# Senate Bill 30

AMENDMENT 30A FOR THE INTRODUCED BILL

### 1 An Act to remove outdated provisions within the insurance code.

# 2 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF SOUTH DAKOTA:

## 3 Section 1. That § 58-6-75 be AMENDED:

**58-6-75.** Each domestic insurer, taxpayer funded risk pools, and those domestic 4 5 insurers subject to chapters 58-34, 58-37A, 58-38, 58-39, 58-40, and 58-41, and foreign 6 insurers if required by the director, shall annually, on or before March first, and quarterly, 7 on or before May fifteenth, August fifteenth, and November fifteenth, unless the time is 8 extended by the director for good cause shown, file with the director a true statement of 9 its financial condition, transactions, and affairs as of the December thirty-first preceding for an annual statement and as of March thirty-first, June thirtieth, and September 10 thirtieth, for a quarterly statement. Any statement is to be in a form and content as is 11 12 approved or adopted for current use by the National Association of Insurance 13 Commissioners, or its successor organization, for use as to the type of insurer and kinds 14 of insurance to be reported upon. The director may require any additional information 15 considered necessary to be supplied with the annual or quarterly statement. The 16 statement of an alien insurer, if required by the director, shall must be filed annually on 17 or before September first and shall must relate only to its transactions and affairs in the United States, unless the director requires otherwise. Any annual and quarterly statement 18 19 and, amendments and addenda to any annual and quarterly statement, and any interim 20 statement or amendments thereto shall also must be filed with the National Association 21 of Insurance Commissioners. Any statement filed with the National Association of 22 Insurance Commissioners shall also be submitted on diskette.

Any statement-<u>shall must</u> be prepared in accordance with the Annual Statement Instructions Manual and the Accounting Practices and Procedures Manual prescribed by the National Association of Insurance Commissioners, as <u>adopted promulgated</u> by rule by the director-<u>pursuant to, in accordance with</u> chapter 1-26. The director may also<del>, by rule</del> 1 2 3

4

5 6

7

8

9

27

promulgated pursuant to promulgate rules, in accordance with chapter 1-26, to establish

additional practices and procedures the director considers necessary.
Unless the time for filing has been extended, an insurer shall must pay a penalty
of one hundred dollars per day for every day the statement is late, not to exceed
twenty-five thousand dollars.
For purposes of this section, only a statement with a postmark date of the due date
or earlier is considered timely filed.
Section 2. That § 58-20-1 be AMENDED:
<b>58-20-1.</b> Terms used in this chapter <del>, unless the context otherwise plainly requires,</del>

10 shall mean:

- (1) "Compensation," shall relate to all insurances effected by virtue of statutes
   providing compensation to employees payment to an employee for personal
   injuries injury irrespective of fault of the employer;
- "Earned premiums," shall include gross premiums charged on all policies written, 14 (2) 15 including all determined excess and additional premiums, less return premiums, 16 other than premiums returned to policyholders as dividends, and less reinsurance 17 premiums and premiums on policies canceled, and less unearned premiums on 18 policies in force. Any participating insurer which that has charged in its premiums 19 a loading solely for dividends, shall not be is not required to include such the loading in its earned premiums, provided a statement of the amount of such the 20 21 loading has been filed with and approved by the director;
- (3) "Liability," shall relate to all insurance except compensation insurance against loss
   or damage from an accident to or injury suffered by an employee or other person
   and for which the insured is liable; and
- (4) "Loss payments" and "loss expense payments." shall include payments to
   claimants, including payments for medical:
  - (a) Medical or surgical attendants, legal;
- 28 (b) Legal expenses, salaries;
- 29 (c) Salaries and expenses of investigators, adjusters and field men, rents,
   30 support personnel;
- 31 (d) Rents, stationery, telegraph and telephone charges, and postage, salaries;
- 32 (e) Salaries and expenses of office employees, home;
- 33 (f) Home office expenses, and all; and

1	(g) All other payments made on account of claims, whether such payments
2	shall be are allocated to specific claims or unallocated.

#### 3 Section 3. That § 58-29B-51 be AMENDED:

- 58-29B-51. Unless the court otherwise directs, the liquidator <u>shall must</u> give
  notice of the liquidation order as soon as possible but in no event more than ten days from
  the date of entry of the order to liquidate:
- 7 (1) By <u>first class first-class</u> mail or <u>by telegram or telephone electronic communication</u>
   8 to the insurance director of each jurisdiction in which the insurer is doing business;
- 9 (2) By <u>first class first-class</u> mail to any guaranty association or foreign guaranty 10 association <u>which that</u> is or may become obligated as a result of the liquidation;
- 11 (3) By-first class first-class mail to any insurance producer of the insurer;
- 12 (4) By <u>first class first-class</u> mail to any person <u>or policyholder</u> known or reasonably 13 expected to have claims against the insurer<u>including any policyholder</u>, at the 14 person's<u>or policyholder's</u> last known address<u></u> as indicated by the records of the 15 insurer; and
- 16 (5) By publication in a newspaper of general circulation in the county-in which the 17 insurer has its principal place of business and in-such other locations as the 18 liquidator considers appropriate.
- 19 Section 4. That § 58-30-114 be AMENDED:

20 58-30-114. Terms, as used in §§ 58-30-114 to 58-30-121 58-30-123, inclusive,
 21 mean:

- 22 (1) "Director," the director of the Division of Insurance;
- (2) "Instructor," any individual who teaches, lectures, or otherwise instructs an
   insurance education offering;
- (3) "Licensee," any individual who is licensed by the Division of Insurance as a resident
   insurance producer; and
- 27 (4) "SponsorProvider," any person, offering or providing insurance education or related
   28 activity.

#### 29 Section 5. That § 58-30-117 be AMENDED:

# 30 58-30-117. The director of the Division of Insurance, may promulgate, pursuant 31 to rules, in accordance with chapter 1-26, rules as are necessary for effective

30

administration of continuing education for insurance producers. The rules may include
 provisions concerning regarding insurance producer continuing education requirements,

3 exemptions, programs, courses, <u>sponsors</u> providers, definitions, extensions, fees and

4 funding, instructors, applications, advertising, and administration.

#### 5 Section 6. That § 58-30-122 be AMENDED:

58-30-122. The director may approve or disapprove <u>sponsors or instructors a</u>
 provider or instructor. Each <u>sponsor provider</u> is responsible for the actions of the <u>sponsor's</u>
 instructors. Sponsors and instructors <u>provider's instructor</u>. The provider and the instructor
 shall conduct themselves in a professional manner and may not<u>offer:</u>

<u>(1) Offer</u> or teach any course not approved by the director or not complying with any
 insurance statute or rule<del>, may not deviate</del>;

12 (2) Deviate from approved course outlines, and may not misrepresent; or

13 (3) <u>Misrepresent</u> any course material or other information.

14 The director may promulgate rules, <u>pursuant to in accordance with</u> chapter 1-26, 15 <u>establishing to establish</u> the necessary criteria for disapproval of a <u>sponsor provider</u> or 16 instructor.

#### 17 Section 7. That § 58-30-123 be AMENDED:

**58-30-123.** If the director determines that a course sponsor provider or instructor 18 19 has violated the provisions of § 58-30-117 or 58-30-122, the director may withdraw 20 approval of the course sponsor provider or instructor, or may order a refund of course 21 fees to licensees who attended the course, or both. The director may also refuse to 22 approve courses conducted by specific sponsors or instructors a provider or instructor if 23 the director determines that past offerings by those sponsors or instructors the provider 24 or instructor have not been in compliance with insurance continuing education laws and 25 rules.

#### 26 Section 8. That § 58-17-145.1 be REPEALED.

Any person covered under a risk pool established pursuant to the provisions of
 § 58-17-113 in the State of South Dakota may submit a health claim within six months
 from June 30, 2015. Each claim shall be submitted in writing to the Bureau of Human
 Resources and Administration. A claim shall be paid in accordance with the South Dakota
 risk pool plan document in effect July 1, 2014, through June 30, 2015, inclusive.