As Reported by the Senate Insurance, Commerce and Labor Committee

128th General Assembly Regular Session 2009-2010

Sub. H. B. No. 300

Representatives Dyer, Hottinger

Cosponsors: Representatives Heard, Combs, Luckie, Murray, Williams, B.,
Okey, Fende, Brown, Batchelder, Boyd, Carney, Chandler, DeBose, Dodd,
Domenick, Evans, Garland, Hackett, Harris, Harwood, Letson, Mecklenborg,
Sayre, Snitchler, Stewart, Yates
Senator Schaffer

A BILL

То	amend sections 1751.33, 1753.33, 3901.021,	1
	3903.81, 3903.83, 3905.04, 3905.041, 3905.05,	2
	3905.06, 3905.061, 3905.07, 3905.071, 3905.12,	3
	3905.14, 3905.16, 3905.20, 3905.30, 3905.35,	4
	3905.36, 3905.40, 3905.41, 3905.481, 3905.483,	5
	3905.484, 3905.841, 3905.85, 3905.86, 3905.862,	6
	3905.87, 3905.88, 3905.89, 3905.932, 3924.01,	7
	3924.09, 3924.10, 3929.30, 3956.04, 3960.03, and	8
	5725.18, to enact section 3905.051, and to repeal	9
	sections 3905.10, 3905.482, and 3929.301 of the	10
	Revised Code to make changes to the law governing	11
	the licensure and regulation of insurance agents,	12
	certain insurance-related taxes, the Ohio Life and	13
	Health Insurance Guaranty Association, Ohio health	14
	care plans, risk-based capital reports, reporting	15
	requirements for insurers, and notice requirements	16
	for health insuring corporations, to temporarily	17
	extend the time after employment during which a	18

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person can keep the person's health insurance	19
coverage, and to declare an emergency.	20
BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:	
Section 1. That sections 1751.33, 1753.33, 3901.021, 3903.81,	21
3903.83, 3905.04, 3905.041, 3905.05, 3905.06, 3905.061, 3905.07,	22
3905.071, 3905.12, 3905.14, 3905.16, 3905.20, 3905.30, 3905.35,	23
3905.36, 3905.40, 3905.41, 3905.481, 3905.483, 3905.484, 3905.841,	24
3905.85, 3905.86, 3905.862, 3905.87, 3905.88, 3905.89, 3905.932,	25
3924.01, 3924.09, 3924.10, 3929.30, 3956.04, 3960.03, and 5725.18	26
be amended and section 3905.051 of the Revised Code be enacted to	27
read as follows:	28
Sec. 1751.33. (A) Each health insuring corporation shall	29
provide to its subscribers, by mail, a description of the health	30
insuring corporation, its method of operation, its service area,	31
its most recent provider list, its complaint procedure established	32
pursuant to section 1751.19 of the Revised Code, and a description	33
of its utilization review, internal review, and external review	34
processes established under sections 1751.77 to 1751.85 of the	35
Revised Code. A health insuring corporation may satisfy this	36
requirement by delivering to its subscribers a document that	37
identifies a web site where the subscriber may view this	38
information. At the request of or with the approval of the	39
subscriber, a health insuring corporation may shall provide this	40
information in hard copy by electronic means rather than by mail.	41
A health insuring corporation providing basic health care services	42
or supplemental health care services shall provide this	43
information annually. A health insuring corporation providing only	44
specialty health care services shall provide this information	45
biennially.	46
(B) Each health insuring corporation, upon the request of a	47

As Reported by the Senate Insurance, Commerce and Labor Committee (B) In the case of a company action level event, the health 78 insuring corporation shall prepare and submit to the 79 superintendent an RBC plan that shall do all of the following: 80 (1) Identify the conditions that contributed to the company 81 action level event; 82 (2) Contain proposals of corrective actions that the health 83 insuring corporation intends to take to eliminate the conditions 84 contributing to the company action level event; 85 (3) Provide projections of the health insuring corporation's 86 financial results in the current year and at least the two 87 succeeding years, both in the absence of the proposed corrective 88 actions and giving effect to the proposed corrective actions. The 89 projections shall include projections of statutory balance sheets, 90 operating income, net income, capital, surplus, and RBC levels. 91 Projections for both new and renewal business may include separate 92 projections for each major line of business, and may separately 93 identify each significant income, expense, and benefit component 94 of the projection. 95 (4) Identify the key assumptions impacting the health 96 insuring corporation's projections made pursuant to division 97 (B)(3) of this section, and describe the sensitivity of the 98 projections to the assumptions; 99 (5) Identify the quality of, and problems associated with, 100 the health insuring corporation's business, including, but not 101 limited to, its assets, anticipated business growth and associated 102 surplus strain, extraordinary exposure to risk, mix of business, 103 and the use of reinsurance, if any, in each case. 104 (C) The RBC plan shall be submitted within forty-five days 105 after a company action level event. However, if a health insuring 106

corporation has challenged an adjusted RBC report pursuant to

section 1753.37 of the Revised Code, an RBC plan need not be

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submitted unless the superintendent rejects the challenge 109 following the hearing required under section 1753.37 of the 110 Revised Code. If the superintendent rejects the health insuring 111 corporation's challenge, the RBC plan shall be submitted within 112 forty-five days after the superintendent's notification to the 113 health insuring corporation of the superintendent's rejection of 114 the challenge.

- (D)(1) Within sixty days after a health insuring corporation 116 submits an RBC plan to the superintendent, the superintendent 117 shall either require the health insuring corporation to implement 118 the RBC plan or notify the health insuring corporation that the 119 RBC plan is unsatisfactory in the judgment of the superintendent. 120 If the superintendent has determined that the RBC plan is 121 unsatisfactory, the notification to the health insuring 122 corporation shall set forth the reasons for the determination, and 123 may set forth proposed revisions that will render the RBC plan 124 satisfactory in the judgment of the superintendent. Upon its 125 receipt of such notification from the superintendent, the health 126 insuring corporation shall prepare and submit a revised RBC plan, 127 which may incorporate by reference any revisions proposed by the 128 superintendent. 129
- (2) If a health insuring corporation challenges, under 130 section 1753.37 of the Revised Code, a notification by the 131 superintendent that the health insuring corporation's RBC plan or 132 a revised RBC plan is unsatisfactory, submission of a revised RBC 133 plan need not be made unless the superintendent rejects the health 134 insuring corporation's challenge and notifies the health insuring 135 corporation of this rejection. A health insuring corporation shall 136 submit a revised RBC plan to the superintendent within forty-five 137 days after receiving notification from the superintendent that its 138 RBC plan is unsatisfactory, or that its challenge to a 139 notification made under division (D)(1) of this section has been 140

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rejected, as applicable.	141
(E) Notwithstanding division (D) of this section, if the	142
superintendent notifies a health insuring corporation that its RBC	143
plan or revised RBC plan is unsatisfactory, the superintendent	144
may, at the superintendent's discretion but subject to the health	145
insuring corporation's right to a hearing under section 1753.37 of	146
the Revised Code, specify in the notification that the	147
notification constitutes a regulatory action level event.	148
(F) Every domestic health insuring corporation that submits	149
an RBC plan or revised RBC plan to the superintendent shall file a	150
copy of the RBC plan or revised RBC plan with the insurance	151
regulatory authority of every state in which the health insuring	152
corporation is authorized to do business upon receiving the	153
insurance regulatory authority's written request for a copy of the	154
plan, if the state has a confidentiality law substantially similar	155
to section 1753.38 of the Revised Code. The health insuring	156
corporation shall file the copy in that state no later than the	157
later of:	158
(1) Fifteen days after receiving the request for a copy of	159
the plan;	160
(2) The date on which the RBC plan or revised RBC plan is	161
filed pursuant to division (C) or (D) of this section.	162
Sec. 3901.021. (A) Three-fourths of all appointment and other	163
fees collected under section 3905.10 and division (B) of section	164
3905.20 of the Revised Code shall be paid into the state treasury	165
to the credit of the department of insurance operating fund, which	166
is hereby created. The remaining one-fourth shall be credited to	167
the general revenue fund. Other revenues collected by the	168
superintendent of insurance, such as registration fees for	169
sponsored seminars or conferences and grants from private	170

entities, shall be paid into the state treasury to the credit of

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the department of insurance operating fund.	172
(B) Seven-tenths of all fees collected under divisions	173
(A)(2), (A)(3), and (A)(6) of section 3905.40 of the Revised Code	174
shall be paid into the state treasury to the credit of the	175
department of insurance operating fund. The remaining three-tenths	176
shall be credited to the general revenue fund.	177
(C) All operating expenses of the department of insurance	178
except those expenses defined under section 3901.07 of the Revised	179
Code shall be paid from the department of insurance operating	180
fund.	181
Sec. 3903.81. As used in sections 3903.81 to 3903.93 of the	182
Revised Code:	183
(A) "Adjusted RBC report" means an RBC report that has been	184
adjusted by the superintendent of insurance in accordance with	185
division (C) of section 3903.82 of the Revised Code.	186
(B) "Authorized control level RBC" means the number	187
determined under the risk-based capital formula in accordance with	188
the RBC instructions.	189
(C) "Company action level RBC" means the product of 2.0 and	190
an insurer's authorized control level RBC.	191
(D) "Corrective order" means an order issued by the	192
superintendent of insurance in accordance with division (B)(3) of	193
section 3903.84 of the Revised Code specifying corrective actions	194
that the superintendent has determined are required.	195
(E) "Domestic insurer" means any insurance company organized	196
under Chapter 3907. or 3925. of the Revised Code.	197
(F) "Foreign insurer" means any insurance company licensed	198
under section 3909.01 or 3927.01 of the Revised Code.	199
(G) "Life or health insurer" means any insurance company	200

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3903.83 of the Revised Code.	231
(P) "Revised RBC plan" means an RBC plan rejected by the	232
superintendent of insurance and then revised by an insurer with or	233
without incorporating the superintendent of insurance's	234
recommendation.	235
(Q) "RBC report" means the report required by section 3903.82 of the Revised Code.	236 237
(R) "Regulatory action level RBC" means the product of 1.5 and an insurer's authorized control level RBC.	238 239
(S) "Total adjusted capital" means the sum of both of the following:	240 241
(1) An insurer's statutory capital and surplus as determined	242
in accordance with the statutory accounting applicable to the	243
annual statements prepared on a form adopted under section 3901.77	244
of the Revised Code, as required to be filed by sections 3907.19,	245
3909.06, and 3929.30 of the Revised Code;	246
(2) Such other items, if any, as the RBC instructions may provide.	247 248
Sec. 3903.83. (A) For purposes of sections 3903.81 to 3903.93	249
of the Revised Code, a "company action level event" is any of the	250
following events:	251
(1) A domestic or foreign insurer's filing of an RBC report	252
that indicates that the insurer's total adjusted capital is	253
greater than or equal to its regulatory action level RBC but less	254
than its company action level RBC;	255
(2) A life or health insurer's filing of an RBC report that	256
indicates that the insurer's total adjusted capital is greater	257
than or equal to its company action level RBC but less than the	258
product of 2.5 and its authorized control level RBC, and that	259
indicates a negative trend;	260

(3) A property and casualty insurer's filing of an RBC report	261
that indicates that the insurer's total adjusted capital is	262
greater than or equal to its company action level RBC but less	263
than the product of its authorized control level RBC and 3.0, and	264
that triggers the trend test determined in accordance with the	265
trend test calculation included in the property and casualty RBC	266
instructions;	267
(4) The notification by the superintendent of insurance to an	268
insurer of an adjustment to the insurer's RBC report, which	269
adjusted RBC report shows the insurer's total adjusted capital	270
within the range described in either division (A)(1) or (2) of	271
this section, provided that the insurer does not challenge the	272
adjusted RBC report under section 3903.87 of the Revised Code;	273
$\frac{(4)(5)}{(5)}$ The superintendent's notification to an insurer,	274
following the hearing required under section 3903.87 of the	275
Revised Code, that the superintendent has rejected the insurer's	276
challenge to an adjusted RBC report showing the insurer's total	277
adjusted capital within the range described in either division	278
(A)(1) or (2) of this section.	279
(B) In the case of a company action level event, the insurer	280
shall prepare and submit to the superintendent an RBC plan that	281
shall:	282
(1) Identify the conditions that contributed to the company	283
action level event;	284
(2) Contain proposals of corrective actions that the insurer	285
intends to take to eliminate the conditions leading to the company	286
action level event;	287
(3) Provide projections of the insurer's financial results in	288
the current year and at least the four succeeding years, both in	289
the absence of the proposed corrective actions and giving effect	290

to the proposed corrective actions. The projections shall include

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projections of statutory operating income, net income, capital,

and surplus. Projections for both new and renewal business may

include separate projections for each major line of business, and

may separately identify each significant income, expense, and

benefit component of the projection.

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- (4) Identify the key assumptions impacting the insurer's projections made pursuant to division (B)(3) of this section, and describe the sensitivity of the projections to the assumptions;
- (5) Identify the quality of, and problems associated with, 300 the insurer's business, including, but not limited to, its assets, 301 anticipated business growth and associated surplus strain, 302 extraordinary exposure to risk, mix of business, and use of 303 reinsurance.
- (C) The RBC plan shall be submitted within forty-five days 305 after a company action level event. However, if an insurer has 306 challenged an adjusted RBC report pursuant to section 3903.87 of 307 the Revised Code, the RBC plan need not be submitted until after 308 the hearing required under section 3903.87 of the Revised Code. If 309 the superintendent rejects the insurer's challenge, the RBC plan 310 shall be submitted within forty-five days after the 311 superintendent's notification to the insurer of the rejection of 312 the challenge. 313
- (D)(1) Within sixty days after an insurer submits an RBC plan 314 to the superintendent, the superintendent shall either require the 315 insurer to implement the RBC plan or shall notify the insurer that 316 the RBC plan is unsatisfactory in the judgment of the 317 superintendent. If the superintendent has determined that the RBC 318 plan is unsatisfactory, the notification to the insurer shall set 319 forth the reasons for the determination, and may set forth 320 proposed revisions that will render the RBC plan satisfactory in 321 the judgment of the superintendent. Upon such notification from 322 the superintendent, the insurer shall prepare and submit a revised 323

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RBC plan, which may incorporate by reference any revisions	324
proposed by the superintendent.	325
(2) If an insurer challenges, under section 3903.87 of the	326
Revised Code, a notification from the Superintendent that the	327
insurer's RBC plan or a revised RBC plan is unsatisfactory,	328
submission of a revised RBC plan need not be made unless the	329
superintendent rejects the insurer's challenge following the	330
hearing required by section 3903.87 of the Revised Code and then	331
notifies the insurer of this rejection.	332
(3) An insurer shall submit a revised RBC plan to the	333
superintendent within forty-five days after receiving notification	334
from the superintendent that its RBC plan is unsatisfactory, or,	335
that its challenge to a notification made under division (D)(1) of	336
this section has been rejected, as applicable.	337
(E) Notwithstanding division (D) of this section, if the	338
superintendent notifies an insurer that its RBC plan or revised	339
RBC plan is unsatisfactory, the superintendent may, at the	340
superintendent's discretion, but subject to the insurer's right to	341
a hearing under section 3903.87 of the Revised Code, specify in	342
the notification that the notification constitutes a regulatory	343
action level event.	344
(F) Every domestic insurer that submits an RBC plan or	345
revised RBC plan to the superintendent shall file a copy of the	346
RBC plan or revised RBC plan with the insurance regulatory	347
authority of every state in which the insurer is authorized to do	348
business upon receiving the insurance regulatory authority's	349
written request for a copy of the plan, if the state has a	350
confidentiality law with provisions substantially similar to those	351
set forth in divisions (A) and (B) of section 3903.88 of the	352

Revised Code. The insurer shall file the copy in that state no

later than the later of:

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(2) The individual has earned a professional designation	385
approved by the superintendent.	386
(3) The individual has completed, for each line of authority	387
for which the individual has applied, twenty hours of study in a	388
program of insurance education approved by the superintendent, in	389
consultation with the insurance agent education advisory council,	390
under criteria established by the superintendent. Division (C) of	391
this section does not apply with respect to title insurance or any	392
other line of authority designated by the superintendent.	393
(D) An individual who fails to appear for an examination as	394
scheduled, or fails to pass an examination, may reapply for the	395
examination if the individual pays the required fee and submits	396
any necessary forms prior to being rescheduled for the	397
examination.	398
(E)(1) The superintendent may, in accordance with Chapter	399
119. of the Revised Code, adopt any rule necessary for the	400
implementation of this section.	401
(2) The superintendent may make any necessary arrangements,	402
including contracting with an outside testing service, for the	403
administration of the examinations and the collection of the fees	404
required by this section.	405
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Sec. 3905.041. (A)(1) An individual who applies for a	406
resident insurance agent license in this state within ninety days	407
after establishing a principal place of residence or principal	408
place of business in this state shall not be required under	409
section 3905.04 of the Revised Code to complete a program of	410
insurance education or to pass a written examination if <u>the</u>	411
individual has paid all applicable fees required under this	412
<u>chapter and if</u> either of the following applies:	413
(a) The individual is currently licensed in another state and	414

is in good standing for the line or lines of authority requested. 415 (b) The individual was previously licensed in another state, 416 the individual's application for a resident insurance agent 417 license in this state is received within ninety days after the 418 cancellation of the individual's previous license, and, at the 419 time of license cancellation, the individual was in good standing 420 for the line or lines of authority requested. 421 (2) To determine an applicant's licensure status and standing 422 status in another state, the superintendent of insurance may 423 utilize the producer database maintained by the NAIC or its 424 affiliates or subsidiaries. If that information is not available 425 on the producer database, the superintendent may require a 426 certification letter documentation from the prior home state. 427 (B) An individual who applies for a temporary insurance agent 428 license in this state shall not be required under section 3905.04 429 of the Revised Code to complete any prelicensing education or to 430 pass a written examination. 431 (C) The superintendent may exempt any limited lines insurance 432 from the examination requirement of section 3905.04 of the Revised 433 Code. 434 Sec. 3905.05. (A) A natural person shall apply for a resident 435 insurance agent license by submitting to the superintendent of 436 insurance the uniform application or any other application 437 prescribed by the superintendent, any additional information 438 required by the superintendent, and a declaration made under 439 penalty of refusal, suspension, or revocation of the license, that 440 the statements made in the application are true, correct, and 441 complete to the best of the applicant's knowledge and belief and 442 paying any applicable fees required under this chapter. 443

A person who applies for a resident insurance agent license

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bond agent;	475
(2) An additional line of authority under an existing	476
resident insurance agent license if a criminal record check has	477
not been obtained within the last twelve months for insurance	478
license purposes.	479
(B) "Fingerprint" means an impression of the lines on the	480
finger taken for the purpose of identification. The impression may	481
be electronic or converted to an electronic format.	482
(C) Each applicant shall consent to a criminal record check	483
in accordance with this section and shall submit a full set of	484
fingerprints to the superintendent of insurance for that purpose.	485
(D) The superintendent of insurance shall request the	486
superintendent of the bureau of criminal identification and	487
investigation to conduct a criminal records check based on the	488
applicant's fingerprints. The superintendent of insurance shall	489
request that criminal record information from the federal bureau	490
of investigation be obtained as part of the criminal records	491
check.	492
(E) The superintendent of insurance may contract for the	493
collection and transmission of fingerprints authorized under this	494
section. The superintendent may order the fee for collecting and	495
transmitting fingerprints to be payable directly to the contractor	496
by the applicant. The superintendent may agree to a reasonable	497
fingerprinting fee to be charged by the contractor. Any fee	498
required under this section shall be paid by the applicant.	499
(F) The superintendent may receive criminal record	500
information directly in lieu of the bureau of criminal	501
identification and investigation that submitted the fingerprints	502
to the federal bureau of investigation.	503
(G) The superintendent shall treat and maintain an	504
applicant's fingerprints and any criminal record information	505

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obtained under this section as confidential and shall apply	506
security measures consistent with the criminal justice information	507
services division of the federal bureau of investigation standards	508
for the electronic storage of fingerprints and necessary	509
identifying information and limit the use of records solely to the	510
ourposes authorized by this section. The fingerprints and any	511
criminal record information are not subject to subpoena other than	512
one issued pursuant to a criminal investigation, are confidential	513
by law and privileged, are not subject to discovery, and are not	514
admissible in any private civil action.	515
(H) This section does not apply to an agent applying for	516
renewal of an existing resident or nonresident license in this	517
state.	518
Sec. 3905.06. (A)(1) The superintendent of insurance shall	519
issue a resident insurance agent license to an individual	520
applicant whose home state is Ohio <u>upon submission of a completed</u>	521
application and payment of any applicable fee required under this	522
chapter, if the superintendent finds all of the following:	523
(a) The applicant is at least eighteen years of age.	524
(b) The applicant has not committed any act that is a ground	525
for the denial, suspension, or revocation of a license under	526
section 3905.14 of the Revised Code.	527
(c) If required under section 3905.04 of the Revised Code,	528
the applicant has completed a program of insurance education for	529
each line of authority for which the applicant has applied.	530
(d) If required under section 3905.04 of the Revised Code,	531
the applicant has passed an examination for each line of authority	532
for which the applicant has applied.	533
(e) Any applicant applying for variable life-variable annuity	534
line of authority is registered with the financial industry	535

(A) of this section shall state the licensee's name, the license

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number, the date of issuance, the date the license expires, the	566
line or lines of authority for which the licensee is qualified,	567
and any other information the superintendent deems necessary.	568
A licensee may be qualified for any of the following lines of authority:	569 570
(1) Life, which is insurance coverage on human lives, including benefits of endowment and annuities, and may include	571 572
benefits in the event of death or dismemberment by accident and benefits for disability income;	573 574
(2) Accident and health, which is insurance coverage for sickness, bodily injury, or accidental death, and may include benefits for disability income;	575 576 577
(3) Property, which is insurance coverage for the direct or consequential loss or damage to property of any kind;	578 579
(4) Casualty, which is insurance coverage against legal liability, including coverage for death, injury, or disability or damage to real or personal property;	580 581 582
(5) Variable life and variable annuity products, which is	583
<pre>insurance coverage provided under variable life insurance contracts and variable annuities;</pre>	584 585
(6) Personal lines, which is property and casualty insurance coverage sold to individuals and families for noncommercial purposes;	586 587 588
(6) Variable life and variable annuity products, which is	589
insurance coverage provided under variable life insurance	590
contracts and variable annuities;	591
(7) Credit, which is limited line credit insurance;	592
(8) Title, which is insurance coverage against loss or damage	593
suffered by reason of liens against, encumbrances upon, defects	594
in, or the unmarketability of, real property;	595

(9) Surety bail bond, which is the authority set forth in	596
sections 3905.83 to 3905.95 of the Revised Code;	597
(10) Any other line of authority designated by the	598
superintendent.	599
(C) A (1) An individual seeking to renew a resident insurance	600
agent license shall be perpetual unless surrendered by the	601
licensee or suspended or revoked by the superintendent apply	602
biennially for a renewal of the license on or before the last day	603
of the licensee's birth month. A business entity seeking to renew	604
a resident insurance agent license shall apply biennially for a	605
renewal of the license on or before the date determined by the	606
superintendent. The superintendent shall send a renewal notice to	607
all licensees at least one month prior to the renewal date.	608
Applications shall be submitted to the superintendent on	609
forms prescribed by the superintendent. Each application shall be	610
accompanied by a biennial renewal fee. The superintendent also may	611
require an applicant to submit any document reasonably necessary	612
to verify the information contained in the renewal application.	613
(2) To be eligible for renewal, an individual applicant shall	614
complete the continuing education requirements pursuant to section	615
3905.481 of the Revised Code prior to the renewal date.	616
(3) If an applicant submits a completed renewal application,	617
qualifies for renewal pursuant to divisions (C)(1) and (2) of this	618
section, and has not committed any act that is a ground for the	619
refusal to issue, suspension of, or revocation of a license under	620
section 3905.14 of the Revised Code, the superintendent shall	621
renew the applicant's resident insurance agent license.	622
(D) If an individual or business entity does not apply for	623
the renewal of the individual or business entity's license on or	624
before the license renewal date specified in division (C)(1) of	625
this section, the individual or business entity may submit a late	626

renewal application along with all applicable fees required under	627
this chapter prior to the first day of the second month following	628
the license renewal date.	629
(E) A license issued under this section that is not renewed	630
on or before its renewal date pursuant to division (C) of this	631
section or its late renewal date pursuant to division (D) of this	632
section automatically is suspended for nonrenewal on the first day	633
of the second month following the renewal date. If a license is	634
suspended for nonrenewal pursuant to this division, the individual	635
or business entity is eligible to apply for reinstatement of the	636
license within the twelve-month period following the date by which	637
the license should have been renewed by complying with the	638
reinstatement procedure established by the superintendent and	639
paying all applicable fees required under this chapter.	640
(F) A license that is suspended for nonrenewal that is not	641
reinstated pursuant to division (E) of this section automatically	642
is canceled unless the superintendent is investigating any	643
allegations of wrongdoing by the agent or has initiated	644
proceedings under Chapter 119. of the Revised Code. In that case,	645
the license automatically is canceled after the completion of the	646
investigation or proceedings unless the superintendent revokes the	647
license.	648
(G) An individual licensed as a resident insurance agent who	649
is unable to comply with the license renewal procedures	650
established under this section and who is unable to engage in the	651
business of insurance due to military service, a long-term medical	652
disability, or some other extenuating circumstance may request an	653
extension of the renewal date of the individual's license. To be	654
eligible for such an extension, the individual shall submit a	655
written request with supporting documentation to the	656
superintendent. At the superintendent's discretion, the	657
superintendent may not consider a written request made after the	658

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renewal date of the license.	659
Sec. 3905.061. (A) If a person licensed as an insurance agent	660
under section 3905.06 of the Revised Code changes the person's	661
address within the state, the person shall, within thirty days	662
after making that change, file a change of address with the	663
superintendent of insurance or the superintendent's designee.	664
(B)(1) If a person licensed as an insurance agent under	665
section 3905.06 of the Revised Code changes the person's home">home	666
state of residence , the person shall, within thirty days after	667
making that change, file a change of address with the	668
superintendent and provide the superintendent with certification	669
from the new home state of residence.	670
(2) If an a resident insurance agent complies with division	671
(B)(1) of this section and the agent is in good standing with the	672
<pre>superintendent, the agent's license shall be changed to that of a</pre>	673
nonresident license and no fee or license application shall be	674
required. A change in the residency status of an insurance agent	675
license under this section does not change the license renewal	676
date established by the initial licensure under section 3905.06 of	677
the Revised Code.	678
Sec. 3905.07. (A) The superintendent of insurance shall issue	679
a nonresident insurance agent license to an applicant that is a	680
nonresident person upon payment of all applicable fees required	681
under this chapter if the superintendent finds all of the	682
following:	683
(1) The applicant is currently licensed as a resident and is	684
in good standing in the applicant's home state.	685
In good scanding in the applicant s nome state.	005

(2) The applicant has submitted the request for licensure

prescribed by the superintendent is licensed in the applicant's

home state for the lines of authority requested in this state.

(3) The applicant has submitted or has had transmitted to the	689
superintendent the application for licensure that the applicant	690
submitted to the applicant's home state or a completed applicable	691
uniform application or uniform business entity application, as	692
applicable.	693
(4) The applicant has not committed any act that is a ground	694
for the denial, suspension, or revocation of a license under	695
section 3905.14 of the Revised Code.	696
(5) The applicant is of good reputation and character, is	697
honest and trustworthy, and is otherwise suitable to be licensed.	698
(6) The applicant's home state issues nonresident insurance	699
agent licenses to residents of this state on the same basis as set	700
forth in division (A) of this section.	701
(7) If the applicant is a business entity, the applicant has	702
designated an insurance agent licensed as an agent in this state	703
to be responsible for the applicant's compliance with the	704
insurance laws of this state.	705
(8) The applicant has submitted any other documents requested	706
by the superintendent.	707
(B) To determine an applicant's licensure and standing status	708
in another state, the superintendent may utilize the producer	709
database maintained by the NAIC or its affiliates or subsidiaries.	710
If that information is not available on the producer database, the	711
superintendent may require a certification letter from the	712
applicant's home state.	713
(C) A (1) An individual seeking to renew a nonresident	714
insurance agent license shall be perpetual unless surrendered by	715
the licensee or suspended or revoked by the superintendent apply	716
biennially for a renewal of the license on or before the last day	717
of the licensee's birth month. A business entity seeking to renew	718

a nonresident insurance agent license shall apply biennially for a

license within the twelve-month period following the date by which

Code changes the person's address within the person's state of

residence, the person shall, within thirty days after making that	782
change, file a change of address with the superintendent of	783
insurance or the superintendent's designee.	784
(2) If a nonresident person licensed as a nonresident	785
insurance agent under section 3905.07 of the Revised Code changes	786
the person's <u>home</u> state of residence or the state in which the	787
person's principal place of business is located, the person shall,	788
within thirty days after making that change, file a change of	789
address with the superintendent and provide the superintendent	790
with certification from the new state of residence or the new home	791
state in which the principal place of business is located.	792
(B) If a nonresident insurance agent complies with division	793
(A) of this section and the agent is in good standing with the	794
$\underline{\text{superintendent}}$, no fee or license application shall be required. $\underline{\mathtt{A}}$	795
change in the residency status of an agent's license under this	796
section does not change the license renewal date established by	797
the initial license under section 3905.07 of the Revised Code.	798
Sec. 3905.12. (A) The superintendent of insurance may adopt	799
rules in accordance with Chapter 119. of the Revised Code to do	800
the following:	801
(1) Establish procedures for the issuance and, renewal, late	802
renewal, extension, reactivation, and reinstatement of insurance	803
agent licenses;	804
(2) Provide for the issuance and renewal of limited authority	805
licenses, and establish any prelicensing education, examination,	806
or continuing education requirements the superintendent considers	807
appropriate for such a license;	808
(3) Establish a schedule of fees to be paid to the	809
superintendent for extensions, late renewals, reinstatements, and	810
reactivations of a license under this chapter and for credit card	811

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demonstrating incompetence, untrustworthiness, or financial	872
irresponsibility, in the conduct of business in this state or	873
elsewhere;	874
(10) Having an insurance agent license, or its equivalent,	875
denied, suspended, or revoked in any other state, province,	876
district, or territory;	877
(11) Forging or causing the forgery of an application for	878
insurance or any document related to or used in an insurance	879
transaction;	880
(12) Improperly using notes or, any other reference material,	881
equipment, or devices of any kind to complete an examination for	882
an insurance agent license;	883
(13) Knowingly accepting insurance business from an	884
individual who is not licensed;	885
(14) Failing to comply with any administrative or court order	886
official invoice, notice, assessment, or order directing payment	887
of <u>federal,</u> state, <u>or local</u> income tax, <u>state or local sales tax</u> ,	888
or workers' compensation premiums;	889
(15) Failing to timely submit an application for insurance.	890
For purposes of division (B)(15) of this section, a submission is	891
considered timely if it occurs within the time period expressly	892
provided for by the insurer, or within seven days after the	893
insurance agent accepts a premium or an order to bind coverage	894
from a policyholder or applicant for insurance, whichever is	895
later.	896
(16) Failing to disclose to an applicant for insurance or	897
policyholder upon accepting a premium or an order to bind coverage	898
from the applicant or policyholder, that the person has not been	899
appointed by the insurer;	900
(17) Having any professional license or financial industry	901

regulatory authority registration suspended or revoked as a result	902
of a or having been barred from participation in any industry;	903
(18) Having been subject to a cease and desist order or	904
permanent injunction related to mishandling of funds or breach of	905
fiduciary responsibilities or having been subject to a cease and	906
desist order or permanent injunction for unlicensed or	907
unregistered activities;	908
(18)(19) Causing or permitting a policyholder or applicant	909
for insurance to designate the insurance agent or the insurance	910
agent's spouse, parent, child, or sibling as the beneficiary of a	911
policy or annuity sold by the insurance agent or of a policy or	912
annuity for which the agent, at any time, was designated as the	913
agent of record, unless the insurance agent or a relative of the	914
insurance agent is the insured or applicant;	915
(19)(20) Causing or permitting a policyholder or applicant	916
for insurance to designate the insurance agent or the insurance	917
agent's spouse, parent, child, or sibling as the owner or	918
beneficiary of a trust funded, in whole or in part, by a policy or	919
annuity sold by the insurance agent or by a policy or annuity for	920
which the agent, at any time, was designated as the agent of	921
record, unless the insurance agent or a relative of the insurance	922
agent is the insured or applicant;	923
(21) Failing to provide a written response to the department	924
of insurance within twenty-one calendar days after receipt of any	925
written inquiry from the department, unless a reasonable extension	926
of time has been requested of, and granted by, the superintendent	927
or the superintendent's designee;	928
(20)(22) Failing to appear to answer questions before the	929
superintendent after being notified in writing by the	930
superintendent of a scheduled interview, unless a reasonable	931
extension of time has been requested of, and granted by, the	932

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cause a reasonable person to believe that the licensee was acting	964
on behalf of or otherwise representing the insurer;	965
$\frac{(27)(30)}{(30)}$ Soliciting, procuring an application for, or	966
placing, either directly or indirectly, any insurance policy when	967
the person is not authorized under this chapter to engage in such	968
activity;	969
(28)(31) Soliciting, marketing, or selling, or negotiating	970
any product or service that offers benefits similar to insurance	971
but is not regulated by the superintendent, without fully	972
disclosing, orally and in writing, to the prospective purchaser	973
that the product or service is not insurance and is not regulated	974
by the superintendent;	975
$\frac{(29)}{(32)}$ Failing to fulfill a refund obligation to a	976
policyholder or applicant in a timely manner. For purposes of	977
division (B) $\frac{(29)(32)}{(32)}$ of this section, a rebuttable presumption	978
exists that a refund obligation is not fulfilled in a timely	979
manner unless it is fulfilled within one of the following time	980
periods:	981
(a) Thirty days after the date the policyholder, applicant,	982
or insurer takes or requests action resulting in a refund;	983
(b) Thirty days after the date of the insurer's refund check,	984
if the agent is expected to issue a portion of the total refund;	985
(c) Forty-five days after the date of the agent's statement	986
of account on which the refund first appears.	987
The presumption may be rebutted by proof that the	988
policyholder or applicant consented to the delay or agreed to	989
permit the agent to apply the refund to amounts due for other	990
coverages.	991
$\frac{(30)(33)}{(33)}$ With respect to a surety bail bond agent license,	992
rebating or offering to rebate, or unlawfully dividing or offering	993

to divide, any commission, premium, or fee;	994
$\frac{(31)(34)}{(34)}$ Using a license for the principal purpose of	995
procuring, receiving, or forwarding applications for insurance of	996
any kind, other than life, or soliciting, placing, or effecting	997
such insurance directly or indirectly upon or in connection with	998
the property of the licensee or that of relatives, employers,	999
employees, or that for which they or the licensee is an agent,	1000
custodian, vendor, bailee, trustee, or payee;	1001
$\frac{(32)(35)}{(35)}$ In the case of an insurance agent that is a business	1002
entity, using a life license for the principal purpose of	1003
soliciting or placing insurance on the lives of the business	1004
entity's officers, employees, or shareholders, or on the lives of	1005
relatives of such officers, employees, or shareholders, or on the	1006
lives of persons for whom they, their relatives, or the business	1007
entity is agent, custodian, vendor, bailee, trustee, or payee;	1008
$\frac{(33)(36)}{(36)}$ Offering, selling, soliciting, or negotiating	1009
policies, contracts, agreements, or applications for insurance, or	1010
annuities providing fixed, variable, or fixed and variable	1011
benefits, or contractual payments, for or on behalf of any insurer	1012
or multiple employer welfare arrangement not authorized to	1013
transact business in this state, or for or on behalf of any	1014
spurious, fictitious, nonexistent, dissolved, inactive, liquidated	1015
or liquidating, or bankrupt insurer or multiple employer welfare	1016
arrangement <u>;</u>	1017
(37) In the case of a resident business entity, failing to be	1018
qualified to do business in this state under Title XVII of the	1019
Revised Code, failing to be in good standing with the secretary of	1020
state, or failing to maintain a valid appointment of statutory	1021
agent with the secretary of state;	1022
(38) In the case of a nonresident agent, failing to maintain	1023
licensure as an insurance agent in the agent's home state for the	1024

lines of authority held in this state;	1025
(39) Knowingly aiding and abetting another person or entity	1026
in the violation of any insurance law of this state or the rules	1027
adopted under it.	1028
(C) Before denying, revoking, suspending, or refusing to	1029
issue any license or imposing any penalty under this section, the	1030
superintendent shall provide the licensee or applicant with notice	1031
and an opportunity for hearing as provided in Chapter 119. of the	1032
Revised Code, except as follows:	1033
(1)(a) Any notice of opportunity for hearing, the hearing	1034
officer's findings and recommendations, or the superintendent's	1035
order shall be served by certified mail at the last known address	1036
of the licensee or applicant. Service shall be evidenced by return	1037
receipt signed by any person.	1038
For purposes of this section, the "last known address" is the	1039
residential address of a licensee or applicant, or the	1040
principal-place-of-business address of a business entity, that is	1041
contained in the licensing records of the department.	1042
(b) If the certified mail envelope is returned with an	1043
endorsement showing that service was refused, or that the envelope	1044
was unclaimed, the notice and all subsequent notices required by	1045
Chapter 119. of the Revised Code may be served by ordinary mail to	1046
the last known address of the licensee or applicant. The mailing	1047
shall be evidenced by a certificate of mailing. Service is deemed	1048
complete as of the date of such certificate provided that the	1049
ordinary mail envelope is not returned by the postal authorities	1050
with an endorsement showing failure of delivery. The time period	1051
in which to request a hearing, as provided in Chapter 119. of the	1052
Revised Code, begins to run on the date of mailing.	1053
(c) If service by ordinary mail fails, the superintendent may	1054

cause a summary of the substantive provisions of the notice to be

1086

published once a week for three consecutive weeks in a newspaper	1056
of general circulation in the county where the last known place of	1057
residence or business of the party is located. The notice is	1058
considered served on the date of the third publication.	1059
(d) Any notice required to be served under Chapter 119. of	1060
the Revised Code shall also be served upon the party's attorney by	1061
ordinary mail if the attorney has entered an appearance in the	1062
matter.	1063
(e) The superintendent may, at any time, perfect service on a	1064
party by personal delivery of the notice by an employee of the	1065
department.	1066
(f) Notices regarding the scheduling of hearings and all	1067
other matters not described in division (C)(1)(a) of this section	1068
shall be sent by ordinary mail to the party and to the party's	1069
attorney.	1070
(2) Any subpoena for the appearance of a witness or the	1071
production of documents or other evidence at a hearing, or for the	1072
purpose of taking testimony for use at a hearing, shall be served	1073
by certified mail, return receipt requested, by an attorney or by	1074
an employee of the department designated by the superintendent.	1075
Such subpoenas shall be enforced in the manner provided in section	1076
119.09 of the Revised Code. Nothing in this section shall be	1077
construed as limiting the superintendent's other statutory powers	1078
to issue subpoenas.	1079
(D) If the superintendent determines that a violation	1080
described in this section has occurred, the superintendent may	1081
take one or more of the following actions:	1082
(1) Assess a civil penalty in an amount not exceeding	1083
twenty-five thousand dollars per violation;	1084

(2) Assess administrative costs to cover the expenses

incurred by the department in the administrative action, including

as provided in division (D)(8) of this section.

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costs incurred in the investigation and hearing processes. Any	1087
costs collected shall be paid into the state treasury to the	1088
credit of the department of insurance operating fund created in	1089
section 3901.021 of the Revised Code.	1090
(3) Suspend all of the person's licenses for all lines of	1091
insurance for either a specified period of time or an indefinite	1092
period of time and under such terms and conditions as the	1093
superintendent may determine;	1094
(4) Permanently revoke all of the person's licenses for all	1095
lines of insurance;	1096
(5) Refuse to issue a license;	1097
(6) Refuse to renew a license;	1098
(7) Prohibit the person from being employed in any capacity	1099
in the business of insurance and from having any financial	1100
interest in any insurance agency, company, surety bail bond	1101
business, or third-party administrator in this state. The	1102
superintendent may, in the superintendent's discretion, determine	1103
the nature, conditions, and duration of such restrictions.	1104
(8) Order corrective actions in lieu of or in addition to the	1105
other penalties listed in division (D) of this section. Such an	1106
order may provide for the suspension of civil penalties, license	1107
revocation, license suspension, or refusal to issue or renew a	1108
license if the licensee complies with the terms and conditions of	1109
the corrective action order.	1110
(9) Accept a surrender for cause offered by the licensee,	1111
which shall be for at least five years and shall prohibit the	1112
licensee from seeking any license authorized under this chapter	1113
during that time period. A surrender for cause shall be in lieu of	1114
revocation or suspension and may include a corrective action order	1115

(E) The superintendent may consider the following factors in	1117
denying a license, imposing suspensions, revocations, fines, or	1118
other penalties, and issuing orders under this section:	1119
(1) Whether the person acted in good faith;	1120
(2) Whether the person made restitution for any pecuniary	1121
losses suffered by other persons as a result of the person's	1122
actions;	1123
(3) The actual harm or potential for harm to others;	1124
(4) The degree of trust placed in the person by, and the	1125
vulnerability of, persons who were or could have been adversely	1126
affected by the person's actions;	1127
(5) Whether the person was the subject of any previous	1128
administrative actions by the superintendent;	1129
(6) The number of individuals adversely affected by the	1130
person's acts or omissions;	1131
(7) Whether the person voluntarily reported the violation,	1132
and the extent of the person's cooperation and acceptance of	1133
responsibility;	1134
(8) Whether the person obstructed or impeded, or attempted to	1135
obstruct or impede, the superintendent's investigation;	1136
(9) The person's efforts to conceal the misconduct;	1137
(10) Remedial efforts to prevent future violations;	1138
(11) If the person was convicted of a criminal offense, the	1139
nature of the offense, whether the conviction was based on acts or	1140
omissions taken under any professional license, whether the	1141
offense involved the breach of a fiduciary duty, the amount of	1142
time that has passed, and the person's activities subsequent to	1143
the conviction;	1144
(12) Such other factors as the superintendent determines to	1145

be appropriate under the circumstances.	1146
(F)(1) A violation described in division $(B)(1)$, (2) , (3) ,	1147
(4), (5), (6), (7), (8), (9), (10), (11), (12), (13), (14), (16),	1148
(17), (18), <u>(19),</u> (20), (21), (22), (23), (24), (25), (26), (27),	1149
(28), (29), (30), (31), (32), or (33) <u>, (34), (35), and (36)</u> of	1150
this section is a class A offense for which the superintendent may	1151
impose any penalty set forth in division (D) of this section.	1152
(2) A violation described in division (B)(15) or $\frac{(19)(21)}{(21)}$ of	1153
this section, or a failure to comply with section 3905.061,	1154
3905.071, or 3905.22 of the Revised Code, is a class B offense for	1155
which the superintendent may impose any penalty set forth in	1156
division (D)(1), (2), (8), or (9) of this section.	1157
(3) If the superintendent determines that a violation	1158
described in division (B) $(33)(36)$ of this section has occurred,	1159
the superintendent shall impose a minimum of a two-year suspension	1160
on all of the person's licenses for all lines of insurance.	1161
(G) If a violation described in this section has caused, is	1162
causing, or is about to cause substantial and material harm, the	1163
superintendent may issue an order requiring that person to cease	1164
and desist from engaging in the violation. Notice of the order	1165
shall be mailed by certified mail, return receipt requested, or	1166
served in any other manner provided for in this section,	1167
immediately after its issuance to the person subject to the order	1168
and to all persons known to be involved in the violation. The	1169
superintendent may thereafter publicize or otherwise make known to	1170
all interested parties that the order has been issued.	1171
The notice shall specify the particular act, omission,	1172
practice, or transaction that is subject to the cease-and-desist	1173
order and shall set a date, not more than fifteen days after the	1174
date of the order, for a hearing on the continuation or revocation	1175

of the order. The person shall comply with the order immediately

upon receipt of notice of the order.	1177
The superintendent may, upon the application of a party and	1178
for good cause shown, continue the hearing. Chapter 119. of the	1179
Revised Code applies to such hearings to the extent that that	1180
chapter does not conflict with the procedures set forth in this	1181
section. The superintendent shall, within fifteen days after	1182
objections are submitted to the hearing officer's report and	1183
recommendation, issue a final order either confirming or revoking	1184
the cease-and-desist order. The final order may be appealed as	1185
provided under section 119.12 of the Revised Code.	1186
The remedy under this division is cumulative and concurrent	1187
with the other remedies available under this section.	1188
(H) If the superintendent has reasonable cause to believe	1189
that an order issued under this section has been violated in whole	1190
or in part, the superintendent may request the attorney general to	1191
commence and prosecute any appropriate action or proceeding in the	1192
name of the state against such person.	1193
The court may, in an action brought pursuant to this	1194
division, impose any of the following:	1195
(1) For each violation, a civil penalty of not more than	1196
twenty-five thousand dollars;	1197
(2) Injunctive relief;	1198
(3) Restitution;	1199
(4) Any other appropriate relief.	1200
(I) With respect to a surety bail bond agent license:	1201
(1) Upon the suspension or revocation of a license, or the	1202
eligibility of a surety bail bond agent to hold a license, the	1203
superintendent likewise may suspend or revoke the license or	1204
eligibility of any surety bail bond agent who is employed by or	1205
associated with that agent and who knowingly was a party to the	1206

act that resulted in the suspension or revocation.	1207
(2) The superintendent may revoke a license as a surety bail	1208
bond agent if the licensee is adjudged bankrupt.	1209
(J) Nothing in this section shall be construed to create or	1210
imply a private cause of action against an agent or insurer.	1211
Sec. 3905.16. (A)(1) Except as provided in division (A)(2) of	1212
this section, any person licensed as an agent under this chapter	1213
may at any time surrender any or all licenses held by the person.	1214
	1215
(2) No agent shall surrender the agent's licenses if the	1216
superintendent of insurance is investigating any allegation of	1217
wrongdoing by the agent or has initiated proceedings under Chapter	1218
119. of the Revised Code and notice of an opportunity for a	1219
hearing has been issued to the agent, and any attempt to so	1220
surrender is invalid.	1221
(B) $\underline{(1)}$ If an agent's license is surrendered, revoked, $\frac{\partial \mathbf{r}}{\partial \mathbf{r}}$	1222
suspended, canceled, or inactivated by request, all appointments	1223
held by the agent are void. If a new license is issued to that	1224
person or if that person's previous license is reinstated <u>or</u>	1225
renewed, any appointment of the person to represent an insurer	1226
must be made in accordance with the requirements of this chapter.	1227
(2) If an agent's license is surrendered, revoked, or	1228
canceled and the person wishes to apply for a new license, the	1229
person shall apply as a new agent and shall satisfy all	1230
requirements for a new agent license including, if applicable,	1231
submitting to a criminal records check under section 3905.051 of	1232
the Revised Code.	1233
(C)(1) Any agent, other than a business entity, who is no	1234
longer engaged in the business of insurance in any capacity for	1235
which an agent's license is required may apply to the	1236

contract is executed or the first insurance application is

submitted, whichever is earlier. The notice of appointment shall	1267
be provided in the manner prescribed by the superintendent.	1268
Each insurer shall pay to the superintendent a fee of twenty	1269
dollars pursuant to division (A) of section 3905.40 of the Revised	1270
Code for every such appointment when issued and for each	1271
continuance thereafter. Such an appointment, unless canceled by	1272
the insurer, may be continued in force past the thirtieth day of	1273
June next after its issue and after the thirtieth day of June of	1274
each succeeding year, unless a different date is determined by the	1275
superintendent.	1276
A separate appointment and fee are required for a variable	1277
life and variable annuity products line of authority.	1278
(2) By appointing an insurance agent, an insurer certifies to	1279
the superintendent that the person is competent, financially	1280
responsible, and suitable to represent the insurer.	1281
(3) While an appointment remains in force, an insurer shall	1282
be bound by the acts of the person named in the appointment within	1283
that person's actual and apparent authority as its agent.	1284
(C) The superintendent may, in accordance with Chapter 119.	1285
of the Revised Code, adopt rules to establish appointment	1286
procedures, including cancellations and renewals, to clarify the	1287
circumstances that require an appointment, and to provide for the	1288
appointment of insurance agents to some or all of the insurers	1289
within an insurer's holding company system or group.	1290
Sec. 3905.30. The superintendent of insurance may issue a	1291
surplus line broker's license to any natural person who is a	1292
resident of this or any other state or to a business entity that	1293
is organized under the laws of this or any other state. To be	1294
eligible for a <u>resident</u> surplus line broker's license, a person	1295
designated to a restrict parking rather provided by troctibe, a berpour	12/5

must have both a property license and a casualty license. A To be

eligible for a nonresident surplus line broker's license, a person	1297
must hold an active surplus line broker license in the person's	1298
home state. A nonresident surplus line broker shall obtain a	1299
nonresident license with a property and casualty line of authority	1300
in this state if the broker is or will be personally performing	1301
the due diligence requirements under section 3905.33 of the	1302
Revised Code.	1303

A surplus line broker's license permits the person named in 1304 the license to negotiate for and obtain insurance, other than life 1305 insurance, on property or persons in this state from insurers not 1306 authorized to transact business in this state. Each such license 1307 expires on the thirty-first day of January next after the year in 1308 which it is issued, and may be then renewed.

Sec. 3905.35. Before receiving an applicant receives a 1310 resident license under section 3905.30 of the Revised Code, the 1311 person named in the license shall execute and deliver to the 1312 superintendent of insurance a bond in the sum of twenty-five 1313 thousand dollars, payable to the state and conditioned that the 1314 person will faithfully comply with sections 3905.30 to 3905.35 of 1315 the Revised Code. The bond required by this section shall be 1316 issued by an insurance company authorized to transact surety 1317 business in this state, be on a form prescribed by the 1318 superintendent, and be deposited with the superintendent and kept 1319 in the superintendent's office. 1320

Sec. 3905.36. (A) Except as provided in divisions (B) and (C)

of this section, every insured association, company, corporation,

or other person that enters, directly or indirectly, into any

agreements with any insurance company, association, individual,

firm, underwriter, or Lloyd's, not authorized to do business in

this state, whereby the insured shall procure, continue, or renew

contracts of insurance covering subjects of insurance resident,

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located, or to be performed within this state, with such 1328 unauthorized insurance company, association, individual, firm, 1329 underwriter, or Lloyd's, for which insurance there is a gross 1330 premium, membership fee, assessment, dues, or other consideration 1331 charged or collected, shall annually, on or before the 1332 thirty-first day of January March, return to the superintendent of 1333 insurance a statement under oath showing the name and address of 1334 the insured, name and address of the insurer, subject of the 1335 insurance, general description of the coverage, and amount of 1336 gross premium, fee, assessment, dues, or other consideration for 1337 such insurance for the preceding twelve month period calendar year 1338 and shall at the same time pay to the treasurer of state a tax of 1339 five per cent of such gross premium, fee, assessment, dues, or 1340 other consideration, after a deduction for return premium, if any, 1341 as calculated on a form prescribed by the treasurer of state. All 1342 taxes collected under this section by the treasurer of state shall 1343 be paid into the general revenue fund. If the tax is not paid when 1344 due, the tax shall be increased by a penalty of twenty-five per 1345 cent. An interest charge computed as set forth in section 5725.221 1346 of the Revised Code shall be made on the entire sum of the tax 1347 plus penalty, which interest shall be computed from the date the 1348 tax is due until it is paid. For purposes of this section, payment 1349 is considered made when it is received by the treasurer of state, 1350 irrespective of any United States postal service marking or other 1351 stamp or mark indicating the date on which the payment may have 1352 been mailed. 1353

- (B) This section does not apply to:
- (1) Transactions in this state involving a policy solicited, 1355 written, and delivered outside this state covering only subjects 1356 of insurance not resident, located, or to be performed in this 1357 state at the time of issuance, provided such transactions are 1358 subsequent to the issuance of the policy; 1359

(2) Attorneys-at-law acting on behalf of their clients in the	1360
adjustment of claims or losses;	1361
(3) Transactions involving policies issued by a captive	1362
insurer. For this purpose, a "captive insurer" means any of the	1363
following:	1364
(a) An insurer owned by one or more individuals or	1365
organizations, whose exclusive purpose is to insure risks of one	1366
or more of the parent organizations or individual owners and risks	1367
of one or more affiliates of the parent organizations or	1368
individual owners;	1369
(b) In the case of groups and associations, insurers owned by	1370
the group or association whose exclusive purpose is to insure	1371
risks of members of the group or association and affiliates of the	1372
members;	1373
(c) Other types of insurers, licensed and operated in	1374
accordance with the captive insurance laws of their jurisdictions	1375
of domicile and operated in a manner so as to self-insure risks of	1376
their owners and insureds.	1377
(4) Professional or medical liability insurance procured by a	1378
hospital organized under Chapter 3701. of the Revised Code;	1379
(5) Insurance with an initial policy period of more than	1380
three years and that is procured to cover known events related to	1381
environmental remediation that occurred prior to the effective	1382
date of that insurance;	1383
(6) Insurance procured on behalf of an entity that	1384
manufactures, packages, and sells, as more than fifty per cent of	1385
the entity's business, pharmaceutical products for human use where	1386
the production, packaging, and sale of such products are subject	1387
to regulation by an agency of the United States.	1388
(C) In transactions that are subject to sections 3905.30 to	1389

3905.35 of the Revised Code, each person licensed under section	1390
3905.30 of the Revised Code shall pay to the treasurer of state,	1391
on or before the thirty-first day of January March of each year,	1392
five per cent of the balance of the gross premiums charged for	1393
insurance placed or procured under the license after a deduction	1394
for return premiums, as reported on a form prescribed by the	1395
treasurer of state. The tax shall be collected from the insured by	1396
the surplus line broker who placed or procured the policy of	1397
insurance at the time the policy is delivered to the insured. No	1398
license issued under section 3905.30 of the Revised Code shall be	1399
renewed until payment is made. If the tax is not paid when due,	1400
the tax shall be increased by a penalty of twenty-five per cent.	1401
An interest charge computed as set forth in section 5725.221 of	1402
the Revised Code shall be made on the entire sum of the tax plus	1403
penalty, which interest shall be computed from the date the tax is	1404
due until it is paid. For purposes of this section, payment is	1405
considered made when it is received by the treasurer of state,	1406
irrespective of any United States postal service marking or other	1407
stamp or mark indicating the date on which the payment may have	1408
been mailed.	1409

- sec. 3905.40. There shall be paid to the superintendent of
 insurance the following fees: 1411
- (A) Each insurance company doing business in this state shall 1412 pay:
- (1) For filing a copy of its charter or deed of settlement, 1414
 two hundred fifty dollars; 1415
- (2) For filing each statement, one hundred seventy-five 1416 dollars;
- (3) For each certificate of authority or license, one hundred 1418 seventy-five, and for each certified copy thereof, five dollars; 1419

any annual meeting of policyholders or at a special meeting of

policyholders called for that purpose.

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(E) Each insurance agent doing business in this state shall	1450
pay a biennial license renewal fee of twenty-five dollars, except	1451
the following insurance agents are not required to pay the license	1452
renewal fee:	1453
(1) Individual resident agents who have met their continuing	1454
education requirements under section 3905.481 of the Revised Code;	1455
(2) Surety bail bond agents;	1456
(3) Surplus line brokers.	1457
(F) All fees collected by the superintendent under this	1458
section except any fees collected under divisions (A)(2), (3), and	1459
(6) of this section shall be credited to the department of	1460
insurance operating fund created under section 3901.021 of the	1461
Revised Code.	1462
Sec. 3905.41. The superintendent of insurance may open an	1463
account in the name of each insurance company authorized to do	1464
business in this state and in the name of any authorized insurance	1465
agent, and charge the accounts with all fees incurred by such	1466
companies or agents in accordance with sections 3905.10, 3905.20,	1467
3905.40, 3919.26, and 3931.03 of the Revised Code, and other	1467
statutes imposing fees. The statutory fee for each service	1469
requested shall be charged against the proper account immediately upon the rendition of the service.	1470 1471
upon the renartion of the service.	14/1
Not later than the tenth day of each calendar month the	1472
superintendent shall render an itemized statement to each company	1473
or agent whose account has been charged during the month next	1474
preceding, showing the amount of all fees charged during that	1475
month and demanding that payment thereof be made not later than	1476
the first day of the month next following.	1477
The failure of any insurance company within that time to pay	1478
the amount of such fees in accordance with the monthly statement,	1479

or, if the statement or account is found to be incorrect, in 1480 accordance with a corrected monthly statement rendered by the 1481 superintendent, is grounds for the revocation of its certificate 1482 of authority to do business in this state. In the event of such an 1483 order of revocation, the superintendent shall immediately cause a 1484 notice thereof to be published once in at least one newspaper at 1485 the seat of the government and also, if a domestic company, once 1486 in at least one newspaper published in the county where its home 1487 office is located, or, if a foreign or alien company, once in at 1488 least one newspaper published in a county of this state where an 1489 agency of the company is located. After the publication of the 1490 notice, no agent of the company shall procure applications for 1491 insurance or issue policies. 1492

In the event of the failure of any agent within the time 1493 fixed to pay the amount of fees charged against the agent's 1494 account in accordance with the monthly statement rendered by the 1495 superintendent, the agent's license may be revoked in the manner 1496 provided by section 3905.14 of the Revised Code. 1497

Sec. 3905.481. (A)(1) Except as provided in division (B) of 1498 this section, each person Each individual who is issued a resident 1499 insurance agent license as an agent on or after the effective date 1500 of this amendment shall complete in accordance with division 1501 (A)(1) of this section at least twenty twenty-four hours of 1502 continuing education in each license renewal period. The 1503 continuing education shall be offered in a course or program of 1504 study approved by the superintendent of insurance in consultation 1505 with the insurance agent education advisory council and shall 1506 include at least three hours of approved ethics training. The 1507 person shall complete the initial twenty hours of continuing 1508 education during a period not to exceed twenty-four months 1509 commencing on the first day of January of the year immediately 1510 following the year of the issuance of the license and ending on 1511

Page 51

the thirty-first day of December of the second year following the	1512
year of the issuance of the license. Thereafter, the person shall	1513
complete at least twenty hours of continuing education in every	1514
subsequent twenty-four-month period commencing on the first day of	1515
January and ending on the thirty first day of December of the	1516
following year.	1517
(2) Except as provided in division (B) of this section, each	1518
person who, on the effective date of this amendment, holds a	1519
license as an agent issued prior to that date shall complete	1520
during that person's applicable twenty four month reporting	1521
period, at least twenty hours of continuing education offered in a	1522
course or program of study approved by the superintendent in	1523
consultation with the council. Thereafter, the person shall	1524
complete at least twenty hours of continuing education in every	1525
subsequent twenty four month period commencing on the first day of	1526
January and ending on the thirty first day of December of the	1527
following year.	1528
(B) Division (A) of this This section does not apply to any	1529
person or class of persons, as determined by the superintendent in	1530
consultation with the council.	1531
(C) A person may comply with division (A) of this section by	1532
demonstrating to the council that the person has completed the	1533
minimum number of hours required by that division in a	1534
substantially similar course or program of study offered in	1535
another state.	1536
Sec. 3905.483. (A) There is hereby created the insurance	1537
agent education advisory council to advise the superintendent of	1538
insurance in carrying out the duties imposed under sections	1539
3905.04 and 3905.481 to 3905.486 of the Revised Code.	1540
(B) The council shall be composed of the superintendent, or	1541
the superintendent's designee, and twelve members appointed by the	1542

term ending December 31, 2003. Thereafter, the term of office	L572
shall be for three years, ending on the thirty-first day of	L573
December of the third year.	L574
(D) Each member shall hold office from the date of	L575
appointment until the end of the term for which the member was	L576

appointment until the end of the term for which the member was

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appointed. Any member appointed to fill a vacancy occurring prior

to the expiration of the term for which the member's predecessor

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was appointed shall hold office for the remainder of such term.

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Any member shall continue in office subsequent to the expiration

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date of the member's term until the member's successor takes

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office, or until a period of sixty days has elapsed, whichever

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occurs first. A vacancy shall be filled in the same manner as the

original appointment. 1584

- (E) Initial appointments to the council shall be made no 1585 later than thirty days after April 16, 1993. The initial 1586 appointment of the twelfth member to the council under division 1587 (B)(7) of this section, pursuant to Am. Sub. S.B. 129 of the 124th 1588 general assembly, shall be made no later than December 31, 2002. 1589
- (F) Any member is eligible for reappointment. The
 superintendent, after notice and opportunity for a hearing, may
 remove for cause any member the superintendent appoints.
- (G) The superintendent or the superintendent's designee shall 1593 serve as chairperson of the council. Meetings shall be held upon 1594 the call of the chairperson and as may be provided by procedures 1595 adopted by the superintendent. Seven members of the council 1596 constitute a quorum.
- (H) Each member shall receive mileage and necessary and 1598 actual expenses while engaged in the business of the council. 1599
- sec. 3905.484. (A) The superintendent of insurance, in 1600
 consultation with the insurance agent education advisory council, 1601

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(4) The superintendent shall issue an applicant a nonresident	1722
business entity license that states in substance that the person	1723
is authorized to do the business of a surety bail bond agent if	1724
the superintendent is satisfied that all of the following apply:	1725
(a) The applicant has submitted an application for the	1726
license in a manner prescribed by the superintendent and the	1727
one-hundred-fifty-dollar application fee.	1728
(b) The applicant is currently licensed and is in good	1729
standing in the applicant's home state with surety bail bond	1730
authority.	1731
(c) The applicant has designated an individual licensed	1732
surety bail bond agent who will be responsible for the applicant's	1733
compliance with the insurance laws of this state.	1734
(d) The applicant has not committed any act that is grounds	1735
for the refusal to issue, suspension of, or revocation of a	1736
license under section 3905.14 of the Revised Code.	1737
(e) The applicant has submitted any other documents requested	1738
by the superintendent.	1739
(C) A <u>resident and nonresident</u> surety bail bond agent license	1740
issued pursuant to this section authorizes the holder, when	1741
appointed by an insurer, to execute or countersign bail bonds in	1742
connection with judicial proceedings and to receive money or other	1743
things of value for those services. However, the holder shall not	1744
execute or deliver a bond during the first one hundred eighty days	1745
after the license is initially issued. This restriction does not	1746
apply with respect to license renewals or any license issued under	1747
divisions (B)(3) and (4) of this section.	1748
(D) The superintendent of insurance may suspend or revoke	1749
refuse to renew a surety bail bond agent's license as provided in	1750
division (B) of section 3905.482 3905.88 of the Revised Code, and	1751
may suspend, revoke, or refuse to issue or renew such a license as	1752

provided in section 3905.14 of the Revised Code.	1753
If the superintendent refuses to issue such a license based	1754
in whole or in part upon the written response to a criminal	1755
records check requested completed pursuant to division (A) of this	1756
section, the superintendent shall send a copy of the response that	1757
was transmitted to the superintendent or to the superintendent's	1758
designee, to the applicant at the applicant's home address upon	1759
the applicant's submission of a written request to the	1760
superintendent.	1761
(E) Any person licensed as a surety bail bond agent may	1762
surrender the person's license in accordance with section 3905.16	1763
of the Revised Code.	1764
(F) Unless revoked or suspended by the superintendent of	1765
insurance or surrendered by the surety bail bond agent, such a	1766
license may, in the discretion of the superintendent and the	1767
payment of a one hundred fifty dollar fee, be renewed effective	1768
the first day of March next after its issue and after the first	1769
day of March in each succeeding year (1) A person seeking to renew	1770
a surety bail bond agent license shall apply annually for a	1771
renewal of the license on or before the last day of February.	1772
Applications shall be submitted to the superintendent on forms	1773
prescribed by the superintendent. Each application shall be	1774
accompanied by a one-hundred-fifty-dollar renewal fee.	1775
(2) To be eligible for renewal, an individual applicant shall	1776
complete the continuing education requirements pursuant to section	1777
3905.88 of the Revised Code prior to the renewal date.	1778
(3) If an applicant submits a completed renewal application,	1779
qualifies for renewal pursuant to divisions (F)(1) and (2) of this	1780
section, and has not committed any act that is a ground for the	1781
refusal to issue, suspension of, or revocation of a license under	1782
section 3905.14 or sections 3905.83 to 3905.99 of the Revised	1783

(5) A license issued under this section that is not renewed

on or before its late renewal date specified in division (F)(4) of

(6) If a license is suspended for nonrenewal pursuant to

division (F)(5) of this section, the individual or business entity

is eliqible to apply for reinstatement of the license within the

this section is automatically suspended for nonrenewal effective

the first day of April.

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twelve-month period following the date by which the license should	1814
have been renewed by complying with the reinstatement procedure	1815
established by the superintendent and paying all applicable fees	1816
required under this chapter.	1817
(7) A license that is suspended for nonrenewal that is not	1818
reinstated pursuant to division (F)(6) of this section	1819
automatically is canceled unless the superintendent is	1820
investigating any allegations of wrongdoing by the agent or has	1821
initiated proceedings under Chapter 119. of the Revised Code. In	1822
that case, the license automatically is canceled after the	1823
completion of the investigation or proceedings unless the	1824
superintendent revokes the license.	1825
(G) The superintendent of insurance may prescribe the forms	1826
to be used as evidence of the issuance of a license under this	1827
section. The superintendent shall require each licensee to	1828
acquire, from a source designated by the superintendent, a wallet	1829
identification card that includes the licensee's photograph and	1830
any other information required by the superintendent. The licensee	1831
shall keep the wallet identification card on the licensee's person	1832
while engaging in the bail bond business.	1833
(H)(1) The superintendent of insurance shall not issue or	1834
renew the license of a business entity organized under the laws of	1835
this or any other state unless the business entity is qualified to	1836
do business in this state under the applicable provisions of Title	1837
XVII of the Revised Code.	1838
(2) The failure of a business entity to be in good standing	1839
with the secretary of state or to maintain a valid appointment of	1840
statutory agent is grounds for suspending, revoking, or refusing	1841
to renew its license.	1842
(3) By applying for a surety bail bond agent license under	1843

this section, an individual or business entity consents to the

- jurisdiction of the courts of this state. 1845
- (I) A surety bail bond agent licensed pursuant to this 1846 section is an officer of the court.
- (J) Any fee collected under this section shall be paid into 1848 the state treasury to the credit of the department of insurance 1849 operating fund created by section 3901.021 of the Revised Code. 1850
- sec. 3905.86. (A) Any person licensed as a surety bail bond 1851
 agent may be appointed by an insurer in accordance with this 1852
 section. 1853
- (B) Each insurer shall certify to the superintendent of 1854 insurance before the thirtieth day of June each year the names and 1855 addresses of the surety bail bond agents for whom it requests 1856 appointments or the continuance of appointments To appoint a 1857 surety bail bond agent as its agent, an insurer shall file a 1858 notice of appointment with the superintendent of insurance in the 1859 manner prescribed by the superintendent. All insurers shall pay to 1860 the superintendent a fee of twenty dollars pursuant to division 1861 (A)(8) of section 3905.40 of the Revised Code for each such 1862 appointment when issued and for each continuance thereafter. Such 1863 an appointment, unless canceled by the insurer, may be continued 1864 in force past the thirtieth day of June next after its issue and 1865 after the thirtieth day of June of each succeeding year provided 1866 that the appointee is licensed and is eligible for the 1867 appointment. 1868

Any fee collected under this division shall be paid into the state treasury to the credit of the department of insurance 1870 operating fund created by section 3901.021 of the Revised Code. 1871

(C)(1) By appointing a surety bail bond agent, an insurercertifies to the superintendent that the person is competent,financially responsible, and suitable to represent the insurer.

(2) An insurer shall be bound by the acts of the person named 1875 in the appointment within that person's actual or apparent 1876 authority as its agent. 1877 (D) A surety bail bond agent shall not represent to the 1878 public that the agent has authority to represent a particular 1879 insurer until the insurer has acknowledged that authority by 1880 appointment of the agent in accordance with this section. 1881 Sec. 3905.862. Upon the expiration or cancellation of a 1882 surety bail bond agent's appointment, the agent shall not engage 1883 or attempt to engage in any activity requiring such an 1884 appointment. However, an insurer that cancels the appointment of a 1885 surety bail bond agent may authorize the agent to continue to 1886 attempt the arrest and surrender of a defendant for whom a bail 1887 bond had been written prior to the cancellation and to seek 1888 discharge of forfeitures and judgments. 1889 An insurer that cancels the appointment of a surety bail bond 1890 agent or allows that appointment to expire shall pay to the 1891 superintendent of insurance a fee pursuant to division (A)(9) of 1892 section 3905.40 of the Revised Code. 1893 Sec. 3905.87. (A) A surety bail bond agent shall not file a 1894 bond in any court of this state unless both of the following 1895 conditions are met: 1896 (1) The the agent is licensed and appointed under sections 1897 3905.83 to 3905.95 of the Revised Code and has registered with the 1898 clerk of that court pursuant to division (B) of this section, if 1899 registration is required by the court. 1900 (2) The agent has registered with the clerk of the court of 1901 common pleas of the county in which the agent resides. 1902

(B) To register with a court, a surety bail bond agent shall

file, with the clerk of the court, a copy of the agent's surety	1904
bail bond license, a copy of the agent's driver's license or state	1905
identification card, and a certified copy of the surety bail bond	1906
agent's appointment by power of attorney from each insurer that	1907
the surety bail bond agent represents. Registration and filing of	1908
a certified copy of a renewed power of attorney shall be performed	1909
An agent shall renew the agent's registration biennially by the	1910
first day of August of each odd-numbered year. The clerk of the	1911
court shall not accept the registration of a surety bail bond	1912
agent unless the surety bail bond agent is currently licensed and	1913
appointed in accordance with sections 3905.83 to 3905.95 of the	1914
Revised Code.	1915
(C) The clerk of the court shall make available a list of	1916
court-registered surety bail bond agents to the appropriate	1917
holding facility, jail, correction facility, or other similar	1918
entity within the court's jurisdiction annually not later than the	1919
first day of September. If an agent registers with a court after	1920
the last day of August, the court shall add that agent to the list	1921
and make the updated list available to the appropriate holding	1922
facility, jail, correction facility, or other similar entity	1923
within the court's jurisdiction within twenty-four hours of the	1924
court's approval of that registration.	1925
Sec. 3905.88. (A) Each individual who is issued a license as	1926
a resident surety bail bond agent shall complete, in accordance	1927

Sec. 3905.88. (A) Each individual who is issued a license as

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a resident surety bail bond agent shall complete, in accordance
with section 3905.481 of the Revised Code, at least fourteen seven
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hours of continuing education in each license renewal period. The
continuing education shall be offered in a course or program of
study related to the bail bond business that is approved by the
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superintendent of insurance in consultation with the insurance
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agent education advisory council and shall include at least one
hour of approved ethics training.
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(B) The superintendent shall, in accordance with section 1935 3905.482 of the Revised Code, suspend or revoke not renew the 1936 license of any surety bail bond agent who fails to meet the 1937 requirements of division (A) of this section and has not been 1938 granted an extension of time within which to complete the 1939 requirements or whose application for renewal does not meet the 1940 requirements of section 3905.85 of the Revised Code. 1941 (C) The superintendent shall adopt, in accordance with 1942 Chapter 119. of the Revised Code, any rule necessary to carry out 1943 the superintendent's duties under this section. 1944 Sec. 3905.89. Each person licensed under sections 3905.83 to 1945 3905.95 of the Revised Code shall notify in writing the 1946 appropriate insurer or managing general agent, and the clerk of 1947 the court of common pleas of the county in which the licensee 1948 resides is registered, within thirty days after a change in the 1949 licensee's principal business address or telephone number. 1950 This notification requirement is in addition to the 1951 notification requirements set forth in other provisions of this 1952 chapter. 1953 Sec. 3905.932. A surety bail bond agent or insurer shall not 1954 do any of the following: 1955 (A) Suggest or advise the employment of, or name for 1956 employment, any particular attorney to represent its principal; 1957 (B) Directly or indirectly solicit Solicit business in, or on 1958 the property or grounds of, a detention facility, as defined in 1959 section 2921.01 of the Revised Code, or in, or on the property or 1960 grounds of, any court. For purposes of this division, "solicit" 1961 includes, but is not limited to, the distribution of business 1962 cards, print advertising, or any other written information 1963

directed to prisoners or potential indemnitors, unless a request

is initiated by the prisoner or potential indemnitor. Permissible	1965
print advertising in a detention facility is strictly limited to a	1966
listing in a telephone directory and the posting of the surety	1967
bail bond agent's name, address, and telephone number in a	1968
designated location within the detention facility.	1969
(C) Wear or otherwise display any identification, other than	1970
the wallet identification card required under division (G) of	1971
section 3905.85 of the Revised Code, in or on the property or	1972
grounds of a detention facility, as defined in section 2921.01 of	1973
the Revised Code, or in or on the property or grounds of any	1974
court;	1975
(D) Pay a fee or rebate or give or promise anything of value	1976
to a jailer, law enforcement officer, committing magistrate, or	1977
other person who has power to arrest or to hold in custody, or to	1978
any public official or public employee, in order to secure a	1979
settlement, compromise, remission, or reduction of the amount of	1980
any bail bond or estreatment of bail;	1981
(E) Pay a fee or rebate or give or promise anything of value	1982
to an attorney in a bail bond matter, except in defense of any	1983
action on a bond;	1984
(F) Pay a fee or rebate or give or promise anything of value	1985
to the principal or to anyone in the principal's behalf;	1986
(G) Post anything without using a bail instrument	1987
representing an insurer, to have a defendant released on bail on	1988
all types of set court bail, except for the following:	1989
(1) Cash court fees or cash reparation fees;	1990
(2) Ten per cent assignments;	1991
(3) Other nonsurety court bonds, if the agent provides full	1992
written disclosure and receipts and retains copies of all	1993
documents and receipts for not less than three years.	1994

(H) Participate in the capacity of an attorney at a trial or	1995
hearing of a principal;	1996
(H)(I) Accept anything of value from a principal for	1997
providing a bail bond, other than the premium filed with and	1998
approved by the superintendent of insurance and an expense fee,	1999
except that the surety bail bond agent may, in accordance with	2000
section 3905.92 of the Revised Code, accept collateral security or	2001
other indemnity from a principal or other person together with	2002
documentary stamp taxes if applicable. No fees, expenses, or	2003
charges of any kind shall be deducted from the collateral held or	2004
any return premium due, except as authorized by sections 3905.83	2005
to 3905.95 of the Revised Code or by rule of the superintendent. A	2006
surety bail bond agent, upon written agreement with another party,	2007
may receive a fee or other compensation for returning to custody	2008
an individual who has fled the jurisdiction of the court or caused	2009
the forfeiture of a bond.	2010
$\frac{(I)}{(J)}$ Execute a bond in this state on the person's own	2011
behalf;	2012
$\frac{(J)}{(K)}$ Execute a bond in this state if a judgment has been	2013
entered on a bond executed by the surety bail bond agent, which	2014
judgment has remained unpaid for at least sixty days after all	2015
appeals have been exhausted, unless the full amount of the	2016
judgment is deposited with the clerk of the court.	2017
As used in this section, "instrument" means a fiduciary form	2018
showing a dollar amount for a surety bail bond.	2019
Sec. 3924.01. As used in sections 3924.01 to 3924.14 of the	2020
Revised Code:	2021
(A) "Actuarial certification" means a written statement	2022
prepared by a member of the American academy of actuaries, or by	2023
any other person acceptable to the superintendent of insurance,	2024

that states that, based upon the person's examination, a carrier 2025 offering health benefit plans to small employers is in compliance 2026 with sections 3924.01 to 3924.14 of the Revised Code. "Actuarial 2027 certification" shall include a review of the appropriate records 2028 of, and the actuarial assumptions and methods used by, the carrier 2029 relative to establishing premium rates for the health benefit 2030 plans.

- (B) "Adjusted average market premium price" means the average
 market premium price as determined by the board of directors of
 the Ohio health reinsurance program either on the basis of the
 arithmetic mean of all carriers' premium rates for an OHC plan
 sold to groups with similar case characteristics by all carriers
 selling OHC plans in the state, or on any other equitable basis
 determined by the board.
- (C) "Base premium rate" means, as to any health benefit plan 2039 that is issued by a carrier and that covers at least two but no 2040 more than fifty employees of a small employer, the lowest premium 2041 rate for a new or existing business prescribed by the carrier for 2042 the same or similar coverage under a plan or arrangement covering 2043 any small employer with similar case characteristics. 2044
- (D) "Carrier" means any sickness and accident insurance 2045 company or health insuring corporation authorized to issue health 2046 benefit plans in this state or a MEWA. A sickness and accident 2047 insurance company that owns or operates a health insuring 2048 corporation, either as a separate corporation or as a line of 2049 business, shall be considered as a separate carrier from that 2050 health insuring corporation for purposes of sections 3924.01 to 2051 3924.14 of the Revised Code. 2052
- (E) "Case characteristics" means, with respect to a small 2053 employer, the geographic area in which the employees work; the age 2054 and sex of the individual employees and their dependents; the 2055 appropriate industry classification as determined by the carrier; 2056

the number of employees and dependents; and such other objective	2057
criteria as may be established by the carrier. "Case	2058
characteristics" does not include claims experience, health	2059
status, or duration of coverage from the date of issue.	2060

- (F) "Dependent" means the spouse or child of an eligibleemployee, subject to applicable terms of the health benefits plancovering the employee.
- (G) "Eligible employee" means an employee who works a normal 2064 work week of twenty-five or more hours. "Eligible employee" does 2065 not include a temporary or substitute employee, or a seasonal 2066 employee who works only part of the calendar year on the basis of 2067 natural or suitable times or circumstances. 2068
- (H) "Health benefit plan" means any hospital or medical 2069 expense policy or certificate or any health plan provided by a 2070 carrier, that is delivered, issued for delivery, renewed, or used 2071 in this state on or after the date occurring six months after 2072 November 24, 1995. "Health benefit plan" does not include policies 2073 covering only accident, credit, dental, disability income, 2074 long-term care, hospital indemnity, medicare supplement, specified 2075 disease, or vision care; coverage under a 2076 one-time-limited-duration policy of no longer than six months; 2077 coverage issued as a supplement to liability insurance; insurance 2078 arising out of a workers' compensation or similar law; automobile 2079 medical-payment insurance; or insurance under which benefits are 2080 payable with or without regard to fault and which is statutorily 2081 required to be contained in any liability insurance policy or 2082 equivalent self-insurance. 2083
- (I) "Late enrollee" means an eligible employee or dependent 2084 who enrolls in a small employer's health benefit plan other than 2085 during the first period in which the employee or dependent is 2086 eligible to enroll under the plan or during a special enrollment 2087 period described in section 2701(f) of the "Health Insurance 2088

Portability and Accountability Act of 1996, Pub. L. No. 104-191,	2089
110 Stat. 1955, 42 U.S.C.A. 300gg, as amended.	2090
(J) "MEWA" means any "multiple employer welfare arrangement"	2091
as defined in section 3 of the "Federal Employee Retirement Income	2092
Security Act of 1974," 88 Stat. 832, 29 U.S.C.A. 1001, as amended,	2093
except for any arrangement which is fully insured as defined in	2094
division (b)(6)(D) of section 514 of that act.	2095
(K) "Midpoint rate" means, for small employers with similar	2096
case characteristics and plan designs and as determined by the	2097
applicable carrier for a rating period, the arithmetic average of	2098
the applicable base premium rate and the corresponding highest	2099
premium rate.	2100
(L) "Pre-existing conditions provision" means a policy	2101
provision that excludes or limits coverage for charges or expenses	2102
incurred during a specified period following the insured's	2103
enrollment date as to a condition for which medical advice,	2104
diagnosis, care, or treatment was recommended or received during a	2105
specified period immediately preceding the enrollment date.	2106
Genetic information shall not be treated as such a condition in	2107
the absence of a diagnosis of the condition related to such	2108
information.	2109
For purposes of this division, "enrollment date" means, with	2110
respect to an individual covered under a group health benefit	2111
plan, the date of enrollment of the individual in the plan or, if	2112
earlier, the first day of the waiting period for such enrollment.	2113
(M) "Service waiting period" means the period of time after	2114
employment begins before an employee is eligible to be covered for	2115
benefits under the terms of any applicable health benefit plan	2116
offered by the small employer.	2117

(N)(1) "Small employer" means, in connection with a group 2118 health benefit plan and with respect to a calendar year and a plan 2119

year, an employer who employed an average of at least two but no 2120 more than fifty eligible employees on business days during the 2121 preceding calendar year and who employs at least two employees on 2122 the first day of the plan year. 2123

- (2) For purposes of division (N)(1) of this section, all 2124 persons treated as a single employer under subsection (b), (c), 2125 (m), or (o) of section 414 of the "Internal Revenue Code of 1986," 2126 100 Stat. 2085, 26 U.S.C.A. 1, as amended, shall be considered one 2127 employer. In the case of an employer that was not in existence 2128 throughout the preceding calendar year, the determination of 2129 whether the employer is a small or large employer shall be based 2130 on the average number of eligible employees that it is reasonably 2131 expected the employer will employ on business days in the current 2132 calendar year. Any reference in division (N) of this section to an 2133 "employer" includes any predecessor of the employer. Except as 2134 otherwise specifically provided, provisions of sections 3924.01 to 2135 3924.14 of the Revised Code that apply to a small employer that 2136 has a health benefit plan shall continue to apply until the plan 2137 anniversary following the date the employer no longer meets the 2138 requirements of this division. 2139
- (O) "OHC plan" means an Ohio health care plan, which is the 2140 basic, standard, or carrier reimbursement plan for small employers 2141 and individuals established by the board in accordance with 2142 section 3924.10 of the Revised Code. 2143
- sec. 3924.09. The Ohio health reinsurance program shall have 2144 the general powers and authority granted under the laws of the 2145 state to insurance companies licensed to transact sickness and 2146 accident insurance, except the power to issue insurance. The board 2147 of directors of the program also shall have the specific authority 2148 to do all of the following: 2149
 - (A) Enter into contracts as are necessary or proper to carry

out the provisions and purposes of sections 3924.07 to 3924.14 of	2151
the Revised Code, including the authority to enter into contracts	2152
with similar programs of other states for the joint performance of	2153
common functions, or with persons or other organizations for the	2154
performance of administrative functions;	2155
(B) Sue or be sued, including taking any legal actions	2156
necessary or proper for recovery of any assessments for, on behalf	2157
of, or against any program or board member;	2158
(C) Take such legal action as is necessary to avoid the	2159
payment of improper claims against the program;	2160
(D) Design Make recommendations to the superintendent of	2161
insurance regarding the design of the OHC plans which, when	2162
offered by a carrier, are eligible for reinsurance and issue	2163
reinsurance policies in accordance with the requirements of	2164
sections 3924.07 to 3924.14 of the Revised Code;	2165
(E) Establish rules, conditions, and procedures pertaining to	2166
the reinsurance of members' risks by the program;	2167
(F) Establish appropriate rates, rate schedules, rate	2168
adjustments, rate classifications, and any other actuarial	2169
functions appropriate to the operation of the program;	2170
(G) Assess members in accordance with division (G) of section	2171
3924.11 and the provisions of section 3924.13 of the Revised Code,	2172
and make such advance interim assessments as may be reasonable and	2173
necessary for organizational and interim operating expenses. Any	2174
interim assessments shall be credited as offsets against any	2175
regular assessments due following the close of the calendar year.	2176
(H) Appoint members to appropriate legal, actuarial, and	2177
other committees if necessary to provide technical assistance with	2178
respect to the operation of the program, policy and other contract	2179
design, and any other function within the authority of the	2180
program;	2181

(I) Borrow money to effect the purposes of the program. Any	2182
notes or other evidence of indebtedness of the program not in	2183
default shall be legal investments for carriers and may be carried	2184
as admitted assets.	2185
(J) Reinsure risks, collect assessments, and otherwise carry	2186
out its duties under division (G) of section 3924.11 of the	2187
Revised Code;	2188
(K) Study the operation of the Ohio health reinsurance	2189
program and the open enrollment reinsurance program and, based on	2190
its findings, make legislative recommendations to the general	2191
assembly for improvements in the effectiveness, operation, and	2192
integrity of the programs;	2193
(L) Design a basic and standard plan for purposes of sections	2194
1751.16, 3923.122, and 3923.581 of the Revised Code.	2195
Sec. 3924.10. (A) The board of directors of the Ohio health	2196
reinsurance program shall design may make recommendations to the	2197
superintendent of insurance, and the superintendent may adopt or	2198
amend by rule adopted in accordance with Chapter 119. of the	2199
Revised Code, the OHC basic, standard, and carrier reimbursement	2200
plans which, when offered by a carrier, are eligible for	2201
reinsurance under the program. The board <u>superintendent</u> shall	2202
establish the form and level of coverage to be made available by	2203
carriers in their OHC plans. In designing the <u>The</u> plans the board	2204
shall also establish <u>include</u> benefit levels, deductibles,	2205
coinsurance factors, exclusions, and limitations for the plans.	2206
The forms and levels of coverage established by the board shall	2207
specify which components of health benefit plans offered by a	2208
carrier may be reinsured. The OHC plans are subject to division	2209
(C) of section 3924.02 of the Revised Code and to the provisions	2210
in Chapters 1751., 1753., 3923., and any other chapter of the	2211

Revised Code that require coverage or the offer of coverage of a

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designed or adopted under this section. Upon receipt by the	2243
superintendent of the certification, the carrier may use the	2244
certified plans.	2245
(E) Each carrier shall, on and after sixty days after the	2246
date that the program becomes operational and as a condition of	2247
transacting business in this state, renew coverage provided to any	2248
individual or group under its OHC plans.	2249
(F) The OHC plans in effect as of June 1, 2009, shall remain	2250
in effect until those plans are amended or new plans are adopted	2251
in accordance with this section.	2252
	0.050
Sec. 3929.30. The president or the vice-president and the	2253
secretary of each insurance company organized under the laws of	2254
this or any other state and doing business in this state,	2255
annually, on the first day of January or within sixty days	2256
thereafter, shall prepare, under oath, and deposit in the office	2257
of the superintendent of insurance a statement of the condition of	2258
such company on the next preceding thirty-first day of December.	2259
The statement shall be submitted on the forms adopted by the	2260
superintendent pursuant to section 3901.77 of the Revised Code,	2261
and shall exhibit the following facts and items:	2262
(A) The amount of the capital stock of the company,	2263
specifying the amount paid and unpaid;	2264
(B) A detailed statement of all the assets of the company and	2265
the manner of their investment.	2266
(C) The liabilities of the company, specifying:	2267
(1) The amount of losses due and unpaid;	2268
(2) The amount of claims for losses resisted by the company;	2269
(3) The amount of losses incurred during the year, including	2270
those claimed and not due, and those reported to the company upon	2271
which no action has been taken;	2272

(i) Averaged over the period of four years prior to the date 2361 on which the association becomes obligated with respect to the 2362 policy or contract or if the policy or contract has been issued 2363 for a lesser period averaged over that period, exceeds the rate of 2364 interest determined by subtracting two percentage points from the 2365 monthly average-corporates as published by Moody's investors 2366 service, inc., or any successor to that service, averaged for the 2367 same period; 2368 (ii) On and after the date on which the association becomes 2369 obligated with respect to the policy or contract, exceeds the rate 2370 of interest determined by subtracting three percentage points from 2371 the monthly average-corporates as published by Moody's investors 2372 service, inc., or any successor to that service, as most recently 2373 available. 2374 If the monthly average-corporates is no longer published, the 2375 superintendent, by rule, shall establish a substantially similar 2376 2377 average. (d) Any plan or program of an employer, association, or 2378 similar entity to provide life, health, or annuity benefits to its 2379 employees or members to the extent that the plan or program is 2380 self-funded or uninsured, including but not limited to benefits 2381 payable by an employer, association, or similar entity under any 2382 of the following: 2383 (i) A multiple employer welfare arrangement as defined in 2384 section 514 of the "Employee Retirement Income Security Act of 2385 1974," 88 Stat. 833, 29 U.S.C.A. 1001, as amended; 2386 (ii) A minimum premium group insurance plan; 2387 (iii) A stop-loss group insurance plan; 2388 (iv) An administrative services only contract. 2389 (e) Any portion of a policy or contract to the extent that it 2390

As Reported by the Senate Insurance, Commerce and Labor Committee	
provides dividends or experience rating credits, or provides that	2391
any fees or allowances be paid to any person, including the policy	2392
or contract holder, in connection with the service to or	2393
administration of the policy or contract;	2394
(f) Any policy or contract issued in this state by a member	2395
insurer at a time when it was not licensed or did not have a	2396
certificate of authority to issue the policy or contract in this	2397
state;	2398
(g) Any unallocated annuity contract issued to an employee	2399
benefit plan protected under the federal pension benefit guaranty	2400
corporation;	2401
(h) Any portion of any unallocated annuity contract that is	2402
not issued to or in connection with a governmental lottery or a	2403
benefit plan of a specific employee, union, or association of	2404
natural persons;	2405
(i) Any policy or contract issued to or for the benefit of a	2406
past or present director or officer within one year of the filing	2407
of the successful complaint that the insurer was impaired or	2408
insolvent;	2409
(j) Any policy or contract issued by any entity described in	2410
division (F)(2) of section 3956.01 of the Revised Code;	2411
(k) Any policy or contract issued by a member insurer if the	2412
member insurer is carrying on as a line of business, and not as a	2413
separate legal entity, the activities of any entity described in	2414
division $(F)(2)$ of section 3956.01 of the Revised Code, and the	2415
policy or contract is issued as a product of those activities.	2416
(C) The benefits for which the association may become liable	2417
shall not exceed the lesser of either of the following:	2418
(1) The contractual obligations for which the insurer is	2419
liable or would have been liable if it were not an impaired or	2420

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insolvent insurer;	2421
(2)(a) With respect to any one life, regardless of the number	2422
of policies or contracts:	2423
(i) Three hundred thousand dollars in life insurance death	2424
benefits, but not more than one hundred thousand dollars in net	2425
cash surrender and net cash withdrawal values for life insurance;	2426
(ii) One hundred thousand dollars in health insurance	2427
benefits, including any net cash surrender and net cash withdrawal	2428
values;	2429
(iii) Θ ne Two hundred fifty thousand dollars in the present	2430
value of annuity benefits, including net cash surrender and net	2431
cash withdrawal values.	2432
(b) With respect to each individual participating in a	2433
governmental retirement plan established under section 401,	2434
403(b), or 457 of the "Internal Revenue Code of 1986," 100 Stat.	2435
2085, 26 U.S.C.A. 1, as amended, and covered by an unallocated	2436
annuity contract, or the beneficiaries of each such individual if	2437
deceased, in the aggregate, one two hundred fifty thousand dollars	2438
in present value annuity benefits, including net cash surrender	2439
and net cash withdrawal values.	2440
The association is not liable to expend more than three	2441
hundred thousand dollars in the aggregate with respect to any one	2442
individual under divisions (C)(2)(a) and (b) of this section	2443
combined.	2444
(c) With respect to any one contract holder, covered by any	2445
unallocated annuity contract not included in division (C)(2)(b) of	2446
this section, one million dollars in benefits, irrespective of the	2447
number of those contracts held by that contract holder.	2448
(D) The liability of the association is limited strictly by	2449
the express terms of the policies or contracts and by this	2450

chapter, and is not affected by the contents of any brochures,	2451
illustrations, advertisements in the print or electronic media, or	2452
other advertising material used in connection with the sale of the	2453
policies or contracts, or by oral statements made by agents or	2454
other sales representatives in connection with the sale of the	2455
policies or contracts. The association is not liable for	2456
extra-contractual damages, punitive damages, attorney's fees, or	2457
interest other than as provided for by the terms of the policies	2458
or contracts as limited by this chapter, that might be awarded by	2459
any court or governmental agency in connection with the policies	2460
or contracts.	2461

- (E) The protection provided by this chapter does not apply 2462 where any guaranty protection is provided to residents of this 2463 state by the laws of the domiciliary state or jurisdiction of the impaired or insolvent insurer other than this state. 2465
- Sec. 3960.03. All of the following apply to risk retention 2466 groups chartered and licensed in states other than this state, 2467 that seek to do business as a risk retention group in this state: 2468
- (A) No risk retention group shall offer insurance in this 2469 state unless it has submitted to the superintendent of insurance, 2470 in a form satisfactory to the superintendent, all of the 2471 following:
- (1) A statement identifying the state or states in which it
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 is chartered and licensed as a liability insurance company, the
 date of chartering, its principal place of business, and any other
 information, including but not limited to, information on its
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 membership, that the superintendent may require to verify that it
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 is qualified under division (J) of section 3960.01 of the Revised
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 Code;
- (2) A copy of its plan of operation or a feasibility study 2480 and revisions of the plan or study submitted to the state in which 2481

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the risk retention group is chartered and licensed. Division	2482
(A)(2) of this section does not apply to any line or	2483
classification of liability insurance that was defined in the	2484
federal "Product Liability Risk Retention Act of 1981," 95 Stat.	2485
949, 15 U.S.C.A. 3901, as amended, before October 27, 1986, and	2486
was offered before that date by any risk retention group that had	2487
been chartered and operating for not less than three years before	2488
that date. The risk retention group shall submit a copy of any	2489
revision to its plan of operation or feasibility study required by	2490
division (A)(2) of section 3960.02 of the Revised Code at the same	2491
time that the revision is submitted to the commissioner of	2492
insurance of its chartering state.	2493

- (3) A statement of registration, for which a filing fee shall 2494 be determined by the superintendent, that submits it to the 2495 jurisdiction of the superintendent and the courts of this state. 2496 The fee shall be paid into the state treasury to the credit of the 2497 department of insurance operating fund pursuant to section 2498 3901.021 of the Revised Code. 2499
- (B) A risk retention group doing business in this state shall 2500 submit to the superintendent all of the following: 2501
- (1) A copy of its financial statement submitted to the state 2502 in which the risk retention group is chartered and domiciled, 2503 which shall be certified by an independent public accountant and 2504 contain a statement of opinion on loss and loss adjustment expense 2505 reserves made by a member of the American academy of actuaries or 2506 a qualified loss reserve specialist under criteria established by 2507 the national association of insurance commissioners; 2508
- (2) A copy of each examination of the group as certified by the commissioner or public official conducting the examination;
- (3) Upon request by the superintendent, a copy of any 2511 information or document pertaining to any outside audit performed 2512

increased by a penalty of twenty-five per cent. An interest charge 2543 computed as set forth in section 5725.221 of the Revised Code 2544 shall be made on the entire sum of the tax plus penalty, which 2545 interest shall be computed from the date the tax is due until it 2546 is paid. All taxes collected under this section shall be paid into 2547 the general revenue fund. For purposes of division (D)(1) of this 2548 section, payment is considered made when it is received by the 2549 treasurer of state, irrespective of any United States postal 2550 service marking or other stamp or mark indicating the date on 2551 which the payment may have been mailed. 2552

- (2) On or before the thirty-first day of January March, file 2553 a statement with the superintendent, on a form prescribed by the 2554 superintendent, showing the name and address of the insured, name 2555 and address of the insurer, subject of the insurance, general 2556 description of the coverage, the amount of gross premium, fee, 2557 assessment, dues, or other consideration for the insurance, after 2558 a deduction for return premium, if any, and any other information 2559 the superintendent requires. 2560
- (E) The superintendent may examine the financial condition of 2561 a risk retention group if the commissioner of insurance in the 2562 state in which it is chartered and licensed has not initiated an 2563 examination or does not initiate an examination within sixty days 2564 after the superintendent has requested an examination. The 2565 examination shall be conducted in an expeditious manner and in 2566 accordance with the national association of insurance 2567 commissioners' examiner handbook. 2568
- (F) The superintendent may issue any order appropriate in 2569 voluntary dissolution proceedings or commence delinquency 2570 proceedings against a risk retention group not chartered in this 2571 state that does business in this state if the superintendent 2572 finds, after an examination of the group under division (E) of 2573 this section, that its financial condition is impaired. A risk 2574

retention group that violates any provision of this chapter is

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subject to fines and penalties, including revocation of its right
to do business in this state, applicable to licensed insurers
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generally. In addition to complying with the requirements of this
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section, any risk retention group operating in this state prior to
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enactment of this section shall comply with division (A)(1) of
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this section within thirty days after October 26, 1989.

- Sec. 5725.18. (A) An annual franchise tax on the privilege of 2582 being an insurance company is hereby levied on each domestic 2583 insurance company. In the month of May, annually, the treasurer of 2584 state shall charge for collection from each domestic insurance 2585 company a franchise tax in the amount computed in accordance with 2586 the following, as applicable: 2587
- (1) With respect to a domestic insurance company that is a 2588 health insuring corporation, one per cent of all premium rate 2589 payments received, exclusive of payments received under the 2590 medicare program established under Title XVIII of the "Social 2591 Security Act, 49 Stat. 620 (1935), 42 U.S.C.A. 301, as amended, 2592 and exclusive of payments received pursuant to the medical 2593 assistance program established under Chapter 5111. of the Revised 2594 Code for the period ending September 30, 2009, as reflected in its 2595 annual report for the preceding calendar year; 2596
- (2) With respect to a domestic insurance company that is not 2597 a health insuring corporation, one and four-tenths per cent of the 2598 gross amount of premiums received from policies covering risks 2599 within this state, exclusive of premiums received under the 2600 medicare program established under Title XVIII of the "Social 2601 Security Act, 49 Stat. 620 (1935), 42 U.S.C.A. 301, as amended, 2602 and exclusive of payments received pursuant to the medical 2603 assistance program established under Chapter 5111. of the Revised 2604 Code for the period ending September 30, 2009, as reflected in its 2605

annual statement for the preceding calendar year, and, if the	2606
company operates a health insuring corporation as a line of	2607
business, one per cent of all premium rate payments received from	2608
that line of business, exclusive of payments received under the	2609
medicare program established under Title XVIII of the "Social	2610
Security Act," 49 Stat. 620 (1935), 42 U.S.C.A. 301, as amended,	2611
and exclusive of payments received pursuant to the medical	2612
assistance program established under Chapter 5111. of the Revised	2613
Code for the period ending September 30, 2009, as reflected in its	2614
annual statement for the preceding calendar year.	2615

Domestic insurance companies, including health insuring 2616 corporations, receiving payments pursuant to the medical 2617 assistance program established under Chapter 5111. of the Revised 2618 Code during the period beginning October 1, 2009, and ending 2619 December 31, 2009, shall file with the 2009 annual statement to 2620 the superintendent a schedule that reflects those payments 2621 received pursuant to the medical assistance program for that 2622 period. The payments reflected in the schedule, plus all other 2623 taxable premiums, are subject to the annual franchise tax due to 2624 be paid in 2010. 2625

- (B) The gross amount of premium rate payments or premiums 2626 used to compute the applicable tax in accordance with division (A) 2627 of this section is subject to the deductions prescribed by section 2628 5729.03 of the Revised Code for foreign insurance companies. The 2629 objects of such tax are those declared in section 5725.24 of the 2630 Revised Code, to which only such tax shall be applied. 2631
- (C) In no case shall such tax be less than two hundred fifty 2632 dollars.

Section 2. That existing sections 1751.33, 1753.33, 3901.021, 2634 3903.81, 3903.83, 3905.04, 3905.041, 3905.05, 3905.06, 3905.061, 2635 3905.07, 3905.071, 3905.12, 3905.14, 3905.16, 3905.20, 3905.30, 2636

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3905.35, 3905.36, 3905.40, 3905.41, 3905.481, 3905.483, 3905.484,	2637
3905.841, 3905.85, 3905.86, 3905.862, 3905.87, 3905.88, 3905.89,	2638
3905.932, 3924.01, 3924.09, 3924.10, 3929.30, 3956.04, 3960.03,	2639
and 5725.18 and sections 3905.10 and 3905.482, and 3929.301 of the	2640
Revised Code are hereby repealed.	2641
Section 3. Sections 1 and 2 of this act take effect on the	2642
ninetieth day after the effective date of this act. The	2643
Superintendent of Insurance may further delay the implementation	2644
and enforcement of the requirements amended, enacted, or repealed	2645
by those sections under Section 6 of this act.	2646
	2647
Section 4. Notwithstanding section 3905.481 of the Revised	2648
Code, the Superintendent of Insurance shall establish a prorated	2649
phase-in schedule for the completion of continuing education	2650
requirements for the first license renewal period after the	2651
effective date of this act.	2652
Section 5. For the time period beginning on the effective	2653
date of Sections 1 and 2 of this act and ending upon	2654
implementation and enforcement of section 3905.40 of the Revised	2655
Code as amended by this act, each applicant for licensure as an	2656
insurance agent except applicants for licensure as surety bail	2657
bond agents and surplus line brokers shall pay ten dollars for	2658
each line of authority requested. Fees collected under this	2659
section shall be credited to the Department of Insurance Operating	2660
Fund created in section 3901.021 of the Revised Code.	2661
Section 6. (A) The Superintendent of Insurance may delay the	2662

implementation and enforcement of the requirements of sections

3901.021, 3905.04, 3905.041, 3905.05, 3905.051, 3905.06, 3905.061,

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3905.07, 3905.071, 3905.10, 3905.12, 3905.14, 3905.16, 3905.20,	2665
3905.30, 3905.35, 3905.36, 3905.40, 3905.41, 3905.481, 3905.482,	2666
3905.483, 3905.484, 3905.841, 3905.85, 3905.86, 3905.862, 3905.87,	2667
3905.88, 3905.89, 3905.932, and 3960.03 of the Revised Code as	2668
amended, enacted, or repealed by this act until the earlier of	2669
January 1, 2011, or thirty days after the Superintendent of	2670
Insurance determines that the Department of Insurance is able to	2671
implement those requirements and places a notification of that	2672
determination on the Department's web site. The Department shall	2673
place a notification on the Department's web site stating the	2674
effective date of the amendments, enactments, and repeals that are	2675
delayed under this section.	2676
(B) The Superintendent shall continue to enforce requirements	2677
of the sections listed in division (A) of this section, as they	2678
existed immediately prior to the effective date of this act, until	2679
the Superintendent implements requirements amended, enacted, or	2680
repealed by this act pursuant to division (A) of this section.	2681
Section 7. Sections 1753.33 and 3903.83 of the Revised Code,	2682
as amended by this act, shall take effect on January 1, 2012, for	2683
year-end 2012 results.	2684
Section 8. Section 3956.04 of the Revised Code, as amended by	2685
this act, shall not apply to any liability incurred by the Ohio	2686
Life and Health Insurance Guaranty Association from an insurer	2687
that is an impaired or insolvent insurer on the effective date of	2688
this act.	2689
Section 9. (A) Notwithstanding the duration of coverage	2690
specified in sections 1751.53 and 3923.38 of the Revised Code, a	2691

group contract or group policy that is delivered, issued for

delivery, or renewed in this state on or after the effective date

of this act shall provide that any eligible employee may continue	2694
the coverage under the contract or policy, for the employee and	2695
the employee's eligible dependents, for the length of time for	2696
which the employee is eligible for federal continuation coverage	2697
premium subsidies but not longer than fifteen months after the	2698
date that the group coverage would otherwise terminate by reason	2699
of the termination of the employee's employment. Expiration of the	2700
subsidized period or fifteen months, whichever occurs first, shall	2701
end the employee's privilege to continue coverage and shall end	2702
any coverage being continued pursuant to this section.	2703
As used in this section:	2704
(1) "Group contract" has the same meaning as in section	2705
1751.53 of the Revised Code.	2706
(2) "Group policy" has the same meaning as in section 3923.38	2707
of the Revised Code.	2708
(3) "Eligible employee" has the same meaning as in section	2709
1751.53 of the Revised Code for purposes of group contracts and	2710
the same meaning as in section 3923.38 of the Revised Code for	2711
purposes of group policies, but includes only those individuals	2712
who are eligible for continuation coverage premium subsidies from	2713
the federal government.	2714
(B) This section does not apply to an individual who is not	2715
an eligible employee as defined under division (A)(3) of this	2716
section.	2717
	0710
Section 10. Section 9 of this act shall apply until the day	2718
after the last loss-of-employment date for which the federal	2719
government is subsidizing continuation coverage.	2720
Section 11. This act is hereby declared to be an emergency	2721

measure necessary for the immediate preservation of the public

As Reported by the Senate Insurance, Commerce and Labor Committee	
peace, health, and safety. The reason for such a necessity is to	2723
provide as many Ohioans as possible the opportunity to take	2724
advantage of federal subsidies for the continuation of health	2725
insurance coverage following a loss of employment. Therefore, this	2726
act shall go into immediate effect.	2727

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