Stricken language would be deleted from and underlined language would be added to present law. Act 456 of the Regular Session

1	State of Arkansas	As Engrossed: \$3/6/13	
2	89th General Assembly	A Bill	
3	Regular Session, 2013		SENATE BILL 464
4			
5	By: Senator Rapert		
6	By: Representative Wren		
7			
8		For An Act To Be Entitled	
9	AN ACT TO AMEND THE ARKANSAS LIFE AND HEALTH		
10	INSURANCE	GUARANTY ASSOCIATION ACT; AND FOR	R OTHER
11	PURPOSES.		
12			
13			
14		Subtitle	
15	TO A	AMEND THE ARKANSAS LIFE AND HEALTH	
16	INSU	JRANCE GUARANTY ASSOCIATION ACT; A	ND
17	FOR	OTHER PURPOSES.	
18			
19			
20	BE IT ENACTED BY THE	GENERAL ASSEMBLY OF THE STATE OF A	ARKANSAS:
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22	SECTION 1. Ark	ansas Code 23-96-104(T), concern	ning the definition of
23	"resident" under the	Arkansas Life and Health Insurance	e Guaranty Association
24	Act, is amended to re	ad as follows:	
25	T. "Resident"	means a person to whom a contractu	ual obligation is owed
26	and who resides in th	is state on the date of entry of a	a court order that
27	determines a member i	nsurer to be an impaired insurer o	or a court order that
28	determines a member i	nsurer to be an insolvent insurer-	, whichever occurs
29	first. A person may b	e a resident of only one (1) state	e, which in the case of
30	a person other than a	natural person shall be its princ	cipal place of
31	business. Citizens o	f the United States that are either	er (i) residents of
32	foreign countries, or	(ii) residents of United States p	possessions,
33	territories, or prote	ctorates that do not have an assoc	ciation similar to the
34	Association created b	y this chapter shall be deemed res	sidents of the state of
35	domicile of the insur	er that issued the policies or co	ntracts.
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SECTION 2. Arkansas Code § 23-96-106(A), concerning coverage that is not provided by the Arkansas Life and Health Insurance Guaranty Association Act, is amended to add two (2) additional subdivisions to read as follows:

- Act, is amended to add two (2) additional subdivisions to read as follows:

 (13) A portion of a policy or contract to the extent it provides for interest or other changes in value to be determined by the use of an index or other external reference stated in the policy or contract, but which have not been credited to the policy or contract, or as to which the policy or contract owner's rights are subject to forfeiture, as of the date the member insurer becomes an impaired or insolvent insurer under this chapter, whichever is earlier. If a policy's or contract's interest or changes in value are credited less frequently than annually, then for purposes of determining the values that have been credited and are not subject to forfeiture under this paragraph (A)(13), the interest or change in value determined by using the procedures defined in the policy or contact will be credited as if the contractual date of crediting interest or changing values was the date of impairment or insolvency, whichever is earlier, and will not be subject to forfeiture; and
- (14) A policy or contract providing any hospital, medical, prescription drug, or other health care benefits pursuant to Part C or Part D of 42 U.S.C. §§ 1395--1395kkk-1, commonly known as Medicare Part C and D, or any regulations issued pursuant thereto.

SECTION 3. Arkansas Code § 23-96-107(B), concerning coverage for policies and contracts under the Arkansas Life and Health Insurance Guaranty Association Act, is amended to read as follows:

B. This chapter shall provide coverage to the persons specified in subsection (A) for direct, nongroup life, accident and health, or annuity policies or contracts, and supplemental contracts to any of these, for certificates under direct group policies and contracts, and for supplemental contracts to any of these, and for unallocated annuity contracts, in each case issued by member insurers, except as limited by this chapter. Annuity contracts and certificates under group annuity contracts include but are not limited to guaranteed investment contracts, deposit administration contracts, unallocated funding agreements, allocated funding agreements, structured settlement annuities, annuities issued to or in connection with government

lotteries, and any immediate or deferred annuity contracts.

SECTION 4. Arkansas Code § 23-96-110(F)-(L), concerning the reinsurance of life and health insurance contracts, is amended to read as follows:

- F. At any time within one (1) year after the date on which the Association becomes responsible for the obligations of a member insurer (the coverage date), the Association may elect to succeed to the rights and obligations of the member insurer, that accrue on or after the coverage date and that relate to contracts covered (in whole or in part) by the Association, under any one (1) or more indemnity reinsurance agreement(s) entered into by the member insurer as a ceding insurer and selected by the Association; provided, however, that the Association may not exercise any such election with respect to a reinsurance agreement if the receiver, rehabilitator, or liquidator of the member insurer has previously and expressly disaffirmed the reinsurance agreement. The election shall be effected by a notice to the receiver, rehabilitator, or liquidator and to the affected reinsurer(s). If the Association makes an election, paragraphs (1)—(4) of this subsection shall apply with respect to the agreements selected by the Association:
- (1) The Association shall be responsible for all unpaid premiums due under the agreement(s)(for periods both before and after the coverage date), and shall be responsible for the performance of all other obligations to be performed after the coverage date, in each case which relate to contracts covered (in whole or in part) by the Association. The association may charge contracts covered in part by the Association through reasonable allocation methods, the costs for reinsurance in excess of the obligations of the Association;
- (2) The Association shall be entitled to any amounts payable by the reinsurer under the agreement(s) with respect to losses or events that occur in periods after the coverage date and that relate to contracts covered by the Association (in whole or in part), provided that, upon receipt of any such amounts, the Association shall be obliged to pay to the beneficiary under the policy or contract on account of which the amounts were paid a portion of the amount equal to the excess of:
 - (a) The amount received by the Association; or

1 (b) The benefits paid by the Association on account of the policy or 2 contract less the retention of the impaired or insolvent member insurer 3 applicable to the loss or event; 4 (3) Within thirty (30) days following the Association's 5 election, the Association and each indemnity reinsurer shall calculate the 6 net balance due to or from the Association under each such reinsurance 7 agreement(s) as of the date of the Association's election, which calculation 8 shall give full credit to all items paid by either the member insurer (or its 9 receiver, rehabilitator, or liquidator) or the indemnity reinsurer during the 10 period between the coverage date and the date of the Association's election. 11 Either the Association or indemnity reinsurer shall pay the net balance due 12 the other within five (5) days of the completion of the aforementioned calculation. If the receiver, rehabilitator, or liquidator has received any 13 14 amounts due the Association pursuant to paragraph (2) of this subsection, the 15 receiver, rehabilitator, or liquidator shall remit the same to the 16 Association as promptly as practicable. 17 (4) If the Association, within sixty (60) days of the election, 18 pays the premiums due for the period both before and after the coverage date that relates to contracts covered by the Association (in whole or in part), 19 the reinsurer shall not be entitled to terminate the reinsurance 20 agreements(s)(insofar as the agreement(s) relate to contracts covered by the 21 22 Association (in whole or in part)) and shall not be entitled to set off any 23 unpaid premium due for periods prior to the coverage date against amounts due 24 the Association. 25 G. In the event the Association transfers its obligations to another 26 insurer, and if the Association and the other insurer agree, the other 27 insurer shall succeed to the rights and obligations of the Association under 28 subsection (F) of this section effective as of the date agreed upon by the Association and the other insurer and regardless of whether the Association 29 30 has made the election referred to above in subsection (F) provided that: 31 (1) The indemnity reinsurance agreement(s) shall automatically 32 terminate for new reinsurance unless the indemnity reinsurer and the other 33 insurer agree to the contrary; 34 (2) The obligations described in the proviso to paragraph (F)(2) 35 of this section shall no longer apply on and after the date the indemnity 36 reinsurance agreement is transferred to the third party insurer; and

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                 (3) This subsection (C) shall not apply if the Association has
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     previously expressly determined in writing that it will not exercise the
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     election referred to in subsection (F) of this section. (1)(a) At any time
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     within one hundred eighty (180) days of the date of the order of liquidation,
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     the Association may elect to succeed to the rights and obligations of the
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     ceding member insurer that relate to policies or annuities covered, in whole
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     or in part, by the Association, in each case under any one or more
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     reinsurance contracts entered into by the insolvent insurer and its
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     reinsurers and selected by the Association. Any such assumption shall be
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     effective as of the date of the order of liquidation. The election shall be
     effected by the Association or the National Organization of Life and Health
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     Insurance Guaranty Associations on its behalf sending written notice, return
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     receipt requested, to the affected reinsurers.
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                       (b) To facilitate the earliest practicable decision about
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     whether to assume any of the contracts of reinsurance, and in order to
     protect the financial position of the estate, the receiver and each reinsurer
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     of the ceding member insurer shall make available upon request to the
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     Association or to the National Organization of Life and Health Insurance
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     Guaranty Associations on its behalf as soon as possible after commencement of
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     formal delinquency proceedings (i) copies of in-force contracts of
     reinsurance and all related files and records relevant to the determination
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     of whether such contracts should be assumed, and (ii) notices of any defaults
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     under the reinsurance contracts or any known event or condition which with
     the passage of time could become a default under the reinsurance contracts.
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                       (c) The following subparagraphs (i) through (iv) shall
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     apply to reinsurance contracts so assumed by the Association:
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                             (i) The Association shall be responsible for all
     unpaid premiums due under the reinsurance contracts for periods both before
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     and after the date of the order of liquidation, and shall be responsible for
     the performance of all other obligations to be performed after the date of
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     the order of liquidation, in each case which relate to policies or annuities
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     covered, in whole or in part, by the Association. The Association may charge
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     policies or annuities covered in part by the Association, through reasonable
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     allocation methods, the costs for reinsurance in excess of the obligations of
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     the Association and shall provide notice and an accounting of these charges
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     to the liquidator;
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1	(ii) The Association shall be entitled to any	
2	amounts payable by the reinsurer under the reinsurance contracts with respect	
3	to losses or events that occur in periods after the date of the order of	
4	liquidation and that relate to policies or annuities covered, in whole or in	
5	part, by the Association, provided that, upon receipt of any such amounts,	
6	the Association shall be obliged to pay to the beneficiary under the policy	
7	or annuity on account of which the amounts were paid a portion of the amount	
8	equal to the lesser of:	
9	(A) The amount received by the Association;	
10	<u>and</u>	
11	(B) The excess of the amount received by the	
12	Association over the amount equal to the benefits paid by the Association on	
13	account of the policy or annuity less the retention of the insurer applicable	
14	to the loss or event;	
15	(iii) Within thirty (30) days following the	
16	Association's election, the election date, the Association and each reinsurer	
17	under contracts assumed by the Association shall calculate the net balance	
18	due to or from the Association under each reinsurance contract as of the	
19	election date with respect to policies or annuities covered, in whole or in	
20	part, by the Association, which calculation shall give full credit to all	
21	items paid by either the insurer or its receiver or the reinsurer prior to	
22	the election date. The reinsurer shall pay the receiver any amounts due for	
23	losses or events prior to the date of the order of liquidation, subject to	
24	any set-off for premiums unpaid for periods prior to the date, and the	
25	Association or reinsurer shall pay any remaining balance due the other, in	
26	each case within five (5) days of the completion of the aforementioned	
27	calculation. Any disputes over the amounts due to either the Association or	
28	the reinsurer shall be resolved by arbitration pursuant to the terms of the	
29	affected reinsurance contracts or, if the contract contains no arbitration	
30	clause, as otherwise provided by law. If the receiver has received any	
31	amounts due the Association pursuant to subparagraph (c)(ii) of this	
32	paragraph (F)(1), the receiver shall remit the same to the Association as	
33	promptly as practicable; and	
34	(iv) If the Association or receiver, on the	
35	Association's behalf, within sixty (60) days of the election date, pays the	
36	unpaid premiums due for periods both before and after the election date that	

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- 1 relate to policies or annuities covered, in whole or in part, by the
- 2 Association, the reinsurer shall not be entitled to terminate the reinsurance
- 3 contracts for failure to pay premium insofar as the reinsurance contracts
- 4 relate to policies or annuities covered, in whole or in part, by the
- 5 Association, and shall not be entitled to set off any unpaid amounts due
- 6 under other contracts, or unpaid amounts due from parties other than the
- 7 Association, against amounts due the Association.
- 8 (2)(a) During the period from the date of the order of
- 9 liquidation until the election date or, if the election date does not occur,
- 10 until one hundred eighty (180) days after the date of the order of
- ll liquidation:
- 12 <u>(i) Neither the Association nor the reinsurer shall</u>
- 13 have any rights or obligations under reinsurance contracts that the
- 14 Association has the right to assume under paragraph (F)(1) of this section,
- 15 whether for periods prior to or after the date of the order of liquidation;
- 16 and
- 17 (ii) The reinsurer, the receiver, and the
- 18 Association shall, to the extent practicable, provide each other data and
- 19 <u>records reasonably requested.</u>
- 20 <u>(b) Provided that once the Association has elected to</u>
- 21 <u>assume a reinsurance contract, the parties' rights and obligations shall be</u>
- 22 governed by paragraph (F)(1) of this section.
- 23 (3) If the Association does not elect to assume a reinsurance
- 24 contract by the election date pursuant to paragraph (F)(1) of this section,
- 25 <u>the Association shall have no rights or obligations, in each case for periods</u>
- 26 both before and after the date of the order of liquidation, with respect to
- 27 the reinsurance contract.
- 28 (4) When policies or annuities, or covered obligations with
- 29 respect thereto, are transferred to an assuming insurer, reinsurance on the
- 30 policies or annuities may also be transferred by the Association, in the case
- 31 of contracts assumed under paragraph (F)(1) of this section, subject to the
- 32 following:
- 33 (a) Unless the reinsurer and the assuming insurer agree
- 34 otherwise, the reinsurance contract transferred shall not cover any new
- 35 policies of insurance or annuities in addition to those transferred;
- 36 (b) The obligations described in paragraph (F)(1) of this

1 section shall no longer apply with respect to matters arising after the 2 effective date of the transfer; and 3 (c) Notice shall be given in writing, return receipt 4 requested, by the transferring party to the affected reinsurer not less than 5 thirty (30) days prior to the effective date of the transfer. 6 $H_{\bullet}(5)$ The provisions of this subsection (F) of this section 7 shall supersede the provisions of any law of this state or of any affected 8 reinsurance agreement(s) that provide for or require any payment of 9 reinsurance proceeds, on account of losses or events that occur in periods 10 after the coverage date, to the receiver, liquidator, or rehabilitator of the insolvent member insurer. The receiver, rehabilitator, or liquidator shall 11 12 remain entitled to any amounts payable by the reinsurer under the reinsurance 13 agreement(s) with respect to losses or events that occur in periods prior to 14 the coverage date (subject to applicable setoff provisions). 15 1.(6) Except as otherwise expressly provided above, nothing 16 herein shall alter or modify the terms and conditions of the indemnity 17 reinsurance agreements of the insolvent member insurer. Nothing herein shall 18 abrogate or limit any rights of any reinsurer to claim that it is entitled to 19 rescind a reinsurance agreement. Nothing herein shall give a policy owner or 20 beneficiary an independent cause of action against an indemnity reinsurer 21 that is not otherwise set forth in the indemnity reinsurance agreement. 22 Nothing in this section shall give a policyholder or beneficiary an 23 independent cause of action against a reinsurer that is not otherwise set forth in the reinsurance contract. Nothing in this section shall limit or 24 25 affect the Association's rights as a creditor of the estate against the 26 assets of the estate. Nothing in this section shall apply to reinsurance 27 agreements covering property or casualty risks. 28 J. G. The board of directors of the Association shall have discretion 29 and may exercise reasonable business judgment to determine the means by which 30 the Association is to provide the benefits of this chapter in an economical 31 and efficient manner and may provide additional or alternative coverages and 32 benefits in appropriate situations. 33

 K_{τ} \underline{H}_{\bullet} . Where the Association has arranged or offered to provide the benefits of this chapter to a covered person under a plan or arrangement that fulfills the Association's obligations under this chapter, the person shall not be entitled to benefits from the Association in addition to or other than

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- 1 those provided under the plan or arrangement.
- 2 $\frac{L}{L}$ Venue in a suit against the Association arising under this
- 3 chapter shall be in Pulaski County. The Association shall not be required to
- 4 give an appeal bond in an appeal that relates to a cause of action arising
- 5 under this chapter.

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- 7 SECTION 5. Arkansas Code § 23-96-114(A) and (B), concerning the
- 8 Arkansas Life and Health Insurance Guaranty Association's liability for
- 9 benefits, are amended to read as follows:
- 10 A. The benefits that the Association may become obligated to cover
- 11 shall in no event exceed the lesser of:
- 12 (1) The contractual obligations for which the insurer is liable
- 13 or would have been liable if it were not an impaired or insolvent insurer; or
- 14 (2)(a) With respect to any one (1) life, regardless of the
- 15 number of policies or contracts:
- 16 (i) Three hundred thousand dollars (\$300,000) in
- 17 life insurance death benefits or net cash surrender and net cash withdrawal
- 18 values for life insurance;
- 19 (ii) Three hundred thousand dollars (\$300,000) Five
- 20 hundred thousand dollars (\$500,000) in accident and health insurance
- 21 benefits, including any net cash surrender and net cash withdrawal values,
- 22 provided coverage for disability insurance benefits and long term care
- 23 insurance benefits shall not exceed three hundred thousand dollars
- 24 *(\$300,000)*;
- 25 (iii) Three hundred thousand dollars (\$300,000) in
- 26 the present value of annuity benefits, including net cash surrender and net
- 27 cash withdrawal values;
- 28 (b) With respect to each individual participating in a
- 29 governmental retirement benefit plan established under section 401(k),
- 30 section 403(b), or section 457, of the United States Internal Revenue Code
- 31 covered by an unallocated annuity contract or the beneficiaries of each such
- 32 individual if deceased, in the aggregate three hundred thousand dollars
- 33 (\$300,000) in present value annuity benefits, including net cash surrender
- 34 and net cash withdrawal values;
- 35 (c) With respect to any one (1) contract holder, one
- 36 million dollars (\$1,000,000) in unallocated annuity contract benefits,

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1 irrespective of the number of contracts held by that contract holder each 2 payee of a structured settlement annuity, or beneficiary or beneficiaries of 3 the payee if deceased, three hundred thousand dollars (\$300,000) in present value annuity benefits, in the aggregate, including net cash surrender and 4 net cash withdrawal values, if any. 5 6 B.(1) Provided, however, that in no event shall the Association be 7 liable to expend obligated to cover more than the (i) three hundred thousand 8 dollars (\$300,000) in benefits in the aggregate with respect to any one life 9 under §§ 23-96-106, 23-96-107, and this section except with respect to 10 benefits for basic hospital, medical and surgical insurance and major medical insurance under paragraph (A)(2)(a)(ii) of this section, in which case the 11 12 aggregate liability of the Association shall not exceed five hundred thousand 13 dollars (\$500,000) with respect to any one individual, or (ii) with respect 14 to one owner of multiple non-group policies of life insurance, whether the policy owner is an individual, firm, corporation or other person, and whether 15 the persons insured are officers, managers, employees or other persons, more 16 17 than one million dollars (\$1,000,000) in benefits, regardless of the number 18 of policies and contracts held by the owner; 19 (2) With respect to either (i) one (1) contract owner provided 20 coverage under § 23-96-107 (A)(3)(b); or (ii) one (1) plan sponsor whose 21 plans own directly or in trust one or more unallocated annuity contracts not 22 included in paragraph (A)(2)(b) of this section, one million dollars 23 (\$1,000,000) in benefits, irrespective of the number of contracts with 24 respect to the contract owner or plan sponsor. However, in the case where 25 one or more unallocated annuity contracts are covered contracts under this chapter and are owned by a trust or other entity for the benefit of two (2) 26 27 or more plan sponsors, coverage shall be afforded by the Association if the 28 largest interest in the trust or entity owning the contract or contracts is 29 held by a plan sponsor whose principal place of business is in this state and 30 in no event shall the Association be obligated to cover more than one million 31 dollars (\$1,000,000) in benefits with respect to all of these unallocated 32 contracts. 33 $\frac{(2)}{(3)}$ The limitations set forth in this subsection (B) are 34 limitations on the benefits for which the Association is obligated before 35 taking into account either its subrogation and assignment rights or the 36 extent to which those benefits could be provided out of the assets of the

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1	impaired or insolvent insurer attributable to covered policies. The costs of
2	the Association's obligations under this chapter may be met by the use of
3	assets attributable to covered policies or reimbursed to the Association
4	pursuant to its subrogation and assignment rights.
5	$\frac{(3)(4)}{(4)}$ In performing its obligations to provide coverage under §
6	23-96-111, the Association shall not be required to guarantee, assume,
7	reinsure, or perform, or cause to be guaranteed, assumed, reinsured, or
8	performed, the contractual obligations of the insolvent or impaired insurer
9	under a covered policy or contract that do not materially affect the economic
10	values or economic benefits of the covered policy or contract.
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12	/s/Rapert
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15	APPROVED: 03/21/2013
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