# HOUSE BILL NO. 672

# INTRODUCED BY FAGG, R. JOHNSON, SCOTT, LARSON, FRANKLIN, MCCULLOCH, GAGE, SQUIRES BY REQUEST OF THE STATE AUDITOR

# IN THE HOUSE

FEBRUARY 7, 1991

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FIRST READING.

- FEBRUARY 21, 1991 COMMITTEE RECOMMEND BILL DO PASS AS AMENDED, REPORT ADOPTED.
- FEBRUARY 22, 1991 PRINTING REPORT.

POSTED ON ALTERNATIVE CONSENT CALENDAR.

INTRODUCED AND REFERRED TO COMMITTEE

INTRODUCED AND REFERRED TO COMMITTEE ON BUSINESS & ECONOMIC DEVELOPMENT.

FEBRUARY 27, 1991 THIRD READING, PASSED. AYES, 100; NOES, 0.

TRANSMITTED TO SENATE.

# IN THE SENATE

MARCH 4, 1991

ON BUSINESS & INDUSTRY.

FIRST READING.

MARCH 19, 1991 COMMITTEE RECOMMEND BILL BE CONCURRED IN AS AMENDED. REPORT ADOPTED.

MARCH 20, 1991 ON MOTION, CONSIDERATION PASSED UNTIL THE 61ST LEGISLATIVE DAY.

MARCH 22, 1991 ON MOTION, CONSIDERATION PASSED UNTIL THE 63RD LEGISLATIVE DAY.

MARCH 23, 1991 SECOND READING, CONCURRED IN.

MARCH 25, 1991 THIRD READING, CONCURRED IN. AYES, 48; NOES, 0.

RETURNED TO HOUSE WITH AMENDMENTS.

IN THE HOUSE

APRIL 9, 1991	RECEIVED FROM SENATE.
	SECOND READING, AMENDMENTS NOT CONCURRED IN.
APRIL 11, 1991	ON MOTION, CONFERENCE COMMITTEE REQUESTED AND APPOINTED.
	IN THE SENATE
APRIL 16, 1991	ON MOTION, CONFERENCE COMMITTEE REQUESTED AND APPOINTED.
	IN THE HOUSE
APRIL 19, 1991	CONFERENCE COMMITTEE REPORTED.
	SECOND READING, CONFERENCE COMMITTEE REPORT ADOPTED.
APRIL 20, 1991	THIRD READING, CONFERENCE COMMITTEE REPORT ADOPTED.
	IN THE SENATE
APRIL 20, 1991	CONFERENCE COMMITTEE REPORT ADOPTED.
	IN THE HOUSE
APRIL 22, 1991	SENT TO ENROLLING.
	REPORTED CORRECTLY ENROLLED.

#### 52nd Legislature

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INTRODUCED BY Fay A THE STATE AUDITOR 1 2 4

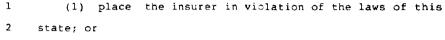
5 A BILL FOR AN ACT ENTITLED: "AN ACT TO GENERALLY REVISE THE 6 LAWS RELATING TO INSURANCE; ESTABLISHING CONSUMER PROTECTION 7 MEASURES RELATING TO RELATIONSHIPS WITH LONG-TERM CARE 8 FACILITIES, PREMIUM INCREASES, AND PREEXISTING CONDITIONS; 9 AND AMENDING SECTIONS 33-15-1106, 33-18-210, 33-20-101, 10 33-20-121, 33-20-131, AND 33-22-508, MCA."

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12 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

NEW SECTION. Section 1. Prohibited relations with long-term care facility. An insurance producer that owns, manages, supervises, operates, maintains, or works in a long-term care facility as defined in 37-9-101 may not solicit, negotiate, transact, or effectuate a life or disability policy or certificate of insurance for a resident of a long-term care facility.

20 <u>NEW SECTION.</u> Section 2. Premium increase restriction 21 -- exception. An insurer may not increase a premium in an 22 individual or group disability insurance policy more 23 frequently than once during a 12-month period unless failure 24 to increase the premium more frequently than once during the 25 12-month period would:



3 (2) cause the financial impairment of the insurer to 4 the extent that further transaction of insurance by the 5 insurer injures or is hazardous to its policyholders or to 6 the public.

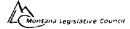
NEW SECTION. Section 3. Preexisting conditions. (1) A 7 8 policy or certificate of disability insurance may not exclude coverage for a condition for which no medical advice 9 10 or treatment was recommended by or received from a provider 11 of health care services within 5 years preceding the 12 effective date of coverage of an insured person unless the 13 condition begins within 6 months following the effective 14 date of coverage of an insured person.

15 (2) An insurer may use an application form designed to 16 elicit the complete health history of an applicant and, on 17 the basis of the answers on that application, perform 18 underwriting in accordance with the insurer's established 19 underwriting standards.

20 Section 4. Section 33-15-1106, MCA, is amended to read: 21 "33-15-1106. Renewal with altered terms. (1) If an 22 insurer offers or purports to renew a policy but on less 23 favorable terms, at a higher rate, or at a higher rating 24 plan, the new terms, rate, or rating plan take effect on the 25 policy renewal date only if the insurer has mailed or INTRODUCED BILL

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delivered notice of the new terms, rate, or rating plan to 1 the insured at least 30 days before the expiration date. If 2 3 the insured has not been so notified, he may cancel the renewal policy within 30 days after receiving the notice. 4 5 The insurer shall continue coverage for a period of not less 6 than 30 days after mailing or delivery of the notice. If the insured terminates the policy within the 30-day period, the 7 insurer shall calculate the earned premium pro rata based 8 upon the prior policy's rate. The new rate is effective only 9 after the required 30-day notification period has been met. 10 11 If the insured does not terminate the policy, the premium 12 increase and other changes are effective the day following the prior policy's expiration or anniversary date. 13

14 (2) This section does not apply if:

15 (a)--the-change-is-a-rate-or-rating-plan-filed-with--the 16 commissioner--and-applicable-to-the-entire-classification-or 17 classification-system-to-which-the-policy-belongs;-or

18 (b) the increase in the rate or the rating plan, or
19 both, results from a classification change based on the
20 altered nature or extent of the risk insured against."

Section 5. Section 33-18-210, MCA, is amended to read:
"33-18-210. Unfair discrimination and rebates
prohibited -- property, casualty, and surety insurances. (1)
No <u>A</u> title, property, casualty, or surety insurer or any <u>an</u>
employee, representative, insurance producer, or solicitor

thereof of an insurer may not, as an inducement to purchase insurance or after insurance has been effected, pay, allow, or give or offer to pay, allow, or give, directly or indirectly, any a:

5 (a) rebate, discount, abatement, credit, or reduction
6 of the premium named in the insurance policy; any

7 (b) special favor or advantage in the dividends or
8 other benefits to accrue thereon on the policy; or any

9 (c) valuable consideration or inducement not specified
10 in the policy, except to the extent provided for in an
11 applicable filing with the commissioner as provided by law.

12 (2) No <u>An</u> insured named in a policy or <u>any an</u> employee
13 of the insured may <u>not</u> knowingly receive or accept, directly
14 or indirectly, <u>any-such</u> a;

15 (a) rebate, discount, abatement, credit, or reduction 16 of premium;

17 (b) special favor or advantage; or

18 (c) valuable consideration or inducement.

19 (3) No-such <u>An</u> insurer may <u>not</u> make or permit any 20 unfair discrimination in the premium or rates charged for 21 insurance, in the dividends or other benefits payable 22 thereon <u>on insurance</u>, or in any other of the terms and 23 conditions of the insurance either between insureds or 24 property having like insuring or risk characteristics or 25 between insureds because of race, color, creed, religion, or

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1 national origin.

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2 (4) Nothing--in--this This section may not be construed 3 as prohibiting the payment of commissions or other 4 compensation to duly licensed insurance producers or 5 solicitors or as prohibiting an insurer from allowing or 6 returning lawful dividends, savings, or unabsorbed premium 7 deposits to its participating policyholders, members, or 8 subscribers.

9 (5) No--such <u>An</u> insurer may <u>not</u> make or permit eny 10 unfair discrimination between individuals or risks of the 11 same class and of essentially the same hazards by refusing 12 to issue, refusing to renew, canceling, or limiting the 13 amount of insurance coverage on a property or casualty risk 14 because of the geographic location of the risk, unless:

(a) the refusal, cancellation, or limitation is for a
business purpose which that is not a mere pretext for unfair
discrimination; or

18 (b) the refusal, cancellation, or limitation is
19 required by law or regulatory mandate.

(6) No-such <u>An</u> insurer may <u>not</u> make or permit any
unfair discrimination between individuals or risks of the
same class and of essentially the same hazards by refusing
to issue, refusing to renew, canceling, or limiting the
amount of insurance coverage on a residential property risk,
or the personal property contained therein, because of the

1 age of the residential property, unless:

2 (a) the refusal, cancellation, or limitation is for a
3 business purpose which that is not a mere pretext for unfair
4 discrimination; or

5 (b) the refusal, cancellation, or limitation is6 required by law or regulatory mandate.

7 (7) No-such <u>An</u> insurer may <u>not</u> refuse to insure, refuse 8 to continue to insure, or limit the amount of coverage 9 available to an individual because of the sex or marital 10 status of the individual, but an insurer may take marital 11 status into account for the purpose of defining persons 12 eligible for dependents' benefits.

(8) No--such An insurer may not terminate or modify 13 14 coverage or refuse to issue or refuse to renew any a property or casualty policy or contract of insurance solely 15 16 because the applicant or insured or any employee of either 17 is mentally or physically impaired; however, this subsection does not apply to accident and health insurance sold by a 18 casualty insurer, and this subsection is may not to be 19 20 interpreted to modify any other provision of law relating to the termination, modification, issuance, or renewal of any 21 insurance policy or contract. 22

(9) An insurer may not refuse to insure, refuse to
 continue to insure, charge higher rates, or limit the amount
 of coverage available to an individual based on adverse

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1	information contained in a driving record that is 3 years
2	old or older.
3	(10) An insurer may not charge points or surcharge a
4	private passenger motor vehicle policy because of a claim
5	submitted under the insured's policy if the insured was not
6	at fault."
7	Section 6. Section 33-20-101, MCA, is amended to read:
8	<b>"33-20-101. Scope. Parts</b> (1) Except as provided in
9	subsection (2), parts 1 through 5 of this chapter apply only
10	to contracts of life insurance and annuities, other than
11	reinsurance, group life insurance, and group annuities.
12	(2) Section 33-20-131 applies to group life insurance
13	and group annuities."
14	Section 7. Section 33-20-121, MCA, is amended to read:
15	"33-20-121. Prohibited provisions limitations on
16	liability. (1) No A policy of life insurance may not be
17	delivered or issued for delivery in this state if it
18	contains any-of-the-following-provisions a provision:
19	(a) a- <del>provision</del> for a period shorter than that provided
20	by statute within which an action at law or in equity may be
21	commenced on the policy; or
22	(b) aprovisionwhich that excludes or restricts
23	liability for death caused in a certain specified manner or
24	occurring while the insured has a specified status, except
25	that a policy may contain provisions excluding or

1 restricting coverage as specified therein in the policy in 2 the event of death under-any-one-or-more-of--the--following 3 circumstances:

4 (i) death as a result, directly or indirectly, of war, 5 declared or undeclared, or of action by military forces or of any act or hazard of such war or action or of service in б the military, naval, or air forces or in civilian forces 7 8 auxiliary thereto or from any cause while a member of such military, naval, or air forces of any country at war, 9 declared or undeclared, or of any country engaged in such 10 11 military action;

12 (ii) death as a result of aviation or any air travel or 13 flight;

14 (iii) death as a result of a specified hazardous 15 occupation or occupations;

16 (iv) death while the insured is a resident outside the 17 continental United States and Canada; or

18 (v) death within 2 years from the date of issue of the 19 policy as a result of suicide, while seriously mentally ill 20 or otherwise. If a life insurance policy contains a 21 dependent rider, the dependent coverage may be continued 22 upon payment of the premium for the dependent rider. 23 (2) A policy which that contains any an exclusion or

24 restriction pursuant to subsection (1) of-this-section-shall
25 must also provide that in the event of death under the

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circumstances to which any-such the exclusion or restriction 1 is applicable, the insurer will pay an amount not less than 2 a reserve determined according to the commissioner's reserve 3 valuation method apon on the basis of the mortality table 4 interest rate specified in the policy for the 5 and calculation of nonforfeiture benefits (or if the policy 6 provides for no such benefits, computed according to a 7 8 mortality table and interest rate determined by the insurer 9 and specified in the policy), with adjustment for 10 indebtedness or dividend credit.

11 (3) This section does not apply to industrial life 12 insurance, group life insurance, disability insurance, 13 reinsurance, or annuities or to any a provision in a life 14 insurance policy relating to disability benefits or to 15 additional benefits in the event of death by accident or 16 accidental means.

17 (4) Nothing--contained--in--this This section prohibits
18 any does not prohibit a provision which that in the opinion
19 of the commissioner is more favorable to the policyholder
20 than a provision permitted by this section."

Section 8. Section 33-20-131, MCA, is amended to read: "33-20-131. Policy loan or certificate loan. (1) Except Subject to the provisions of 33-20-101(2) and except as provided in 33-20-132 through 33-20-136, there shall roust be a provision that after 3 full years' premiums have been paid

and after the policy or certificate has a cash surrender 1 2 value and while no a premium is not in default beyond the 3 grace period for payment, the insurer will advance, on proper assignment or pledge of the policy or certificate and 4 5 on the sole security thereof of the policy or certificate, 6 at a specified rate of interest not exceeding 6% a year, an 7 amount equal to or, at the option of the party entitled 8 thereto to the loan, less than the loan value of the policy 9 or certificate. The commissioner may authorize a rate of 10 interest in excess of 6%, but not in excess of 8% a year (or 7.4% if payable annually in advance), for policies or 11 12 certificates issued on or after January 1, 1980, if the 13 insurer provides adequate written certification that the -14 holders of such the policies will benefit fully from the 15 increased earnings of the insurer resulting from the use of 16 an interest rate in excess of the 6% per annum, such as from 17 higher interest income to the company on policy or 18 certificate loans, higher investment yield resulting from a 19 reduction in policy or certificate loans because of the 20 higher policy or certificate loan interest rate, and any 21 additional income to the company resulting from the use of 22 such the higher interest rate in any manner whatsoever. 23 These benefits to the policyholder shall must be reflected 24 through higher dividends, or lower premiums, or both. The 25 loan value of the policy shall must be at least equal to the

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1 cash surrender value at the end of the then current policy or certificate year, provided that the insurer may deduct, 2 either from such the loan value or from the proceeds of the 3 loan, any existing indebtedness not already deducted in 4 determining such the cash surrender value (including any 5 interest then accrued but not due), any an unpaid balance of 6 7 the premium for the current policy or certificate year, and 8 interest on the loan to the end of the current policy or 9 certificate year unless the policyowner by written notice to the insurer elects to defer payment of interest until it has 10 accrued. The policy or certificate may also provide that if 11 interest on any indebtedness is not paid when due, it shall 12 then must be added to the existing indebtedness and shall 13 must bear interest at the same rate, and that if and when 14 15 the total indebtedness on the policy or certificate, including interest due or accrued, equals or exceeds the 16 amount of the its loan value thereof, then the policy shall 17 18 terminate or certificate terminates and become is void. The policy shall or certificate must reserve to the insurer the 19 right to defer the granting of a loan, other than for the 20 payment of any a premium to the insurer, for 6 months after 21 application therefor for the loan. The policy 22 or certificate, at the insurer's option, may provide for an 23 automatic premium loan, subject to an election of the party 24 entitled to elect. 25

(2) This section shall does not apply to term policies or to term insurance benefits provided by rider or supplemental policy provisions or to industrial life

4 insurance policies."

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5 Section 9. Section 33-22-508, MCA, is amended to read: 6 "33-22-508. Conversion on termination of eligibility. 7 (1) A group disability insurance policy issued or renewed after October 1, 1981, shall must contain a provision that 8 9 if the insurance or any portion of it on a person, his dependents, or family members covered under the policy 10 ceases because of termination of his employment or of his 11 membership in the class or classes eligible for coverage 12 under the policy or as a result of his employer 13 discontinuing his business or as a result of his employer 14 discontinuing the group disability insurance policy and not 15 16 providing for any other group disability insurance or plan, 17 such and if the person shall;-provided-he had been insured for a period of 3 months, be he is entitled to have issued 18 19 to him by the insurer, without evidence of insurability, 20 group coverage or an individual policy issued by the insurer 21 or, in the absence of an individual policy issued by the 22 insurer, a group policy issued by the insurer, of hospital 23 or medical service insurance on himself, his dependents, or 24 family members7--provided if application for the individual policy shall-be is made and the first premium tendered to 25

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1 the insurer within 31 days after the termination of group 2 coverage.

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3 (2) The individual policy or group policy, at the 4 option of the insured, shall may be on any of-the-forms form 5 then customarily issued by the insurer to individual or 6 group policyholders, with the exception of those--policies 7 whose a policy the eligibility for which is determined by 8 affiliation other than by employment with a common entity.

9 (3) The premium on the individual policy shall or group 10 policy must be at the insurer's then customary rate 11 applicable to the coverage of the individual or group 12 policy."

NEW SECTION. Section 10. Codification instruction. (1)
[Section 1] is intended to be codified as an integral part
of Title 33, chapter 17, part 11, and the provisions of
Title 33, chapter 17, part 11, apply to [section 1].

17 (2) [Section 2] is intended to be codified as an 18 integral part of Title 33, chapter 22, part 1, and the 19 provisions of Title 33, chapter 22, part 1, apply to 20 [section 2].

21 (3) [Section 3] is intended to be codified as an 22 integral part of Title 33, chapter 22, part 2, and the 23 provisions of Title 33, chapter 22, part 2, apply to 24 [section 3].

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52nd Legislature

HB 0672/02 APPROVED BY COMM. ON BUSINESS AND ECONOMIC DEVELOPMENT

1	HOUSE BILL NO. 672
2	INTRODUCED BY FAGG, R. JOHNSON, SCOTT, LARSON, FRANKLIN,
3	MCCULLOCH, GAGE, SQUIRES
4	BY REQUEST OF THE STATE AUDITOR
5	
6	A BILL FOR AN ACT ENTITLED: "AN ACT TO GENERALLY REVISE THE
7	LAWS RELATING TO INSURANCE; ESTABLISHING CONSUMER FROTECTION

8 MEASURES RELATING TO RELATIONSHIPS WITH LONG-TERM CARE 9 FACILITIES, PREMIUM INCREASES, AND PREEXISTING CONDITIONS; 10 AND AMENDING SECTIONS 33-15-1106, 33-18-210, 33-20-101, 11 33-20-121, 33-20-131, AND 33-22-508, MCA."

12

13 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

14 <u>NEW SECTION.</u> Section 1. Prohibited relations with 15 long-term care facility. An insurance producer that owns, 16 manages, supervises, operates, maintains, or works in a 17 long-term care facility as defined in 37-9-101 may not 18 solicit, negotiate, transact, or effectuate a life or 19 disability policy or certificate of insurance for a resident 20 of a long-term care facility.

21 <u>NEW SECTION.</u> Section 2. Premium increase restriction
22 -- exception. (1) An insurer may not increase a premium in
23 an individual INDIVIDUAL'S or group AN INDIVIDUAL GROUP'S
24 disability insurance policy more frequently than once during
25 a 12-month period unless failure to increase the premium

1 more frequently than once during the 12-month period would: (1)(A) place the insurer in violation of the laws of 2 3 this state; or (2)(B) cause the financial impairment of the insurer to 4 5 the extent that further transaction of insurance by the 6 insurer injures or is hazardous to its policyholders or to 7 the public. 8 (2) SUBSECTION (1) DOES NOT APPLY TO A PREMIUM INCREASE NECESSITATED BY A STATE OR FEDERAL LAW, COURT DECISION, OR 9 RULE ADOPTED BY AN AGENCY OF COMPETENT JURISDICTION OF THE 10 11 STATE OR FEDERAL GOVERNMENT. 12 NEW SECTION. Section 3. Preexisting conditions. (1) A policy or certificate of disability insurance may not 13 14 exclude coverage for a condition for which no medical advice 15 or treatment was recommended by or received from a provider of health care services UNLESS THE CONDITION OCCURRED within 16 17 5 years preceding the effective date of coverage of an 18 insured person OR unless the condition begins within 6 12 19 months following the effective date of coverage of an 20 insured person. 21 (2) An insurer may use an application form designed to 22 elicit the complete health history of an applicant and, on 23 the basis of the answers on that application, perform

- 24 underwriting in accordance with the insurer's established
- 25 underwriting standards.



-2- HB 672 SECOND READING

1 Section 4. Section 33-15-1106, MCA, is amended to read: 2 "33-15-1106. Renewal with altered terms. (1) If an 3 insurer offers or purports to renew a policy but on less favorable terms, at a higher rate, or at a higher rating 4 5 plan, the new terms, rate, or rating plan take effect on the б policy renewal date only if the insurer has mailed or 7 delivered notice of the new terms, rate, or rating plan to the insured at least 30 days before the expiration date. If 8 9 the insured has not been so notified, he may cancel the renewal policy within 30 days after receiving the notice. 10 11 The insurer shall continue coverage for a period of not less 12 than 30 days after mailing or delivery of the notice. If the 13 insured terminates the policy within the 30-day period, the 14 insurer shall calculate the earned premium pro rata based upon the prior policy's rate. The new rate is effective only 15 16 after the required 30-day notification period has been met. 17 If the insured does not terminate the policy, the premium 18 increase and other changes are effective the day following 19 the prior policy's expiration or anniversary date.

20 (2) This section does not apply if \*

21 (a)--the-change-is-a-rate-or-rating-plan-filed-with--the 22 commissioner--and-applicable-to-the-entire-classification-or 23 classification-system-to-which-the-policy-belongs;-or

24 (b) the increase in the rate or the rating plan, or
25 both, results from a classification change based on the

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1	altered nature or extent of the risk insured against."
2	Section 5. Section 33-18-210, MCA, is amended to read:
3	"33-18-210. Unfair discrimination and rebates
4	prohibited property, casualty, and surety insurances. (1)
5	No A title, property, casualty, or surety insurer or any an
6	employee, representative, insurance producer, or solicitor
7	thereof of an insurer may not, as an inducement to purchase
8	insurance or after insurance has been effected, pay, allow,
9	or give or offer to pay, allow, or give, directly or
10	indirectly, any <u>a:</u>
11	(a) rebate, discount, abatement, credit, or reduction
12	of the premium named in the insurance policy; any
13	(b) special favor or advantage in the dividends or
14	other benefits to accrue thereon on the policy; or any
15	(c) valuable consideration or inducement not specified
16	in the policy, except to the extent provided for in an
17	applicable filing with the commissioner as provided by law.
18	(2) No <u>An</u> insured named in a policy or <del>any</del> <u>an</u> employee
19	of the insured may <u>not</u> knowingly receive or accept, directly
20	or indirectly, <b>any-such</b> <u>a:</u>
21	(a) rebate, discount, abatement, credit, or reduction
22	of premium;
23	(b) special favor or advantage; or
24	(c) valuable consideration or inducement.
25	(3) No-such <u>An</u> insurer may <u>not</u> make or permit any

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1 unfair discrimination in the premium or rates charged for 2 insurance, in the dividends or other benefits payable 3 thereon on insurance, or in any other of the terms and 4 conditions of the insurance either between insureds or 5 property having like insuring or risk characteristics or 6 between insureds because of race, color, creed, religion, or 7 national origin.

8 (4) Nothing--in--this This section may not be construed 9 as prohibiting the payment of commissions or other 10 compensation to duly licensed insurance producers or 11 solicitors or as prohibiting an insurer from allowing or 12 returning lawful dividends, savings, or unabsorbed premium 13 deposits to its participating policyholders, members, or 14 subscribers.

15 (5) No--such <u>An</u> insurer may <u>not</u> make or permit any 16 unfair discrimination between individuals or risks of the 17 same class and of essentially the same hazards by refusing 18 to issue, refusing to renew, canceling, or limiting the 19 amount of insurance coverage on a property or casualty risk 20 because of the geographic location of the risk, unless:

(a) the refusal, cancellation, or limitation is for a
business purpose which that is not a mere pretext for unfair
discrimination; or

24 (b) the refusal, cancellation, or limitation is25 required by law or regulatory mandate.

1 (6) No-such <u>An</u> insurer may <u>not</u> make or permit any 2 unfair discrimination between individuals or risks of the 3 same class and of essentially the same hazards by refusing 4 to issue, refusing to renew, canceling, or limiting the 5 amount of insurance coverage on a residential property risk, 6 or the personal property contained therein, because of the 7 age of the residential property, unless:

8 (a) the refusal, cancellation, or limitation is for a
9 business purpose which that is not a mere pretext for unfair
10 discrimination; or

11 (b) the refusal, cancellation, or limitation is 12 required by law or regulatory mandate.

13 (7) No-such An insurer may not refuse to insure, refuse 14 to continue to insure, or limit the amount of coverage 15 available to an individual because of the sex or marital 16 status of the individual, but an insurer may take marital 17 status into account for the purpose of defining persons 18 eligible for dependents' benefits.

19 (8) No--such <u>An</u> insurer may <u>not</u> terminate or modify 20 coverage or refuse to issue or refuse to renew <u>any a</u> 21 property or casualty policy or contract of insurance solely 22 because the applicant or insured or any employee of either 23 is mentally or physically impaired; however, this subsection 24 does not apply to accident and health insurance sold by a 25 casualty insurer, and this subsection <u>is may</u> not to be

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interpreted to modify any other provision of law relating to
 the termination, modification, issuance, or renewal of any
 insurance policy or contract.

4 (9) An insurer may not refuse to insure, refuse to 5 continue to insure, charge higher rates, or limit the amount 6 of coverage available to an individual based on adverse 7 information contained in a driving record that is 3 years 8 old or older. 9 (10) An insurer may not charge points or surcharge a

9 (10) An insurer may not charge points or surcharge a private passenger motor vehicle policy because of a claim submitted under the insured's policy if the insured was not at fault."

13 Section 6. Section 33-20-101, MCA, is amended to read: 14 "33-20-101. Scope. Parts (1) Except as provided in 15 subsection (2), parts 1 through 5 of this chapter apply only 16 to contracts of life insurance and annuities, other than 17 reinsurance, group life insurance, and group annuities.

18 (2) Section 33-20-131 applies to group life insurance and group annuities."

Section 7. Section 33-20-121, MCA, is amended to read: "33-20-121. Prohibited provisions -- limitations on liability. (1) No <u>A</u> policy of life insurance may <u>not</u> be delivered or issued for delivery in this state if it contains any-of-the-following-provisions <u>a provision</u>:

25 (a) a-provision for a period shorter than that provided

by statute within which an action at law or in equity may be
 commenced on the policy; or

3 (b) a---provision--which that excludes or restricts 4 liability for death caused in a certain specified manner or 5 occurring while the insured has a specified status, except 6 that a policy may contain provisions excluding or 7 restricting coverage as specified therein in the policy in 8 the event of death under-any-one-or-more--of--the--following 9 circumstances:

10 (i) death as a result, directly or indirectly, of war, 11 declared or undeclared, or of action by military forces or 12 of any act or hazard of such war or action or of service in 13 the military, naval, or air forces or in civilian forces 14 auxiliary thereto or from any cause while a member of such 15 military, naval, or air forces of any country at war, 16 declared or undeclared, or of any country engaged in such 17 military action;

18 (ii) death as a result of aviation or any air travel or 19 flight;

20 (iii) death as a result of a specified hazardous
21 occupation or occupations;

(iv) death while the insured is a resident outside thecontinental United States and Canada; or

24 (v) death within 2 years from the date of issue of the
25 policy as a result of suicide, while seriously mentally ill

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or otherwise. If a life insurance policy contains a
 dependent rider, the dependent coverage may be continued
 upon payment of the premium for the dependent rider.

4 (2) A policy which that contains any an exclusion or 5 restriction pursuant to subsection (1) of-this-section-shall 6 must also provide that in the event of death under the circumstances to which any-such the exclusion or restriction 7 8 is applicable, the insurer will pay an amount not less than a reserve determined according to the commissioner's reserve 9 valuation method upon on the basis of the mortality table 10 and interest rate specified in the policy for the 11 12 calculation of nonforfeiture benefits (or if the policy 13 provides for no such benefits, computed according to a mortality table and interest rate determined by the insurer 14 and specified in the policy), with adjustment for 15 16 indebtedness or dividend credit.

17 (3) This section does not apply to industrial life 18 insurance, group life insurance, disability insurance, 19 reinsurance, or annuities or to any <u>a</u> provision in a life 20 insurance policy relating to disability benefits or to 21 additional benefits in the event of death by accident or 22 accidental means.

(4) Nothing--contained--in--this This section prohibits
any does not prohibit a provision which that in the opinion
of the commissioner is more favorable to the policyholder

-9-

1 than a provision permitted by this section."

Section 8. Section 33-20-131, MCA, is amended to read: 2 3 "33-20-131. Policy loan or certificate loan. (1) Except 4 Subject to the provisions of 33-20-101(2) and except as provided in 33-20-132 through 33-20-136, there shall must be 5 a provision that after 3 full years' premiums have been paid 6 and after the policy or certificate has a cash surrender 7 value and while no a premium is not in default beyond the 8 9 grace period for payment, the insurer will advance, on proper assignment or pledge of the policy or certificate and 10 11 on the sole security thereof of the policy or certificate, at a specified rate of interest not exceeding 6% a year, an 12 13 amount equal to or, at the option of the party entitled 14 thereto to the loan, less than the loan value of the policy 15 or certificate. The commissioner may authorize a rate of interest in excess of 6%, but not in excess of 8% a year (or 16 17 7.4% if payable annually in advance), for policies or certificates issued on or after January 1, 1980, if the 18 insurer provides adequate written certification that the 19 20 holders of such the policies will benefit fully from the 21 increased earnings of the insurer resulting from the use of 22 an interest rate in excess of the 6% per annum, such as from 23 higher interest income to the company on policy or certificate leans, higher investment yield resulting from a 24 reduction in policy or certificate loans because of the 25

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higher policy or certificate loan interest rate, and any 1 additional income to the company resulting from the use of 2 3 such the higher interest rate in any manner whatsoever. 4 These benefits to the policyholder shall must be reflected 5 through higher dividends, or lower premiums, or both. The loan value of the policy shall must be at least equal to the 6 7 cash surrender value at the end of the then current policy or certificate year, provided that the insurer may deduct, 8 9 either from such the loan value or from the proceeds of the loan, any existing indebtedness not already deducted in 10 11 determining such the cash surrender value (including any interest then accrued but not due), any an unpaid balance of 12 13 the premium for the current policy or certificate year, and 14 interest on the loan to the end of the current policy or 15 certificate year unless the policyowner by written notice to the insurer elects to defer payment of interest until it has 16 17 accrued. The policy or certificate may also provide that if interest on any indebtedness is not paid when due, it shall 18 19 then must be added to the existing indebtedness and shall must bear interest at the same rate, and that if and when 20 21 the total indebtedness on the policy or certificate, 22 including interest due or accrued, equals or exceeds the 23 amount of the its loan value thereof, then the policy shall terminate or certificate terminates and become is void. The 24 policy shall or certificate must reserve to the insurer the 25

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right to defer the granting of a loan, other than for the payment of any <u>a</u> premium to the insurer, for 6 months after application therefor for the loan. The policy or certificate, at the insurer's option, may provide for <u>an</u> automatic premium loan, subject to an election of the party entitled to elect.

7 (2) This section shall does not apply to term policies
8 or to term insurance benefits provided by rider or
9 supplemental policy provisions or to industrial life
10 insurance policies."

11 Section 9. Section 33-22-508, MCA, is amended to read: 12 \*33-22-508. Conversion on termination of eligibility. (1) A group disability insurance policy issued or renewed 13 14 after October 1, 1981, shall must contain a provision that if the insurance or any portion of it on a person, his 15 16 dependents, or family members covered under the policy 17 ceases because of termination of his employment or of his 18 membership in the class or classes eligible for coverage 19 under the policy or as a result of his employer 20 discontinuing his business or as a result of his employer 21 discontinuing the group disability insurance policy and not 22 providing for any other group disability insurance or plan, 23 such and if the person shall7-provided-he had been insured for a period of 3 months, be he is entitled to have issued 24 25 to him by the insurer, without evidence of insurability,

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-12-

1 group coverage or an individual policy issued by the insurer 2 or, in the absence of an individual policy issued by the 3 insurer, a group policy issued by the insurer, of hospital 4 or medical service insurance on himself, his dependents, or 5 family members,--provided if application for the individual 6 policy shall-be is made and the first premium tendered to 7 the insurer within 31 days after the termination of group 8 coverage.

9 (2) The individual policy or group policy, at the 10 option of the insured, shall may be on any of-the-forms form 11 then customarily issued by the insurer to individual or 12 group policyholders, with the exception of those--policies 13 whose a policy the eligibility for which is determined by 14 affiliation other than by employment with a common entity.

15 (3) The premium on the individual policy shall or group 16 policy must be at the insurer's then customary rate 17 applicable to the coverage of the individual or group 18 policy."

NEW SECTION. Section 10. Codification instruction. (1)
[Section 1] is intended to be codified as an integral part
of Title 33, chapter 17, part 11, and the provisions of
Title 33, chapter 17, part 11, apply to [section 1].

(2) [Section 2] is intended to be codified as an
integral part of Title 33, chapter 22, part 1, and the
provisions of Title 33, chapter 22, part 1, apply to

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[section 2].
(3) [Section 3] is intended to be codified as an

integral part of Title 33, chapter 22, part 2, and the
provisions of Title 33, chapter 22, part 2, apply to

5 [section 3].

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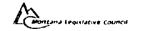
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1	HOUSE BILL NO. 672
2	INTRODUCED BY FAGG, R. JOHNSON, SCOTT, LARSON, FRANKLIN,
3	MCCULLOCH, GAGE, SQUIRES
4	BY REQUEST OF THE STATE AUDITOR
5	
6	A BILL FOR AN ACT ENTITLED: "AN ACT TO GENERALLY REVISE THE
7	LAWS RELATING TO INSURANCE; ESTABLISHING CONSUMER PROTECTION
8	MEASURES RELATING TO RELATIONSHIPS WITH LONG-TERM CARE
9	FACILITIES, PREMIUM INCREASES, AND PREEXISTING CONDITIONS:
10	AND AMENDING SECTIONS 33-15-1106, 33-18-210, 33-20-101,
11	33-20-121, 33-20-131, AND 33-22-508, MCA."
12	
13	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

HOUSE BILL NO 672

NEW SECTION. Section 1. Prohibited 14 relations with 15 long-term care facility. An insurance producer that owns, manages, supervises, operates, maintains, or works in a 16 17 long-term care facility as defined in 37-9-101 may not solicit, negotiate, transact, or effectuate a life or 18 19 disability policy or certificate of insurance for a resident 20 of a long-term care facility.

NEW SECTION. Section 2. Premium increase restriction 21 22 -- exception. (1) An insurer may not increase a premium in 23 an individual INDIVIDUAL'S or group AN INDIVIDUAL GROUP'S 24 disability insurance policy more frequently than once during a 12-month period unless failure to increase the premium 25



There are no changes in this bill, and will not be reprinted. Please refer to yellow copy for complete text.

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# HB 672 THIRD READING

Page 2 of 2 March 19, 1991

#### SENATE STANDING COMMITTEE REPORT

Page 1 of 2 March 19, 1991

#### MR. PRESIDENT:

We, your committee on Business and Industry having had under consideration House Bill No. 672 (third reading copy -- blue), respectfully report that House Bill No. 672 be amended and as so amended be concurred in:

1. Title, line 9. Following: "INCREASES," Insert: "DISCRIMINATION IN INSURANCE,"

2. Title, line 10. Following: "SECTIONS" Insert: "33-1-502"

3. Page 2, lines 18 through 20. Strike: "<u>OR</u>" on line 18 through "person" on line 20 Following, "." Insert: "The condition may only be excluded for a maximum of 12 months."

4. Page 7, line 6. Following: "<u>based</u>" Insert: "solely"

5. Page 13, line 19.

Following: line 18

(1) is in any respect in violation of or does not comply with this code:

(2) contains or incorporates by reference, where such incorporation is otherwise permissible, any inconsistent, ambiguous, or misleading clauses or exceptions and conditions which deceptively affect the risk purported to be assumed in the general coverage of the contract, including a provision in a casualty insurance form permitting defense costs within limits, except as permitted by the commissioner in his discretion;

(3) has any title, heading, or other indication of its provisions which is misleading;

 (4) is printed or otherwise reproduced in such manner as to render any provision of the form substantially illegible.
 (5) contains any provision that yiolates the provisions of

<u>49-2-309.</u>"" Renumber: subsequent section

Signed, John J.D. / Lynch, Chairman

<u>\$73 3/19</u> 12:40

SENATE

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#### 52nd Legislature

#### HB 0672/03

1	HOUSE BILL NO. 672
2	INTRODUCED BY FAGG, R. JOHNSON, SCOTT, LARSON, FRANKLIN,
3	MCCULLOCH, GAGE, SQUIRES
4	BY REQUEST OF THE STATE AUDITOR
5	
6	A BILL FOR AN ACT ENTITLED: "AN ACT TO GENERALLY REVISE THE
7	LAWS RELATING TO INSURANCE; ESTABLISHING CONSUMER PROTECTION
8	MEASURES RELATING TO RELATIONSHIPS WITH LONG-TERM CARE
9	FACILITIES, PREMIUM INCREASES, DISCRIMINATION IN INSURANCE,
10	AND PREEXISTING CONDITIONS; AND AMENDING SECTIONS 33-1-502,
11	33-15-1106, 33-18-210, 33-20-101, 33-20-121, 33-20-131, AND
12	33-22-508, MCA."
13	
14	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

15 NEW SECTION. Section 1. Prohibited relations with 16 long-term care facility. An insurance producer that owns, 17 manages, supervises, operates, maintains, or works in a 18 long-term care facility as defined in 37-9-101 may not 19 solicit, negotiate, transact, or effectuate a life or 20 disability policy or certificate of insurance for a resident 21 of a long-term care facility.

22 NEW\_SECTION. Section 2. Premium increase restriction 23 -- exception. (1) An insurer may not increase a premium in 24 an individual INDIVIDUAL'S or group AN INDIVIDUAL GROUP'S 25 disability insurance policy more frequently than once during



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1	a 12-month period unless failure to increase the premium
2	more frequently than once during the 12-month period would:
3	(1) place the insurer in violation of the laws of
4	this state; or
5	<pre>{2+(B) cause the financial impairment of the insurer to</pre>
6	the extent that further transaction of insurance by the
7	insurer injures or is hazardous to its policyholders or to
8	the public.
9	(2) SUBSECTION (1) DOES NOT APPLY TO A PREMIUM INCREASE
10	NECESSITATED BY A STATE OR FEDERAL LAW, COURT DECISION, OR
11	RULE ADOPTED BY AN AGENCY OF COMPETENT JURISDICTION OF THE
12	STATE OR FEDERAL GOVERNMENT.
13	NEW SECTION. Section 3. Preexisting conditions. (1) A
13 14	NEW SECTION. Section 3. Preexisting conditions. (1) A policy or certificate of disability insurance may not
14	policy or certificate of disability insurance may not
14 15	policy or certificate of disability insurance may not exclude coverage for a condition for which no medical advice
14 15 16	policy or certificate of disability insurance may not exclude coverage for a condition for which no medical advice or treatment was recommended by or received from a provider
14 15 16 17	policy or certificate of disability insurance may not exclude coverage for a condition for which no medical advice or treatment was recommended by or received from a provider of health care services <u>UNLESS THE CONDITION OCCURRED</u> within
14 15 16 17 18	policy or certificate of disability insurance may not exclude coverage for a condition for which no medical advice or treatment was recommended by or received from a provider of health care services <u>UNLESS THE CONDITION OCCURRED</u> within 5 years preceding the effective date of coverage of an
14 15 16 17 18 19	policy or certificate of disability insurance may not exclude coverage for a condition for which no medical advice or treatment was recommended by or received from a provider of health care services <u>UNLESS THE CONDITION OCCURRED</u> within 5 years preceding the effective date of coverage of an insured person $\Theta R$ unless-the-condition-beginswithin 6 <u>12</u>
14 15 16 17 18 19 20	policy or certificate of disability insurance may not exclude coverage for a condition for which no medical advice or treatment was recommended by or received from a provider of health care services <u>UNLESS THE CONDITION OCCURRED</u> within 5 years preceding the effective date of coverage of an insured person <u>OR unless-the-condition-beginswithin 6 12</u> months-following-the-effective-date-of-coverage-of-an
14 15 16 17 18 19 20 21	policy or certificate of disability insurance may not exclude coverage for a condition for which no medical advice or treatment was recommended by or received from a provider of health care services <u>UNLESS THE CONDITION OCCURRED</u> within 5 years preceding the effective date of coverage of an insured person $\Theta R$ unless-the-condition-beginswithin 6 $\pm 2$ monthsfollowingtheeffectivedateofcoverageof-an insured-person. THE CONDITION MAY ONLY BE EXCLUDED FOR A
14 15 16 17 18 19 20 21 22	policy or certificate of disability insurance may not exclude coverage for a condition for which no medical advice or treatment was recommended by or received from a provider of health care services <u>UNLESS THE CONDITION OCCURRED</u> within 5 years preceding the effective date of coverage of an insured person <u>OR unless-the-condition-beginswithin 6 12</u> monthsfollowingtheeffectivedateofcoverageof-an insured-person. <u>THE CONDITION MAY ONLY BE EXCLUDED FOR A</u> <u>MAXIMUM OF 12 MONTHS.</u>

25 the basis of the answers on that application, perform

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REFERENCE BILL

HB 672

AS AMENDED

HB 672

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underwriting in accordance with the insurer's established
 underwriting standards.

з Section 4. Section 33-15-1106, MCA, is amended to read: "33-15-1106. Renewal with altered terms. (1) If an 4 insurer offers or purports to renew a policy but on less 5 б favorable terms, at a higher rate, or at a higher rating 7 plan, the new terms, rate, or rating plan take effect on the 8 policy renewal date only if the insurer has mailed or delivered notice of the new terms, rate, or rating plan to 9 10 the insured at least 30 days before the expiration date. If 11 the insured has not been so notified, he may cancel the 12 renewal policy within 30 days after receiving the notice. 13 The insurer shall continue coverage for a period of not less 14 than 30 days after mailing or delivery of the notice. If the insured terminates the policy within the 30-day period, the 15 16 insurer shall calculate the earned premium pro rata based upon the prior policy's rate. The new rate is effective only 17 18 after the required 30-day notification period has been met. 19 If the insured does not terminate the policy, the premium 20 increase and other changes are effective the day following the prior policy's expiration or anniversary date. 21

22 (2) This section does not apply if +

23 (a)--the-change-is-a-rate-or-rating-plan-filed-with--the 24 commissioner--and-applicable-to-the-entire-classification-or 25 classification-system-to-which-the-policy-belongs;-or

- 3-

1 (b) the increase in the rate or the rating plan, or 2 both, results from a classification change based on the 3 altered nature or extent of the risk insured against."

4 Section 5. Section 33-18-210, MCA, is amended to read:

and rebates "33-18-210. Unfair discrimination 5 prohibited -- property, casualty, and surety insurances. (1) 6 No A title, property, casualty, or surety insurer or any an 7 employee, representative, insurance producer, or solicitor 8 thereof of an insurer may not, as an inducement to purchase 9 insurance or after insurance has been effected, pay, allow, 10 or give or offer to pay, allow, or give, directly or 11 indirectly, any a: 12

(a) rebate, discount, abatement, credit, or reduction
 of the premium named in the insurance policy; any

<u>(b)</u> special favor or advantage in the dividends or
other benefits to accrue thereon on the policy; or any

17 (c) valuable consideration or inducement not specified
18 in the policy, except to the extent provided for in an
19 applicable filing with the commissioner as provided by law.

20 (2) No An insured named in a policy or any an employee

21 of the insured may not knowingly receive or accept, directly,

22 or indirectly, any-such a:

(a) rebate, discount, abatement, credit, or reduction
 of premium;

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25 (b) special favor or advantage; or

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1 (c) valuable consideration or inducement.

2 (3) No-such An insurer may not make or permit any 3 unfair discrimination in the premium or rates charged for 4 insurance, in the dividends or other benefits payable thereon on insurance, or in any other of the terms and 5 conditions of the insurance either between insureds or 6 property having like insuring or risk characteristics or 7 8 between insureds because of race, color, creed, religion, or 9 national origin.

10 (4) Nothing--in--this This section may not be construed 11 as prohibiting the payment of commissions or other 12 compensation to duly licensed insurance producers or 13 solicitors or as prohibiting an insurer from allowing or 14 returning lawful dividends, savings, or unabsorbed premium 15 deposits to its participating policyholders, members, or 16 subscribers.

17 (5) No--such <u>An</u> insurer may <u>not</u> make or permit any 18 unfair discrimination between individuals or risks of the 19 same class and of essentially the same hazards by refusing 20 to issue, refusing to renew, canceling, or limiting the 21 amount of insurance coverage on a property or casualty risk 22 because of the geographic location of the risk, unless:

(a) the refusal, cancellation, or limitation is for a
business purpose which that is not a mere pretext for unfair
discrimination; or

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(b) the refusal, cancellation, or limitation is
 required by law or regulatory mandate.

3 (6) No-such <u>An</u> insurer may <u>not</u> make or permit any 4 unfair discrimination between individuals or risks of the 5 same class and of essentially the same hazards by refusing 6 to issue, refusing to renew, canceling, or limiting the 7 amount of insurance coverage on a residential property risk, 8 or the personal property contained therein, because of the 9 age of the residential property, unless:

10 (a) the refusal, cancellation, or limitation is for a
11 business purpose which that is not a more protext for unfair
12 discrimination; or

13 (b) the refusal, cancellation, or limitation is14 required by law or regulatory mandate.

15 (7) No-such <u>An</u> insurer may <u>not</u> refuse to insure, refuse 16 to continue to insure, or limit the amount of coverage 17 available to an individual because of the sex or marital 18 status of the individual, but an insurer may take marital 19 status into account for the purpose of defining persons 20 eligible for dependents' benefits.

(8) No--such An insurer may not terminate or modify
coverage or refuse to issue or refuse to renew any a
property or casualty policy or contract of insurance solely
because the applicant or insured or any employee of either
is mentally or physically impaired; however, this subsection

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1 does not apply to accident and health insurance sold by a
2 casualty insurer, and this subsection is <u>may</u> not to be
3 interpreted to modify any other provision of law relating to
4 the termination, modification, issuance, or renewal of any
5 insurance policy or contract.

6 (9) An insurer may not refuse to insure, refuse to 7 continue to insure, charge higher rates, or limit the amount 8 of coverage available to an individual based SOLELY on 9 adverse information contained in a driving record that is 3 10 years old or older. 11 (10) An insurer may not charge points or surcharge a

11 (10) An insurer may not charge points or surcharge a 12 private passenger motor vehicle policy because of a claim 13 submitted under the insured's policy if the insured was not 14 at fault."

Section 6. Section 33-20-101, MCA, is amended to read:
"33-20-101. Scope. Parts (1) Except as provided in
subsection (2), parts 1 through 5 of this chapter apply only
to contracts of life insurance and annuities, other than
reinsurance, group life insurance, and group annuities.

20 (2) Section 33-20-131 applies to group life insurance 21 and group annuities."

22 Section 7. Section 33-20-121, MCA, is amended to read:
23 "33-20-121. Prohibited provisions -- limitations on
24 liability. (1) No A policy of life insurance may not be
25 delivered or issued for delivery in this state if it

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2017年1月,大学的教育教育教育,这次有些意义的意义,就是我们的任何,这些我们的问题,我们就是这个人,这些我们的意义,这个人,这个人的人,他们的是有意义。我们就是一些我们的人,她们的

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1 contains any-of-the-following-provisions a provision: 2 (a) a-provision for a period shorter than that provided з by statute within which an action at law or in equity may be commenced on the policy; or 4 5 (b) a---provision--which that excludes or restricts liability for death caused in a certain specified manner or 6 7 occurring while the insured has a specified status, except that a policy may contain provisions excluding or 8 9 restricting coverage as specified therein in the policy in the event of death under-any-one-or-more--of--the--following 10 11 circumstances: (i) death as a result, directly or indirectly, of war, 12 13 declared or undeclared, or of action by military forces or of any act or hazard of such war or action or of service in 14 15 the military, naval, or air forces or in civilian forces

19 military action; 20 (ii) death as a result of aviation or any air travel or 21 flight; 22 (iii) death as a result of a specified hazardous

auxiliary thereto or from any cause while a member of such

military, naval, or air forces of any country at war, declared or undeclared, or of any country engaged in such

22 (111) death as a result of a specified nazardous
23 occupation or occupations;

(iv) death while the insured is a resident outside thecontinental United States and Canada; or

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HB 672

1 (v) death within 2 years from the date of issue of the 2 policy as a result of suicide, while seriously mentally ill 3 or otherwise. If a life insurance policy contains a 4 dependent rider, the dependent coverage may be continued 5 upon payment of the premium for the dependent rider.

(2) A policy which that contains any an exclusion or б restriction pursuant to subsection (1) of-this-section-shall 7 must also provide that in the event of death under the 8 circumstances to which any-such the exclusion or restriction 9 is applicable, the insurer will pay an amount not less than 10 a reserve determined according to the commissioner's reserve 11 valuation method upon on the basis of the mortality table 12 interest rate specified in the policy for the 13 and 14 calculation of nonforfeiture benefits (or if the policy provides for no such benefits, computed according to a 15 mortality table and interest rate determined by the insurer 16 specified in the policy), with adjustment for 17 and indebtedness or dividend credit. 18

(3) This section does not apply to industrial life
insurance, group life insurance, disability insurance,
reinsurance, or annuities or to any a provision in a life
insurance policy relating to disability benefits or to
additional benefits in the event of death by accident or
accidental means.

25 (4) Nothing--contained--in--this This section prohibits

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any does not prohibit a provision which that in the opinion
 of the commissioner is more favorable to the policyholder
 than a provision permitted by this section."

4 Section 8. Section 33-20-131, MCA, is amended to read:

S "33-20-131. Policy loan or certificate loan. (1) Except 6 Subject to the provisions of 33-20-101(2) and except as 7 provided in 33-20-132 through 33-20-136, there shall must be a provision that after 3 full years' premiums have been paid 8 9 and after the policy or certificate has a cash surrender 10 value and while no a premium is not in default beyond the 11 grace period for payment, the insurer will advance, on 12 proper assignment or pledge of the policy or certificate and 13 on the sole security thereof of the policy or certificate, 14 at a specified rate of interest not exceeding 6% a year, an amount equal to or, at the option of the party entitled 15 16 thereto to the loan, less than the loan value of the policy 17 or certificate. The commissioner may authorize a rate of 18 interest in excess of 6%, but not in excess of 8% a year (or 19 7.4% if payable annually in advance}, for policies or 20 certificates issued on or after January 1, 1980, if the insurer provides adequate written certification that the 21 22 holders of such the policies will benefit fully from the 23 increased earnings of the insurer resulting from the use of 24 an interest rate in excess of the 6% per annum, such as from 25 higher interest income to the company on policy or

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certificate loans, higher investment yield resulting from a 1 reduction in policy or certificate loans because of the 2 higher policy or certificate loan interest rate, and any 3 4 additional income to the company resulting from the use of such the higher interest rate in any manner whatsoever. 5 These benefits to the policyholder shall must be reflected 6 7 through higher dividends, or lower premiums, or both. The 8 loan value of the policy shall must be at least equal to the 9 cash surrender value at the end of the then current policy 10 or certificate year, provided that the insurer may deduct. 11 either from such the loan value or from the proceeds of the loan, any existing indebtedness not already deducted in 12 13 determining such the cash surrender value (including any 14 interest then accrued but not due), any an unpaid balance of 15 the premium for the current policy or certificate year, and 16 interest on the loan to the end of the current policy or certificate year unless the policyowner by written notice to 17 18 the insurer elects to defer payment of interest until it has accrued. The policy or certificate may also provide that if 19 20 interest on any indebtedness is not paid when due, it shall then must be added to the existing indebtedness and shall 21 22 must bear interest at the same rate, and that if and when 23 total indebtedness on the policy or certificate, the including interest due or accrued, equals or exceeds the 24 25 amount of the its loan value thereof, then the policy shall

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terminate or certificate terminates and become is void. The 1 policy shall or certificate must reserve to the insurer the 2 right to defer the granting of a loan, other than for the 3 payment of any a premium to the insurer, for 6 months after 4 application therefor for the loan. The policy or 5 certificate, at the insurer's option, may provide for an 6 automatic premium loan, subject to an election of the party 7 entitled to elect. R

9 (2) This section shall <u>does</u> not apply to term policies 10 or to term insurance benefits provided by rider or 11 supplemental policy provisions or to industrial life 12 insurance policies."

Section 9. Section 33-22-508, MCA, is amended to read: 13 \*33-22-508. Conversion on termination of eligibility. 14 (1) A group disability insurance policy issued or renewed 15 after October 1, 1981, shall must contain a provision that 16 if the insurance or any portion of it on a person, his 17 dependents, or family members covered under the policy 18 ceases because of termination of his employment or of his 19 membership in the class or classes eligible for coverage 20 policy or as a result of his employer under the 21 discontinuing his business or as a result of his employer 22 discontinuing the group disability insurance policy and not 23 providing for any other group disability insurance or plan, 24 such and if the person shall;-provided-he had been insured 25

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for a period of 3 months, be he is entitled to have issued 1 to him by the insurer, without evidence of insurability, 2 group coverage or an individual policy issued by the insurer 3 or, in the absence of an individual policy issued by the 4 insurer, a group policy issued by the insurer, of hospital 5 or medical service insurance on himself, his dependents, or 6 family members7--provided if application for the individual 7 policy shall-be is made and the first premium tendered to 8 the insurer within 31 days after the termination of group 9 10 coverage.

(2) The individual policy or group policy, at the 11 option of the insured, shall may be on any of-the-forms form 12 then customarily issued by the insurer to individual or 13 group policyholders, with the exception of those--policies 14 whose a policy the eligibility for which is determined by 15 affiliation other than by employment with a common entity. 16

(3) The premium on the individual policy shall or group 17 policy must be at the insurer's then customary rate 18 applicable to the coverage of the individual or group 19 policy." 20

SECTION 10. SECTION 33-1-502, MCA, IS AMENDED TO READ: 21 "33-1-502. Grounds for disapproval. The commissioner 22 shall disapprove any form filed under 33-1-501 or withdraw 23 any previous approval thereof only if the form: 24

(1) is in any respect in violation of or does not 25

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1 comply with this code; 2 (2) contains or incorporates by reference, where such 3 incorporation is otherwise permissible, any inconsistent, 4 ambiquous, or misleading clauses or exceptions and 5 conditions which deceptively affect the risk purported to be 6 assumed in the general coverage of the contract, including a 7 provision in a casualty insurance form permitting defense 8 costs within limits, except as permitted by the commissioner 9 in his discretion: 10 (3) has any title, heading, or other indication of its 11 provisions which is misleading; 12 (4) is printed or otherwise reproduced in such manner 13 as to render any provision of the form substantially 14 illegible. 15 (5) contains any provision that violates the provisions 16 of 49-2-309." 17 NEW SECTION. Section 11. Codification instruction. (1) 18 [Section 1] is intended to be codified as an integral part 19 of Title 33, chapter 17, part 11, and the provisions of 20 Title 33, chapter 17, part 11, apply to [section 1]. 21 (2) [Section 2] is intended to be codified as an 22 integral part of Title 33, chapter 22, part 1, and the 23 provisions of Title 33, chapter 22, part 1, apply to 24 [section 2]. 25 (3) [Section 3] is intended to be codified as an -14-HB 672

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- 1 integral part of Title 33, chapter 22, part 2, and the
- 2 provisions of Title 33, chapter 22, part 2, apply to
- 3 [section 3].

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Conference Committee on House Bill 672 Report No. 1, April 19, 1991

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# Mr. Speaker and Mr. President:

We, your Conference Committee on House Bill 672 met and considered Senate committee on Business and Industry amendments, dated March 19, 1991, and recommend that the Senate amendments be accepted in their entirety.

And this Conference Committee report be adopted.

For the House: Rep. Dowell ĥair Rep. cott

Fagg

For the Senate:

Sen. F/r i Ar

Sen. Franklin

Sen. Brown

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ADOPT

REJECT

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AN ACT TO GENERALLY REVISE THE LAWS RELATING TO INSURANCE; ESTABLISHING CONSUMER PROTECTION MEASURES RELATING TO RELATIONSHIPS WITH LONG-TERM CARE FACILITIES, PREMIUM INCREASES, DISCRIMINATION IN INSURANCE, AND PREEXISTING CONDITIONS; AND AMENDING SECTIONS 33-1-502, 33-15-1106, 33-18-210, 33-20-101, 33-20-121, 33-20-131, AND 33-22-508, MCA.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

Section 1. Prohibited relations with long-term care facility. An insurance producer that owns, manages, supervises, operates, maintains, or works in a long-term care facility as defined in 37-9-101 may not solicit, negotiate, transact, or effectuate a life or disability policy or certificate of insurance for a resident of a long-term care facility.

Section 2. Premium increase restriction -- exception. (1) An insurer may not increase a premium in an individual's or an individual group's disability insurance policy more frequently than once during a 12-month period unless failure to increase the premium more frequently than once during the 12-month period would:

(a) place the insurer in violation of the laws of this state; or

(b) cause the financial impairment of the insurer to the extent that further transaction of insurance by the insurer injures or is hazardous to its policyholders or to the public.

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(2) Subsection (1) does not apply to a premium increase necessitated by a state or federal law, court decision, or rule adopted by an agency of competent jurisdiction of the state or federal government.

Section 3. Preexisting conditions. (1) A policy or certificate of disability insurance may not exclude coverage for a condition for which medical advice or treatment was recommended by or received from a provider of health care services unless the condition occurred within 5 years preceding the effective date of coverage of an insured person. The condition may only be excluded for a maximum of 12 months.

(2) An insurer may use an application form designed to elicit the complete health history of an applicant and, on the basis of the answers on that application, perform underwriting in accordance with the insurer's established underwriting standards.

Section 4. Section 33-15-1106, MCA, is amended to read:

"33-15-1106. Renewal with altered terms. (1) If an insurer offers or purports to renew a policy but on less favorable terms, at a higher rate, or at a higher rating plan, the new terms, rate, or rating plan take effect on the policy renewal date only if the insurer has mailed or delivered notice of the new terms, rate, or rating plan to the insured at least 30 days before the expiration date. If the insured has not been so notified, he may cancel the renewal policy within 30 days after receiving the notice. The insurer shall continue coverage for a period of not less than 30

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days after mailing or delivery of the notice. If the insured terminates the policy within the 30-day period, the insurer shall calculate the earned premium pro rata based upon the prior policy's rate. The new rate is effective only after the required 30-day notification period has been met. If the insured does not terminate the policy, the premium increase and other changes are effective the day following the prior policy's expiration or anniversary date.

(2) This section does not apply if:

(a)--the-change-is-a--rate--or--rating--plan--filed--with--the commissioner--and--applicable--to--the--entire--classification--or classification-system-to-which-the-policy-belongs;-or

(b) the increase in the rate or the rating plan, or both, results from a classification change based on the altered nature or extent of the risk insured against."

Section 5. Section 33-18-210, MCA, is amended to read:

"33-18-210. Unfair discrimination and rebates prohibited -property, casualty, and surety insurances. (1) No <u>A</u> title, property, casualty, or surety insurer or <u>any an</u> employee, representative, insurance producer, or solicitor thereof <u>of an</u> <u>insurer</u> may <u>not</u>, as an inducement to purchase insurance or after insurance has been effected, pay, allow, or give or offer to pay, allow, or give, directly or indirectly, <u>any a:</u>

(a) rebate, discount, abatement, credit, or reduction of the premium named in the insurance policy; any

(b) special favor or advantage in the dividends or other benefits to accrue thereon on the policy; or any

(c) valuable consideration or inducement not specified in the policy, except to the extent provided for in an applicable filing with the commissioner as provided by law.

(2) No <u>An</u> insured named in a policy or <u>any an</u> employee of the insured may <u>not</u> knowingly receive or accept, directly or indirectly, <u>any-such a:</u>

(a) rebate, discount, abatement, credit, or reduction of premium;

(b) special favor or advantage; or

(c) valuable consideration or inducement.

(3) No--such <u>An</u> insurer may <u>not</u> make or permit any unfair discrimination in the premium or rates charged for insurance, in the dividends or other benefits payable thereon <u>on insurance</u>, or in any other of the terms and conditions of the insurance either between insureds or property having like insuring or risk characteristics or between insureds because of race, color, creed, religion, or national origin.

(4) Nothing-in-this This section may <u>not</u> be construed as prohibiting the payment of commissions or other compensation to duly licensed insurance producers or solicitors or as prohibiting an insurer from allowing or returning lawful dividends, savings, or unabsorbed premium deposits to its participating policyholders, members, or subscribers.

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(5) No-such <u>An</u> insurer may <u>not</u> make or permit any unfair discrimination between individuals or risks of the same class and of essentially the same hazards by refusing to issue, refusing to renew, canceling, or limiting the amount of insurance coverage on a property or casualty risk because of the geographic location of the risk, unless:

(a) the refusal, cancellation, or limitation is for a business purpose which that is not a mere pretext for unfair discrimination; or

(b) the refusal, cancellation, or limitation is required by law or regulatory mandate.

(6) No-such <u>An</u> insurer may <u>not</u> make or permit <u>any</u> unfair discrimination between individuals or risks of the same class and of essentially the same hazards by refusing to issue, refusing to renew, canceling, or limiting the amount of insurance coverage on a residential property risk, or the personal property contained therein, because of the age of the residential property, unless:

 (a) the refusal, cancellation, or limitation is for a business purpose which that is not a mere pretext for unfair discrimination; or

(b) the refusal, cancellation, or limitation is required by law or regulatory mandate.

(7) No-such An insurer may not refuse to insure, refuse to continue to insure, or limit the amount of coverage available to an individual because of the sex or marital status of the

individual, but an insurer may take marital status into account for the purpose of defining persons eligible for dependents' benefits.

(8) No--such <u>An</u> insurer may <u>not</u> terminate or modify coverage or refuse to issue or refuse to renew any <u>a</u> property or casualty policy or contract of insurance solely because the applicant or insured or any employee of either is mentally or physically impaired; however, this subsection does not apply to accident and health insurance sold by a casualty insurer, and this subsection is <u>may</u> not to be interpreted to modify any other provision of law relating to the termination, modification, issuance, or renewal of any insurance policy or contract.

(9) An insurer may not refuse to insure, refuse to continue to insure, charge higher rates, or limit the amount of coverage available to an individual based solely on adverse information contained in a driving record that is 3 years old or older.

(10) An insurer may not charge points or surcharge a private passenger motor vehicle policy because of a claim submitted under the insured's policy if the insured was not at fault."

Section 6. Section 33-20-101, MCA, is amended to read:

\*33-20-101. Scope. Parts (1) Except as provided in subsection (2), parts 1 through 5 of this chapter apply only to contracts of life insurance and annuities, other than reinsurance, group life insurance, and group annuities.

(2) Section 33-20-131 applies to group life insurance and

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## group annuities."

Section 7. Section 33-20-121, MCA, is amended to read:

"33-20-121. Prohibited provisions -- limitations on liability. (1) No <u>A</u> policy of life insurance may <u>not</u> be delivered or issued for delivery in this state if it contains <u>any--of--the</u> following-provisions a provision:

(a) a--provision for a period shorter than that provided by statute within which an action at law or in equity may be commenced on the policy; or

(b) a--provision--which that excludes or restricts liability for death caused in a certain specified manner or occurring while the insured has a specified status, except that a policy may contain provisions excluding or restricting coverage as specified therein in the policy in the event of death under-any-one-or-more of-the-following-circumstances:

(i) death as a result, directly or indirectly, of war, declared or undeclared, or of action by military forces or of any act or hazard of such war or action or of service in the military, naval, or air forces or in civilian forces auxiliary thereto or from any cause while a member of such military, naval, or air forces of any country at war, declared or undeclared, or of any country engaged in such military action;

(ii) death as a result of aviation or any air travel or flight;

(iii) death as a result of a specified hazardous occupation or

occupations;

(iv) death while the insured is a resident outside the continental United States and Canada; or

(v) death within 2 years from the date of issue of the policy as a result of suicide, while seriously mentally ill or otherwise. If a life insurance policy contains a dependent rider, the dependent coverage may be continued upon payment of the premium for the dependent rider.

(2) A policy which that contains any an exclusion or restriction pursuant to subsection (1) ef-this-section-shall must also provide that in the event of death under the circumstances to which any-such the exclusion or restriction is applicable, the insurer will pay an amount not less than a reserve determined according to the commissioner's reserve valuation method upon on the basis of the mortality table and interest rate specified in the policy provides for no such benefits, computed according to a mortality table and interest rate determined by the insurer and specified in the policy), with adjustment for indebtedness or dividend credit.

(3) This section does not apply to industrial life insurance, group life insurance, disability insurance, reinsurance, or annuities or to any a provision in a life insurance policy relating to disability benefits or to additional benefits in the event of death by accident or accidental means.

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(4) Nothing-contained-in-this <u>This</u> section prohibits-any <u>does</u> <u>not prohibit a</u> provision which <u>that</u> in the opinion of the commissioner is more favorable to the policyholder than a provision permitted by this section."

Section 8. Section 33-20-131, MCA, is amended to read:

"33-20-131. Policy loan or certificate loan. (1) Except Subject to the provisions of 33-20-101(2) and except as provided in 33-20-132 through 33-20-136, there shall must be a provision that after 3 full years' premiums have been paid and after the policy or certificate has a cash surrender value and while no a premium is not in default beyond the grace period for payment, the insurer will advance, on proper assignment or pledge of the policy or certificate and on the sole security thereof of the policy or certificate, at a specified rate of interest not exceeding 6% a year, an amount equal to or, at the option of the party entitled therete to the loan, less than the loan value of the policy or certificate. The commissioner may authorize a rate of interest in excess of 6%, but not in excess of 8% a year (or 7.4% if payable annually in advance), for policies or certificates issued on or after January 1, 1980, if the insurer provides adequate written certification that the holders of such the policies will benefit fully from the increased earnings of the insurer resulting from the use of an interest rate in excess of the 6% per annum, such as from higher interest income to the company on policy or certificate loans, higher investment yield resulting from a

reduction in policy or certificate loans because of the higher policy or certificate loan interest rate, and any additional income to the company resulting from the use of such the higher interest rate in any manner whatsoever. These benefits to the policyholder shall must be reflected through higher dividends, or lower premiums, or both. The loan value of the policy shall must be at least equal to the cash surrender value at the end of the then current policy or certificate year, provided that the insurer may deduct, either from such the loan value or from the proceeds of the lcan, any existing indeptedness not already deducted in determining such the cash surrender value (including any interest then accrued but not due), any an unpaid balance of the premium for the current policy or certificate year, and interest on the loan to the end of the current policy or certificate year unless the policyowner by written notice to the insurer elects to defer payment of interest until it has accrued. The policy or certificate may also provide that if interest on any indebtedness is not paid when due, it shall-then must be added to the existing indebtedness and shall must bear interest at the same rate, and that if and when the total indebtedness on the policy or certificate, including interest due or accrued, equals or exceeds the amount of the its loan value thereof, then the policy shall terminate or certificate terminates and become is void. The policy shall or certificate must reserve to the insurer the right to defer the granting of a loan, other than for the payment of any a

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premium to the insurer, for 6 months after application therefor for the loan. The policy or certificate, at the insurer's option, may provide for an automatic premium loan, subject to an election of the party entitled to elect.

(2) This section shall does not apply to term policies or to term insurance benefits provided by rider or supplemental policy provisions or to industrial life insurance policies."

Section 9. Section 33-22-508, MCA, is amended to read:

"33-22-508. Conversion on termination of eligibility. (1) A group disability insurance policy issued or renewed after October 1, 1981, shall must contain a provision that if the insurance or any portion of it on a person, his dependents, or family members covered under the policy ceases because of termination of his employment or of his membership in the class or classes eligible for coverage under the policy or as a result of his employer discontinuing his business or as a result of his employer discontinuing the group disability insurance policy and not providing for any other group disability insurance or plan, such and if the person shall-provided-he had been insured for a period of 3 months, be he is entitled to have issued to him by the insurer, without evidence of insurability, group coverage or an individual policy issued by the insurer or, in the absence of an individual policy issued by the insurer, a group policy issued by the insurer, of hospital or medical service insurance on himself, his dependents, or family members, -provided if application for the

individual policy shall-be is made and the first premium tendered to the insurer within 31 days after the termination of group coverage.

(2) The individual policy or group policy, at the option of the insured, shall may be on any of-the-forms form then customarily issued by the insurer to individual or group policyholders, with the exception of those-policies-whose a policy the eligibility for which is determined by affiliation other than by employment with a common entity.

(3) The premium on the individual policy shall or group policy must be at the insurer's then customary rate applicable to the coverage of the individual or group policy."

Section 10. Section 33-1-502, MCA, is amended to read:

"33-1-502. Grounds for disapproval. The commissioner shall disapprove any form filed under 33-1-501 or withdraw any previous approval thereof only if the form:

(1) is in any respect in violation of or does not comply with this code;

(2) contains or incorporates by reference, where such incorporation is otherwise permissible, any inconsistent, ambiguous, or misleading clauses or exceptions and conditions which deceptively affect the risk purported to be assumed in the general coverage of the contract, including a provision in a casualty insurance form permitting defense costs within limits, except as permitted by the commissioner in his discretion;

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(3) has any title, heading, or other indication of its provisions which is misleading;

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(4) is printed or otherwise reproduced in such manner as to render any provision of the form substantially illegible;

(5) contains any provision that violates the provisions of 49-2-309."

Section 11. Codification instruction. (1) [Section 1] is intended to be codified as an integral part of Title 33, chapter 17, part 11, and the provisions of Title 33, chapter 17, part 11, apply to [section 1].

(2) [Section 2] is intended to be codified as an integral part of Title 33, chapter 22, part 1, and the provisions of Title 33, chapter 22, part 1, apply to [section 2].

(3) [Section 3] is intended to be codified as an integral part of Title 33, chapter 22, part 2, and the provisions of Title 33, chapter 22, part 2, apply to [section 3].

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