SENATE BILL NO. 319-SENATOR SHAFFER

MARCH 17, 2003

Referred to Committee on Commerce and Labor

SUMMARY—Makes various changes to provisions regulating insurance. (BDR 57-599)

FISCAL NOTE: Effect on Local Government: No. Effect on the State: Yes.

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EXPLANATION - Matter in bolded italics is new; matter between brackets [omitted material] is material to be omitted.

AN ACT relating to insurance; changing the location where the Commissioner of Insurance may conduct a hearing; providing an exception to the counter-signature requirement for certain types of insurance; revising the membership of certain boards; providing that any refund of an assessment by the Division of Industrial Relations of the Department of Business and Industry must include payment for interest earned; requiring the Commissioner of Insurance to conduct a study relating to the Investments of Insurers Model Act adopted by the National Association of Insurance Commissioners; and providing other matters properly relating thereto.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 679B.330 is hereby amended to read as follows:

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679B.330 1. The Commissioner may hold a hearing in [Carson City,] *Reno*, Nevada, or any other place of convenience to parties and witnesses, as the Commissioner determines. The Commissioner, his deputy or assistant, or a person appointed by the Commissioner, shall preside at the hearing, and shall expedite the hearing and all procedures involved therein.

2. The Commissioner may appoint a person who is not associated with the Division to conduct a hearing if the hearing



requires a disinterested or impartial hearing officer. A person so appointed shall comply with the provisions which govern hearings conducted by the Commissioner. An order issued by such a person has the same effect as an order issued by the Commissioner.

- 3. Testimony may be taken orally or by deposition, and any party has the same right to introduce evidence by interrogatories or deposition as he would have in a district court.
- 4. Upon good cause shown the Commissioner shall permit to become a party to the hearing by intervention, if timely, only such persons, not original parties thereto, whose pecuniary interests are to be directly and immediately affected by the Commissioner's order made upon the hearing.
- 5. The Commissioner shall cause a record of the proceedings to be made. If transcribed, a copy of the record must be part of the Commissioner's record of the hearing and a copy must be furnished to any other party to the hearing, at the request and expense of the other party. If no such record is transcribed, the Commissioner shall prepare a summary record of the proceedings and evidence.
- **Sec. 2.** NRS 680A.310 is hereby amended to read as follows: 680A.310 NRS 680A.300 does not apply to any of the following:
 - 1. Life insurance and annuities.
 - 2. Health insurance.

- 3. Policies covering property in transit while in the possession or custody of any common carrier, or the rolling stock or other property of any common carrier employed by it in the operation and maintenance of its plant and business as a common carrier of freight or passengers, or both.
- 4. Reinsurance or retrocessions made by or for authorized insurers.
- 5. Bid bonds issued in connection with any public or private contract.
- 6. A policy issued to a risk retention group, as defined in NRS 695E.110, or to a member of a risk retention group.
 - 7. A policy issued to a person who is not resident of this state.
- **Sec. 3.** NRS 686C.140 is hereby amended to read as follows: 686C.140 1. The Board of Directors of the Association consists of not less than five nor more than nine members, serving
- terms as established in the plan of operation.

 2. The members of the Board who represent insurers must be selected by member insurers subject to the approval of the Commissioner. One of the members of the Board must be the
- 42 Commissioner. *One of the mem officer of a domestic insurer.*
- **3.** Two public representatives must be appointed to the Board by the Commissioner. A public representative may not be an officer,



director or employee of an insurer or engaged in the business of insurance.

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- 4. Vacancies on the Board must be filled for the remaining period of the term by majority vote of the members of the Board, subject to the approval of the Commissioner, for members who represent insurers, and by the Commissioner for public representatives.
- 5. To select the initial Board of Directors, and initially organize the Association, the Commissioner shall give notice to all member insurers of the time and place of the organizational meeting. In determining voting rights at the organizational meeting, each member insurer is entitled to one vote in person or by proxy. If the Board of Directors is not selected within 60 days after notice of the organizational meeting, the Commissioner may appoint the initial members to represent insurers in addition to the public representatives.
- [2.] 6. In approving selections or in appointing members to the Board, the Commissioner shall consider, among other things, whether all member insurers are fairly represented.
- [3.] 7. Members of the Board may be reimbursed from the assets of the Association for expenses incurred by them as members of the Board of Directors but members of the Board may not otherwise be compensated by the Association for their services.
 - **Sec. 4.** NRS 687A.050 is hereby amended to read as follows:
- 687A.050 1. The Board of Directors of the Association shall consist of not fewer than five nor more than nine persons. The members of the Board shall be appointed by the Commissioner and shall serve at his discretion. Vacancies on the Board shall be filled in the same manner as initial appointments.
- 2. A majority of the members appointed shall be the designated representatives of member insurers. One of the members appointed as a designated representative of the member insurers must be the officer of a domestic insurer. The Commissioner shall consider among other things whether all member insurers are fairly represented.
- 3. Members of the Board may be reimbursed from the assets of the Association for expenses incurred by them as members of the Board of Directors.
- Sec. 5. Chapter 687B of NRS is hereby amended by adding thereto a new section to read as follows:
- Unless otherwise provided by a specific statue, if a signature is 42 required of any person, the person may provide as the signature of 43 the person:
 - 1. An original signature;
 - 2. A facsimile signature; or



3. An electronic signature pursuant to the provisions of chapter 719 of NRS.

Sec. 6. NRS 687B.160 is hereby amended to read as follows: 687B.160 1. Every insurance policy must be executed in the name of and on behalf of the insurer by its officer, attorney in fact, employee or representative duly authorized by the insurer.

- 2. [A facsimile signature of any] Any such executing individual may [be used] use, in lieu of an original signature [.]:
 - (a) A facsimile signature; or

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- (b) An electronic signature pursuant to the provisions of chapter 719 of NRS.
- 3. An insurance contract issued before, on or after January 1, 1972, which is otherwise valid is not rendered invalid by reason of the apparent execution thereof on behalf of the insurer by the imprinted facsimile signature of an individual not authorized so to execute as of the date of the policy.

Sec. 7. NRS 232.680 is hereby amended to read as follows:

- 232.680 1. The cost of carrying out the provisions of NRS 232.550 to 232.700, inclusive, and of supporting the Division, a full-time employee of the Legislative Counsel Bureau and the Fraud Control Unit for Industrial Insurance established pursuant to NRS 228.420, and that portion of the cost of the Office for Consumer Health Assistance established pursuant to NRS 223.550 that is related to providing assistance to consumers and injured employees concerning workers' compensation, must be paid from assessments payable by each insurer, including each employer who provides accident benefits for injured employees pursuant to NRS 616C.265.
- 2. The Administrator shall assess each insurer, including each employer who provides accident benefits for injured employees pursuant to NRS 616C.265. To establish the amount of the assessment, the Administrator shall determine the amount of money necessary for each of the expenses set forth in subsections 1 and 4 of this section and subsection 3 of NRS 616A.425 and determine the amount that is payable by the private carriers, the self-insured employers, the associations of self-insured public or private employers and the employers who provide accident benefits pursuant to NRS 616C.265 for each of the programs. For the expenses from which more than one group of insurers receives benefit, the Administrator shall allocate a portion of the amount necessary for that expense to be payable by each of the relevant group of insurers, based upon the expected annual expenditures for claims of each group of insurers. After allocating the amounts payable among each group of insurers for all the expenses from which each group receives benefit, the Administrator shall apply an assessment rate to the:



(a) Private carriers that reflects the relative hazard of the employments covered by the private carriers, results in an equitable distribution of costs among the private carriers and is based upon expected annual premiums to be received;

- (b) Self-insured employers that results in an equitable distribution of costs among the self-insured employers and is based upon expected annual expenditures for claims;
- (c) Associations of self-insured public or private employers that results in an equitable distribution of costs among the associations of self-insured public or private employers and is based upon expected annual expenditures for claims; and
- (d) Employers who provide accident benefits pursuant to NRS 616C.265 that reflect the relative hazard of the employments covered by those employers, results in an equitable distribution of costs among the employers and is based upon expected annual expenditures for claims.

The Administrator shall adopt regulations that establish the formula for the assessment and for the administration of payment, and any penalties that the Administrator determines are necessary to carry out the provisions of this subsection. The formula may use actual expenditures for claims. As used in this subsection, the term "group of insurers" includes the group of employers who provide accident benefits for injured employees pursuant to NRS 616C.265.

- 3. Federal grants may partially defray the costs of the Division.
- 4. Assessments made against insurers by the Division after the adoption of regulations must be used to defray all costs and expenses of administering the program of workers' compensation, including the payment of:
- (a) All salaries and other expenses in administering the Division, including the costs of the office and staff of the Administrator.
- (b) All salaries and other expenses of administering NRS 616A.435 to 616A.460, inclusive, the offices of the Hearings Division of the Department of Administration and the programs of self-insurance and review of premium rates by the Commissioner of Insurance.
- (c) The salary and other expenses of a full-time employee of the Legislative Counsel Bureau whose principal duties are limited to conducting research and reviewing and evaluating data related to industrial insurance.
- (d) All salaries and other expenses of the Fraud Control Unit for Industrial Insurance established pursuant to NRS 228.420.
- (e) Claims against uninsured employers arising from compliance with NRS 616C.220 and 617.401.
- 44 (f) That portion of the salaries and other expenses of the Office 45 for Consumer Health Assistance established pursuant to NRS



223.550 that is related to providing assistance to consumers and injured employees concerning workers' compensation.

- 5. If the Division refunds any part of an assessment, the Division shall include in that refund any interest earned by the Division from the refunded part of the assessment.
 - **Sec. 8.** NRS 616A.425 is hereby amended to read as follows:
- 616A.425 1. There is hereby established in the State Treasury the Fund for Workers' Compensation and Safety as an enterprise fund. All money received from assessments levied on insurers and employers by the Administrator pursuant to NRS 232.680 must be deposited in this Fund.
- 2. All assessments, penalties, bonds, securities and all other properties received, collected or acquired by the Division for functions supported in whole or in part from the Fund must be delivered to the custody of the State Treasurer for deposit to the credit of the Fund.
- 3. All money and securities in the Fund must be used to defray all costs and expenses of administering the program of workmen's compensation, including the payment of:
- (a) All salaries and other expenses in administering the Division of Industrial Relations, including the costs of the office and staff of the Administrator.
- (b) All salaries and other expenses of administering NRS 616A.435 to 616A.460, inclusive, the offices of the Hearings Division of the Department of Administration and the programs of self-insurance and review of premium rates by the Commissioner.
- (c) The salary and other expenses of a full-time employee of the Legislative Counsel Bureau whose principal duties are limited to conducting research and reviewing and evaluating data related to industrial insurance.
- (d) All salaries and other expenses of the Fraud Control Unit for Industrial Insurance established pursuant to NRS 228.420.
- (e) Claims against uninsured employers arising from compliance with NRS 616C.220 and 617.401.
- (f) That portion of the salaries and other expenses of the Office for Consumer Health Assistance established pursuant to NRS 223.550 that is related to providing assistance to consumers and injured employees concerning workers' compensation.
- 4. The State Treasurer may disburse money from the Fund only upon written order of the Controller.
- 5. The State Treasurer shall invest money of the Fund in the same manner and in the same securities in which he is authorized to invest state general funds which are in his custody. Income realized from the investment of the assets of the Fund must be credited to the Fund.



6. The Commissioner shall assign an actuary to review the establishment of assessment rates. The rates must be filed with the Commissioner 30 days before their effective date. Any insurer or employer who wishes to appeal the rate so filed must do so pursuant to NRS 679B.310.

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- 7. If the Division refunds any part of an assessment, the Division shall include in that refund any interest earned by the Division from the refunded part of the assessment.
- Sec. 9. 1. The Commissioner of Insurance shall conduct a study to review whether the State of Nevada should enact, in the interest of the public:
- (a) The Defined Limits Version of the Investments of Insurers Model Act adopted by the National Association of Insurance Commissioners:
- (b) The Defined Standards Version of the Investments of Insurers Model Act adopted by the National Association of Insurance Commissioners; or
 - (c) Other legislation regulating the investments of insurers.
- The Commissioner shall seek to obtain all relevant information from public and private sources as part of this study. Any such information obtained by the Commissioner may only be used for the purposes of conducting this study.
- 3. The Commissioner shall complete this study and submit a 24 copy of his findings and recommendations on or before January 1, 2005, to the Director of the Legislative Counsel Bureau for distribution to the 73rd Session of the Nevada Legislature.

