HOUSE BILL No. 4627

March 21, 1991, Introduced by Reps. Saunders, Harrison, Perry Bullard, Clarke, Murphy, Bennane, Kilpatrick, Joe Young, Sr., DeMars, Clack, Stallworth, Wallace, Joe Young, Jr., Owen, Harder, Emerson, Kosteva, Gubow, Jondahl, Scott, Hollister, Berman, Barns, Hood and Varga and referred to the Committee on Insurance.

A bill to amend sections 2021, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2114, 2118, 2120, 2127, 2236, 2400, 2406, 2430, 2436, 2438, 2458, 2462, 2472, 2600, 2606, 2608, 2616, 2628, 2630, 2636, 2652, 2654, 2664, 2930, 3020, 3315, 3321, and 3340 of Act No. 218 of the Public Acts of 1956, entitled as amended "The insurance code of 1956,"

section 2021 as added and sections 2406 and 2436 as amended by Act No. 7 of the Public Acts of 1982, section 2111 as amended by Act No. 88 of the Public Acts of 1990, section 2118 as amended by Act No. 43 of the Public Acts of 1988, section 2120 as amended by Act No. 350 of the Public Acts of 1984, section 2236 as amended by Act No. 305 of the Public Acts of 1990, section 2400 as amended by Act No. 8 of the Public Acts of 1982, section 2458 as amended by Act No. 262 of the Public Acts of 1988, section 3020 as amended by Act No. 170 of the Public Acts of 1990, and section

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3315 as added and section 3340 as amended by Act No. 10 of the Public Acts of 1986, being sections 500.2021, 500.2105, 500.2106, 500.2107, 500.2108, 500.2109, 500.2110, 500.2111, 500.2114, 500.2118, 500.2120, 500.2127, 500.2236, 500.2400, 500.2406, 500.2430, 500.2436, 500.2438, 500.2458, 500.2462, 500.2472, 500.2600, 500.2606, 500.2608, 500.2616, 500.2628, 500.2630, 500.2636, 500.2652, 500.2654, 500.2664, 500.2930, 500.3020, 500.3315, 500.3321, and 500.3340 of the Michigan Compiled Laws; to add sections 2026a, 2094, 2103a, 2106a, 2107a, 2109a, 2109b, 2111e, 2128, 2128a, 2128b, 2128c, 2128d, 2128e, 2128f, and 3105a; and to repeal certain parts of the act.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 Section 1. Sections 2021, 2105, 2106, 2107, 2108, 2109,
2 2110, 2111, 2114, 2118, 2120, 2127, 2236, 2400, 2406, 2430, 2436,
3 2438, 2458, 2462, 2472, 2600, 2606, 2608, 2616, 2628, 2630, 2636,
4 2652, 2654, 2664, 2930, 3020, 3315, 3321, and 3340 of Act No. 218
5 of the Public Acts of 1956, section 2021 as added and sections
6 2406 and 2436 as amended by Act No. 7 of the Public Acts of 1982,
7 section 2111 as amended by Act No. 88 of the Public Acts of 1990,
8 section 2118 as amended by Act No. 43 of the Public Acts of 1988,
9 section 2120 as amended by Act No. 350 of the Public Acts of
10 1984, section 2236 as amended by Act No. 305 of the Public Acts
11 of 1990, section 2400 as amended by Act No. 8 of the Public Acts
12 of 1982, section 2458 as amended by Act No. 262 of the Public
13 Acts of 1988, section 3020 as amended by Act No. 170 of the
14 Public Acts of 1990, and section 3315 as added and section 3340
15 as amended by Act No. 10 of the Public Acts of 1986, being

- 1 sections 500.2021, 500.2105, 500.2106, 500.2107, 500.2108,
- 2 500.2109, 500.2110, 500.2111, 500.2114, 500.2118, 500.2120,
- 3 500.2127, 500.2236, 500.2400, 500.2406, 500.2430, 500.2436,
- 4 500.2438, 500.2458, 500.2462, 500.2472, 500.2600, 500.2606,
- 5 500.2608, 500.2616, 500.2628, 500.2630, 500.2636, 500.2652,
- 6 500.2654, 500.2664, 500.2930, 500.3020, 500.3315, 500.3321, and
- 7 500.3340 of the Michigan Compiled Laws, are amended and sections
- 8 2026a, 2094, 2103a, 2106a, 2107a, 2109a, 2109b, 2111e, 2128,
- **9** 2128a, 2128b, 2128c, 2128d, 2128e, 2128f, and 3105a are added to
- 10 read as follows:
- 11 Sec. 2021. An unfair method of competition and an unfair or
- 12 deceptive act or practice in the business of insurance includes
- 13 failure by a rating organization and an insurer -which makes its
- 14 own rates, within a reasonable time after receiving written
- 15 request therefor and upon payment of -such- A reasonable charge
- 16 as it may make, to furnish to any AN insured affected by a rate
- 17 made by it, or to the INSURED'S authorized representative, of
- 18 such insured, all pertinent information to such THE rate.
- 19 SEC. 2026A. (1) IT IS AN UNFAIR METHOD OF COMPETITION AND
- 20 AN UNFAIR OR DECEPTIVE ACT OR PRACTICE IN THE BUSINESS OF INSUR-
- 21 ANCE FOR A PRIVATE PASSENGER NONFLEET AUTOMOBILE INSURER OR THE
- 22 INSURER'S AGENT TO SOLICIT, OFFER, PAY, OR RECEIVE A KICKBACK OR
- 23 BRIBE IN CONNECTION WITH THE PROCESS OF ADJUSTING, RESOLVING,
- 24 DENYING, OR LITIGATING A CLAIM FOR AUTOMOTIVE REPAIR.
- 25 (2) AN INSURER OR AN INSURER'S AGENT WHO VIOLATES THIS SEC-
- 26 TION IS GUILTY OF A FELONY PUNISHABLE BY IMPRISONMENT FOR NOT
- 27 LESS THAN I YEAR OR MORE THAN 5 YEARS, OR A FINE OF NOT MORE THAN

- 1 \$50,000.00, OR BOTH, AND IN ADDITION, THE INSURER IS SUBJECT TO
- 2 THE CERTIFICATE OF AUTHORITY REVOCATION PROCEEDINGS OF THIS
- 3 CHAPTER.
- 4 SEC. 2094. AN INDIVIDUAL THREATENED WITH INJURY OR INJURED
- 5 DIRECTLY OR INDIRECTLY BY A VIOLATION BY A PRIVATE PASSENGER NON-
- 6 FLEET AUTOMOBILE INSURER OF ANY PROVISION OF THIS CHAPTER APPLI-
- 7 CABLE TO THAT INSURER MAY BRING AN ACTION FOR APPROPRIATE INJUNC-
- 8 TIVE OR OTHER EQUITABLE RELIEF AGAINST IMMEDIATE IRREPARABLE
- 9 HARM, ACTUAL DAMAGES SUSTAINED BY REASON OF A VIOLATION OF THIS
- 10 CHAPTER, AND, AS DETERMINED BY THE COURT, INTEREST ON THE DAMAGES
- 11 FROM THE DATE OF THE COMPLAINT, TAXABLE COSTS, AND REASONABLE
- 12 ATTORNEY'S FEES. THIS REMEDY IS IN ADDITION TO THE OTHER REMEDY
- 13 AND PENALTY PROVISIONS PROVIDED BY THIS CHAPTER.
- 14 SEC. 2103A. AS USED IN THIS CHAPTER:
- 15 (A) "GROUP AUTOMOBILE INSURANCE" MEANS AUTOMOBILE INSURANCE
- 16 COVERING NOT LESS THAN 25 ELIGIBLE EMPLOYEES OR MEMBERS, WITH OR
- 17 WITHOUT THEIR ELIGIBLE DEPENDENTS, WRITTEN UNDER A MASTER POLICY
- 18 ISSUED TO AND ENDORSED BY A GOVERNMENTAL CORPORATION, UNIT,
- 19 AGENCY, OR DEPARTMENT THEREOF, OR TO A CORPORATION, PARTNERSHIP,
- 20 INDIVIDUAL EMPLOYER, OR AN ASSOCIATION, UPON APPLICATION OF AN
- 21 EXECUTIVE OFFICER OR TRUSTEE OF THE ASSOCIATION HAVING A CONSTI-
- 22 TUTION OR BYLAWS, AND FORMED IN GOOD FAITH FOR PURPOSES OTHER
- 23 THAN THAT OF OBTAINING INSURANCE WHERE OFFICERS, MEMBERS, EMPLOY-
- 24 EES, CLASSES, OR DEPARTMENTS THEREOF MAY BE INSURED FOR THEIR
- 25 INDIVIDUAL BENEFIT.
- 26 (B) "TOTAL RETURN RATING" MEANS THE CONSIDERATION OF TOTAL
- 27 REVENUE AND AVAILABLE ASSETS OF THE INSURER, INCLUDING, BUT NOT

- 1 LIMITED TO, INVESTMENT INCOME, CAPITAL AND SURPLUS, UNDERWRITING
- 2 AND OPERATING PROFITS, PREMIUM REVENUE, AND ALL OTHER RESERVES.
- 3 Sec. 2105. (1) No A policy of automobile insurance or
- 4 home insurance shall NOT be offered, bound, made, issued, deliv-
- 5 ered or renewed in this state on and after January 1, 1981,
- 6 except in conformity with this chapter. This chapter shall not
- 7 apply to policies of automobile insurance or home insurance
- 8 offered, bound, made, issued, delivered or renewed in this state
- 9 before January 1, 1981.
- 10 (2) This chapter shall not apply to insurance written on a
- 11 group, franchise, blanket policy, or similar basis which THAT
- 12 offers home insurance or automobile insurance to all members of
- 13 the group, franchise plan, or blanket coverage who are eligible
- 14 persons.
- 15 Sec. 2106. Except as specifically provided in this chap-
- 16 ter, the provisions of chapter 24 and chapter 26 shall not apply
- 17 to automobile insurance and home insurance. An insurer may use
- 18 rates for automobile insurance or home insurance as soon as
- 19 those rates are filed. AN INSURER SHALL NOT USE RATES FOR AUTO-
- 20 MOBILE INSURANCE UNTIL THOSE RATES HAVE BEEN APPROVED BY THE
- 21 COMMISSIONER. To the extent that other provisions of this code
- 22 are inconsistent with the provisions of this chapter, this chap-
- 23 ter shall govern with respect to automobile insurance and home
- 24 insurance.
- 25 SEC. 2:06A. TO BE AUTHORIZED TO WRITE GROUP AUTOMOBILE
- 26 INSURANCE IN THIS STATE, AN INSURER SHALL OFFER THE GROUP
- 27 COVERAGE TO EVERY ELIGIBLE PERSON IN THE GROUP IN A UNIFORM

- 1 MANNER AND SHALL FOLLOW THE RATE-MAKING, UNDERWRITING, AND OTHER
- 2 APPLICABLE PROVISIONS OF THIS ACT.
- 3 Sec. 2107. (1) On or before September 1, 1980, each
- 4 insurer subject to this chapter shall make filings in accordance
- 5 with this chapter for -automobile insurance, home insurance -,
- 6 or both, to be effective not later than January 1, 1981 -nor OR
- 7 earlier than November 1, 1980.
- 8 (2) With regard to a filing submitted under subsection (1),
- 9 the commissioner shall conduct a review of the filing on an
- 10 informal basis, and a dispute with regard to that filing shall
- 11 not be considered a contested case under THE ADMINISTRATIVE PRO-
- 12 CEDURES ACT OF 1969, Act No. 306 of the Public Acts of 1969, as
- 13 amended, BEING SECTIONS 24.201 TO 24.328 OF THE MICHIGAN COMPILED
- 14 LAWS. A filing not disapproved within 60 days after its submis-
- 15 sion shall be considered approved.
- (3) A filing approved or considered approved under subsec-
- 17 tion (2) shall be exempt from any further proceedings whatsoever
- 18 under this chapter until July 1, 1981.
- 19 (4) If a filing is disapproved under subsection (2), the
- 20 insurer, within 30 days of the order of disapproval, shall make a
- 21 revised filing with the commissioner. The revised filing shall
- 22 take effect on January 1, 1981 and shall be subject to review
- 23 under this chapter on or after January 1, 1981 in the same manner
- 24 as subsequent filings made under this chapter.
- 25 SEC. 2107A. (1) BY NOT LATER THAN 1 YEAR AFTER THE EFFEC-
- 26 TIVE DATE OF THIS SECTION AND ANNUALLY THEREAFTER, EACH INSURER
- 27 SUBJECT TO THIS CHAPTER SHALL FILE BASE RATES FOR AUTOMOBILE

- 1 INSURANCEDAND SHALL MAKE FILINGS THAT CONFORM TO THIS LACTHAS CONFORM TO
- 2 AMENDED BY THE 1991 AMENDATORY ACT THAT ADDED THIS SECTION.
- 3 (2) THE COMMISSIONER SHALLEREVIEW A FILING SUBMITTED UNDER
- 4 SUBSECTION (1) AND SHALL APPROVE OR DISAPPROVE THE FILING WITHIN A A
- 5 60 DAYS AFTER ITS SUBMISSION.
- 6 (3) A FILING APPROVED UNDER SUBSECTION (2) SHALL NOT BE
- 7 REVISED FOR 12 MONTHS AFTER THE EFFECTIVE DATE OF THE FILING
- 8 UNLESS THE REVISION MEETS EITHER OF THE FOLLOWING:
- 9 (A) LOWERS THE PRICE OF THE COVERAGE.
- 10 (B) IS IN RESPONSE TO A RULING OR DECISION BY THE COMMIS-
- 11 SIONER, THE COURT, OR A HEARING OFFICER.
- 12 (4) A RULE CHANGE OR OTHER CHANGE FILED WITH THE COMMIS-
- 13 SIONER THAT RESULTS IN A CHANGE IN THE COST OF COVERAGE IS CON-
- 14 SIDERED A REVISION IN A RATE FILING UNDER THIS SECTION.
- 15 (5) IF A FILING IS DISAPPROVED UNDER SUBSECTION (2), THE
- 16 INSURER, WITHIN 30 DAYS OF THE ORDER OF DISAPPROVAL, SHALL MAKE A
- 17 REVISED FILING WITH THE COMMISSIONER. THE REVISED FILING SHALL
- 18 BE SUBJECT TO REVIEW UNDER THIS CHAPTER IN THE SAME MANNER AS AN A Second
- 19 ORIGINAL FILING MADE UNDER THIS CHAPTER. AN INSURER SHALL NOT
- 20 USE RATES FOR AUTOMOBILE INSURANCE UNTIL APPROVED BY THE
- 21 COMMISSIONER.
- Sec. 2108. (1) On EXCEPT AS PROVIDED IN SECTION 2107A, ON
- 23 the effective date thereof, each insurer shall file with the com-
- 24 missioner every manual of classification, every manual of rules
- 25 and rates, every rating plan, and every modification of a manual
- 26 of classification, manual of rules and rates, or a rating plan way and
- 27 -which THAT it proposes to use for automobile insurance and home

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- 1 insurance. Each filing shall state the character and extent of
- 2 the coverage contemplated. Each insurer subject to this chapter
- 3 who maintains rates in any part of this state shall at all times
- 4 maintain rates in effect for all eligible persons meeting the
- 5 underwriting criteria of the insurer.
- 6 (2) An EXCEPT FOR FILINGS CONCERNING RATES, AN insurer may
- 7 satisfy its obligation to make filings -under subsection (1) by
- 8 becoming a member of, or a subscriber to, a LICENSED rating orga-
- 9 nization licensed under chapter 24 or chapter 26 which THAT
- 10 makes those filings, and by filing with the commissioner a copy
- 11 of its authorization of the rating organization to make those
- 12 filings on its behalf. Nothing contained in this chapter shall
- 13 be construed as requiring any insurer to become a member of or a
- 14 subscriber to any rating organization. Insurers may file and use
- 15 deviations from filings made on their behalf, which deviations
- 16 shall be subject to the provisions of this chapter.
- 17 (3) Each filing shall be accompanied by a certification by
- 18 or on behalf of the insurer that, to the best of its information
- 19 and belief, the filing conforms to the requirements of this
- 20 chapter.
- (4) Each filing shall include information that supports the
- 22 filing with respect to the requirements of section SECTIONS
- 23 2109 AND 2109A. The information may include 1 or more of the
- 24 following:
- 25 (a) The experience or judgment of the insurer or rating
- 26 organization making the filing.

- 1 (b) The interpretation of the insurer or rating
- 2 organization of any statistical data it relies upon.
- 3 (c) The experience of other insurers. or rating
- 4 organizations.
- 5 (d) Any other relevant information.
- 6 (5) A filing and any accompanying information shall be open
- 7 to public inspection upon filing.
- 8 (6) An insurer shall not make, issue, or renew a contract or
- 9 policy except in accordance with filings which THAT are in
- 10 effect for the insurer pursuant to this chapter.
- 11 Sec. 2109. (1) All rates for automobile insurance and
- 12 home insurance shall be made in accordance with the following
- 13 provisions:
- 14 (a) Rates shall not be excessive, inadequate, or unfairly
- 15 discriminatory. A rate shall not be held to be excessive unless
- 16 the rate is unreasonably high for the insurance coverage provided
- 17 and a reasonable degree of competition does not exist for the
- 18 insurance to which the rate is applicable.
- 19 (b) A rate shall not be held to be inadequate unless the
- 20 rate is unreasonably low for the insurance coverage provided and
- 21 the continued use of the rate endangers the solvency of the
- 22 insurer; or unless the rate is unreasonably low for the insurance
- 23 provided and the use of the rate has or will have the effect of
- 24 destroying competition among insurers, creating a monopoly, or
- 25 causing a kind of insurance to be unavailable to a significant
- 26 number of applicants who are in good faith entitled to procure

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27 that insurance through ordinary methods.

- 1 (c) A rate for a coverage is unfairly discriminatory in
- 2 relation to another rate for the same coverage if the differen-
- 3 tial between the rates is not reasonably justified by differences
- 4 in losses, expenses, or both, or by differences in the uncer-
- 5 tainty of loss, for the individuals or risks to which the rates
- 6 apply. A reasonable justification shall be supported by a rea-
- 7 sonable classification system; by sound actuarial principles when
- 8 applicable; and by actual and credible loss and expense statis-
- 9 tics or, in the case of new coverages and classifications, by
- 10 reasonably anticipated loss and expense experience. A rate is
- 11 not unfairly discriminatory because it reflects differences in
- 12 expenses for individuals or risks with similar anticipated
- 13 losses, or because it reflects differences in losses for individ-
- 14 uals or risks with similar expenses.
- 15 (2) A determination concerning the existence of a reasonable
- 16 degree of competition with respect to subsection (1)(a) shall
- 17 take into account a reasonable spectrum of relevant economic
- 18 tests, including the number of insurers actively engaged in writ-
- 19 ing the insurance in question, the present availability of such
- 20 insurance compared to its availability in comparable past peri-
- 21 ods, the underwriting return of that insurance over a period of
- 22 time sufficient to assure reliability in relation to the risk
- 23 associated with that insurance, and the difficulty encountered by
- 24 new insurers in entering the market in order to compete for the
- 25 writing of that insurance.
- 26 SEC. 2109A. (1) ALL RATES FOR AUTOMOBILE INSURANCE SHALL
- 27 BE REVIEWED BY THE COMMISSIONER BY EXAMINING THE INSURER'S REPORT

- 1 PREPARED PURSUANT TO SECTION 2.128 AND SHALL BE MADE IN ACCORDANCE
- 2 WITH TOTAL RETURN RATING AND THE FOLLOWING PROVISIONS:
- 3 (A) RATES SHALL NOT BE EXCESSIVE, INADEQUATE, OR UNFAIRLY
- 4 DISCRIMINATORY. A RATE SHALL NOT BE APPROVED BY THE COMMISSIONER
- 5 UNLESS IT IS ACTUARIALLY JUSTIFIED BASED UPON THE INFORMATION
- 6 RECEIVED PURSUANT TO SECTION 2128.
- 7 (B) A RATE SHALL NOT BE HELD TO BE INADEQUATE UNLESS THE
- 8 RATE, AFTER CONSIDERATION OF INVESTMENT INCOME AND SURPLUS, IS
- 9 UNREASONABLY LOW FOR THE INSURANCE COVERAGE PROVIDED AND IS
- 10 INSUFFICIENT TO SUSTAIN PROJECTED LOSSES AND EXPENSES: OR UNLESS
- 11 THE RATE IS UNREASONABLY LOW FOR THE INSURANCE PROVIDED AND THE
- 12 USE OF THE RATE HAS OR WILL HAVE THE EFFECT OF DESTROYING COMPE-
- 13 TITION AMONG INSURERS, CREATING A MONOPOLY, OR CAUSING A KIND OF
- 14 INSURANCE TO BE UNAVAILABLE TO A SIGNIFICANT NUMBER OF APPLICANTS
- 15 WHO ARE IN GOOD FAITH ENTITLED TO PROCURE THAT INSURANCE THROUGH
- 16 ORDINARY METHODS.
- 17 (C) A RATE FOR A COVERAGE IS UNFAIRLY DISCRIMINATORY IN
- 18 RELATION TO ANOTHER RATE FOR THE SAME COVERAGE IF THE DIFFEREN-
- 19 TIAL BETWEEN THE RATES IS NOT REASONABLY JUSTIFIED BY DIFFERENCES
- 20 IN LOSSES, EXPENSES, OR BOTH, OR BY DIFFERENCES IN THE UNCER-
- 21 TAINTY OF LOSS, FOR THE INDIVIDUALS OR RISKS TO WHICH THE RATES
- 22 APPLY. A REASONABLE JUSTIFICATION SHALL BE SUPPORTED BY A REA-
- 23 SONABLE CLASSIFICATION SYSTEM; BY SOUND ACTUARIAL PRINCIPLES WHEN
- 24 APPLICABLE; AND BY ACTUAL AND CREDIBLE LOSS AND EXPENSE STATIS- 35
- 25 TICS OR, IN THE CASE OF NEW COVERAGES AND CLASSIFICATIONS, BY
- 26 REASONABLY ANTICIPATED LOSS AND EXPENSE EXPERIENCE. A RATE IS
- 27 NOT UNFAIRLY DISCRIMINATORY BECAUSE IT REFLECTS DIFFERENCES IN

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- 1 EXPENSES FOR INDIVIDUALS OR RISKS WITH SIMILAR ANTICIPATED
- 2 LOSSES, OR BECAUSE IT REFLECTS DIFFERENCES IN LOSSES FOR INDIVID-
- 3 UALS OR RISKS WITH SIMILAR EXPENSES.
- 4 (2) THE COMMISSIONER SHALL NOT APPROVE A RATE INCREASE FOR
- 5 AUTOMOBILE INSURANCE UNLESS THE COMMISSIONER DETERMINES THAT THE
- 6 DATA RECEIVED FROM THE REPORT PREPARED PURSUANT TO SECTION 2128
- 7 JUSTIFIES A RATE INCREASE. THE COMMISSIONER SHALL NOT APPROVE A
- 8 RATE INCREASE BY EXAMINING ACTUARIAL DATA FROM A LINE OTHER THAN
- 9 THE INSURER'S AUTOMOBILE INSURANCE LINE OR IF THE INSURER FAILS
- 10 TO FILE THE REPORT REQUIRED BY SECTION 2128. THE COMMISSIONER
- 11 SHALL NOT APPROVE A RATE INCREASE IF THE COMMISSIONER FINDS THE
- 12 INSURER'S ADMINISTRATIVE EXPENSES TO BE EXCESSIVE.
- 13 (3) EACH INSURER SHALL SUBMIT ANNUALLY TO THE COMMISSIONER A
- 14 COMPLETE BREAKDOWN OF LITIGATION COSTS ASSOCIATED WITH FIRST AND
- 15 THIRD PARTY AUTOMOBILE INSURANCE CLAIMS THAT HAVE BEEN RECEIVED
- 16 OR ARE IN THE PROCESS OF BEING LITIGATED AND OF AMOUNTS RESERVED
- 17 TO BE USED FOR THOSE EXPENSES. THE COMMISSIONER SHALL NOT
- 18 APPROVE A RATE IF THE ADMINISTRATIVE COSTS ASSOCIATED WITH THE
- 19 LITIGATION OF FIRST PARTY CLAIMS EXCEED 1% OF THE ADMINISTRATIVE
- 20 COSTS ASSOCIATED WITH THE LITIGATION OF THIRD PARTY CLAIMS. EACH
- 21 AUTOMOBILE INSURANCE INSURER'S TOTAL ADMINISTRATIVE EXPENSES
- 22 SHALL BE ALLOCATED TO EACH TERRITORY ACCORDING TO THE INSURER'S
- 23 PROPORTIONATE SHARE OF PREMIUM WRITTEN IN EACH TERRITORY. EACH
- 24 PREMIUM CHARGED WITHIN EACH TERRITORY SHALL CONTAIN AN EQUAL
- 25 SHARE OF THE ADMINISTRATIVE EXPENSE FOR THE TERRITORY. RATES
- 26 SHALL BE FILED AND CHARGED UNDER THIS SECTION SO THAT EACH

- 1 AUTOMOBILE INSURANCE PREMIUM INCLUDES AN EQUAL SHARE OF EACH
- 2 INSURER'S OVERALL ADMINISTRATIVE EXPENSE.
- 3 SEC. 2109B. (1) IF THE COMMISSIONER DETERMINES THAT ANY
- 4 PERSON OR ORGANIZATION HAS VIOLATED THE AUTOMOBILE RATE-MAKING OR
- 5 UNDERWRITING PROVISIONS OF THIS CHAPTER, THE COMMISSIONER MAY
- 6 ISSUE A CEASE AND DESIST ORDER AND ORDER THE PERSON OR ORGANI-
- 7 ZATION TO PAY A CIVIL FINE OF NOT MORE THAN \$500.00 FOR EACH VIO-
- 8 LATION AND A CIVIL FINE OF NOT MORE THAN \$5,000.00 FOR EACH WILL-
- 9 FUL VIOLATION. A DEFAULT IN THE PAYMENT OF A CIVIL FINE UNDER
- 10 THIS SECTION MAY BE REMEDIED BY ANY MEANS AUTHORIZED UNDER THE
- 11 REVISED JUDICATURE ACT OF 1961, ACT NO. 236 OF THE PUBLIC ACTS OF
- 12 1961, BEING SECTIONS 600.100 TO 600.9947 OF THE MICHIGAN COMPILED
- 13 LAWS. A CIVIL FINE COLLECTED PURSUANT TO THIS SUBSECTION SHALL
- 14 BE USED FOR THE OPERATION OF THE AUTOMOBILE INSURANCE DATA COL-
- 15 LECTION AGENCY CREATED IN SECTION 2128E.
- 16 (2) IF THE COMMISSIONER FINDS THAT A VIOLATION OF THE AUTO-
- 17 MOBILE RATE-MAKING OR UNDERWRITING PROVISIONS OF THIS CHAPTER HAS
- 18 OCCURRED AND THAT THE VIOLATION HAS RESULTED IN AN INCREASE IN
- 19 AUTOMOBILE INSURANCE PREMIUMS OR A DECREASE IN BENEFITS, THE COM-
- 20 MISSIONER SHALL ORDER THE INSURER TO RETURN THE PREMIUM OR THE
- 21 AMOUNT OF BENEFITS THAT SHOULD HAVE BEEN PAID, ALONG WITH AN
- 22 INTEREST CHARGE OF 12% PER ANNUM TO BE APPLIED FROM THE TIME THE
- 23 PREMIUM WAS COLLECTED OR THE BENEFIT WAS DUE OR WOULD HAVE BEEN
- 24 DUE TO THE CONSUMER.
- 25 (3) THE COMMISSIONER MAY SUSPEND THE LICENSE OF AN INSURER
- 26 THAT FAILS TO COMPLY WITH THE COMMISSIONER'S ORDER TO CORRECT A
- 27 VIOLATION OF THIS CHAPTER.

- 1 Sec. 2110. (1) In developing and evaluating rates pursuant
- 2 to the standards prescribed in -section SECTIONS 2109 AND 2109A,
- 3 due consideration shall be given to past and prospective loss
- 4 experience within and outside this state, to catastrophe hazards,
- 5 if any; to a reasonable margin for underwriting profit and con-
- 6 tingencies; to dividends, savings, or unabsorbed premium deposits
- 7 allowed or returned by insurers to their policyholders, members,
- 8 or subscribers; to past and prospective expenses, both country-
- 9 wide and those specially applicable to this state exclusive of
- 10 assessments under this code; to assessments under this code; to
- 11 underwriting practice and judgment; and to all other relevant
- 12 factors within and outside this state.
- (2) The systems of expense provisions included in the rates
- 14 for use by any insurer or group of insurers may differ from those
- 15 of other insurers or groups of insurers to reflect the require-
- 16 ments of the operating methods of the insurer or group with
- 17 respect to any kind of insurance, or with respect to any subdivi-
- 18 sion or combination thereof for which subdivision or combination
- 19 separate expense provisions are applicable.
- 20 (3) Risks may be grouped by classifications for the estab-
- 21 lishment of rates and minimum premiums. The classifications may
- 22 measure differences in losses, expenses, or both.
- 23 Sec. 2111. (1) Notwithstanding any provision of this -code-
- 24 ACT and this chapter to the contrary, classifications and terri-
- 25 torial base rates used by -any- AN insurer in this state with
- 26 respect to automobile insurance or home insurance AND
- 27 CLASSIFICATIONS USED BY AN INSURER WITH RESPECT TO AUTOMOBILE

- 1 INSURANCE shall conform to the applicable requirements of this
- 2 section. The section of the sectio
- 3 (2) Classifications established pursuant to this section for
- 4 automobile insurance shall be based only upon 1 or more of the
- 5 following factors, which shall be applied by an insurer on a uni-in a
- 6 form basis throughout the state:
- 7 (a) With respect to all automobile insurance coverages:
- 8 (i) Either the age of THE driver; the length of driving
- 9 experience; or the number of years licensed to operate a motor
- 10 vehicle.
- 11 (ii) Driver primacy, based upon the proportionate use of
- 12 each vehicle insured under the policy by individual drivers

- 13 insured or to be insured under the policy.
- 14 (iii) Average miles driven weekly, annually, or both.
- 15 (iv) Type of use, such as business, farm, or pleasure use:
- 16 (v) Vehicle characteristics, features, and options, such as
- 17 engine displacement, ability of vehicle and its equipment to pro-
- 18 tect passengers from injury --- and other similar items, sinclud-

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- 19 ing vehicle make and model.
- 20 (vi) Daily or weekly commuting mileage.
- 21 (vii) Number of cars insured by the insurer or number of the cars insured by the insurer or number of the cars insured by the insurer or number of the cars insured by the insurer or number of the cars insured by the insurer or number of the cars insured by the insurer or number of the cars insured by the insurer or number of the cars insured by the insurer or number of the cars insured by the insurer or number of the cars insured by the insurer or number of the cars insured by the insurer or number of the cars insured by the insurer or number of the cars insured by the insurer or number of the cars insured by the insurer or number of the cars insured by t
- 22 licensed operators in the household. However, number of licensed and the household.
- 23 operators shall not be used as an indirect measure of marital
- 24 status.
- 25 (viii) Amount of insurance.
- 26 (b) In addition to the factors prescribed in subdivision
- 27 (a), with respect to personal protection insurance coverage:

- 1 (i) Earned income.
- 2 (ii) Number of dependents of income earners insured under
- 3 the policy.
- 4 (iii) Coordination of benefits.
- 5 (iv) Use of a safety belt.
- 6 (ν) THE WAIVER OF COVERAGE FOR WORK LOSS BENEFITS UNDER SEC-7 TION 3107.
- 8 (c) In addition to the factors prescribed in subdivision
- 9 (a), with respect to collision and comprehensive coverages:
- 10 (i) The anticipated cost of vehicle repairs or replacement,
- 11 which may be measured by age, price, cost new, or value of the
- 12 insured automobile, and other factors directly relating to that
- 13 anticipated cost.
- 14 (ii) Vehicle make and model.
- 15 (iii) Vehicle design characteristics related to vehicle
- 16 damageability.
- 17 (iv) Vehicle characteristics relating to automobile theft
- 18 prevention devices.
- (d) With respect to all automobile insurance coverage other
- 20 than comprehensive, successful completion by the individual
- 21 driver or drivers insured under the policy of an accident preven-
- 22 tion education course -which THAT meets the following criteria:
- 23 ---
- 24 (i) The course shall include a minimum of 8 hours of class-
- 25 room instruction.
- 26 (ii) The course shall include, but not be limited to, a
- 27 review of all of the following:

- 1 (A) The effects of aging on driving behavior.
- 2 (B) The shapes, colors, and types of road signs.
- 3 (C) The effects of alcohol and medication on driving.
- 4 (D) The laws relating to the proper use of a motor vehicle.
- 5 (E) Accident prevention measures.
- 6 (F) The benefits of safety belts and child restraints.
- 7 (G) Major driving hazards.
- 8 (H) Interaction with other highway users such as motorcy-9 clists, bicyclists, and pedestrians.
- (3) Before February 1, 1987, each EACH insurer shall
 establish and maintain premium discount plans pursuant to the
- 12 following:
- 13 (a) Until July 1, 1991, an AN automobile theft prevention
- 14 premium discount plan. A premium discount plan required under
- 15 this subdivision shall provide for a premium discount for automo-
- 16 bile comprehensive coverage based upon the installation of an
- 17 approved automobile theft prevention device. As used in this
- 18 subdivision, "approved automobile theft prevention device" means
- 19 a device -which THAT is designed to prevent the theft of an
- 20 insured's automobile and which THAT is approved by the board of
- 21 directors of the automobile theft prevention authority.
- (b) Until July 1, 1991, an automobile safety belt premium
- 23 discount plan. A premium discount plan required under this sub-
- 24 division shall provide for a premium discount for automobile per-
- 25 sonal protection insurance of not less than 20%. A premium dis-
- 26 count plan established under this subdivision may require the
- 27 insured individual to certify in writing that he or she will wear

- 1 a safety belt while operating the insured motor vehicle in
- 2 compliance with section 710e of the Michigan vehicle code, Act
- 3 No. 300 of the Public Acts of 1949, being section 257.710e of the
- 4 Michigan Compiled Laws, as a condition to receiving the premium
- 5 discount. If an insured receives a premium discount after pro-
- 6 viding such certification and is injured while operating a motor
- 7 vehicle without wearing a safety belt at the time of the injury,
- 8 an insurer may subsequently deny to -such THE insured the right
- 9 to participate in any premium discount plan established by the
- 10 insurer pursuant to this subdivision for a period of 12 months.
- 11 An insurer which THAT reduces its personal protection insurance
- 12 rates after December 1, 1985 by not less than 20% and does not
- 13 increase -such THOSE rates for a period of 12 months shall be
- 14 considered to be in compliance with this subdivision.
- 15 (4) Each insurer shall establish a secondary or merit rating
- 16 plan for automobile insurance, other than comprehensive
- 17 coverage. A secondary or merit rating plan required under this
- 18 subsection shall provide for premium surcharges for any or all
- 19 coverages for automobile insurance, other than comprehensive cov-
- 20 erage, based upon any or all of the following, when that informa-
- 21 tion becomes available to the insurer:
- 22 * (a) Substantially at-fault accidents.
- 23 (b) Convictions for, determinations of responsibility for
- 24 civil infractions for, or findings of responsibility in probate
- 25 court for civil infractions for, violations under chapter VI of
- 26 the Michigan vehicle code, Act No. 300 of the Public Acts of

- 1 1949, as amended, being sections 257.601 to 257.750 of the Samuel
- 2 Michigan Compiled Laws,
- 3 (5) An insurer shall not establish or maintain rates or
- 4 rating classifications for automobile insurance based upon sex or -

.

- 5 marital status.
- 6 (6) Notwithstanding other provisions of this chapter, auto-
- 7 mobile insurance risks shall be grouped by territory AS PRE-
- 8 SCRIBED BY THE COMMISSIONER. THE COMMISSIONER SHALL ESTABLISH
- 9 UNIFORM TERRITORIAL RATING TO BE USED BY ALL AUTOMOBILE INSURANCE
- 10 INSURERS DOING BUSINESS IN THE STATE. TERRITORIAL BOUNDARIES
- 11 SHALL BE BASED ON OBJECTIVE CRITERIA, INCLUDING TRAFFIC PATTERNS,
- 12 AND SHALL BE RELATED TO THE DRIVING ENVIRONMENT INCLUDING, BUT
- 13 NOT LIMITED TO, DENSITY OF TRAFFIC, REGULARITY OF TRAFFIC FLOW,
- 14 TRAFFIC ROUTE SIZE, AND TYPES OF ROADWAY. A TERRITORY SHALL NOT
- 15 INCLUDE LESS THAN 1 COUNTY AND MAY INCLUDE MORE THAN 1 COUNTY.
- 16 AN INSURER SHALL NOT CHARGE A TERRITORIAL BASE RATE FOR AN AUTO-
- 17 MOBILE INSURANCE POLICY UNLESS THE TERRITORIAL RATING SCHEME USED
- 18 BY THE INSURER HAS BEEN APPROVED BY THE COMMISSIONER. AN INSURER
- 19 SHALL ESTABLISH 1 ACTUARIALLY SOUND BASE RATE FOR EACH PRESCRIBED
- 20 TERRITORY WHICH BASE RATE SHALL BE APPROVED BY THE COMMISSIONER
- 21 PURSUANT TO THIS CHAPTER. , and territorial base rates for cov.
- 22 erages shall be established as provided in section 2111a and as
- 23 follows:
- 24 (a) An insurer shall not be limited as to the number of ter
- 25 ritories employed in its rating plan.
- 26 (b) Except during the period of time from February 28, 1986
- 27 to June 30, 1991, an insurer shall not employ more than 20

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1 different territorial base rates for an automobile insurance
2 coverage.
       (c) A territorial base rate may be made applicable in 1 or
4 more territories contained in the rating plan of the insurer.
       (d) Except during the period of time from February 28, 1986
6 to June 30, 1991, an insurer shall not employ a territorial base
7 rate for an automobile insurance package policy that is less than
8 45% of the highest territorial base rate for the same policy, all
9 other rating classifications being the same.
10
       (e) Except during the period of time from February 28, 1986
11 to June 30, 1991, an insurer shall not employ a territorial base
12 rate in a territory for an automobile insurance package policy
13 that is less than 90% of the territorial base rate employed in
14 any adjacent territory for the same policy, all other rating
15 classifications being the same.
16
       (7) Except during the period of time from February 28, 1986
17 to June 30, 1991, an insurer may elect at any time to exempt
18 itself from the requirements of subsection (6) by filing for an
19 exemption with the commissioner. An insurer electing this exemp
20 tion shall initially file a rating plan in which no territorial
21 base rate for an automobile insurance package policy is less than
22 45% of the highest territorial base rate for the same policy, all
23 other rating classifications being the same. Five years from the
24 date of the initial filing the insurer shall be prohibited from
25 using a rating plan in which any territorial base rate for an
26 automobile insurance package policy will be less than 67% of the
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27 highest territorial base rate for that same policy, all other

- 1 rating classifications being the same. An insurer's election of
- 2 an exemption under this subsection is permanent, final, and not
- 3 subject to change.
- 4 (8) Except during the period of time from February 28, 1986
- 5 to June 30, 1991, if an insurer can demonstrate to the commis-
- 6 sioner, after an opportunity for an evidentiary hearing held pur-
- 7 suant to the administrative procedures act of 1969, Act No. 306
- 8 of the Public Acts of 1969, as amended, being sections 24.201 to
- 9 24.328 of the Michigan Compiled Laws, that clear and significant
- 10 financial impairment exists in the geographic territory or terri
- 11 tories in question because of the need for an additional territo-
- 12 rial base rate, or for a greater variance in the adjacent geo-
- 13 graphic territory differential contained in subsection (6)(e),
- 14 the additional territorial base rate, a greater variance, or
- 15 both, shall be permitted for use by the insurer or a licensed
- 16 rating organization on behalf of that insurer, at such time as
- 17 the need exists. Evidence shall not include financial impairment
- 18 resulting from exemptions granted to other insurers.
- 19 (9) Except during the period of time from February 20, 1986
- 20 to June 30, 1991, if the commissioner finds, solely on the evi
- 21 dence presented, that a greater variance in the adjacent geo-
- 22 graphic territory differential than that authorized under subsec-
- 23 tion (6)(e) is justified, the increase in variance shall not
- 24 exceed 100% of that authorized under that subsection. Except
- 25 during the period of time from February 20, 1986 to June 30,
- 26 1991, if an increase in variance in the adjacent geographic
- 27 territory differential greater than 100% of that authorized under

- 1 subsection (6)(e) is justified, the commissioner shall require
- 2 the creation of an additional territorial base rate.
- 3 (10) Except during the period of time from February 28, 1986
- 4 to June 30, 1991, an exemption granted under subsections (8) and
- 5 (9) shall be applicable only to the geographic territory or ter
- 6 ritories in question, and only to the insurer requesting the
- 7 exemption.
- 8 (11) Except during the period of time from February 28, 1986
- 9 to June 30, 1991, an insurer shall not have more than 5 exemp
- 10 tions in force at any 1 time. For purposes of determining the
- 11 number of existing exemptions, each additional territorial base
- 12 rate or each increase in variance in the adjacent geographic ter-
- 13 ritory differential granted, shall be considered to be a separate
- 14 exemption.
- 15 (7) -(+2) This section shall not be construed as limiting
- 16 insurers or rating organizations from establishing and maintain-
- 17 ing statistical reporting territories. This section shall not be
- 18 construed to prohibit an insurer from establishing or maintain-
- 19 ing, for automobile insurance, a premium discount plan for senior
- 20 citizens in this state who are 65 years of age or older, if the
- 21 plan is uniformly applied by the insurer throughout this state.
- 22 If an insurer has not established and maintained such a premium
- 23 discount plan for senior citizens, the insurer shall offer
- 24 reduced premium rates to senior citizens in this state who are 65
- 25 years of age or older and who drive less than 3,000 miles per
- 26 year, regardless of statistical data.

- 1 (8) -(13). Classifications established pursuant to this
- 2 section for home insurance other than inland marine insurance
- 3 provided by policy floaters or endorsements shall be based only
- 4 upon 1 or more of the following factors:
- 5 (a) Amount and types of coverage.
- 6 (b) Security and safety devices, including locks, smoke
- 7 detectors, and similar, related devices.
- 8 (c) Repairable structural defects reasonably related to
- 9 risk.
- 10 (d) Fire protection class.
- (e) Construction of structure, based on structure size,
- 12 building material components, and number of units.
- (f) Loss experience of the insured, based upon prior claims
- 14 attributable to factors under the control of the insured which
- 15 THAT have been paid by an insurer.
- (q) Use of smoking materials within the structure.
- (h) Distance of the structure from a fire hydrant.
- (i) Availability of law enforcement or crime prevention
- 19 services.
- 20 (9) -(14) Notwithstanding other provisions of this chapter,
- 21 home insurance risks shall be grouped by territory, and territo-
- 22 rial base rates for coverages shall be established as follows:
- 23 (a) An insurer shall not be limited as to the number of ter-
- 24 ritories employed in its rating plan. However, an insurer shall
- 25 not employ more than 3 different territorial base rates for a
- 26 home insurance coverage. A territorial base rate may be made

- 1 applicable in 1 or more territories contained in the rating plan
 2 of the insurer.
- 3 (b) An insurer shall not employ a territorial base rate for
- 4 home insurance for owner-occupied dwelling policies that is less
- 5 than 70% of the highest territorial base rate for the same
- 6 policy, all other rating classifications being the same.
- 7 (c) An insurer shall not employ a territorial base rate for
- 8 home insurance for renter or tenant policies that is less than
- 9 65% of the highest territorial base rate for the same policy, all
- 10 other rating classifications being the same.
- 11 (10) -(15) An insurer shall not utilize factors other than
- 12 those prescribed in this section in establishing classifications
- 13 for automobile insurance and home insurance until January 1,
- 14 1982. However, on and after January 1, 1982, an AN insurer may
- 15 utilize factors in addition to those specified in this section,
- 16 if the commissioner finds, after a hearing held pursuant to the
- 17 administrative procedures act of 1969, Act No. 306 of the Public
- 18 Acts of 1969, as amended, being sections 24.201 to 24.328 of the
- 19 Michigan Compiled Laws, that the factors would encourage innova-
- 20 tion, would encourage insureds to minimize the risks of loss from
- 21 hazards insured against, and would be consistent with the pur-
- 22 poses of this chapter.
- SEC. 2111E. (1) BY NOT LATER THAN 1 YEAR AFTER THE EFFEC-
- 24 TIVE DATE OF THIS SECTION, EACH AUTOMOBILE INSURANCE INSURER
- 25 SHALL FILE BASE RATES FOR AUTOMOBILE INSURANCE THAT CONFORM TO
- 26 THIS ACT AS AMENDED BY THE 1991 AMENDATORY ACT THAT ADDED THIS
- 27 SECTION AND, FOR EACH UNIFORM TERRITORY, REFLECT A REDUCTION THAT

- 1 IS AT LEAST AN OVERALL 20% REDUCTION FROM THE AGGREGATE RATES
- 2 PREVIOUSLY CHARGED IN THE TERRITORY BY THE 10 AUTOMOBILE INSUR-
- 3 ANCE INSURERS HAVING THE GREATEST MARKET SHARE IN THE STATE BASED
- 4 ON RATES IN EFFECT AS OF MAY 1, 1988. THE COMMISSIONER SHALL
- 5 REQUIRE A RATE REDUCTION TO THIS LEVEL UNLESS THE INSURER, AFTER
- 6 CONFORMING FULLY WITH ALL OF THE PROVISIONS OF THIS ACT, CAN
- 7 DEMONSTRATE THAT A DIFFERENT RATE LEVEL IS ACTUARIALLY ESSENTIAL
- 8 PURSUANT TO SECTION 2109A.
- 9 (2) BY NOT LATER THAN 1 YEAR AFTER THE EFFECTIVE DATE OF
- 10 THIS SECTION, EACH AUTOMOBILE INSURANCE INSURER WHO DID NOT WRITE
- 11 AUTOMOBILE INSURANCE IN THIS STATE ON MAY 1, 1988 SHALL FILE BASE
- 12 RATES FOR AUTOMOBILE INSURANCE THAT DO NOT EXCEED THE WEIGHTED
- 13 AVERAGE OF THE BASE RATES FILED ON MAY 1, 1988 BY THE 10 LARGEST
- 14 AUTOMOBILE INSURANCE INSURERS BY MARKET SHARE.
- 15 (3) ASSESSMENTS FOR THE MICHIGAN CATASTROPHIC CLAIMS ASSOCI-
- 16 ATION, AUTOMOBILE THEFT PREVENTION AUTHORITY, AND THE MICHIGAN
- 17 AUTOMOBILE INSURANCE PLACEMENT FACILITY SHALL NOT BE CONSIDERED
- 18 IN ACHIEVING THE REDUCTION REQUIRED BY SUBSECTIONS (1) AND (2).
- 19 Sec. 2114. (1) A person or organization aggrieved with
- 20 respect to any filing -which THAT is in effect and -which THAT
- 21 affects the person or organization may make written application
- 22 to the commissioner for a hearing on the filing. However, the
- 23 insurer or rating organization -which THAT made the filing shall
- 24 not be authorized to proceed under this subsection. The applica-
- 25 tion shall specify the grounds to be relied upon by the
- 26 applicant. If the commissioner finds that the application is
- 27 made in good faith, that the applicant would be so aggrieved if

- 1 the grounds specified are established, or that the grounds
- 2 specified otherwise justify holding a hearing, the commissioner,
- 3 not more than 30 days after receipt of the application, shall
- 4 hold a hearing in accordance with THE ADMINISTRATIVE PROCEDURES
- 5 ACT OF 1969, Act No. 306 of the Public Acts of 1969, as amended,
- 6 BEING SECTIONS 24.201 TO 24.328 OF THE MICHIGAN COMPILED LAWS,
- 7 upon not less than 10 days' written notice to the applicant, the
- 8 insurer, and the rating organization which made the filing.
- 9 (2) If after hearing initiated under subsection (1) or upon
- 10 the commissioner's own motion pursuant to Act No. 306 of the
- 11 Public Acts of 1969, as amended, the commissioner finds that a
- 12 filing does not meet the requirements of sections 2109, 2109A, and a
- 13 and 2111, the commissioner shall issue an order stating the spe-
- 14 cific reasons for that finding. The order shall state when,
- 15 within a reasonable time after issuance of the order, the filing
- 16 shall be considered no longer effective. A copy of the order
- 17 shall be sent to the applicant, if any, and to each insurer and
- 18 rating organization subject to the order. The order shall not
- 19 affect a contract or policy made or issued before the date the
- 20 filing becomes ineffective, as indicated in the commissioner's
- 21 order.
- 22 Sec. 2118. (1) As a condition of maintaining its certifi-
- 23 cate of authority, an insurer shall not refuse to insure, refuse
- 24 to continue to insure, or limit coverage available to an eligible
- 25 person for automobile insurance, except in accordance with under-
- 26 writing rules established pursuant to this section and sections
- 27 2119 and 2120.

1 (2) The underwriting rules -which THAT an insurer may

. . .

- 2 establish for automobile insurance shall be based only on the
- 3 following:
- 4 (a) Criteria identical to the standards set forth in section

1.

- 5 2103(1).
- 6 (b) The insurance eligibility point accumulation in excess
- 7 of the amounts established by section 2103(1) of a member of the
- 8 household of the eligible person insured or to be insured, if the
- 9 member of the household usually accounts for 10% or more of the
- 10 use of a vehicle insured or to be insured. For purposes of this
- 11 subdivision, a person who is the principal driver for 1 automo-
- 12 bile insurance policy shall be rebuttably presumed not to usually
- 13 account for more than 10% of the use of other vehicles of the
- 14 household not insured under the policy of that person.
- (c) With respect to a vehicle insured or to be insured, sub-
- 16 stantial modifications from the vehicle's original manufactured
- 17 state for purposes of increasing the speed or acceleration capa-
- 18 bilities of the vehicle.
- 19 -(d) Failure by the person to provide proof that insurance
- 20 required by section 3101 was maintained in force with respect to
- 21 any vehicle which was both owned by the person and driven or
- 22 moved by the person or by a member of the household of the person
- 23 during the 6 month period immediately preceding application.
- 24 Such proof shall take the form of a certification by the person
- 25 on a form provided by the insurer that the vehicle was not driven
- 26 or moved without maintaining the insurance required by section

- 1 3101 during the 6 month period immediately preceding
- 2 application.
- 3 (D) -(e) Type of vehicle insured or to be insured, based on
- 4 1 of the following, without regard to the age of the vehicle:
- 5 (i) The vehicle is of limited production or of custom
- 6 manufacture.
- 7 (ii) The insurer does not have a rate lawfully in effect for
- 8 the type of vehicle.
- 9 (iii) The vehicle represents exposure to extraordinary
- 10 expense for repair or replacement under comprehensive or colli-
- 11 sion coverage.
- 12 (E) $\frac{12}{12}$ Use of a vehicle insured or to be insured for
- 13 transportation of passengers for hire, for rental purposes, or
- 14 for commercial purposes. Rules under this subdivision shall not
- 15 be based on the use of a vehicle for volunteer or charitable pur-
- 16 poses or for which reimbursement for normal operating expenses is
- 17 received.
- 18 (F) (g) Payment of a minimum deposit at the time of appli-
- 19 cation or renewal, not to exceed the smallest deposit required
- 20 under an extended payment or premium finance plan customarily
- 21 used by the insurer.
- 22 (G) (h) For purposes of requiring comprehensive deducti-
- 23 bles of not more than \$150.00, or of refusing to insure if the
- 24 person refuses to accept a required deductible, the claim
- 25 experience of the person with respect to comprehensive coverage.
- 26 (H) -(i) Total abstinence from the consumption of alcoholic
- 27 beverages except -when- IF such beverages are consumed as part of

- 1 a religious ceremony. However, an insurer shall not utilize an
- 2 underwriting rule based on this subdivision unless the insurer
- 3 has been authorized to transact automobile insurance in this
- 4 state prior to January 1, 1981, and has consistently utilized
- 5 such an underwriting rule as part of the insurer's automobile
- 6 insurance underwriting since being authorized to transact automo-
- 7 bile insurance in this state.
- 8 Sec. 2120. (1) Affiliated insurers may establish underwrit-
- 9 ing rules so that each affiliate will provide automobile insur-
- 10 ance only to certain eligible persons. This subsection shall
- 11 apply only if an eligible person can obtain automobile insurance
- 12 from 1 of the affiliates. The underwriting rules shall be in
- 13 compliance with this section , section AND SECTIONS 2118 ,
- 14 and -section 2119.
- (2) An insurer may establish separate rating plans so that
- 16 certain eligible persons are provided automobile insurance under
- 17 1 rating plan and other eligible persons are provided automobile
- 18 insurance under another rating plan. This subsection shall apply
- 19 only if all eligible persons can obtain automobile insurance
- 20 under a rating plan of the insurer. Underwriting rules consis-
- 21 tent with this section -, section AND SECTIONS 2118 -, and
- 22 -section 2119 shall be established to define the rating plan
- 23 applicable to each eligible person.
- 24 (3) Underwriting rules under this section shall be based
- 25 only on the following:
- 26 (a) With respect to a vehicle insured or to be insured,
- 27 substantial modifications from the vehicle's original

- 1 manufactured state for purposes of increasing the speed or
- 2 acceleration capabilities of the vehicle.
- 3 (b) Failure of the person to provide proof that insurance
- 4 required by section 3101 was maintained in force with respect to
- 5 any vehicle owned and operated by the person or by a member of
- 6 the household of the person during the 6 month period immediately
- 7 preceding application or renewal of the policy. Such proof shall
- 8 take the form of a certification by the person that the required
- 9 insurance was maintained in force for the 6 month period with
- 10 respect to such vehicle.
- (B) (c) For purposes of insuring persons who have refused
- 12 a deductible lawfully required under section -2118(2)(h)
- 13 2118(2)(G), the claim experience of the person with respect to
- 14 comprehensive coverage.
- (C) $\frac{(d)}{(d)}$ Refusal of the person to pay a minimum deposit
- **16** required under section $\frac{2118(2)(q)}{2118(2)(F)}$.
- 17 (D) -(e) A person's insurance eligibility point accumula-
- 18 tion under section 2103 (1)(h), or the total insurance eligibil-
- 19 ity point accumulation of all persons who account for 10% or more
- 20 of the use of 1 or more vehicles insured or to be insured under
- 21 the policy.
- 22 (E) $\frac{f}{f}$ The type of vehicle insured or to be insured as
- 23 provided in section $\frac{21+8(2)(e)}{2118(2)(D)}$.
- Sec. 2127. The commissioner may by rule prospectively
- 25 require insurers, rating organizations, and advisory organi-
- 26 zations to collect and report data -only- to the extent necessary
- 27 to monitor and evaluate the automobile and home insurance markets

- 1 in this state. The commissioner shall authorize the use of the line of the l
- 2 sampling techniques in each instance where sampling is practica-
- 3 ble and consistent with the purposes for which the data, by
- 4 county, are to be collected and reported. RULES PROMULGATED PUR-
- 5 SUANT TO THIS SECTION ARE IN ADDITION TO, AND DO NOT REPLACE, THE
- 6 REPORTING REQUIREMENTS IN SECTION 2128.
- 7 SEC. 2128. BY APRIL 1 OF EACH YEAR, EACH INSURER WHO ISSUES
- 8 AUTOMOBILE INSURANCE IN THIS STATE SHALL FILE WITH THE COMMIS-
- 9 SIONER AND WITH THE AUTOMOBILE INSURANCE DATA COLLECTION AGENCY
- 10 CREATED IN SECTION 2128E ON FORMS PRESCRIBED BY THE AUTOMOBILE
- 11 INSURANCE DATA COLLECTION AGENCY, THE FOLLOWING AUTOMOBILE INSUR-
- 12 ANCE DATA, BY TERRITORY, FOR THE PRIOR CALENDAR YEAR:
- 13 (A) WITH RESPECT TO PERSONAL PROTECTION INSURANCE COVERAGE:
- 14 (i) THE NUMBER OF CLAIMS FOR PERSONAL PROTECTION INSURANCE
- 15 BENEFITS FOR WHICH PAYMENT IS MADE.
- 16 (ii) THE NUMBER OF CLAIMS FOR PERSONAL PROTECTION INSURANCE
- 17 BENEFITS THAT ARE CLOSED WITHOUT PAYMENT.
- 18 (iii) THE NUMBER OF CLAIMS FOR PERSONAL PROTECTION INSURANCE
- 19 BENEFITS THAT INVOLVE SOME FORM OF LITIGATION AND ARE CLOSED
- 20 WITHOUT PAYMENT.
- 21 (iv) THE NUMBER OF CLAIMS FOR PERSONAL PROTECTION INSURANCE
- 22 BENEFITS THAT INVOLVE LITIGATION AND FOR WHICH PAYMENT IS MADE
- 23 AFTER LITIGATION COMMENCES, INCLUDING THE LENGTH OF TIME BETWEEN

2. 1.

- 24 THE FILING OF THE CLAIM AND THE FIRST PAYMENT.
- 25 (v) THE AMOUNT OF INTEREST CHARGES PAID ON CLAIMS FOR PER-
- 26 SONAL PROTECTION INSURANCE BENEFITS AND THE NUMBER OF CASES FOR
- 27 WHICH INTEREST CHARGES HAVE BEEN PAID.

- 1 (vi) THE LITIGATION COSTS FOR CLAIMS FOR PERSONAL PROTECTION
- 2 INSURANCE BENEFITS.
- 3 (vii) THE NUMBER OF CASES GOING TO VERDICT AND THE AMOUNT OF
- 4 THE VERDICT IN THOSE CASES WHERE AN AWARD IS MADE.
- 5 (viii) THE NUMBER OF VERDICTS OF NO CAUSE OF ACTION.
- 6 (ix) THE NUMBER OF CASES WHERE ATTORNEY FEES ARE PAID, THE
- 7 TOTAL AMOUNT OF ATTORNEY FEES PAID, AND THE AMOUNT OF ATTORNEY
- 8 FEES PAID FOR EACH CASE WHERE FEES WERE PAID.
- 9 (B) WITH RESPECT TO PROPERTY PROTECTION INSURANCE COVERAGE:
- 10 (i) THE NUMBER OF THIRD PARTY AUTOMOBILE BODILY INJURY TORT
- 11 CLAIMS CLOSED BY PAYMENT TO THE CLAIMANT BEFORE THE COMMENCEMENT
- 12 OF LITIGATION AND A BREAKDOWN OF HOW MANY OF THESE CLAIMS WERE
- 13 DEATH THRESHOLD CLAIMS, SERIOUS IMPAIRMENT OF BODY FUNCTION
- 14 CLAIMS, AND PERMANENT SERIOUS DISFIGUREMENT CLAIMS.
- 15 (ii) THE NUMBER OF THIRD PARTY AUTOMOBILE BODILY INJURY TORT
- 16 CLAIM LAWSUITS FILED, AND A BREAKDOWN OF HOW MANY WERE FILED FOR
- 17 DEATH THRESHOLD CLAIMS, SERIOUS IMPAIRMENT OF BODY FUNCTION
- 18 CLAIMS, AND PERMANENT SERIOUS DISFIGUREMENT CLAIMS.
- 19 (iii) THE NUMBER OF THIRD PARTY AUTOMOBILE BODILY INJURY
- 20 TORT CLAIMS CLOSED BY PAYMENT TO THE CLAIMANT AFTER THE COMMENCE-
- 21 MENT OF LITIGATION AND A BREAKDOWN OF HOW MANY OF THESE CLAIMS
- 22 WERE DEATH THRESHOLD CLAIMS, SERIOUS IMPAIRMENT OF BODY FUNCTION
- 23 CLAIMS, AND PERMANENT SERIOUS DISFIGUREMENT CLAIMS.
- 24 (iv) THE DOLLAR AMOUNT PAID TO CLAIMANTS TO SETTLE THIRD
- 25 PARTY AUTOMOBILE BODILY INJURY TORT CLAIMS BEFORE AND AFTER LITI-
- 26 GATION HAD BEEN COMMENCED AND A BREAKDOWN OF THE DOLLAR AMOUNTS

- 1 PAID FOR DEATH THRESHOLD CLAIMS, SERIOUS IMPAIRMENT OF BODY
- 2 FUNCTION CLAIMS, AND PERMANENT SERIOUS DISFIGUREMENT CLAIMS.
- 3 (ν) THE NUMBER AND DOLLAR AMOUNT PAID OR RESERVED FOR ALL
- 4 BODILY INJURY CLAIMS SET UP OR OPENED, INDICATING THE NUMBER AND
- 5 DOLLAR AMOUNT OF RESERVES FOR CLAIMS REMAINING OPEN AT THE END OF
- 6 THE REPORTING PERIOD.
- 7 SEC. 2128A. EACH AUTOMOBILE INSURANCE INSURER WRITING AUTO-
- 8 MOBILE INSURANCE IN THIS STATE SHALL FILE ANNUALLY BY APRIL 1
- 9 WITH THE COMMISSIONER A CERTIFIED AUDIT OF THE INSURER'S BOOKS
- 10 AND RECORDS PREPARED BY AN INDEPENDENT CERTIFIED PUBLIC
- 11 ACCOUNTANT.
- 12 SEC. 2128B. (1) BY JANUARY 15, 1993 AND EVERY 2 YEARS
- 13 THEREAFTER, THE COMMISSIONER SHALL ISSUE A PRELIMINARY REPORT
- 14 DETAILING THE STATE OF COMPETITION OR AVAILABILITY IN THE AUTOMO-
- 15 BILE INSURANCE MARKET ON A STATEWIDE BASIS AND DELINEATING SPE-
- 16 CIFIC CLASSIFICATIONS, KINDS OR TYPES OF INSURANCE, IF ANY, WHERE
- 17 COMPETITION OR AVAILABILITY DOES NOT EXIST AND SHALL HOLD A
- 18 PUBLIC HEARING ON THE REPORT. THE REPORT SHALL BE BASED ON RELE-
- 19 VANT ECONOMIC TESTS, INCLUDING BUT NOT LIMITED TO THOSE IN SUB-
- 20 SECTION (3). THE FINDINGS IN THE REPORT SHALL NOT BE BASED ON
- 21 ANY SINGLE MEASURE OF COMPETITION, BUT APPROPRIATE WEIGHT SHALL
- 22 BE GIVEN TO ALL MEASURES OF COMPETITION. THE REPORT SHALL
- 23 INCLUDE A CERTIFICATION OF WHETHER OR NOT COMPETITION OR AVAIL-
- 24 ABILITY EXISTS. A PERSON WHO DISAGREES WITH THE REPORT AND FIND-
- 25 INGS OF THE COMMISSIONER MAY REQUEST A CONTESTED HEARING PURSUANT
- 26 TO THE ADMINISTRATIVE PROCEDURES ACT OF 1969, ACT NO. 306 OF THE
- 27 PUBLIC ACTS OF 1969, BEING SECTIONS 24.201 TO 24.328 OF THE

- 1 MICHIGAN COMPILED LAWS, NOT LATER THAN 60 DAYS AFTER ISSUANCE OF
- 2 THE TENTATIVE REPORT.
- 3 (2) BY AUGUST 1, 1993 AND EVERY 2 YEARS THEREAFTER, THE COM-

- 4 MISSIONER SHALL ISSUE A FINAL REPORT THAT SHALL INCLUDE A FINAL
- 5 CERTIFICATION OF WHETHER OR NOT A REASONABLE DEGREE OF COMPETI-
- 6 TION OR AVAILABILITY EXISTS IN THE AUTOMOBILE INSURANCE MARKET ON
- 7 A STATEWIDE BASIS AND IF COMPETITION OR AVAILABILITY DOES NOT
- 8 EXIST, A PLAN TO CREATE COMPETITION OR AVAILABILITY. THE FINAL
- 9 REPORT AND CERTIFICATION SHALL BE SUPPORTED BY SUBSTANTIAL
- 10 EVIDENCE.
- 11 (3) FOR PURPOSES OF DETERMINING WHETHER COMPETITION OR
- 12 AVAILABILITY EXISTS IN THE AUTOMOBILE INSURANCE MARKET, ALL OF
- 13 THE FOLLOWING SHALL BE CONSIDERED BY THE COMMISSIONER:
- 14 (A) THE EXTENT TO WHICH ANY INSURER CONTROLS THE AUTOMOBILE
- 15 INSURANCE MARKET OR ANY PORTION OF THAT MARKET. WITH RESPECT TO
- 16 COMPETITION ON A STATEWIDE BASIS; AN INSURER SHALL NOT BE CONSID-
- 17 ERED TO CONTROL THE AUTOMOBILE INSURANCE MARKET UNLESS IT HAS
- 18 MORE THAN A 15% MARKET SHARE.
- 19 (B) WHETHER THE TOTAL NUMBER OF INSURERS WRITING AUTOMOBILE
- 20 INSURANCE IN THIS STATE IS SUFFICIENT TO PROVIDE MULTIPLE OPTIONS
- 21 AND ADEQUATE SERVICE TO INDIVIDUALS.
- 22 (C) THE DISPARITY AMONG AUTOMOBILE INSURANCE RATES AND CLAS-
- 23 SIFICATIONS TO THE EXTENT THAT SUCH CLASSIFICATIONS RESULT IN
- 24 RATE DIFFERENTIALS.
- 25 (D) THE AVAILABILITY OF AUTOMOBILE INSURANCE TO INDIVIDUALS

26 IN ALL GEOGRAPHIC AREAS OF THE STATE.

- 1 (E) THE RESIDUAL MARKET SHARE.
- 2 (F) THE OVERALL RATE LEVEL.
- 3 (G) ANY OTHER FACTORS THE COMMISSIONER CONSIDERS RELEVANT.
- 4 (4) A PLAN TO CREATE COMPETITION OR AVAILABILITY SHALL ONLY
- 5 RELATE TO THOSE GEOGRAPHIC AREAS, CLASSIFICATIONS, OR KINDS OR
- 6 TYPES OF RISKS WHERE COMPETITION OR AVAILABILITY HAS BEEN CERTI-
- 7 FIED NOT TO EXIST. THE PLAN MAY INCLUDE METHODS DESIGNED TO
- 8 CREATE COMPETITION OR AVAILABILITY AS THE COMMISSIONER CONSIDERS
- 9 NECESSARY, AND MAY PROVIDE FOR THE COMMISSIONER TO DO 1 OR MORE
- 10 OF THE FOLLOWING:
- 11 (A) AUTHORIZE, BY ORDER, JOINT UNDERWRITING ACTIVITIES IN A
- 12 MANNER SPECIFIED IN THE COMMISSIONER'S ORDER.
- 13 (B) MODIFY THE RATE APPROVAL PROCESS IN A MANNER TO INCREASE
- 14 COMPETITION OR AVAILABILITY WHILE AT THE SAME TIME PROVIDING FOR
- 15 REASONABLY TIMELY RATE APPROVALS. MODIFICATIONS UNDER THIS SUB-
- 16 DIVISION SHALL NOT AFFECT THE REQUIREMENTS OF SECTIONS 2106 AND
- 17 2107A.
- 18 (C) ORDER EXCESS PROFITS REGULATION. EXCESS PROFITS REGULA-
- 19 TION AUTHORIZED BY THIS SUBDIVISION SHALL BE BASED UPON RULES
- 20 PROMULGATED PURSUANT TO THE ADMINISTRATIVE PROCEDURES ACT OF
- 21 1969, ACT NO. 306 OF THE PUBLIC ACTS OF 1969, BEING SECTIONS
- 22 24.201 TO 24.328 OF THE MICHIGAN COMPILED LAWS. EXCESS PROFITS
- 23 SHALL INCLUDE BOTH UNDERWRITING PROFITS AND ALL AFTER-TAX INVEST-
- 24 MENT OR INVESTMENT PROFIT OR LOSS FROM UNEARNED PREMIUMS AND LOSS
- 25 RESERVES ATTRIBUTABLE TO AUTOMOBILE INSURANCE. THE COMMISSIONER,
- 26 PURSUANT TO EXCESS PROFITS REGULATION, MAY ESTABLISH FORMS FOR A PART OF THE PROPERTY OF TH
- 27 THE REPORTING OF FINANCIAL DATA BY THE INSURER.

- 1 (D) ESTABLISH AND REQUIRE AUTOMOBILE INSURANCE RATES, BY
- 2 ORDER, THAT INSURERS SHALL USE AS A CONDITION OF MAINTAINING
- 3 THEIR CERTIFICATE OF AUTHORITY. THE ORDER SETTING THE RATES
- 4 SHALL TAKE EFFECT NOT LESS THAN 90 DAYS OR MORE THAN 150 DAYS
- 5 AFTER THE ORDER IS ISSUED.
- 6 (E) ESTABLISH AND IMPLEMENT A PLAN TO ASSIST IN INFORMING
- 7 CONSUMERS OF HOW TO OBTAIN AUTOMOBILE INSURANCE AT THE MOST
- 8 FAVORABLE RATES AND HOW TO OBTAIN BENEFITS FOR WHICH THEY ARE
- 9 ELIGIBLE. THE PLAN MAY INCLUDE THE USE OF TOLL-FREE TELEPHONE
- 10 NUMBERS FOR USE BY AUTOMOBILE INSURANCE CONSUMERS AND MAY PROVIDE
- 11 FOR THE DISTRIBUTION OF INFORMATION TO LOCAL UNITS OF
- 12 GOVERNMENT.
- 13 (5) THE REPORTS AND CERTIFICATIONS REQUIRED UNDER SUBSEC-
- 14 TIONS (1) AND (2) SHALL BE FORWARDED TO THE GOVERNOR, THE CLERK
- 15 OF THE HOUSE, THE SECRETARY OF THE SENATE, AND ALL THE MEMBERS OF
- 16 THE HOUSE OF REPRESENTATIVES AND SENATE COMMITTEES ON INSURANCE
- 17 ISSUES.
- 18 SEC. 2128C. (1) EACH INSURER WRITING 7% OR MORE OF THE
- 19 AUTOMOBILE INSURANCE IN THIS STATE SHALL GEOGRAPHICALLY MARKET
- 20 AUTOMOBILE INSURANCE PROPORTIONATE TO THE NUMBER OF REGISTERED
- 21 VEHICLES IN EACH AREA OF THE STATE. BEGINNING 1 YEAR AFTER THE
- 22 EFFECTIVE DATE OF THIS SECTION, EACH INSURER WRITING 7% OR MORE
- 23 OF THE AUTOMOBILE INSURANCE IN THIS STATE SHALL SUBMIT ANNUALLY
- 24 TO THE COMMISSIONER A MARKETING PLAN INDICATING THE NUMBER OF
- 25 AGENTS THAT MARKET FOR THE INSURER AND THE LOCATION OF THEIR
- 26 OFFICES. THE COMMISSIONER SHALL DETERMINE THE ADEQUACY OF EACH
- 27 INSURER'S MARKETING PLAN.

- 1 (2) IF THE COMMISSIONER, AFTER REVIEWING AN AUTOMOBILE
- 2 INSURER'S MARKETING PLAN, FINDS THE PLAN IS NOT IN COMPLIANCE
- 3 WITH SUBSECTION (1); THE COMMISSIONER SHALL NOTIFY THE INSURER IN
- 4 WRITING OF THE INSURER'S FAILURE TO COMPLY WITH THE LAW, SHALL
- 5 RECOMMEND REVISIONS TO THE INSURER'S PLAN, AND SHALL REQUIRE THAT
- 6 A REVISED PLAN BE RESUBMITTED WITHIN 30 DAYS. THE COMMISSIONER
- 7 SHALL APPROVE OR DISAPPROVE AN INSURER'S MARKETING PLAN OR REVI-
- 8 SIONS TO THE PLAN WITHIN 30 DAYS AFTER THE COMMISSIONER'S RECEIPT
- 9 OF THE PLAN OR THE REVISED PLAN.
- 10 (3) IF THE COMMISSIONER FINDS THAT AN AUTOMOBILE INSURANCE
- 11 INSURER HAS WILLFULLY VIOLATED THE PROVISIONS OF THIS SECTION,
- 12 THE COMMISSIONER MAY SUSPEND OR REVOKE THE INSURER'S LICENSE TO
- 13 DO BUSINESS AND MAY ORDER THE INSURER TO PAY A CIVIL FINE OF NOT
- 14 MORE THAN \$10,000.00 FOR EACH VIOLATION.
- 15 (4) IF THE COMMISSIONER FINDS THAT AN AUTOMOBILE INSURANCE
- 16 INSURER HAS FAILED TO FILE A MARKETING PLAN COMPLYING WITH THIS
- 17 SECTION, HAS FAILED TO REVISE A PLAN PURSUANT TO THE
- 18 COMMISSIONER'S FINDING, OR HAS CONSISTENTLY FAILED TO SUBMIT AN
- 19 ACCEPTABLE MARKETING PLAN, THE COMMISSIONER MAY SUSPEND OR REVOKE
- 20 THE INSURER'S LICENSE TO DO BUSINESS AND MAY ORDER THE INSURER TO
- 21 PAY A CIVIL FINE OF NOT MORE THAN \$2,000.00 FOR EACH OCCURRENCE.
- 22 (5) THE COMMISSIONER SHALL NOTIFY EACH AUTOMOBILE INSURANCE
- 23 INSURER LICENSED IN THIS STATE OF THE MARKETING PLAN FILING
- 24 REQUIREMENT.
- 25 SEC. 2128D. (1) IF THE COMMISSIONER FINDS, AFTER A HEARING
- 26 HELD PURSUANT TO THE ADMINISTRATIVE PROCEDURES ACT OF 1969, ACT
- 27 NO. 306 OF THE PUBLIC ACTS OF 1969, BEING SECTIONS 24.201 TO

- 1 24.328 OF THE MICHIGAN COMPILED LAWS, THAT ACCESS TO A REASONABLY
- 2 COMPETITIVE AND CONVENIENT AUTOMOBILE INSURANCE MARKET IN THIS
- 3 STATE IS LACKING FOR CERTAIN CONSUMERS, THE COMMISSIONER MAY
- 4 ORDER THE MICHIGAN AUTOMOBILE INSURANCE PLACEMENT FACILITY TO
- 5 DEVELOP A MARKET ACCESS PLAN, SUBJECT TO THE COMMISSIONER'S
- 6 APPROVAL, TO ASSURE THAT THOSE CONSUMERS HAVE REASONABLE AND CON-
- 7 VENIENT ACCESS TO THE MICHIGAN AUTOMOBILE INSURANCE PLACEMENT
- 8 FACILITY AND COMPETITIVE INSURANCE MARKETS IN THIS STATE.
- 9 (2) IF A MARKET ACCESS PLAN UNDER SUBSECTION (1) IS NOT SUB-
- 10 MITTED WITHIN 30 DAYS AFTER THE DATE OF THE COMMISSIONER'S ORDER,
- 11 OR IF THE PLAN DOES NOT MEET THE COMMISSIONER'S APPROVAL. THE
- 12 COMMISSIONER SHALL DEVELOP A MARKET ACCESS PLAN AND ORDER ITS
- 13 IMPLEMENTATION BY THE MICHIGAN AUTOMOBILE INSURANCE PLACEMENT
- 14 FACILITY UNTIL SUCH TIME THAT A PLAN ESTABLISHED BY THE MICHIGAN
- 15 AUTOMOBILE INSURANCE PLACEMENT FACILITY IS APPROVED BY THE
- 16 COMMISSIONER.
- 17 SEC. 2128E. (1) THERE IS CREATED AN AUTOMOBILE INSURANCE
- 18 DATA COLLECTION AGENCY TO EFFECTUATE THE AUTOMOBILE INSURANCE
- 19 DATA COLLECTION REQUIREMENTS OF THIS ACT. THE GOVERNING BOARD OF
- 20 THE AUTOMOBILE INSURANCE DATA COLLECTION AGENCY SHALL BE COMPOSED
- 21 OF THE COMMISSIONER AND 8 MEMBERS APPOINTED BY THE COMMISSIONER
- 22 AS FOLLOWS:
- 23 (A) TWO PERSONS WHO REPRESENT A PRIVATE AUTOMOBILE INSURANCE
- 24 INSURER NOT HOLDING MORE THAN 15% OF THE STATE'S OVERALL MARKET
- 25 SHARE AT THE TIME ITS REPRESENTATIVE SERVES ON THE BOARD.
- 26 (B) TWO PERSONS WHO REPRESENT THE GENERAL PUBLIC OF THIS
- 27 STATE.

- 1 (C) ONE PERSON WHO IS A LICENSED MEDICAL PROFESSIONAL IN
- 2 THIS STATE AND WHO DOES NOT OWN ANY PORTION OF AN AUTOMOBILE
- 3 INSURANCE INSURER OR MANAGE DIRECTLY OR INDIRECTLY AN AUTOMOBILE 11 12
- 4 INSURANCE INSURER 'SCAFFAIRS LE COMMON DE LA COMMON DEL COMMON DE LA COMMON DEL COMMON DE LA COMMON DEL COMMON DE LA COMMON DEL COMMON DE LA COMMON DEL COMMON DE LA COMMON DEL C
- 5 (D) ONE PERSON WHO IS A LICENSED ATTORNEY IN THIS STATE, WHO
- 6 DOES NOTHOWN ANY PORTION OF ANNAUTOMOBILE INSURANCE INSURER OR ANNAUTOMOBILE INSURANCE INSURER OR ANNAUTOMOBILE
- 7 MANAGE DIRECTLY OR INDIRECTLY AN AUTOMOBILE INSURANCE INSURER'S
- 8 AFFAIRS, AND WHO HAS AT LEAST 5 YEARS OF EXPERIENCE IN AUTOMOBILE
- 9 ACCIDENT RELATED LITIGATION.
- 10 (E) ONE PERSON WHO IS AN INDEPENDENT INSURANCE AGENT.
- 11 (F) ONE PERSON WHO HAS AT LEAST 10 YEARS OF DATA PROCESSING
- 12 EXPERIENCE IN A COMBINATION OF HARDWARE ACQUISITION AND SOFTWARE
- 13 DEVELOPMENT.
- 14 (2) A MEMBER OF THE GOVERNING BOARD OF THE AUTOMOBILE INSUR-
- 15 ANCE DATA COLLECTION AGENCY SHALL SERVE FOR A TERM OF 2 YEARS.
- 16 (3) THE AUTOMOBILE INSURANCE DATA COLLECTION AGENCY, UNDER
- 17 THE DIRECTION AND CONTROL OF THE COMMISSIONER AND SUBJECT TO THE
- 18 COMMISSIONER'S APPROVAL, SHALL HAVE THE FOLLOWING DUTIES:
- 19 (A) PRESCRIBE RATE FILING FORMS AND DATA COLLECTION FORMS
- 20 AND ESTABLISH UNIFORM DATA REPORTING REQUIREMENTS NECESSARY TO
- 21 SATISFY THE PROVISIONS OF THIS CHAPTER.
- 22 (B) ANALYZE REPORTED DATA, ANALYZE AUTOMOBILE INSURANCE
- 23 INSURERS' RATE-MAKING DATA, AND REPORT THESE FINDINGS TO THE COM-

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- 24 MISSIONER, AND COLLECT AND ANALYZE OTHER PERTINENT DATA AT THE
- 25 COMMISSIONER'S REQUEST.
- 26 (C) PREPARE REPORTS ON AUTOMOBILE INSURANCE AS REQUESTED BY
- 27 THE COMMISSIONER.

- 1 (D) ESTABLISH UNIFORM CLASSIFICATION SYMBOLS OR OTHER
- 2 UNIFORM DESIGNATIONS FOR USE BY AUTOMOBILE INSURANCE INSURERS TO
- 3 ESTABLISH RISK ASSOCIATED WITH EACH TYPE OF VEHICLE TO BE
- 4 INSURED.
- 5 (E) IN A UNIFORM MANNER GATHER ALL DATA NECESSARY TO ACCOM-
- 6 PLISH TOTAL RETURN RATE-MAKING. INFORMATION SHALL BE GATHERED
- 7 THAT ENABLES THE COMMISSIONER TO ASSESS AN INSURER'S ACTUAL LOSS
- 8 EXPERIENCE, LEVEL OF PROFIT, INTEREST INCOME, METHOD FOR ASSESS-
- 9 ING ANTICIPATED LOSSES, PARTICULAR APPLICATION OF LOSS TREND FAC-
- 10 TORS, PURE PREMIUM, FREQUENCY OF LOSSES BASED ON THE NUMBER OF
- 11 VEHICLES INSURED, AND THE LOSS COSTS AND FREQUENCY OF LOSSES
- 12 ASSOCIATED WITH THE COMPONENT PARTS OF EACH ASPECT OF COVERAGE,
- 13 INCLUDING, BUT NOT LIMITED TO, MEDICAL, WAGE-LOSS, REPLACEMENT
- 14 SERVICES, SURVIVORS BENEFITS, DEATH BENEFIT, COLLISION COVERAGE,
- 15 COMPREHENSIVE COVERAGE WITH THEFT REPORTED AS A SEPARATE COMPO-
- 16 NENT, BODILY INJURY OR LIABILITY COVERAGE REPORTED BY POLICY
- 17 LIMITS, PROPERTY PROTECTION, AND ALL OTHER BENEFITS BEING
- 18 MARKETED BY THE INSURER.
- 19 (F) GATHER DETAILED DATA ABOUT INSURERS' ADMINISTRATIVE
- 20 EXPENSES AND THEIR RELATIONSHIP TO THE PREMIUM CHARGED, INCLUDING
- 21 COSTS FOR EACH TYPE OF LITIGATION ASSOCIATED WITH AUTOMOBILE
- 22 INSURANCE CLAIMS RESOLUTION, SALARIES, FRINGE BENEFITS, COMMIS-
- 23 SIONS, AND COSTS ASSOCIATED WITH OVERHEAD AND OTHER FIXED COSTS.
- 24 (G) REQUIRE EACH INSURER TO LIST THE ITEMS THAT ARE USED TO
- 25 COMPOSE A BASE RATE AND REQUIRE EACH INSURER TO EXPLAIN THE
- 26 APPLICATIONS OF BASE RATES.

- 1 (H) ESTABLISH FORMS TO ENABLE THE COLLECTION OF DATA
- 2 SUFFICIENT TO PERMIT THE COMMISSIONER TO DETERMINE, WITH
- 3 CERTAINTY, THAT ALL ASPECTS OF AUTOMOBILE INSURANCE RATE-MAKING
- 4 ARE ACTUARIALLY SOUND AND THAT AUTOMOBILE INSURANCE RATES ARE NOT
- 5 EXCESSIVE OR DISCRIMINATORY.
- 6 (I) REQUIRE THE REPORTING OF ALL AUTOMOBILE INSURANCE CLAIMS
- 7 COSTS AND THE FREQUENCY OF EACH TYPE OF LOSS AND PROVIDE THE COM-
- 8 MISSIONER WITH THIS DATA.
- 9 (J) COLLECT ALL AUTOMOBILE INSURANCE RATE-MAKING DATA AND
- 10 EVALUATE THIS DATA BY DETERMINING ITS ACTUARIAL SOUNDNESS AND BY
- 11 MAKING COMPARISONS BASED ON STATEWIDE UNIFORM RATING TERRITORIES
- 12 AS ESTABLISHED BY THIS ACT.
- 13 (K) ENSURE THAT ALL NECESSARY DATA ARE COLLECTED AND ANA-
- 14 LYZED IN A MANNER THAT COMPLIES WITH THE PROVISIONS OF THIS
- 15 CHAPTER.
- 16 (1) SUBJECT TO THE APPROVAL OF THE COMMISSIONER, DESIGNATE 1
- 17 ADVISORY ORGANIZATION FOR THE PURPOSE OF IMPLEMENTING ITS DATA
- 18 COLLECTION PLAN AND THE COMPILATION OF RATE-MAKING AND OTHER
- 19 FINANCIAL DATA FROM AUTOMOBILE INSURANCE INSURERS. THE DESIG-
- 20 NATED ADVISORY ORGANIZATION SHALL REPORT ITS FINDINGS TO THE
- 21 AUTOMOBILE INSURANCE DATA COLLECTION AGENCY, WHICH SHALL REPORT
- 22 TO THE COMMISSIONER.
- 23 (M) REPORT TO THE COMMISSIONER ANY KNOWN VIOLATION OF THIS
- 24 ACT.
- 25 (N) COMPLETE ANY OTHER TASK REQUIRED TO SATISFY THE PROVI-
- 26 SIONS OF THIS ACT AS REQUESTED BY THE COMMISSIONER.

- 1 (4) THE COMMISSIONER SHALL MAKE RECOMMENDATIONS TO THE
- 2 LEGISLATURE ANNUALLY REGARDING THE ADEQUACY OF STATUTORY
- 3 UNDERWRITING AND RATE-MAKING PROVISIONS BASED UPON THE INFORMA-
- 4 TION GATHERED AND ANALYZED BY THE AUTOMOBILE INSURANCE DATA: COL-
- 5 LECTION AGENCY AND ANY OTHER INFORMATION THAT THE COMMISSIONER
- 6 CONSIDERS APPROPRIATE.
- 7 SEC. 2128F. (1) PRIOR TO APRIL 1, 1992, AND PRIOR TO APRIL 1
- 8 OF EACH YEAR THEREAFTER, EACH INSURER ENGAGED IN WRITING INSUR-
- 9 ANCE COVERAGES THAT PROVIDE THE SECURITY REQUIRED BY SECTION
- 10 3101(1) WITHIN THIS STATE, AS A CONDITION OF ITS AUTHORITY TO:
- 11 TRANSACT INSURANCE IN THIS STATE, SHALL PAY TO THE AUTOMOBILE
- 12 INSURANCE DATA COLLECTION AGENCY AN ASSESSMENT EQUAL TO \$1.00
- 13 MULTIPLIED BY THE INSURER'S TOTAL EARNED CAR YEARS OF INSURANCE
- 14 PROVIDING THE SECURITY REQUIRED BY SECTION 3101(1) WRITTEN IN 1984
- 15 THIS STATE DURING THE IMMEDIATELY PRECEDING CALENDAR YEAR.
- 16 (2) MONEY RECEIVED PURSUANT TO SUBSECTION (1), AND ALL OTHER
- 17 MONEY RECEIVED BY THE AUTOMOBILE INSURANCE DATA COLLECTION
- 18 AGENCY, SHALL BE SEGREGATED AND PLACED IN A FUND TO BE KNOWN AS
- 19 THE DATA COLLECTION FUND. THE DATA COLLECTION FUND SHALL BE
- 20 ADMINISTERED BY THE AUTOMOBILE INSURANCE DATA COLLECTION AGENCY.
- 21 (3) MONEY IN THE DATA COLLECTION FUND SHALL BE USED TO PAY
- 22 THE COSTS OF ADMINISTRATION OF THE AUTOMOBILE INSURANCE DATA COL-
- 23 LECTION AGENCY AND SHALL NOT BE CONSIDERED STATE MONEY.
- 24 Sec. 2236. (1) A basic insurance policy form or annuity
- 25 contract form shall not be issued or delivered to any person in
- 26 this state, and an insurance or annuity application form if a
- 27 written application is required and is to be made a part of the

- 1 policy or contract, a printed rider or indorsement form or form 2 of renewal certificate, and a group certificate in connection 3 with the policy or contract, shall not be issued or delivered to 4 a person in this state, until a copy of the form is filed with 5 the insurance bureau and approved by the commissioner as conform-6 ing with the requirements of this -code ACT and not inconsistent 7 with the law. Failure of the commissioner to act within 30 days 8 after submittal shall constitute approval. All such forms, 9 except policies of disability insurance as defined in section 10 3400, shall be plainly printed with type size not less than 11 8-point unless the commissioner determines that portions of such 12 a form printed with type less than 8-point is not deceptive or 13 misleading. An insurance policy form submitted for approval by 14 the state accident fund shall include on the first page of the 15 form in a separate paragraph in 10-point type a statement that 16 the Michigan state accident fund is an agency of state govern-17 ment, and is not a member of the property and casualty guaranty by an armondary and casualty guaranty 18 association. Neither the state nor the association is liable if 19 the state accident fund is declared insolvent during the effec-20 tive period of the policy.
- 21 (2) An EXCEPT FOR FILINGS CONCERNING RATES, AN insurer may
 22 satisfy its obligations to make form filings by becoming a member
 23 of, or a subscriber to, a rating organization, licensed under
 24 section 2436 or 2630, which makes such filings and by filing with
 25 the commissioner a copy of its authorization of the rating organization to make the filings on its behalf. Every member of or
 27 subscriber to a rating organization shall adhere to the form

- 1 filings made on its behalf by the organization except that an
- 2 insurer may file with the commissioner a substitute form, and
- 3 thereafter if a subsequent form filing by the rating organization
- 4 affects the use of the substitute form, the insurer shall review
- 5 its use and notify the commissioner to withdraw its substitute
- 6 form.
- 7 (3) Beginning January 1, 1992, the commissioner shall not
- 8 approve a form filed pursuant to this section providing for or
- 9 relating to an insurance policy or an annuity contract for per-
- 10 sonal, family, or household purposes if the form fails to obtain
- 11 the readability score or meet the other requirements of this sub-
- 12 section, as applicable:
- 13 (a) The readability score for a form for which approval is
- 14 required by this section shall not be less than 45, as determined
- 15 by the method provided in subdivisions (b) and (c).
- (b) The readability score for a form shall be determined as
- 17 follows:
- 18 (i) For a form containing not more than 10,000 words, the
- 19 entire form shall be analyzed. For a form containing more than
- 20 10,000 words, not less than two 200-word samples per page shall
- 21 be analyzed instead of the entire form. The samples shall be
- 22 separated by at least 20 printed lines.
- 23 (ii) Count the number of words and sentences in the form or
- 24 samples and divide the total number of words by the total number
- 25 of sentences. Multiply this quotient by a factor of 1.015.
- 26 (iii) Count the total number of syllables in the form or
- 27 samples and divide the total number of syllables by the total

- 1 number of words. Multiply this quotient by a factor of 84.6. As
- 2 used in this subparagraph, "syllable" means a unit of spoken lan-
- 3 guage consisting of 1 or more letters of a word as indicated by
- 4 an accepted dictionary. If the dictionary shows 2 or more
- 5 equally acceptable pronunciations of a word, the pronunciation
- 6 containing fewer syllables may be used.
- 7 (iv) Add the figures obtained in subparagraphs (ii) and
- 8 (iii) and subtract this sum from 206.835. The figure obtained
- 9 equals the readability score for the form.
- (c) For the purposes of subdivision (b)(ii) and (iii), the
- 11 following procedures shall be used:
- (i) A contraction, hyphenated word, or numbers and letters
- 13 when separated by spaces shall be counted as 1 word.
- 14 (ii) A unit of words ending with a period, semicolon, or
- 15 colon, but excluding headings and captions, shall be counted as 1
- 16 sentence.
- (d) In determining the readability score, the method pro-
- 18 vided in subdivisions (b) and (c):
- 19 (i) Shall be applied to an insurance policy form or an annu-
- 20 ity contract, together with a rider or indorsement form usually
- 21 associated with such an insurance policy form or annuity
- 22 contract.
- 23 (ii) Shall not be applied to words or phrases that are
- 24 defined in an insurance policy form, an annuity contract, or
- 25 riders, indorsements, or group certificates pursuant to an insur-
- 26 ance policy form or annuity contract.

- 1 (iii) Shall not be applied to language specifically agreed
- 2 upon through collective bargaining or required by a collective
- 3 bargaining agreement.
- 4 (iv) Shall not be applied to language that is prescribed by
- 5 state or federal statute or by rules or regulations promulgated
- 6 pursuant to a state or federal statute.
- 7 (e) Each form for which approval is required by this section
- 8 shall contain both of the following:
- 9 (i) Topical captions.
- 10 (ii) An identification of exclusions.
- (f) Each insurance policy and annuity contract that has more
- 12 than 3,000 words printed on not more than 3 pages of text or that
- 13 has more than 3 pages of text regardless of the number of words
- 14 shall contain a table of contents. This subdivision does not
- 15 apply to indorsements.
- 16 (g) Each rider or indorsement form that changes coverage
- 17 shall do all of the following:
- 18 (i) Contain a properly descriptive title.
- 19 (ii) Reproduce either the entire paragraph or the provision
- 20 as changed.
- 21 (iii) Be accompanied by an explanation of the change.
- 22 (h) If a computer system approved by the commissioner calcu-
- 23 lates the readability score of a form as being in compliance with
- 24 this subsection, the form is considered in compliance with the
- 25 readability score requirements of this subsection.
- 26 (4) After January 1, 1992, any change or addition to a
- 27 policy or annuity contract form for personal, family, or

- 1 household purposes, whether by indorsement, rider, or otherwise,
- 2 or a change or addition to a rider or indorsement form to such example of
- 3 policy or annuity contract form, which policy or annuity contract
- 4 form has not been previously approved under subsection (3), shall
- 5 be submitted for approval pursuant to subsection (3):
- 6 (5) Upon written notice to the insurer, the commissioner may
- 7 disapprove, withdraw approval or prohibit the issuance,
- 8 advertising, or delivery of any form to any person in this state
- 9 if it violates any provisions of this code, or contains inconsis-
- 10 tent, ambiguous, or misleading clauses, or contains exceptions
- 11 and conditions that unreasonably or deceptively affect the risk
- 12 purported to be assumed in the general coverage of the policy.
- 13 The notice shall specify the objectionable provisions or condi-
- 14 tions and state the reasons for the commissioner's decision. If
- 15 the form is legally in use by the insurer in this state, the
- 16 notice shall give the effective date of the commissioner's disap-
- 17 proval, which shall not be less than 30 days subsequent to the
- 18 mailing or delivery of the notice to the insurer. If the form is
- 19 not legally in use, then disapproval shall be effective
- 20 immediately.
- 21 (6) If a form is disapproved or approval is withdrawn under
- 22 the provisions of this -code ACT, the insurer shall be entitled
- 23 upon demand to a hearing before the commissioner or a deputy com-

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- 24 missioner within 30 days after the notice of disapproval or of
- 25 withdrawal of approval. -; and after AFTER the hearing, the
- 26 commissioner shall make findings of fact and law, and either

- 1 affirm, modify, or withdraw his or her original order or
- 2 decision.
- 3 (7) Any issuance, use, or delivery by an insurer of any form
- 4 without the prior approval of the commissioner as required by
- 5 subsection (1) or after withdrawal of approval as provided by
- 6 subsection (5) constitutes a separate violation for which the
- 7 commissioner may order the imposition of a civil penalty of
- 8 \$25.00 for each offense, but not to exceed the maximum penalty of
- 9 \$500.00 for any 1 series of offenses relating to any 1 basic
- 10 policy form, which penalty may be recovered by the attorney gen-
- 11 eral as provided in section 230.
- 12 (8) The filing requirements of this section shall not apply
- 13 to:
- 14 (a) Insurance against loss of or damage to:
- 15 (i) Imports, exports, or domestic shipments.
- 16 (ii) Bridges, tunnels, or other instrumentalities of trans-
- 17 portation and communication.
- 18 (iii) Aircraft and attached equipment.
- 19 (iv) Vessels and watercraft under construction or owned by
- 20 or used in a business or having a straight-line hull length of
- 21 more than 24 feet.
- (b) Insurance against loss resulting from liability, other
- 23 than worker's compensation or employers' liability arising out of
- 24 the ownership, maintenance, or use of:
- 25 (i) Imports, exports, or domestic shipments.
- 26 (ii) Aircraft and attached equipment.

- 1 (iii) Vessels and watercraft under construction or owned by
 2 or used in a business or having a straight-line hull length of
 3 more than 24 feet.
- 4 (c) Surety bonds other than fidelity bonds.
- (d) Policies, riders, indorsements, or forms of unique char-5 6 acter designed for and used with relation to insurance upon a 7 particular subject, or which relate to the manner of distribution 8 of benefits or to the reservation of rights and benefits under 9 life or disability insurance policies and are used at the request 10 of the individual policyholder, contract holder or certificate 11 holder. Beginning September 1, 1968, the commissioner by order 12 may exempt from the filing requirements of this section and sec-13 tions 2242, 3606, and 4430 for so long as he or she considers 14 proper any insurance document or form, except that portion of the 15 document or form that establishes a relationship between group 16 disability insurance and personal protection insurance benefits 17 subject to exclusions or deductibles pursuant to section 3109a, 18 as specified in the order to which this section practicably may 19 not be applied, or the filing and approval of which are consid-20 ered unnecessary for the protection of the public. Insurance 21 documents or forms providing medical payments or income replace-22 ment benefits, except that portion of the document or form that 23 establishes a relationship between group disability insurance and 24 personal protection insurance benefits subject to exclusions or 25 deductibles pursuant to section 3109a, exempt by order of the 26 commissioner from the filing requirements of this section and

- 1 sections 2242 and 3606 are considered approved by the
- 2 commissioner for purposes of section 3430.
- 3 (9) Every order made by the commissioner under the provi-
- 4 sions of this section shall be subject to court review as pro-
- 5 vided in section 244.
- 6 Sec. 2400. (1) Except with respect to worker's compensa-
- 7 tion insurance, the THE purpose of this chapter is to promote
- 8 the public welfare by regulating insurance rates to the end that
- 9 they shall not be excessive, inadequate, or unfairly discrimina-
- 10 tory, and to authorize and regulate cooperative action among
- 11 insurers in rate-making and -in other matters within the scope
- 12 of the insurance code. Nothing in this chapter is intended -(1)-
- 13 to prohibit or discourage reasonable competition. -, or (2) to
- 14 prohibit, or encourage except to the extent necessary to accom-
- 15 plish the aforementioned purpose, uniformity in insurance rates,
- 16 rating systems, rating plans, or practices. (2) With respect to
- 17 worker's compensation insurance, the THE purposes of this chap-
- 18 ter -are- ALSO INCLUDE:
- 19 (a) To protect PROTECTING policyholders and the public
- 20 against the adverse effects of excessive, inadequate, or unfairly
- 21 discriminatory rates.
- 22 (b) To promote PROMOTING price competition among insurers
- 23 writing worker's compensation insurance so as to encourage
- 24 rates which will result in the lowest possible rates consistent
- 25 with the benefits established in the worker's disability com-
- 26 pensation act of 1969, Act No. 317 of the Public Acts of 1969, as

- 1 amended, being sections 418.101 to 418.941 of the Michigan
- 2 Compiled Laws, and with maintaining the solvency of insurers.
- 3 (c) To provide PROVIDING regulatory controls and other
- 4 activity in the absence of competition.
- 5 (d) —To improve—IMPROVING the availability, fairness, and 6 reliability of —worker's compensation—insurance.
- 7 (2) ANTITRUST PROVISIONS IN THIS CHAPTER ARE NOT EXCLUSIVE
- 8 AND OTHER PROVISIONS PROVIDED BY LAW MAY APPLY.
- 9 (3) This chapter shall be liberally interpreted to carry
- 10 into effect the provisions of this section.
- 11 Sec. 2406. (1) Except in regard to worker's compensation
- 12 insurance, -every- EACH insurer shall file with the commissioner
- 13 every manual of classification, every manual of rules and rates,
- 14 every rating plan, and every modification of any of the foregoing
- 15 -which THAT it proposes to use. Every -such filing shall state
- 16 the proposed effective date -thereof OF THE FILING, and shall
- 17 indicate the character and extent of the coverage contemplated.
- 18 -When IF a filing is not accompanied by the information upon
- 19 which the insurer supports -such- THE filing, and the commis-
- 20 sioner does not have sufficient information to determine whether
- 21 -such THE filing meets the requirements of this chapter, the
- 22 commissioner shall within 10 days of -such THE filing give writ-
- 23 ten notice to -such THE insurer to furnish the information upon
- 24 which it supports -such THE filing. The information furnished
- 25 in support of a filing may include -(a) the experience or judg-
- 26 ment of the insurer -or rating organization making the filing,
- 27 -(b) its interpretation of any statistical data it relies upon,

- 1 -(c) the experience of other insurers, or rating
- 2 organizations, or (d) any other relevant factors. A filing
- 3 and any supporting information shall be open to public inspection
- 4 after the filing becomes effective.
- 5 (2) Except in regard to worker's compensation insurance AND
- 6 FOR FILINGS CONCERNING RATES, an insurer may satisfy its obliga-
- 7 tion to make -such filings by becoming a member of, or a sub-
- 8 scriber to, a licensed rating organization -which THAT makes
- 9 -such filings, and by filing with the commissioner a copy of its
- 10 authorization of the rating organization to make -such- filings
- 11 on its behalf. Nothing contained in this chapter shall be con-
- 12 strued as requiring any insurer to become a member of or a sub-
- 13 scriber to any rating organization.
- 14 (3) Every EACH insurer with regard to worker's compensa-
- 15 tion insurance in this state shall file with the commissioner all
- 16 rates and rating systems. Every insurer that insures worker's
- 17 compensation in this state on the effective date of this subsec-
- 18 tion shall file the rates not later than the effective date of
- 19 this subsection.
- 20 (4) Except as provided in subsection (3), the rates and
- 21 rating systems regarding worker's compensation insurance shall be
- 22 filed not later than the date the rates and rating systems are to
- 23 be effective. These filings shall be considered to meet the
- 24 requirements of this chapter unless and until the commissioner
- 25 disapproves a filing pursuant to section 2418.
- 26 (5) Each filing under subsections (3) and (4) shall be
- 27 accompanied by a certification by the insurer that, to the best

- 1 of its information and belief, the filing conforms to the
- 2 requirements of this chapter.
- 3 (6) AS A CONDITION OF MAINTAINING ITS CERTIFICATE OF AUTHOR-
- 4 ITY, AN INSURER SHALL NOT DO ANY OF THE FOLLOWING:
- 5 (A) HAVE ANY RATES FILED ON ITS BEHALF IN THIS STATE BY A
- 6 RATING ORGANIZATION.
- 7 (B) SHARE INFORMATION WITH ANY OTHER INSURER OR RATING ORGA-
- 8 NIZATION CONCERNING ESTABLISHING RATES OR RATING SYSTEMS.
- 9 (C) AGREE WITH ANY OTHER INSURER OR RATING ORGANIZATION TO
- 10 ADHERE TO OR USE ANY RATE, RATING PLAN, RATING SCHEDULE, RATING
- 11 RULE, OR UNDERWRITING RULE IN THIS STATE.
- 12 (D) MAKE AVAILABLE TO ANY OTHER INSURER OR RATING ORGANI-
- 13 ZATION INFORMATION ON ACTUARIAL PROJECTIONS, TRENDING FACTORS,
- 14 PROFITS, OR EXPENSES EXCEPT LOSS ADJUSTMENT EXPENSES.
- 15 Sec. 2430. (1) In lieu of the filing requirements of this
- 16 chapter and as an alternative method of filing, any AN insurer
- 17 or rating organization may file with the commissioner any A
- 18 manual of classification, rules, or rates, any rating plan and
- 19 every modification of any of the foregoing which THAT it pro-
- 20 poses to use, the filing to indicate the character and extent of
- 21 the coverage contemplated. IN LIEU OF THE FILING REQUIREMENTS OF
- 22 THIS CHAPTER AND AS AN ALTERNATIVE METHOD OF FILING, A RATING
- 23 ORGANIZATION MAY FILE WITH THE COMMISSIONER FOR AN INSURER A
- 24 MANUAL OF CLASSIFICATION, RULES, AND EVERY MODIFICATION OF ANY OF
- 25 THE FOREGOING, THE FILING TO INDICATE THE CHARACTER AND EXTENT OF
- 26 THE COVERAGE CONTEMPLATED. Every -such filing under this section
- 27 shall state the effective date thereof OF THE FILING, shall

- 1 take effect on -said THAT date, shall not be subject to any
- 2 waiting period requirements, and shall be -deemed CONSIDERED to
- 3 meet the requirements of section 2403 (1) (d). -(rate
- 4 standards). A filing and any supporting information shall be
- 5 open to public inspection, if the filing is not disapproved.
- 6 (2) At any time within -15 30 days from and after the date
- 7 of any such A filing UNDER SUBSECTION (1), the commissioner may
- 8 give written notice to the insurer or rating organization
- 9 making -such THE filing, specifying in what respect and to what
- 10 extent he OR SHE contends -such THE filing fails to comply with
- 11 the requirements of section 2403 (1) (d) and fixing a date for
- 12 hearing not less than 10 days from the date of THE mailing of
- 13 -such THE notice. At -such THE hearing the factors specified
- 14 in section 2406 (1) shall be considered. If the commissioner
- 15 after hearing finds that the filing does not comply with the pro-
- 16 visions of this chapter, he OR SHE may issue his AN order
- 17 determining wherein WHERE and to what extent such THE filing
- 18 is -deemed to be improper and fixing a date, -thereafter,
- 19 within a reasonable time, after which -such THE filing shall no
- 20 longer be effective. Any AN order of disapproval under this
- 21 section must be entered within 30 days of the date of the filing
- 22 affected.
- 23 (3) In the event that no IF A notice of hearing shall be
- 24 IS NOT issued within 15 days from the date of -any such A filing
- 25 UNDER SUBSECTION (1), the filing shall be -deemed CONSIDERED to
- 26 be approved. If -such- THE filing -shall be- IS disapproved, the
- 27 insuring provisions of -any A contract or policy issued prior to

- 1 the time the order becomes effective shall not be affected. But
- 2 if the commissioner disapproves such THE filing as not being in
- 3 compliance with section 2403 (1) (d), (rate standards), he OR
- 4 SHE may order an adjustment of the premium to be made with the
- 5 policyholder either by refund or collection of additional premi-
- 6 um, if the amount is substantial and equals or exceeds the cost
- 7 of making the adjustment. The commissioner may thereafter review
- 8 any such filing in the manner provided in sections 2418 and 2420;
- 9 but if so reviewed, no adjustment of premium may be ordered.
- 10 Sections 2406 (2) (filing may be made by rating organization),
- 11 2408 (1) (commissioner shall review filing as soon as reasonably
- 12 possible), and 2412 (insurer must adhere to filing) SECTIONS
- 13 2406(2), 2408(1), AND 2412 shall be applicable to filings made
- 14 under this section.
- 15 Sec. 2436. (1) A corporation, an association, a partner-
- 16 ship, or an individual, whether located within or outside this
- 17 state, may -make application to APPLY WITH the commissioner for
- 18 a license as a rating organization to make rates and insurance
- 19 contract forms for the kinds of insurance or subdivisions there-
- 20 of, except for worker's compensation insurance, as are specified
- 21 in its application and shall file with the application all of the
- 22 following:
- 23 (a) A copy of its constitution, its articles of agreement or
- 24 association, or its certificate of incorporation, and of its
- 25 bylaws and rules governing the conduct of its business.
- 26 (b) A list of its members and subscribers.

- 1 (c) The name and address of a resident of this state upon 2 whom notices or orders of the commissioner or process affecting 3 the rating organization may be served.
- 4 (d) A statement of its qualifications as a rating 5 organization.
- 6 (2) If the commissioner finds that the applicant is compe7 tent, trustworthy, and otherwise qualified to act as a rating
 8 organization and that its constitution, articles of agreement or
 9 association, or certificate of incorporation, and its bylaws and
 10 rules governing the conduct of its business conform to the
 11 requirements of law, he or she shall issue a license specifying
 12 the kinds of insurance or subdivisions thereof for which the
 13 applicant is authorized to act as a rating organization. Every
 14 application shall be granted or denied in whole or in part by the
 15 commissioner within 60 days of the date of its filing with the
 16 commissioner.
- 17 (3) The fee for the license shall be \$25.00 which shall be 18 in lieu of all other fees, licenses, or taxes imposed by the 19 state or any political subdivision of the state.
- (4) Licenses issued pursuant to this section shall remain in 21 force for 3 years from date of issuance unless suspended or 22 revoked by the commissioner, after hearing upon notice, pursuant 23 to section 2478, in the event. If the rating organization ceases 24 to meet the requirements of this section.
- 25 (5) Every rating organization shall notify the commissioner
 26 promptly of every change in any of the following:

- 1 (a) Its constitution, its articles of agreement or
- 2 association, or its certificate of incorporation, and its bylaws
- 3 and rules governing the conduct of its business.
- 4 (b) Its list of members and subscribers.
- 5 (c) The name and address of the resident of this state des-
- 6 ignated by it upon whom notices or orders of the commissioner or
- 7 process affecting the rating organization may be served.
- 8 Sec. 2438. (1) Subject to REASONABLE rules and regulations
- 9 which have been approved by the commissioner, as reasonable,
- 10 each rating organization shall permit -any AN insurer, not a
- 11 member, to be a subscriber to its rating services for any kind of
- 12 insurance or subdivision thereof OF INSURANCE for which it is
- 13 authorized to act as a rating organization. Notice of proposed
- 14 changes in -such THE rules and regulations shall be given to
- 15 subscribers. Each rating organization shall furnish its rating
- 16 services without discrimination to its members and subscribers.
- 17 (2) The reasonableness of any rule or regulation in its
- 18 application to subscribers, or the refusal of any rating organi-
- 19 zation to admit an insurer as a subscriber, -shall, at the
- 20 request of any A subscriber or any such insurer, SHALL be
- 21 reviewed by the commissioner at a hearing held upon at least 10
- 22 days' written notice to -such THE rating organization and to
- 23 -such- THE subscriber or insurer. If the commissioner finds that
- 24 -such THE rule or regulation is unreasonable in its application
- 25 to subscribers, he OR SHE shall order that -such- THE rule or
- 26 regulation shall not be applicable to subscribers.

(3) If the rating organization fails to grant or reject an 2 insurer's application for subscribership within 30 days after it 3 was made, the insurer may request a review by the commissioner as 4 if the application had been rejected. If the commissioner finds 5 that the insurer has been refused admittance to the rating orga-6 nization as a subscriber without justification, -he THE 7 COMMISSIONER shall order the rating organization to admit the 8 insurer as a subscriber. If he THE COMMISSIONER finds that the 9 action of the rating organization was justified, -he- THE 10 COMMISSIONER shall make an order affirming its action. 11 Sec. 2458. Every rating organization and every EACH 12 insurer, which makes its own rates shall, within a reasonable 13 time after receiving written request therefor and upon payment of 14 -such A reasonable charge as it may make, SHALL furnish to -any-15 AN insured affected by a rate made by it, or to the INSURED'S 16 authorized representative, of the insured, all pertinent infor-18 EACH insurer which makes its own rates shall provide within 19 this state reasonable means -whereby any FOR A person aggrieved 20 by the application of -its- THE INSURER'S rating system -may TO 21 be heard, in person or by his or her authorized representative, 22 on his or her written request to review the manner in which the 23 rating system has been applied in connection with the insurance 24 afforded to him or her. If the rating organization or insurer 25 fails to grant or reject the request within 30 days after it is 26 made, the applicant may proceed in the same manner as if his or 27 her application had been rejected. Any A party affected by the

- 1 action of the -rating organization or insurer on SUCH A request
- 2 may APPEAL, within 30 days after written notice of the action,
- 3 -appeal to the commissioner, who, after a hearing held upon not
- 4 less than 10 days' written notice to the appellant and to the
- 5 -rating organization or insurer, may affirm or reverse the
- 6 action. A person who requests a hearing before the commissioner
- 7 pursuant to this section may be represented at the hearing by an
- 8 attorney. A person, other than an individual, that requests a
- 9 hearing before the commissioner pursuant to this section may also
- 10 be represented by an officer or employee of that person. An
- 11 individual who requests a hearing before the commissioner pursu-
- 12 ant to this section may also be represented by a relative of the
- 13 individual.
- 14 Sec. 2462. (1) Every group, association, or other organi-
- 15 zation of insurers, whether located within or outside this state,
- 16 which assists insurers -which make their own filings or rating
- 17 organizations in rate making, by the collection and furnishing
- 18 of loss or expense statistics, or by the submission of
- 19 recommendations, but which does not make filings under this
- 20 chapter, shall be known as an advisory organization.
- 21 (2) Every advisory organization shall file with the commis-
- 22 sioner ALL OF THE FOLLOWING:
- 23 (a) A copy of its constitution, its articles of agreement or
- 24 association or its certificate of incorporation and of its
- 25 bylaws, rules, and regulations governing its activities. —
- 26 (b) A list of its members.

- 1 (c) The name and address of a resident of this state upon
- 2 whom notices or orders of the commissioner or process issued at
- 3 his direction may be served. and
- 4 (d) An agreement that the commissioner may examine such
- 5 THE advisory organization in accordance with the provisions of
- 6 section 2468.
- 7 (3) If, after a hearing, the commissioner finds that the
- 8 furnishing of -such information or assistance involves any act
- 9 or practice -which THAT is unfair or unreasonable or otherwise
- 10 inconsistent with the provisions of this chapter, he OR SHE may
- 11 issue a written order specifying in what respects -such- THE act
- 12 or practice is unfair or unreasonable or otherwise inconsistent
- 13 with the provisions of this chapter, and requiring the discon-
- 14 tinuance of -such THE act or practice.
- 15 (4) No AN insurer which makes its own filings nor any
- 16 rating organization shall NOT support its filings by statistics
- 17 or adopt rate making recommendations, furnished to it by an
- 18 advisory organization -which THAT has not complied with this
- 19 section or with an order of the commissioner involving -such THE
- 20 statistics or recommendations issued under subsection (3). of
- 21 this section. If the commissioner finds such THE insurer or
- 22 rating organization to be in violation of this subsection he OR
- 23 SHE may issue an order requiring the discontinuance of -such THE
- 24 violation.
- 25 Sec. 2472. (1) The commissioner shall promulgate reasonable
- 26 rules and statistical plans, reasonably adapted to each of the
- 27 rating systems on file with him OR HER, which may be modified

1 from time to time and which shall be used thereafter to the 2 extent applicable to its particular rating system or systems, by 3 each insurer in the recording and reporting of its loss and coun-4 trywide expense experience, in order that the experience of all 5 insurers may be made available at least annually in -such- A form 6 and detail as may be necessary to aid -him- THE COMMISSIONER in 7 determining whether rating systems comply with the standards set 8 forth in section 2403. -Such- THE rules and plans may also pro-9 vide for the recording and reporting of expense experience items 10 -which THAT are specially applicable to this state and are not 11 susceptible of determination by a prorating of countrywide In promulgating -such rules and plans, the 12 expense experience. 13 commissioner shall give due consideration to the rating systems 14 on file with him OR HER and, in order that -such- THE rules and 15 plans may be as uniform as is practicable among the several 16 states, to the rules and to the form of the plans used for -such-17 rating systems in other states. -No- AN insurer shall NOT be 18 required to record or report its loss experience on a classifica-19 tion basis that is inconsistent with the rating system filed by 20 it. and no AN insurer shall NOT be required to record or 21 report its loss or expense experience on any basis or statistical 22 plan that differs from that which is regularly employed and main-23 tained in the usual course of such THE insurer's business, or 24 to any rating organization or agency of which it is not a member The commissioner may designate ! or more rating 25 or subscriber. 26 organizations or other agencies to assist him OR HER in gathering 27 such experience and making compilations thereof, and -such THE

- 1 compilations shall be made available, subject to reasonable rules
- 2 promulgated by the commissioner, to insurers and rating
- 3 organizations.
- 4 (2) Reasonable rules and plans may be promulgated by the
- 5 commissioner for the interchange of data necessary for the appli-
- 6 cation of rating plans.
- 7 (3) In order to further uniform administration of rate regu-
- 8 latory laws, the commissioner and -every EACH insurer -and
- 9 rating organization may exchange information and experience data
- 10 with insurance supervisory officials -, insurers and rating
- 11 organizations in other states and may consult with them with
- 12 respect to <u>rate making and</u> the application of rating systems.
- 13 IN ADDITION, EACH INSURER AND EACH RATING ORGANIZATION MAY
- 14 EXCHANGE HISTORICAL LOSS DATA.
- 15 Sec. 2600. (1) The purpose of this chapter is to promote
- 16 the public welfare by regulating insurance rates to the end that
- 17 they shall not be excessive, inadequate, or unfairly discrimina-
- 18 tory, and to -authorize and regulate cooperative action among
- 19 insurers in rate making and in other matters within the scope of
- 20 the insurance code. Nothing in this chapter is intended -(1)- to
- 21 prohibit or discourage reasonable competition. -, or (2) to pro-
- 22 hibit, or encourage except to the extent necessary to accomplish
- 23 the aforementioned purpose, uniformity in insurance rates, rating
- 24 systems, rating plans or practices.
- 25 (2) Conformity with this chapter shall not be deemed to be
- 26 CONSIDERED a violation of section 2075. (compacts to restrain

- 1 competition prohibited) ANTITRUST PROVISIONS ARE NOT EXCLUSIVE
- 2 AND OTHER PROVISIONS PROVIDED BY LAW MAY APPLY.
- 3 (3) This chapter shall be liberally interpreted to carry
- 4 into effect the provisions of this section.
- 5 Sec. 2606. (4) Every EACH insurer shall file with the
- 6 commissioner, except as to inland marine risks which by general
- 7 custom of the business are not written according to manual rates
- 8 or rating plans, every manual, minimum, class rate, rating sched-
- 9 ule or rating plan, and every other rating rule, and every modi-
- 10 fication of any of the foregoing which THAT it proposes to
- 11 use. Every such filing shall state the proposed effective date
- 12 -thereof OF THE FILING, and shall indicate the character and
- 13 extent of the coverage contemplated.
- 14 (2) When IF a filing is not accompanied by the information
- 15 upon which the insurer supports -such THE filing, and the com-
- 16 missioner does not have sufficient information to determine
- 17 whether -such THE filing meets the requirements of this chapter,
- 18 -he- THE COMMISSIONER shall require -such- THE insurer to furnish
- 19 the information upon which it supports -such THE filing and -in-
- 20 such event the waiting period shall commence as of the date
- 21 -such THE information is furnished. The information furnished
- 22 in support of a filing may include -(a) the experience or judg-
- 23 ment of the insurer or rating organization making the filing,
- 24 (b) its interpretation of any statistical data it relies upon,
- 25 (c) the experience of other insurers, or rating
- 26 organizations, or (d) any other relevant factors.

- 1 (3) A filing and any supporting information shall be open to 2 public inspection after the filing becomes effective.
- 3 (4) Specific inland marine rates on risks specially rated,
- 4 made by a rating organization, shall be filed with the
- 5 commissioner.
- 6 (4) -(5) An EXCEPT FOR FILINGS CONCERNING RATES, AN insurer
- 7 may satisfy its obligation to make -such filings by becoming a
- 8 member of, or a subscriber to, a licensed rating organization
- 9 -which THAT makes -such filings, and by filing with the commis-
- 10 sioner a copy of its authorization of the rating organization to
- 11 make -such filings on its behalf. Nothing contained in this
- 12 chapter shall be construed as requiring any insurer to become a
- 13 member of or a subscriber to any rating organization.
- 14 (5) AS A CONDITION OF MAINTAINING ITS CERTIFICATE OF AUTHOR-
- 15 ITY, AN INSURER SHALL NOT DO ANY OF THE FOLLOWING:
- 16 (A) HAVE ANY RATES FILED ON ITS BEHALF IN THIS STATE BY A
- 17 RATING ORGANIZATION.
- 18 (B) SHARE INFORMATION WITH ANY OTHER INSURER OR RATING ORGA-
- 19 NIZATION CONCERNING ESTABLISHING RATES OR RATING SYSTEMS.
- 20 (C) AGREE WITH ANY OTHER INSURER OR RATING ORGANIZATION TO
- 21 ADHERE TO OR USE ANY RATE, RATING PLAN, RATING SCHEDULE, RATING
- 22 RULE, OR UNDERWRITING RULE IN THIS STATE.
- 23 (D) MAKE AVAILABLE TO ANY OTHER INSURER OR RATING ORGANI-
- 24 ZATION INFORMATION ON ACTUARIAL PROJECTIONS, TRENDING FACTORS,
- 25 PROFITS, OR EXPENSES EXCEPT LOSS ADJUSTMENT EXPENSES.

- 1 Sec. 2608. (1) The commissioner shall review filings as
- 2 soon as reasonably possible after they have been made in order to
- 3 determine whether they meet the requirements of this chapter.
- 4 (2) Subject to the exception specified in subsection (3) of
- 5 this section, each EACH filing shall be on file for a waiting
- 6 period of 15 days before it becomes effective, which period may
- 7 be extended by the commissioner for an additional period not to
- 8 exceed 15 days if -he- THE COMMISSIONER gives written notice
- 9 within -such THE waiting period to the insurer or rating organi-
- 10 zation -which THAT made the filing that he OR SHE needs such
- 11 additional time for the consideration of -such THE filing. Upon
- 12 written application by -such THE insurer or rating organization,
- 13 the commissioner may authorize a filing which THAT he OR SHE
- 14 has reviewed to become effective before the expiration of the
- 15 waiting period or any extension -thereof OF THE WAITING PERIOD.
- 16 A filing shall be -deemed CONSIDERED to meet the requirements of
- 17 this chapter unless disapproved by the commissioner within the
- 18 waiting period or any extension -thereof OF THE WAITING PERIOD.
- 19 (3) Specific inland marine rates on risks specially rated
- 20 by a rating organization shall become effective when filed and
- 21 shall be deemed to meet the requirements of this chapter until
- 22 such time as the commissioner reviews the filing and so long
- 23 thereafter as the filing remains in effect.
- Sec. 2616. -(+) If within the waiting period or any exten-
- 25 sion -thereof OF THE WAITING PERIOD as provided in section
- 26 2608(2), the commissioner finds that a filing does not meet the
- 27 requirements of this chapter, he OR SHE shall send to the insurer

- 1 or rating organization which THAT made such THE filing --
- 2 written notice of disapproval of -such THE filing specifying
- 3 therein in what respects he finds such HOW THE filing fails to
- 4 meet the requirements of this chapter and stating that -such THE
- 5 filing shall not become effective.
- 6 (2) If within 30 days after a specific inland marine rate
- 7 on a risk specially rated by a rating organization, subject to
- 8 section 2608 (3) has become effective, the commissioner finds
- 9 that such filing does not meet the requirements of this chapter,
- 10 he shall send to the rating organization which made such filing
- 11 written notice of disapproval of such filing specifying therein:
- 12 in what respects he finds that such filing fails to meet the
- 13 requirements of this chapter and stating when, within a reason
- 14 able period thereafter, such filing shall be deemed no longer
- 15 effective. Said disapproval shall not affect any contract made
- 16 or issued prior to the expiration of the period set forth in said
- 17 notice.
- 18 Sec. 2628. (1) In lieu of the filing requirements of this
- 19 chapter and as an alternative method of filing, -any AN insurer
- 20 or rating organization may file with the commissioner any A
- 21 manual of classification, rules, or rates, any rating plan and
- 22 every modification of any of the foregoing which THAT it pro-
- 23 poses to use, the filing to indicate the character and extent of
- 24 the coverage contemplated. IN LIEU OF THE FILING REQUIREMENTS OF
- 25 THIS CHAPTER AND AS AN ALTERNATIVE METHOD OF FILING, A RATING
- 26 ORGANIZATION MAY FILE WITH THE COMMISSIONER FOR AN INSURER A
- 27 MANUAL OF CLASSIFICATION, RULES, AND EVERY MODIFICATION OF ANY OF

- 1 THE FOREGOING, THE FILING TO INDICATE THE CHARACTER AND EXTENT OF
- 2 THE COVERAGE CONTEMPLATED. Every -such- filing under this section
- 3 shall state the effective date -thereof OF THE FILING, shall
- 4 take effect on -said THAT date, shall not be subject to any
- 5 waiting period requirements, and shall be -deemed CONSIDERED to
- 6 meet the requirements of subdivision (d) of subsection (1) of
- 7 section 2603 (rate standards) SECTION 2603(1)(D). A filing and
- 8 any supporting information shall be open to public inspection, if
- 9 the filing is not disapproved.
- 10 (2) At any time within 15 days from and after the date of
- 11 -any such A filing UNDER SUBSECTION (1), the commissioner may
- 12 give written notice to the insurer or rating organization
- 13 making -such THE filing, specifying in what respect and to what
- 14 extent he OR SHE contends -such THE filing fails to comply with -
- 15 the requirements of subdivision (d) of subsection (1) of section
- 16 2603 SECTION 2603(1)(D) and fixing a date for hearing not less
- 17 than 10 days from the date of THE mailing of -such- THE notice.
- 18 At -such THE hearing the factors specified in -subsection (2) of
- 19 section 2606 SECTION 2606(2) shall be considered. If the com-
- 20 missioner after hearing finds that the filing does not comply
- 21 with the provisions of this chapter, he OR SHE may issue -his AN
- 22 order determining wherein WHERE and to what extent such THE
- 23 filing is deemed to be improper and fixing a date,
- 24 thereafter, within a reasonable time, after which such THE
- 25 filing shall no longer be effective. -Any- AN order of disap-
- 26 proval under this section must be entered within 30 days of the
- 27 date of the filing affected.

(3) In the event that no IF A notice of hearing shall be 2 IS NOT issued within 15 days from the date of any such A filing 3 UNDER SUBSECTION (1), the filing shall be -deemed CONSIDERED to 4 be approved. If -such THE filing -shall be IS disapproved, the 5 insuring provisions of -any A contract or policy issued prior to 6 the time the order becomes effective shall not be affected. 7 if the commissioner disapproves -such THE filing as not being in 8 compliance with subdivision (d) of subsection (1) of section 9 2603 (rate standards) SECTION 2603(1)(D), he OR SHE may order an 10 adjustment of the premium to be made with the policyholder either 11 by refund or collection of additional premium, if the amount is 12 substantial and equals or exceeds the cost of making the 13 adjustment. The commissioner may thereafter review any such 14 filing in the manner provided in sections 2618 and 2620, but if 15 so reviewed, no adjustment of premium may be ordered. 16 Subsection (5) of section 2606 (filing may be made by rating 17 organization), subsection (1) of section 2608 (commissioner shall 18 review filing as soon as reasonably possible), and 2612 (insurer 19 must adhere to filing) SECTIONS 2606(4), 2608(1), AND 2612 shall 20 be applicable to filings made under this section. 21 Sec. 2630. (1) A corporation, an unincorporated associa-22 tion, a partnership, or an individual, whether located within or 23 outside this state, may make application to APPLY WITH the com-24 missioner for license as a rating organization to make rates

25 and insurance contract forms for such THE kinds of insurance,

26 or subdivision or class of risk or a part or combination thereof

- 1 as are specified in its application and shall file therewith
 2 WITH THE APPLICATION ALL OF THE FOLLOWING:
- 3 (a) A copy of its constitution, its articles of agreement or
- 4 association or its certificate of incorporation, and of its
- 5 bylaws and rules governing the conduct of its business.
- 6 (b) A list of its members and subscribers.
- 7 (c) The name and address of a resident of this state upon
- 8 whom notices or orders of the commissioner or process affecting
- 9 -such THE rating organization may be served.
- 10 (d) A statement of its qualifications as a rating
- 11 organization.
- 12 (2) If the commissioner finds that the applicant is compe-
- 13 tent, trustworthy, and otherwise qualified to act as a rating
- 14 organization and that its constitution, articles of agreement or
- 15 association, or certificate of incorporation, and its bylaws and
- 16 rules governing the conduct of its business conform to the
- 17 requirements of law, he OR SHE shall issue a license specifying
- 18 the kinds of insurance, or subdivision or class of risk or part
- 19 or combination thereof for which the applicant is authorized to
- 20 act as a rating organization. Every such application APPLICANT
- 21 shall be granted or denied in whole or in part by the commis-
- 22 sioner within 60 days of the date of its filing with -him THE
- 23 COMMISSIONER.
- 24 (3) Licenses issued pursuant to this section shall remain in
- 25 effect for 3 years unless sooner suspended or revoked by the
- 26 commissioner.

- 1 (4) The fee for the license shall be \$25.00.
- 2 (5) Licenses issued pursuant to this section may be
- 3 suspended or revoked by the commissioner, after hearing upon
- 4 notice, in the event IF the rating organization ceases to meet
- 5 the requirements of this section.
- 6 (6) Every rating organization shall notify the commissioner
- 7 promptly of every change in ANY OF THE FOLLOWING:
- 8 (a) its ITS constitution, its articles of agreement or
- 9 association, or its certificate of incorporation, and its bylaws
- 10 and rules governing the conduct of its business.
- (b) its ITS list of members and subscribers. and
- 12 (c) the THE name and address of the resident of this state
- 13 designated by it upon whom notices or orders of the commissioner
- 14 or process affecting -such- THE rating organization may be
- 15 served.
- 16 Sec. 2636. (1) Subject to REASONABLE rules and regulations
- 17 which have been approved by the commissioner, as reasonable,
- 18 each rating organization shall permit -any AN insurer, not a
- 19 member, to be a subscriber to its rating services for any kind of
- 20 insurance, subdivision, or class of risk or a part or combination
- 21 thereof for which it is authorized to act as a rating
- 22 organization. Notice of proposed changes in -such THE rules and
- 23 regulations shall be given to subscribers. Each rating organi-
- 24 zation shall furnish its -rating services without discrimination
- 25 to its members and subscribers.
- (2) The reasonableness of any rule or regulation in its.
- 27 application to subscribers, or the refusal of any rating

- 1 organization to admit an insurer as a subscriber, -shall, at the
- 2 request of any A subscriber or any such insurer, SHALL be
- 3 reviewed by the commissioner at a hearing held upon at least 10 10
- 4 days' written notice to -such- THE rating organization and to
- 5 -such- THE subscriber or insurer. If the commissioner finds that
- 6 -such THE rule or regulation is unreasonable in its application
- 7 to subscribers, he OR SHE shall order that -such THE rule or
- 8 regulation shall not be applicable to subscribers.
- 9 (3) If the rating organization fails to grant or reject an
- 10 insurer's application for subscribership within 30 days after it
- 11 was made, the insurer may request a review by the commissioner as
- 12 if the application had been rejected. If the commissioner finds
- 13 that the insurer has been refused admittance to the rating orga-
- 14 nization as a subscriber without justification, -he- THE
- 15 COMMISSIONER shall order the rating organization to admit the
- 16 insurer as a subscriber. If -he- THE COMMISSIONER finds that the
- 17 action of the rating organization was justified, he THE
- 18 COMMISSIONER shall make an order affirming its action.
- 19 Sec. 2652. Every rating organization and every insurer
- 20 which makes its own rates shall EACH INSURER, within a reason-
- 21 able time after receiving written request therefor and upon pay-
- 22 ment of -such A reasonable charge as it may make, SHALL furnish
- 23 to any AN insured affected by a rate made by it, or to the
- 24 INSURED'S authorized representative, of such insured, all per-
- 25 tinent information as to such THE rate. Every rating organi-
- 26 zation and every insurer which makes its own rates EACH INSURER
- 27 shall provide within this state reasonable means whereby any

- 1 FOR A person aggrieved by the application of its THE INSURER'S
- 2 rating system -may TO be heard, in person or by his OR HER
- 3 authorized representative, on his OR HER written request to
- 4 review the manner in which -such THE rating system has been
- 5 applied in connection with the insurance afforded him OR HER. If
- 6 the -rating organization or insurer fails to grant or reject
- 7 -such THE request within 30 days after it is made, the applicant
- 8 may proceed in the same manner as if his OR HER application had
- 9 been rejected. Any A party affected by the action of such
- 10 rating organization or such AN insurer on such A request may
- 11 APPEAL, within 30 days after written notice of -such THE action,
- 12 -appeal to the commissioner, who, after a hearing held upon not
- 13 less than 10 days' written notice to the appellant and to such
- 14 rating organization or THE insurer, may affirm or reverse such
- 15 THE action.
- 16 Sec. 2654. (1) Every group, association, or other organi-
- 17 zation of insurers, whether located within or outside this state,
- 18 which THAT assists insurers which make their own filings or
- 19 rating organizations in rate making, by the collection and fur-
- 20 nishing of loss or expense statistics, or by the submission of
- 21 recommendations, but which does not make filings under this
- 22 chapter, shall be known as an advisory organization.
- (2) Every advisory organization shall file with the
- 24 commissioner:
- 25 (a) A copy of its constitution, its articles of agreement or
- 26 association or its certificate of incorporation, and of its
- 27 bylaws, rules, and regulations governing its activities. -

- 1 (b) A list of its members.
- 2 (c) The name and address of a resident of this state upon
- 3 whom notices or orders of the commissioner or process issued at
- 4 his OR HER direction may be served. -, and
- 5 (d) An agreement that the commissioner may examine such
- 6 THE advisory organization in accordance with the provisions of
- 7 section 2662.
- 8 (3) If, after a hearing, the commissioner finds that the
- 9 furnishing of -such information or assistance involves any act
- 10 or practice -which THAT is unfair or unreasonable or otherwise
- 11 inconsistent with the provisions of this chapter, he OR SHE may
- 12 issue a written order specifying in what respects -such- THE act --
- 13 or practice is unfair or unreasonable or otherwise inconsistent
- 14 with the provisions of this chapter, and requiring the discon-
- 15 tinuance of -such THE act or practice.
- 16 (4) No AN insurer which makes its own filings nor any
- 17 rating organization shall NOT support its filings by statistics
- 18 or adopt rate making recommendations, furnished to it by an
- 19 advisory organization which THAT has not complied with this
- 20 section or with an order of the commissioner involving -such THE
- 21 statistics -or recommendations issued under subsection (3). of
- 22 this section. If the commissioner finds such THE insurer or
- 23 rating organization to be in violation of this subsection, he OR
- 24 SHE may issue an order requiring the discontinuance of -such- THE
- 25 violation.
- Sec. 2664. (1) The commissioner shall promulgate reasonable
- 27 rules and statistical plans, reasonably adapted to each of the

- 1 rating systems on file with him OR HER, which may be modified
- 2 from time to time and which shall be used thereafter by each
- 3 insurer in the recording and reporting of its loss and country-
- 4 wide expense experience, in order that the experience of all
- 5 insurers may be made available at least annually in such form and
- 6 detail as may be necessary to aid -him THE COMMISSIONER in
- 7 determining whether rating systems comply with the standards set
- 8 forth in section 2603. -Such THE rules and plans may also pro-
- 9 vide for the recording and reporting of expense experience items
- 10 -which THAT are specially applicable to this state and are not
- 11 susceptible of determination by a prorating of countrywide
- 12 expense experience. In promulgating -such rules and plans, the
- 13 commissioner shall give due consideration to the rating systems
- 14 on file with him OR HER and, in order that -such- THE rules and
- 15 plans may be as uniform as is practicable among the several
- 16 states, to the rules and to the form of the plans used for -such-
- 17 rating systems in other states. No AN insurer shall NOT be
- 18 required to record or report its loss experience on a classifica-
- 19 tion basis that is inconsistent with the rating system filed by
- 20 it. The commissioner may designate 1 or more rating organi-
- 21 zations or other agencies to assist him OR HER in gathering such
- 22 experience and making compilations thereof, and -such- THE compi-
- 23 lations shall be made available, subject to reasonable rules
- 24 promulgated by the commissioner, to insurers and rating
- 25 organizations.

- 1 (2) Reasonable rules and plans may be promulgated by the
- 2 commissioner for the interchange of data necessary for the
- 3 application of rating plans.
- 4 (3) In order to further uniform administration of rate requ-
- 5 latory laws, the commissioner and -every EACH insurer and
- 6 rating organization may exchange information and experience data
- 7 with insurance supervisory officials -, insurers and rating
- 8 organizations in other states and may consult with them with
- 9 respect to rate making and the application of rating systems.
- 10 IN ADDITION, EACH INSURER AND EACH RATING ORGANIZATION MAY
- 11 EXCHANGE HISTORICAL LOSS DATA.
- 12 Sec. 2930. (1) The premium for basic property insurance of
- 13 any risk by the pool shall be equal to the rate for identical
- 14 insurance established by the principal rating organization for
- 15 identical insurance within this state plus a uniform surcharge
- 16 approved by the commissioner. (2) The pool shall establish
- 17 rates for any basic property insurance. which is without rates
- 18 established by a principal rating organization or which the pool,
- 19 with the approval of the commissioner, determines should be oth-
- 20 erwise rated in order to better effectuate the purposes of this
- 21 chapter. The pool shall file with the commissioner for his or
- 22 her approval each rate and each policy form to be issued by it.
- 23 The pool, acting as agent for participating members, shall file
- 24 policy forms for basic property insurance to be issued by partic-
- 25 ipating members under the provisions of this chapter. Rates and
- 26 policy forms shall be filed in accordance with such provisions of
- 27 this chapter as the commissioner designates.

- 1 Sec. 3020. (1) A policy of casualty insurance, except
- 2 worker's compensation, including all classes of motor vehicle
- 3 coverage, shall not be issued or delivered in this state by an
- 4 insurer authorized to do business in this state for which a pre-
- 5 mium or advance assessment is charged, unless the policy contains
- 6 the following provisions:
- 7 (a) That the policy may be canceled at any time at the
- 8 request of the insured, in which case the insurer shall refund
- 9 the excess of paid premium or assessment above the pro rata rates
- 10 for the expired time, except as otherwise provided in subsections
- 11 (2) and (3).
- (b) That the policy may be canceled at any time by the
- 13 insurer by mailing to the insured at the insured's address last
- 14 known to the insurer or an authorized agent of the insurer, with
- 15 postage fully prepaid, a not less than 10 days' written notice of
- 16 cancellation with or without tender of the excess of paid premium
- 17 or assessment above the pro rata premium for the expired time.
- (c) That the minimum earned premium on any policy canceled
- 19 pursuant to this subsection, other than automobile insurance as
- 20 defined in section 2102(2)(a) and (b), shall not be less than the
- 21 pro rata premium for the expired time or \$25.00, whichever is
- 22 greater.
- 23 (2) An insurer may file a rule with the commissioner provid-
- 24 ing for a minimum retention of premium for automobile insurance
- 25 as defined in section 2102(2)(a) and (b). The rule shall
- 26 describe the circumstances under which the retention shall be
- 27 applied and shall set forth the amount to be retained, which

- 1 shall be subject to the approval of the commissioner. The rule
- 2 shall include, but need not be limited to, the following
- 3 provisions:
- 4 (a) That a minimum retention shall be applied only when the
- 5 amount exceeds the amount which would have been retained had the
- 6 policy been canceled on a pro rata basis.
- 7 (b) That a minimum retention shall not apply to renewal
- 8 policies.
- 9 (c) That a minimum retention shall not apply when IF a
- 10 policy is canceled for the following reasons:
- 11 (i) The insured is no longer required to maintain security
- 12 pursuant to section 3101(1).
- (ii) The insured has replaced the automobile insurance
- 14 policy being canceled with an automobile insurance policy from
- 15 another insurer and provides proof of the replacement coverage to
- 16 the canceling insurer.
- 17 (3) An insurer may provide for a short rate premium for
- 18 insurance on a motorcycle, watercraft, off-road vehicle, or
- 19 snowmobile. As used in this subsection:
- (a) "Motorcycle" means that term as defined in section
- 21 3101.
- 22 (b) "Off-road vehicle" means an ORV as defined in section 1
- 23 of Act No. 319 of the Public Acts of 1975, being section 257.1601
- 24 of the Michigan Compiled Laws.
- 25 (c) "Snowmobile" means that term as defined in section 1 of
- 26 Act No. 74 of the Public Acts of 1968, being section 257.1501 of
- 27 the Michigan Compiled Laws.

- 1 (d) "Watercraft" means that term as defined in section 1(1)
- 2 of Act No. 160 of the Public Acts of 1976, being section 281.1201
- 3 of the Michigan Compiled Laws.
- 4 (4) Cancellation SHALL NOT BE EFFECTIVE UNTIL AFTER THE
- 5 NOTICE as prescribed in this section HAS EXPIRED AND THE
- 6 CANCELLATION shall be without prejudice to any claim originating
- 7 before the cancellation. The mailing of notice shall be prima
- 8 facie proof of notice. Delivery of written notice shall be
- 9 equivalent to mailing.
- 10 (5) A notice of cancellation, including a cancellation
- 11 notice under section 3224, shall be accompanied by a statement
- 12 that the insured shall not operate or permit the operation of the
- 13 vehicle to which notice of cancellation is applicable, or operate
- 14 any other vehicle, unless the vehicle is insured as required by
- 15 law.
- 16 (6) An insurer who wishes to provide for a short rate pre-
- 17 mium under subsection (3) shall file with the commissioner pursu-
- 18 ant to chapter 24 or 26 a rule establishing a short rate
- 19 premium. The rule shall describe the circumstances under which
- 20 the short rate shall be applied and shall set forth the amount or
- 21 percentage to be retained.
- 22 SEC. 3105A. AN INSURER LIABLE TO PAY PERSONAL PROTECTION
- 23 INSURANCE BENEFITS UNDER THIS CHAPTER HAS A DUTY TO DEAL FAIRLY
- 24 AND IN GOOD FAITH WITH ITS INSURED, ANY PERSON ENTITLED TO
- 25 RECEIVE PERSONAL PROTECTION INSURANCE BENEFITS UNDER A POLICY
- 26 ISSUED TO ITS INSURED, OR ANY PERSON ENTITLED TO RECEIVE PERSONAL
- 27 PROTECTION INSURANCE BENEFITS FROM THE INSURER UNDER THE

- 1 PROVISIONS OF THIS CHAPTER. THE FIDUCIARY DUTY IMPOSED BY THIS
- 2 SECTION IS DEEMED TO INVOLVE MATTERS OF MENTAL CONCERN AND
- 3 SOLICITUDE. A BREACH OF THE DUTY TO DEAL FAIRLY AND IN GOOD
- 4 FAITH SUBJECTS THE INSURER TO LIABILITY IN TORT FOR ANY DAMAGES
- 5 PROXIMATELY ARISING THEREFROM AND FOR PUNITIVE DAMAGES.
- 6 Sec. 3315. The facility shall establish as part of its plan
- 7 of operation a program to reduce the participation ratio of an
- 8 INCREASE insurer *under section 3303(e)(i) based upon
- 9 PARTICIPATION IN URBAN AREAS. THE FACILITY SHALL ASSIGN PRIVATE
- 10 PASSENGER NONFLEET INSURANCE POLICIES TO ITS PARTICIPATING MEM-
- 11 BERS ON A BASIS THAT IS INVERSELY PROPORTIONATE TO the number of
- 12 private passenger nonfleet automobiles -voluntarily written in
- 13 an urban area BY EACH MEMBER. The program shall also include
- 14 reductions to the participation ratio for any increases in the
- 15 number of private passenger nonfleet automobiles voluntarily
- 16 written in an urban area. However, an insurer's participation
- 17 ratio shall not be increased by more than 10% annually as a
- 18 result of this section. As used in this section, "urban area"
- 19 means the area within the boundaries of a city in this state
- 20 -which THAT has a population of 1,000,000 or more as determined
- 21 by the latest of each succeeding federal decennial census and
- 22 includes any city located wholly within the boundaries of a city
- 23 in this state which THAT has a population of 1,000,000 or more
- 24 as determined by the latest of each succeeding federal decennial
- 25 census. This section is repealed effective July 1, 1991.
- Sec. 3321. The facility shall provide, with respect to all
- 27 automobiles not included in section 3320:

- 1 (a) Only the insurance required by law or required by the
- 2 commissioner. -of insurance. The commissioner may only require
- 3 insurance for which a rate has been filed by an insurance rating
- 4 organization or insurer, and which rate is in effect, and
- 5 which the commissioner finds, after a public hearing, to be rea-
- 6 sonable, necessary, and in the public interest. The temporary
- 7 provision of insurance may be required pending the public hearing
- 8 if the commissioner determines it necessary to do so.
- 9 (b) The equitable distribution of applicants to participat-
- 10 ing members in accordance with the participation ratios defined
- 11 in section 3303.
- 12 Sec. 3340. (1) As agent for participating members, the
- 13 facility shall file with the commissioner every manual of classi-
- 14 fication, every manual of rules and rates, every rating plan, and
- 15 every modification of a manual of classification, manual of rules
- 16 and rates, or rating plan proposed for use for private passenger
- 17 nonfleet automobile insurance placed through the facility. The
- 18 facility may incorporate by reference in its filings other mate-
- 19 rial on file with the commissioner. The classifications, rules,
- 20 and rates and any amendments thereof shall be subject to prior
- 21 written approval by the commissioner. Except as provided in this
- 22 chapter, rates filed by the facility for private passenger non-
- 23 fleet automobile insurance shall be in accordance with chapter 21
- 24 and rates by the facility for all other automobile insurance
- 25 shall be filed in accordance with chapter 24.
- 26 (2) Every participating member designated to act on behalf
- 27 of the facility shall be authorized to use the rates and rules

- 1 approved by the commissioner for use by the facility on business
- 2 placed through the facility and shall not use other rates for
- 3 automobile insurance placed through the facility.
- 4 (3) Laws relating to rating organizations or advisory orga-
- 5 nizations shall not apply to functions provided for under this
- 6 section.
- 7 (4) Private passenger nonfleet automobile rates for the
- 8 facility shall comply with the following requirements:
- 9 (a) The territories for the facility shall be defined as
- 10 those of the principal rating organization for the voluntary
- 11 market.
- (A) $\frac{(b)}{(b)}$ The base rates for the facility shall be derived
- 13 from the weighted average of the base rates currently charged in
- 14 each facility territory by the 5 largest insurer groups, deter-
- 15 mined by voluntary net direct automobile insurance car years
- 16 written in the state for the calendar year ending December 31 of
- 17 the second prior year as reported to the statistical agent.
- 18 (c) The base rates as determined in subdivision (b) in each
- 19 facility territory shall be modified as follows:
- 20 (i) One hundred percent of the weighted average in each ter-
- 21 ritory in the highest rated territory or territories in the state
- 22 within a single political subdivision.
- 23 (ii) From 105% to 125% of the weighted average for all other
- 24 facility territories, with the highest rated such territories
- 25 receiving the lowest surcharge and increasing to the highest sur
- 26 charge in the lowest rated facility territories in 5 percentage

- 1 point increments. In no event, however, shall any such rate
- 2 exceed the rate established in subdivision (i).
- 3 (B) $\frac{-(d)}{-(d)}$ The facility shall adjust its rates at least once
- 4 each year or whenever changes in private competitive insurance
- 5 market rate levels would produce a change in excess of 5% in the
- 6 facility rate. for any facility territory. However, changes
- 7 shall not be made more often than quarterly.
- 8 (C) (e) In the event that IF underwriting losses and
- 9 administrative expenses resulting from the operation of the
- 10 facility at rates established pursuant to this subsection would
- 11 exceed an amount equal to 5% of the net direct private passenger.
- 12 nonfleet automobile premiums for this state, -the-levels
- 13 -specified in subdivision (c)(i) and (ii) shall be proportion-
- 14 ately increased in an amount to produce underwriting losses and
- 15 administrative expenses that do not exceed 5%.
- 16 Section 2. Sections 122, 2111a, 2111b, 2131, 2446, and 2640
- 17 of Act No. 218 of the Public Acts of 1956, being sections
- 18 500.122, 500.2111a, 500.2111b, 500.2131, 500.2446, and 500.2640
- 19 of the Michigan Compiled Laws, are repealed.
- 20 Section 3. (1) The legislature finds that there exists in
- 21 this state an emergency for a significant number of citizens who
- 22 are obligated pursuant to law to purchase automobile insurance
- 23 that has become unaffordable and unavailable. A substantial
- 24 number of urban registered vehicles are now without automobile
- 25 insurance coverage. While a vehicle is often a necessity for
- 26 employment and other essential daily activities, citizens who
- 27 drive automobiles without insurance coverage violate criminal law

- 1 regardless of the fact that for a substantial number of those
- 2 citizens it is impossible to obtain automobile insurance due to
- 3 the unaffordability and the unequal availability of that
- 4 insurance. The affordability and equal availability of automo-
- 5 bile insurance is essential to the preservation of the state's
- 6 interest in providing that its citizens obtain automobile insur-
- 7 ance coverage under the state's compulsory automobile insurance
- 8 laws. In many areas of the state, insurers are charging in a
- 9 subjective and discriminatory manner unreasonable amounts for
- 10 coverage. In addition, the automobile insurance market structure
- 11 has not resulted in promoting reasonable competition among insur-
- 12 ers, and this has further contributed to the unaffordability and
- 13 unavailability of automobile insurance. Five automobile insur-
- 14 ance insurers control over 60% of the entire state automobile
- 15 insurance market with 1 of those insurers controlling 23% of the
- 16 market.
- 17 (2) It is the purpose of this amendatory act to preserve the
- 18 state's interest in providing its citizens with automobile insur-
- 19 ance coverage by relieving the emergency condition of unafford-
- 20 able and unequally available automobile insurance; to provide
- 21 more stringent regulation of automobile insurance rate-making and
- 22 underwriting and to eliminate and prevent arbitrary and discrim-
- 23 inatory practices in automobile insurance marketing, rate-making,
- 24 and underwriting; to monitor the level of competition in the
- 25 automobile insurance market and to enable corrective measures
- 26 when necessary to create a healthy, competitive market for
- 27 automobile insurance; to examine loss prevention systems,

- 1 controls, and costs; to ensure that automobile insurance prices
- 2 reflect the actual costs of claims and reasonable expenses; and
- 3 to eliminate injustices that have resulted from the compulsory
- 4 automobile insurance system.
- 5 Section 4. This amendatory act shall not take effect unless
- 6 Senate Bill No. ____ or House Bill No. 4629 (request
- 7 no. 1500'91) of the 86th Legislature is enacted into law.

01499'91