

Date: 5/9/22

Virtual Meeting

SURPLUS LINES (C) TASK FORCE

Monday, May 23, 2022

2:00 – 3:00 p.m. ET / 1:00 – 2:00 p.m. CT / 12:00 – 1:00 p.m. MT / 11:00 a.m. – 12:00 p.m. PT

ROLL CALL

James J. Donelon, Chair	Louisiana	Gary D. Anderson	Massachusetts
Larry D. Deiter, Vice Chair	South Dakota	Mike Chaney	Mississippi
Jim L. Ridling	Alabama	Troy Downing	Montana
Lori K. Wing-Heier	Alaska	Edward M. Deleon Guerrero	N. Mariana Islands
Peni Itula Sapini Teo	American Samoa	Barbara D. Richardson	Nevada
Ricardo Lara	California	Mike Causey	North Carolina
Michael Conway	Colorado	Jon Godfread	North Dakota
David Altmaier	Florida	Michael Humphreys	Pennsylvania
Michelle B. Santos	Guam	Elizabeth Kelleher-Dwyer	Rhode Island
Colin M. Hayashida	Hawaii	Michael Wise	South Carolina
Dean L. Cameron	Idaho	Carter Lawrence	Tennessee
Doug Ommen	Iowa	Cassie Brown	Texas
Vicki Schmidt	Kansas	Mike Kreidler	Washington
Kathleen A. Birrane	Maryland		

AGENDA

1. Consider Adoption of its 2021 Fall National Meeting Minutes Attachment A
—Commissioner James J. Donelon (LA)
2. Consider Adoption of the Report of the Surplus Lines (C) Working Group
—Stewart Guerin (LA)
3. Discuss and Expose the Draft *Nonadmitted Insurance Model Act (#870)* Attachment B
—Commissioner James J. Donelon (LA)
4. Discuss Any Other Matters Brought Before the Task Force
—Commissioner James J. Donelon (LA)
5. Adjournment

Draft Pending Adoption

Draft: 12/2/21

Surplus Lines (C) Task Force
Virtual Meeting (*in lieu of meeting at the 2021 Fall National Meeting*)
November 29, 2021

The Surplus Lines (C) Task Force met Nov. 29, 2021. The following Task Force members participated: James J. Donelon, Chair, Stewart Guerin and Tom Travis (LA); Larry D. Deiter, Vice Chair (SD); Lori K. Wing-Heier represented by Sian Ng-Ashcraft (AK); Jim L. Ridling represented by Jimmy Gunn (AL); Ricardo Lara represented by Libio Latimer (CA); Michael Conway represented by Rolf Kaumann (CO); Karima M. Woods represented by Angela King (DC); David Altmaier represented by Virginia Christy (FL); Dean L. Cameron represented by Randy Pipal (ID); Dana Popish Severinghaus represented by Kevin Fry (IL); Kathleen A. Birrane represented by Robert Baron (MD); Troy Downing (MT); Mike Causey represented by Fred Fuller (NC); Russell Toal represented by Ursula Almada (NM); Barbara D. Richardson (NV); Glen Mulready represented by Diane Carter (OK); Jessica K. Altman represented by Shannen Logue (PA); Mike Kreidler represented by Jeff Baughman (WA); and Jeff Rude represented by Danie Capps (WY). Also participating was Robert Wake (ME).

1. Adopted its Summer National Meeting Minutes

Director Deiter made a motion, seconded by Mr. Baughman, to adopt the Task Force's Aug. 5 minutes (*see NAIC Proceedings – Fall 2021, Surplus Lines (C) Task Force*). The motion passed unanimously.

2. Adopted the Report of the Surplus Lines (C) Working Group

Mr. Guerin reported that since the Summer National Meeting, the Surplus Lines (C) Working Group met Sept. 22 (Attachment One) to address two administrative tasks. He stated that the Working Group discussed amendments to the NAIC Standard Form Trust Agreement for Alien Excess or Surplus Lines Insurers. Mr. Guerin stated that after discussion of several amendments, the Working Group re-exposed the document for a 14-day public comment period ending Oct. 6. The Working Group conducted an e-vote that concluded Oct. 21 (Attachment Two) to adopt the amendments to the NAIC Standard Form Trust Agreement for Alien Excess or Surplus Lines Insurers.

Following the report, Robert Wake (ME) presented a few friendly amendments (Attachment Three) to the NAIC Standard Form Trust Agreement for Alien Excess or Surplus Lines Insurers.

Mr. Kaumann made a motion, seconded by Mr. Baughman, to adopt the amendments to the NAIC Standard Form Trust Agreement for Alien Excess or Surplus Lines Insurers. The motion passed unanimously.

Mr. Guerin concluded that the second administrative task covered during the Working Group's Sept. 22 meeting covered the adoption of modifications to the NAIC *Quarterly Listing of Alien Insurers*.

Mr. Kaumann made a motion, seconded by Mr. Fuller, to adopt the report of the Surplus Lines (C) Working Group. The motion passed unanimously.

Commissioner Donelon addressed Mr. Guerin's comments regarding Clark Fitz-Hugh (International Sureties Ltd.), who proposed the use of surety bonds as a means to fund collateral within the required trust funds that secure the solvency of insurers on the *Quarterly Listing of Alien Insurers*. Commissioner Donelon asked Mr. Fitz-Hugh to present his proposal. However, Mr. Fitz-Hugh was not in attendance. Commissioner Donelon asked for comments on the matter, and Director Deiter indicated that he has concerns with the use of surety bonds to fund the trusts as they are not admitted assets. Commissioner Donelon commented that his opinion aligns with Director Deiter. Mr. Latimer commented that California has a preference to maintain consistency between the surplus lines and reinsurance trust fund collateral requirements. Further, Mr. Latimer commented that there are concerns regarding the uncertainty regarding potential collectability. Mr. Wake commented that there are certain conditions that are necessary to fund a trust and a surety bond is not considered evergreen.

Director Deiter made a motion, seconded by Mr. Baughman, to table any further consideration regarding the use of surety bonds as a means to fund collateral within the required trust funds that secure the solvency of insurers on the *Quarterly Listing of Alien Insurers*. The motion passed unanimously.

3. Received an Update from the Model #870 Drafting Group

Draft Pending Adoption

Mr. Travis said that the drafting group for the *Nonadmitted Insurance Model Act* (#870) consisted of various participants from Colorado, Illinois, Louisiana, Texas, and Washington. He indicated that since the Summer National Meeting, the drafting group met three times: Nov. 4, Oct. 20, and Sept. 28. He stated that the drafting group discussed specific sections of the Model #870 while working through a revision-marked version. He said that once the drafting group has made it through its initial review of the model, it will integrate comments received and reconvene in open session to cover the revised draft. He concluded by indicating that the drafting group anticipates presenting a draft of the model to the Task Force during the first quarter of 2022.

4. Heard an Update on Surplus Lines Industry Results

Andy Daleo said that at year-end 2020, the *Quarterly Listing of Alien Insurers* consisted of 87 Lloyd's syndicates and 75 non-U.S. companies for a total of 162 entities, an increase of four entities over the prior year. He stated that in comparison, U.S. domestic surplus lines insurers totaled 297. He indicated that during 2020, non-U.S. based entities (syndicates and companies) collectively wrote \$18.6 billion in direct U.S. surplus lines premiums, a 10.3% increase over the prior year. In comparison, domestic insurers wrote \$47.5 billion in surplus lines premiums in 2020, a 17.9% increase from the prior year. Mr. Daleo stated that in 2020, non-U.S. insurer surplus lines premiums accounted for 28.1% of total U.S. surplus lines exposure, slightly lower than 29.5% in 2019 and 30.6% in 2018. He summarized that as of Dec. 31, 2020, the non-U.S. entities recorded an aggregate \$21.1 billion in gross loss, loss adjustment expenses (LAEs), and incurred but not recorded (IBBR) reserves. He stated that as of June 30, 2021, the gross reserves were partially secured by nearly \$5.2 billion in individual U.S. trust fund assets.

Mr. Daleo indicated that the U.S. nonadmitted market wrote \$731 million in cyber direct premiums. In comparison, non-U.S. surplus lines insurers wrote \$1.3 billion in cyber direct premiums written; 86% was written within the Lloyd's market, with the majority written as stand-alone coverage opposed to within a package policy. He stated that there were approximately 600,000 nonadmitted U.S. and non-U.S. cyber policies in force, and 24,697 nonadmitted U.S. and non-U.S. claims were reported during 2020 with total direct loss payments of approximately \$804 million.

Mr. Daleo said that 2020 was the first full year of private flood data collected. He indicated that the U.S. nonadmitted market wrote roughly \$247 million in private flood direct premiums written. In comparison, non-U.S. surplus lines insurers wrote \$847 million in private flood direct premiums written; 73% was written within the Lloyd's market. He concluded that there were approximately 346,000 nonadmitted U.S. and non-U.S. private flood policies in force, with 6,474 claims reported during 2020 with total direct loss payments of approximately \$143 million.

Having no further business, the Surplus Lines (C) Task Force adjourned.

 [SLTF Minutes Nov 2021.docx](#)

DRAFT 5/3/2022
NONADMITTED INSURANCE MODEL ACT

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Section 1. Short Title

This Act shall be known and may be cited as “The Nonadmitted Insurance Act.”

Section 2. Purpose—Necessity for Regulation

This Act shall be liberally construed and applied to promote its underlying purposes which include:

- A. Protecting persons seeking insurance in this Sstate;
- B. Permitting Surplus Lines Insurance to be placed with reputable and financially sound Nonadmitted Insurers and exported from this Sstate pursuant to this Act;
- C. Establishing a system of regulation which will permit orderly access to Surplus Lines Insurance in this Sstate and encourage Admitted Insurers to provide new and innovative types of insurance available to consumers in this Sstate;
- D. Providing a system through which persons may purchase insurance other than Surplus Lines Insurance, from Nonadmitted Insurers pursuant to this Act;
- E. Protecting revenues of this Sstate; and
- F. Providing a system pursuant to this Act which subjects Nonadmitted Insurance activities in this Sstate to the jurisdiction of the insurance Commissioner and Sstate and federal courts in suits by or on behalf of the Sstate.

Section 3. Definitions

As used in this Act:

- A. “Admitted Insurer” means an insurer licensed to ~~do engage in an~~ the business of insurance ~~business~~ in this state.
- B. “Affiliate” means, with respect to an insured, any entity that controls, is controlled by, or is under common control with the insured.
- C. “Affiliated Group” means any group of entities that are all affiliated. ~~“Capital,” as used in the financial requirements of Section 5, means funds paid in for stock or other evidence of ownership.~~

Nonadmitted Insurance Model Act

DC. “Commissioner” means the insurance commissioner of [insert name of state], or the commissioner’s deputies or staff, or the Commissioner, Director or Superintendent of Insurance in any other state.

Drafting Note: Insert the title of the chief insurance regulatory official wherever the term “commissioner” appears.

E. “Control” means with respect to an insured:

- (1) A person either directly or indirectly or acting through one or more other persons owns, controls, or has the power to vote 25 percent or more of any class of voting securities of the other entity; or
- (2) The entity controls in any manner the election of a majority of the directors or trustees of the other entity.

F. [OPTIONAL] [“Domestic Surplus Lines Insurer” means a surplus lines insurer domiciled in this state, which may write insurance in this state on as if it were a surplus lines insurer basis domiciled in another state.]

G. “Eligible Surplus Lines Insurer” means a nonadmitted insurer with which a surplus lines licensee may place surplus lines insurance pursuant to Section 5 of this Act.

H. “Exempt Commercial Purchaser” means any person purchasing commercial insurance that, at the time of placement, meets the following requirements:

- (1) The person employs or retains a qualified risk manager to negotiate insurance coverage.
- (2) The person has paid aggregate nationwide commercial property and casualty insurance premiums in excess of \$100,000 in the immediately preceding 12 months.
- (3) (a) The person meets at least one+ of the following criteria:
 - (i) The person possesses a net worth in excess of \$20,000,000.
 - (ii) The person generates annual revenues in excess of \$50,000,000.
 - (iii) The person employs more than 500 full-time or full-time equivalent employees per individual insured or is a member of an affiliated group employing more than 1,000 employees in the aggregate.
 - (iv) The person is a not-for-profit organization or public entity generating annual budgeted expenditures of at least \$30,000,000.
 - (v) The person is a municipality with a population in excess of 50,000 persons.
- (b) Effective on January 1, 20[xx] and each fifth January 1 occurring thereafter, the amounts in Items (i), (ii), and (iv) of Subparagraph (a) of this Paragraph shall be adjusted to reflect the percentage change for such 5-year period in the Consumer Price Index for All Urban Consumers published by the Bureau of Labor Statistics of the Department of Labor.

Drafting Note: This definition of “Exempt Commercial Purchaser” follows the language of the federal Nonadmitted and Reinsurance Reform Act (NRRA). Some states have chosen not to adopt the inflation adjustment. The NRRA uses the term “municipality,” which some states may find limiting. States may choose to use terminology consistent with state law to expand this provision to include counties and other public entities.

EI. “Export” means to place surplus lines insurance with a nonadmitted insurer.

F. “Foreign decree” means any decree or order in equity of a court located in any United States jurisdiction, including a federal court of the United States, against any person engaging in the transaction of insurance in this state.

I. “Home State” means with respect to an insured:

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~~(2) If the person's principal residence is located outside any state, the state to which the greatest percentage of the person's taxable premium for that insurance contract is allocated.~~

~~Q. "State" includes any state of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Northern Mariana Islands, the Virgin Islands, and American Samoa.~~

~~K. "Policy" or "contract" means any contract of insurance, including but not limited to annuities, indemnity, medical or hospital service, workers' compensation, fidelity or suretyship.~~

~~L. "Reciprocal state" means a state that has enacted provisions substantially similar to:~~

~~(1) Sections 5F, 5I(5), 5Q(10), 5R(4) and Section 6; and~~

~~(2) The allocation schedule and reporting form contained in [cite the regulation on surplus lines taxation].~~

~~M. "Surplus," as used in the financial requirements of Section 5, means funds over and above liabilities and capital of the company for the protection of policyholders.~~

~~R.N. "Surplus Lines Insurance" means any property and casualty insurance in this state on properties, risks or exposures, located or to be performed in this state, permitted to be placed through a surplus lines licensee with an nonadmitted insurer eligible surplus lines insurer to accept such insurance, pursuant to Section 5 of this Act.~~

Drafting Note: If a state chooses to adopt the alternative Section 5B, this definition of "surplus lines insurance" should be consistent with the acceptable coverage listed in Section 5B. States may choose to extend the definition of "surplus lines insurance" beyond property/casualty insurance. [States may refer to the NAIC Guideline on Nonadmitted Accident and Health Coverages \(GL1860\).](#)

~~S. "Surplus Lines Insurer" means a nonadmitted [or domestic surplus lines] insurer that is eligible to accept the placement of surplus lines insurance pursuant to Section 5 of this Act.~~

~~T.O. "Surplus Lines Licensee" means any person individual, firm or corporation licensed under Section 5 of this Act to place surplus lines insurance on properties, risks or exposures located or to be performed in this state with an nonadmitted insurers eligible surplus lines insurer to accept such insurance.~~

~~U. "Taxable Premium" means any premium less return premium that is not otherwise exempt from tax pursuant to this Act.~~

~~V.S. "Transaction of Insurance"~~

~~(1) For purposes of this Act, any of the following acts in this state effected by mail or otherwise by a nonadmitted insurer or by any person acting with the actual or apparent authority of the insurer, on behalf of the insurer, is deemed to constitute the transaction of an insurance business in or from this state:~~

~~(a) The making of or proposing to make, as an insurer, an insurance contract;~~

~~(b) The making of or proposing to make, as guarantor or surety, any contract of guaranty or suretyship as a vocation and not merely incidental to any other legitimate business or activity of the guarantor or surety;~~

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- (c) The taking or receiving of an application for insurance;
 - (d) The receiving or collection of any premium, commission, membership fees, assessments, dues or other consideration for insurance or any part thereof;
 - (e) The issuance or delivery in this state of contracts of insurance to residents of this state or to persons authorized to do business in this state;
 - (f) The solicitation, negotiation, procurement or effectuation of insurance or renewals thereof;
 - (g) The dissemination of information as to coverage or rates, or forwarding of applications, or delivery of policies or contracts, or inspection of risks, the fixing of rates or investigation or adjustment of claims or losses or the transaction of matters subsequent to effectuation of the contract and arising out of it, or any other manner of representing or assisting a person or insurer in the transaction of risks with respect to properties, risks or exposures located or to be performed in this state;
 - (h) The transaction of any kind of insurance business specifically recognized as transacting an insurance business within the meaning of the statutes relating to insurance;
 - (i) The offering of insurance or the transacting of insurance business; or
 - (j) Offering an agreement or contract which purports to alter, amend or void coverage of an insurance contract.
- (2) The provisions of this subsection shall not operate to prohibit employees, officers, directors or partners of a commercial insured from acting in the capacity of an insurance manager or buyer in placing insurance on behalf of the employer, provided that the person's compensation is not based on buying insurance.
- (3) The venue of an act committed by mail is at the point location where the matter transmitted by mail is delivered or issued for delivery or takes effect.

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Drafting Note: States may need to alter this subsection to reflect their decision as to whether they intend to permit citizens to directly purchase coverage within the state from a nonadmitted insurer, or if self-procurement of coverage will be permitted only when it occurs outside the state. States electing to allow direct procurement will need to insert an appropriate exemption in Section 4A of this Act. Additionally, states should consider whether the preceding definition of "transaction of insurance" is consistent with other statutory definitions of this phrase in the state. Finally, states may want to consider whether group insurance purchases or the maintenance of insurance books and records in this state should fall within the scope of the definition of "transaction of insurance."

W.Q.—“Type of insurance” means coverage afforded under the particular policy that is being placed.

T. “Wet Marine and Transportation Insurance” means:

- (1) Insurance upon vessels, crafts, hulls and other interests in them or with relation to them;
- (2) Insurance of marine builder's risks, marine war risks and contracts of marine protection and indemnity insurance;
- (3) Insurance of freight and disbursements pertaining to a subject of insurance within the scope of this subsection; and
- (4) Insurance of personal property and interests therein, in the course of exportation from or importation into any country, or in the course of transportation coastwise or on inland waters, including transportation by land, water or air from point of origin to final destination, in connection with any and all risks or perils of navigation, transit or transportation, and while being prepared for and while awaiting shipment, and during any incidental delays, transshipment, or reshipment; provided, however, that insurance of personal property and interests therein shall not be considered wet marine and transportation insurance if the property has:

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Nonadmitted Insurance Model Act

- (a) Been transported solely by land; or
- (b) Reached its final destination as specified in the bill of lading or other shipping document; or
- (c) The insured no longer has an insurable interest in the property.

Comment: The language added in 1994 to the end of the definition of “wet marine and transportation insurance” (Subparagraphs 4(a), 4(b), and 4(c)) is intended to clarify the scope of the definition, which ultimately affects the exemption of certain risks from this Act. The 1994 amendments address current regulatory concerns and concerns raised by those who drafted the 1983 amendments to the Model Surplus Lines Law. The 1983 drafters wrote: “Several [drafters] felt the term “storage” should not appear in— [the wet marine definition] to ensure that warehousemen and other types of insurance covering risks of storage are not interpreted to be within the purview of this definition. The term “delays” is sufficiently broad to cover temporary storage while in the course of transit.”

Drafting Note: In addition to the definitions provided in this section, individual states may wish to consider adopting definitions for “agent,” “broker” or “producer” in a manner consistent with its other laws. Additionally, states may want to cross-reference the definition of “insurance” as it appears elsewhere in the state insurance code. The definition of insurance should reach illegal unauthorized activities.

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Section 4. Placement of Insurance Business

- A. An insurer shall not engage in the **T**ransaction of **I**nsurance unless authorized by a license in force pursuant to the laws of this **S**tate; or exempted by this Act or otherwise exempted by the insurance laws of this **S**tate.
- B. A **P**erson shall not directly or indirectly engage in a **T**ransaction of **I**nsurance with or on behalf of or shall in this state directly or indirectly act as agent for, or otherwise represent or aid on behalf of another, a **N**onadmitted **I**nsurer in this **S**tate in the solicitation, negotiation, procurement or effectuation of insurance, or renewals thereof, or forwarding of applications, or delivery of policies or contracts or inspection of risks, or fixing of rates, or investigation or adjustment of claims or losses, or collection or forwarding of premiums; or in any other manner represent or assist the insurer in the transaction of insurance.
- C. A **P**erson who represents or aids a **N**onadmitted **I**nsurer in violation of this section shall be subject to the penalties set forth in Section 7 of this Act. No insurance contract entered into in violation of this section shall preclude the insured from enforcing his rights under the contract in accordance with the terms and provisions of the contract of insurance and the laws of this **S**tate, to the same degree those rights would have been enforceable had the contract been lawfully procured.
- D. If the **N**onadmitted **I**nsurer fails to pay a claim or loss within the provisions of the insurance contract and the laws of this **S**tate, a **P**erson who assisted or in any manner aided directly or indirectly in the procurement of the insurance contract, shall be liable to the insured for the full amount under the provisions of the insurance contract.
- E. Section 4B or 4D shall not apply to a **P**erson in regard to an insured who independently procures insurance as provided under Section 6. This section shall not apply to a **P**erson, properly licensed as an agent or broker in this **S**tate who, for a fee and pursuant to a written agreement, is engaged solely to offer to the insured advice, counsel or opinion, or service with respect to the benefits, advantages or disadvantages promised under any proposed or in-force policy of insurance if the **P**erson does not, directly or indirectly, participate in the solicitation, negotiation or procurement of insurance on behalf of the insured;

Drafting Note: If a **S**tate collects tax on unlicensed transactions which violate this Act, it may consider imposing liability for payment of those taxes on persons who violate this Act by assisting in the procurement of **N**onadmitted **I**nsurance.

Drafting Note: Some **S**tates permit other licensed professionals to engage in these activities as provided in their insurance statutes or other **S**tate statutes. Those **S**tates may want to amend Section 4E to include those professionals, to the extent they act within the scope of their licenses.

- F. This section shall not apply to a **P**erson acting in material compliance with the insurance laws of this **S**tate in the placement of the types of insurance identified in Paragraphs (1), (2), (3) and (4) below:
 - (1) Surplus **L**ines **I**nsurance as provided in Section 5. For the purposes of this subsection, a licensee shall be deemed to be in material compliance with the insurance laws of this **S**tate, unless the licensee committed a violation of Section 5 that proximately caused loss to the insured;

- (2) Transactions for which a certificate of authority to do business is not required of an insurer under the insurance laws of this Sstate;

Drafting Note: A number of states exempt from licensing and premium taxation nonprofit educational insurers insuring only nonprofit educational institutions and their employees. Some states require certificates of authority while others require licensing, and the appropriate language should be used in Paragraph (2) above. Additionally, some states may want to consider adding language to establish an option of allowing persons to file for an exemption with the Department of Insurance.

- (3) Reinsurance provided that, unless the Commissioner waives the requirements of this subsection:
 - (a) The assuming insurer is authorized to ~~do engage in the business of an~~ insurance or reinsurance business-by-in its domiciliary jurisdiction and is authorized to write the type of reinsurance in its domiciliary jurisdiction; and
 - (b) The assuming insurer satisfies all legal requirements for such reinsurance in the Sstate of domicile of the ceding insurer;
- (4) The property and operation of railroads or aircraft engaged in interstate or foreign commerce, Water Marine and Transportation Insurance;
- (5) Transactions subsequent to issuance of a policy not covering properties, risks or exposures located, or to be performed in this Sstate at the time of issuance, and lawfully solicited, written or delivered outside this Sstate.

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Drafting Note: States may also wish to consider exempting from Section 4A of this Act self-procured insurance or industrial insurance purchased by a sophisticated buyer who does not necessarily require the same regulatory protections as an average insurance buyer. Additionally, some States allow other insurance transactions with Nonadmitted Insurers. Examples include certain aviation and railroad risks. Other States may want to narrow the scope of the exemptions above or reserve the right to approve exemptions on a case-by-case basis.

Section 5. Surplus Lines Insurance

A. Surplus Lines Insurance may be placed by a Surplus Lines Licensee if:

- (1) Each insurer is ~~an~~ eligible to write Surplus Lines Insurance~~insurer~~; and
- (2) ~~(2)~~—Each insurer is authorized to write the type of insurance in its domiciliary jurisdiction; and
- (3) ~~Other than for e~~xempt commercial purchasers, ~~t~~he full amount or type of insurance cannot be obtained from insurers who are admitted to ~~do engage in the business of insurance~~ in this Sstate. The full amount or type of insurance may be procured from Eligible Surplus Lines Insurers, provided that a diligent search is made among the insurers who are admitted to transact and are actually writing the particular type of insurance in this Sstate if any are writing it; and
- (4) All other requirements of this Act are met.

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Drafting Note: States may prefer to reference “kind of insurance” rather than “type of insurance” in Section 5A(3). The term utilized should be defined within the Act. The diligent search requirement of Section 5A(3) must be satisfied in accordance with the statutes and regulations of the governing Sstate. Such Diligent search statutes and regulations might vary from State to State in terms of the number of declinations required and the Person designated to conduct the search. Several States permit surplus lines placement without a diligent search for or without regard to the availability of admitted coverage. States may want to consider the need to modernize diligent search requirements in light of electronic transactions. Section 5A(3) does not prohibit a regulatory system in which a Surplus Lines Licensee may place with an eligible Nonadmitted Insurer any coverage listed on a current “Export list” maintained by the Commissioner. The Export list would identify types of insurance for which no admitted market exists. The Commissioner may waive the diligent search requirement for any such type of insurance.

Drafting Note: Utilizing the “full amount” standard in Section 5A(3) of this Act may have certain market implications. An alternative to this approach would be to require that whatever part of the coverage is attainable through the admitted market be placed in the admitted market and only the excess part of the coverage may be exported.

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B. Subject to Section 5A(3) of this Act, a Surplus Lines Licensee may place any coverage with an nonadmitted Eligible Surplus Lines Insurer eligible to accept the insurance, unless specifically prohibited by the laws of this State.

[Alternative Subsection B]

[CB. Subject to Section 5A(3) of this Act, a Surplus Lines Licensee may place only the following types of coverage with an nonadmitted Eligible Surplus Lines Insurer-eligible to accept insurance: {list acceptable coverage}.]

Drafting Note: The two statutory alternatives described in Section 5B represent different regulatory approaches to defining those coverages which may be placed in the nonadmitted market and they would impact the admitted market in different manners.

C. A Surplus Lines Licensee shall not place Surplus Lines Insurance coverage with a nonadmitted insurer, unless, at the time of placement, the Surplus Lines Licensee has determined that the nonadmitted insurer:

~~(1) (i) Deleted.~~

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~~Has established satisfactory evidence of good repute and financial integrity; and~~

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(2) ~~Qualifies~~ is eligible to write Surplus Lines Insurance under one of the following subparagraphs:

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(a) For a Nonadmitted Insurer domiciled in another United States jurisdiction, the insurer shall have both of the following:

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(i) The authority to write the type of insurance in its domiciliary jurisdiction; and

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(ii) Has eCapital and surplus or its equivalent under the laws of its domiciliary jurisdiction which that equals the greater of:

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(I) (A) The minimum capital and surplus requirements under the law of this State; or

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(B) \$15,000,000;

Drafting Note: ~~States that have not previously increased capital and surplus requirements may wish to consider implementation of the capital and surplus requirements in this subparagraph in a series of phases over a period of up to three (3) years. In some circumstances, implementation of a \$15,000,000 capital and surplus requirement may represent a dramatic increase over existing requirements. States may wish to allow insurers which are eligible under existing law some period of time to increase their capital and surplus to meet the new standards. Current numbering is retained in this Model to remain consistent with the reference within the NRRA.~~

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~~(II)~~ (ii) The requirements of Subparagraph (a)(ii) may be satisfied by an insurer's possessing less than the minimum capital and surplus upon an affirmative finding of acceptability by the Commissioner. The finding shall be based upon such factors as quality of management, capital and surplus of any parent company, company underwriting profit and investment income trends, market availability and company record and reputation within the industry. In no event shall the Commissioner make an affirmative finding of acceptability when the Nonadmitted Insurer's capital and surplus is less than \$4,500,000; or

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(b) For a Nonadmitted Insurer domiciled outside the United States, the insurer shall be listed on the Quarterly Listing of Alien Insurers maintained by the International Insurers Department of the National Association of Insurance Commissioners (NAIC); [or]

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~~(c)~~ ~~[For an insurer domiciled in this State, the insurer is a Domestic Surplus Lines Insurer.]~~

~~(b)~~ In the case of an insurance exchange created by the laws of a state other than this state:

- ~~(i)~~ The syndicates of the exchange shall maintain under terms acceptable to the commissioner capital and surplus, or its equivalent under the laws of its domiciliary jurisdiction, of not less than \$75,000,000 in the aggregate; and
- ~~(ii)~~ The exchange shall maintain under terms acceptable to the commissioner not less than fifty percent (50%) of the policyholder surplus of each syndicate in a custodial account accessible to the exchange or its domiciliary commissioner in the event of insolvency or impairment of the individual syndicate; and
- ~~(iii)~~ In addition, each individual syndicate to be eligible to accept surplus lines insurance placements from this state shall meet either of the following requirements:
- ~~(I)~~ For insurance exchanges which maintain funds in an amount of not less than \$15,000,000 for the protection of all exchange policyholders, the syndicate shall maintain under terms acceptable to the commissioner minimum capital and surplus, or its equivalent under the laws of the domiciliary jurisdiction, of not less than \$5,000,000; or
- ~~(II)~~ For insurance exchanges which do not maintain funds in an amount of not less than \$15,000,000 for the protection of all exchange policyholders, the syndicate shall maintain under terms acceptable to the commissioner minimum capital and surplus, or its equivalent under the laws of its domiciliary jurisdiction, of not less than the minimum capital and surplus requirements under the laws of its domiciliary jurisdiction of \$15,000,000, whichever is greater; or

Drafting Note: Some states may want to cross-reference statutory provisions in their own states which provide a grandfather clause for syndicates established with a lower capital and surplus requirement.

~~(c)~~ In the case of a Lloyd's plan or other similar group of insurers, which consists of unincorporated individual insurers, or a combination of both unincorporated and incorporated insurers:

- ~~(i)~~ The plan or group maintains a trust fund that shall consist of a trustee account representing the group's liabilities attributable to business written in the United States; and
- ~~(ii)~~ In addition, the group shall establish and maintain in trust a surplus in the amount of \$100,000,000; which shall be available for the benefit of United States surplus lines policyholders of any member of the group.
- ~~(iii)~~ The incorporated members of the group shall not be engaged in any business other than underwriting as a member of the group and shall be subject to the same level of solvency regulation and control by the group's domiciliary regulator as are the unincorporated members.
- ~~(iv)~~ The trust funds shall be maintained in an irrevocable trust account in the United States in a qualified financial institution, consisting of cash, securities, letters of credit or investments of substantially the same character and quality as those which are eligible investments for the capital and statutory reserves of admitted insurers to write like kinds of insurance in this state and, in addition, the trust required by item (ii) of this paragraph shall satisfy the requirements of the

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Nonadmitted Insurance Model Act

Standard Trust Agreement required for listing with the National Association of Insurance Commissioners (NAIC) International Insurers Department; or

- (d) ~~In the case of a group of incorporated insurers under common administration, which has continuously transacted an insurance business outside the United States for at least three (3) years immediately prior to this time, and which submits to this state's authority to examine its books and records and bears the expense of the examination:~~
- (i) ~~The group shall maintain an aggregate policyholders' surplus of \$10,000,000,000; and~~
 - (ii) ~~The group shall maintain in trust a surplus in the amount of \$100,000,000; which shall be available for the benefit of United States surplus lines policyholders of any member of the group; and~~
 - (iii) ~~Each insurer shall individually maintain capital and surplus of not less than \$25,000,000 per company.~~
 - (iv) ~~The trust funds shall satisfy the requirements of the Standard Trust Agreement requirement for listing with the NAIC International Insurers Department, and shall be maintained in an irrevocable trust account in the United States in a qualified financial institution, and shall consist of cash, securities, letters of credit or investments of substantially the same character and quality as those which are eligible investments for the capital and statutory reserves of admitted insurers to write like kinds of insurance in this state.~~
 - (v) ~~Additionally, each member of the group shall make available to the commissioner an annual certification of the member's solvency by the member's domiciliary regulator and its independent public accountant; or~~
- (e) ~~Except for an exchange or plan complying with Subparagraph (b), (c) or (d), an insurer not domiciled in one of the United States or its territories shall satisfy the capital and surplus requirements of Subsection C(2)(a) of this section and shall have in force a trust fund of not less than the greater of:~~
- (i) ~~\$5,400,000; or~~
 - (ii) ~~Thirty percent (30%) of the United States surplus lines gross liabilities, excluding aviation, wet marine and transportation insurance liabilities, not to exceed \$60,000,000, to be determined annually on the basis of accounting practices and procedures substantially equivalent to those promulgated by this state, as of December 31 next preceding the date of determination, where:~~
 - (I) ~~The liabilities are maintained in an irrevocable trust account in the United States in a qualified financial institution, on behalf of U.S. policyholders consisting of cash, securities, letters of credit or other investments of substantially the same character and quality as those which are eligible investments pursuant to [cite insurance investment law] for the capital and statutory reserves of admitted insurers to write like kinds of insurance in this state. The trust fund, which shall be included in any calculation of capital and surplus or its equivalent, shall satisfy the requirements of the Standard Trust Agreement required for listing with the NAIC International Insurers Department; and~~
 - (II) ~~The insurer may request approval from the commissioner to use the trust fund to pay valid surplus lines claims; provided, however, that the balance of the trust fund is never less than the greater of \$5,400,000 or thirty percent (30%) of the insurer's current gross U.S. surplus lines liabilities, excluding aviation, wet marine and transportation insurance~~

liabilities; and

(III) In calculating the trust fund amount required by this subsection, credit shall be given for surplus lines deposits separately required and maintained for a particular state or U.S. territory, not to exceed the amount of the insurer's loss and loss adjustment reserves in the particular state or territory;

Drafting Note: The commissioner may wish to establish the authority to set a higher level on a case-by-case basis.

(f) An insurer or group of insurers meeting the requirements to do a surplus lines business in this state at the effective date of this law shall have two (2) years from the date of enactment to meet the requirements of Subparagraph (e), as follows:

Year Following Enactment	Trust Fund Requirement
1	15% of U.S. surplus lines liabilities, excluding aviation, wet marine and transportation insurance, with a maximum of \$30,000,000
2	30% of U.S. surplus lines liabilities, excluding aviation, wet marine and transportation insurance, with a maximum of \$60,000,000.

(g) The commissioner shall have the authority to adjust, in response to inflation, the trust fund amounts required by Subparagraph (e).

(3) In addition to all of the other requirements of this subsection, an insurer not domiciled in the United States or its territories shall be listed by the NAIC International Insurers Department. The commissioner may waive the requirement in Paragraph (3) or the requirements of Section 5C(2)(e)(ii) may be satisfied by an insurer's possessing less than the trust fund amount specified in Section 5C(2)(e)(ii) upon an affirmative finding of acceptability by the commissioner if the commissioner is satisfied that the placement of insurance with the insurer is necessary and will not be detrimental to the public and the policyholder. In determining whether business may be placed with the insurer, the commissioner may consider such factors as:

- (a) The interests of the public and policyholders;
 - (b) The length of time the insurer has been authorized in its domiciliary jurisdiction and elsewhere;
 - (c) Unavailability of particular coverages from authorized insurers or unauthorized insurers meeting the requirements of this section;
 - (d) The size of the company as measured by its assets, capital and surplus, reserves, premium writings, insurance in force or other appropriate criteria;
 - (e) The kinds of business the company writes, its net exposure and the extent to which the company's business is diversified among several lines of insurance and geographic locations; and
 - (f) The past and projected trend in the size of the company's capital and surplus considering such factors as premium growth, operating history, loss and expense ratios, or other appropriate criteria; and
- (4) Has caused to be provided to the commissioner a copy of its current annual statement certified by the insurer and an actuarial opinion as to the adequacy of, and methodology used to determine, the insurer's loss reserves. The statement shall be provided at the same time it is provided to the insurer's domicile, but in no event more than eight (8) months after the close of the period reported upon, and shall be certified as a true and correct copy by an accounting or auditing firm licensed in the jurisdiction of the insurer's domicile and certified by a senior officer of the nonadmitted insurer as a true and correct copy of the statement filed with the regulatory

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authority in the domicile of the nonadmitted insurer. In the case of an insurance exchange qualifying under Paragraph (2)(b) of this subsection, the statement may be an aggregate combined statement of all underwriting syndicates operating during the period reported; and

Drafting Note: The following paragraph is for use by those states which desire to adopt a "white list" for determining the eligibility of nonadmitted insurers to write surplus lines insurance.

(5) In addition to meeting the requirements in Paragraphs (1) to (4) of this subsection an insurer shall be an eligible surplus lines insurer if it appears on the most recent list of eligible surplus lines insurers published by the commissioner from time to time but at least semiannually. Nothing in this paragraph shall require the commissioner to place or maintain the name of any nonadmitted insurer on the list of eligible surplus lines insurers.

(6) Notwithstanding Section 5A, only that portion of any risk eligible for export for which the full amount of coverage is not procurable from listed eligible surplus lines insurers may be placed with any other nonadmitted insurer which does not appear on the list of eligible surplus lines insurers published by the commissioner pursuant to Paragraph (5) of this subsection but nonetheless meets the requirements set forth in Sections 5C(1) and 5C(2) and any regulations of the commissioner. The surplus lines licensee seeking to provide coverage through an unlisted nonadmitted insurer shall make a filing specifying the amounts and percentages of each risk to be placed, and naming the nonadmitted insurers with which placement is intended. Within [insert number] days after placing the coverage, the surplus lines licensee shall also send written notice to the insured or the producing broker that the insurance, or a portion thereof, has been placed with the nonadmitted insurer.

D. The placement of Surplus Lines Insurance shall be subject to the statutory and regulatory requirements solely of the insured's Home State.

ED. Insurance procured under this section shall be valid and enforceable as to all parties.

FE. Withdrawal of Eligibility as a Surplus Lines Insurer

If at any time the Commissioner has reason to believe that a Surplus Lines Insurer is no longer eligible under Section 5C, :

- (1) Is in unsound financial condition or has acted in an untrustworthy manner;
- (2) No longer meets standards set forth in Section 5C of this Act;
- (3) Has willfully violated the laws of this state; or
- (4) Does not conduct a proper claims practice.

The Commissioner may after notice and an opportunity for a hearing declare it ineligible. The Commissioner shall promptly publish notice of all such declarations in a timely manner reasonably calculated to reach to each Surplus Lines Licensee or surplus lines advisory organization, for distribution to all surplus lines licensees.

Drafting Note: Individual States should consider whether such declarations of ineligibility are appropriate in view of the state's other due process and administrative procedure requirements. Eligibility criteria are independent of other considerations such as compliance with other laws, for example, 18-USC 1033, relating to felons participating in the insurance business.

GF. Surplus Lines Tax

(1) In addition to the full amount of gross Premiums charged by the insurer for the insurance, every Person licensed pursuant to Section 5JH of this Act shall collect and pay to the Commissioner a sum equal to [insert number] percent of the gross Premiums charged, less any return Premiums, for Surplus Lines Insurance provided by the licensee pursuant to the license. Where the insurance covers properties, risks or exposures located or to be performed both in and out of this State, the

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sum payable shall be computed on that portion of the gross premiums allocated to this state pursuant to Paragraph (4) of this subsection less the amount of gross premiums allocated to this state and returned to the insured paid entirely to the Home State of the insured. The tax on any portion of the premium unearned at termination of insurance having been credited by the State to the licensee shall be returned to the policyholder directly by the Surplus Lines Licensee or through the producing broker, if any. The Surplus Lines Licensee is prohibited from rebating, for any reason, any part of the tax.

(2) At the time of filing the [insert monthly, quarterly, annual] report as set forth in Subsection SR of this section, each Surplus Lines Licensee shall pay the premium tax due for the policies written during the period covered by the report.

(3) If a surplus lines policy procured through a surplus lines licensee covers properties, risks or exposures only partially located or to be performed in this state, the tax due shall be computed on the portions of the premiums which are attributable to the properties, risks or exposures located or to be performed in this state. In determining the amount of premiums taxable in this state, all premiums written, procured or received in this state shall be considered written on properties, risks or exposures located or to be performed in this state, except premiums which are properly allocated or apportioned and reported as taxable premiums of a reciprocal state. In no event shall the tax payable to this state be less than the tax due pursuant to Paragraph (4) of this subsection; provided, however, in the event that the amount of tax due under this provision is less than \$50 in any jurisdiction, it shall be payable in the jurisdiction in which the affidavit required in Subsection K of this section is filed. The commissioner shall, at least annually furnish to the commissioner of a reciprocal state, as defined in Section 3L, a copy of all filings reporting an allocation of taxes as required by this subsection.

(4) In determining the amount of gross premiums taxable in this state for a placement of surplus lines insurance covering properties, risks or exposures only partially located or to be performed in this state, the tax due shall be computed on the portions of the premiums which are attributable to properties, risks or exposures located or to be performed in this state and which relates to the kinds of insurance being placed as determined by reference to an allocation schedule duly promulgated in a regulation by the commissioner.

(a) If a policy covers more than one classification:

(i) For any portion of the coverage identified by a classification on the Allocation Schedule, the tax shall be computed by using the Allocation Schedule for the corresponding portion of the premium;

(ii) For any portion of the coverage not identified by a classification on the Allocation Schedule, the tax shall be computed by using an alternative equitable method of allocation for the property or risk;

(iii) For any portion of the coverage where the premium is indivisible, the tax shall be computed by using the method of allocation which pertains to the classification describing the predominant coverage.

(b) If the information provided by the surplus lines licensee is insufficient to substantiate the method of allocation used by the surplus lines licensee, or if the commissioner determines that the licensee's method is incorrect, the commissioner shall determine the equitable and appropriate amount of tax due to this state as follows:

(i) By use of the Allocation Schedule where the risk is appropriately identified in the schedule;

(ii) Where the Allocation Schedule does not identify a classification appropriate to the coverage, the commissioner may give significant weight to documented evidence of the underwriting bases and other criteria used by the insurer. The

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~~commissioner may also consider other available information to the extent sufficient and relevant, including the percentage of the insured's physical assets in this state, the percentage of the insured's sales in this state, the percentage of income or resources derived from this state, and the amount of premium tax paid to another jurisdiction for the policy.~~

Drafting Note: Subparagraph (b) above may be included in the Act or in a separate regulation at the option of the state. It is highly recommended that the model Allocation Schedule and reporting form be adopted by regulation in conjunction with the adoption of the above language. In order for the model law to work effectively, the allocation schedules used by the states should be as uniform as possible.

HG. Collection of Tax

If the tax owed by a Surplus Lines Licensee under this section has been collected and is not paid within the time prescribed, the same shall be recoverable in a suit brought by the Commissioner against the Surplus Lines Licensee and the surety on the bond filed under Subsection HI of this section. The Commissioner may charge interest at the rate of [insert number] percent per year for the unpaid tax.

HH. Surplus Lines Licenses

(1) A Person shall not procure a contract of Surplus Lines Insurance with a ~~nonadmitted~~Surplus Lines Insurer unless the Person possesses a current Surplus Lines Insurance producer license issued by the Commissioner.

(2) The Commissioner may issue a resident surplus lines license to a qualified holder of ~~a current~~underlying property and casualty ~~agent's or broker's or general agent's~~license but only when the ~~broker or agent~~producer has:

(a) Remitted the \$[insert amount] annual fee to the Commissioner;

(b) Submitted a completed license application on a form supplied by the Commissioner;

~~(c) Passed a qualifying examination approved by the commissioner, except that all holders of a license prior to the effective date of this Act shall be deemed to have passed such an examination;~~

~~(d)~~ In the case of a resident agent, filed with the Commissioner, and continues to maintain during the term of the license, in force and unimpaired, a bond ~~or errors and omissions~~(E&O) policy in favor of this State in the penal sum of \$[insert amount] aggregate liability, with corporate sureties approved by the Commissioner. The bond ~~or E&O policy~~shall be conditioned that the Surplus Lines Licensee will conduct business in accordance with the provisions of this Act and will promptly remit the taxes as provided by law. No bond ~~or E&O policy~~shall be terminated unless at least thirty (30) days prior written notice is given to the licensee and Commissioner;

Drafting note: Under Public Law No. 106-102 (the "Gramm-Leach-Bliley Act"), it is believed that a requirement for a nonresident agent to file a bond may contravene the reciprocity provisions. The requirement for a resident agent to file a bond would not, seemingly, contravene these provisions, and there may be methodologies whereby such resident bonds could become reciprocal between States. Some States have expressed concern that their bonding requirements constitute important consumer protections, and that elimination of these simply to comply with Gramm-Leach-Bliley may result in unintended consequences, and a lack of control over possibly unscrupulous nonresident agents.

~~(e)~~ If a resident, established and continues to maintain an office in this State, ~~and~~

~~(f) Designated the commissioner as agent for service of process, thereby designating the commissioner to be the licensee's true and lawful attorney upon whom may be served all lawful process in a proceeding instituted by or on behalf of an insured or beneficiary arising out of any contract of insurance, and shall signify its agreement that such service of process is of the same legal force and validity as personal service of process in this state upon the licensee.~~

(3) A nonresident Person shall receive a nonresident surplus lines license if:

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- (a) The Pperson is currently licensed as a Ssurplus Llines Llicensee and in good standing in his or her Hhome Sstate;
- (b) The Pperson has submitted the proper request for licensure and has paid the fees required by [insert appropriate reference to Sstate law or regulation];
- (c) The Pperson has submitted or transmitted to the insurance commissioner the application for licensure that the Pperson submitted to his or her Hhome Sstate, or in lieu of the same, a completed Uniform Application; and
- (d) The person's Hhome Sstate awards nonresident surplus lines licenses to residents of this Sstate on the same basis.

Drafting Note: In accordance with Public Law No. 106-102 (the "Gramm-Leach-Bliley Act") Sstates should not require any additional attachments to the Uniform Application or impose any other conditions on applicants that exceed the information requested within the Uniform Application.

- (4) The insurance commissioner may verify the person's licensing status through the Producer Database maintained by the National Association of Insurance Commissioners, its Aaffiliates or subsidiaries.
- (5) A nonresident Ssurplus Llines Llicensee who moves from one Sstate to another Sstate or a resident Ssurplus Llines Llicensee who moves from this Sstate to another Sstate shall file a change of address and provide certification from the new resident Sstate within thirty (30) days of the change of legal residence. No fee or license application is required.
- (6) The insurance commissioner shall waive any requirements for a nonresident surplus lines license applicant with a valid license from his or her Hhome Sstate, except the requirements imposed by this subsection, if the applicant's Hhome Sstate awards nonresident surplus lines licenses to residents of this Sstate on the same basis.
- (7) Each surplus lines license shall expire on [insert date] of each year, and an application for renewal shall be filed before [insert date] of each year upon payment of the annual fee and compliance with other provisions of this section. A Ssurplus Llines Llicensee who fails to apply for renewal of the license before [insert date] shall pay a penalty of \$[insert amount] and be subject to penalties provided by law before the license will be renewed.

Drafting Note: States may wish to reference their specific licensing statutes in this section.

Drafting Note: Some Sstates allow surplus lines licensees to hold binding authorities on behalf of eligible Ssurplus Llines Linsurers. States which allow such binding authorities might want to establish minimum standards for the related agreements. In addition, Sstates might want to consider requiring surplus lines licensees with such binding authorities to submit the related agreements to Sstate regulators for review and approval.

II. Suspension, Revocation or Nonrenewal of Surplus Lines Licensee's License

The Ccommissioner may suspend, revoke or refuse to renew the license of a Ssurplus Llines Llicensee after notice and an opportunity for a hearing as provided under the applicable provision of this state's laws for upon one or more of the following grounds:

- (1) Removal of the resident surplus lines licensee's office from this state;
- (2) Removal of the resident surplus lines licensee's office accounts and records from this state during

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~~the period during which the accounts and records are required to be maintained under Subsection Q of this section;~~

- ~~(3) Closing of the surplus lines licensee's office for a period of more than thirty (30) business days, unless permission is granted by the commissioner;~~
- ~~(4) Failure to make and file required reports;~~
- ~~(5) Failure to transmit required tax on surplus lines premiums to this state or a reciprocal state to which a tax is owing;~~
- ~~(6) Failure to maintain required bond;~~
- (17) Violation of any provision of this Act; or
- (28) For any cause for which an insurance license could be denied, revoked, suspended or renewal refused under Sections [insert applicable citation].

KJ. Actions Against Eligible Surplus Lines Insurers Transacting Surplus Lines Business

- (1) An Eligible Surplus Lines Insurer may be sued upon a cause of action arising in this State under a Surplus Lines Insurance contract made by it or evidence of insurance issued or delivered by the Surplus Lines Licensee. A policy issued by the Eligible Surplus Lines Insurer shall contain a provision stating the substance of this section and designating the Person to whom the Commissioner shall mail process.
- (2) The remedies provided in this section are in addition to any other methods provided by law for service of process upon insurers.

LK. Duty to File Evidence of Insurance and Affidavits

Within [insert number] days after the placing of any Surplus Lines Insurance, each producing broker shall execute and each Surplus Lines Licensee shall execute where appropriate, and file a written report regarding the insurance which shall be kept confidential by the Commissioner, including the following:

- (1) The name and address of the insured;
- (2) The identity of the insurer or insurers;
- (3) A description of the subject and location of the risk;
- (4) The amount of Premium charged for the insurance;
- (5) Such other pertinent information as the Commissioner may reasonably require; and
- (6) An affidavit on a standardized form promulgated by the Commissioner, as to the diligent efforts to place the coverage with Admitted Insurers and the results of that effort ~~or the insured is an Exempt Commercial Purchaser~~. The affidavit shall be open to public inspection. The affidavit shall affirm that the insured was expressly advised in writing prior to placement of the insurance that:
 - (a) The Surplus Lines Insurer with whom the insurance was to be placed is not licensed in this State and is not subject to its supervision; and
 - (b) In the event of the insolvency of the Surplus Lines Insurer, losses will not be paid by the State insurance guaranty fund.

Drafting Note: Surplus lines licensees will frequently communicate with the insured through a producing broker rather than communicate with the insured directly. In preparing affidavit forms, States may wish to recognize that, as a result of communications passing through the producing broker, the Surplus Lines Licensee may not be in a position to affirm, based upon personal knowledge, that the insured received from the producing broker the written information required by this subsection.

M. Surplus Lines Advisory Organizations

- (1) There is hereby created a nonprofit association to be known as the [insert name]. All surplus lines licensees shall be deemed to be members of the association. The association shall perform its functions under the plan of operation established pursuant to Paragraph (3) of this subsection and must exercise its powers through a board of directors established under Paragraph (2) of this subsection. The association shall be supervised by the Commissioner. The association shall be authorized and have the duty to:

Drafting Note: The preceding paragraph provides that all surplus lines licensees are “deemed” to be members of the association. Some States, however, may choose not to establish a surplus lines advisory organization; in those States Subsection L would not be necessary.

- (a) Receive, record, and subject to Subparagraph (b) of this paragraph, stamp all Surplus Lines Insurance documents which surplus lines brokers are required to file with the association pursuant to the plan of operation;

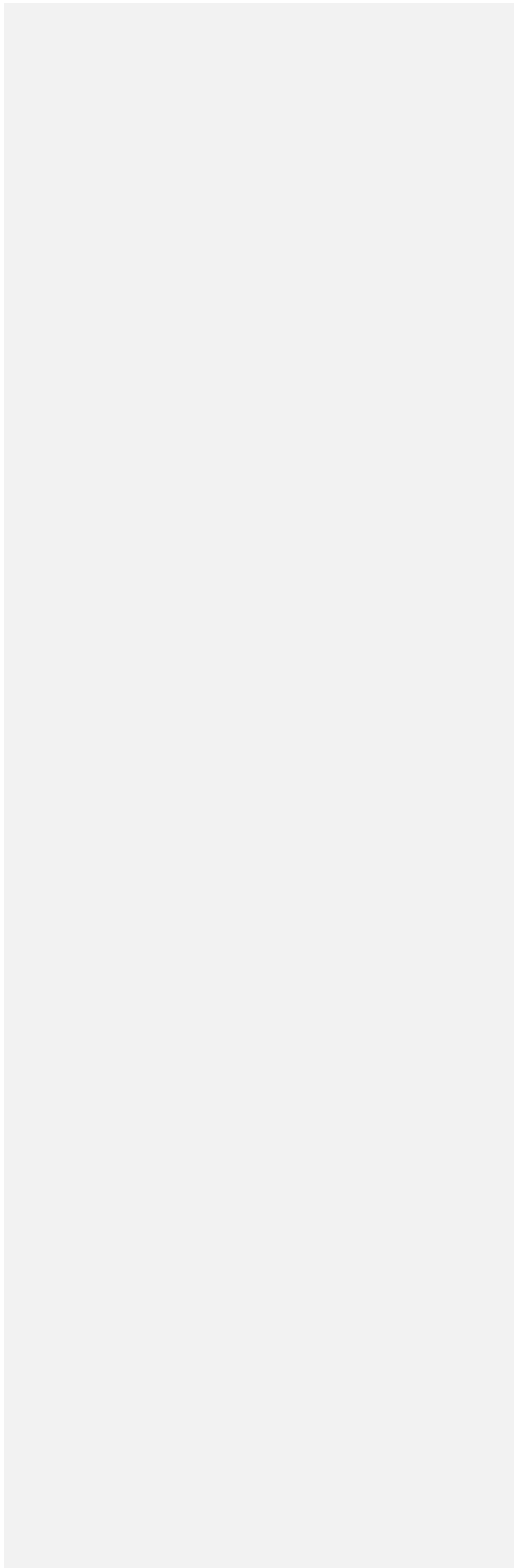
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Drafting Note: Subparagraph (a) of this paragraph authorizes the association to receive, record and stamp all surplus lines documents which must be submitted to the association pursuant to the plan of operation. Documents to be submitted to the association for stamping are likely to vary by Sstate.

- (b) Refuse to stamp submitted insurance documents, if the association determines that a Nonadmitted Insurer does not meet minimum Sstate financial standards of eligibility, or the Commissioner orders the association not to stamp insurance documents pursuant to Paragraph (9) of this subsection. The association shall notify the Commissioner and provide an explanation for any refusal to stamp submitted insurance documents other than a refusal based upon the order of the Commissioner;
 - (c) Prepare and deliver annually to each licensee and to the Commissioner a report regarding surplus lines business. The report shall include a delineation of the classes of business procured during the preceding calendar year, in the form the board of directors prescribes;
 - (d) Encourage compliance by its members with the surplus lines law of this Sstate and the rules and regulations of the Commissioner relative to Surplus Lines Insurance;
 - (e) Communicate with organizations of agents, brokers and Addmitted Insurers with respect to the proper use of the surplus lines market;
 - (f) Employ and retain persons as necessary to carry out the duties of the association;
 - (g) Borrow money as necessary to effect the purposes of the association;
 - (h) Enter contracts as necessary to effect the purposes of the association; and
 - (i) Provide such other services to its members as are incidental or related to the purposes of the association.
- (2) The association shall function through a board of directors elected by the association members, and officers who shall be elected by the board of directors.
- (a) The board of directors of the association shall consist of not less than five (5) nor more than nine (9) persons serving terms as established in the plan of operation. The plan of operation shall provide for the election of a board of directors by the members of the association from its membership. The plan of operation shall fix the manner of voting and may weigh each member's vote to reflect the annual Surplus Lines Insurance Premium written by the member.
 - (b) The board of directors shall elect officers as provided for in the plan of operation.
- (3) The association shall establish a plan of operation. The plan of operation shall provide for the formation, operation and governance of the association. The plan and any amendments shall be effective upon approval by the Commissioner, which shall not be unreasonably withheld or delayed. All association members shall comply with the plan of operation or any amendments to it. Failure to comply with the plan of operation or any amendments shall constitute a violation of the insurance law and the Commissioner may issue an order requiring discontinuance of the violation.
- (4) The association shall file with the Commissioner:
- (a) A copy of its plan of operation and any amendments to it;
 - (b) A current list of its members revised at least annually;
 - (c) The name and address of a resident of this Sstate upon whom notices or orders of the Commissioner or processes issued at the direction of the Commissioner may be served; and

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Nonadmitted Insurance Model Act

- (d) An agreement that the **C**ommissioner may examine the association in accordance with the provisions of Paragraph (5) of this subsection.
- (5) The **C**ommissioner shall, at least once in [insert number] years, make or cause to be made an examination of the association. The reasonable cost of an examination shall be paid by the association upon presentation to it by the **C**ommissioner of a detailed account of each cost. The officers, managers, agents, and employees of the association may be examined at any time, under oath, and shall exhibit all books, records, accounts, documents or agreements governing its method of operation. The **C**ommissioner shall furnish a copy of the examination report to the association and shall notify the association that it may request a hearing within thirty (30) days on the report or on any facts or recommendations contained in it. If the **C**ommissioner finds the association to be in violation of this section, the **C**ommissioner may issue an order requiring the discontinuance of the violation. A director may be removed from the association's board of directors by the **C**ommissioner for cause, stated in writing, after an opportunity has been given to the director to be heard.
- (6) There shall be no liability on the part of and no causes of action of any nature shall arise against the association, its directors, officers, agents or employees for any action taken or omitted by them in the performance of their powers and duties under this section, absent gross negligence or willful misconduct.
- (7) Within [insert number] days after a surplus lines policy is procured, a licensee shall submit to the association for recording and stamping all documents which surplus lines brokers are required to file with the association. Every insurance document submitted to the association pursuant to this subsection shall set forth:
- (a) The name and address of the insured;
 - (b) The gross **P**remium charged;
 - (c) The name of the **N**onadmitted **I**nsurer; and
 - (d) The class of insurance procured.

Drafting Note: The appropriate time limits for submitting documents required for stamping will vary by **S**tate.

- (8) It shall be unlawful for an insurance agent, broker or surplus lines broker to deliver in this **S**tate any insurance document which surplus lines brokers are required to file with the association unless the insurance document is stamped by the association or is exempt from such requirements. However, a licensee's failure to comply with the requirements of this subsection shall not affect the validity of the coverage.
- (9) The services performed by the association shall be funded by a stamping fee assessed for each premium-bearing document submitted to the association. The stamping fee shall be established by the board of directors of the association from time to time. The stamping fee shall be paid by the insured.
- (10) The **C**ommissioner may declare a **N**onadmitted **I**nsurer ineligible and order the association not to stamp insurance documents issued by the **N**onadmitted **I**nsurer and issue any other appropriate order.

NM. Evidence of the Insurance and Subsequent Changes to the Insurance

- (1) Upon placing **S**urplus **L**ines **I**nsurance, the **S**urplus **L**ines **L**icensee shall promptly deliver to the insured or the producing broker the policy, or if the policy is not then available, a certificate as described in Paragraph (4) of this subsection, cover note, binder or other evidence of insurance. The certificate described in Paragraph (4) of this subsection, cover note, binder or other evidence of insurance shall be executed by the **S**urplus **L**ines **L**icensee and shall show the description and location of the subject of the insurance, coverages including any material limitations other than those

in standard forms, a general description of the coverages of the insurance, the Ppremium and rate charged and taxes to be collected from the insured, and the name and address of the insured and Ssurplus Llines Iinsurer or insurers and proportion of the entire risk assumed by each, and the name of the Ssurplus Llines Llicensee and the licensee’s license number.

- (2) A Ssurplus Llines Llicensee shall not issue or deliver any evidence of insurance or purport to insure or represent that insurance will be or has been written by any eligible Ssurplus Llines Iinsurer, or a Nonadmitted Iinsurer pursuant to Section 5C(4), unless the licensee has authority from the insurer to cause the risk to be insured, or has received information from the insurer in the regular course of business that the insurance has been granted.
- (3) If, after delivery of any evidence of insurance, there is any change in the identity of the insurers, or the proportion of the risk assumed by any insurer, or any other material change in coverage as stated in the surplus lines licensee’s original evidence of insurance, or in any other material as to the insurance coverage so evidenced, the Ssurplus Llines Llicensee shall promptly issue and deliver to the insured or the original producing broker an appropriate substitute for, or endorsement of the original document, accurately showing the current status of the coverage and the insurers responsible for the coverage.
- (4) As soon as reasonably possible after the placement of the insurance, the Ssurplus Llines Llicensee shall deliver a copy of the policy or, if not available, a certificate of insurance to the insured or producing broker to replace any evidence of insurance previously issued. Each certificate or policy of insurance shall contain or have attached a complete record of all policy insuring agreements, conditions, exclusions, clauses, endorsements or any other material facts that would regularly be included in the policy.

~~(5) A surplus lines licensee who fails to comply with the requirements of this subsection shall be subject to the penalties provided in this Act.~~

- (5) The Ssurplus Llines Llicensee shall give the following consumer notice to every Pperson, other than Exempt Commercial Purchasers, applying for insurance with a Nonadmitted Iinsurer. The notice shall be printed in 16-point type on a separate document affixed to the application. The applicant shall sign and date a copy of the notice to acknowledge receiving it. The Ssurplus Llines Llicensee shall maintain the signed notice in its file for a period of five (5) years from expiration of the policy. The Ssurplus Llines Llicensee shall tender a copy of the signed notice to the insured at the time of delivery of each policy the licensee transacts with a Nonadmitted Iinsurer. The copy shall be a separate document affixed to the policy.

“Notice: 1. An “nonadmitted” or “Surplus Lines Insurer that is not licensed in this state is issuing the insurance policy that you have applied to purchase. These companies are called “nonadmitted” or “surplus lines” insurers. 2. The insurer is not subject to the financial solvency regulation and enforcement that applies to licensed insurers in this state. 3. These insurers generally do not participate in State insurance guaranty funds created by state law. These guaranty funds will not pay your claims or protect your assets if the insurer becomes insolvent and is unable to make payments as promised. 4. Some states maintain lists of approved or eligible surplus lines insurers and surplus lines brokers may use only insurers on the lists. Some states issue orders that particular surplus lines insurers can not be used. 5. For additional information about the above matters and about the insurer, you should ask questions of your insurance agent, broker or surplus lines broker. You may also contact your insurance department consumer help line.”

Drafting Note: This notice is intended to inform personal lines customers and smaller commercial risks of the nature of the coverage they are purchasing. A State may wish to add language to this statute providing that this notice need not be given to commercial risks meeting defined criteria for size and insurance expertise.

ON. Licensee’s Duty to Notify Insured

- (1) No contract of insurance placed by a Ssurplus Llines Llicensee under this Act shall be binding upon the insured and no Ppremium charged shall be due and payable until the Ssurplus Llines Llicensee or the producing broker shall have notified the insured in writing, in a form acceptable to the Commissioner, a copy of which shall be maintained by the licensee or the producing broker with the records of the contract and available for possible examination, that:
 - (a) The insurer [other than a Domestic Surplus Lines Insurer] with which the licensee places

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the insurance is not licensed by this Sstate and is not subject to its supervision; and

(b) In the event of the insolvency of the Ssurplus Llines Insurer, losses will not be paid by the Sstate insurance guaranty fund.

(2) Nothing herein contained shall nullify any agreement by any insurer to provide insurance.

Drafting Note: To ensure the meaningfulness of the notice required by this subsection, the Commissioner might want to establish criteria related to readability, type-facefont, and type-size of the notice.

PQ. Effect of Payment to Surplus Lines Licensee

A payment of Premium to a Ssurplus Llines Licensee acting for a Person other than itself in procuring, continuing or renewing any policy of insurance procured under this section shall be deemed to be payment to the insurer, whatever conditions or stipulations may be inserted in the policy or contract notwithstanding.

QP. Surplus Lines Licensees May Accept Business from Other Producers

A Ssurplus Llines Licensee may originate Ssurplus Llines Insurance or accept such insurance from any other producing broker duly licensed as to the kinds of insurance involved, and the Ssurplus Llines Licensee may compensate the producing broker for the business.

RQ. Records of Surplus Lines Licensee

(1) Each Ssurplus Llines Licensee shall keep ~~in this state~~ a full and true record of each Ssurplus Llines Insurance contract placed by or through the licensee, including a copy of the policy, certificate, cover note or other evidence of insurance showing each of the following items applicable:

- (4a) Amount of the insurance, risks and perils insured;
- (2b) Brief description of the property insured and its location;
- (3c) Gross Premium charged;
- (4d) Any return Premium paid;
- (5e) Rate of Premium charged upon the several items of property;
- (6f) Effective date and terms of the contract;
- (7g) Name and address of the insured;
- (8h) Name and address of the insurer;
- (9i) Amount of tax and other sums to be collected from the insured;
- (10) ~~Allocation of taxes by state as referred to in Subsection F of this section;~~ and
- (4j) Identity of the producing broker, any confirming correspondence from the insurer or its representative, and the application.

(2) The record of each contract shall be kept open at all reasonable times to examination by the Commissioner without notice for a period not less than five (5) years following termination of the contract. In lieu of maintaining offices in this Sstate, each nonresident Ssurplus Llines Licensee shall make available to the Commissioner any and all records that the Commissioner deems necessary for examination.

Drafting Note: States may wish to extend the five-year period prescribed for open access to insurance records because of the long-term nature of this business.

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SR. Reports—Summary of Exported Business

On or before the end of the month following each [insert month, quarter, year], each Surplus Lines Licensee shall file with the Commissioner, on forms prescribed by the Commissioner, a verified report in duplicate of all Surplus Lines Insurance transacted during the preceding period, showing:

- (1) Aggregate gross Premiums written;
- (2) Aggregate return Premiums;
- (3) Amount of aggregate tax remitted to this State; and
- (4) Amount of aggregate tax due or remitted to each other State for which an allocation is made pursuant to Subsection F of this section.

Drafting Note: States desiring to have taxes remitted annually may call for more frequent detailed listing of business.

T. [OPTIONAL] [Domestic Surplus Lines Insurers]

(1) The Commissioner may designate a domestic insurer as a domestic Surplus Lines Insurer upon its application, which shall include, as a minimum, an authorizing resolution of the board of directors and evidence to the Commissioner's satisfaction that the insurer has capital and surplus of not less than fifteen million dollars.

(2) A Domestic Surplus Lines Insurer:

- (a) Shall be limited in its authority in this State to providing Surplus Lines Insurance.
- (b) May be authorized to write any type of property and casualty [or accident and health] insurance in this State that may be placed with a Surplus Lines Insurer pursuant to this Subpart.
- (c) Be subject to the legal and regulatory requirements applicable to domestic insurers, except for theas followings:
 - (i) Premium taxes, fees, and assessments applicable to admitted insurance;
 - (ii) Regulation of rates and formss-requiring the filing of rates and forms for approval;
 - (iii) Assessment or coverage by insurance guaranty funds.

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Section 6. Insurance Independently Procured—Duty to Report and Pay Tax

A. Each insured whose Home State is in this State who procures, ~~or~~ continues or renews insurance with a Nonadmitted Insurer on properties, risks or exposures located or to be performed in whole or in part in this state, other than insurance procured through a Surplus Lines Licensee, shall, within [insert number] days after the date the insurance was so procured, continued or renewed, file a written report with the Commissioner, upon forms prescribed by the Commissioner, showing the name and address of the insured or insureds, name and address of the insurer, the subject of the insurance, a general description of the coverage, the amount of Premium currently charged, and additional pertinent information reasonably requested by the Commissioner.

~~For the purposes of this subsection, properties, risks or exposures only partially located or to be performed in this state, which are covered under a multistate policy placed by a surplus lines licensee in another state, shall be deemed to be insurance independently procured unless the insurer is an admitted insurer.~~

Drafting Note: Subsection A may need to be revised in those States exempting from taxation insurance procured by nonprofit educational institutions and their employers, from nonprofit educational insurers.

B. ~~Gross-Premiums~~ charged for the insurance, less any return Premiums, are subject to a tax at the rate of

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[insert number] percent. At the time of filing the report required in Subsection A of this section, the insured whose Home State is this State shall pay the tax on all Taxable Premium to the Commissioner, who shall transmit the same for distribution as provided in this Act.

Drafting Note: Existing State laws and procedures may require that the tax report be forwarded to another State agency, such as the Department of the Treasury, rather than to the Commissioner. In addition, some States may require the tax to be paid on a periodic basis (e.g., annually) rather than at the time of the filing required by Subsection A. Subsections A and B may need to be revised in these States.

~~C. If an independently procured policy covers properties, risks or exposures only partially located or to be performed in this state, the tax payable shall be computed on the portion of the premium properly attributable to the properties, risks or exposures located or to be performed in this state, as set forth in Sections 5F(3) and 5F(4) of this Act.~~

~~CD.~~ Delinquent taxes hereunder shall bear interest at the rate of [insert number] percent per year.

~~DE.~~ This section does not abrogate or modify, and shall not be construed or deemed to abrogate or modify any other provision of this Act.

Section 7. Penalties

A. A Person who in this State represents or aids a Nonadmitted Insurer in violation of this Act may be found guilty of a criminal act and subject to a fine not in excess of \$[insert amount].

Drafting Note: Some States might want to specify “misdemeanor” or “felony” rather than “criminal act” in Section 7A.

B. In addition to any other penalty provided herein or otherwise provided by law, including any suspension, revocation or refusal to renew a license, any Person, firm, association or corporation violating any provision of this Act shall be liable to a civil penalty not exceeding \$[insert amount] for the first offense, and not exceeding \$[insert amount] for each succeeding offense.

C. The above penalties are not exclusive remedies. Penalties may also be assessed under [insert citation to trade practices and fraud statute] of the insurance code of this State.

Section 8. Violations

Whenever there is evidence satisfactory to the Commissioner believes, from evidence satisfactory to him or her, that a Person is violating or about to violate the provisions of this Act, the Commissioner may cause a complaint to be filed in the [insert appropriate court] Court for restitution and to enjoin and restrain the Person from continuing the violation or engaging in or doing any act in furtherance thereof. The court shall have jurisdiction of the proceeding and shall have the power to make and enter an order of judgment awarding such preliminary or final injunctive relief and restitution as in its judgment is proper.

Section 9. Service of Process

A. Any act of transacting insurance by an unauthorized Person or a Nonadmitted Insurer is equivalent to and shall constitute an irrevocable appointment by the unauthorized Person or insurer, binding upon it, its executor or administrator, or successor in interest of the [insert title of appropriate State official] or his or her successor in office, to be the true and lawful attorney of the unauthorized Person or insurer upon whom may be served all lawful process in any action, suit or proceeding in any court by the Commissioner or by the State and upon whom may be served any notice, order, pleading or process in any proceeding before the Commissioner and which arises out of transacting insurance in this State by the unauthorized Person or insurer. Any act of transacting insurance in this State by a Nonadmitted Insurer shall signify its acceptance of its agreement that any lawful process in such court action, suit or proceeding and any notice, order, pleading or process in such administrative proceeding before the Commissioner so served shall be of the same legal force and validity as personal service of process in this State upon the unauthorized Person or insurer.

B. Service of process in the action shall be made by delivering to and leaving with the [insert title of appropriate State official], or some Person in apparent charge of the office, two (2) copies thereof and by payment to the [insert title of appropriate State official] of the fee prescribed by law. Service upon the [insert title of appropriate State official] as attorney shall be service upon the principal.

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Drafting Note: Existing Sstate laws and procedures may require that service of process be made upon either the Commissioner or another state official.

- C. The [insert title of appropriate Sstate official] shall forward by certified mail one of the copies of the process or notice, order, pleading or process in proceedings before the Commissioner to the defendant in the court proceeding or to whom the notice, order, pleading or process in the administrative proceeding is addressed or directed at its last known Pprincipal Place of Business and shall keep a record of all process so served on the Commissioner which shall show the day and hour of service. Service is sufficient, provided:
- (1) Notice of service and a copy of the court process or the notice, order, pleading or process in the administrative proceeding are sent within ten (10) days by certified mail by the plaintiff or the plaintiff's attorney in the court proceeding or by the Commissioner in the administrative proceeding to the defendant in the court proceeding or to whom the notice, order, pleading or process in the administrative proceeding is addressed or directed at the last known Pprincipal Place of Business of the defendant in the court or administrative proceeding; and
 - (2) The defendant's receipt or receipts issued by the post office with which the letter is registered, showing the name of the sender of the letter and the name and address of the Person or insurer to whom the letter is addressed, and an affidavit of the plaintiff or the plaintiff's attorney in a court proceeding or of the Commissioner in an administrative proceeding, showing compliance are filed with the clerk of the court in which the action, suit or proceeding is pending or with the Commissioner in administrative proceedings, on or before the date the defendant in the court or administrative proceeding is required to appear or respond, or within such further time as the court or Commissioner may allow.
- D. A plaintiff shall not be entitled to a judgment or a determination by default in any court or administrative proceeding in which court process or notice, order, pleading or process in proceedings before the Commissioner is served under this section until the expiration of forty-five (45) days from the date of filing of the affidavit of compliance.
- E. Nothing in this section shall limit or affect the right to serve any process, notice, order or demand upon any Person or insurer in any other manner now or hereafter permitted by law.
- F. Each Nonadmitted Insurer assuming insurance in this Sstate, or relative to property, risks or exposures located or to be performed in this Sstate, shall be deemed to have subjected itself to this Act.
- G. ~~Notwithstanding~~Notwithstanding conditions or stipulations in the policy or contract, a Nonadmitted Insurer may be sued upon any cause of action arising in this Sstate, or relative to property, risks or exposures located or to be performed in this Sstate, under any insurance contract made by it.
- H. ~~Notwithstanding~~Notwithstanding conditions or stipulations in the policy or contract, a Nonadmitted Insurer subject to arbitration or other alternative dispute resolution mechanism arising in this Sstate or relative to property, risks or exposures located or to be performed in this Sstate under an insurance contract made by it shall conduct the arbitration or other alternative dispute resolution mechanism in this Sstate.

Drafting Note: Provisions of a state's constitution, statutes, regulations, and public policy may necessitate amendment of the prior subsection 9 H. States should consider adoption or modification of the prior subsection in light of their own laws on arbitration or other alternative dispute resolution in insurance and commercial transactions.

- I. A policy or contract issued by the Nonadmitted Insurer or one which is otherwise valid and contains a condition or provision not in compliance with the requirements of this Act is not thereby rendered invalid but shall be construed and applied in accordance with the conditions and provisions which would have applied had the policy or contract been issued or delivered in full compliance with this Act.

Section 10. Legal or Administrative Procedures

- A. Before any Nonadmitted Insurer files or causes to be filed any pleading in any court action, suit or proceeding or in any notice, order, pleading or process in an administrative proceeding before the Commissioner instituted against the Person or insurer, by services made as provided in this Act, the insurer shall either:

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- (1) Deposit with the clerk of the court in which the action, suit or proceeding is pending, or with the Commissioner of Insurance in administrative proceedings before the Commissioner, cash or securities, or file with the clerk or Commissioner a bond with good and sufficient sureties, to be approved by the clerk or Commissioner in an amount to be fixed by the court or Commissioner sufficient to secure the payment of any final judgment which may be rendered in the action or administrative proceeding; or
 - (2) Procure a certificate of authority to transact the business of insurance in this State. In considering the application of an insurer for a certificate of authority, for the purposes of this paragraph the Commissioner need not assert the provisions of [insert sections of insurance laws relating to retaliation] against the insurer with respect to its application if the Commissioner determines that the company would otherwise comply with the requirements for a certificate of authority.
- B. The Commissioner of Insurance, in any administrative proceeding in which service is made as provided in this Act, may in the Commissioner's discretion, order such postponement as may be necessary to afford the defendant reasonable opportunity to comply with the provisions of Subsection A of this section and to defend the action.
- C. Nothing in Subsection A of this section shall be construed to prevent a Nonadmitted Insurer from filing a motion to quash a writ or to set aside service thereof made in the manner provided in this Act, on the ground that the Nonadmitted Insurer has not done any of the acts enumerated in the pleadings.
- D. Nothing in Subsection A of this section shall apply to placements of insurance which were lawful in the Home State of the insured in which the placement took place and which were not unlawful placements under the laws of this State. Without limiting the generality of the foregoing, nothing in Subsection A shall apply to a placement made pursuant to Section 5 of this Act.

Section 11. Enforcement

- A. The Commissioner shall have the authority to proceed in the courts of this State or any other United States jurisdiction to enforce an order or decision in any court proceeding or in any administrative proceeding before the Commissioner of Insurance.

~~A. Filing and Status of Foreign Decrees~~

~~A copy of a foreign decree authenticated in accordance with the statutes of this state may be filed in the office of the clerk of any [insert proper court] Court of this state. The clerk, upon verifying with the commissioner that the decree or order qualifies as a "foreign decree" shall treat the foreign decree in the same manner as a decree of a [insert proper court] Court of this state. A foreign decree so filed has the same effect and shall be deemed a decree of a [insert proper court] Court of this state, and is subject to the same procedures, defenses and proceedings for reopening, vacating or staying as a decree of a [insert proper court] Court of this state and may be enforced or satisfied in like manner.~~

~~B. Notice of Filing~~

- ~~(1) At the time of the filing of the foreign decree, the plaintiff shall make and file with the clerk of the court an affidavit setting forth the name and last known post office address of the defendant.~~
- ~~(2) Promptly upon the filing of the foreign decree and the affidavit, the clerk shall mail notice of the filing of the foreign decree to the defendant at the address given and to the commissioner of this state and shall make a note of the mailing in the docket. In addition, the plaintiff may mail a notice of the filing of the foreign decree to the defendant and to the commissioner of this state and may file proof of mailing with the clerk. Lack of mailing notice of filing by the clerk shall not affect the enforcement proceedings if proof of mailing by the plaintiff has been filed.~~

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- (3) ~~—No execution or other process for enforcement of a foreign decree filed hereunder shall issue until thirty (30) days after the date the decree is filed.~~

Drafting Note: This section presumes that the commissioner has authority to proceed without the cooperation of the state's attorney general. Governing state laws might require that a person other than the commissioner or the attorney general serve as the plaintiff. The title of that person shall be substituted for "commissioner" or "plaintiff" in Section 11 whenever required by state law.

C. ~~—~~ Stay of the Foreign Decree

- (1) ~~—If the defendant shows the [insert proper court] Court that an appeal from the foreign decree is pending or will be taken, or that a stay of execution has been granted, the court shall stay enforcement of the foreign decree until the appeal is concluded, the time for appeal expires, or the stay of execution expires or is vacated, upon proof that the defendant has furnished the security for the satisfaction of the decree required by the state in which it was rendered.~~
- (2) ~~—If the defendant shows the [insert proper court] Court any ground upon which enforcement of a decree of any [insert proper court] Court of this state would be stayed, the court shall stay enforcement of the foreign decree for an appropriate period, upon requiring the same security for satisfaction of the decree which is required in this state.~~

B. ~~D.~~ It shall be the policy of this Sstate that the insurance Cecommissioner shall cooperate with regulatory officials in other United States jurisdictions to the greatest degree reasonably practicable in enforcing lawfully issued orders of such other officials subject to public policy and the insurance laws of the Sstate. Without limiting the generality of the foregoing, the Cecommissioner may enforce an order lawfully issued by other officials provided the order does not violate the laws or public policy of this Sstate.

Section 12. Suits by Nonadmitted Insurers

A Nonadmitted Insurer may not commence or maintain an action ~~in~~at law or ~~in~~ equity, including arbitration or any other dispute resolution mechanism, in this Sstate to enforce any right arising out of any insurance transaction except with respect to:

- A. Claims under policies lawfully ~~placed pursuant to the law of the Home State of the insured~~written in this state;
- B. Liquidation of assets and liabilities of the insurer (other than collection of new Ppremium), resulting from its former authorized operations in this Sstate;
- C. Transactions subsequent to issuance of a policy not covering domestic risks at the time of issuance, and lawfully procured under the laws of the jurisdiction where the transaction took place;
- D. Surplus Llines Iinsurance placed by a licensee under authority of Section 5 of this Act;
- E. Reinsurance placed under the authority of [insert citations of state's reinsurance intermediary act and other reinsurance laws];
- F. The continuation and servicing of life insurance, health insurance policies or annuity contracts remaining in force as to residents of this Sstate where the formerly authorized insurer has withdrawn from the Sstate and is not transacting new insurance in the Sstate;
- G. Servicing of policies written by an Aadmitted Insurer in a Sstate to which the insured has moved but in which the company does not have a certificate of authority until the term expires;
- H. Claims under policies covering Wwet Mmarine and Ttransportation Iinsurance;
- I. Placements of insurance which were lawful in the jurisdiction in which the transaction took place and which were not unlawful placements under the laws of this Sstate.

Drafting Note: Provisions of a state's constitution, statutes, regulations, and public policy may necessitate amendment of the opening paragraph of this section.

Section 13. ~~Separability-Severability Clause of Provisions~~

If any provisions of this Act, or the application ~~thereof of the provision~~ to any ~~P~~person or circumstance, ~~shall is~~be held invalid, ~~such determination shall not affect the provisions or the remainder of the Act and the applications of this Act which can be given effect without the invalid provision or application, and to that end the provisions of this Act are severable to persons or circumstances other than those as to which it is held invalid, shall not be affected thereby.~~

Section 14. Effective Date

This Act shall take effect [insert appropriate date].

Chronological Summary of Actions (all references are to the Proceedings of the NAIC).

1994 Proc. 3rd Quarter 14, 16-17, 24, 28-46 (adopted).
1996 Proc. 3rd Quarter 9, 42, 1110, 1168, 1169-1173, 1189-1190 (amended).
1997 Proc. 4th Quarter 25, 27-28, 1004, 1029 (amended).
1999 Proc. 3rd Quarter 25, 26, 1080, 1135, 1151-1153 (amended).
2002 Proc. 2nd Quarter 14, 250-251, 344, 347, 349-350 (amended).

This model draws from and replaces three earlier NAIC models:

Model Surplus Lines Law

1983 Proc. I 6, 36, 834, 900, 913-922 (adopted).
1985 Proc. II 11, 24, 702, 722, 723-724 (amended).
1986 Proc. I 9-10, 24, 799, 813, 814-821 (amended).
1990 Proc. I 6, 30, 840-841, 897-898, 900-901 (amended).
1991 Proc. I 9, 18, 908, 949, 950, 952-961 (amended and reprinted).

Unauthorized Insurers Model Act

1969 Proc. I 168, 218, 222-227, 271 (adopted).
1978 Proc. I 13, 15, 348, 350 (amended).
1990 Proc. II 7, 13-14, 159-160, 187-191 (amended and reprinted).

Model Nonadmitted Insurance Act

1983 Proc. I 6, 36, 834, 899-900, 923-926 (adopted).

Nonadmitted Insurance Model Act (#870)

Comment Matrix
May 2022

Ref.	Commenter	Date of Ltr.	Section	Comment	Recommended Resolution
1	Wholesale & Specialty Insurance Assn. (WSIA)	10/18/2021	Definitions	<p>We would also encourage the drafting group to avoid developing public policy by defining concepts that are not included in the NRRA and may not be treated uniformly by states. Focusing on maintaining the NRRA principles will allow the drafting group to move swiftly and meet its desired timeline. For example, Domestic Surplus Lines Insurers (DSLIs) laws have been incorporated in many states over the last ten years; however, less than half of states currently have DSLI laws and many of those laws vary from state to state. We would encourage the drafting group and the Surplus Lines Task Force to consider guidance regarding DSLIs in an alternative format such as a white paper or model bulletin rather than incorporating it into a Model.</p> <p>Under the NRRA, surplus lines insurers are deemed to be an eligible surplus lines insurer in the insured's home state when they meet the insurer eligibility provision of the NRRA. We believe it is appropriate to revise the Model Law to remove all extraneous language to avoid confusion and to simply reflect the NRRA's Uniform Standards for Surplus Lines Eligibility. We would support a drafting note that states may maintain voluntary listings of eligible surplus lines insurers, where the insurer elects to provide additional information beyond the criteria in the NRRA, and conversely, encourage elimination of mandatory eligibility requirements that exceed those contained in the NRRA.</p>	<p>Per WSIA email dated 12/3/2021, disregard DSLI comments from this comment letter and refer to the DSLI comments within 11/30/2021 comment letter</p>
2	WSIA	11/18/2020	Eligibility	<p>We would also suggest that it is appropriate for the model to include references to Domestic Surplus Lines Insurers (DSLIs) status, which is now permitted by 21 states, to promote general clarity and understanding. The eligibility of DSLI's is the same under the NRRA as carriers without the status but it may be helpful to include the definition in this model.</p>	<p>Per WSIA email dated 12/3/2021, disregard DSLI comments from this comment letter and refer to the DSLI comments within 11/30/2021 comment letter</p>
3	Lloyd's	10/18/2021	Section 2 - Purpose	<p>As mentioned on a recent conference call, Lloyd's supports maintaining the current Section 2(D) which memorializes that one of the purposes of the Model Act is to provide a system through which persons can purchase nonadmitted insurance, other than surplus lines. Since the Model Act will continue to include sections on marine and transportation insurance and independent procurement, it makes sense to preserve Section 2(D) which is the part of the Purpose discussing the procurement of nonadmitted insurance beyond surplus lines.</p> <p>If the Task Force chooses to explore the development of a definition of "Home state" for unaffiliated groups, such exploration and development should be conducted separately from the current work of the Drafting Group. This is because, as shown in a previous exploration of the issue within the Task Force, differing opinions regarding the matter may exist and other may arise. Proper treatment of the issue requires an appropriate forum or mechanism and sufficient time. A rushed definition might create problems instead of solutions. For these reasons as well as efficiency to the work of the Drafting group, we recommend that the exploration of a definition be taken up separately. We note that the California Insurance Code ("CIC"), similar to the NRRA, has a definition of "Home state" for affiliated groups (CIC §1760.1(e)(4)), but not for unaffiliated groups. According to the Surplus Lines Association, which is the California Department of Insurance ("CDI")'s surplus line advisory organization, this has not created a market problem or disruption in the placement, registration, or tax payment of such surplus line insurance.</p>	<p>Retained the entirety of Section 2</p>
4	CA Dept. of Ins. - Libio Latimer	1/10/2022	Section 3 - Definitions	<p>Nonadmitted insurance" means any disability, property, or casualty insurance permitted in a state to be placed directly or through a broker with a nonadmitted insurer eligible to accept such insurance. "Nonadmitted insurance" includes independently procured insurance and surplus lines insurance.</p>	<p>The Drafting Group added a definition for "Home State" which mentions unaffiliated groups</p>
5	CO Dept. of Ins. - Renee Savage	1/10/2022	Section 3 - Definitions	<p>(4) in the case of a group policy: (a) if a group policyholder pays 100% of the premium from its own funds, then the home state is determined according to paragraphs (1) and (2).</p>	<p>Integrated into the Model</p>
6	LA Dept. of Ins. - Tom Travis	9/27/2021	Section 3 - Definitions	<p>(b) if a group policyholder does not pay 100% of the premium from its own funds, then the home state is determined according to paragraphs (1) and (2) for each member of the group.</p>	<p>Integrated into the Model</p>
7	Lloyd's	10/18/2021	Section 3 - Definitions	<p>As currently proposed, the definition of home state of an unaffiliated group instructs that the home state is where each member of the group resides. This could result in a single unaffiliated group policy having multiple "home states," which is inconsistent with the NRRA. Lloyd's respectfully suggests the following definition of home state of an unaffiliated group as more consistent with the NRRA: if the insured is an unaffiliated group, the home state of the insured shall be the principle place of business of the group, without regard to members of the group that may be insured under the master policy. Specifying the home state of unaffiliated groups will also necessitate defining an unaffiliated group. Lloyd's suggests the following definition: The term "unaffiliated group" means an association of persons which is organized and maintained in good faith for purposes other than obtaining insurance. Alternatively, the Drafting Group could choose not to create a definition of the home state of an unaffiliated group. Unaffiliated group is not a defined term in the NRRA. In fact, the words unaffiliated group do not appear a single time in the NRRA. Therefore, creating a definition of the home state of an unaffiliated group is not necessary to bring the Model Act into compliance with the NRRA. Such a position would be consistent with the past work of the Surplus Lines Task Force, which, as recently as 2017, adopted a report from another drafting group which concluded that a definition was not needed, as there was no urgent problem in need of a solution. Indeed, there is little evidence that a regulatory issue exists with regard to determining the home state of unaffiliated groups. Lloyd's writes surplus lines business in all 50 states, and our underwriters do not believe this is an area requiring additional regulatory guidance.</p> <p>The one area in which Lloyd's believes there is merit in deviating from the NRRA is to acknowledge the recent work of the Surplus Lines Task Force on Accident & Health issues. As you know, that Task Force drafted the Guideline on Nonadmitted Accident and Health Coverages. This guideline explains why certain narrow classes of A&H coverages are written in the nonadmitted market and provides assistance to states wishing to allow the procurement of certain nonadmitted A&H coverage. This guideline was adopted by the NAIC in 2019. In Lloyd's view, this multi-year workstream by the NAIC should be reflected in the Model Act. We think this adjustment can be easily made. For example, if the NRRA definition of 'nonadmitted insurance' is used it could be adjusted as follows: "Nonadmitted insurance" means any type of property and casualty insurance permitted to be placed directly or through a surplus lines broker with a nonadmitted insurer eligible to accept such insurance. The same adjustment could be made for all other definitions that limit the types of insurance covered by the Model Act to property and casualty insurance.</p>	<p>The drafting group determined that unaffiliated groups should be addressed and that the lack of a definition within the NRRA would not preclude addressing it within this Model</p>
8	Lloyd's	10/18/2021	Section 3 - Definitions	<p>The current version of the Draft Revisions contains the following Comment after Section 3.K: "The NRRA definition of "home state" includes Paragraphs (1), (2) and (3). The NRRA definition does not expressly cover unaffiliated groups such as risk purchasing groups. The addition of Paragraph (4) is intended to bring clarity by treating the members of such a group as individual insureds for purposes of placement and taxation." Paragraph 4 states that "if the insured is a member of an unaffiliated group, the home state of the insured shall be as determined in Paragraphs (1) and (2), without regard to other members of the group that may be named insureds on the same insurance contract." The NRR Association respectfully requests that the Comment and Paragraph 4 be deleted from the Draft Revisions for the following reasons:</p> <p>Section 521 of the NRRA establishes a system of allocation of premium for "affiliated groups." It does not do so for unaffiliated groups. Section 521 defines an affiliated group, but does not define an unaffiliated group nor does it even mention an unaffiliated group anywhere in the statute. As stated previously, the purpose of NRRA is to streamline the nonadmitted and surplus lines business, to establish national standards, and to provide a simpler, uniform tax reporting and payment process with a single payment. The proposed Comment and the creation of Paragraph (4) do exactly the opposite. Unaffiliated groups are a very substantial portion of the market. To treat unaffiliated groups differently from affiliated groups would undermine the purpose of the NRRA and create confusion in the marketplace.</p> <p>Risk purchasing groups are established under 15 U.S.C Sec. 3903 (Section 4 of the Liability Risk Retention Act) for the purpose of facilitating the operation of a national program for commercial liability insurance. That Section establishes the scope of the exemptions from "any State law, rule, regulation, or order to the extent that it would "(5) require that a purchasing group must have a minimum number of members, common ownership or affiliation, or a certain legal form... (8) otherwise discriminate against a purchasing group or any of its members." Sec. 3903(a), (a)(5) and (a)(8). The proposed Comment would discriminate against risk purchasing groups and therefore would be preempted by federal law.</p>	<p>The drafting note was modified to mention the A&H Guideline (GL1860)</p>
9	National Risk Retention Association	11/23/2021	Section 3 - Definitions	<p>As noted above, the establishment and operation of unaffiliated groups is not addressed in the NRRA. This raises the question of how this vacancy in the NRRA should be addressed. Clearly, the only remedy would be for Congress to amend the NRRA, which would avoid the problem of the states, by way of the NAIC, attempting to construe federal law by utilizing state law. This would clearly run the risk of federal preemption. In fact, this Surplus Lines Drafting Group, after a substantial review, decided not to take any action to make a determination of the "home state" of an unaffiliated group. In brief, their report to the NAIC Surplus Lines (C) Task Force (April 3, 2017) summarized their problems and concluded that no action was necessary at that time.</p>	<p>The Drafting Group added a definition for "Home State" which mentions unaffiliated groups. The definition complies with the NRRA and LRRA</p>
10	Petersen Intl. Underwriters - Tom Petersen	9/27/2021	Section 3 - Definitions	<p>Section 3, N – Surplus Lines Insurance means any property and casualty insurance. We just spent a long time on specialty accident and health programs (excess disability insurance specifically) being exportable. Should this section reflect that?</p>	<p>Integrated into the Model</p>

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Comment Matrix
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Ref.	Commenter	Date of Ltr.	Section	Comment	Recommended Resolution
11	Surplus Lines Association of IL - David Ocasek	10/8/2021	Section 3 - Definitions	Section 2B - The term "export" can be confusing. In the definitions section, it's defined as "placing insurance with a surplus lines insurer" which is much simpler! Why not just call it that and get rid of the term "export"	"Export" is a common term used in many states
12	Surplus Lines Association of IL - David Ocasek	10/8/2021	Section 3 - Definitions	Section 3A - May as well use the federal language instead of the awkwardly-phrased "do an insurance business"	Addressed in Model
13	Surplus Lines Association of IL - David Ocasek	10/8/2021	Section 3 - Definitions	Exempt Commercial Purchaser drafting note (3G) - Why not include it? It is part of the federal law (which says the amounts "shall be adjusted") and, under the Supremacy Clause of the Constitution, the federal law would take priority over any conflicting state law. We should stop using the confusing term "export". It's defined here as "to place surplus lines insurance with a surplus lines insurer." Why not just say that when needed? It's plain, clear and simple and makes the wording of the law more clear so people don't have to go and look up "export" in the definitions. Besides, it's only used in the Purpose section, in some drafting notes, and in ONE subsection title. It's nowhere within any substantive wording.	Definition has been included in the current draft
14	Surplus Lines Association of IL - David Ocasek	10/8/2021	Section 3 - Definitions	Foreign Decree - This term is only used in the enforcement section. The enforcement section has NOTHING to do with surplus lines and really belongs elsewhere in a state's insurance code. We should delete that section and delete this definition.	Addressed above
15	Surplus Lines Association of IL - David Ocasek	10/8/2021	Section 3 - Definitions	Nonadmitted insurance - wording from the federal NRRA definition works better than the awkwardly-phrased "do an insurance business"	Deleted the definition
16	Surplus Lines Association of IL - David Ocasek	10/8/2021	Section 3 - Definitions	"pursuant to" by itself doesn't work. "established pursuant to" might work, but as long as we're changing it, let's use the wording from the federal NRRA definition. Person - Why delete "person" definition? The word is used throughout this Act. May as well define it. This wording is an amalgamation of the definitions of "person" and "business entity" from the Producer Licensing Model Act. In that Act, "person" includes individual and business entity, so I've mashed them together. Doesn't conflict with reference in "home state" definition because "home state" uses "natural person."	Addressed
17	Surplus Lines Association of IL - David Ocasek	10/8/2021	Section 3 - Definitions	"Premium" and "Taxable premium" should be defined terms for regulatory clarity.	Definition was retained
18	Surplus Lines Association of IL - David Ocasek	10/8/2021	Section 3 - Definitions	State - Same wording as NRRA. Necessary here because it's used in "Taxable premium" definition. Limits taxable premium to U.S. & Territories making it clear that non-U.S. premium is not taxable. Nothing in NRRA generated a new nexus to tax non-U.S. premium, but some states have misinterpreted NRRA to say that, as home state, they get to tax	Definitions were added
19	Surplus Lines Association of IL - David Ocasek	10/8/2021	Section 3 - Definitions	"100% of the premium" (that term is not in the NRRA) even if some of it relates to non-U.S. risk.	Definition was added, language relative to exempt risk will need to be addressed
20	Surplus Lines Association of IL - David Ocasek	10/8/2021	Section 3 - Definitions	Surplus Lines Insurance - by using the word "permitted" later on in the sentence, we take care of limiting it to permissible lines, as set forth in 5(B). We have to be in sync with the NRRA "home state" scheme, instead of location of the risk.	Addressed
21	Surplus Lines Association of IL - David Ocasek	10/8/2021	Section 3 - Definitions	Surplus Lines Licensee - we have to be in sync with the NRRA "home state" scheme, instead of location of the risk.	Addressed
22	Surplus Lines Association of IL - David Ocasek	10/8/2021	Section 3 - Definitions	Taxable Premium - "Premium" and "Taxable premium" should be defined terms for regulatory clarity. In the "Surplus lines tax" subsection of Section 5, we should then change references to "premium" to say "taxable premium" instead. "Principal place of business" means: (1) the state where a person maintains its headquarters and where the person's high-level officers direct, control, and coordinate the business activities; or (2) if the person's high-level officers direct, control, and coordinate the business activities in more than one state, or if the person's principal place of business is located outside any state, then it is the state to which the greatest percentage of the person's taxable premium for that insurance contract is allocated. "Principal residence" means: (1) the state where the person resides for the greatest number of days during a calendar year; or (2) if the person's principal residence is located outside any state, the state to which the greatest percentage of the person's taxable premium for that insurance contract is allocated.	Addressed
23	Tom Travis	9/27/2021	Section 3 - Definitions	The NRRA provides a consistent, uniform structure for the regulation and taxation of a surplus lines insurance policy, where the insured's home state is the exclusive jurisdiction to regulate and tax the policy. Surplus lines premium tax should be calculated by taxing 100% of the premium based on the tax rate and rules of the insured's home state. We believe it is appropriate to revise the model to include the critical NRRA definitions related to taxation, including affiliate, affiliated group, control and home state and clarify that the home state has sole authority to tax and regulate a surplus lines transaction.	Integrated into the Model
24	WSIA	11/18/2020	Section 3 - Definitions	The NRRA provided a streamlined ability for commercial purchasers to procure surplus lines insurance without meeting diligent search requirements if the insured meets specified qualifications as a sophisticated buyer. We believe it is appropriate that the model include the NRRA definition of exempt commercial purchaser and a provision for the streamlined procurement of surplus lines insurance for these insureds. Similarly, we would encourage the drafting group to avoid the inclusion of a definition of "home state" for unaffiliated groups. While uniformity is a desirable goal, there is no clear consensus among states on how to treat this issue. The NRRA sought to provide clarity for surplus lines brokers by designating one jurisdiction with the sole authority to regulate and tax each surplus lines transaction. The industry position is that the home state of a policy covering an unaffiliated group should be the home state of the group policyholder, in order to be consistent with the NRRA's goal of vesting a single jurisdiction with sole regulatory and tax authority over the surplus lines transaction. In several instances, the draft model references, "properties, risks or exposures located or to be performed in this state," including the definitions for "nonadmitted insurer" and "transaction of insurance." We suggest that each reference be deleted and replaced with, "where this state is the home state of the insured," to clarify that the adopting state is the sole jurisdiction with regulatory and tax authority for a transaction where it has been determined to be the home state. The coalition undertook suggestions along these lines in sections 3(A), 5(L)(8) and 6(A).	A definition of "Home State" was added
25	WSIA	11/18/2020	Section 3 - Definitions	If insertions will be made so that Model Act (#870) will have references to "Domestic surplus lines insurer," all such references must be in brackets or other indicators that show such inserted language is optional and does not apply to all states. We note that the California law does not provide for domestic surplus lines insurers.	A definition of "Exempt Commercial Purchaser" was added
26	WSIA	10/18/2021	Section 3 - Definitions		The Drafting Group considered the comment, however, proposed language on unaffiliated groups
27	WSIA	10/18/2021	Section 3 - Definitions		Comments have been integrated into the Model
28	CA Dept. of Ins. - Libio Latimer	1/10/2022	Section 5 - Surplus Lines Insurance		All DSLI insertions are optional

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				As noted on the call, I think we ought to look at the policyholder notice requirements, especially the requirement in proposed Subparagraphs 5(L)(6)(a) (ECPs) and 5(O)(1)(a) (customers in general) to notify the policyholder that the insurer "is not licensed by this state and is not subject to its supervision." There are two questions here. First, Subsection O has bracketed language clarifying that the notice is not required if the company is a domestic surplus lines insurer and, as such, is licensed and subject to supervision in this state. However, this exception is missing from Subsection L, and applies equally to ECPs. Fortunately, this language is not mandated by DFA § 525(1), which merely requires notice "that such insurance may or may not be available from the admitted market that may provide greater protection with more regulatory oversight." And some sort of notice that the surplus lines market has less regulatory oversight than the admitted market makes sense to me even in the case of domestic surplus lines insurers, so it might make sense to work on language that can apply uniformly to both ECPs and regular customers, and to limit the DSLI exemption from this requirement to the phrase "is not licensed." Second, what does "not subject to its supervision" mean? Although this might be OK, depending on what we mean by "supervision," the Dodd-Frank language explaining that the admitted market has "more regulatory oversight" which "may provide greater protection" seems clearer and more consistent with the current framework where many states do apply certain laws to the surplus lines market, such as the termination notice requirements recently discussed on one of the bulletin boards. The specific notice language prescribed by proposed Paragraph 5(N)(6) – which is unchanged from current 5(M)(6) – already addresses some of the issues above, but the term "enforcement" has the same ambiguity as "supervision," and the "not licensed" and "not subject to financial solvency regulation" warnings below need to be removed when the company is a DSLI. And shouldn't the notice of what "some states" do be tailored to what this state (the state whose law governs this particular placement) does or does not do? "Notice: 1. An insurer that is not licensed in this state is issuing the insurance policy that you have applied to purchase. These companies are called "nonadmitted" or "surplus lines" insurers. 2. The insurer is not subject to the financial solvency regulation and enforcement that applies to licensed insurers in this state. 3. These insurers generally do not participate in insurance guaranty funds created by state law. These guaranty funds will not pay your claims or protect your assets if the insurer becomes insolvent and is unable to make payments as promised. 4. Some states maintain lists of approved or eligible surplus lines insurers and surplus lines brokers may use only insurers on the lists. Some states issue orders that particular surplus lines insurers can not be used. 5. For additional information about the above matters and about the insurer, you should ask questions of your insurance agent, broker or surplus lines broker. You may also contact your insurance department consumer help line." There are many things in the model act that should be updated. I'll get into those as I get further into the act with my comments. But the 2 " anchor points " of the model are the ones referenced directly by the federal NRRRA with regard to insurer eligibility - (sections 5A(2) and 5C(2)(a)). One would think that you would want to <i>leave those two sections alone</i> -- just to avoid confusion. The NRRRA references the version of the model act "as amended in 2002," so it's not like any amendments now to these sections of the model would somehow <i>change</i> federal law. But introducing changes at this point will most certainly create confusion for people moving forward who are trying to understand and interpret the law. They would have to <i>know</i> to find the right version of the model act in order to know for sure what the federal law really means. Unfortunately, the current draft model <i>deletes 5A(2)</i> and <i>modifies and renumbers 5C(2)(a)</i> .	
29	ME Dept. of Ins. - Bob Wake	10/20/2021	Section 5 - Surplus Lines Insurance		Simplified the consumer notice to remove exempt commercial purchasers from the requirement and removed unclear language
30	Surplus Lines Association of IL - David Ocask	10/8/2021	Section 5 - Surplus Lines Insurance		Changes have been made in the current draft
31	Tim Mullen (NAIC)	1/4/2022	Section 5 - Surplus Lines Insurance	See email for mocked up Section 5h	Comments have been integrated into the Model
32	WSIA	11/18/2020	Section 5 - Surplus Lines Insurance	We agree with the drafting group comment that under home state taxation, allocation of premium for tax purposes is obsolete and we encourage eliminating any such references. We encourage the drafting group to consider amendments to Section 5K that assist in modernizing the reporting process for surplus lines brokers. The term "affidavit" can often imply a notarization requirement and we would request that that term be revised to "signed statement" to more accurately reflect the majority of the requirements. We also encourage a drafting note suggesting states should eliminate notarization requirements for these documents. Additionally we encourage states to consider their revising their requirements for filing evidence of a diligent search in general as several states have recently undertaken. Rather than require individual signed statements for every surplus lines transaction to be filed directly with the department of insurance, we suggest a more streamlined approach that many states have taken which is requiring the surplus lines broker to maintain evidence of a diligent search in their own files, subject to review by the commissioner upon request. We would encourage the group to consider a drafting note that encourages this process.	Allocation provisions were deleted from Section 5/6
33	WSIA	11/18/2020	Section 5 - Surplus Lines Insurance	We would encourage the group to consider an amendment and/or drafting note regarding the elimination of zero premium reports. Brokers should not be required to report to a state that they have collected zero dollars in premium during a period they maintain an active surplus lines license. These reports are obsolete because the pre-NRRRA system requiring the broker to remit a portion of the tax to each exposure state has now been eliminated.	Diligent search modernization is addressed within the drafting note for 5A
34	WSIA	11/18/2020	Section 5 - Surplus Lines Insurance		Given the tax differences among states, a general drafting note was not practicable
35	WSIA	11/18/2020	Section 5 - Surplus Lines Insurance	We support including the NRRRA definition and sections referencing surplus lines producer licensing. We are pleased that the Producer Licensing (D) Task Force agreed to undertake work this year to analyze and recommend areas that, in the absence of the National Association of Registered Agents & Brokers (NARAB) becoming operational in the immediate future, there may be ways the states can increase uniformity and efficiencies in this area. We could encourage the drafting group to avoid revisions that alter direct references contained within the NRRRA. Specifically, the draft changed the name of the Model, the numbering of sections 5A(2) and 5C(2)(a) regarding Uniform Standards for Surplus Lines Eligibility and the actual language of sections 5A(2) and 5C(2)(a). While the NRRRA specifically refers to the Model Act amended on June 8, 2002, we believe changing these references may be very confusing to our industry partners and members who rely upon these legislative works to comply with federal and state law. One potential way to maintain the references from the NRRRA would be by keeping subsections 5(A)(1), 5(A)(3), 5(A)(4) and 5(C)(1) intact but labeled as "repealed."	The drafting group agrees with collaboration between the Task Force, NIPR, and the Producer Licensing Task Force
36	WSIA	10/18/2021	Section 5 - Surplus Lines Insurance		The Drafting Group ensured that the numbering matches the NRRRA

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				<p>In 2021, Texas passed SB 1367 which deregulated several lines of insurance from admitted rate and form filing requirements. At the same time, the bill eliminated diligent search requirements for those same lines of business. The primary reason that nonadmitted insurers can cover risks that are rejected by the admitted market is that they have freedom from rate and form filing. Because this distinction between the two markets was removed for the specific lines listed in the bill, it stands to reason that the diligent search barrier between the two markets should also be removed. The bill took effect on September 1, 2021. Texas is the first state to remove rate and form filing requirements while simultaneously removing diligent search requirements for the same lines.</p> <p>In 2021, Illinois passed SB 1753 which allows a licensed surplus line producer to procure a commercial surplus lines insurance contract from an eligible nonadmitted insurer without making the required diligent effort to procure the insurance from authorized insurers if the risk was referred to the surplus line producer by an Illinois-licensed insurance producer, also known as a retail agent, who is not affiliated with the surplus line producer. The rationale for this method as a substitute for traditional diligent search is that the distribution system itself structurally ensures the primacy of the admitted market through economic incentives rather than through the diligent search legal requirements. Retail agents have their own network of carriers that they regularly approach to place risks for their insureds and when the retail agent exhausts their admitted network, their next option is to refer business to a wholesale surplus lines producer to place the business. But this option is less desirable to retail agents because it will result in a split commission with the surplus lines producer. When a retail agent is unaffiliated with the producing surplus lines broker, the retail agent's first choice will always be to place the business with their own network of admitted carriers to avoid splitting the commission. In this model, the financial incentives created by an unaffiliated wholesale insurance transaction will maintain the primacy of the admitted market without the need for the documentation of a traditional diligent search.</p> <p>In most export list states, the standard is that if after a hearing the commissioner finds that a particular insurance coverage or type, class or kind of coverage is not readily procurable from authorized insurers, then that item may be made eligible for export without diligent search through the aforementioned avenues.</p> <p>Many states have taken steps to modernize the process of completing diligent search in ways that ease the regulatory burden on brokers and agents without exempting certain lines from diligent search altogether. For example, North Dakota recently updating their diligent search filing requirements to be submitted quarterly rather than on a rolling 60-day time frame after placement (NDCC, 26.1-44-02). Another change that eases the regulatory burden for producers is the ability to maintain records of diligent search in the producer's files rather than submitting records of diligent search to the regulator or stamping office as Rhode Island has stipulated within their insurance regulations (230-RICR-20-50-1). In general, WSIA supports state efforts to eliminate the filing of any unnecessary or redundant data elements that are unnecessary for the purposes of complying with state law and submitting the required premium tax and fees.</p>	
37	WSIA	11/3/2021	Section 5 - Surplus Lines Insurance	<p>WSIA would like to reiterate that we do not advocate for the comprehensive removal of diligent search requirements from state laws, however the diligent search exemption for deregulated commercial lines, increasing reliance on export lists and all stated modernizations related to diligent search reporting are things that the WSIA membership has fully endorsed.</p> <p>While WSIA and its partners continue to believe in the merits of only making changes which are required by the NRRA, if the Drafting Group decides to define DSLI, we suggest that a definition should be simple, clear and should recognize the existence of DSLI's in other states. As such, we suggest the following definition: DSLI means an insurer permitted to write surplus lines insurance in the state where the insurer is domiciled. This definition would be consistent with the goals of the working group and would be consistent with the provisions of Section 5(T). We would also ask that section 5(T)(2)(c)(i) be amended to also exempt domestic surplus lines companies from fees and assessments that are applicable to admitted insurance. Finally, we would ask that 5(T)(2)(c)(ii) be amended to delete "for approval" to eliminate any potential confusion that domestic surplus lines insurers would be subject to rate and form filing requirements on an informational basis.</p>	<p>Addressed in the drafting note for Section 5A</p>
38	WSIA	11/30/2021	Section 5 - Surplus Lines Insurance	<p>Several states have recently taken legislative action to allow their Commissioner discretion in assessing penalties for certain actions, most notably in late filings. This provides the Commissioner the opportunity to determine if certain fines should be adjusted or waived, whereas in some situations they have no option but to follow mandatory fine schedules. We believe it may be appropriate to consider including model language to allow Commissioner discretion when appropriate. See WSIA's mocked up Section 6-14 attached to comment letter</p>	<p>Section 5 T(2)(c)(i) and (ii) have been modified to address This Section is baseline language that does not preclude discretion and refers to other penalty statutes outside the scope of the model</p>
39	WSIA	11/18/2020	Section 7 - Penalties	<p>Additionally, we believe that arbitration provisions within contracts for commercial insurance should be fully negotiable between the two parties and as a result, we have deleted Section 9(H) which dictates that arbitration must be conducted within the state where the risk is located. This provision is inconsistent with the NRRA "home state" provision but, more importantly, is not consistent with the principle of freedom of rate and form that allows the surplus lines industry to cover hard to place risks.</p>	
40	WSIA	11/30/2021	Sections 6-14	<p>Finally, we agree with previous comments from drafting group chair, Tom Travis, that the Section 11 Enforcement provisions should not be located within a model addressing surplus lines law. These enforcement provisions should be broadly applicable and addressed elsewhere within state statute.</p>	<p>Comments have been integrated into the Model</p>