an indi-30 vidual formerly insured under a group policy who is not eligible for re-31 placement group coverage, make available substitute coverage on an in-32 dividual basis in accordance with the provisions of paragraph (4) of this subsection, if the insureds had a right under law or the terminated policy 33 to convert coverage to individual coverage or to continue an individual 34 35 policy in force until a specified age or for a specified time, during which the insurer had no right unilaterally to make changes in any provision of 36 37 the policy or had a right only to make changes in premium by class;

(4) (A) in providing the substitute coverage required under paragraph (3) of this subsection, the association may offer either to reissue
the terminated coverage or to issue an alternative policy;

(B) alternative or reissued policies shall be offered without requiring
evidence of insurability, and shall not provide for any waiting period or
exclusion that would not have applied under the terminated policy; and

1 (C) the association may reinsure any alternative or reissued policy; 2 (5) (A) alternative policies adopted by the association shall be subject 3 to the approval of the commissioner. The association may adopt alter-4 native policies of various types for future issuance without regard to any 5 particular impairment or insolvency;

alternative policies shall contain at least the minimum statutory 6 (B) provisions required in this state and provide benefits that shall not be 7 unreasonable in relation to the premiums charged. The association shall 8 9 set the premiums in accordance with a table of rates which it shall adopt. 10 The premiums shall reflect the amount of insurance to be provided and the age and class of risk of each insured, but shall not reflect any changes 11 in the health of the insured after the original policy was last underwritten; 12 13 (C) any alternative policy issued by the association shall provide coverage of a type similar to that of the policy issued by the impaired or 14 15 insolvent insurer, as determined by the association;

16 (6) if the association elects to reissue the insured's terminated cov-17 erage at a premium rate different from that charged under the terminated 18 policy, the premium shall be set by the association in accordance with 19 the amount of insurance provided and the age and class of risk, subject 20 to approval by the commissioner and by a court of competent jurisdiction;

(7) the association's obligations with respect to coverage under any
policy of the impaired or insolvent insurer or under any reissued or alternative policy shall cease on the date such coverage or policy is replaced
by another similar policy by the policyholder, the insured or the
association.

(e) When proceeding under subsection (b)(1)(B) or (c) with respect
to any policy or contract carrying guaranteed minimum interest rates, the
association shall assure the payment or crediting of a rate of interest
consistent with subsection (n)(3).

(f) Nonpayment of premiums within 31 days after the date required under the terms of any guaranteed, assumed, alternative or reissued policy or contract or substitute coverage shall terminate the association's obligations under such policy or coverage under this act with respect to such policy or coverage, except with respect to any claims incurred or any net cash surrender value which may be due in accordance with the provisions of this act.

(g) Premiums due after entry of an order of liquidation of an insolvent
insurer shall belong to and be payable at the direction of the association,
and the association shall be liable for unearned premiums due to policy
or contract owners arising after the entry of such order.

(h) The protection provided by this act shall not apply where any
guaranty protection is provided to residents of this state by the laws of
the domiciliary state or jurisdiction of the impaired or insolvent insurer

other than this state. 1

2 (i) In carrying out its duties under subsections (b) and (c), the association may, subject to approval by the court: (1) Impose permanent pol-3 icy or contract liens in connection with any guarantee, assumption or reinsurance agreement, if the association finds that the amounts which 5 can be assessed under this act are less than the amounts needed to assure 6 full and prompt performance of the association's duties under this act, or 7 that the economic or financial conditions as they affect member insurers 8 9 are sufficiently adverse to render the imposition of such permanent policy 10 or contract liens to be in the public interest; and

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(2) impose temporary moratoriums or liens on payments of cash val-11 ues and policy loans, or any other right to withdraw funds held in con-12 junction with policies or contracts, in addition to any contractual provi-13 sions for deferral of cash or policy loan value. 14

15 (i) If the association fails to act within a reasonable period of time as provided in subsections (b)(1)(B), (c) and (d) of this section, the com-16 17 missioner shall have the powers and duties of the association under this 18 act with respect to impaired or insolvent insurers.

(k) The association may render assistance and advice to the commis-19 20 sioner, upon request, concerning rehabilitation, payment of claims, con-21 tinuance of coverage or the performance of other contractual obligations of any impaired or insolvent insurer. 22

23 (l) The association shall have standing to appear before any court in 24 this state with jurisdiction over an impaired or insolvent insurer concern-25 ing which the association is or may become obligated under this act. Such 26 standing shall extend to all matters germane to the powers and duties of the association, including, but not limited to, proposals for reinsuring or 27 guaranteeing the covered policies of the impaired insurer and the deter-28 mination of the covered policies or contracts and contractual obligations. 29 30 The association shall also have the right to appear or intervene before a 31 court in another state with jurisdiction over an impaired or insolvent insurer for which the association is or may become obligated or with juris-32 diction over a third party against whom the association may have rights 33 through subrogation of the insurer's policyholders. 34

35 (m) (1) Any person receiving benefits under this act shall be deemed to have assigned the rights under any cause of action relating to the cov-36 37 ered policy or contract to the association to the extent of the benefits received because of this act, whether the benefits are payments of or on 38 39 account of contractual obligations, continuation of coverage or provision 40 of substitute or alternative coverages. The association may require an assignment to it of such rights and cause of action by any payee, policy 41 42 or contract owner, beneficiary, insured or annuitant as a condition prec-43 edent to the receipt of any right or benefits conferred by this act upon

1 such person.

(2) The subrogation rights of the association under this subsection 3 shall have the same priority against the assets of the impaired or insolvent insurer as that possessed by the person entitled to receive benefits under 4 this act. 5

(3) In addition to paragraphs (1) and (2), the association shall have 6 7 all common-law rights of subrogation and any other equitable or legal 8 remedy which would have been available to the impaired or insolvent insurer or holder of a policy or contract with respect to such policy or 9 10 contracts.

11 (n) The contractual obligations of the impaired or insolvent insurer for which the association becomes, or may become, liable shall be as great 12 as but no greater than the contractual obligations of the impaired or in-13 14 solvent insurer would have been in the absence of an impairment or 15 insolvency unless such obligations are reduced as permitted by subsection (e) but the association shall not provide coverage for: (1) Any portion of 16 a policy or contract not guaranteed by the insurer, or under which the 17 18 risk is borne by the policy or contract holder;

19 (2) any policy or contract of reinsurance, unless assumption certifi-20 cates have been issued;

21 (3) any portion of a policy or contract to the extent that the rate of 22 interest on which it is based: (A) Averaged over the period of four years 23 prior to the date on which the association becomes obligated with respect 24 to such policy or contract, exceeds a rate of interest determined by sub-25 tracting two percentage points from Moody's corporate bond yield aver-26 age averaged for that same four-year period or for such lesser period if 27 the policy or contract was issued less than four years before the association became obligated; and 28

29 (B) on and after the date on which the association becomes obligated 30 with respect to such policy or contract, exceeds the rate of interest de-31 termined by subtracting three percentage points from Moody's corporate 32 bond yield average as most recently available;

(4) any plan or program of an employer, association or similar entity 33 to provide life, health or annuity benefits to its employees or members 34 35 to the extent that such plan or program is self-funded or uninsured, including but not limited, to benefits payable by an employer, association 36 37 or similar entity under: (A) A multiple employer welfare arrangement as defined in section 514 of the employee retirement income security act of 38 1974, as amended; 39

40 (B) a minimum premium group insurance plan;

41 a stop-loss group insurance plan; or (C)

42 (D) an administrative services only contract;

43 any portion of a policy or contract to the extent that it provides (5)

dividends or experience rating credits, or provides that any fees or allow ances be paid to any person, including the policy or contract holder, in
 connection with the service to or administration of such policy or contract;

4 (6) any policy or contract issued in this state by a member insurer at
5 a time when it was not licensed or did not have a certificate of authority
6 to issue such policy or contract in this state; and

7 (7) any unallocated annuity contract, except as provided in subsection8 (b) of K.S.A. 40-3003 and amendments thereto.

9 (o) The benefits for which the association may become liable shall in 10 no event exceed the lesser of: (1) The contractual obligations for which 11 the insurer is liable or would have been liable if it were not an impaired 12 or insolvent insurer; or

(2) with respect to any one life, regardless of the number of policies
or contracts: (A) \$300,000 in life insurance death benefits, but not more
than \$100,000 in net cash surrender and net cash withdrawal values for
life insurance;

(B) \$100,000 in health insurance benefits, including any net cash sur-render and net cash withdrawal values; or

(C) \$100,000 in the present value of annuity benefits, including netcash surrender and net cash withdrawal values;

(D) In no event shall the association be liable to expend more than
\$300,000 in the aggregate with respect to any one life as provided in
paragraph (A), (B) or (C) of this subsection.

(E) Any increased limits of liability of the guaranty association by this
act shall not apply to an impaired or insolvent insurer for which the guaranty association becomes liable prior to July 1, 1993.

The provisions of subsection (o) shall not apply to annuity contracts for future economic loss procured pursuant to a judgment or settlement agreement in a medical malpractice liability action.

30 (p) The association may: (1) Enter into such contracts as are necessary
31 or proper to carry out the provisions and purposes of this act;

32 (2) sue or be sued, including taking any legal actions necessary or 33 proper to recover any unpaid assessments under K.S.A. 40-3009 and 34 amendments thereto, and, *subject to the provisions of subsection (b) of* 35 *section 5, and amendments thereto,* to settle claims or potential claims 36 against it *the association*;

(3) borrow money to effect the purposes of this act. Any notes or
other evidence of indebtedness of the association not in default shall be
legal investments for domestic insurers and may be carried as admitted
assets;

41 (4) employ or retain such persons as are necessary to handle the financial transactions of the association, and to perform such other functions or become personal or proper under this act.

43 tions as become necessary or proper under this act;

(5) take such legal action as may be necessary to avoid payment of 1 2 improper claims; or

(6) exercise, for the purposes of this act and to the extent approved by the commissioner, the powers of a domestic life or health insurer, but 4 in no case may the association issue insurance policies or annuity contracts 5 other than those issued to perform its obligations under this act. 6

(q) The association may join an organization of one or more other 7 state associations of similar purposes to further the purposes and admin-8 9 ister the powers and duties of the association.

10 (r) The association shall pay any and all persons who, as a provider, may have claims as a result of a member insurer being found insolvent 11 between March 1, 1999 and June 1, 1999. 12

13 Sec. 3. K.S.A. 40-3011 is hereby amended to read as follows: 40-3011. In addition to the duties and powers enumerated in this act: (a) 14 15 The commissioner shall: (1) Upon request of the board of directors, provide the association with a statement of the premiums in this and any 16 other appropriate state for each member insurer; 17

when an impairment is declared and the amount of the impair-18 (2)ment is determined, serve a demand upon the impaired insurer to make 19 20 good the impairment within a reasonable time; notice to the impaired 21 insurer shall constitute notice to its shareholders, if any; the failure of the insurer to promptly comply with such demand shall not excuse the as-22 23 sociation from the performance of its powers and duties under this act;

24 (3) in any liquidation or rehabilitation proceeding involving a domes-25 tic insurer, be appointed as the liquidator or rehabilitator.

26 (b) The commissioner may suspend or revoke, after notice and hear-27 ing in accordance with the provisions of the Kansas administrative procedure act, the certificate of authority to transact insurance in this state 28 of any member insurer which fails to pay an assessment when due or fails 29 30 to comply with the plan of operation. As an alternative the commissioner may levy a forfeiture on any member insurer which fails to pay an as-31 32 sessment when due. Such forfeiture shall not exceed 5% of the unpaid 33 assessment per month, but no forfeiture shall be less than \$100 per 34 month.

35 (c) (1) Any action of the board of directors or the association may be appealed to the commissioner by any member insurer if such appeal is 36 37 taken within 60 30 days of the final action being appealed. The final action appealed from shall contain any findings and conclusions necessary to 38 support the decision. Such appeal shall be subject to the provisions of the 39 40 Kansas administrative procedure act, K.S.A. 77-501 et seq., and amendments thereto, and the act for judicial review and civil enforcement of

41 42 agency actions, K.S.A. 77-601 et seq. and amendments thereto.

43 (2) If a member company is appealing an assessment, the amount

assessed shall be paid to the association and available to meet association
 obligations during the pendancy of an appeal. If the appeal on the as sessment is upheld, the amount paid in error shall be returned to the
 member insurer.

5 (d) The liquidator, rehabilitator or conservator of any impaired in-6 surer may notify all interested persons of the effect of this act.

7 Sec. 4. K.S.A. 40-3016 is hereby amended to read as follows: 40-8 3016. (a) Unless a longer period has been allowed by the commissioner, 9 a member insurer shall at its such insurer's option have the right to show 10 a certificate of contribution as an asset in the form approved by the com-11 missioner pursuant to K.S.A. 40-3009, subsection (g), at percentages of 12 the original face amount approved by the commissioner, for calendar 13 years as follows:

14 (1) One hundred percent (100%) for the calendar year of issuance;

(2) eighty percent (80%) for the first calendar year after the year of
issuance;

17 (3) sixty percent (60%) for the second calendar year after the year of
18 issuance;

(4) forty percent (40%) for the third calendar year after the year of
 issuance;

(5) twenty percent (20%) for the fourth calendar year after the year
of issuance.

(b) *Except as provided in subsection (d),* the insurer may offset the
amount written off by *it such insurer* in a calendar year under subsection
(a) above, against its premium tax liability to this state accrued with respect to business transacted in such year.

(c) Any sums acquired by refund, pursuant to K.S.A. 40-3009, subsection (f), from the association which have theretofore been written off
by contributing insurers and offset against premium taxes as provided in
subsection (b) above, and is not then needed for purposes of this act, shall
be paid by the association to the commissioner and by him the commis-*sioner* deposited with the state treasurer for credit to the general fund of
this state.

(d) No offset shall be allowed for any amount attributable to the payment of any claim and the accrued interest thereon described in subsection
(b) of K.S.A. 40-3017 and amendments thereto.

Sec. 5. K.S.A. 40-3017 is hereby amended to read as follows: 40-3017. (a) *Except as provided in subsection (b)*, there shall be no liability on the part of and no cause of action of any nature shall arise against any member insurer or its agents or employees, the association or its agents

41 or employees, members of the board of directors, or the commissioner

42 or the commissioner's representatives, for any action or omission by them

43 in the performance of their powers and duties under this act. Such im-

4 (b) Whenever the association receives from a provider a valid claim 5 for providing medical services to an insured covered under any health 6 insurance contract or policy issued, such claim shall be paid by the as-7 sociation within 60 days after receipt of such claim. If a valid claim is not 8 paid as required by this subsection, interest shall accrue at the rate of 9 $1\frac{1}{2}\%$ for each month, or fraction thereof, on the unpaid balance of such 10 claim.

11 Sec. 6. K.S.A. 40-3006, 40-3008, as amended by section 3 of 2001 12 House Bill No. 2115, 40-3011, 40-3016 and 40-3017 are hereby repealed. 13 Sec. 7 This act shall take affect and he in force from and after its

13 Sec. 7. This act shall take effect and be in force from and after its14 publication in the statute book.