- 1 HB567
- 2 127560-2
- 3 By Representative Hill
- 4 RFD: Insurance
- 5 First Read: 20-MAR-12

Τ	12/360-2:11	1:U3/14/2U12:FC/MCW LR52U11-1314R1
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8	SYNOPSIS:	Under existing law, an insurer is required
9		to maintain certain minimal levels of unimpaired
10		capital to be authorized to transact business in
11		this state and is required to meet certain other
12		requirements based on the amount of risk taken. A
13		life and health insurer is subject to a company
14		action level event when the risk-based capital
15		report indicates certain levels.
16		This bill would also subject property and
17		casualty insurers to a company action level event
18		when the risk-based capital report indicates
19		certain specified levels. The bill would also
20		correct an error in citation and make clarifying
21		nonsubstantive changes.
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23		A BILL
24		TO BE ENTITLED
25		AN ACT
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1 Relating to insurance; to amend Sections 27-2B-2, 2 27-2B-3, and 27-2B-4 of the Code of Alabama 1975, to provide that a property and casualty insurer would be subject to a 3 company action level event when its risk-based capital report indicates certain specified levels. 5 BE IT ENACTED BY THE LEGISLATURE OF ALABAMA: 6 7 Section 1. Sections 27-2B-2, 27-2B-3, and 27-2B-4, Code of Alabama 1975, are amended to read as follows: 8 "\$27-2B-2. 9 10 "As used in this chapter, these terms shall have the 11 following meanings: 12 "(1) ADJUSTED RBC REPORT. An RBC report which has 13 been adjusted by the commissioner in accordance with 14 subsection (c) (e) of Section 27-2B-3. 15 "(2) CORRECTIVE ORDER. An order issued by the 16 commissioner specifying corrective actions which the 17 commissioner has determined are required. "(3) DOMESTIC INSURER. Any insurance company 18 domiciled in this state. 19 "(4) FOREIGN INSURER. Any insurance company which is 20 21 licensed to do business in this state but not domiciled in this state. 22 23 "(5) LIFE OR HEALTH INSURER. Any insurance company 24 licensed to do business in this state and authorized to 25 transact life and/or disability insurance, including a 26 property and casualty insurer writing only disability 27 insurance, but shall not include fraternal benefit societies,

- health care service corporations, dental service 1
- 2 organizations, health maintenance organizations, dental plan
- organizations or mutual aid associations. 3

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- "(6) NAIC. The National Association of Insurance Commissioners. 5
- "(7) NEGATIVE TREND. With respect to a life or 6 7 health insurer, a negative trend over a period of time, as determined in accordance with the trend test calculation 8 included in the RBC instructions.
 - "(8) PROPERTY AND CASUALTY INSURER. Any insurance company licensed to do business in this state and authorized to transact property, marine, casualty and/or surety insurance, but shall not include monoline mortgage quaranty insurers, financial quaranty insurers and title insurers.
 - "(9) RBC. Risk-based capital.
 - "(10) RBC INSTRUCTIONS. The RBC report including risk-based capital instructions adopted by the NAIC, as the RBC instructions may be amended by the NAIC from time to time in accordance with the procedures adopted by the NAIC.
 - "(11) RBC LEVEL. An insurer's company action level RBC, regulatory action level RBC, authorized control level RBC, or mandatory control level RBC where:
- 23 "a. "Company action level RBC" means, with respect 24 to any insurer, the product of 2.0 and its authorized control level RBC. 25
- 26 "b. "Regulatory action level RBC" means the product 27 of 1.5 and its authorized control level RBC.

- "c. "Authorized control level RBC" means the number determined under the risk-based capital formula in accordance with the RBC instructions.
 - "d. "Mandatory control level RBC" means the product of .70 and the authorized control level RBC.

- "(12) RBC PLAN. A comprehensive financial plan containing the elements specified in subsection (b) of Section 27-2B-4. If the commissioner rejects the RBC plan, and it is revised by the insurer, with or without the commissioner's recommendation, the plan shall be called the revised RBC plan.
- "(13) RBC REPORT. The report required in Section 27-2B-3.
- "(14) STATUTORY CAPITAL AND SURPLUS. The combination of capital and surplus. As used in this definition, these terms shall have the following meanings:

"a. Capital. At any particular time, the sum of (i) the par value of all shares of the insurer having a par value that have been issued, (ii) the amount of consideration received by the insurer for all shares of the insurer without par value that have been issued, except any part of the consideration therefor as may have been allocated to surplus in a manner permitted by law, and (iii) any amounts not included in clauses (i) and (ii) of this subdivision as have been transferred to capital of the insurer, whether upon the issue of shares as a share dividend or otherwise, minus all reductions from the sum as have been affected in a manner permitted by law.

- "b. Surplus. The excess of the net admitted assets of an insurer over its capital. As used in this definition, "net admitted assets" means the excess of admitted assets of
 - "(15) TOTAL ADJUSTED CAPITAL. The sum of:
- 6 "a. An insurer's statutory capital and surplus.

an insurer over its liabilities.

- 7 "b. Other items, if any, as the RBC instructions may 8 provide.
- 9 "\$27-2B-3.

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- "(a) Every domestic insurer shall, on or prior to each March 1 (the "filing date"), prepare and submit to the commissioner a report of its RBC levels as of the end of the calendar year just ended, in a form and containing information as is required by the RBC instructions. In addition, every domestic insurer shall file its RBC report with:
 - "(1) The NAIC according to the RBC instructions.
- "(2) The insurance commissioner in any state in which the insurer is authorized to do business, if the insurance commissioner has notified the insurer of its request in writing, in which case the insurer shall file its RBC report not later than the later of either of the following:
- "a. Fifteen days from the receipt of notice to file its RBC report with that state.
- "b. The filing date.
- "(b) A life and health insurer's RBC shall be determined in accordance with the formula set forth in the RBC instructions. The formula shall take into account, and may

1	adjust for the covariance between, the following factors
2	determined in each case by applying the factors in the manner
3	set forth in the RBC instructions:
4	"(1) The risk with respect to the insurer's assets.
5	"(2) The risk of adverse insurance experience with
6	respect to the insurer's liabilities and obligations.
7	"(3) The interest rate risk with respect to the
8	insurer's business.
9	"(4) All other business risks and other relevant
10	risks as are set forth in the RBC instructions. Subdivisions
11	(1) to (4), inclusive, shall be determined in each case by
12	applying the factors in the manner set forth in the RBC
13	instructions.
14	"(c) A property and casualty insurer's RBC shall be
15	determined in accordance with the formula set forth in the RBC
16	instructions. The formula shall take into $\operatorname{account}_{\boldsymbol{L}}$ and may
17	adjust for the covariance between $_{\boldsymbol{L}}$ the following $\underline{\text{factors}}$
18	determined in each case by applying the factors in the manner
19	set forth in the RBC instructions:
20	"(1) Asset risk.
21	"(2) Credit risk.
22	"(3) Underwriting risk.
23	"(4) All other business risks and other relevant
24	risks as are set forth in the RBC instructions. Subdivisions

(1) to (4), inclusive, shall be determined by applying the

factors in the manner set forth in the RBC instructions.

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1 "(d) An excess of capital over the amount produced 2 by the risk-based capital requirements contained in this chapter and the formulas, schedules, and instructions 3 referenced in this chapter is desirable in the business of insurance. Accordingly, insurers should seek to maintain 5 6 capital above the RBC levels required by this chapter. 7 Additional capital is used and useful in the insurance business and helps to secure an insurer against various risks 8 inherent in or affecting the business of insurance and not 9 10 accounted for or only partially measured by the risk-based capital requirements contained in this chapter. 11

"(e) If a domestic insurer files an RBC report which in the judgment of the commissioner is inaccurate, then the commissioner shall adjust the RBC report to correct the inaccuracy and shall notify the insurer of the adjustment. The notice shall contain a statement of the reason for the adjustment. An RBC report as so adjusted is referred to as an "adjusted RBC report."

"\$27-2B-4.

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- "(a) "Company action level event" means any of the following events:
- "(1) The filing of an RBC report by an insurer which indicates either any of the following:
- "a. The insurer's total adjusted capital is greater than or equal to its regulatory action level RBC, but less than its company action level RBC.

"b. If a life or health insurer, the insurer has total adjusted capital which is greater than or equal to its company action level RBC but less than the product of its authorized control level RBC and 2.5 and has a negative trend.

"c. If a property and casualty insurer, the insurer has total adjusted capital which is greater than or equal to its company action level RBC, but less than the product of its authorized control level RBC and 3.0, and triggers the trend test determined in accordance with the trend test calculation included in the property and casualty RBC instructions.

- "(2) The notification by the commissioner to the insurer of an adjusted RBC report that indicates an event in subdivision (1) of this subsection, provided the insurer does not challenge the adjusted RBC report under Section 27-2B-8.
- "(3) If, pursuant to Section 27-2B-8, an insurer challenges an adjusted RBC report that indicates the event in subdivision (1) of this subsection, the notification by the commissioner to the insurer that the commissioner has, after a hearing, rejected the insurer's challenge.
- "(b) In the event of a company action level event, the insurer shall prepare and submit to the commissioner an RBC plan which shall include all of the following:
- "(1) Identify the conditions which contribute to the company action level event.
- "(2) Contain proposals of corrective actions which the insurer intends to take and would be expected to result in the elimination of the company action level event.

"(3) Provide projections of the insurer's financial results in the current year and at least the four succeeding years, both in the absence of proposed corrective actions and giving effect to the proposed corrective actions, including projections of statutory operating income, net income, capital, or surplus. The projections for both new and renewal business may include separate projections for each major line of business and separately identify each significant income, expense, and benefit component.

- "(4) Identify the key assumptions impacting the insurer's projections and the sensitivity of the projections to the assumptions.
- "(5) Identify the quality of, and problems associated with, the insurer's business, including, but not limited to, its assets, anticipated business growth and associated surplus strain, extraordinary exposure to risk, mix of business, and use of reinsurance, if any, in each case.
 - "(c) The RBC plan shall be submitted as follows:
- "(1) Within 45 days of the company action level event.
- "(2) If the insurer challenges an adjusted RBC report pursuant to Section 27-2B-8, within 45 days after notification to the insurer that the commissioner has, after a hearing, rejected the insurer's challenge.
- "(d) Within 60 days after the submission by an insurer of an RBC plan to the commissioner, the commissioner shall notify the insurer whether the RBC plan shall be

- implemented or is, in the judgment of the commissioner, unsatisfactory. If the commissioner determines the RBC plan is unsatisfactory, the notification to the insurer shall set forth the reasons for the determination, and may set forth proposed revisions which will render the RBC plan satisfactory, in the judgment of the commissioner. Upon notification from the commissioner, the insurer shall prepare a revised RBC plan, which may incorporate by reference any revisions proposed by the commissioner, and shall submit the revised RBC plan to the commissioner as follows:
 - "(1) Within 45 days after the notification from the commissioner.

- "(2) If the insurer challenges the notification from the commissioner under Section 27-2B-8, within 45 days after a notification to the insurer that the commissioner has, after a hearing, rejected the insurer's challenge.
- "(e) In the event of a notification by the commissioner to an insurer that the insurer's RBC plan or revised RBC plan is unsatisfactory, the commissioner may, at the commissioner's discretion, subject to the insurer's right to a hearing under Section 27-2B-8, specify in the notification that the notification constitutes a regulatory action level event.
- "(f) Every domestic insurer that files an RBC plan or revised RBC plan with the commissioner shall file a copy of the RBC plan or revised RBC plan with the insurance

1 commissioner in any state in which the insurer is authorized 2 to do business if: "(1) The state has an RBC provision substantially 3 similar to subsection (a) of Section 27-2B-9. "(2) The insurance commissioner of that state has 5 notified the insurer of its request for the filing in writing, 6 7 in which case the insurer shall file a copy of the RBC plan or revised RBC plan in that state no later than the later of 8 either of the following: 9 10 "a. Fifteen days after the receipt of notice to file a copy of its RBC plan or revised RBC plan with the state. 11 12 "b. The date on which the RBC plan or revised RBC 13 plan is filed under subsections (c) and (d) of this section." Section 2. This act shall become effective 14

immediately following its passage and approval by the

Governor, or its otherwise becoming law.

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