As Reported by the Senate Insurance, Commerce and Labor Committee

126th General Assembly Regular Session 2005-2006

Am. S. B. No. 279

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Senators Stivers, Cates, Spada

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A BILL

To amend sections 3955.01 and 3955.12 of the Revised

Association from being obligated to pay more than

a single three hundred thousand dollar claim for

injury or death to any one person and a claim of

Code to exempt the Ohio Insurance Guaranty

an insured whose net worth exceeds fifty million	6
dollars.	7
BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:	
Section 1. That sections 3955.01 and 3955.12 of the Revised	8
Code be amended to read as follows:	9
Sec. 3955.01. As used in sections 3955.01 to 3955.19 of the	10
Revised Code:	11
(A) "Account" means either of the two accounts created by	12
division (B) of section 3955.06 of the Revised Code.	13
(B) "Affiliate" means a person that, directly or indirectly,	14
through one or more intermediaries, controls, is controlled by, or	15
is under common control with, an insolvent insurer on the	16

thirty-first day of December of the year next preceding the date

the insurer becomes an insolvent insurer.

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(C) "Control" means the possession, direct or indirect, of the power to direct or cause the direction of the management and policies of a person, whether through the ownership of voting securities, by contract other than a commercial contract for goods or nonmanagement services, or otherwise, unless the power is the result of an official position with, or corporate office held by, the person.

"Control" shall be presumed to exist if any person, directly or indirectly, owns, controls, holds with the power to vote, or holds proxies representing, ten per cent or more of the voting securities of any other person. This presumption may be rebutted by a showing that control does not exist in fact.

- (D)(1) "Covered claim" means an unpaid claim, including one for unearned premiums, which arises out of and is within the coverage of an insurance policy or policies to which sections 3955.01 to 3955.19 of the Revised Code apply, when issued by an insurer which becomes an insolvent insurer on or after September 4, 1970, and either of the following applies:
- (a) The claimant or insured is a resident of this state at

 the time of the insured event, provided that for the purpose of

 determining the place of residence of a claimant or insured that

 is an entity other than a natural person, the state in which its

 principal place of business is located at the time of the insured

 event shall be considered the residence of such claimant or

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 insured.
- (b) The claim is a first-party claim for property damage to 44 an insured's property that is permanently located in this state. 45
 - (2) "Covered claim" does not include any amount: 46
- (a) In excess of ten thousand dollars on any unearned premium 47 claim; 48

(b) In excess of three hundred thousand dollars on any	49
claim+. For purposes of this division, all claims arising out of	50
bodily injury or death to any one person shall constitute a single	51
claim regardless of the number of insurance policies issued or the	52
number of derivative claims made, including, but not limited to,	53
claims for loss of consortium, for injury to the relationship, for	54
survivorship, or arising out of wrongful death.	55
(c) Due any reinsurer, insurer, insurance pool, or	56
underwriting association through subrogation or otherwise;	57
provided, that when such reinsurer, insurer, insurance pool, or	58
underwriting association has paid a claim and thereby becomes	59
subrogated to the amount of that claim, such subrogated claim may	60
be asserted only against the receiver of the insolvent insurer and	61
in no event against the insured of the insolvent insurer;	62
(d) Awarded as punitive or exemplary damages;	63
(e) Sought as a return of premium under any retrospective	64
rating plan;	65
(f) Due any person that is an affiliate of the insolvent	66
insurer;	67
(g) Due on any one claim that does not exceed one hundred	68
dollars:	69
(h) Due under any policy of insurance issued to an insured	70
whose net worth exceeds fifty million dollars on the last day of	71
the insured's fiscal year next preceding the date the insurer	72
becomes an insolvent insurer. An insured's net worth described in	73
this division shall equal the aggregate of the net worth of the	74
insured and all of the insured's subsidiaries. The exclusion under	75
this division shall not apply in any of the following situations:	76
(i) The insured has applied for or consented to the	77
appointment of a receiver, trustee, or liquidator for all or a	78

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substantial part of the insured's assets.	79
(ii) The insured has filed a voluntary petition in	80
bankruptcy.	81
(iii) The insured has filed a petition or answer seeking a	82
reorganization or arrangement with creditors or seeking to take	83
advantage of any insolvency law.	84
(iv) A court of competent jurisdiction has entered an order,	85
judgment, or decree concerning the insured's bankruptcy,	86
insolvency, or reorganization petition.	87
(E) "Insolvent insurer" means an insurer licensed to transact	88
insurance in this state either at the time the policy was issued	89
or when the insured event occurred, decreed by a court of	90
competent jurisdiction of the state of such insurer's domicile to	91
be insolvent, and ordered by or pursuant to the authority of such	92
court to be liquidated.	93
(F) "Member insurer" means any person that writes any kind of	94
insurance to which this chapter applies, as prescribed in section	95
3955.05 of the Revised Code, including the exchange of reciprocal	96
or interinsurance contracts, and is licensed to transact any	97
insurance in this state.	98
(G) "Net direct written premiums" means direct gross premiums	99
written in this state on insurance policies to which sections	100
3955.01 to 3955.19 of the Revised Code apply, less return premiums	101
thereon and dividends paid or credited to policyholders on such	102
direct business, but does not include premiums on contracts	103
between insurers or reinsurers.	104
(H) "Net worth" means the amount by which the value of all	105
assets exceeds all liabilities and includes, but is not limited	106
to, such accounting terms as owners equity, partnership equity,	107
shareholders equity, net assets, and fund balances.	108

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as the result of an error.	139
(C) The receiver, liquidator, or statutory successor of an	140
insolvent insurer shall be bound by settlements of covered claims	141
by the association or a similar organization in another state. The	142
court having jurisdiction shall grant such claim priority equal to	143
that which the claimant would have been entitled in the absence of	144
sections 3955.01 to 3955.19 of the Revised Code against the assets	145
of the insolvent insurer. The expenses of the association or	146
similar organization in handling claims shall be accorded the same	147
priority as the liquidator's expenses.	148
(D) The association periodically shall file with the receiver	149
or liquidator of an insolvent insurer reports of the covered	150
claims paid by the association and estimates of anticipated claims	151
on the association, which shall preserve the right to the	152
association against the assets of the insolvent insurer.	153
Section 2. That existing sections 3955.01 and 3955.12 of the	154
Revised Code are hereby repealed.	155