



House of Representatives

General Assembly

File No. 235

February Session, 2002

Substitute House Bill No. 5647

House of Representatives, March 28, 2002

The Committee on Insurance and Real Estate reported through REP. OREFICE of the 37th Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT CONCERNING NOTICE OF MEDICAL MALPRACTICE INSURANCE FILINGS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 38a-676 of the general statutes, as amended by
2 section 14 of public act 01-174, is repealed and the following is
3 substituted in lieu thereof (*Effective October 1, 2002*):

4 (a) (1) With respect to rates pertaining to commercial risk insurance,
5 and subject to the provisions of subsection (b) of this section with
6 respect to workers' compensation and employers' liability insurance,
7 on or before the effective date [thereof, every] of such insurance, each
8 admitted insurer shall submit to the Insurance Commissioner for the
9 commissioner's information, except as to inland marine risks which by
10 general custom of the business are not written according to manual
11 rates or rating plans, [every] each manual of classifications, rules and
12 rates, and [every] each minimum, class rate, rating plan, rating
13 schedule and rating system and any modification of the foregoing

14 which it uses. Such submission by a licensed rating organization of
15 which an insurer is a member or subscriber shall be sufficient
16 compliance with this section for any insurer maintaining membership
17 or subscribership in such organization, to the extent that the insurer
18 uses the manuals, minimums, class rates, rating plans, rating
19 schedules, rating systems, policy or bond forms of such organization.
20 [The information shall be open to public inspection after its
21 submission.] After the information is submitted any person may
22 inspect or receive a copy of the information in accordance with the
23 Freedom of Information Act, as defined in section 1-200, as amended.

24 (2) With respect to any filing described in subsection (a) of this
25 section for medical malpractice insurance, if a person requests in
26 writing that the commissioner send the person written notice of any
27 medical malpractice insurance filing, the commissioner shall provide
28 notice each time such filing is made. Such written request shall be
29 valid for a period of one year and may be renewed by the person in
30 such manner as the commissioner prescribes. Any individual may
31 submit written comments to the commissioner on such filing not later
32 than thirty calendar days after the date the commissioner sends the
33 notice of filing, and the commissioner shall consider such comments
34 before making a decision to approve such filing.

35 (b) Each filing as described in subsection (a) of this section for
36 workers' compensation or employers' liability insurance shall be on file
37 with the Insurance Commissioner for a waiting period of thirty days
38 before it becomes effective, which period may be extended by the
39 commissioner for an additional period not to exceed thirty days if the
40 commissioner gives written notice within such waiting period to the
41 insurer or rating organization which made the filing that the
42 commissioner needs such additional time for the consideration of such
43 filing. Upon written application by such insurer or rating organization,
44 the commissioner may authorize a filing which the commissioner has
45 reviewed to become effective before the expiration of the waiting
46 period or any extension thereof. A filing shall be deemed to meet the
47 requirements of sections 38a-663 to 38a-696, inclusive, as amended,

48 unless disapproved by the commissioner within the waiting period or
 49 any extension thereof. If, within the waiting period or any extension
 50 thereof, the commissioner finds that a filing does not meet the
 51 requirements of said sections, the commissioner shall send to the
 52 insurer or rating organization which made such filing written notice of
 53 disapproval of such filing, specifying therein in what respects the
 54 commissioner finds such filing fails to meet the requirements of said
 55 sections and stating that such filing shall not become effective. Such
 56 finding of the commissioner shall be subject to review as provided in
 57 section 38a-19.

58 (c) The form of any insurance policy or contract the rates for which
 59 are subject to the provisions of sections 38a-663 to 38a-696, inclusive, as
 60 amended, other than fidelity, surety or guaranty bonds, and the form
 61 of any endorsement modifying such insurance policy or contract, shall
 62 be filed with the Insurance Commissioner prior to its issuance. The
 63 commissioner shall adopt regulations, in accordance with the
 64 provisions of chapter 54, establishing a procedure for review of such
 65 policy or contract. If at any time the commissioner finds that any such
 66 policy, contract or endorsement is not in accordance with such
 67 provisions or any other provision of law, the commissioner shall issue
 68 an order disapproving the issuance of such form and stating the
 69 reasons for disapproval. The provisions of section 38a-19 shall apply to
 70 any such order issued by the commissioner.

This act shall take effect as follows:	
Section 1	October 1, 2002

INS *Joint Favorable Subst.*

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

OFA Fiscal Note

State Impact:

Fund-Type	Agency Affected	Current FY \$	FY 03 \$	FY 04 \$
IF - Cost	Insurance Dept.	-	Minimal	Minimal

Note: IF=Insurance Fund

Municipal Impact: None

Explanation

The bill allows individuals to comment upon medical malpractice filings and have access to commercial rate filings under the Freedom of Information Act. The Department of Insurance can review these comments and accommodate access to commercial rate filings without incurring a fiscal impact. The department will incur a minimal cost associated with postage and mailing when notices must be sent out for notification of medical malpractice insurance filings. This minimal cost can be handled within the agency’s budgetary resources.

OLR Bill Analysis

sHB 5647

***AN ACT CONCERNING NOTICE OF MEDICAL MALPRACTICE
INSURANCE FILINGS***

SUMMARY:

This bill requires the insurance commissioner to give notice to any person who requests notification about each medical malpractice insurance rate filing submitted for her review. Requests must be in writing and sent to the commissioner. They are valid for one year and renewable in a manner the commissioner prescribes.

The bill allows members of the public to submit written comments about each rate filing to the commissioner up to 30 calendar days after the date she sends the notice of filing. It also requires the commissioner to consider the comments before approving the filing.

The bill specifies that members of the public may inspect and receive a copy of any commercial rate filing, including a medical malpractice rate filing under the Freedom of Information Act.

EFFECTIVE DATE: October 1, 2002

COMMITTEE ACTION

Insurance and Real Estate Committee

Joint Favorable Substitute

Yea 18 Nay 0