

	· ·
1	L.D. 1652
3	(Filing No. S-302)
5	
7	STATE OF MAINE SENATE
9	114TH LEGISLATURE FIRST REGULAR SESSION
11	FIKST REGULAR SESSION
13	COMMITTEE AMENDMENT " ^A " to S.P. 590, L.D. 1652, Bill, "An Act To Protect Maine Businesses against Workers' Compensation
15	Insurer Rate Gouging"
17	Amend the bill by striking out everything after the enacting clause and before the statement of fact and inserting in its
19	place the following:
21	'Sec. 1. 24-A MRSA §2319, as amended by PL 1973, c. 585, §12, is further amended to read:
23	§2319. Appeal by insurers and others as to filings
25	
27	1. Application for hearing. Any person or organization in interest aggrieved with respect to any filing <u>, rate, expense or</u> <u>premium level</u> which is in effect may make written application to
29	the superintendent for a hearing thereon, except that the insurer or rating organization that made the filing shall not be
31	authorized to proceed under this section. Such Any application shall specify the grounds to be relied upon by the applicant in
33	asserting that the filing, rate, expense or premium level is unjust or unreasonable. The Public Advocate, as appointed under
35	Title 35-A, section 1701, may file a written application under this section only with respect to workers' compensation filings,
37	rates, expenses or premium levels, provided that:
39	A. Application is made only on behalf of the general body of workers' compensation policyholders, not on behalf of
41	individual policyholders; and
43	<u>B. No filing is made by the Public Advocate earlier than</u> 180 days from the expiration of the period for appealing a
45	rate filing under section 236.
47	2. Hearing. If the superintendent finds that the application is made in good faith, that the applicant would be so
49	aggrieved if his the applicant's grounds are were established, and that such grounds otherwise justify holding such a hearing,

...

.

etc. Ribits

ŧ

٠

COMMITTEE AMENDMENT "A" to S.P. 590, L.D. 1652

he the superintendent shall, within-30-days-after-receipt-of-such application,-hold a-hearing-upon-not-less-than-10-days'-written notice--to--the--applicant--and--to--every--insurer--and--rating organization-which-made--such-filing by written order, require that the insurer or rating organization prepare within 30 days a responsive filing containing information necessary, in the judgment of the superintendent, to review the application. This responsive filing may include all information required pursuant to section 2363, subsections 4 and 5 and such additional information as the superintendent may require pursuant to section 2363, subsection 6.

A. A copy of the superintendent's written order requiring a responsive filing and specifying its contents or determining
that no further action on the application is warranted shall be provided to the Public Advocate when the application
concerns workers' compensation policies or rates and to the person or organization making the application for relief
under subsection 1.

21 B. A copy of the responsive filing shall be served on the Public Advocate when the application concerns workers' Ż3 compensation policies or rates and on the applicant. Upon receipt of an order from the superintendent requiring a responsive filing concerning workers' compensation which 25 resulted from an application by the Public Advocate, the 27 insurer or rating organization shall pay to the superintendent a filing fee of \$50,000 which the 29 superintendent shall immediately credit to the Public Advocate. The fee shall be segregated and expended for employing outside consultants and paying other expenses to 31 fulfill the requirements of this section. Any portion of 33 the fee not expended shall be returned to the filer.

C. The public hearing shall be conducted no fewer than 30 days and no more than 60 days from the date the responsive filing is determined complete by the superintendent, unless the superintendent extends these limits pursuant to section 2363, subsection 6 in workers' compensation cases.

If, after such <u>a</u> hearing, the superintendent 41 3. Orders. finds that the filing, rate, expense or premium level does not meet the requirements of this chapter, he the superintendent 43 shall issue an a final order specifying in what respects he the 45 superintendent finds that such the filing fails to meet the requirements of this chapter, or is unjust and unreasonable, and stating when, within a reasonable period thereafter, such the 47 filing, rate, expense or premium level shall be changed, replaced or deemed determined no longer effective. Copies of the order 49 shall be sent to the applicant and to every such insurer and rating organization. The order shall not affect any contract or 51

1

3

5

7

9

11

١

	COMMITTEE AMENDMENT "A " to S.P. 590, L.D. 1652
1	policy made or issued prior to the expiration of the period set forth in the order.
3	Sec. 2. 24-A MRSA §2363, sub-§7-A is enacted to read:
5	7-A. Fee for servicing residual market. In every rate
7	filing in which a rating bureau requests a rate adjustment, the superintendent shall take evidence on the issue of whether the
9	fee for servicing the residual market is reasonable. Concurrent with the decision on the rate adjustment, the superintendent
11	shall issue a decision on whether the fee is reasonable, taking into account the rate adjustment approved. If the superintendent
13	determines that the fee is not reasonable, the superintendent shall order an adjustment to the fee, as necessary, to ensure
15	that the fee is reasonable.
17	FISCAL NOTE
19	The Bureau of Insurance and the Office of the Public Advocate will be able to implement this legislation within
21	existing budgeted resources.'
23	
25	STATEMENT OF FACT
27	This amendment rewords the section of the bill requiring the Superintendent of Insurance to evaluate the reasonableness of
29	the service carrier fee each time a rate adjustment is requested and the section of the bill authorizing the Public Advocate to
31	file an application for a hearing on existing workers' compensation rates. This amendment also deletes the section of
33	the bill limiting the service carrier fee to 20% of premiums.

Reported by Senator Theriault for the Committee on Banking and Insurance. Reproduced and Distributed Pursuant to Senate Rule 12. (6/15/89) (Filing No. S-302) · · ·