



Senate

General Assembly

File No. 69

February Session, 2002

Substitute Senate Bill No. 250

Senate, March 19, 2002

The Committee on Insurance and Real Estate reported through SEN. BOZEK of the 6th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT IMPLEMENTING THE LEGISLATIVE COMMISSIONERS' RECOMMENDATIONS FOR TECHNICAL REVISIONS TO CERTAIN INSURANCE AND REAL ESTATE STATUTES.

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

1 Section 1. Subsection (f) of section 38a-88a of the general statutes, as
2 amended by section 72 of public act 01-6 of the June special session, is
3 repealed and the following is substituted in lieu thereof (*Effective*
4 *October 1, 2002*):

5 (f) The credit allowed by this section may be claimed only with
6 respect to an income year for which a certification of continued
7 eligibility required under subsection (g) of this section has been issued.
8 If, with respect to any year for which a tax credit is claimed, any
9 subject insurance business ceases at any time to employ at least
10 twenty-five per cent of its total work force in new jobs, then, except as
11 provided in subsection (g) of this section, the entitlement to the credit
12 allowed by this section shall not be allowed for the taxable year in

13 which such employment ceases, and there shall not be a pro rata
14 application of the credit to such taxable year; provided, if the reason
15 for such cessation is the dissolution, liquidation or reorganization of
16 such insurance business in a bankruptcy or delinquency proceeding, as
17 defined in section 38a-905, the credit shall be allowed.

18 Sec. 2. Subsection (c) of section 38a-88b of the general statutes, as
19 amended by section 81 of public act 01-6 of the June special session, is
20 repealed and the following is substituted in lieu thereof (*Effective*
21 *October 1, 2002*):

22 (c) Notwithstanding the provisions of subsection (a) of this section,
23 the provisions of subsections (b) and (l) of section 38a-88a [, as
24 amended by section 1 of public act 97-292,] and subdivision (3) of
25 subsection (i) of section 38a-88a, as amended, shall be applicable to all
26 funds.

27 Sec. 3. Section 38a-680 of the general statutes, as amended by section
28 15 of public act 01-174, is repealed and the following is substituted in
29 lieu thereof (*Effective October 1, 2002*):

30 Any person, insurer, organization, group or association [who] that
31 fails to comply with the final order of the Insurance Commissioner
32 pursuant to sections 38a-663 to 38a-696, inclusive, as amended, shall be
33 fined not more than one thousand dollars, but if such failure be wilful,
34 not more than ten thousand dollars, or imprisoned not more than one
35 year or both. The commissioner shall collect the amount so payable
36 and such penalties may be in addition to any other penalties provided
37 by law.

38 Sec. 4. Subdivision (18) of section 38a-862 of the general statutes, as
39 amended by section 2 of public act 01-67, is repealed and the following
40 is substituted in lieu thereof (*Effective October 1, 2002*):

41 (18) "Principal place of business" of a plan sponsor or an entity
42 means the single state in which the natural persons who establish
43 policy for the direction, control and coordination of the operations of

44 the plan sponsor or entity as a whole primarily [exercises] exercise that
45 function, as determined by the association in its reasonable judgment
46 by considering the factors set forth in subparagraphs (A) to (G),
47 inclusive, of this subdivision: (A) The state in which the primary
48 executive and administrative headquarters of the plan sponsor or
49 entity is located; (B) the state in which the principal office of the chief
50 executive officer of the plan sponsor or entity is located; (C) the state in
51 which the board of directors, or similar governing person or persons,
52 of the plan sponsor or entity conducts the majority of its meetings; (D)
53 the state in which the executive or management committee of the
54 board of directors, or similar governing person or persons, of the plan
55 sponsor or entity conducts the majority of its meetings; (E) the state
56 from which the management of the overall operations of the plan
57 sponsor or entity is directed; (F) in the case of a benefit plan sponsored
58 by affiliated companies comprising a consolidated corporation, the
59 state in which the holding company or controlling affiliate has its
60 principal place of business as determined using the factors set forth in
61 subparagraphs (A) to (E), inclusive, of this subdivision; and (G)
62 notwithstanding subparagraphs (A) to (F), inclusive, of this
63 subdivision, in the case of a plan sponsor, if more than fifty per cent of
64 the participants in the benefit plan are employed in a single state, that
65 state shall be deemed to be the principal place of business of the plan
66 sponsor. The principal place of business of a plan sponsor of a benefit
67 plan described in subparagraph (C) of subdivision (15) of this section
68 shall be deemed to be the principal place of business of the association,
69 committee, joint board of trustees or other similar group of
70 representatives of the parties who establish or maintain the benefit
71 plan that, in lieu of a specific or clear designation of a principal place of
72 business, shall be deemed to be the principal place of business of the
73 employer or employee organization that has the largest investment in
74 the benefit plan in question.

75 Sec. 5. Subsection (c) of section 38a-476 of the general statutes is
76 repealed and the following is substituted in lieu thereof (*Effective*
77 *October 1, 2002*):

78 (c) All health insurance plans and insurance arrangements shall
79 provide coverage, under the terms and conditions of [its] their policies
80 or contracts, for the preexisting conditions of any newly insured
81 individual who was previously covered for such preexisting condition
82 under the terms of the individual's preceding qualifying coverage,
83 provided the preceding coverage was continuous to a date less than
84 one hundred twenty days prior to the effective date of the new
85 coverage, exclusive of any applicable waiting period, except in the case
86 of a newly insured group member whose previous coverage was
87 terminated due to an involuntary loss of employment, the preceding
88 coverage must have been continuous to a date not more than one
89 hundred fifty days prior to the effective date of the new coverage,
90 exclusive of any applicable waiting period, provided such newly
91 insured group member or dependent applies for such succeeding
92 coverage within thirty days of the member's or dependent's initial
93 eligibility.

94 Sec. 6. Subdivisions (1) to (3), inclusive, of subsection (d) of section
95 38a-488a of the general statutes are repealed and the following is
96 substituted in lieu thereof (*Effective October 1, 2002*):

97 (1) A clinical social worker who is licensed under the provisions of
98 chapter 383b and who has passed the clinical examination of the
99 American Association of State Social Work Boards and has completed
100 at least two thousand hours of [the] post-master's social work
101 experience in a nonprofit agency qualifying as a tax-exempt
102 organization under Section 501(c) of the Internal Revenue Code of 1986
103 or any subsequent corresponding internal revenue code of the United
104 States, as from time to time amended, in a municipal, state or federal
105 agency or in an institution licensed by the Department of Public Health
106 under section 19a-490, as amended;

107 (2) A social worker who was certified as an independent social
108 worker under the provisions of chapter 383b prior to October 1, 1990;

109 (3) A licensed marital and family therapist who has completed at

110 least two thousand hours of [the] post-master's marriage and family
111 therapy work experience in a nonprofit agency qualifying as a tax-
112 exempt organization under Section 501(c) of the Internal Revenue
113 Code of 1986 or any subsequent corresponding internal revenue code
114 of the United States, as from time to time amended, in a municipal,
115 state or federal agency or in an institution licensed by the Department
116 of Public Health under section 19a-490, as amended.

117 Sec. 7. Subdivisions (1) to (3), inclusive, of subsection (d) of section
118 38a-514 of the general statutes are repealed and the following is
119 substituted in lieu thereof (*Effective October 1, 2002*):

120 (1) A clinical social worker who is licensed under the provisions of
121 chapter 383b and who has passed the clinical examination of the
122 American Association of State Social Work Boards and has completed
123 at least two thousand hours of [the] post-master's social work
124 experience in a nonprofit agency qualifying as a tax-exempt
125 organization under Section 501(c) of the Internal Revenue Code of 1986
126 or any subsequent corresponding internal revenue code of the United
127 States, as from time to time amended, in a municipal, state or federal
128 agency or in an institution licensed by the Department of Public Health
129 under section 19a-490, as amended;

130 (2) A social worker who was certified as an independent social
131 worker under the provisions of chapter 383b prior to October 1, 1990;

132 (3) A licensed marital and family therapist who has completed at
133 least two thousand hours of [the] post-master's marriage and family
134 therapy work experience in a nonprofit agency qualifying as a tax-
135 exempt organization under Section 501(c) of the Internal Revenue
136 Code of 1986 or any subsequent corresponding internal revenue code
137 of the United States, as from time to time amended, in a municipal,
138 state or federal agency or in an institution licensed by the Department
139 of Public Health under section 19a-490, as amended.

140 Sec. 8. Section 38a-782a of the general statutes is repealed and the
141 following is substituted in lieu thereof (*Effective October 1, 2002*):

142 The commissioner may adopt regulations in accordance with
143 chapter 54 relating to the establishment of continuing education
144 requirements for persons licensed as [an insurance producer]
145 insurance producers, provided the commissioner shall suspend such
146 requirements for any person who is a public official during the period
147 such person serves as a public official, if the person is prohibited from
148 selling insurance during that period. As used in this section, "public
149 official" means any state-wide elected officer, any member or member-
150 elect of the General Assembly, or a senator or representative in
151 Congress.

152 Sec. 9. Subsection (b) of section 38a-979 of the general statutes is
153 repealed and the following is substituted in lieu thereof (*Effective*
154 *October 1, 2002*):

155 (b) The notice shall be in writing and shall state: (1) Whether
156 personal information may be collected from persons other than the
157 individual proposed for coverage, (2) the types of personal information
158 that may be collected, the kinds of investigative techniques that may be
159 used to collect such information and the sources from which such
160 information may be collected, (3) the types of disclosures identified in
161 [subsections (b) to (f), inclusive, (i), (k), (l) and (n)] subdivisions (2) to
162 (6), inclusive, (9), (11), (12) and (14) of section 38a-988, as amended by
163 this act, and the circumstances under which such disclosures may be
164 made without prior authorization; provided only those circumstances
165 need be described which occur with such frequency as to indicate a
166 general business practice, (4) a description of the rights established
167 under sections 38a-983 and 38a-984 and the manner in which these
168 rights may be exercised, and (5) that information obtained from a
169 report prepared by an insurance-support organization may be retained
170 by the organization and disclosed to other persons.

171 Sec. 10. Section 38a-987 of the general statutes is repealed and the
172 following is substituted in lieu thereof (*Effective October 1, 2002*):

173 No insurance institution or agent may base an adverse underwriting

174 decision in whole or in part:

175 [(a)] (1) On a previous adverse underwriting decision or on the fact
176 that an individual previously obtained insurance coverage through a
177 residual market mechanism, provided an insurance institution or
178 agent may base an adverse underwriting decision on further
179 information obtained from an insurance institution or agent
180 responsible for a previous adverse underwriting decision;

181 [(b)] (2) On personal information received from an insurance-
182 support organization whose primary source of information is an
183 insurance institution, provided an insurance institution or agent may
184 base an adverse underwriting decision on further personal information
185 obtained as the result of information received from an insurance-
186 support organization.

187 Sec. 11. Section 38a-988 of the general statutes is repealed and the
188 following is substituted in lieu thereof (*Effective October 1, 2002*):

189 An insurance institution, agent or insurance-support organization
190 shall not disclose any personal or privileged information concerning
191 an individual collected or received in connection with an insurance
192 transaction unless the disclosure is:

193 [(a)] (1) Made with the written authorization of the individual,
194 provided: [(1)] (A) If such authorization is submitted by another
195 insurance institution, agent or insurance-support organization, it meets
196 the requirements of section 38a-981, or [(2)] (B) if such authorization is
197 submitted by a person other than an insurance institution, agent or
198 insurance-support organization, it shall be: [(A)] (i) Dated, [(B)] (ii)
199 signed by the individual, and [(C)] (iii) obtained within one year prior
200 to the date a disclosure is sought pursuant to this [subsection]
201 subdivision; [or]

202 [(b)] (2) Made to a person other than an insurance institution, agent
203 or insurance-support organization, provided such disclosure is
204 reasonably necessary: [(1)] (A) To enable such person to perform a

205 business, professional or insurance function for the disclosing
206 insurance institution, agent or insurance-support organization, and
207 such person agrees not to disclose the information without the
208 individual's written authorization unless the disclosure: [(A)] (i)
209 Would otherwise be permitted by this section if made by an insurance
210 institution, agent, or insurance-support organization, or [(B)] (ii) is
211 reasonably necessary for such person to perform [his] such person's
212 function for the disclosing insurance institution, agent or insurance-
213 support organization; or [(2)] (B) to enable such person to provide
214 information to the disclosing insurance institution, agent or insurance-
215 support organization for the purpose of: [(A)] (i) Determining an
216 individual's eligibility for an insurance benefit or payment, or [(B)] (ii)
217 detecting or preventing criminal activity, fraud, material
218 misrepresentation or material nondisclosure in connection with an
219 insurance transaction; [or]

220 [(c)] (3) Made to an insurance institution, agent, insurance-support
221 organization or self-insurer, provided the information disclosed is
222 limited to that which is reasonably necessary: [(1)] (A) To detect or
223 prevent criminal activity, fraud, material misrepresentation or material
224 nondisclosure in connection with insurance transactions, or [(2)] (B) for
225 either the disclosing or receiving insurance institution, agent or
226 insurance-support organization to perform its function in connection
227 with an insurance transaction involving the individual; [or]

228 [(d)] (4) Made to a medical-care institution or medical professional
229 for the purpose of: [(1)] (A) Verifying insurance coverage or benefits;
230 [(2)] (B) informing an individual of a medical problem of which [he]
231 such individual may not be aware; or [(3)] (C) conducting an
232 operations or services audit, provided only such information is
233 disclosed as is reasonably necessary to accomplish the foregoing
234 purposes; [or]

235 [(e)] (5) Made to an insurance regulatory authority; [or]

236 [(f)] (6) Made to a law enforcement or other government authority:

237 [(1)] (A) To protect the interests of the insurance institution, agent or
238 insurance-support organization in preventing or prosecuting the
239 perpetration of fraud upon it; or [(2)] (B) if the institution, agent or
240 organization reasonably believes that illegal activities have been
241 conducted by the individual; [or]

242 [(g)] (7) Otherwise permitted or required by law; [or]

243 [(h)] (8) In response to a facially valid administrative or judicial
244 order, including a search warrant or subpoena; [or]

245 [(i)] (9) Made for the purpose of conducting actuarial or research
246 studies, provided: [(1)] (A) No individual may be identified in any
247 actuarial or research report; [(2)] (B) materials in which the individual
248 may be identified are returned or destroyed as soon as they are no
249 longer necessary; and [(3)] (C) the actuarial or research organization
250 agrees not to disclose the information unless the disclosure would
251 otherwise be permitted by this section if made by an insurance
252 institution, agent or insurance-support organization; [or]

253 [(j)] (10) Made to a party or a representative of a party to a proposed
254 or consummated sale, transfer, merger or consolidation of all or part of
255 the business of the insurance institution, agent or insurance-support
256 organization, provided: [(1)] (A) Prior to the consummation of the sale,
257 transfer, merger or consolidation only such information is disclosed as
258 is reasonably necessary to enable the recipient to make business
259 decisions about the purchase, transfer, merger or consolidation; and
260 [(2)] (B) the recipient agrees not to disclose the information unless the
261 disclosure would otherwise be permitted by this section if made by an
262 insurance institution, agent or insurance-support organization; [or]

263 [(k)] (11) Made to a person whose only use of such information will
264 be in connection with the marketing of a product or service, provided:
265 [(1)] (A) No medical-record information, privileged information, or
266 personal information relating to an individual's character, personal
267 habits, mode of living or general reputation is disclosed, and no

268 classification derived from such information is disclosed; [(2)] (B) the
269 individual has been afforded an opportunity to indicate that [he] the
270 individual does not wish personal information disclosed for marketing
271 purposes and has given no indication that [he] the individual does not
272 wish the information disclosed; and [(3)] (C) the person receiving such
273 information agrees not to use it except in connection with the
274 marketing of a product or service; [or]

275 [(l)] (12) Made to an affiliate whose only use of the information will
276 be in connection with an audit of the insurance institution or agent or
277 the marketing of an insurance product or service, provided [(1)] (A)
278 with regard to individually identifiable medical records information,
279 written consent of the individual to whom the individually identifiable
280 medical record pertains is obtained prior to disclosure for marketing
281 purposes, and [(2)] (B) the affiliate agrees not to disclose the
282 information for any other purpose or to unaffiliated persons; [or]

283 [(m)] (13) Made by a consumer reporting agency, provided the
284 disclosure is made to a person other than an insurance institution or
285 agent; [or]

286 [(n)] (14) Made to a group policyholder for the purpose of reporting
287 claims experience or conducting an audit of the insurance institution's
288 or agent's operations or services, provided the information disclosed is
289 reasonably necessary for the recipient to conduct the audit; [or]

290 [(o)] (15) Made to a professional peer review organization for the
291 purpose of reviewing the service or conduct of a medical-care
292 institution or medical professional; [or]

293 [(p)] (16) Made to a governmental authority for the purpose of
294 determining the individual's eligibility for health benefits for which the
295 governmental authority may be liable; [or]

296 [(q)] (17) Made to a certificate holder or policyholder for the
297 purpose of providing information regarding the status of an insurance

298 transaction; [or]

299 [(r)] (18) Made to a lienholder, mortgagee, assignee, lessor or other
300 person shown on the records of an insurance institution or agent as
301 having a legal or beneficial interest in a policy of insurance, provided:
302 [(1)] (A) No medical-record information is disclosed unless the
303 disclosure would otherwise be permitted by this section; and [(2)] (B)
304 the information disclosed is limited to that which is reasonably
305 necessary to permit such person to protect its interests in such policy;
306 [or]

307 [(s)] (19) Made pursuant to section 53-445.

308 Sec. 12. Subsections (b) and (c) of section 20-325a of the general
309 statutes are repealed and the following is substituted in lieu thereof
310 (*Effective October 1, 2002*):

311 (b) No person, licensed under the provisions of this chapter, shall
312 commence or bring any action with respect to any acts done or services
313 rendered after October 1, 1995, as set forth in subsection (a), unless the
314 acts or services were rendered pursuant to a contract or authorization
315 from the person for whom the acts were done or services rendered. To
316 satisfy the requirements of this subsection any contract or
317 authorization shall: (1) Be in writing, (2) contain the names and
318 addresses of the real estate broker performing the services and the
319 name of the person or persons for whom the acts were done or services
320 rendered, (3) show the date on which such contract was entered into or
321 such authorization given, (4) contain the conditions of such contract or
322 authorization, (5) be signed by the real estate broker or the real estate
323 broker's authorized agent, (6) if such contract or authorization pertains
324 to any real property, include the following statement: "THE REAL
325 ESTATE BROKER MAY BE ENTITLED TO CERTAIN LIEN RIGHTS
326 PURSUANT TO SECTION 20-325a OF THE CONNECTICUT
327 GENERAL STATUTES", and (7) be signed by the person or persons for
328 whom the acts were done or services rendered or by an agent
329 authorized to act on behalf of such person or persons, pursuant to a

330 written document executed in the manner provided for conveyances in
331 section 47-5, except, if the acts to be done or services rendered involve
332 a listing contract for the sale of land containing any building or
333 structure occupied or intended to be occupied by no more than four
334 families, the listing contract shall be signed by the owner of the real
335 estate or by an agent authorized to act on behalf of such owner
336 pursuant to a written document executed in the manner provided for
337 conveyances in section 47-5.

338 (c) Notwithstanding the provisions of subsection (b) of this section,
339 no person licensed under the provisions of this chapter [,] shall
340 commence or bring any action with respect to any acts done or services
341 rendered after October 1, 2000, in a commercial real estate transaction,
342 unless the acts or services were rendered pursuant to (1) a contract or
343 authorization meeting the requirements of subsection (b) of this
344 section, or (2) a memorandum, letter or other writing stating for whom
345 the licensee will act or has acted, signed by the party for whom the
346 licensee will act or has acted in the commercial real estate transaction,
347 the duration of the authorization and the amount of any compensation
348 payable to the licensee, provided (A) the licensee provides written
349 notice to the party, substantially similar to the following: "THE REAL
350 ESTATE BROKER MAY BE ENTITLED TO CERTAIN LIEN RIGHTS
351 PURSUANT TO SECTION 20-325a OF THE CONNECTICUT
352 GENERAL STATUTES", and (B) the notice is provided at or before the
353 execution of the contract, authorization, memorandum, letter or other
354 writing, and may be made part of the contract, authorization,
355 memorandum, letter or other writing.

356 Sec. 13. Subsection (r) of section 20-325a of the general statutes is
357 repealed and the following is substituted in lieu thereof (*Effective*
358 *October 1, 2002*):

359 (r) No broker is entitled to claim any lien under this section, unless,
360 after the broker is entitled to compensation, without contingencies [,]
361 other than closing or transfer of title, under the terms set forth in the
362 written contract and not later than three days prior to the later of the

363 date of the conveyance or lease as set forth in the real estate sales
364 contract or lease or the actual date of the conveyance or the date when
365 the tenant takes possession, the broker gives written notice of the claim
366 for lien to the owner of the real property and to the prospective buyer
367 or tenant that the broker is entitled to compensation under the terms
368 set forth in the written contract and intends to claim a lien on the real
369 property. The notice shall be served upon the owner and the
370 prospective buyer or tenant, by any indifferent person, state marshal
371 or other proper officer, by leaving with such owner and prospective
372 buyer or at their usual [place] places of abode a true and attested copy
373 thereof. When there are two or more owners, or two or more buyers,
374 the notice shall be served on each owner and on each buyer.

375 Sec. 14. Subsection (h) of section 38a-866 of the general statutes, as
376 amended by section 5 of public act 01-67 and sections 42 and 43 of
377 public act 01-6 of the June special session, is repealed and the following
378 is substituted in lieu thereof (*Effective October 1, 2002*):

379 (h) Each insurer paying an assessment under sections 38a-858 to
380 38a-875, inclusive, as amended, may offset one hundred per cent of the
381 amount of such assessment against its premium tax liability to this
382 state under chapter 207. Such offset shall be taken over a period of the
383 five successive tax years following the year of payment of the
384 assessment, at the rate of twenty per cent per year of the assessment
385 paid to the association. Each insurer to which has been refunded by the
386 association, pursuant to subsection (f) of this section, all or a portion of
387 an assessment previously paid to the association by the insurer shall be
388 required to pay to the Department of Revenue Services an amount
389 equal to the total amount that has been claimed as an offset against the
390 premiums tax liability on the premiums tax return or returns, as the
391 case may be, filed by such insurer and that is attributable to such
392 refunded assessment, provided the amount required to be paid to said
393 department shall not exceed the amount of the refunded assessment. If
394 the amount of the refunded assessment exceeds the total amount that
395 has been claimed as an offset against the premiums tax liability on the
396 premiums tax return or returns filed by such insurer and that is

397 attributable to such refunded assessment, such excess may not be
398 claimed as an offset against the premiums tax liability on a premiums
399 tax return or returns filed by such insurer or, if the offset has been
400 transferred to another person pursuant to subdivision (2) of this
401 subsection, by such other person. For purposes of the subdivision, if
402 the offset has been transferred to another person pursuant to
403 subdivision (2) of this subsection, the total amount that has been
404 claimed as an offset against the premiums tax liability on the
405 premiums tax return or returns filed by such insurer includes the total
406 amount that has been claimed as an offset against the premiums tax
407 liability on the premiums tax return or returns filed by such other
408 person. The association shall promptly notify the Commissioner of
409 Revenue Services of the name and address of the insurers to which
410 such refunds have been made, the amount of such refunds, and the
411 date on which such refunds were mailed to each such insurer. If the
412 amount that an insurer is required to pay to the Department of
413 Revenue Services has not been so paid on or before the forty-fifth day
414 after the date of mailing of such refunds, the insurer shall be liable for
415 interest on such amount at the rate of one per cent per month, or
416 portion thereof, from such forty-fifth day to the date of payment.

417 Sec. 15. Subsection (a) of section 7 of public act 01-113 is repealed
418 and the following is substituted in lieu thereof (*Effective September 1,*
419 *2002*):

420 (a) Unless a person is denied a license pursuant to section 11 of [this
421 act] public act 01-113, a nonresident person shall receive a nonresident
422 producer license if: (1) The person is currently licensed as a resident
423 and in good standing in the person's home state; (2) the person has
424 submitted the proper request for licensure and has paid the fees
425 required under section 38a-11; (3) the person has submitted or
426 transmitted to the commissioner the application for licensure that the
427 person submitted to the person's home state, or in lieu of the same, a
428 completed uniform application, provided an applicant for a surplus
429 lines [brokers] broker license or limited lines credit insurance producer
430 license may submit any other application acceptable to the

431 commissioner; and (4) the person's home state awards nonresident
432 producer licenses to residents of this state on the same basis.

| | |
|--|--------------------------|
| This act shall take effect as follows: | |
| Section 1 | <i>October 1, 2002</i> |
| Sec. 2 | <i>October 1, 2002</i> |
| Sec. 3 | <i>October 1, 2002</i> |
| Sec. 4 | <i>October 1, 2002</i> |
| Sec. 5 | <i>October 1, 2002</i> |
| Sec. 6 | <i>October 1, 2002</i> |
| Sec. 7 | <i>October 1, 2002</i> |
| Sec. 8 | <i>October 1, 2002</i> |
| Sec. 9 | <i>October 1, 2002</i> |
| Sec. 10 | <i>October 1, 2002</i> |
| Sec. 11 | <i>October 1, 2002</i> |
| Sec. 12 | <i>October 1, 2002</i> |
| Sec. 13 | <i>October 1, 2002</i> |
| Sec. 14 | <i>October 1, 2002</i> |
| Sec. 15 | <i>September 1, 2002</i> |

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: None

Municipal Impact: None

Explanation

The bill makes technical changes to insurance and real estate statutes and has no fiscal impact.

OLR Bill Analysis

sSB 250

***AN ACT IMPLEMENTING THE LEGISLATIVE COMMISSIONERS'
RECOMMENDATIONS FOR TECHNICAL REVISIONS TO CERTAIN
INSURANCE AND REAL ESTATE STATUTES***

SUMMARY:

This bill makes minor technical revisions to the insurance and real estate statutes.

EFFECTIVE DATE: October 1, 2002, except for section 15 on reciprocity of nonresident producer licenses, which is effective September 1, 2002.

COMMITTEE ACTION

Insurance and Real Estate Committee

Joint Favorable Substitute

Yea 17 Nay 0