



General Assembly

February Session, 2022

***Raised Bill No. 5411***

LCO No. 2822



Referred to Committee on INSURANCE AND REAL ESTATE

Introduced by:  
(INS)

***AN ACT CONCERNING TRAVEL INSURANCE.***

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

1 Section 1. Section 38a-1 of the 2022 supplement to the general statutes  
2 is repealed and the following is substituted in lieu thereof (*Effective*  
3 *October 1, 2022*):

4 Terms used in this title, and sections 3 to 11, inclusive, of this act,  
5 unless it appears from the context to the contrary, shall have a scope and  
6 meaning as set forth in this section.

7 (1) "Affiliate" or "affiliated" means a person that directly, or indirectly  
8 through one or more intermediaries, controls, is controlled by or is  
9 under common control with another person.

10 (2) "Alien insurer" means any insurer that has been chartered by or  
11 organized or constituted within or under the laws of any jurisdiction or  
12 country without the United States.

13 (3) "Annuities" means all agreements to make periodical payments  
14 where the making or continuance of all or some of the series of the

15 payments, or the amount of the payment, is dependent upon the  
16 continuance of human life or is for a specified term of years. This  
17 definition does not apply to payments made under a policy of life  
18 insurance.

19 (4) "Commissioner" means the Insurance Commissioner.

20 (5) "Control", "controlled by" or "under common control with" means  
21 the possession, direct or indirect, of the power to direct or cause the  
22 direction of the management and policies of a person, whether through  
23 the ownership of voting securities, by contract other than a commercial  
24 contract for goods or nonmanagement services, or otherwise, unless the  
25 power is the result of an official position with the person.

26 (6) "Domestic insurer" means any insurer that has been chartered by,  
27 incorporated, organized or constituted within or under the laws of this  
28 state.

29 (7) "Domestic surplus lines insurer" means any domestic insurer that  
30 has been authorized by the commissioner to write surplus lines  
31 insurance.

32 (8) "Foreign country" means any jurisdiction not in any state, district  
33 or territory of the United States.

34 (9) "Foreign insurer" means any insurer that has been chartered by or  
35 organized or constituted within or under the laws of another state or a  
36 territory of the United States.

37 (10) "Insolvency" or "insolvent" means, for any insurer, that it is  
38 unable to pay its obligations when they are due, or when its admitted  
39 assets do not exceed its liabilities plus the greater of: (A) Capital and  
40 surplus required by law for its organization and continued operation;  
41 or (B) the total par or stated value of its authorized and issued capital  
42 stock. For purposes of this subdivision "liabilities" shall include but not  
43 be limited to reserves required by statute or by regulations adopted by  
44 the commissioner in accordance with the provisions of chapter 54 or

45 specific requirements imposed by the commissioner upon a subject  
46 company at the time of admission or subsequent thereto.

47 (11) "Insurance" means any agreement to pay a sum of money,  
48 provide services or any other thing of value on the happening of a  
49 particular event or contingency or to provide indemnity for loss in  
50 respect to a specified subject by specified perils in return for a  
51 consideration. In any contract of insurance, an insured shall have an  
52 interest which is subject to a risk of loss through destruction or  
53 impairment of that interest, which risk is assumed by the insurer and  
54 such assumption shall be part of a general scheme to distribute losses  
55 among a large group of persons bearing similar risks in return for a  
56 ratable contribution or other consideration.

57 (12) "Insurer" or "insurance company" includes any person or  
58 combination of persons doing any kind or form of insurance business  
59 other than a fraternal benefit society, and shall include a receiver of any  
60 insurer when the context reasonably permits.

61 (13) "Insured" means a person to whom or for whose benefit an  
62 insurer makes a promise in an insurance policy. The term includes  
63 policyholders, subscribers, members and beneficiaries. This definition  
64 applies only to the provisions of this title and does not define the  
65 meaning of this word as used in insurance policies or certificates.

66 (14) "Life insurance" means insurance on human lives and insurances  
67 pertaining to or connected with human life. The business of life  
68 insurance includes granting endowment benefits, granting additional  
69 benefits in the event of death by accident or accidental means, granting  
70 additional benefits in the event of the total and permanent disability of  
71 the insured, and providing optional methods of settlement of proceeds.  
72 Life insurance includes burial contracts to the extent provided by  
73 section 38a-464.

74 (15) "Mutual insurer" means any insurer without capital stock, the  
75 managing directors or officers of which are elected by its members.

76 (16) "Person" means an individual, a corporation, a partnership, a  
77 limited liability company, an association, a joint stock company, a  
78 business trust, an unincorporated organization or other legal entity.

79 (17) "Policy" means any document, including attached endorsements  
80 and riders, purporting to be an enforceable contract, which  
81 memorializes in writing some or all of the terms of an insurance  
82 contract.

83 (18) "State" means any state, district, or territory of the United States.

84 (19) "Subsidiary" of a specified person means an affiliate controlled  
85 by the person directly, or indirectly through one or more intermediaries.

86 (20) "Unauthorized insurer" or "nonadmitted insurer" means an  
87 insurer that has not been granted a certificate of authority by the  
88 commissioner to transact the business of insurance in this state or an  
89 insurer transacting business not authorized by a valid certificate.

90 (21) "United States" means the United States of America, its territories  
91 and possessions, the Commonwealth of Puerto Rico and the District of  
92 Columbia.

93 Sec. 2. Section 38a-398 of the general statutes is repealed and the  
94 following is substituted in lieu thereof (*Effective October 1, 2022*):

95 [(a) As used in] For the purposes of this section and sections 3 to 11,  
96 inclusive, of this act:

97 [(1) "Travel insurance" means insurance, provided under an  
98 individual or a group or master insurance policy, for the following  
99 personal risks incident to planned travel: (A) Interruption or  
100 cancellation of a trip or an event; (B) loss of baggage or personal effects;  
101 (C) damage to accommodations or rental vehicles; or (D) sickness,  
102 accident, disability or death occurring during travel;]

103 (1) "Aggregator web site" means an Internet web site that provides  
104 access to information concerning insurance products from more than

105 one insurer, including, but not limited to, product and insurer  
106 information, for use in insurance product comparison shopping.

107 (2) "Blanket travel insurance policy" means a policy of travel  
108 insurance issued to an eligible group that provides coverage: (A) For  
109 specific classes of persons defined in such policy of travel insurance; and  
110 (B) to all members of such eligible group without imposing a separate  
111 charge on any individual member of such eligible group.

112 (3) "Cancellation fee waiver" means a contractual agreement between  
113 a supplier of travel services and a consumer to waive some or all of the  
114 nonrefundable cancellation fee provisions of such supplier's underlying  
115 travel contract regardless of the reason for the cancellation or form of  
116 reimbursement.

117 (4) "Designated travel retailer" means a travel retailer designated by  
118 a limited lines travel insurance producer to offer and disseminate travel  
119 insurance to residents of this state on behalf of the limited lines travel  
120 insurance producer.

121 (5) "Eligible group" means, with respect to travel insurance, a group  
122 of two or more persons who are engaged in a common enterprise or  
123 have an economic, educational or social affinity or relationship,  
124 including, but not limited to: (A) A group of entities that are engaged in  
125 the business of providing travel or travel services, including, but not  
126 limited to, tour operators, lodging providers, vacation property owners,  
127 hotels, resorts, travel clubs, travel agencies, property managers, cultural  
128 exchange programs and common carriers, including, but not limited to,  
129 airlines, cruise lines, railroads, steamship companies and public bus  
130 carriers, provided all members or customers of such group have a  
131 common exposure to risk attendant to travel with respect to a particular  
132 type of travel or traveler; (B) a college, school or other institution of  
133 learning, provided any blanket travel insurance policy issued to the  
134 college, school or other institution of learning provides coverage for the  
135 students, teachers, employees or volunteers of such college, school or  
136 institution of higher learning; (C) an employer, provided any blanket

137 travel insurance policy issued to the employer provides coverage for a  
138 group of employees, volunteers, contractors, directors, dependents or  
139 guests of such employer; (D) a sports team, camp or sponsor of such  
140 sports team or camp, provided any blanket travel insurance policy  
141 issued to such team, camp or sponsor provides coverage for  
142 participants, members, campers, employees, officials, supervisors or  
143 volunteers of such team, camp or sponsor; (E) a religious, charitable,  
144 recreational, educational or civic organization, or branch of such  
145 religious, charitable, recreational, educational or civic organization,  
146 provided any blanket travel insurance policy issued to such  
147 organization or branch provides coverage for a group of members,  
148 participants or volunteers of such organization or branch; (F) a financial  
149 institution or financial institution vendor, or a parent holding company,  
150 trustee or agent of, or designated by, one or more financial institutions  
151 or financial institution vendors, including, but not limited to, account  
152 holders, credit card holders, debtors, guarantors or purchasers; (G) an  
153 incorporated or unincorporated association, including, but not limited  
154 to, a labor union, that has a common interest, constitution and bylaws  
155 and is maintained, in good faith, for a purpose other than obtaining  
156 insurance for members of, or participants in, such association covering  
157 the members of such association; (H) a trust or the trustees of a fund  
158 approved by the commissioner and established, created or maintained  
159 for the benefit of, and covering, members, employees or customers of  
160 one or more of the associations described in subparagraph (G) of this  
161 subdivision; (I) an entertainment production company, provided any  
162 blanket travel insurance policy issued to the entertainment production  
163 company provides coverage for a group of participants, volunteers,  
164 audience members, contestants or workers of such entertainment  
165 production company; (J) a volunteer fire department, police  
166 department, ambulance service, first aid service, rescue service, court or  
167 civil defense organization, or any similar voluntary group; (K) a  
168 preschool, daycare institution for children or adults or a senior citizen  
169 club; (L) an automobile or truck rental or leasing company covering,  
170 under a blanket travel insurance policy, a group of individuals who may  
171 become renters or lessees of, or passengers on, a rented or leased

172 automobile or truck due to their travel status on such rented or leased  
173 automobile or truck, provided the common carrier, operator, owner or  
174 lessor of the rented or leased automobile or truck, or the automobile or  
175 truck rental or leasing company, is the policyholder of the blanket travel  
176 insurance policy providing such coverage; and (M) any other group if  
177 the commissioner determines, in the commissioner's discretion, that  
178 issuing a blanket travel insurance policy to such group is consistent with  
179 the public interest.

180 (6) "Fulfillment materials" means documents sent to a consumer who  
181 purchases a travel protection plan that (A) confirms purchase of such  
182 travel protection plan, and (B) discloses the coverage and assistance  
183 details for such travel protection plan.

184 (7) "Group travel insurance" means travel insurance issued to an  
185 eligible group.

186 ~~[(2)]~~ (8) "Limited lines travel insurance producer" means an  
187 individual who, or business entity that, is authorized under subsection  
188 (b) of [this] section 4 of this act to sell, solicit or negotiate travel  
189 insurance. [;]

190 ~~[(3) "Offer and disseminate,"]~~ (9) "Offer and disseminate" means, with  
191 respect to travel insurance, [means] the provision of general information  
192 about or general services for travel insurance, including: (A) A  
193 description of the coverage and price of a policy of travel insurance;  
194 [policy;] (B) the processing of an application for a policy of travel  
195 insurance; [policy;] (C) the collection of a premium for a policy of travel  
196 insurance; [policy;] or (D) the performance of other activities not  
197 requiring a license and permitted in this state concerning a policy of  
198 travel insurance. [policy;]

199 (10) "Primary certificate holder" means an individual who elects  
200 coverage under and purchases travel insurance provided under a policy  
201 of group travel insurance.

202 (11) "Primary policyholder" means an individual who elects and

203 purchases travel insurance provided under an individual policy of  
204 travel insurance.

205 (12) "Travel administrator" means a person who, directly or  
206 indirectly, underwrites travel insurance, collects charges, collateral or  
207 premiums in connection with travel insurance or adjusts or settles travel  
208 insurance claims for residents of this state, unless such person: (A)  
209 Works for, and to the extent that such person's activities are subject to  
210 the supervision and control of, a travel administrator; (B) is a licensed  
211 insurance producer selling insurance or engaged in administrative and  
212 claims-related activities within the scope of such insurance producer's  
213 license; (C) is a designated travel retailer; (D) is a public adjuster, as  
214 defined in section 38a-723, or a lawyer settling a client's claim; or (E) is  
215 a business entity affiliated with a licensed insurer and administering the  
216 direct and assumed travel insurance business of such licensed affiliated  
217 insurer.

218 (13) "Travel assistance services" means any noninsurance services for  
219 which a consumer is not indemnified based on a fortuitous event and  
220 where providing such noninsurance services does not transfer or shift  
221 any risk in a manner that constitutes the business of insurance,  
222 including, but not limited to: (A) Security advisories; (B) destination  
223 information; (C) vaccination and immunization information services;  
224 (D) travel reservation services; (E) entertainment; (F) activity and event  
225 planning; (G) translation assistance; (H) emergency messaging; (I)  
226 international legal and medical referrals; (J) medical case monitoring;  
227 (K) transportation arrangement coordination; (L) emergency cash  
228 transfer assistance; (M) medical prescription replacement assistance; (N)  
229 passport and other travel document replacement assistance; (O) lost  
230 luggage assistance; (P) concierge services; and (Q) any service furnished  
231 in connection with a planned trip or travel.

232 (14) (A) "Travel insurance" means insurance, provided under an  
233 individual, group or blanket insurance policy, for the following  
234 personal risks incident to a planned trip or travel: (i) Interruption or  
235 cancellation of a trip, travel or an event; (ii) loss of baggage or personal



236 effects; (iii) damage to accommodations or rental vehicles; (iv) sickness,  
237 accident, disability or death occurring during a trip or travel; (v)  
238 emergency evacuation; (vi) repatriation of remains; or (vii) any other  
239 contractual obligation to indemnify or pay a specified amount to a  
240 traveler upon determinable contingencies that are related to travel and  
241 prescribed in regulations adopted by the commissioner pursuant to  
242 section 11 of this act.

243 (B) "Travel insurance" does not include: (i) Major medical plans that  
244 provide comprehensive medical protection for a traveler with a trip or  
245 travel lasting longer than six months, including, but not limited to, a  
246 traveler working or residing outside of the United States as an  
247 expatriate; (ii) a product that requires a specific insurance producer  
248 license; or (iii) a cancellation fee waiver.

249 (15) "Travel protection plan" means a plan that includes travel  
250 insurance, travel assistance services or a cancellation fee waiver.

251 [(4)] (16) "Travel retailer" means a business entity that makes,  
252 arranges or offers travel services. [; and]

253 [(5) "Designated travel retailer" means a travel retailer designated by  
254 a limited lines travel insurance producer to offer and disseminate travel  
255 insurance to residents of this state on such producer's behalf.

256 (b) (1) (A) Any individual or business entity that wishes to act as a  
257 limited lines travel insurance producer in this state may apply to the  
258 Insurance Commissioner for authorization to act as a limited lines travel  
259 insurance producer and to sell, solicit or negotiate travel insurance  
260 through an insurance company licensed or authorized to do business in  
261 this state. Such application shall be submitted on such form and in such  
262 manner as prescribed by the commissioner and shall be accompanied  
263 by the fee required under section 38a-11. The commissioner shall not  
264 approve such application unless (i) the applicant has paid all applicable  
265 filing and licensing fees required under this title, and (ii) for an applicant  
266 that is a business entity, the employee designated pursuant to  
267 subparagraph (A) of subdivision (3) of this subsection and the president,

268 secretary, treasurer and any other officer or individual who directs or  
269 controls the insurance operations of the applicant has complied with  
270 any fingerprinting requirements applicable to insurance producers in  
271 the resident state of the applicant.

272 (B) The commissioner may approve or deny such application. Any  
273 such authorization shall be in force until the commissioner suspends or  
274 revokes such authorization or the commissioner suspends, revokes or  
275 refuses to renew the individual's or insurance company's license or  
276 authorization to do business in this state.

277 (2) Each limited lines travel insurance producer that is a business  
278 entity shall, at the time such application is approved by the  
279 commissioner, establish and maintain a registry, on a form prescribed  
280 by the commissioner, of its designated travel retailers. Such producer  
281 shall update the registry annually and shall include: (A) The name,  
282 address and contact information of each designated travel retailer; (B)  
283 the name, address and contact information of an officer or individual  
284 who directs or controls each designated travel retailer's operations; (C)  
285 the federal tax identification number of each designated travel retailer;  
286 and (D) a certification by such producer that the designated travel  
287 retailer has not engaged in conduct prohibited under 18 USC 1033, as  
288 amended from time to time. Upon request by the commissioner, a  
289 limited lines travel insurance producer shall make such registry  
290 available to the commissioner or the commissioner's designee for  
291 inspection and examination during the regular business hours of such  
292 limited lines travel insurance producer.

293 (3) (A) Each limited lines travel insurance producer that is a business  
294 entity shall designate an employee, who is an insurance producer  
295 licensed in this state, as the individual responsible for the limited lines  
296 travel insurance producer's compliance with this section, including  
297 supervision of its designated travel retailers.

298 (B) Each limited lines travel insurance producer that is a business  
299 entity shall be responsible for the acts of its designated travel retailers

300 and shall use reasonable means to ensure each designated travel  
301 retailer's compliance with this section.

302 (4) Each limited lines travel insurance producer that is a business  
303 entity shall require each employee and authorized representative of its  
304 designated travel retailers to receive instruction or training on the offer  
305 and dissemination of travel insurance. Such instruction or training may  
306 be subject to review by the commissioner and shall include, at a  
307 minimum, information about (A) the types of travel insurance offered  
308 through the travel retailer, (B) ethical sales practices, and (C) required  
309 disclosures to prospective insureds.

310 (5) Each limited lines travel insurance producer that is a business  
311 entity or designated travel retailer shall provide to purchasers of a travel  
312 insurance policy: (A) A description or a copy of the material terms of  
313 such policy; (B) a description of the process for filing a claim under such  
314 policy; (C) a description of the process for the review or cancellation of  
315 such policy; and (D) the identity of and contact information for the  
316 insurance company issuing such policy and the limited lines travel  
317 insurance producer.

318 (c) (1) A travel retailer that does not employ a licensed insurance  
319 producer or is not licensed or authorized to transact the business of  
320 insurance in this state may offer and disseminate travel insurance to  
321 residents of this state, if (A) it is a designated travel retailer, and (B) its  
322 travel insurance-related activities are limited to those authorized under  
323 this section.

324 (2) A travel retailer shall make available to prospective insureds  
325 brochures or other written materials that: (A) Provide the identity of and  
326 contact information for the insurance company issuing the travel  
327 insurance policy and the limited lines travel insurance producer; (B)  
328 explain that the purchase of travel insurance is not required to purchase  
329 any other product or service from the travel retailer; and (C) explain that  
330 such travel retailer is permitted to provide general information about  
331 the travel insurance offered through the travel retailer, including a

332 description of the coverage and price, but is not qualified or authorized  
333 to answer questions about the terms and conditions of such travel  
334 insurance or evaluate the adequacy of the prospective insured's existing  
335 insurance coverage.

336 (3) A designated travel retailer may receive compensation from a  
337 limited lines travel insurance producer or the insurance company  
338 issuing a travel insurance policy for services related to the offer and  
339 dissemination of travel insurance as agreed to by such designated travel  
340 retailer and such limited lines travel insurance producer or insurance  
341 company.

342 (4) An employee or authorized representative of a travel retailer shall  
343 not be required to be licensed as an insurance producer unless such  
344 employee or authorized representative: (A) Evaluates or interprets the  
345 terms, benefits or conditions of travel insurance offered by the travel  
346 retailer; (B) evaluates or provides advice regarding a prospective  
347 insured's existing insurance coverage; or (C) holds himself or herself out  
348 as a licensed insurance producer or an insurance expert.

349 (d) (1) A violation of this section by a limited lines travel insurance  
350 producer shall be deemed an unfair or deceptive insurance practice  
351 under section 38a-816.

352 (2) A violation of this section by a travel retailer shall be deemed an  
353 unfair or deceptive trade practice under subsection (a) of section 42-  
354 110b.]

355 Sec. 3. (NEW) (*Effective October 1, 2022*) (a) Travel insurance shall be  
356 classified and filed in this state, for the purposes of rates and forms,  
357 under an inland marine line of insurance, except if travel insurance  
358 provides coverage for sickness, accident, disability or death occurring  
359 during a trip or travel, either exclusively or in conjunction with related  
360 coverages of emergency evacuation or repatriation of remains, or  
361 incidental limited property and casualty benefits such as baggage or trip  
362 or travel cancellation, such travel insurance may be filed in this state  
363 under either an accident and health line of insurance or an inland

364 marine line of insurance.

365 (b) The commissioner may prescribe eligibility and underwriting  
366 standards for travel insurance, provided such standards are based on  
367 travel protection plans designed for individual or identified marketing  
368 or distribution channels and meet this state's underwriting standards  
369 for inland marine lines of insurance.

370 Sec. 4. (NEW) (*Effective October 1, 2022*) (a) (1) Except as provided in  
371 subdivision (2) of this subsection, no individual or business entity shall  
372 act as a limited lines travel insurance producer, and no travel retailer  
373 shall act as a designated travel retailer, in this state except in accordance  
374 with the provisions of this section and sections 5, 7, 9 and 10 of this act.

375 (2) Notwithstanding any provision of this section, each insurance  
376 producer licensed for a major line of authority in this state shall be  
377 deemed to have been authorized to sell, solicit and negotiate travel  
378 insurance in this state, and no insurance producer licensed for property  
379 and casualty insurance lines in this state shall be required to seek  
380 authorization to sell, solicit or negotiate travel insurance through an  
381 insurer licensed or authorized to do insurance business in this state.

382 (b) (1) (A) Except as provided in subdivision (2) of subsection (a) of  
383 this section, any individual or business entity that wishes to act as a  
384 limited lines travel insurance producer in this state may apply to the  
385 commissioner for annual authorization to act as a limited lines travel  
386 insurance producer and to sell, solicit or negotiate travel insurance  
387 through an insurer licensed or authorized to do insurance business in  
388 this state. Such application shall be submitted on such form and in such  
389 manner as prescribed by the commissioner and shall be accompanied  
390 by the fee required under section 38a-11 of the general statutes, as  
391 amended by this act. The commissioner shall not approve such  
392 application unless: (i) The applicant has paid (I) all applicable filing fees  
393 and licensing fees required under title 38a of the general statutes, and  
394 (II) the licensing fee under section 38a-11 of the general statutes, as  
395 amended by this act, and (ii) for an applicant that is a business entity,

396 the employee designated pursuant to subparagraph (A) of subdivision  
397 (3) of this subsection and the president, secretary, treasurer and any  
398 other officer or individual who directs or controls the insurance  
399 operations of the applicant has complied with any fingerprinting  
400 requirements applicable to insurance producers in the resident state of  
401 the applicant.

402 (B) The commissioner may approve or deny any application  
403 submitted pursuant to subparagraph (A) of this subdivision. Any  
404 authorization approved by the commissioner shall be in force until the  
405 day immediately preceding the anniversary date of such authorization,  
406 the date on which the commissioner suspends or revokes such  
407 authorization in accordance with the provisions of section 9 of this act  
408 or the commissioner suspends, revokes or refuses to renew the license  
409 of the insurer through which the limited lines travel insurance producer  
410 is selling, soliciting or negotiating travel insurance in this state,  
411 whichever first occurs.

412 (2) Each limited lines travel insurance producer that is a business  
413 entity shall, at the time such application is approved by the  
414 commissioner, establish and maintain a registry, on a form prescribed  
415 by the commissioner, of its designated travel retailers. Such limited lines  
416 travel insurance producer shall update the registry annually and shall  
417 include: (A) The name, address and contact information of each  
418 designated travel retailer; (B) the name, address and contact information  
419 of an officer or individual who directs or controls each designated travel  
420 retailer's operations; (C) the federal tax identification number of each  
421 designated travel retailer; and (D) a certification by such limited lines  
422 travel insurance producer that the designated travel retailer has not  
423 engaged in conduct prohibited under 18 USC 1033, as amended from  
424 time to time. Upon request by the commissioner, a limited lines travel  
425 insurance producer shall make such registry available to the  
426 commissioner or the commissioner's designee for inspection and  
427 examination during the regular business hours of such limited lines  
428 travel insurance producer.

429 (3) (A) Each limited lines travel insurance producer that is a business  
430 entity shall designate an employee, who is an insurance producer  
431 licensed in this state, as the individual responsible for the limited lines  
432 travel insurance producer's compliance with this section and sections 5,  
433 7, 9 and 10 of this act, including supervision of its designated travel  
434 retailers.

435 (B) Each limited lines travel insurance producer that is a business  
436 entity shall be responsible for the acts of such limited lines travel  
437 insurance producer's designated travel retailers and shall use  
438 reasonable means to ensure each designated travel retailer's compliance  
439 with this section and sections 5, 7, 9 and 10 of this act.

440 (4) Each limited lines travel insurance producer that is a business  
441 entity shall require each employee and authorized representative of its  
442 designated travel retailers to receive instruction or training on the offer  
443 and dissemination of travel insurance. Such instruction or training may  
444 be subject to review by the commissioner and shall include, at a  
445 minimum, information about: (A) The types of travel insurance offered  
446 through the designated travel retailer; (B) ethical sales practices; and (C)  
447 required disclosures to consumers.

448 (5) Each limited lines travel insurance producer that is a business  
449 entity or designated travel retailer shall provide to purchasers of a  
450 policy of travel insurance: (A) A description or a copy of the material  
451 terms of such policy; (B) a description of the process for filing a claim  
452 under such policy; (C) a description of the process for the review or  
453 cancellation of such policy; and (D) the identity of and contact  
454 information for the insurer issuing such policy and the limited lines  
455 travel insurance producer.

456 (c) (1) A travel retailer that does not employ a licensed insurance  
457 producer or is not licensed or authorized to transact the business of  
458 insurance in this state may offer and disseminate travel insurance to  
459 residents of this state, if: (A) Such travel retailer is a designated travel  
460 retailer, and (B) such designated travel retailer's travel insurance-related

461 activities are limited to those authorized under this section.

462 (2) A designated travel retailer shall make available to consumers  
463 brochures or other written materials that: (A) Provide the identity of,  
464 and contact information for, the insurer issuing the policy of travel  
465 insurance and the limited lines travel insurance producer; (B) explain  
466 that the purchase of travel insurance is not required to purchase any  
467 other product or service from the designated travel retailer; and (C)  
468 explain that such designated travel retailer is permitted to provide  
469 general information about the travel insurance offered through such  
470 designated travel retailer, including, but not limited to, a description of  
471 the coverage and price, but is not qualified or authorized to answer  
472 questions about the terms and conditions of such travel insurance or  
473 evaluate the adequacy of the consumer's existing insurance coverage.

474 (3) A designated travel retailer may receive compensation from a  
475 limited lines travel insurance producer or the insurer issuing a policy of  
476 travel insurance for services related to the offer and dissemination of  
477 travel insurance as agreed to by such designated travel retailer and such  
478 limited lines travel insurance producer or insurer.

479 (4) An employee or authorized representative of a travel retailer shall  
480 not be required to be licensed as an insurance producer unless such  
481 employee or authorized representative: (A) Evaluates or interprets the  
482 technical terms, benefits or conditions of travel insurance offered by the  
483 travel retailer; (B) evaluates or provides advice regarding a consumer's  
484 existing insurance coverage; or (C) holds himself or herself out as a  
485 licensed insurance producer or an insurance expert.

486 Sec. 5. (NEW) (*Effective October 1, 2022*) (a) (1) All documents  
487 provided to a consumer prior to the purchase of a policy of travel  
488 insurance, including, but not limited to, sales materials, advertising  
489 materials and marketing materials, shall be consistent with the policy of  
490 travel insurance, including, but not limited to, forms, endorsements,  
491 policies, rate filings and certificates of insurance.

492 (2) If a policy or certificate of travel insurance contains any



493 preexisting condition exclusion, information concerning, and an  
494 opportunity to learn more about, such preexisting condition exclusion  
495 shall be provided to a consumer at any time prior to the time that the  
496 consumer purchases such policy or certificate of travel insurance, and  
497 any such preexisting condition exclusion shall be provided to a  
498 consumer in the fulfillment materials for a travel protection plan that  
499 includes travel insurance.

500 (3) (A) If a consumer purchases a travel protection plan in this state,  
501 the following shall be provided to the consumer as soon as practicable  
502 following the time that such consumer purchases such travel protection  
503 plan:

504 (i) The fulfillment materials for such travel protection plan;

505 (ii) A description, or a copy of, the material terms of any travel  
506 insurance coverage included in such travel protection plan;

507 (iii) A description of the process for filing a claim under any travel  
508 insurance coverage included in such travel protection plan;

509 (iv) A description of the process for review or cancellation of any  
510 travel insurance coverage included in such travel protection plan; and

511 (v) The identity of, and contact information for, the insurer issuing  
512 any travel insurance coverage included in such travel protection plan.

513 (B) Unless a consumer insured under travel insurance coverage  
514 included in a travel protection plan departs on a covered trip or travel,  
515 or files a claim under such coverage, the consumer may cancel such  
516 travel insurance coverage and receive a full refund of the travel  
517 protection plan price from the date that such consumer purchased such  
518 travel protection plan until at least:

519 (i) Fifteen days following the date of delivery of such travel protection  
520 plan's fulfillment materials by mail; or

521 (ii) Ten days following the date of delivery of such travel protection

522 plan's fulfillment materials by any means other than mail.

523 (4) The fulfillment materials for a travel protection plan, and the  
524 documents concerning any travel insurance coverage included in the  
525 travel protection plan, shall disclose whether the travel insurance  
526 coverage included in such travel protection plan is primary or  
527 secondary to other applicable coverage.

528 (b) No person offering, soliciting or negotiating travel insurance or  
529 travel protection plans to consumers in this state on an individual or  
530 group basis may do so by using a negative option or opt-out, which  
531 would require a consumer to take an affirmative action to deselect travel  
532 insurance coverage, by, for example, unchecking a box on an electronic  
533 form, when the consumer purchases a trip or travel package.

534 Sec. 6. (NEW) (*Effective October 1, 2022*) (a) No person shall act as, or  
535 hold itself out to be, a travel administrator in this state unless such  
536 person is:

537 (1) An insurance producer licensed for property and casualty  
538 insurance lines in this state;

539 (2) A managing general agent, as defined in section 38a-90a of the  
540 general statutes, that is licensed as an insurance producer and holds an  
541 appointment by an insurer in this state; or

542 (3) A third-party administrator licensed pursuant to section 38a-720j  
543 of the general statutes.

544 (b) Each insurer shall be responsible for the conduct of each travel  
545 administrator administering travel insurance in this state underwritten  
546 by such insurer, and shall ensure that each such travel administrator  
547 maintains, and makes available to the commissioner upon request, all  
548 books and records concerning such insurer.

549 Sec. 7. (NEW) (*Effective October 1, 2022*) A travel protection plan may  
550 be offered to a consumer in this state for a single price reflecting any  
551 combined features offered by the travel protection plan if:

552 (1) Such travel protection plan:

553 (A) Discloses to the consumer, at or before the time of purchase, that  
554 such travel protection plan includes travel insurance, travel assistance  
555 services and cancellation fee waivers, as applicable, and that such  
556 consumer may obtain additional information regarding the individual  
557 features and pricing of such travel insurance, travel assistance services  
558 and cancellation fee waivers, as applicable; and

559 (B) Provides to the consumer, at or before the time of purchase, an  
560 opportunity to obtain the additional information described in  
561 subparagraph (A) of this subdivision; and

562 (2) The fulfillment materials for such travel protection plan:

563 (A) Describe and delineate the travel insurance, travel assistance  
564 services and cancellation fee waivers, if any, in such travel protection  
565 plan; and

566 (B) Include any required disclosure concerning the travel insurance  
567 coverage included in such travel protection plan, if any, and the contact  
568 information for the persons providing the travel assistance services and  
569 cancellation fee waivers included in such travel protection plan, if any.

570 Sec. 8. (NEW) (*Effective October 1, 2022*) (a) (1) Except as provided in  
571 subdivision (2) of this subsection, travel insurance written by a domestic  
572 insurer shall be subject to the tax imposed under section 12-202 of the  
573 general statutes, and travel insurance written by an alien insurer or  
574 foreign insurer shall be subject to the tax imposed under section 12-210  
575 of the general statutes, for travel insurance premiums paid by:

576 (A) The primary policyholder of an individual policy of travel  
577 insurance if such primary policyholder is a resident of this state;

578 (B) The primary certificate holder of a policy of group travel  
579 insurance if such primary certificate holder is a resident of this state; or

580 (C) A policyholder of a blanket travel insurance policy if the

581 policyholder is a resident of this state, maintains such policyholder's  
582 principal place of business in this state or an affiliate or subsidiary of  
583 such policyholder maintains such affiliate's or subsidiary's principal  
584 place of business in this state.

585 (2) If a domestic insurer, alien insurer or foreign insurer that writes a  
586 blanket travel insurance policy described in subparagraph (C) of  
587 subdivision (1) of this subsection is subject to rules across multiple  
588 taxing jurisdictions that permit such insurer to allocate premiums across  
589 such jurisdictions on an apportioned basis and in a reasonable and  
590 equitable manner, such insurer's liability under said subparagraph shall  
591 be subject to such premium allocation.

592 (b) Each domestic insurer, alien insurer and foreign insurer that is  
593 subject to the provisions of subsection (a) of this section shall:

594 (1) Document the state in which each primary policyholder, primary  
595 certificate holder, policyholder, affiliate or subsidiary described in  
596 subsection (a) of this section maintains such primary policyholder's,  
597 primary certificate holder's, policyholder's, affiliate's or subsidiary's  
598 primary residence or principal place of business, as applicable; and

599 (2) Report as premium only the amount allocable to travel insurance.

600 Sec. 9. (NEW) (*Effective October 1, 2022*) (a) The commissioner may  
601 suspend, revoke or refuse to issue or renew authorization to act as a  
602 limited lines travel insurance producer, or prohibit a travel retailer from  
603 acting as a designated travel retailer, in this state or may levy a civil  
604 penalty in accordance with the provisions of title 38a of the general  
605 statutes, or may take any combination of such actions, for any one or  
606 more of the following causes:

607 (1) For a limited lines travel insurance producer, providing incorrect,  
608 misleading, incomplete or materially untrue information to the  
609 commissioner in an application for authorization to act as a limited lines  
610 travel insurance producer;

611 (2) Violating any insurance law, or violating any regulation,  
612 subpoena or order of the commissioner or of another state's insurance  
613 commissioner;

614 (3) For a limited lines travel insurance producer, obtaining or  
615 attempting to obtain authorization from the commissioner to act as a  
616 limited lines travel insurance producer through misrepresentation or  
617 fraud;

618 (4) Improperly withholding, misappropriating or converting any  
619 moneys or properties received in the course of doing business in this  
620 state;

621 (5) Intentionally misrepresenting the terms of actual or proposed  
622 travel insurance coverage or an application for such coverage;

623 (6) Having been convicted of a felony;

624 (7) Having admitted or been found to have committed any insurance  
625 unfair trade practice or fraud;

626 (8) Using fraudulent, coercive or dishonest practices, or  
627 demonstrating incompetence, untrustworthiness or financial  
628 irresponsibility in the conduct of business in this state or elsewhere;

629 (9) For a limited lines travel insurance producer, having  
630 authorization to act as a limited lines travel insurance producer, or its  
631 equivalent, denied, suspended or revoked in any other state, province,  
632 district or territory;

633 (10) Forging another's name to an application for travel insurance  
634 coverage or to any document related to a travel insurance transaction;

635 (11) Failing to comply with an administrative or court order imposing  
636 a child support obligation; or

637 (12) Failing to pay income tax pursuant to chapter 229 of the general  
638 statutes or comply with any administrative or court order directing

639 payment of state income tax.

640 (b) If the action by the commissioner is to refuse to renew  
641 authorization to act as a limited lines travel insurance producer or to  
642 deny an application for an authorization to act as a limited lines travel  
643 insurance producer, the commissioner shall notify the applicant or  
644 limited lines travel insurance producer, as applicable, and advise, in  
645 writing, the applicant or limited lines travel insurance producer, as  
646 applicable, of the reason for the commissioner's denial or refusal to  
647 renew such authorization. The applicant or limited lines travel  
648 insurance producer, as applicable, may make written demand upon the  
649 commissioner, not later than thirty days after the notice, for a hearing  
650 before the commissioner to determine the reasonableness of the  
651 commissioner's action. The hearing shall be held not later than twenty  
652 days after receipt of such request and shall be held in accordance with  
653 section 38a-19 of the general statutes.

654 (c) A business entity's authority to act as a limited lines travel  
655 insurance producer or designated travel retailer in this state may be  
656 suspended, revoked or refused if the commissioner finds, after a  
657 hearing, that an individual employee's or authorized representative's  
658 violation was known or should have been known by one or more of the  
659 partners, officers or managers acting on behalf of the business entity and  
660 the violation was neither reported to the commissioner nor was any  
661 corrective action taken.

662 (d) The commissioner shall retain the authority to enforce the  
663 provisions of, and impose any penalty or remedy authorized by, any  
664 provision of title 38a of the general statutes against any person who is  
665 under investigation for or charged with a violation of title 38a of the  
666 general statutes even if the person's license, authorization, designation  
667 or registration has been surrendered or has lapsed by operation of law.

668 Sec. 10. (NEW) (*Effective October 1, 2022*) (a) Except as provided in  
669 subsections (b) and (c) of this section, each of the following shall be  
670 deemed an unfair or deceptive insurance practice under section 38a-816

671 of the general statutes, as amended by this act:

672 (1) Any violation of a provision of section 4, 5, 7 or 9 of this act by a  
673 limited lines travel insurance producer if such provision is applicable to  
674 the limited lines travel insurance producer;

675 (2) Any violation of a provision of section 6 or 8 of this act by an  
676 insurer if such provision is applicable to such insurer;

677 (3) Offering or selling a policy of travel insurance in this state that is  
678 never required to pay a claim; and

679 (4) Representing to a consumer that coverage under a blanket travel  
680 insurance policy is provided free of charge.

681 (b) Except as provided in subsection (c) of this section, each of the  
682 following shall be deemed an unfair or deceptive trade practice under  
683 subsection (a) of section 42-110b of the general statutes:

684 (1) Any violation of a provision of section 4, 5, 7 or 9 of this act by a  
685 travel retailer or designated travel retailer if such provision is applicable  
686 to the travel retailer or designated travel retailer; and

687 (2) Any violation of a provision of section 6 of this act by a travel  
688 administrator if such provision is applicable to the travel administrator.

689 (c) It shall not be an unfair or deceptive insurance practice under  
690 section 38a-816 of the general statutes, as amended by this act, or an  
691 unfair or deceptive trade practice under subsection (a) of section 42-110b  
692 of the general statutes:

693 (1) If a consumer's destination jurisdiction requires insurance  
694 coverage, to require the consumer to choose one of the following options  
695 as a precondition to purchasing a trip or travel package:

696 (A) Purchasing the coverage required by such destination jurisdiction  
697 through the designated travel retailer or limited lines travel insurance  
698 producer supplying the trip or travel package; or

699 (B) Agreeing to obtain and provide proof of coverage that meets the  
700 destination jurisdiction's requirements prior to the time that the  
701 consumer departs for such trip or travel; or

702 (2) If travel insurance coverage is directly marketed to a consumer  
703 through an insurer's Internet web site or an aggregator web site and the  
704 consumer may access all provisions of such travel insurance coverage  
705 by electronic means, and an accurate summary or short description of  
706 such travel insurance coverage is provided on the insurer's Internet web  
707 site or aggregator web site.

708 Sec. 11. (NEW) (*Effective October 1, 2022*) The commissioner shall  
709 adopt regulations, in accordance with chapter 54 of the general statutes,  
710 to implement the provisions of section 38a-398 of the general statutes,  
711 as amended by this act, and sections 3 to 10, inclusive, of this act.

712 Sec. 12. Subsection (a) of section 38a-11 of the general statutes is  
713 repealed and the following is substituted in lieu thereof (*Effective October*  
714 *1, 2022*):

715 (a) The commissioner shall demand and receive the following fees:  
716 (1) For the annual fee for each license issued to a domestic insurance  
717 company, two hundred dollars; (2) for receiving and filing annual  
718 reports of domestic insurance companies, fifty dollars; (3) for filing all  
719 documents prerequisite to the issuance of a license to an insurance  
720 company, two hundred twenty dollars, except that the fee for such  
721 filings by any health care center, as defined in section 38a-175, shall be  
722 one thousand three hundred fifty dollars; (4) for filing any additional  
723 paper required by law, thirty dollars; (5) for each certificate of valuation,  
724 organization, reciprocity or compliance, forty dollars; (6) for each  
725 certified copy of a license to a company, forty dollars; (7) for each  
726 certified copy of a report or certificate of condition of a company to be  
727 filed in any other state, forty dollars; (8) for amending a certificate of  
728 authority, two hundred dollars; (9) for each license issued to a rating  
729 organization, two hundred dollars. In addition, insurance companies  
730 shall pay any fees imposed under section 12-211; (10) a filing fee of fifty



731 dollars for each initial application for a license made pursuant to section  
732 38a-769; (11) with respect to insurance agents' appointments: (A) A  
733 filing fee of fifty dollars for each request for any agent appointment,  
734 except that no filing fee shall be payable for a request for agent  
735 appointment by an insurance company domiciled in a state or foreign  
736 country which does not require any filing fee for a request for agent  
737 appointment for a Connecticut insurance company; (B) a fee of one  
738 hundred dollars for each appointment issued to an agent of a domestic  
739 insurance company or for each appointment continued; and (C) a fee of  
740 eighty dollars for each appointment issued to an agent of any other  
741 insurance company or for each appointment continued, except that (i)  
742 no fee shall be payable for an appointment issued to an agent of an  
743 insurance company domiciled in a state or foreign country which does  
744 not require any fee for an appointment issued to an agent of a  
745 Connecticut insurance company, and (ii) the fee shall be twenty dollars  
746 for each appointment issued or continued to an agent of an insurance  
747 company domiciled in a state or foreign country with a premium tax  
748 rate below Connecticut's premium tax rate; (12) with respect to  
749 insurance producers: (A) An examination fee of fifteen dollars for each  
750 examination taken, except when a testing service is used, the testing  
751 service shall pay a fee of fifteen dollars to the commissioner for each  
752 examination taken by an applicant; (B) a fee of eighty dollars for each  
753 license issued; (C) a fee of eighty dollars per year, or any portion thereof,  
754 for each license renewed; and (D) a fee of eighty dollars for any license  
755 renewed under the transitional process established in section 38a-784;  
756 (13) with respect to public adjusters: (A) An examination fee of fifteen  
757 dollars for each examination taken, except when a testing service is  
758 used, the testing service shall pay a fee of fifteen dollars to the  
759 commissioner for each examination taken by an applicant; and (B) a fee  
760 of two hundred fifty dollars for each license issued or renewed; (14) with  
761 respect to casualty claims adjusters: (A) An examination fee of twenty  
762 dollars for each examination taken, except when a testing service is  
763 used, the testing service shall pay a fee of twenty dollars to the  
764 commissioner for each examination taken by an applicant; (B) a fee of  
765 eighty dollars for each license issued or renewed; and (C) the expense of

766 any examination administered outside the state shall be the  
767 responsibility of the entity making the request and such entity shall pay  
768 to the commissioner two hundred dollars for such examination and the  
769 actual traveling expenses of the examination administrator to  
770 administer such examination; (15) with respect to motor vehicle  
771 physical damage appraisers: (A) An examination fee of eighty dollars  
772 for each examination taken, except when a testing service is used, the  
773 testing service shall pay a fee of eighty dollars to the commissioner for  
774 each examination taken by an applicant; (B) a fee of eighty dollars for  
775 each license issued or renewed; and (C) the expense of any examination  
776 administered outside the state shall be the responsibility of the entity  
777 making the request and such entity shall pay to the commissioner two  
778 hundred dollars for such examination and the actual traveling expenses  
779 of the examination administrator to administer such examination; (16)  
780 with respect to certified insurance consultants: (A) An examination fee  
781 of twenty-six dollars for each examination taken, except when a testing  
782 service is used, the testing service shall pay a fee of twenty-six dollars to  
783 the commissioner for each examination taken by an applicant; (B) a fee  
784 of two hundred fifty dollars for each license issued; and (C) a fee of two  
785 hundred fifty dollars for each license renewed; (17) with respect to  
786 surplus lines brokers: (A) An examination fee of twenty dollars for each  
787 examination taken, except when a testing service is used, the testing  
788 service shall pay a fee of twenty dollars to the commissioner for each  
789 examination taken by an applicant; and (B) a fee of six hundred twenty-  
790 five dollars for each license issued or renewed; (18) with respect to  
791 fraternal agents, a fee of eighty dollars for each license issued or  
792 renewed; (19) a fee of twenty-six dollars for each license certificate  
793 requested, whether or not a license has been issued; (20) with respect to  
794 domestic and foreign benefit societies shall pay: (A) For service of  
795 process, fifty dollars for each person or insurer to be served; (B) for filing  
796 a certified copy of its charter or articles of association, fifteen dollars; (C)  
797 for filing an annual statement or report, twenty dollars; and (D) for filing  
798 any additional paper required by law, fifteen dollars; (21) with respect  
799 to foreign benefit societies: (A) For each certificate of organization or  
800 compliance, fifteen dollars; (B) for each certified copy of permit, fifteen

801 dollars; and (C) for each copy of a report or certificate of condition of a  
802 society to be filed in any other state, fifteen dollars; (22) with respect to  
803 reinsurance intermediaries, a fee of six hundred twenty-five dollars for  
804 each license issued or renewed; (23) with respect to life settlement  
805 providers: (A) A filing fee of twenty-six dollars for each initial  
806 application for a license made pursuant to section 38a-465a; and (B) a  
807 fee of forty dollars for each license issued or renewed; (24) with respect  
808 to life settlement brokers: (A) A filing fee of twenty-six dollars for each  
809 initial application for a license made pursuant to section 38a-465a; and  
810 (B) a fee of forty dollars for each license issued or renewed; (25) with  
811 respect to preferred provider networks, a fee of two thousand seven  
812 hundred fifty dollars for each license issued or renewed; (26) with  
813 respect to rental companies, as defined in section 38a-799, a fee of eighty  
814 dollars for each permit issued or renewed; (27) with respect to medical  
815 discount plan organizations licensed under section 38a-479rr, a fee of six  
816 hundred twenty-five dollars for each license issued or renewed; (28)  
817 with respect to pharmacy benefits managers, an application fee of one  
818 hundred dollars for each registration issued or renewed; (29) with  
819 respect to captive insurance companies, as defined in section 38a-91aa,  
820 a fee of three hundred seventy-five dollars for each license issued or  
821 renewed; (30) with respect to each duplicate license issued a fee of fifty  
822 dollars for each license issued; (31) with respect to surety bail bond  
823 agents, as defined in section 38a-660, (A) a filing fee of one hundred fifty  
824 dollars for each initial application for a license, and (B) a fee of one  
825 hundred dollars for each license issued or renewed; (32) with respect to  
826 third-party administrators, as defined in section 38a-720, (A) a fee of five  
827 hundred dollars for each license issued, and (B) a fee of four hundred  
828 fifty dollars for each license renewed; (33) with respect to portable  
829 electronics insurance licenses under section 38a-397, (A) a filing fee of  
830 one hundred dollars for each initial application for a license, (B) a fee of  
831 five hundred dollars for each license issued, and (C) a fee of four  
832 hundred fifty dollars for each license renewed; and (34) with respect to  
833 limited lines travel insurance producer [licenses] authorizations under  
834 section [38a-398] 4 of this act, (A) a filing fee of one hundred dollars for  
835 each initial application for [a license] authorization, (B) a fee of six

836 hundred fifty dollars for each [license] authorization issued, and (C) a  
837 fee of six hundred fifty dollars for each [license] authorization renewed.

838 Sec. 13. Subsection (d) of section 38a-792 of the general statutes is  
839 repealed and the following is substituted in lieu thereof (*Effective October*  
840 *1, 2022*):

841 (d) The provisions of this section shall not apply to any:

842 (1) (A) Individual who, for purposes of claims for portable electronics  
843 insurance, as defined in section 38a-397, only (i) collects claim  
844 information from or furnishes claim information to insureds or  
845 claimants, and (ii) conducts data entry, including data entry into an  
846 automated claims adjudication system, provided (I) such individual is  
847 an employee of a casualty insurance company licensed in this state, an  
848 employee of a casualty claims adjuster licensed in this state or an  
849 employee of an affiliate of such insurance company or adjuster, and (II)  
850 not more than twenty-five such individuals are under the supervision  
851 of a casualty claims adjuster licensed in this state or an insurance  
852 producer who adjusts portable electronics insurance claims and is  
853 licensed in this state. A licensed insurance producer who adjusts  
854 portable electronics insurance claims or supervises individuals  
855 pursuant to this subparagraph shall not be required to be licensed as a  
856 casualty claims adjuster.

857 (B) For purposes of this subdivision, "automated claims adjudication  
858 system" means a preprogrammed computer system, designed for the  
859 collection, data entry, calculation and final resolution of portable  
860 electronics insurance claims, that (i) is used only by a supervised  
861 individual, a casualty claims adjuster licensed in this state or an  
862 insurance producer licensed in this state, in accordance with  
863 subparagraph (A) of this subdivision, and (ii) complies with all  
864 applicable claims payment requirements under this title; [or]

865 (2) Member of the bar of this state in good standing who is engaged  
866 in the general practice of the law; [.] or

867       (3) Travel administrator, as defined in section 38a-398, as amended  
868 by this act, or employee of a travel administrator for travel insurance, as  
869 defined in said section, administered by such travel administrator.

870       Sec. 14. Section 38a-816 of the 2022 supplement to the general statutes  
871 is repealed and the following is substituted in lieu thereof (*Effective*  
872 *October 1, 2022*): The following are defined as unfair methods of  
873 competition and unfair and deceptive acts or practices in the business of  
874 insurance:

875       (1) Misrepresentations and false advertising of insurance policies.  
876 Making, issuing or circulating, or causing to be made, issued or  
877 circulated, any estimate, illustration, circular or statement, sales  
878 presentation, omission or comparison which: (A) Misrepresents the  
879 benefits, advantages, conditions or terms of any insurance policy; (B)  
880 misrepresents the dividends or share of the surplus to be received, on  
881 any insurance policy; (C) makes any false or misleading statements as  
882 to the dividends or share of surplus previously paid on any insurance  
883 policy; (D) is misleading or is a misrepresentation as to the financial  
884 condition of any person, or as to the legal reserve system upon which  
885 any life insurer operates; (E) uses any name or title of any insurance  
886 policy or class of insurance policies misrepresenting the true nature  
887 thereof; (F) is a misrepresentation, including, but not limited to, an  
888 intentional misquote of a premium rate, for the purpose of inducing or  
889 tending to induce to the purchase, lapse, forfeiture, exchange,  
890 conversion or surrender of any insurance policy; (G) is a  
891 misrepresentation for the purpose of effecting a pledge or assignment of  
892 or effecting a loan against any insurance policy; or (H) misrepresents  
893 any insurance policy as being shares of stock.

894       (2) False information and advertising generally. Making, publishing,  
895 disseminating, circulating or placing before the public, or causing,  
896 directly or indirectly, to be made, published, disseminated, circulated or  
897 placed before the public, in a newspaper, magazine or other publication,  
898 or in the form of a notice, circular, pamphlet, letter or poster, or over any  
899 radio or television station, or in any other way, an advertisement,

900 announcement or statement containing any assertion, representation or  
901 statement with respect to the business of insurance or with respect to  
902 any person in the conduct of his insurance business, which is untrue,  
903 deceptive or misleading.

904 (3) Defamation. Making, publishing, disseminating or circulating,  
905 directly or indirectly, or aiding, abetting or encouraging the making,  
906 publishing, disseminating or circulating of, any oral or written  
907 statement or any pamphlet, circular, article or literature which is false  
908 or maliciously critical of or derogatory to the financial condition of an  
909 insurer, and which is calculated to injure any person engaged in the  
910 business of insurance.

911 (4) Boycott, coercion and intimidation. Entering into any agreement  
912 to commit, or by any concerted action committing, any act of boycott,  
913 coercion or intimidation resulting in or tending to result in unreasonable  
914 restraint of, or monopoly in, the business of insurance.

915 (5) False financial statements. Filing with any supervisory or other  
916 public official, or making, publishing, disseminating, circulating or  
917 delivering to any person, or placing before the public, or causing,  
918 directly or indirectly, to be made, published, disseminated, circulated or  
919 delivered to any person, or placed before the public, any false statement  
920 of financial condition of an insurer with intent to deceive; or making any  
921 false entry in any book, report or statement of any insurer with intent to  
922 deceive any agent or examiner lawfully appointed to examine into its  
923 condition or into any of its affairs, or any public official to whom such  
924 insurer is required by law to report, or who has authority by law to  
925 examine into its condition or into any of its affairs, or, with like intent,  
926 wilfully omitting to make a true entry of any material fact pertaining to  
927 the business of such insurer in any book, report or statement of such  
928 insurer.

929 (6) Unfair claim settlement practices. Committing or performing with  
930 such frequency as to indicate a general business practice any of the  
931 following: (A) Misrepresenting pertinent facts or insurance policy

932 provisions relating to coverages at issue; (B) failing to acknowledge and  
933 act with reasonable promptness upon communications with respect to  
934 claims arising under insurance policies; (C) failing to adopt and  
935 implement reasonable standards for the prompt investigation of claims  
936 arising under insurance policies; (D) refusing to pay claims without  
937 conducting a reasonable investigation based upon all available  
938 information; (E) failing to affirm or deny coverage of claims within a  
939 reasonable time after proof of loss statements have been completed; (F)  
940 not attempting in good faith to effectuate prompt, fair and equitable  
941 settlements of claims in which liability has become reasonably clear; (G)  
942 compelling insureds to institute litigation to recover amounts due under  
943 an insurance policy by offering substantially less than the amounts  
944 ultimately recovered in actions brought by such insureds; (H)  
945 attempting to settle a claim for less than the amount to which a  
946 reasonable man would have believed he was entitled by reference to  
947 written or printed advertising material accompanying or made part of  
948 an application; (I) attempting to settle claims on the basis of an  
949 application which was altered without notice to, or knowledge or  
950 consent of the insured; (J) making claims payments to insureds or  
951 beneficiaries not accompanied by statements setting forth the coverage  
952 under which the payments are being made; (K) making known to  
953 insureds or claimants a policy of appealing from arbitration awards in  
954 favor of insureds or claimants for the purpose of compelling them to  
955 accept settlements or compromises less than the amount awarded in  
956 arbitration; (L) delaying the investigation or payment of claims by  
957 requiring an insured, claimant, or the physician of either to submit a  
958 preliminary claim report and then requiring the subsequent submission  
959 of formal proof of loss forms, both of which submissions contain  
960 substantially the same information; (M) failing to promptly settle claims,  
961 where liability has become reasonably clear, under one portion of the  
962 insurance policy coverage in order to influence settlements under other  
963 portions of the insurance policy coverage; (N) failing to promptly  
964 provide a reasonable explanation of the basis in the insurance policy in  
965 relation to the facts or applicable law for denial of a claim or for the offer  
966 of a compromise settlement; (O) using as a basis for cash settlement with

967 a first party automobile insurance claimant an amount which is less than  
968 the amount which the insurer would pay if repairs were made unless  
969 such amount is agreed to by the insured or provided for by the  
970 insurance policy.

971 (7) Failure to maintain complaint handling procedures. Failure of any  
972 person to maintain complete record of all the complaints which it has  
973 received since the date of its last examination. This record shall indicate  
974 the total number of complaints, their classification by line of insurance,  
975 the nature of each complaint, the disposition of these complaints, and  
976 the time it took to process each complaint. For purposes of this  
977 subdivision "complaint" means any written communication primarily  
978 expressing a grievance.

979 (8) Misrepresentation in insurance applications. Making false or  
980 fraudulent statements or representations on or relative to an application  
981 for an insurance policy for the purpose of obtaining a fee, commission,  
982 money or other benefit from any insurer, producer or individual.

983 (9) Any violation of any one of sections 38a-358, 38a-446, 38a-447, 38a-  
984 488, 38a-825, 38a-826, 38a-828 and 38a-829. None of the following  
985 practices shall be considered discrimination within the meaning of  
986 section 38a-446 or 38a-488 or a rebate within the meaning of section 38a-  
987 825: (A) Paying bonuses to policyholders or otherwise abating their  
988 premiums in whole or in part out of surplus accumulated from  
989 nonparticipating insurance, provided any such bonuses or abatement of  
990 premiums shall be fair and equitable to policyholders and for the best  
991 interests of the company and its policyholders; (B) in the case of policies  
992 issued on the industrial debit plan, making allowance to policyholders  
993 who have continuously for a specified period made premium payments  
994 directly to an office of the insurer in an amount which fairly represents  
995 the saving in collection expense; (C) readjustment of the rate of premium  
996 for a group insurance policy based on loss or expense experience, or  
997 both, at the end of the first or any subsequent policy year, which may be  
998 made retroactive for such policy year.



999 (10) Notwithstanding any provision of any policy of insurance,  
1000 certificate or service contract, whenever such insurance policy or  
1001 certificate or service contract provides for reimbursement for any  
1002 services which may be legally performed by any practitioner of the  
1003 healing arts licensed to practice in this state, reimbursement under such  
1004 insurance policy, certificate or service contract shall not be denied  
1005 because of race, color or creed nor shall any insurer make or permit any  
1006 unfair discrimination against particular individuals or persons so  
1007 licensed.

1008 (11) Favored agent or insurer: Coercion of debtors. (A) No person  
1009 may (i) require, as a condition precedent to the lending of money or  
1010 extension of credit, or any renewal thereof, that the person to whom  
1011 such money or credit is extended or whose obligation the creditor is to  
1012 acquire or finance, negotiate any policy or contract of insurance through  
1013 a particular insurer or group of insurers or producer or group of  
1014 producers; (ii) unreasonably disapprove the insurance policy provided  
1015 by a borrower for the protection of the property securing the credit or  
1016 lien; (iii) require directly or indirectly that any borrower, mortgagor,  
1017 purchaser, insurer or producer pay a separate charge, in connection  
1018 with the handling of any insurance policy required as security for a loan  
1019 on real estate or pay a separate charge to substitute the insurance policy  
1020 of one insurer for that of another; or (iv) use or disclose information  
1021 resulting from a requirement that a borrower, mortgagor or purchaser  
1022 furnish insurance of any kind on real property being conveyed or used  
1023 as collateral security to a loan, when such information is to the  
1024 advantage of the mortgagee, vendor or lender, or is to the detriment of  
1025 the borrower, mortgagor, purchaser, insurer or the producer complying  
1026 with such a requirement.

1027 (B) (i) Subparagraph (A)(iii) of this subdivision shall not include the  
1028 interest which may be charged on premium loans or premium  
1029 advancements in accordance with the security instrument. (ii) For  
1030 purposes of subparagraph (A)(ii) of this subdivision, such disapproval  
1031 shall be deemed unreasonable if it is not based solely on reasonable  
1032 standards uniformly applied, relating to the extent of coverage required

1033 and the financial soundness and the services of an insurer. Such  
1034 standards shall not discriminate against any particular type of insurer,  
1035 nor shall such standards call for the disapproval of an insurance policy  
1036 because such policy contains coverage in addition to that required. (iii)  
1037 The commissioner may investigate the affairs of any person to whom  
1038 this subdivision applies to determine whether such person has violated  
1039 this subdivision. If a violation of this subdivision is found, the person in  
1040 violation shall be subject to the same procedures and penalties as are  
1041 applicable to other provisions of section 38a-815, subsections (b) and (e)  
1042 of section 38a-817 and this section. (iv) For purposes of this section,  
1043 "person" includes any individual, corporation, limited liability  
1044 company, association, partnership or other legal entity.

1045 (12) Refusing to insure, refusing to continue to insure or limiting the  
1046 amount, extent or kind of coverage available to an individual or  
1047 charging an individual a different rate for the same coverage because of  
1048 physical disability, mental or nervous condition as set forth in section  
1049 38a-488a or intellectual disability, except where the refusal, limitation or  
1050 rate differential is based on sound actuarial principles or is related to  
1051 actual or reasonably anticipated experience.

1052 (13) Refusing to insure, refusing to continue to insure or limiting the  
1053 amount, extent or kind of coverage available to an individual or  
1054 charging an individual a different rate for the same coverage solely  
1055 because of blindness or partial blindness. For purposes of this  
1056 subdivision, "refusal to insure" includes the denial by an insurer of  
1057 disability insurance coverage on the grounds that the policy defines  
1058 "disability" as being presumed in the event that the insured is blind or  
1059 partially blind, except that an insurer may exclude from coverage any  
1060 disability, consisting solely of blindness or partial blindness, when such  
1061 condition existed at the time the policy was issued. Any individual who  
1062 is blind or partially blind shall be subject to the same standards of sound  
1063 actuarial principles or actual or reasonably anticipated experience as are  
1064 sighted persons with respect to all other conditions, including the  
1065 underlying cause of the blindness or partial blindness.

1066 (14) Refusing to insure, refusing to continue to insure or limiting the  
1067 amount, extent or kind of coverage available to an individual or  
1068 charging an individual a different rate for the same coverage because of  
1069 exposure to diethylstilbestrol through the female parent.

1070 (15) (A) Failure by an insurer, or any other entity responsible for  
1071 providing payment to a health care provider pursuant to an insurance  
1072 policy, to pay accident and health claims, including, but not limited to,  
1073 claims for payment or reimbursement to health care providers, within  
1074 the time periods set forth in subparagraph (B) of this subdivision, unless  
1075 the Insurance Commissioner determines that a legitimate dispute exists  
1076 as to coverage, liability or damages or that the claimant has fraudulently  
1077 caused or contributed to the loss. Any insurer, or any other entity  
1078 responsible for providing payment to a health care provider pursuant  
1079 to an insurance policy, who fails to pay such a claim or request within  
1080 the time periods set forth in subparagraph (B) of this subdivision shall  
1081 pay the claimant or health care provider the amount of such claim plus  
1082 interest at the rate of fifteen per cent per annum, in addition to any other  
1083 penalties which may be imposed pursuant to sections 38a-11, as  
1084 amended by this act, 38a-25, 38a-41 to 38a-53, inclusive, 38a-57 to 38a-  
1085 60, inclusive, 38a-62 to 38a-64, inclusive, 38a-76, 38a-83, 38a-84, 38a-117  
1086 to 38a-124, inclusive, 38a-129 to 38a-140, inclusive, 38a-146 to 38a-155,  
1087 inclusive, 38a-283, 38a-288 to 38a-290, inclusive, 38a-319, 38a-320, 38a-  
1088 459, 38a-464, 38a-815 to 38a-819, inclusive, 38a-824 to 38a-826, inclusive,  
1089 and 38a-828 to 38a-830, inclusive. Whenever the interest due a claimant  
1090 or health care provider pursuant to this section is less than one dollar,  
1091 the insurer shall deposit such amount in a separate interest-bearing  
1092 account in which all such amounts shall be deposited. At the end of each  
1093 calendar year each such insurer shall donate such amount to The  
1094 University of Connecticut Health Center.

1095 (B) Each insurer or other entity responsible for providing payment to  
1096 a health care provider pursuant to an insurance policy subject to this  
1097 section, shall pay claims not later than:

1098 (i) For claims filed in paper format, sixty days after receipt by the

1099 insurer of the claimant's proof of loss form or the health care provider's  
1100 request for payment filed in accordance with the insurer's practices or  
1101 procedures, except that when there is a deficiency in the information  
1102 needed for processing a claim, as determined in accordance with section  
1103 38a-477, the insurer shall (I) send written notice to the claimant or health  
1104 care provider, as the case may be, of all alleged deficiencies in  
1105 information needed for processing a claim not later than thirty days  
1106 after the insurer receives a claim for payment or reimbursement under  
1107 the contract, and (II) pay claims for payment or reimbursement under  
1108 the contract not later than thirty days after the insurer receives the  
1109 information requested; and

1110 (ii) For claims filed in electronic format, twenty days after receipt by  
1111 the insurer of the claimant's proof of loss form or the health care  
1112 provider's request for payment filed in accordance with the insurer's  
1113 practices or procedures, except that when there is a deficiency in the  
1114 information needed for processing a claim, as determined in accordance  
1115 with section 38a-477, the insurer shall (I) notify the claimant or health  
1116 care provider, as the case may be, of all alleged deficiencies in  
1117 information needed for processing a claim not later than ten days after  
1118 the insurer receives a claim for payment or reimbursement under the  
1119 contract, and (II) pay claims for payment or reimbursement under the  
1120 contract not later than ten days after the insurer receives the information  
1121 requested.

1122 (C) As used in this subdivision, "health care provider" means a person  
1123 licensed to provide health care services under chapter 368d, chapter  
1124 368v, chapters 370 to 373, inclusive, 375 to 383c, inclusive, 384a to 384c,  
1125 inclusive, or chapter 400j.

1126 (16) Failure to pay, as part of any claim for a damaged motor vehicle  
1127 under any automobile insurance policy where the vehicle has been  
1128 declared to be a constructive total loss, an amount equal to the sum of  
1129 (A) the settlement amount on such vehicle plus, whenever the insurer  
1130 takes title to such vehicle, (B) an amount determined by multiplying  
1131 such settlement amount by a percentage equivalent to the current sales

1132 tax rate established in section 12-408. For purposes of this subdivision,  
1133 "constructive total loss" means the cost to repair or salvage damaged  
1134 property, or the cost to both repair and salvage such property, equals or  
1135 exceeds the total value of the property at the time of the loss.

1136 (17) Any violation of section 42-260, by an extended warranty  
1137 provider subject to the provisions of said section, including, but not  
1138 limited to: (A) Failure to include all statements required in subsections  
1139 (c) and (f) of section 42-260 in an issued extended warranty; (B) offering  
1140 an extended warranty without being (i) insured under an adequate  
1141 extended warranty reimbursement insurance policy or (ii) able to  
1142 demonstrate that reserves for claims contained in the provider's  
1143 financial statements are not in excess of one-half the provider's audited  
1144 net worth; (C) failure to submit a copy of an issued extended warranty  
1145 form or a copy of such provider's extended warranty reimbursement  
1146 policy form to the Insurance Commissioner.

1147 (18) With respect to an insurance company, hospital service  
1148 corporation, health care center or fraternal benefit society providing  
1149 individual or group health insurance coverage of the types specified in  
1150 subdivisions (1), (2), (4), (5), (6), (10), (11) and (12) of section 38a-469,  
1151 refusing to insure, refusing to continue to insure or limiting the amount,  
1152 extent or kind of coverage available to an individual or charging an  
1153 individual a different rate for the same coverage because such  
1154 individual has been a victim of domestic violence, as defined in section  
1155 17b-112a.

1156 (19) With respect to a property and casualty insurer delivering,  
1157 issuing for delivery, renewing, amending, continuing or endorsing a  
1158 property or casualty insurance policy, making any distinction or  
1159 discrimination against an individual in delivering, issuing for delivery,  
1160 renewing, amending, continuing, endorsing, offering, withholding,  
1161 cancelling or setting premiums for such policy, or in the terms of such  
1162 policy, because the individual has been a victim of domestic violence, as  
1163 defined in section 17b-112a.

1164 (20) With respect to an insurance company, hospital service  
1165 corporation, health care center or fraternal benefit society providing  
1166 individual or group health insurance coverage of the types specified in  
1167 subdivisions (1), (2), (3), (4), (6), (9), (10), (11) and (12) of section 38a-469,  
1168 refusing to insure, refusing to continue to insure or limiting the amount,  
1169 extent or kind of coverage available to an individual or charging an  
1170 individual a different rate for the same coverage because of genetic  
1171 information. Genetic information indicating a predisposition to a  
1172 disease or condition shall not be deemed a preexisting condition in the  
1173 absence of a diagnosis of such disease or condition that is based on other  
1174 medical information. An insurance company, hospital service  
1175 corporation, health care center or fraternal benefit society providing  
1176 individual health coverage of the types specified in subdivisions (1), (2),  
1177 (3), (4), (6), (9), (10), (11) and (12) of section 38a-469, shall not be  
1178 prohibited from refusing to insure or applying a preexisting condition  
1179 limitation, to the extent permitted by law, to an individual who has been  
1180 diagnosed with a disease or condition based on medical information  
1181 other than genetic information and has exhibited symptoms of such  
1182 disease or condition. For the purposes of this subdivision, "genetic  
1183 information" means the information about genes, gene products or  
1184 inherited characteristics that may derive from an individual or family  
1185 member.

1186 (21) Any violation of sections 38a-465 to 38a-465q, inclusive.

1187 (22) With respect to a managed care organization, as defined in  
1188 section 38a-478, failing to establish a confidentiality procedure for  
1189 medical record information, as required by section 38a-999.

1190 (23) Any violation of sections 38a-591d to 38a-591f, inclusive.

1191 (24) Any violation of section 38a-472j.

1192 (25) Any violation of section 38a-833.

1193 (26) Any violation of section 38a-834.

1194        (27) Any violation described in subsection (a) of section 10 of this act,  
1195        except as provided in subsection (c) of section 10 of this act.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2022</i>	38a-1
Sec. 2	<i>October 1, 2022</i>	38a-398
Sec. 3	<i>October 1, 2022</i>	New section
Sec. 4	<i>October 1, 2022</i>	New section
Sec. 5	<i>October 1, 2022</i>	New section
Sec. 6	<i>October 1, 2022</i>	New section
Sec. 7	<i>October 1, 2022</i>	New section
Sec. 8	<i>October 1, 2022</i>	New section
Sec. 9	<i>October 1, 2022</i>	New section
Sec. 10	<i>October 1, 2022</i>	New section
Sec. 11	<i>October 1, 2022</i>	New section
Sec. 12	<i>October 1, 2022</i>	38a-11(a)
Sec. 13	<i>October 1, 2022</i>	38a-792(d)
Sec. 14	<i>October 1, 2022</i>	38a-816

**Statement of Purpose:**

To provide for the regulation and taxation of travel insurance, and associated entities, products and professionals, in this state.

*[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]*