## RULE 8 CORPORATE GOVERNANCE ANNUAL DISCLOSURE

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#### SECTION 1. AUTHORITY.

This Rule is promulgated by the Commissioner pursuant to the authority granted by Ark. Code Ann. §§ 23-61-108, 23-63-2001, et seq., and 25-15-201, et seq.

#### SECTION 2. EFFECTIVE DATE.

This Rule shall become effective on January 1, 2020.

### SECTION 3. PURPOSE.

The purpose of this Rule is to set forth the procedures for filing and the required contents of the Corporate Governance Annual Disclosure (CGAD), deemed necessary by the Commissioner to carry out the provisions of Ark. Code Ann. §§ 23-63-2001, et seq.

#### SECTION 4. DEFINITIONS.

- A. "Commissioner" means the Arkansas Insurance Commissioner.
- B. "Insurance group" means those insurers and affiliates included within an insurance holding company system as defined in Ark. Code Ann. §§ 23-63-501, et seq.
- C. "Insurer" has the same meaning as set forth in Ark. Code Ann. § 23-63-2003(3), except that it shall not include agencies, authorities or instrumentalities of the United States, its possessions and territories, the Commonwealth of Puerto Rico, the District of Columbia, or a state or political subdivision of a state.
- D. "Senior Management" means any corporate officer responsible for reporting information to the board of directors at regular intervals or providing this information to shareholders or regulators and shall include, for example and without limitation, the Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Procurement Officer, Chief Legal Officer, Chief Information Officer, Chief Technology Officer, Chief Revenue Officer, Chief Visionary Officer, any other chief executives, or equivalents.

## SECTION 5. FILING PROCEDURES.

- A. An insurer, or the insurance group of which the insurer is a member, required to file a CGAD by Ark. Code Ann. §§ 23-63-2001, et seq., shall, no later than June 1 of each calendar year, submit to the Commissioner a CGAD that contains the information described in Ark. Code Ann. § 23-63-2005 and Section 6 of this Rule.
- B. The CGAD must include a signature of the insurer's or insurance group's Chief Executive Officer or corporate secretary attesting to the best of that individual's belief and knowledge that the insurer or insurance group has implemented the corporate governance practices and that a copy of the CGAD has been provided to the insurer's or insurance group's Board of Directors (hereafter "Board") or the appropriate committee thereof.
- C. The insurer or insurance group shall have discretion regarding the appropriate format for providing the information required by this Rule and is permitted to customize the CGAD to provide the most relevant information necessary to permit the Commissioner to gain an understanding of the corporate governance structure, policies and practices utilized by the insurer or insurance group.
- D. For purposes of completing the CGAD, the insurer or insurance group may choose to provide information on governance activities that occur at the ultimate controlling parent level, an intermediate holding company level and/or the individual legal entity level, depending upon how the insurer or insurance group has structured its system of corporate governance. The insurer or insurance group is encouraged to make the CGAD disclosures at the level at which the insurer's or insurance group's risk appetite is determined, or at which the earnings, capital, liquidity, operations, and reputation of the insurer are overseen collectively and at which the supervision of those factors are coordinated and exercised, or the level at which legal liability for failure of general corporate governance duties would be placed. If the insurer or insurance group determines the level of reporting based on these criteria, it shall indicate which of the three criteria was used to determine the level of reporting and explain any subsequent changes in level of reporting.
- E. Notwithstanding the provisions of Subsection A of this Section, and as outlined in Ark. Code Ann. § 23-63-2004, if the CGAD is completed at the insurance group level, then it must be filed with the lead state of the group as determined by the procedures outlined in the most recent Financial Analysis Handbook adopted by the NAIC. In these instances, a copy of the CGAD must also be provided to the chief regulatory official of any state in which the insurance group has a domestic insurer, upon request.
- An insurer or insurance group may comply with this section by referencing other existing documents (e.g., ORSA Summary Report, Holding Company Form B or F Filings, Securities and Exchange Commission Proxy Statements, foreign regulatory reporting requirements, etc.) if the documents provide information that is comparable to the information described in Ark. Code Ann. § 23-63-2005 and Section 6 of this Rule. The insurer or insurance group shall clearly reference the location of the relevant information within the CGAD and attach the referenced document if it is not already filed or available to the regulator.
- G. Each year following the initial filing of the CGAD, the insurer or insurance group shall file

an amended version of the previously filed CGAD indicating where changes have been made. If no changes were made in the information or activities reported by the insurer or insurance group, the filing should so state.

## SECTION 6. CONTENTS OF CORPORATE GOVERNANCE ANNUAL DISCLOSURE.

- A. The insurer or insurance group shall be as descriptive as possible in completing the CGAD, with inclusion of attachments or example documents that are used in the governance process, since these may provide a means to demonstrate the strengths of their governance framework and practices.
- B. The CGAD shall describe the insurer's or insurance group's corporate governance framework and structure including consideration of the following.
  - (1) The Board and various committees thereof ultimately responsible for overseeing the insurer or insurance group and the level(s) at which that oversight occurs (e.g., ultimate control level, intermediate holding company, legal entity, etc.). The insurer or insurance group shall describe and discuss the rationale for the current Board size and structure; and
  - (2) The duties of the Board and each of its significant committees and how they are governed (e.g., bylaws, charters, informal mandates, etc.), as well as how the Board's leadership is structured, including a discussion of the roles of Chief Executive Officer and Chairman of the Board within the organization.
- C. The insurer or insurance group shall describe the policies and practices of the most senior governing entity and significant committees thereof, including a discussion of the following factors:
  - (1) How the qualifications, expertise and experience of each Board member meet the needs of the insurer or insurance group.
  - (2) How an appropriate amount of independence is maintained on the Board and its significant committees.
  - (3) The number of meetings held by the Board and its significant committees over the past year as well as information on director attendance.
  - (4) How the insurer or insurance group identifies, nominates and elects members to the Board and its committees. The discussion should include, for example:
    - (a) Whether a nomination committee is in place to identify and select individuals for consideration;
    - (b) Whether term limits are placed on directors;
    - (c) How the election and re-election processes function; and
    - (d) Whether a Board diversity policy is in place and if so, how it functions.

- (5) The processes in place for the Board to evaluate its performance and the performance of its committees, as well as any recent measures taken to improve performance, including any Board or committee training programs that have been established.
- D. The insurer or insurance group shall describe the policies and practices for directing Senior Management, including a description of the following factors:
  - (1) Any processes or practices (i.e., suitability standards) to determine whether officers and key persons in control functions have the appropriate background, experience and integrity to fulfill their prospective roles, including:
    - (a) Identification of the specific positions for which suitability standards have been developed and a description of the standards employed; and
    - (b) Any changes in an officer's or key person's suitability as outlined by the insurer's or insurance group's standards and procedures to monitor and evaluate such changes.
  - (2) The insurer's or insurance group's code of business conduct and ethics, the discussion of which considers, for example:
    - (a) Compliance with laws, rules, and regulations; and
    - (b) Proactive reporting of any illegal or unethical behavior.
  - (3) The insurer's or insurance group's processes for performance evaluation, compensation and corrective action to ensure effective senior management throughout the organization, including a description of the general objectives of significant compensation programs and what the programs are designed to reward. The description shall include sufficient detail to allow the Commissioner to understand how the organization ensures that compensation programs do not encourage and/or reward excessive risk taking. Elements to be discussed may include, for example:
    - (a) The Board's role in overseeing management compensation programs and practices;
    - (b) The various elements of compensation awarded in the insurer's or insurance group's compensation programs and how the insurer or insurance group determines and calculates the amount of each element of compensation paid;
    - (c) How compensation programs are related to both company and individual performance over time;
    - (d) Whether compensation programs include risk adjustments and how those adjustments are incorporated into the programs for employees at different

levels;

- (e) Any clawback provisions built into the programs to recover awards or payments if the performance measures upon which they are based are restated or otherwise adjusted; and
- (f) Any other factors relevant in understanding how the insurer or insurance group monitors its compensation policies to determine whether its risk management objectives are met by incentivizing its employees.
- (4) The insurer's or insurance group's plans for CEO and Senior Management succession.
- E. The insurer or insurance group shall describe the processes by which the Board, its committees and Senior Management ensure an appropriate amount of oversight to the critical risk areas impacting the insurer's business activities, including a discussion of:
  - (1) How oversight and management responsibilities are delegated between the Board, its committees and Senior Management;
  - (2) How the Board is kept informed of the insurer's strategic plans, the associated risks, and steps that Senior Management is taking to monitor and manage those risks;
  - (3) How reporting responsibilities are organized for each critical risk area. The description should allow the Commissioner to understand the frequency at which information on each critical risk area is reported to and reviewed by Senior Management and the Board. This description may include, for example, the following critical risk areas of the insurer:
    - (a) Risk management processes (An ORSA Summary Report filer may refer to its ORSA Summary Report pursuant to the Risk Management and Own Risk and Solvency Assessment Model Act);
    - (b) Actuarial function;
    - (c) Investment decision-making processes;
    - (d) Reinsurance decision-making processes;
    - (e) Business strategy/finance decision-making processes;
    - (f) Compliance function:
    - (g) Financial reporting/internal auditing; and
    - (h) Market conduct decision-making processes.

## SECTION 7. SEVERABILITY CLAUSE.

If any provision of these regulations, or the application thereof to any person or circumstance, is held invalid, such determination shall not affect other provisions or applications of these regulations which can be given effect without the invalid provision or application, and to that end the provisions of these regulations are severable.

ALLENKERR

INSURANCE COMMISSIONER

STATE OF ARKANSAS

11-14-19 DATE

# Stricken language would be deleted from and underlined language would be added to present law. Act 521 of the Regular Session

1	State of Arkansas	As Engrossed: \$2/27/19				
2	92nd General Assembly	A Bill				
3	Regular Session, 2019		SENATE BILL 310			
4						
5	By: Senator Rapert					
6						
7		For An Act To Be Entitled				
8	AN ACT T	O ENACT THE STATE INSURANCE DEPARTMENT	r's			
9	GENERAL	OMNIBUS; TO AMEND THE ARKANSAS PREPAI	)			
10	FUNERAL :	BENEFITS LAW; TO REPEAL THE ANNUAL RE	PORT OF			
11	MALPRACT	ICE RATES; TO AMEND THE REQUIREMENTS I	OR AN			
12	INSURER'	S ANNUAL STATEMENT; CONCERNING THE LIC	CENSING			
13	AND REGU	LATION OF CAPTIVE INSURERS; TO ESTABLE	SH THE			
14	CORPORAT	E GOVERNANCE ANNUAL DISCLOSURE ACT; TO	REVISE			
15	THE PROC	EDURE FOR THE APPOINTMENT OF AN INSURA	ANCE			
16	AGENT; TO	MODIFY THE PROCEDURE OF REMITTANCE OF	F			
17	PREMIUM '	TAXES BY A SURPLUS LINES BROKER; TO MO	DIFY			
18	THE REQUIREMENTS FOR A DOMESTIC STOCK INSURER TO					
19	OBTAIN REINSURANCE BY AN ASSUMPTION AGREEMENT;					
20	CONCERNING THE APPLICABILITY OF THE ARKANSAS					
21	INSURANCE	E CODE TO FARMERS' MUTUAL AID COMPANIE	S AND			
22	ASSOCIATI	IONS; TO MODIFY EXCEPTED BENEFITS; AND	FOR			
23	OTHER PUR	RPOSES.				
24						
25						
26		Subtitle				
27	TO	ENACT THE STATE INSURANCE DEPARTMENT'S	3			
28	GEN	ERAL OMNIBUS.				
29						
30						
31	BE IT ENACTED BY THE	GENERAL ASSEMBLY OF THE STATE OF ARKA	NSAS:			
32						
33	SECTION 1. Ark	cansas Code § 23-40-103 is amended to	read as follows:			
34	23-40-103. Def	finitions.				
35	As used in this	chapter <del>, unless the context otherwi</del> s	e requires:			
36	(1) <u>"Ann</u>	uity funding" means contract proceeds	that are used by a			



1	seller to purchase an annuity contract that names the seller as the
2	beneficiary of the annuity contract, the proceeds of which shall be used to
3	pay for the funeral benefits specified in a prepaid contract, or the
4	purchaser may elect to purchase an annuity contract directly from an
5	insurance carrier and either name the seller as the policy beneficiary or
6	assign the death benefits to the seller to fund the prepaid funeral benefits
7	contract;
8	(2) "Cash accommodation items" means flowers, honorariums, death
9	certificates, sales taxes, grave opening and closing, cemetery charges, and
10	other items incidental to the funeral and disposition of the beneficiary
11	which are to be furnished or provided by a third party at the time of death;
12	(2)(3) "Contract beneficiary" means any natural person
13	designated in a prepaid funeral benefits contract upon whose death funeral
14	services or funeral merchandise, or both, shall be performed, provided, or
15	delivered;
16	(4)(A) "Contract funding methods" means contract proceeds.
17	(B) "Contract funding methods" includes:
18	(i) Annuity funding;
19	(ii) Insurance funding; and
20	(iii) Trust funding;
21	(3)(5) "Contract price" means the aggregate moneys to be paid
22	and the aggregate stated value of all other direct or indirect consideration
23	to be assigned by purchasers of prepaid funeral benefits as provided in the
24	contract, exclusive of any finance charge;
25	(4)(6) "Contract proceeds" means the portion of the contract
26	price collected by the seller from a contract for the sale of prepaid funeral
27	benefits;
28	(7) "Insurance funding" means contract proceeds that are used by
29	a seller to purchase a life insurance policy or certificate on the life of a
30	contract beneficiary that names the seller as the beneficiary of the life
31	insurance policy or certificate, the indemnity from which shall be used to
32	pay for the funeral benefits specified in the prepaid contract, or the
33	purchaser may elect to purchase a life insurance policy or certificate
34	directly from an insurance carrier, and then either name the seller as the
35	life insurance policy beneficiary or assign the death benefits to the seller
36	to fund the prepaid funeral benefits contract;

1 (5)(8) "Licensee" or "permittee" means a person holding a valid 2 permit or license issued pursuant to this chapter; (6)(9) "Liquid investments" means investments which can be sold 3 4 at cost or greater, liquidated without penalty, and collected within five (5) 5 banking days; 6 (7)(10) "Net investment income" means: (A) All revenue and earnings of the trust fund, including, 7 8 but not limited to, interest, dividends, and capital gains; minus 9 (B) Investment expenses, trustee's fees, capital losses, 10 and all revenue and earnings on cash accommodation funds; 11 (8)(11) "Net worth" means the difference between the applicant's 12 total assets and total liabilities as reflected in a balance sheet prepared 13 in accordance with according to accounting principles and procedures approved 14 by the Insurance Commissioner; 15 (9)(12) "Nonguaranteed prepaid contract" means a prepaid 16 contract for the selection of merchandise or services that does not guarantee 17 the price of the merchandise or services at the time of need; 18 (10)(13) "Nonspecified prepaid contract" means a prepaid 19 contract that: 20 (A) Does not select specific funeral merchandise or 21 funeral services when the contract is executed: 22 (B) Permits the selection of funeral merchandise or 23 funeral services at the time of need; and 24 (C) Applies contract funds to the cost of funeral 25 merchandise or funeral services selected at the time of need; 26 (11)(A)(14)(A) "Prearrangement" means an arrangement whereby a 27 person, for himself or herself or on behalf of some other person, makes 28 arrangement for funeral and burial services prior to the death of the person, 29 without consideration and without an agreement or itemization specifying any 30 particular service or merchandise, or the cost thereof, through the 31 assignment or transfer, including the conditions that the assignor or 32 transferor may choose to impose, of ownership to a licensee of an insurance 33 policy or annuity contract, or proceeds thereof, or by the designation of a 34 licensee as beneficiary of any such insurance policy or annuity contract. 35 (B) An assignment of an insurance policy or annuity or the 36 proceeds thereof to a funeral home or the designation of a funeral home as

beneficiary as described in subdivision (11)(A)(14)(A) of this section is not

- 2 a prepaid funeral benefits contract;
- 3 (12)(A)(15)(A) "Prepaid funeral benefits contract" or "prepaid
- 4 contract" means a contract or agreement for the prepayment and sale in this
- 5 state of funeral services or funeral merchandise, including without
- 6 limitation caskets, grave vaults, and all other articles of merchandise and
- 7 services incidental to funeral services, at an agreed-upon price, to be
- 8 delivered at an undetermined future date depending upon the death of the
- 9 contract beneficiary.
- 10 (B) "Prepaid funeral benefits contract" or "prepaid
- 11 contract" includes a nonguaranteed prepaid contract and a nonspecified
- 12 prepaid contract.
- 13 (C) "Prepaid funeral benefits contract" or "prepaid
- 14 contract" does not include a prearrangement;
- 15 (13)(16) "Seller" means the organization selling prepaid funeral
- 16 benefits or owning any interest in any contract for prepaid funeral benefits
- 17 pursuant to this chapter;
- 18 (14)(17) "Surplus" means the funds or other property in excess
- 19 of the undistributed net investment income and aggregate contract proceeds
- 20 held in the trust fund; and
- 21 (18) "Trust funding" means the depositing of contract proceeds
- 22 into a trust account by a seller until such time as the funds are needed to
- 23 pay for benefits specified in the prepaid funeral benefits contract; and
- 24 (15)(19) "Trustee" means a state or national bank or savings and
- 25 loan association in this state, or, in the reasonable discretion of the
- 26 commissioner upon the terms and conditions that he or she may require, a
- 27 securities brokerage firm licensed and in good standing with appropriate
- 28 state and federal regulatory authorities.
- 29
- 30 SECTION 2. Arkansas Code § 23-40-122, concerning the cancellation or
- 31 transfer of a prepaid contract under the Arkansas Prepaid Funeral Benefits
- 32 Law, is amended to add an additional subsection to read as follows:
- 33 (c)(1)(A) In the case of cancellations, reassignments, or transfers, a
- 34 seller is entitled to retain any accrued interest income on a cash-funded
- 35 prepaid funeral benefits contract that is being transferred to a substitute
- 36 provider.

1 (B) On an insurance-funded or annuity-funded prepaid 2 funeral benefits contract that is being transferred to a substitute provider. 3 a seller shall be entitled to retain any accrued interest income on the 4 policy used to fund the insurance-funded or annuity-funded prepaid funeral benefits contract from the policy inception date up to the reassignment or 5 transfer date. 6 7 (2) A substitute provider shall be entitled to retain any 8 accrued interest income on the funding mechanism from the completion date of 9 the reassignment or transfer. 10 11 SECTION 3. Arkansas Code § 23-61-114 is repealed. 12 23-61-114. Annual report regarding malpractice rates. 13 (a) The Insurance Commissioner shall conduct an annual study of 14 malpractice-insurance-rates in Arkansas and report the findings to the 15 Legislative Council and the chairs of both the House Committee on Insurance and Commerce and the Senate Committee on Insurance and Commerce. 16 17 (b) The study shall include: 18 (1) Any findings regarding any changes in medical malpractice 19 rates; 20 (2) Any other finding that is relevant to malpractice insurance 21 rates; and 22 (3) Any recommendations in respect to any law relating to 23 medical malpractice insurance. 24 (c) The report shall be submitted no later than August 1 subsequent to 25 the year studied. 26 27 SECTION 4. Arkansas Code § 23-63-216(b), concerning the requirements 28 for an insured's annual statement, is amended to read as follows: 29 (b)(1)(A) Except as provided under subdivision (b)(2) of this section, 30 in In addition to the information required by subsection (a) of this section, 31 a market conduct annual statement shall be filed, when applicable, with the 32 commissioner if: an authorized insurer reporting fifty thousand dollars 33 (\$50,000) or more in annual gross premiums shall file for each line of 34 business written in this state a market conduct annual statement, or 35 successor product, in the general form and context, in the time frame required by, and according to instructions provided by the National 36

1	Association of Insurance Commissioners.
2	(B) If a particular line of business does not have an
3	approved market conduct annual statement form, the authorized insurer is not
4	required to file a report for that line of business until such time as the
5	National Association of Insurance Commissioners adopts a market conduct
6	annual statement form for that line of business.
7	(A) A-property and casualty insurer reports fifty thousand
8	dollars (\$50,000) or more in homeowner or private passenger automobile gross
9	premiums;
10	(B) A life and annuity insurer reports fifty thousand
11	dollars (\$50,000) or more in individual life insurance premiums or annuity
12	gross premiums; or
13	(C) An insurer reports fifty thousand dollars (\$50,000) or
14	more in premiums for:
15	(i) Long-term care policies;
16	(ii) - Lifelong term care hybrid policies; or
17	(iii) - Annuity long-term care hybrid products.
18	(2) An insurer is not required to file a market conduct annual
19	statement under subdivision (b)(1) of this section if the insurer:
20	(A) Sells prepaid funeral or prepaid legal products only;
21	or
22	(B) Is licensed only in this state.
23	(3) After review of the market conduct annual statement, the The
24	commissioner may, for good cause, require additional filing of other market
25	conduct functions information considered relevant grant an extension of time
26	for filing a market conduct annual statement, if a written application for an
27	extension of time is received at least five (5) business days before the
28	filing due date.
29	
30	SECTION 5. Arkansas Code § 23-63-1601 is amended to read as follows:
31	23-63-1601. Definitions.
32	As used in this subchapter:
33	(1) "Affiliated company" means a company in the same corporate
34	system as a parent, an industrial insured, or a member organization by virtue
35	of common ownership, control, operation, or management;
36	(2) "Alien captive insurance company" means an insurance company

- formed to write insurance business for its parents and affiliates and
- 2 licensed under the laws of an alien jurisdiction that imposes statutory or
- 3 regulatory standards in a form acceptable to the Insurance Commissioner on
- 4 companies transacting the business of insurance in the alien jurisdiction;
- 5 (3) "Association" means a legal association of individuals,
- 6 corporations, partnerships, or associations that has been in continuous
- 7 existence for at least one (1) year:
- 8 (A) The member organizations of which collectively, or
- 9 which does itself:
- 10 (i) Own, control, or hold with power to vote all of
- 11 the outstanding voting securities of an association captive insurance company
- 12 incorporated as a stock insurer; or
- 13 (ii) Have complete voting control over an
- 14 association captive insurance company incorporated as a mutual insurer; or
- 15 (B) The member organizations of which collectively
- 16 constitute all of the subscribers of an association captive insurance company
- 17 formed as a reciprocal insurer;
- 18 (4) "Association captive insurance company" means a company that
- 19 insures risks of the member organizations of the association and their
- 20 affiliated companies;
- 21 (5) "Branch business" means any insurance business transacted by
- 22 a branch captive insurance company in this state;
- 23 (6)(A) "Branch captive insurance company" means an alien captive
- 24 insurance company licensed by the commissioner to transact the business of
- 25 insurance in this state through a business unit with a principal place of
- 26 business in this state.
- 27 (B) A branch captive insurance company shall be a pure
- 28 captive insurance company with respect to operations in this state unless
- 29 permitted by the commissioner;
- 30 (7) "Branch operations" means any business operations of a
- 31 branch captive insurance company in this state;
- 32 (8) "Captive insurance company" means a producer reinsurance
- 33 captive insurance company, pure captive insurance company, association
- 34 captive insurance company, sponsored captive insurance company, special
- 35 purpose captive insurance company, or industrial insured captive insurance
- 36 company formed or licensed under this subchapter;

1	(9) "Commissioner" means the Insurance Commissioner;
2	(10) "Controlled unaffiliated business" or "controlled
3	unaffiliated entity" means a company:
4	(A) That is not in the corporate system of a parent and
5	affiliated companies;
6	(B) That has an existing contractual relationship with a
7	parent or affiliated company; and
8	(C) Whose risks are managed by a pure captive insurance
9	company or participant in a sponsored captive insurance company;
10	(11) "Department" means the State Insurance Department;
11	(12) "General account" means all assets and liabilities of the
12	sponsored captive insurance company not attributable to a protected cell;
13	(13) "Incorporated protected cell" means a protected cell that
14	is established as a corporation or other legal entity separate from the
15	sponsored captive insurance company or producer reinsurance captive insurance
16	company of which it is a part;
17	(13)(A)(14)(A) "Industrial insured" means an insured:
18	(i) That procures insurance by use of the services
19	of a full-time employee acting as a risk manager or insurance manager or
20	utilizing the services of a regularly and continuously qualified insurance
21	consultant;
22	(ii) Whose aggregate annual premiums for insurance
23	on all risks total at least twenty-five thousand dollars (\$25,000); and
24	(iii) That has at least twenty-five (25) full-time
25	employees.
26	(B) "Industrial insured" does not mean "industrial life
27	insurance" as used in § 23-82-101 et seq.;
28	$\frac{(14)(A)(15)(A)}{(15)(A)}$ "Industrial insured captive insurance company"
29	means a company that insures risks of the industrial insureds that compose
30	the industrial insured group and their affiliated companies.
31	(B) "Industrial insured captive insurance company" does
32	not encompass "industrial life insurance" as used in § 23-82-101 et seq.;
33	$\frac{(15)(A)}{(16)(A)}$ "Industrial insured group" means a group that
34	meets either of the following criteria:
35	(i) A group of industrial insureds that
36	collectively:

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1
                                    (a) Own, control, or hold with power to vote
 2
     all of the outstanding voting securities of an industrial insured captive
 3
     insurance company incorporated as a stock insurer; or
 4
                                    (b) Have complete voting control over an
 5
     industrial insured captive insurance company incorporated as a mutual
 6
     insurer: or
 7
                              (ii) A group which is created under the Product
     Liability Risk Retention Act of 1981, 15 U.S.C. § 3901 et seq., as it existed
 8
 9
     January 1, 2001, or the Risk Retention and Purchasing Groups Act, § 23-94-201
     et seq., or as a corporation or other limited liability association taxable
10
11
     as a stock insurance company or a mutual insurer under the Arkansas Insurance
12
     Code.
13
                       (B) "Industrial insured group" does not encompass
14
     "industrial life insurance" as used in § 23-82-101 et seq.;
15
                 (16)(17) "Member organization" means an individual, corporation,
     partnership, or association that belongs to an association;
16
17
                 (17)(18) "Parent" means a corporation, partnership, or
18
     individual that directly or indirectly owns, controls, or holds with power to
19
     vote more than fifty percent (50%) of the outstanding voting securities of a
     pure captive insurance company;
20
21
                 (18)(19) "Participant" means an entity as defined in § 23-63-
22
     1621 and any affiliates of that entity that are insured by a sponsored
23
     captive insurance company when the losses of the participant are limited
24
     through a participant contract to the assets of a protected cell;
25
                 (19)(20) "Participant contract" means a contract by which a
26
     sponsored captive insurance company insures the risks of a participant and
27
     limits the losses of the participant to the assets of a protected cell;
28
                 (20)(21) "Producer reinsurance captive insurance company" means
29
     a company that is wholly owned by a resident licensed insurance producer and
30
     that acts only as a reinsurer for risks written by or placed through its
31
     parent or an affiliate of its parent:
32
                 (21)(22) "Protected cell" means a separate account established
     and maintained by a sponsored captive insurance company for one (1)
33
34
    participant or by a producer reinsurance captive insurance company and
35
     includes an incorporated protected cell;
36
                (22)(23) "Pure captive insurance company" means a company that
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1 insures risks of its parent and affiliated companies or controlled 2 unaffiliated business: 3 (23)(24) "Special purpose captive insurance company" means a 4 captive insurance company that is formed or licensed under this chapter subchapter and does not meet the definition of any other type of captive 5 6 insurance company defined in this section; 7 (24)(25) "Sponsor" means an entity that meets the requirements 8 of § 23-63-1620 and is approved by the commissioner to provide all or part of the capital and surplus required by applicable law and to organize and 9 operate a sponsored captive insurance company; and 10 11 (25)(26) "Sponsored captive insurance company" means a captive 12 insurance company: 13 (A) In which the minimum capital and surplus required is 14 provided by one (1) or more sponsors; 15 That is formed or licensed under this subchapter; 16 That insures the risks of separate participants 17 through the contract; and 18 (D) That segregates each participant's liability through 19 one (1) or more protected cells. 20 21 SECTION 6. Arkansas Code § 23-63-1604(a), concerning unimpaired paid-22 in capital requirements, is amended to read as follows: 23 (a)(1) The Insurance Commissioner may not shall not issue a license to 24 a producer reinsurance captive insurance company, pure captive insurance company, sponsored captive insurance company, association captive insurance 25 26 company incorporated as a stock insurer, or industrial insured captive insurance company incorporated as a stock insurer unless the company 27 28 possesses and maintains unimpaired paid-in capital of: 29 (A) In the case of a producer reinsurance captive 30 insurance company, not less than three hundred thousand dollars (\$300,000); 31 (B) In the case of a pure captive insurance company, not less than one hundred thousand dollars (\$100,000); 32 33 (C) In the case of an association captive insurance 34 company incorporated as a stock insurer, not less than four hundred thousand 35 dollars (\$400,000);

(D) In the case of an industrial insured captive insurance

company incorporated as a stock insurer, not less than two hundred thousand dollars (\$200,000);

- 3 (E) In the case of a sponsored captive insurance company,
- 4 not less than five hundred thousand dollars (\$500,000) two hundred fifty
- 5 thousand dollars (\$250,000); or
- 6 (F) In the case of a special purpose captive insurance
- 7 company, an amount determined by the commissioner after giving due
- 8 consideration to the company's business plan, feasibility study, and pro
- 9 formas, including the nature of the risks to be insured, but in no event less
- than three hundred thousand dollars (\$300,000).
- 11 (2) The capital may be in the form of:
- 12 (A) Cash;
- 13 (B) Other assets acceptable to the commissioner; or
- 14 (C) An irrevocable letter of credit issued by a bank
- 15 chartered by this state or a member bank of the Federal Reserve System and
- 16 approved by the commissioner.

- SECTION 7. Arkansas Code § 23-63-1605(a), concerning the unimpaired surplus requirements for a captive insurance company license, is amended to
- 20 read as follows:
- 21 (a)(1) The Insurance Commissioner may not shall not issue a license to 22 a captive insurance company unless the company possesses and maintains
- 23 unimpaired surplus of:
- 24 (A) In the case of a producer reinsurance captive
- 25 insurance company, not less than three hundred thousand dollars (\$300,000);
- 26 (B) In the case of a pure captive insurance company, not
- 27 less than one hundred fifty thousand dollars (\$150,000);
- 28 (C) In the case of an association captive insurance
- 29 company incorporated as a stock insurer, not less than three hundred fifty
- 30 thousand dollars (\$350,000);
- 31 (D) In the case of an industrial insured captive insurance
- 32 company incorporated as a stock insurer, not less than three hundred thousand
- 33 dollars (\$300,000);
- 34 (E) In the case of an association captive insurance
- 35 company incorporated as a mutual insurer, not less than seven hundred fifty
- 36 thousand dollars (\$750,000);

1	(F) In the case of an industrial insured captive insurance
2	company incorporated as a mutual insurer, not less than five hundred thousand
3	dollars (\$500,000);
4	(G) In the case of a sponsored captive insurance company,
5	not less than five hundred thousand dollars (\$500,000) two hundred fifty
6	thousand dollars (\$250,000); and
7	(H) In the case of a special purpose captive insurance
8	company, an amount determined by the commissioner after giving due
9	consideration to the company's business plan, feasibility study, and pro
10	formas, including the nature of the risks to be insured, but in no event less
11	than three hundred thousand dollars (\$300,000).
12	(2) The surplus may be in the form of:
13	(A) Cash;
14	(B) Other assets acceptable to the commissioner; or
15	(C) An irrevocable letter of credit issued by a bank
16	chartered by this state or a member bank of the Federal Reserve System and
17	approved by the commissioner.
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19	SECTION 8. Arkansas Code § 23-63-1606(f), concerning the privileges
20	and regulation of captive insurers, is amended to read as follows:
21	(f)(1) A captive insurance company formed under this subchapter has
22	the privileges of and is subject to the business organization law of this
23	state and is subject to this subchapter.
24	(2) If a conflict occurs between business organization law and
25	this subchapter, the latter controls.
26	(3)(A) The Arkansas Insurance Code concerning mergers,
27	consolidations, conversions, mutualizations, and redomestications applies in
28	determining the procedures to be followed by a captive insurance company in
29	carrying out any of those transactions.
30	(B) The commissioner may, upon request of an insurer that
31	is a party to a merger authorized under subdivision (f)(3)(A) of this
32	section, waive certain applicable requirements to the merger transaction.
33	(C) A conversion may be accomplished under a reasonable
34	plan and procedure as may be approved by the commissioner and according to
35	rules that the commissioner may promulgate.
36	(D) The commissioner may waive or modify the requirements

for public notice and hearing in accordance with rules that the commissioner
may promulgate addressing categories of transactions.

- 3 (C)(E) If a notice of public hearing is required but no 4 one requests a hearing, the commissioner may cancel the hearing.
  - (F) An alien insurer may be a party to a merger authorized under subdivision (f)(3)(A) of this section if the requirements for a merger between a captive insurance company and a foreign insurer under this chapter apply to the merger transaction.

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- SECTION 9. Arkansas Code § 23-63-1607(b), concerning the reporting requirements for captive insurers, is amended to read as follows:
  - (b)(1) Before March 1 of each year, or within an extension of time if, upon good cause shown, has been granted by the commissioner, a captive insurance company shall submit to the Insurance Commissioner a report of its financial condition, verified by oath of two (2) of its executive officers.
- 16 (2)(A) Except as provided in §§ 23-63-1604 and 23-63-1605, a
  17 captive insurance company shall report using generally accepted accounting
  18 principles unless the commissioner approves the use of statutory accounting
  19 principles.
  - (B) The commissioner may require, approve, or accept appropriate modifications or adaptations for the type of insurance and kinds of insurers to be reported upon, supplemented by additional information.
  - (3)(A) Unless provided otherwise, an association captive insurance company and an industrial insured group shall file their reports in the form required by  $\S 23-63-216(a)$ .
  - (B) The commissioner shall prescribe by regulation the forms in which producer reinsurance captive insurance companies, pure captive insurance companies, and industrial insured captive insurance companies shall report.

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- SECTION 10. Arkansas Code § 23-63-1610, concerning investments of captive insurance companies, is amended to add additional subsections to read as follows:
  - (d) Notwithstanding the provisions of § 23-63-1620, the assets of two
    (2) or more protected cells may be combined for purposes of investment, and
    the combination does not defeat the segregation of such assets for accounting

l or other purposes.

(e)(1) Sponsored captive insurance companies shall comply with the investment requirements contained in § 23-63-801 et seq., as applicable.

- (2) However, compliance with the investment requirements shall be waived for sponsored captive insurance companies to the extent that credit for reinsurance ceded to reinsurers is allowed under § 23-63-1611 or to the extent otherwise deemed reasonable and appropriate by the commissioner.
- valuation that is not inconsistent with the valuation method promulgated by the National Association of Insurance Commissioners and is reasonable under the circumstances, the valuation procedures established by the National Association of Insurance Commissioners shall apply to sponsored captive insurance companies except to the extent the valuation procedures are inconsistent with approved accounting standards in use by the company.
- (g) Notwithstanding any other provision of this subchapter, the commissioner may approve the use of alternative reliable methods of valuation and rating.

- SECTION 11. Arkansas Code § 23-63-1615(b)(1), concerning the promulgation of regulations to establish standards for captive insurance companies, is amended to read as follows:
- (b)(1) The commissioner may promulgate regulations rules establishing standards to ensure that a parent or affiliated company is able to exercise control of the risk management function of any controlled unaffiliated business to be insured by the pure captive insurance company or participant in a sponsored captive insurance company.

- SECTION 12. Arkansas Code § 23-63-1616, concerning the limitation of the applicability of the Arkansas Insurance Code on captive insurers, is amended to add additional subsections to read as follows:
- 31 (c) In addition to this subchapter, the following provisions of the
  32 Arkansas Insurance Code and applicable rules apply to a risk retention group
  33 formed under the Risk Retention and Purchasing Groups Act, § 23-94-201 et
  34 seq., and subject to this subchapter:
- 35 (1) Section 23-61-201 et seq., and the Arkansas Credit for 36 Reinsurance Law, § 23-62-301 et seq., referring to the commissioner:

1	(2) The Reinsurance Intermediary Act, § 23-62-401 et seq.;
2	(3) Section 23-63-212 and § 23-63-213, referring to certificates
3	of authority;
4	(4) Section 23-63-216(e) and the Property and Casualty Actuarial
5	Opinion Law, § 23-63-1901 et seq., referring to actuarial opinions;
6	(5) The Insurance Holding Company Regulatory Act, § 23-63-501 et
7	seq., and § 23-69-129, referring to dividends to stockholders;
8	(6) Section 23-63-601 et seq., referring to financial reporting
9	standards:
10	(7) Section 23-63-701, referring to limits of risk;
11	(8) Section 23-63-801 et seq., referring to investments;
12	(9) The Business Transacted with Producer Controlled Property
13	and Casualty Insurer Act, § 23-63-1101 et seq., referring to producer
14	controlled business;
15	(10) With the exception of § 23-63-1304(f) and § 23-63-1311, the
16	Risk-Based Capital Act, § 23-63-1301 et seq., referring to risk-based
17	<pre>capital;</pre>
18	(11) Section § 23-64-201 et seq., and the Producer Licensing
19	Model Act, § 23-64-501 et seq., referring to licensure;
20	(12) The Managing General Agents Act, § 23-64-401 et seq.,
21	referring to managing general agents; and
22	(13) Section 23-68-101 et seq., and § 23-69-138, referring to
23	impairment of capital or assets.
24	(d) If subsection (c) of this section is in conflict with this
25	subchapter, subsection (c) of this section controls.
26	(e) Except as provided in this subchapter, the Risk Retention and
27	Purchasing Groups Act, § 23-94-201 et seq., applies to a risk retention group
28	formed as a captive insurer.
29	(f) In determining whether to take regulatory action under § 23-63-
30	1304 - 1307, the commissioner may consider the adequacy of documentation
31	evidencing the sound financial condition of the risk retention group's
32	members or sponsoring organizations and intent to financially support the
33	risk retention group, including:
34	(1)(A) A minimum of three (3) years of audited financial
35	statements of the member or sponsor and one (1) year of projected financial
36	information.

1	(B) The projected financial information required in
2	subdivision (f)(1)(A) of this section shall include:
3	(i) An investment grade rating from a nationally
4	recognized statistical rating organization or A.M. Best rating of A- or
5	better;
6	(ii) Equity equal to or greater than one hundred
7	million dollars (\$100,000,000); and
8	(iii) Equity equal to or greater than ten (10) times
9	the risk retention group's largest net retained per occurrence limit; and
10	(2)(A) Policyholder qualification as an industrial insured in
11	this state or the policyholder's home state, depending upon which state has
12	the more stringent requirements.
13	(B) If the home state of the policyholder does not have an
14	industrial insured exemption or its equivalent, the policyholder shall
15	qualify under the industrial requirement of this state.
16	
17	SECTION 13. Arkansas Code § 23-63-1619 is repealed.
18	23-63-1619. Conversions and mergers.
19	(a) A captive insurance company may be converted to or merged with and
20	into another captive insurance company according to a plan and this section.
21	(b) A plan for conversion or merger:
22	(1)- Must be fair and equitable to the shareholders, in the case
23	of a stock insurer, or the policyholders, in the case of a mutual insurer;
24	<del>and</del>
25	(2) Shall provide for the purchase of the shares of any
26	nonconsenting shareholder of a stock insurer or the policyholder interest of
27	any nonconsenting policyholder of a mutual insurer in substantially the same
28	manner and subject to the same rights and conditions as are accorded a
29	dissenting shareholder or a dissenting policyholder under § 4-26-1011.
30	(e) In the-case of a conversion authorized under subsection (a) of
31	this section:
32	(1) The conversion must be accomplished under a reasonable plan
33	and-procedure as may be approved by the Insurance Commissioner;
34	(2) The commissioner may not approve the plan of conversion,
35	unless-the plan:
36	(A) Satisfies subsection (b) of this section;

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                       (B)(i) Provides for a hearing, of which notice has been
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     given to the insurer, its directors, officers, and stockholders, in the case
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     of a stock insurer, or policyholders, in the case of a mutual insurer, all of
     whom have the right to appear at the hearing.
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                              (ii) (a) The commissioner may waive or modify the
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     requirements for the hearing.
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                                   (b) If a notice of hearing is required but no
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     hearing is requested, the commissioner may cancel the hearing;
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                       (C) Provides for the conversion of existing stockholder or
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     policyholder interests into subscriber interests in the resulting reciprocal
     insurer proportionate to stockholder or policyholder interests in the stock
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     or mutual insurer; and
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                       (D) - Is approved:
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                             (i) In the case of a stock insurer, by a majority of
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     the shares entitled to vote represented in person or by proxy at a duly
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     called regular or special meeting at which a quorum is present; or
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                             (ii) In the case of a mutual insurer, by a majority
     of the voting interests of policyholders represented in person or by proxy at
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19
     a duly called regular or special meeting at which a quorum is present;
20
                 (3) The commissioner shall approve the plan of conversion, if
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     the commissioner finds that the conversion will promote the general good of
22
     the state in conformity with those standards stated in § 23-63-1606(d);
23
                 (4) If the commissioner approves the plan, the commissioner
24
     shall amend the converting insurer's certificate of authority to reflect
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     conversion to a reciprocal insurer and issue the amended certificate of
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     authority to the company's attorney in fact;
27
                 (5) Upon issuance of an amended-certificate of authority of a
28
     reciprocal insurer by the commissioner, the conversion is effective; and
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                 (6) Upon-the effectiveness of the conversion, the corporate
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     existence of the converting insurer shall cease.
31
           (d) A merger authorized under subsection (a)-of this section must be
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     accomplished substantially in accordance with the Arkansas Insurance Code.
33
    For purposes of the merger:
34
                 (1) The plan or merger shall satisfy subsection (b) of this
35
    section:
36
                 (2) The subscribers' advisory committee of a reciprocal insurer
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1	must be equivalent to the board of directors of a stock or mutual insurance
2	company;
3	(3) The subscribers of a reciprocal insurer must be the
4	equivalent to the policyholders of a mutual insurance company;
5	(4) If a subscribers' advisory committee does not have a
6	president or secretary, the officers of the committee having substantially
7	equivalent duties are deemed to be the president and-secretary of the
8	committee;
9	(5)(A) The commissioner shall approve the articles of merger if
10	the commissioner finds that the merger will promote the general good of the
11	state in conformity with those standards stated in § 23-63-1606(d).
12	(B) If the commissioner approves the articles of merger,
13	the commissioner shall endorse the articles;
14	(6)(A) Notwithstanding § 23-63-1604, the commissioner may permit
15	the formation without surplus of a captive insurance company organized as a
16	reciprocal insurer into which an existing captive insurance company may be
17	merged for the purpose of facilitating a transaction under this section.
18	(B) There may be no more than one (1) authorized insurance
19	company surviving the merger; and
20	(7)(A) An alien insurer may be a party to a merger authorized
21	under subsection (a) of this section, if the requirements for the merger
22	between a domestic and a foreign insurer under the Insurance Holding Company
23	Regulatory Act, § 23-63-501 et seq., apply to a merger between a domestic and
24	an alien insurer under this subsection.
25	(B) The alien insurer must be treated as a foreign insurer
26	under the Insurance Holding Company Regulatory Act, § 23-63-501 et seq., and
27	other jurisdictions must be the equivalent of a state for purposes of the
28	Insurance Holding Company Regulatory Act, § 23-63-501 et seq.
29	(e) A conversion or merger under this section has all the effects of a
30	conversion or merger under the Arkansas Insurance Code, to the extent these
31	effects are not inconsistent with this subchapter.
32	
33	SECTION 14. Arkansas Code § 23-63-1620 is amended to read as follows:
34	23-63-1620. Sponsorship requirements Sponsored captive insurance
35	<pre>company - Requirements.</pre>
36	(a) One (1) or more sponsors may form a sponsored captive insurance

1	company under this subchapter.
2	(b)(1) A sponsor of a sponsored captive insurance company must be: may
3	be any person approved by the Insurance Commissioner, in his or her
4	discretion, based on a determination that the approval of the person as a
5	sponsor is consistent with the purposes of this section.
6	(1)(2) An insurer-licensed under the laws of any state In
7	evaluating the qualifications of a proposed sponsor, the commissioner shall
8	consider:
9	(A) The type and structure of the proposed sponsor entity;
10	(B) The experience in financial operations of the proposed
11	sponsor entity;
12	(C) The financial stability and strength of the proposed
13	sponsor entity;
14	(D) The business reputation of the proposed sponsor
15	entity; and
16	(E) Other facts the commissioner deems relevant.
17	(2) A reinsurer authorized or approved under the laws of any
18	<del>State;</del>
19	(3) A captive insurance company formed or licensed under this
20	subchapter; or
21	(4) Any other corporation, if approved by the Insurance
22	Commissioner, in a manner to be prescribed by regulation.
23	(c) In addition to the information required by § 23-63-1602, each
24	applicant-sponsored captive insurance company shall file with the
25	commissioner the following:
26	(1) Materials demonstrating how the applicant will account for
27	the loss and expense experience of each protected cell at a level of detail
28	found to be sufficient by the commissioner, and how it will report the
29	experience to the commissioner:
30	(2) A statement acknowledging that all financial records of the
31	sponsored captive insurance company, including records pertaining to any
32	protected cells, shall be made available for inspection or examination by the
33	commissioner or his or her designee;
34	(3) All contracts or sample contracts between the sponsored
35	captive insurance company and any participants; and
36	(4) Evidence that expenses shall be allocated to each protected

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- 2 (d) In his or her discretion, the commissioner may require that the 3 business written by a sponsored captive insurance company, with respect to each protected cell, be fronted by an insurance company licensed under the 1 laws of any state.:
- 6 (1) Fronted by an insurance company licensed under the laws of 7 any state;
- 8 (2) Reinsured by a reinsurer authorized or approved by the 9 commissioner; or
- 10 (3)(A) Secured by a trust fund in the United States for the
  11 benefit of policyholders and claimants or funded by an irrevocable letter of
  12 credit or other arrangement that is acceptable to the commissioner.
- 13 (B) The commissioner may require the sponsored captive
  14 insurance company to increase the funding of any security arrangement
  15 established under subdivision (d)(3)(A) of this section.
- (C) If the form of security is a letter of credit, the
  letter of credit shall be issued or confirmed by a bank approved by the
  commissioner.
- 19 (D) A trust maintained under subdivision (d)(3)(A) of this
  20 section shall be established in a form and upon the terms approved by the
  21 commissioner.
  - (d)(e) A risk retention group may not shall not be either a sponsor or a participant of a sponsored captive insurance company.
  - (e)(f) A sponsored captive insurance company formed or licensed under this subchapter may establish and maintain one (1) or more protected cells to insure risks of one (1) or more participants, subject to the following conditions:
  - (1) The shareholders of a sponsored captive insurance company must be limited to its participants and sponsors;
  - (2) Each protected cell must be accounted for separately on the books and records of the sponsored captive insurance company to reflect the financial condition, results of operations of the protected cell, net income or loss, dividends or other distributions to participants, and other factors provided for in the participant contract or required by the commissioner;
- 35 (3) The assets of a protected cell must not be chargeable with 36 liabilities arising out of any other insurance business the sponsored captive

- insurance company may conduct;
- 2 (4) No sale, exchange, or other transfer of assets may be made
- 3 by the sponsored captive insurance company between or among any of its
- 4 protected cells without the consent of the protected cells;
- 5 (5)(A) No sale, exchange, transfer of assets, dividend, or
- 6 distribution may be made from a protected cell to a sponsor or participant
- 7 without the commissioner's approval.
- 8 (B) In no event may the commissioner's approval be given
- 9 if the sale, exchange, transfer, dividend, or distribution would result in
- 10 insolvency or impairment with respect to a protected cell;
- 11 (6) (A) All attributions of assets and liabilities to the
- 12 protected cells and the general account shall be according to the plan of
- 13 operation approved by the commissioner.
- (B) Other attribution of assets or liabilities shall not
- 15 be made by a sponsored captive insurance company between its general account
- and a protected cell or between protected cells.
- 17 (C) The sponsored captive insurance company shall
- 18 attribute all insurance obligations, assets, and liabilities relating to a
- 19 reinsurance contract entered into with respect to a protected cell to the
- 20 protected cell.
- 21 (D) The performance under the reinsurance contract and any
- 22 tax benefits, losses, refunds, or credits allocated under a tax allocation
- 23 agreement to which the sponsored captive insurance company is a party,
- 24 including any payments made by or due to be made to the sponsored captive
- 25 insurance company under the terms of the agreement, shall reflect the
- 26 insurance obligations, assets, and liabilities relating to the reinsurance
- 27 contract that are attributed to the protected cell:
- 28 (7) A sponsored captive insurance company shall file annually
- 29 all the financial reports the commissioner requires, which shall include, but
- 30 are not limited to, without limitation accounting statements detailing the
- 31 financial experience of each protected cell;
- 32 (7)(8) A sponsored captive insurance company shall notify the
- 33 commissioner in writing within ten (10) business days of a protected cell
- 34 that is insolvent or unable to meet its claim or expense obligations; and
- 35  $\frac{(8)(A)(9)(A)}{(9)(A)}$  No participant contract shall take effect without
- 36 the commissioner's prior written approval.

- 1 (B) The addition of each new protected cell and the 2 withdrawal of any participant of any existing protected cell constitute a 3 change in the business plan requiring the commissioner's prior written 4 approval.
  - (f) (g) A protected cell of a sponsored captive insurance company may be formed as an incorporated protected cell subject to subsection (e) (f) of this section and the following conditions:
  - (1)(A) Subject to the prior written approval of the sponsored captive insurance company and of the commissioner, an incorporated protected cell may enter into contracts and undertake obligations in its own name and for its own account.
  - (B) In the case of a contract or obligation to which the sponsored captive insurance company is not a party, either in its own name and for its own account or on behalf of a protected cell, the counterparty to the contract or obligation does not have a right or recourse against the sponsored captive insurance company and its assets other than against assets properly attributable to the incorporated protected cell that is a party to the contract or obligation;
  - (2)(A) The articles of incorporation or articles of organization of an incorporated protected cell shall refer to the sponsored captive insurance company for which it is a protected cell and shall state that the protected cell is incorporated or organized for the limited purposes authorized by the sponsored captive insurance company's license.
  - (B) A copy of the prior written approval of the commissioner to add the incorporated protected cell shall be attached to and filed with the articles of incorporation or the articles of organization; and
  - (3) An incorporated protected cell shall have its own distinct name or designation, which shall include the words "Incorporated Cell".
  - (g)(1)(h)(l) A protected cell of a sponsored captive insurance company may be converted into an incorporated protected cell subject to the following conditions:
  - (A) Subject to the prior written approval of the commissioner, on application of the sponsor and with the prior consent of each participant of the affected protected cell or as otherwise permitted pursuant to a participation agreement, a sponsored captive insurance company may convert a protected cell into an incorporated protected cell without

1	affecting the protected cell's assets, rights, benefits, obligations, and
2	liabilities; and
3	(B) Any such The conversion shall be deemed:
4	(i) For all purposes to be a continuation of the
5	protected cell's existence together with all of its assets, rights, benefits,
6	obligations, and liabilities, as an incorporated protected cell of the
7	sponsored captive insurance company; and
8	(ii) To occur without any transfer or assignment of
9	any such assets, rights, benefits, obligations, or liabilities and without
10	the creation of any reversionary interest in, or impairment of, any such
11	assets, rights, benefits, obligations, and liabilities.
12	(i) A protected cell of a sponsored captive insurance company may be
13	sold, transferred, or assigned subject to the following conditions:
14	(1) Subject to the prior written approval of the commissioner.
15	on application of the sponsor and with the prior consent of each participant
16	of the affected protected cell, or as otherwise permitted under a
17	participation agreement, or with the consent of the affected incorporated
18	protected cell, a sponsored captive insurance company may sell, transfer,
19	assign, and otherwise convey a protected cell or incorporated protected cell
20	together with all of the protected cell's assets, rights, benefits,
21	obligations, and liabilities to a new or existing sponsored captive insurance
22	company, under a plan of operation that is approved by the commissioner;
23	(2) The sale, transfer, assignment, or conveyance is a
24	continuation of the protected cell's existence together with all of its
25	assets, rights, benefits, obligations, and liabilities, as a protected cell
26	of the transferee; and
27	(3) The sale, transfer, assignment, or conveyance shall not be
28	construed to limit any rights or protections applicable to the transferred
29	protected cell or incorporated protected cell and the transferor sponsored
30	captive insurance company that existed immediately before the sale, transfer,
31	assignment, or conveyance.
32	(j) A protected cell of a sponsored captive insurance company may be
33	converted to a new entity subject to the following conditions:
34	(1) Subject to the prior written approval of the commissioner,
35	on application of the sponsor and with the prior consent of each participant
36	in the affected protected cells or as otherwise permitted under a

1	participation agreement and the consent of each affected incorporated
2	protected cell, a sponsored captive insurance company may convert one (1) or
3	more protected cells or incorporated protected cells into a:
4	(A) Single protected cell or incorporated protected cell;
5	(B) New sponsored captive insurance company;
6	(C) New pure captive insurance company;
7	(D) New risk retention group;
8	(E) New industrial insured captive insurance company; or
9	(F) New association captive insurance company;
10	(2)(A) The conversion shall be subject to this section as well
11	as to a plan of operation approved by the commissioner, without affecting any
12	protected cell's or incorporated protected cell's assets, rights, benefits,
13	obligations, and liabilities.
14	(B) The conversion is a continuation of each protected
15	cell's or incorporated protected cell's existence together with all of its
16	assets, rights, benefits, obligations, and liabilities, as a new protected
17	cell or incorporated protected cell, a licensed sponsored captive insurance
18	company, a pure captive insurance company, a risk retention group, an
19	industrial insured captive insurance company, or an association captive
20	insurance company, as applicable.
21	(C) The conversion shall occur without any transfer or
22	assignment of assets, rights, benefits, obligations, or liabilities and
23	without the creation of any reversionary interest in, or impairment of
24	assets, rights, benefits, obligations, and liabilities; and
25	(3) The conversion shall not be construed to limit any rights or
26	protections applicable to any converted protected cell or incorporated
27	protected cell and the sponsored captive insurance company, as applicable,
28	that existed immediately before the date of the conversion.
29	(k)(1) Upon an order of supervision, rehabilitation, or liquidation of
30	a sponsored captive insurance company, the receiver shall manage the assets
31	and liabilities of the sponsored captive insurance company under this
32	subsection.
33	(2) In connection with the conservation, rehabilitation, or
34	liquidation of a sponsored captive insurance company, the assets and
35	liabilities of a protected cell shall at all times be kept separate from, and
36	shall not be commingled with, those of other protected cells and the

1 sponsored captive insurance company. 2 (3) The assets of a protected cell shall not be used to pay any 3 expenses or claims other than those attributable to the protected cell. 4 (4)(A) Unless the sponsor consents and the commissioner has granted prior written approval, the assets of the sponsored captive insurance 5 6 company's general account shall not be used to pay any expenses or claims attributable solely to a protected cell of the sponsored captive insurance 7 8 company. 9 (B) If the assets of the sponsored captive insurance 10 company's general account are used to pay expenses or claims attributable 11 solely to a protected cell of the sponsored captive insurance company, the 12 sponsor is not required to contribute additional capital and surplus to the sponsored captive insurance company's general account, notwithstanding the 13 14 provisions of §§ 23-63-1604 and 23-63-1605. 15 (5) A sponsored captive insurance company's capital and surplus 16 shall at all times be available to pay any expenses of or claims against the 17 sponsored captive insurance company. 18 (6) In the event of the insolvency of a sponsored captive 19 insurance company in which the commissioner determines that one (1) or more 20 protected cells remain solvent, the commissioner may separate the cells from 21 the sponsored captive insurance company and, on application of the sponsor, 22 may allow for the conversion of the protected cells into one (1) or more new or existing sponsored captive insurance companies, or one (1) or more other 23 24 captive insurance companies, under a plan of operation approved by the 25 commissioner. 26 (1)(1)(A) A creditor of a sponsored captive insurance company shall 27 have recourse against the assets attributable to a protected cell only if it 28 is a creditor of the protected cell. 29 (B) A creditor of a protected cell shall not be entitled 30 to recourse against the assets attributable to another protected cell or to 31 the assets in the sponsored captive insurance company's general account. 32 (2) When a sponsored captive insurance company has an obligation 33 to a creditor arising from a transaction or otherwise imposed with respect to 34 a protected cell, the obligation shall: 35 (A) Extend only to the assets attributable to that 36 protected cell, and the creditor shall be entitled to recourse only against

T	the assets attributable to that protected cell; and
2	(B) Not extend to the assets of another protected cell or
3	to the assets in the sponsored captive insurance company's general account.
4	and the creditor shall not be entitled to recourse against the assets
5	attributable to another protected cell or to the assets of the sponsored
6	captive insurance company's general account.
7	(3) When an obligation of a sponsored captive insurance company
8	relates solely to its general account, a creditor shall have recourse only
9	against the assets in the general account.
10	(4) The establishment of one (1) or more protected cells alone,
11	and without more, shall not constitute or be deemed to be a fraudulent
12	conveyance, an intent by the sponsored captive insurance company to defraud
13	creditors, or the carrying out of business by the sponsored captive insurance
14	company for any other fraudulent purpose.
15	$\frac{(2)(A)(m)}{(m)}$ It is the intent of the General Assembly under this section
16	to provide sponsored captive insurance companies with the option to establish
17	one (1) or more protected cells as a separate legal entity.
18	$\frac{B}{n}$ This section does not limit any rights or protections
19	applicable to protected cells that are not established as separate legal
20	entities.
21	
22	SECTION 15. Arkansas Code § 23-63-1621(d), concerning a participant in
23	a sponsored captive insurance company, is amended to read as follows:
24	(d) A participant shall <u>not</u> insure <del>only its own</del> any risks <del>through a</del>
25	sponsored captive insurance company other than its own, its affiliated
26	entities, or of controlled unaffiliated entities.
27	
28	SECTION 16. Arkansas Code Title 23, Chapter 63, is amended to add an
29	additional subchapter to read as follows:
30	Subchapter 20 - Corporate Governance Annual Disclosure Act
31	
32	23-63-2001. Title.
33	This subchapter shall be known and may be cited as the "Corporate
34	Governance Annual Disclosure Act".
35	
36	23-63-2002. Purpose - Intent.

1	(a) The purpose of this subchapter is to:
2	(1) Provide the Insurance Commissioner a summary of the
3	corporate governance structure, policies, and practices of an insurer or
4	insurance group to allow the commissioner an opportunity to gain and maintain
5	a better understanding of the corporate governance framework of an insurer
6	operating in this state;
7	(2) Outline the requirements for completing a corporate
8	governance annual disclosure; and
9	(3) Provide assurance for the confidential treatment of the
10	corporate governance annual disclosure and related information due to the
11	confidential and sensitive information it will reveal as it relates to the
12	internal operations and proprietary and trade secret information of an
13	insurer or insurance group which, if made public, could potentially cause the
14	insurer or insurance group competitive harm or disadvantage.
15	(b) It is the intent of the General Assembly that this subchapter:
16	(1) Shall not be construed to prescribe or impose
17	corporate governance standards and internal procedures beyond that which is
18	required under applicable state corporate law;
19	(2) Shall not be construed to limit the commissioner's
20	authority or the rights or obligations under § 23-61-201 et seq.; and
21	(3) Applies to an insurer domiciled in this state.
22	
23	23-63-2003. Definitions.
24	As used in this subchapter:
25	(1) "Corporate governance annual disclosure" means a
26	confidential report filed by an insurer or insurance group made according to
27	this subchapter;
28	(2) "Insurance group" means those insurers and affiliates
29	included within an insurance holding company system as defined in the
30	Insurance Holding Company Regulatory Act, § 23-63-501 et seq.;
31	(3)(A) "Insurer" means a person engaged as indemnitor, surety,
32	or contractor in the business of entering into contracts of insurance.
33	(B) "Insurer" does not include agencies, authorities, or
34	instrumentalities of the United States, its possessions and territories, the
35	Commonwealth of Puerto Rico, the District of Columbia, or a state or
36	political subdivision of a state; and

1 (4) "Person" includes an individual, insurer, company, 2 association, organization, Lloyd's, society, reciprocal or inter-insurance 3 exchange, partnership, syndicate, business trust, corporation, and every 4 legal entity. 5 6 23-63-2004. Submission of corporate governance annual disclosure to 7 Insurance Commissioner required. 8 (a)(1) On or before June 1 of each calendar year, an insurer, or the 9 insurance group of which the insurer is a member, shall submit a corporate 10 governance annual disclosure to the Insurance Commissioner. 11 (2) The corporate governance annual disclosure required under 12 subdivision (a)(1) of this section shall contain the information described in 13 § 23-63-2005. 14 (3) Notwithstanding any request from the commissioner made under 15 subsection (c) of this section, if the insurer is a member of an insurance 16 group, the insurer shall submit according to the laws of the lead state the 17 corporate governance annual disclosure required under this section to the 18 commissioner or regulator of the lead state for the insurance group as 19 determined by the procedures outlined in the most recent Financial Analysis 20 Handbook adopted by the National Association of Insurance Commissioners. 21 (b) A corporate governance annual disclosure shall include the 22 signature of the chief executive officer or corporate secretary of the 23 insurer or insurance group attesting that to the best of that individual's 24 belief and knowledge the insurer has implemented the corporate governance practices and that a copy of the corporate governance annual disclosure has 25 26 been provided to the insurer's board of directors or the appropriate 27 committee. 28 (c) An insurer that is not required to submit a corporate governance 29 annual disclosure under this section shall do so upon the request of the 30 commissioner. 31 (d)(1) For purposes of completing the corporate governance annual 32 disclosure, an insurer or insurance group may provide information regarding corporate governance at the ultimate controlling parent level, an 33 34 intermediate holding company level, or the individual legal entity level, depending upon how the insurer or insurance group has structured its system 35 36 of corporate governance.

1	(2) The insurer or insurance group is encouraged to make the
2	corporate governance annual disclosure filing at the level that:
3	(A) The insurer's or insurance group's risk appetite is
4	determined:
5	(B) The earnings, capital, liquidity, operations, and
6	reputation of the insurer are overseen collectively, and at which the
7	supervision of those factors is coordinated and exercised; or
8	(C) Legal liability for failure of general corporate
9	governance duties would be placed.
10	(3) When the insurer or insurance group determines the level of
11	reporting based on the criteria described under subdivision (d)(2) of this
12	section, the insurer or insurance group shall indicate which of the three (3)
13	criteria described under subdivision (d)(2) of this section was used to
14	determine the level of reporting and explain any subsequent changes in the
15	level of reporting.
16	(e) The review of the corporate governance annual disclosure and any
17	additional requests for information shall be made through the lead state as
18	determined by the procedures within the most recent Financial Analysis
19	Handbook adopted by the National Association of Insurance Commissioners.
20	(f) An insurer that provides information substantially similar to the
21	information required by this subchapter in other documents that are submitted
22	to the commissioner, including without limitation proxy statements filed in
23	conjunction with Form B requirements or other state or federal filings that
24	are provided to the State Insurance Department, shall not be required to
25	duplicate that information in the corporate governance annual disclosure but
26	is required to document and cross reference the document that the relevant
27	information is included with the corporate governance annual disclosure.
28	
29	23-63-2005. Corporate governance annual disclosure.
30	(a)(1) The insurer or insurance group shall have discretion over the
31	responses to the corporate governance annual disclosure inquiries or
32	questions if the corporate governance annual disclosure contains the material
33	information necessary to permit the Insurance Commissioner to gain an
34	understanding of the insurer's or insurance group's corporate governance
35	structure, policies, and practices.
36	(2) The commissioner may request additional information that he

1 or she deems material and necessary to provide the commissioner with a clear 2 understanding of the corporate governance policies, the reporting or 3 information system, or controls implementing those policies. 4 (b) Notwithstanding subsection (a) of this section, the corporate 5 governance annual disclosure shall be prepared consistent with any rule 6 promulgated under § 23-63-2010. 7 (c) Documentation and supporting information shall be maintained and 8 made available upon examination or upon request of the commissioner. 9 10 23-63-2006. Confidentiality. 11 (a) Documents, materials, or other information, including the corporate governance annual disclosure, in the possession or control of the 12 13 State Insurance Department and obtained by, created by, or disclosed to the 14 Insurance Commissioner or any other person under this subchapter, is recognized by this state as being proprietary and containing trade secrets. 15 16 (b)(1) The information required under subsection (a) of this section: 17 (A) Is confidential by law and privileged and is not 18 subject to: 19 (i) Public disclosure: 20 (ii) Subpoena: and 21 (iii) Discovery; and 22 (B) Is not admissible in evidence in any private civil 23 action. 24 (2) The commissioner is authorized to use the documents. 25 materials, or other information in the furtherance of any regulatory or legal 26 action brought as a part of the commissioner's official duties. 27 (3) The commissioner shall not otherwise make the documents, 28 materials, or other information public without the prior written consent of 29 the insurer. 30 (c) This section does not require written consent of the insurer 31 before the commissioner may share or receive confidential documents. 32 materials, or other corporate governance annual disclosure-related 33 information under subsection (e) of this section to assist in the performance 34 of the commissioner's regular duties. 35 (d) The commissioner or any person who receives documents, materials, 36 or other corporate governance annual disclosure-related information, through

1 examination or otherwise, while acting under the authority of the commissioner, or with whom such documents, materials, or other information is 2 3 shared under this subchapter shall not be permitted or required to testify in any private civil action concerning any confidential documents, materials, or 4 5 information subject to subdivision (b)(2) of this section. 6 (e) In order to assist in the performance of the commissioner's 7 regulatory duties, the commissioner may: 8 (1)(A) Upon request, share documents, materials, or other corporate governance annual disclosure-related information including the 9 10 confidential and privileged documents, materials, or information subject to 11 subsection (a) of this section, including proprietary and trade secret documents and materials, with: 12 13 (i) Other state, federal, and international financial regulatory agencies, including members of any supervisory college 14 15 as defined in § 23-63-531: 16 (ii) The National Association of Insurance 17 Commissioners; and 18 (iii) Third party consultants under § 23-63-2007. 19 (B) In order to obtain information under subdivision 20 (e)(1)(A) of this section, the recipient agrees in writing to maintain the 21 confidentiality and privileged status of the corporate governance annual disclosure-related documents, material, or other information and has verified 22 23 in writing the legal authority to maintain confidentiality; and (2)(A) Receive documents, materials, or other corporate 24 25 governance annual disclosure-related information, including otherwise 26 confidential and privileged documents, materials, or information, including 27 proprietary and trade-secret information or documents, from: 28 (i) Regulatory officials of other state, federal, 29 and international financial regulatory agencies, including members of any supervisory college as defined in § 23-63-531; and 30 31 (ii) The National Association of Insurance 32 Commissioners. 33 (B) In order to obtain information under subdivision 34 (e)(2)(A) of this section, the commissioner shall maintain as confidential or privileged any documents, materials, or information received with notice or 35 36 the understanding that it is confidential or privileged under the laws of the

1 jurisdiction that is the source of the document, material, or information.

- 2 (f) The sharing of information and documents by the commissioner under 3 this subchapter shall not constitute a delegation of regulatory authority or
- 4 rulemaking, and the commissioner is solely responsible for the
- 5 administration, execution, and enforcement of this subchapter.
- 6 (g) A waiver of any applicable privilege or claim of confidentiality
  7 in the documents, proprietary and trade-secret materials, or other corporate
- 8 governance annual disclosure-related information shall not occur as a result
- 9 of disclosure of any corporate governance annual disclosure-related
- 10 information or documents to the commissioner under this section or as a
- 11 result of sharing as authorized under this subchapter.

- 23-63-2007. Third-party consultants.
- 14 (a) The Insurance Commissioner may retain, at the insurer's expense,
- 15 third-party consultants, including attorneys, actuaries, accountants and
- other experts not otherwise a part of the commissioner's staff, as may be
- 17 reasonably necessary to assist the commissioner in reviewing the corporate
- 18 governance annual disclosure and related information or the insurer's
- 19 compliance with this subchapter.
- 20 (b) A person retained under subsection (a) of this section shall be
- 21 under the direction and control of the commissioner and shall act in a purely
- 22 advisory capacity.
- 23 (c) The National Association of Insurance Commissioners and third-
- 24 party consultants shall be subject to the same confidentiality standards and
- 25 requirements as the commissioner.
- 26 (d) As part of the retention process, a third-party consultant shall
- 27 verify to the commissioner, with notice to the insurer, that it:
- 28 (1) Is free of a conflict of interest:
- 29 (2) Has internal procedures in place to monitor compliance with
- 30 a conflict of interest; and
- 31 (3) Shall comply with the confidentiality standards and
- 32 requirements of this subchapter.
- 33 (e) A written agreement with the National Association of Insurance
- 34 Commissioners or a third-party consultant governing sharing and use of
- 35 information provided under this subchapter shall contain the following
- 36 provisions and require the written consent of the insurer before making

1 public any information provided under this subchapter: 2 (1) Specific procedures and protocols for maintaining the 3 confidentiality and security of corporate governance annual disclosurerelated information shared with the National Association of Insurance 4 5 Commissioners or the third-party consultant under this subchapter: 6 (2)(A) Procedures and protocols for sharing by the National 7 Association of Insurance Commissioners only with other state regulators from 8 states in which the insurance group has domiciled insurers. 9 (B) The agreement shall provide that the recipient agrees 10 in writing to maintain the confidentiality and privileged status of the corporate governance annual disclosure-related documents, materials, or other 11 12 information and has verified in writing the legal authority to maintain 13 confidentiality; 14 (3) A provision specifying that ownership of the corporate 15 governance annual disclosure-related information shared with the National Association of Insurance Commissioners or the third-party consultant remains 16 17 with the State Insurance Department and that the National Association of 18 Insurance Commissioners' or third-party consultant's use of the information 19 is subject to the direction of the commissioner: 20 (4) A provision that prohibits the National Association of Insurance Commissioners or the third-party consultant from storing the 21 22 information shared under this subchapter in a permanent database after the underlying analysis is complete: 23 24 (5) A provision requiring the National Association of Insurance 25 Commissioners or the third-party consultant to provide prompt notice to the commissioner and to the insurer or insurance group regarding any subpoena. 26 27 request for disclosure, or request for production of the insurer's corporate 28 governance annual disclosure-related information: and 29 (6) A requirement that the National Association of Insurance 30 Commissioners or the third-party consultant consent to intervention by an insurer in any judicial or administrative action in which the National 31 Association of Insurance Commissioners or the third-party consultant may be 32 33 required to disclose confidential information about the insurer that has been 34 shared with the National Association of Insurance Commissioners or the third-35 party consultant under this subchapter.

1	23-63-2008. Penalties.
2	(a) An insurer failing, without just cause, to timely file the
3	corporate governance annual disclosure as required under this subchapter
4	shall be required, after notice and hearing, to pay a penalty of one hundred
5	dollars (\$100) for each day's delay, payable to the Insurance Commissioner,
6	and the penalty recovered shall be paid into the General Revenue Fund Account
7	of the State Apportionment Fund.
8	(b) The maximum penalty under subsection (a) of this section is ten
9	thousand dollars (\$10,000).
10	(c) The commissioner may reduce the penalty if the insurer
11	demonstrates to the commissioner that the imposition of the penalty would
12	constitute a financial hardship to the insurer.
13	
14	23-63-2009. Nonseverability clause.
15	(a) Except for § 23-63-2007 or the application of § 23-63-2007 to any
16	person or circumstance, if any provision of this subchapter is held invalid,
17	the determination shall not affect the provisions of this subchapter that can
18	be given effect without the invalid provision or application.
19	(b) With the exception of § 23-63-2007, this subchapter is severable.
20	
21	23-63-2010. Rules.
22	(a)(1) The Insurance Commissioner shall promulgate rules necessary to
23	implement this subchapter.
24	(2)(A) When adopting the initial rules to implement this
25	subchapter, the final rule shall be filed with the Secretary of State for
26	adoption under § 25-15-204(f):
27	(i) On or before January 1, 2020; or
28	(ii) If approval under § 10-3-309 has not occurred
29	by January 1, 2020, as soon as practicable after approval under § 10-3-309.
30	(B) The commissioner shall file the proposed rule with the
31	Legislative Council under § 10-3-309(c) sufficiently in advance of January 1,
32	2020, so that the Legislative Council may consider the rule for approval
33	before January 1, 2020.
34	
35	SECTION 17. Arkansas Code § 23-64-219(a), concerning the procedure to

appoint an agent by an insurer, is amended to read as follows:

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- 1 (a)(l)(A) Each insurer appointing an agent in this state shall file with the Insurance Commissioner the initial agent appointment setting out the 2 kinds of insurance to be transacted by the agent and pay the fee. 3 4 (B) The appointment means the notification filed with the 5 commissioner that an insurer has established an agency relationship with a 6 producer. 7 (2) The appointing insurer's appointment of an agent shall be an 8 indication to the commissioner that the insurer has reviewed the agent's 9 background and fitness to be an agent. 10 11 SECTION 18. Arkansas Code § 23-65-306 is amended to read as follows: 12 23-65-306. Brokers' affidavits reports. 13 (a) At the time of the procuring of surplus lines insurance in this 14 state, when this state is considered the home state of the insured, the 15 surplus lines broker shall file a report with the Insurance Commissioner 16 within sixty (60) days following the end of the calendar quarter stating the facts referenced in §§ 23-65-313 and 23-65-314 and any additional information 17 18 the commissioner shall require: 19 (1) Execute an affidavit on a form prescribed by the Insurance 20 Commissioner: 21 (2) Provide any information that the commissioner shall require; 22 (3) State facts referred to in §§ 23 65-313 and 23-65-314; and 23 (4) File the affidavit with the commissioner within sixty (60) 24 days following the end of the month in which the insurance was procured.
  - (b) Affidavits or reports Reports filed under this section are not subject to public inspection unless the commissioner determines that the public interest or the welfare of the filing broker requires otherwise.
  - SECTION 19. Arkansas Code § 23-65-315(a), regarding the timing of remittance of premium taxes by a surplus lines broker, is amended as follows:
  - (a) No later than sixty (60) days following the end of the month calendar quarter in which surplus lines insurance was procured, the surplus lines broker shall remit to the Treasurer of State through the Insurance Commissioner a tax of four percent (4%) on the direct premiums written, less return premiums and exclusive of sums collected to cover state or federal taxes, on surplus lines insurance subject to tax transacted by the surplus

1 lines broker during the preceding months as shown by his or her affidavit 2 filed with the commissioner calendar quarter for the privilege of transacting 3 business as a surplus lines broker in this state. 4 5 SECTION 20. Arkansas Code § 23-69-149(a), concerning assumption 6 reinsurance agreements by stock insurers, is amended to read as follows: 7 (a)(1) A domestic stock insurer may reinsure all or substantially all 8 of its insurance in force or a major class thereof with another insurer by an 9 agreement of assumption reinsurance. 10 (2) However, no an agreement shall not become effective unless 11 filed with the Insurance Commissioner and approved by him or her in writing 12 after a hearing thereon. 13 (3) With regard to proposed transactions between a domestic 14 stock insurer which is a subsidiary or affiliate of a depository institution, 15 and another insurer, the hearing shall be concluded and the order 16 determination of the commissioner shall be issued within the period required 17 by federal law, and the order shall be final upon entry. 18 19 SECTION 21. Arkansas Code § 23-73-104, regarding the Insurance Code 20 provisions applicable to farmers' mutual aid companies and associations, is 21 amended as follows: 22 (15) Section 23-63-201 et seq., authority to do business. 23 24 SECTION 22. Arkansas Code § 23-79-101 is amended to read as follows: 25 23-79-101. Definitions. 26 As used in this section and  $\S$  23-79-102 - 23-79-128, 23-79-131 - 23-27 79-134, and 23-79-202 - 23-79-210 chapter: 28 (1) "Excepted benefits" means benefits under one (1) or more, or 29 any combination thereof, of the following: 30 (A) Benefits not subject to requirements, including 31 without limitation: 32 (i) Coverage only for accident or disability income 33 insurance, or any combination thereof: 34 (ii) Coverage issued as a supplement to liability 35 insurance; 36 (iii) Liability insurance, including general

1	liability insurance and automobile liability insurance;
2	(iv) Workers' compensation or similar insurance;
3	(v) Automobile medical payment insurance:
4	(vi) Credit-only insurance; and
5	(vii) Other similar insurance coverage, specified in
6	regulations, under which benefits for medical care are secondary or
7	incidental to other insurance benefits;
8	(B) Limited-scope dental or vision benefits:
9	(C) Benefits for long-term care, nursing home care, home
10	health care, community-based care, or any combination thereof;
11	(D) Coverage only for a specified disease or illness;
12	(E) Hospital indemnity or other fixed indemnity insurance;
13	<u>and</u>
14	(F) Medicare supplemental health insurance as defined
15	under section 1882(g)(1) of the Social Security Act, 42 U.S.C. §
16	1395ss(g)(1), coverage supplemental to the coverage provided under 10 U.S.C.
17	§ 1071 et seq., and similar supplemental coverage;
18	(2) "Policy" means the written contract of or written agreement
19	for or effecting insurance, by whatever name called, and includes all
20	clauses, riders, endorsements, and papers made a part thereof; and
21	$\frac{(2)(3)(A)}{(2)}$ "Premium" is the consideration for insurance, by
22	whatever name called.
23	(B) Any assessment, or any membership, policy, survey,
24	inspection, service, or similar fee or charge in consideration for a policy
25	is deemed part of the premium.
26	
27	SECTION 23. Arkansas Code Title 23, Chapter 79, Subchapter 1, is
28	amended to add an additional section to read as follows:
29	23-79-162. Excepted benefits.
30	Excepted benefits are not subject to the requirements of this
31	subchapter regarding coverage of a specific person, provider, treatment,
32	service, condition, or disease unless that coverage is required by law.
33	
34	
35	/s/Rapert
36	APPROVED: 3/20/19