1 2	State of Arkansas 93rd General Assembly	A Bill	
	•		HOUSE BILL 1380
3	Regular Session, 2021		HOUSE BILL 1360
4 5	By: Representative Dotson		
6	By. Representative Dotson		
7		For An Act To Be Entitled	
8	AN ACT TO	REPEAL THE ARKANSAS LEGAL INSURANCE	ACT;
9	AND FOR O	THER PURPOSES.	•
10			
11			
12		Subtitle	
13	TO R	EPEAL THE ARKANSAS LEGAL INSURANCE	
14	ACT.		
15			
16			
17	BE IT ENACTED BY THE O	GENERAL ASSEMBLY OF THE STATE OF ARKA	ANSAS:
18			
19	SECTION 1. Arka	ansas Code Title 23, Chapter 91, Subc	hapter 2, is
20	repealed.		
21	Subc	hapter 2 — Arkansas Legal Insurance A	Act
22			
23	23-91-201. Title		
24	This subchapter	shall be cited as the "Arkansas Lega	l Insurance Act".
25			
26 		struction and purposes.	
27	_	shall be interpreted liberally in or	:der to achieve the
28	following purposes:		1
29		ncourage the development of effective	•
30 31		ng legal services more readily avails rotect the interests of the users of	
32	-	state with a minimum of restrictions	-
33	-	anization, administration, or benefit	•
34		eek to have the risk inherent in expe	
35		ew plans rather than by the consumers	
36	-	ermit and encourage the providing of	

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    through persons other than professional insurers subject to practical and
 2
    reasonable financial and regulatory requirements;
 3
                 (5) To permit and encourage fair and effective competition among
 4
    the various systems of financing legal services; and
 5
                 (6) To ensure that each person being provided with legal
 6
    insurance has the right to seek performance of covered legal services by the
 7
    attorney of his or her choice. The attorney shall be required to reasonably
8
    comply with the plan provisions.
9
10
          23-91-203. Definitions.
11
          As used in this subchapter:
12
                 (1) "Commissioner" means the Insurance Commissioner;
13
                 (2) "Insurer" means any person who obtains a certificate of
14
    authority under this subchapter;
15
                 (3)(A) "Legal insurance" means that assumption of a contractual
16
    obligation to provide, during a specified interval of time, specified legal
17
    services or reimbursement for legal expenses in consideration of a specified
18
    payment, regardless of whether the payment is made by the beneficiaries
19
    individually or by a third person for them, in such a manner that the total
    cost incurred by assuming the obligation is to be spread directly or
20
    indirectly among a group of persons. It does not include the provision of,
21
22
    or reimbursement for, legal services incidental to other insurance coverages.
    The following are not considered insurance under the insurance laws of this
23
24
    state:
                             (i) Retainer contracts made with individual clients
25
26
    with the fees based on estimates of the nature and amount of services that
    will be provided to the specific client and similar contracts made with a
27
28
    group of clients involved in the same or closely related legal matters such
29
    as class actions:
30
                            (ii) The providing of no benefits other than
    consultation and advice in connection with, or a part of, referral services;
31
32
                             (iii) The providing of limited legal services
33
    regarding simple legal matters on an informal basis, not involving a legally
34
    binding promise, in the context of an employment, educational, or similar
    relationship;
35
                             (iv) Legal services provided by unions or employee
36
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1	associations to their members in matters relating to employment or
2	occupation; and
3	(v) Legal services provided by an agency of the
4	federal or state government or a subdivision thereof to its employees.
5	(B) "Contractual obligation" in subdivision (3)(Λ) of this
6	section includes any arrangement in which those persons for whom services are
7	to be provided under the arrangement have reasonable expectations of
8	enforceable rights; and
9	(4) "Person" means the definition as used in § 23-60-102.
10	
11	23-91-204. Applicability of insurance law.
12	(a) The provisions of the insurance law apply generally to legal
13	insurance offered by insurers licensed to write other kinds of insurance.
14	However, legal insurance sold by insurers under a certificate of authority
15	obtained under this subchapter shall be regulated by the provisions of §§ 23-
16	91-202, $23-91-203$, $23-91-206$, $23-91-208$ — $23-91-212$, $23-91-214$, $23-91-219$,
17	23-91-221, 23-91-224, and 23-91-226 instead of corresponding sections of the
18	Arkansas Insurance Code.
19	(b) Orders or rules of the Insurance Commissioner issued under the
20	provisions of this subchapter shall be subject to the provisions of the
21	general insurance laws and the provisions of the Arkansas Administrative
22	Procedure Act, § 25-15-201 et seq., relating to hearings and appeals.
23	(c) Except as otherwise provided in this subchapter, the provisions of
24	the general insurance law shall not apply to insurers authorized under this
25	subchapter.
26	
27	23-91-205. Applicability of unauthorized insurance law.
28	Subject to the provisions of this subchapter, the relevant and
29	applicable provisions of the Unauthorized Insurers Process Act, § 23-65-201
30	et seq., and the provisions of §§ 23-65-101 and 23-65-102 apply to persons
31	transacting the business of legal insurance.
32	
33	23-91-206. Exemption.
34	(a)(1) This subchapter does not apply to any person not domiciled in
35	this state but issuing only group, blanket, or franchise policies or
36	certificates to certificate holders or policyholders who reside in this state

-	II lewer than twenty live percent (23%) of the certificate notation of
2	policyholders reside in this state and the person is regulated to a
3	comparable extent by another state in which a larger number of certificate
4	holders or insureds reside.
5	(2)(A) However, any person who is exempt from the provisions of
6	this subchapter pursuant to this section shall, prior to the issuance of any
7	group, blanket, or franchise policies or certificates in this state, file
8	these policies or certificates with the Insurance Commissioner for
9	informational purposes, together with a document to support the person's
10	exempt status under this section.
11	(B) Also, each person shall file annually with the
12	commissioner, on or before April 15, a report to verify that the exemption i
13	still valid.
14	(b)(1) Prior to administering a legal referral services program, or
15	prior to enrollment of members in a program in this state, any person who is
16	exempt from the provisions of this subchapter shall file with the
17	commissioner program materials and documents to support the program's exempt
18	status under this subchapter.
19	(2) Subsequent to the commissioner's approval of the exemption
20	of the program from the provisions of this subchapter, the person shall
21	promptly file documents referencing any modifications or changes in the
22	program for the commissioner's review and determination as to whether the
23	program as modified is exempt from the provisions of this subchapter.
24	
25	23-91-207. Penalty provisions — Applicability of §§ 23-60-108 and 23-
26	60-109.
27	The relevant and applicable provisions of §§ 23-60-108 and 23-60-109
28	apply to violations of this subchapter.
29	
30	23-91-208. Authorization required.
31	(a) No person may transact the business of legal insurance in this
32	state without first obtaining a certificate of authority under this
33	subchapter.
34	(b)(1) Any person may apply to the Insurance Commissioner for, and
35	obtain, a certificate of authority to transact the business of legal
26	inguages in compliance with this subshanton

1	(2) This resting does not be invalid colours the manner of com-
1	(2) This section does not by itself enlarge the powers of any
2	corporation given by its articles of incorporation or charter but does
3	authorize a corporation formed under the general business, insurance, or
4	general nonprofit corporation laws of this state, including hospital service
5	corporations, medical service corporations, and hospital and medical service
6	corporations, to include in its power the authority to transact the business
7	of legal insurance.
8	(c)(l) Any application shall be in a form prescribed by the
9	commissioner. If the applicant is not domiciled in this state, the
10	application must be accompanied by a power of attorney executed by the
11	applicant appointing an Arkansas resident as its registered agent for service
12	of process, to be filed in writing with the commissioner and his or her
13	successors in office, as the true and lawful attorney of the applicant, in
14	and for this state, upon whom all lawful process in any legal action or
15	proceeding against the applicant, on a cause of action arising in this state,
16	may be served.
17	(2) On and after January 1, 2003, all foreign and alien insurers
18	licensed under this chapter shall file with the commissioner a designation of
19	an Arkansas resident as an agent for service of legal process, and the
20	commissioner shall maintain a listing in conformity with § 23-63-301 et seq.
21	
22	23-91-209. Conditions for issuing certificate of authority.
23	(a) Upon receipt of an application for a certificate of authority, the
24	Insurance Commissioner shall issue or deny a certificate pursuant to this
25	subchapter within sixty (60) days of the application. This may be extended
26	for an additional thirty (30) days by notice to the applicant prior to the
27	expiration of the first sixty (60) days. A certificate of authority shall be
28	issued upon payment of the application fee prescribed in § 23-91-225 if the
29	commissioner is satisfied that the following conditions are met:
30	(1) The persons responsible for the conduct of the affairs of
31	the applicant are competent, trustworthy, and of good reputation;
32	(2) The applicant has paid-in capital in an amount not less than
33	one hundred thousand dollars (\$100,000) and additional working capital or
34	surplus funds in an amount deemed by the commissioner to be adequate in
35	relation to the proposed plan of operation; and
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(3) The applicant demonstrates the willingness and ability to

2	determination, the commissioner shall consider so far as applicable:
3	(A) Any agreements with lawyers or paralegal personnel for
4	the provisions of legal services;
5	(B) The financial soundness of the applicant's
6	arrangements for legal services and the schedule of rates proposed to be used
7	in connection therewith;
8	(C) Any agreement with another person authorized under
9	this subchapter, an insurer licensed under the general insurance laws to do
10	business in this state, a reinsurer eligible under the laws or rules of this
11	state to provide reinsurance, or an agency of the federal or state government
12	for insuring the payment of the cost of legal services or the provision for
13	automatic applicability of an alternative coverage in the event the insurer
14	is unable to perform its obligation;
15	(D) Any deposit of securities, in kind and an amount
16	determined to be appropriate by the commissioner, as a guarantee that the
17	obligations to provide the promised benefits will be performed; and
18	(E) If the applicant is licensed as an insurer under other
19	insurance laws, whether the applicant has complied with the requirements of
20	those laws.
21	(b) A certificate of authority shall be issued in accordance with this
22	subchapter and may be continued within the applicable provisions of § 23-63-
23	211, but reference therein to § 23-63-216 and payment of taxes shall instead
24	refer to the applicable provision of this subchapter.
25	
26	23-91-210. Regulation of policy forms.
27	(a)(1) Each contractual obligation for legal insurance shall be
28	evidenced by a policy or master policy.
29	(2) Legal insurance may be written on an individual, group,
30	blanket, or franchise basis.
31	(3) Each person insured under a group policy must be issued a
32	certificate of coverage.
33	(4) No legal insurance policy or certificate of any kind may be
34	issued or delivered in this state unless and until a copy of the form thereof
35	has been filed with the Insurance Commissioner and approved by him or her
36	except as provided in § 23-91-206.

assure that the promised benefits can be provided. In making this

T	(b) The forms must meet the following requirements:
2	(1) Policies must contain a detailed list and description of th
3	legal services promised or the legal matters for which expenses are to be
4	reimbursed and the amount of reimbursement;
5	(2) Policies and certificates must indicate prominently the nam
6	of the insurer and the full address of its principal place of business;
7	(3) Certificates issued under group policies may summarize the
8	terms of the master contract but must contain a full and clear statement of
9	the benefits provided; and
10	(4)(A) No policy shall unreasonably restrict the right of any
11	person covered by legal insurance to seek performance of legal services by
12	the attorney of his or her choice in a matter covered by the policy.
13	(B)(i) If the policy contemplates the use of a prearrange
14	panel of attorneys to render the legal services covered under the policy, th
15	commissioner shall not approve that policy unless the policy also authorizes
16	payment for covered services rendered by an insured's attorney who is not a
17	member of the panel.
18	(ii) Payments to attorneys who are not members of
19	the panel shall be reasonably equivalent to the cost incurred by the insurer
20	when similar services are rendered by attorneys who are members of any panel
21	(c) The commissioner may disapprove a form if the commissioner finds
22	that it:
23	(1) Does not meet the requirements of subsection (b) of this
24	section;
25	(2) Is unfair, unfairly discriminatory, misleading, obscure, or
26	encourages misrepresentation or misunderstanding of the contract, including
27	cases in which the form:
28	(A) Provides coverage or benefits that are too restricted
29	to achieve the purposes of which the policy is designed;
30	(B) Fails to attain a reasonable degree of readability,
31	simplicity, and conciseness; or
32	(C) Is misleading, deceptive, or obscure because of its
33	physical aspects such as format, typography, style, color, material, or
34	organization;
35	(3) Provides coverage or benefits or contains other provisions
36	that would endanger the solidity of the insurer: or

1	(4) Is contrary to law.
2	
3	23-91-211. Regulation of rates.
4	(a) Rate filings shall be subject to the following procedures and
5	requirements:
6	(1) Every insurer shall file with the Insurance Commissioner
7	every manual of classifications, rules, and rates, every rating plan, and
8	every modification of any of the foregoing which it proposes to use;
9	(2) Every filing shall state the proposed effective date thereof
10	and shall indicate the character and extent of the coverage contemplated.
11	When a filing is not accompanied by the information upon which the insurer
12	supports the filing and the commissioner does not have sufficient information
13	to determine whether the filing meets the requirements of this subchapter,
14	the commissioner may require the insurer to furnish the information upon
15	which it supports the filing. Any filing may be supported by:
16	(A) The experience or judgment of the insurer or rating
17	organization making the filing;
18	(B) The experience of other insurers or rating
19	organizations; and
20	(C) Any other factor which the insurer or rating
21	organization deems relevant; and
22	(3) A filing and any supporting information shall be open to
23	public inspection after the filing becomes effective.
24	(b) The rates must meet the following requirements:
25	(1) They must be established and justified in accordance with
26	generally accepted insurance principles, including, but not limited to, the
27	experience or judgment of the insurer making the rate filing or actuarial
28	computations; and
29	(2) They may not be excessive, inadequate, or unfairly
30	discriminatory in relation to the benefits offered. Rates are not unfairly
31	discriminatory because they are averaged broadly among persons insured under
32	group, franchise, or blanket policies.
33	(c) By written order, the commissioner may suspend or modify the
34	requirement of filing for any risk or group or class of risk, the rates for
35	which cannot practically be filed before they are used.

1	23-91-212. Approval of forms and rates.
2	(a) If the Insurance Commissioner determines that any form reviewed
3	under § 23-91-210 or any schedule of rates reviewed under § 23-91-211
4	complies with the requirements of those sections, the commissioner shall
5	approve the filing within thirty (30) days, which may be extended for an
6	additional thirty (30) days by notice in writing to the person making the
7	filing prior to the expiration of the first thirty (30) days.
8	(b) If the commissioner disapproves a filing, the commissioner shall
9	notify the person making it in writing specifying therein the reasons for his
10	or her disapproval.
11	(c) A hearing shall be granted within thirty (30) days after a request
12	in writing by any person aggrieved by the decision of the commissioner.
13	(d) If the commissioner does not disapprove a form or schedule of
14	rates within thirty (30) days of the filing or an extension thereof as
15	provided in subsection (a) of this section, it shall be deemed approved.
16	(e) After notice and hearing, the commissioner may disapprove any rate
17	that has been previously approved or deemed approved.
18	(f) The commissioner may require the submission of additional relevant
19	information reasonably necessary to determine whether to approve or
20	disapprove a filing made pursuant to § 23-91-210 or § 23-91-211.
21	
22	23-91-213. Segregated accounts required - Exception.
23	Except for employee welfare benefit plans regulated by the Employee
24	Retirement Income Security Act of 1974, persons transacting the business of
25	legal insurance, and any other business than insurance shall transact legal
26	insurance wholly within a segregated account in accordance with the following
27	requirements:
28	(1) The segregated account must satisfy the financial
29	requirements for issuance of a certificate of authority;
30	(2)(A)(i) Except under subdivisions (6) and (7) of this section,
31	the income and assets attributable to a segregated account shall always
32	remain identifiable with the account.
33	(ii) However, unless the Insurance Commissioner so
34	orders, the assets need not be kept physically separate from other assets of
35	the person.
36	(R) The income gains and losses whether or not

1	realized, from assets attributable to a segregated account shall be credited
2	to or charged against the account without regard to other income, gains, or
3	losses of the person;
4	(3) Except under subdivision (4) of this section, assets
5	attributable to a segregated account shall not be chargeable with any
6	liabilities arising out of any other business of the person, nor shall any
7	assets not attributable to the account be chargeable with any liabilities
8	arising out of it;
9	(4) Claims remaining unpaid after completion of any liquidation
10	under the applicable and relevant provisions of §§ 23-68-111 and 23-68-112
11	shall have liens on the interests of shareholders, if any, in all of the
12	person's assets that are not liquidated. The segregated account shall be
13	deemed an insurer within the meaning of § 23-68-102;
14	(5) Assets allocated to segregated accounts are the property of
15	the person, which is not and shall not hold itself out to be a trustee of the
16	assets;
17	(6) A person may allocate a portion or part of a particular
18	asset to the segregated account; and
19	(7) By an identifiable act, the person may transfer assets to or
20	from the segregated account if:
21	(A) The terms are fair and reasonable; and
22	(B) The books, accounts, and records of each party are
23	maintained so as to clearly and accurately disclose the precise nature and
24	details of the transaction.
25	
26	23-91-214. Management and exclusive agency contracts.
27	(a) No insurer may enter into any exclusive agency contract or
28	management contract unless the contract is first filed with the Insurance
29	Commissioner and not disapproved under this section within thirty (30) days
30	after filing or after such reasonable extended period as the commissioner may
31	specify by notice given within the thirty (30) days.
32	(b) The commissioner shall disapprove a contract under subsection (a)
33	of this section if the commissioner finds that:
34	(1) It subjects the insurer to excessive charges;
35	(2) The contract extends for an unreasonable period of time;
36	(3) The contract does not contain fair and adequate standards of

1	periormance;
2	(4) The persons empowered under the contract to manage the
3	insurer are not sufficiently trustworthy, competent, experienced, and free
4	from conflict of interest to manage the insurer with due regard for the
5	interests of its insureds, creditors, or the public; or
6	(5) The contract contains provisions which impair the interests
7	of the insurer's insureds or creditors of the public in this state.
8	
9	23-91-215. Annual report.
10	Each insurer shall annually, on or before March 1, file with the
11	Insurance Commissioner a report verified by at least two (2) principal
12	officers. The report shall be on forms prescribed by the commissioner and
13	shall include:
14	(1) A financial statement of the insurer's legal insurance
15	business including:
16	(A) Its balance sheet; and
17	(B) Its receipts and disbursements for the preceding year;
18	(2) Any material changes in the information submitted pursuant
19	to § 23-91-209;
20	(3) Such information about the number of persons protected and
21	terminated as may be prescribed by the commissioner; and
22	(4) Such other information relating to the performance of the
23	insurer as is necessary to enable the commissioner to carry out his or her
24	duties under this subchapter.
25	
26	23-91-216. Reserves required.
27	An insurer must maintain the reserves necessary for the sound operation
28	of the business including unearned premium reserves, and the amount and
29	manner of calculating these reserves shall be determined by the provisions of
30	§ 23-63-601 et seq.
31	
32	23-91-217. Investment of assets.
33	The investable funds generated through the transaction of the business
34	of legal insurance by persons who are not licensed to transact other lines of
35	insurance shall be invested in securities or other investments permitted by
36	the laws of this state for the investment of assets of life insurers or in

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    such other securities or investments as the Insurance Commissioner shall
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    permit.
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          23-91-218. Trade practices.
          The Trade Practices Act, § 23-66-201 et seq., and §§ 23-66-301 - 23-66-
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 6
    314 and 23-66-316 apply to persons transacting the business of legal
 7
    insurance except as is inconsistent with this subchapter.
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9
          23-91-219. Licensing of agents.
          (a) Agents shall be licensed in accordance with such provisions as the
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11
     Insurance Commissioner in his or her discretion deems applicable under § 23-
    64-101 et seq., §§ 23-64-201 - 23-64-205, 23-64-207, 23-64-209, 23-64-210,
12
    23-64-214 23-64-221, 23-64-223 23-64-227, and the Producer Licensing
13
14
    Model Act, § 23-64-501 et seg.
15
           (b) The commissioner may develop and administer to license applicants
16
    such examination as he or she deems appropriate.
17
          23-91-220. Examination of insurer's affairs.
18
          (a) The Insurance Commissioner shall make an examination of the
19
    affairs of any insurer as often as the commissioner deems it necessary for
20
    the protection of the interests of the people of this state.
21
22
          (b) The following sections shall apply to examinations conducted
23
    pursuant to subsection (a) of this section:
                 (1) Examination of managers and promoters, § 23-61-202;
24
                 (2) Examiners, § 23-61-203;
25
26
                 (3) Examination - Records and appraisals, § 23-61-204;
                 (4) Examination reports, § 23-61-205; and
27
28
                 (5) Examination expense, § 23-61-206.
29
30
          23-91-221. Professional ethics.
31
          The Insurance Commissioner shall report to the Attorney General for
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    reference to the Supreme Court any information which the commissioner
33
    considers to be of substance and of possible violation of the Arkansas Rules
34
    of Professional Conduct as adopted by the Supreme Court.
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23-91-222. Revocation of certificate of authority.

1	The Insurance Commissioner may suspend, revoke, or refuse to renew any
2	certificate of authority issued to a person transacting the business of legal
3	insurance under this subchapter pursuant to and consistent with the relevant
4	provisions of §§ 23-63-212 - 23-63-215.
5	
6	23-91-223. Rehabilitation and liquidation.
7	The relevant provisions of \$\\$ 23-68-101 - 23-68-113 and 23-68-115 - 23-
8	68-132 shall apply to a person transacting the business of legal insurance
9	under the provisions of this subchapter.
10	
11	23-91-224. Authority to promulgate rules.
12	The Insurance Commissioner may promulgate such reasonable rules as are
13	necessary or proper to carry out the provisions of this subchapter.
14	
15	23-91-225. Fees.
16	Every person subject to this subchapter shall pay to the Insurance
17	Commissioner the fees required by the applicable and relevant provisions of §
18	23-61-401.
19	
20	23-91-226. Taxation.
21	(a) Taxation on legal insurance premiums shall be fixed at the rate of
22	two and one-half percent (2.5%) of direct written premium income in Arkansas,
23	after deduction for dividends paid to policyholders and returned premiums,
24	and shall be due and payable in estimated quarterly installments and
25	reconciled annually at the time of filing the insurer's annual report as
26	required by § 23-91-215.
27	(b) The Insurance Commissioner shall deposit all premium taxes
28	collected under this section in the State Treasury as general revenues.
29	
30	23-91-227. Public documents.
31	All applications, filings, and reports required under this subchapter
32	shall be treated as public documents.
33	
34	
35	
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