TITLE 365. INSURANCE DEPARTMENT

CHAPTER 25. LICENSURE OF PRODUCERS, ADJUSTERS, BAIL BONDSMEN, COMPANIES, PREPAID FUNERAL BENEFITS, CEMETERY MERCHANDISE TRUSTS, AND VIATICAL SETTLEMENT PROVIDERS AND BROKERS

SUBCHAPTER 3. PRODUCERS, BROKERS, LIMITED LINES PRODUCERS AND VEHICLE PROTECTION PRODUCT WARRANTORS

365:25-3-14. Insurance adjusters continuing education

- (a) **Purpose.** The purpose of this section is to set forth the requirements for continuing education which an insurance adjuster must meet, and to set forth the requirements for approval by the Insurance Commissioner of a proposed continuing education course.
- (b) **Definitions.** The following words or terms, when used in this section, shall have the following meaning, unless the context clearly indicates otherwise:
 - (1) "CE" means continuing education.
 - (2) "Certificate of course completion" means a document acceptable to the Commissioner which signifies satisfactory completion of the course and reflects hours of credit earned.
 - (3) "Continuing Education Advisory Committee" means the committee established by the Commissioner for the purpose of reviewing and recommending approval or disapproval of continuing education courses.
 - (4) "Credit hour" means at least fifty (50) minutes of classroom instruction, unless a correspondence or self-study course.
 - (5) "Instructor" means a person who presents course materials approved for continuing education credit hours, and who has experience, training, and/or education in the course subject matter and has been approved by the Commissioner.
 - (6) "Instructor Qualification Form" means a form acceptable to the Commissioner and completed by the instructor which documents qualifications of the instructor.
 - (7) "Licensee" means a natural person who is licensed by the Commissioner as an insurance adjuster.
 - (8) **"Provider"** means a person, corporation, professional association or its local affiliates, an insurance company or any other entity which is approved by the Commissioner and provides approved continuing education to insurance adjusters.
 - (9) "Provider Course Completion Form" means a form acceptable to the Commissioner and completed by the provider which documents completion of an approved course by an adjuster or adjusters.
- (c) **Exceptions.** Continuing education requirements shall not apply to non-resident adjusters licensed in a designated home state that has a continuing education requirement for adjusters.
- (d) Continuing education requirements.
 - (1) **CE during twenty-four month period.** All licensees shall complete the required hours of continuing education as set forth in Section 6217(B) of Title 36 of the laws of this state during each twenty-four month period. The twenty-four month period begins the first day after the license is granted.
 - (2) **Certificates of course completion required for license renewal.** If requested by the Insurance Department, each adjuster shall submit upon each licensing renewal a

- certificate(s) of course completion as approved by the Insurance Department, which verifies courses completed during the previous twenty-four month period.
- (3) **Credits carried over.** Six (6) credit hours in excess of the minimum twenty-four month period requirement shall carry forward to the next twenty-four month period as general hours. Excess hours may be applied to bring a lapsed license into compliance.
- (4) **Legislative Updates.** At least two (2) of the continuing education credit hours of instruction completed by licensees each twenty-four month period shall be taken in the following topics:
 - (A) State legislative updates, or
 - (B) Federal legislative updates.
- (5) **Credits for instructors.** An instructor who is a licensee shall receive the same continuing education credit for presenting approved course materials as a licensee who attends an approved classroom instructional session by including his/her name and license number on roster.
- (6) **Prerequisite for renewal or reinstatement.** As a prerequisite for license renewal or prior to reinstatement following a lapse of license, an adjuster must demonstrate that the educational requirements have been reported for the previous renewal cycle.
- (e) Approval of continuing education providers.
 - (1) **Information required.** Each provider shall apply for approval by the Commissioner. Each provider, with the exception of public funded educational institutions, federal agencies, nonprofit organizations, not-for-profit organizations, and Oklahoma state agencies shall submit a provider fee of Two Hundred Dollars (\$200.00), and all providers, including public funded educational institutions, federal agencies, nonprofit organizations, not-for-profit organizations and Oklahoma agencies shall provide:
 - (A) Name, address, and email address of the provider.
 - (B) Contact person and his or her address and telephone number(s).
 - (2) **Withheld or withdrawn approval.** The Commissioner may withhold or withdraw approval of any provider for violation of or non-compliance with any provision of this section.
 - (3) **Renewal fee.** An annual renewal fee of Two Hundred Dollars (\$200.00) shall be payable on or before the approval anniversary date of each year by each provider to renew the approval of the provider. A fee of double the annual renewal fee shall be paid if the application for renewal is late or incomplete on the approval anniversary date.
 - (4) **Reinstatement period.** Providers whose approval has expired may be reinstated pursuant to paragraph 1 of this subsection. The reinstatement period shall be for a period of one (1) year following the expiration of the renewal date. The approval of the provider and any currently active courses shall remain active for the reinstatement period. If the provider and all courses fail to remain active following the reinstatement period, the provider and courses shall not be reinstated and the provider and courses shall be required to be approved pursuant to the provisions of this subsection.
- (f) Courses; approval; records.
 - (1) **Timeline for approval.** At least thirty (30) days prior to the use of any course and not less than ten (10) days prior to the Continuing Education Advisory Committee meeting immediately preceding the course date, the provider shall apply for and submit

the appropriate course review fee to the Commissioner for course approval. The Commissioner shall grant or deny approval based upon information submitted in this section regarding each course or additional information regarding the course, if necessary. The Commissioner will assign the number of CE hours awarded for an approved course and the line or lines of insurance for which the course qualifies. The provider shall submit the following at the time of application:

- (A) The number of CE hours requested for each course.
- (B) Topic outlines which list the summarized topics covered in each course and a copy of any course materials.
- (C) If a prior approved course has materially changed, a summarization of those changes.
- (2) **Instructor approval.** Instructors shall be approved by the Commissioner at least fourteen (14) calendar days prior to a presentation of a course. The Commissioner may disapprove any course if instructor approval has not been granted. An instructor shall have one of the following qualifications:
 - (A) Three (3) years of recent experience in the subject area being taught; or
 - (B) A degree related to the subject area being taught; or
 - (C) Two (2) years of recent experience in the subject area being taught and twelve
 - (12) hours of college and/or vocational technical school credit hours in the subject area being taught.
- (3) **Repeated approved course.** At least fourteen (14) days prior to the repetition of an approved course, the Commissioner shall be notified in writing of the repetition, providing course number, name, date, location and instructor's name.
- (4) **Written approval required.** All courses shall require written approval by the Commissioner.
- (5) **Withheld or withdrawn approval.** The Commissioner may withhold or withdraw approval for any course. This withdrawal will not affect any CE hours attained under the course previous to the withdrawal.
- (6) **Minimum of one credit hour.** Courses submitted for approval must consist of a minimum of one credit hour of course instruction.
- (7) **Continuing education course must be separate from meetings.** Courses conducted in conjunction with other meetings must have a separate continuing education course component.
- (8) **Content of courses.** Courses must be of a meaningful nature and shall not include insurance company specific courses in areas such as prospecting, motivation, sales techniques, psychology, recruiting, time management, phone etiquette, basic prelicensing principles of adjusting, and subjects not relating to the adjuster's license.
- (9) **Certificate of Course Completion.** At the completion of each course, the provider shall provide the insurance adjuster a "Certificate of Course Completion" Form.
- (10) **List of adjusters completing course to Commissioner.** Within ten (10) business days after completion of each course, the provider electronically upload a list of all insurance adjusters who completed the course to the Commissioner's database system. This list shall contain the course number, date of completion and license numbers of all insurance adjusters completing the course. If the list is not reported within ten (10) business days, a late report fee of \$50.00 shall be paid to the Insurance Department.

Failure to pay the late report fee may result in revocation of provider approval. Continued late filing may also result in loss of approval.

- (11) **Course records maintained four (4) years.** Providers shall maintain course records for at least four (4) years. The Commissioner may order an examination of a provider, at the provider's expense, for good cause shown.
- (12) **Course review fee.** A non-refundable course review fee of thirty dollars (\$30.00) per course shall be submitted by all continuing education providers at the time the course submission is first submitted for review and upon submission for renewal at expiration with the exception of publicly funded educational institutions, federal agencies, Oklahoma state agencies, non-profit organizations, and not-for-profit organizations.
- (13) **Course evaluation.** The continuing education provider shall provide written notification to each producer of the opportunity to offer comments on any continuing education class via the Insurance Department website.

(g) Approved professional designation programs

- (1) **Definitions.**
 - (A) **Participation.** As used in 36 O.S. § 6217(C), participates means successfully completing any part of a course curriculum totaling twenty (20)twenty-four (24) classroom or equivalent classroom hours of an approved professional designation program.
 - (B) **Approved professional designation program.** As used in 36 O.S. § 6217(C), an approved professional designation program means an educational insurance program approved by the Commissioner with a sponsoring organization that administers curriculum requirements and testing standards for candidates.
- (2) **Requirements.** A professional designation program shall satisfy the following criteria to receive initial and ongoing approval for the program:
 - (A) The program shall have a sponsoring organization;
 - (B) The program's sponsoring organization shall maintain and govern a code of conduct;
 - (C) The program shall be relevant to the sale, solicitation, or negotiation of insurance products in the State of Oklahoma;
 - (D) Each course of the professional designation course curriculum shall be a minimum of twenty (20)twenty-four (24) hours of classroom instruction or equivalent classroom instruction; and
 - (E) The program shall include an examination requirement that students shall pass before earning the designation.
- (3) **Submissions.** The sponsoring organization shall submit the following to the Commissioner for its professional designation program to be considered for initial and ongoing approval for the program:
 - (A) The sponsoring organization's code of conduct;
 - (B) The sponsoring organization's membership requirements;
 - (C) The professional designation program's course requirements; and
 - (D) The professional designation program's examination requirements.
- (4) **Submission exemptions.** Professional designation programs recognized by the National Association of Insurance Commissioners (NAIC) for waiver/exemption of prelicensing education training shall receive initial and continuing approval without submission by the sponsoring organization.

(h) Presumptive continuing education credit approval.

- (1) **Requirements.** A professional association may receive presumptive approval of the association's continuing education courses by satisfying the following requirements:
 - (A) The association shall have a mission statement that includes a commitment to enhance the professional, educational, or ethical skills of its members;
 - (B) The association shall maintain and govern a code of member conduct;
 - (C) The association shall offer educational programs relevant to the sale, solicitation, or negotiation of insurance products in the State of Oklahoma; and
 - (D) The association shall perpetuate its continuity through the election of officers.
- (2) **Submissions.** Each professional association shall submit the following to be considered for initial and ongoing presumptive course approval:
 - (A) The association's mission statement;
 - (B) The association's code of member conduct:
 - (C) The chapter officers, the responsibilities for each officer, and the term of office for each officer;
 - (D) The mailing address and primary contact for the association; and
 - (E) The list of continuing education courses approved in Oklahoma and offered by the professional association in the past twenty-four (24) months.

(3) Notification of approval or disapproval.

- (A) The Commissioner shall notify the association within ninety (90) days from the receipt of submission whether presumptive approval for continuing education courses was granted. The notification shall indicate the reasons for disapproval.
- (B) Submissions to the Commissioner by an association seeking presumptive approval of continuing education courses shall include the course summary, instructor name, course date and location and shall be submitted to the Commissioner at least fifteen (15) business days prior to the presentation of the course.
- (C) If the Commissioner receives a report or reports that the content of a continuing education course may violate paragraph 365:25-3-1(f)(8) of this section, the Commissioner may review the content and determine if the course should be disapproved for noncompliance. The Commissioner shall notify the association if the course has been disapproved due to non-compliance, and the association shall immediately cease offering the course upon receipt of the notification. The association may then make corrections to a disapproved course to bring the course into compliance with paragraph 365:25-3-1(f)(8) of this section and submit the course for approval by the Commissioner in the manner of an original submission for presumptive continuing education course approval.
- (D) Should an association receive notification of three (3) disapproved courses within a twenty-four (24) month period, the association's presumptive approval for continuing education courses shall be rescinded for twenty-four (24) months after which time the association may re-apply for presumptive approval.
- (4) **Assignment of course number.** The Commissioner shall assign a course number once the presumptive approval for continuing education courses has been granted and

shall notify the association of the assigned course number. All future correspondence relating to that course shall reference the assigned course number.

- (5) **Instructor approval.** Instructors shall be approved by the Commissioner at least fourteen (14) calendar days prior to a presentation of a course. The Commissioner may disapprove any course if instructor approval has not been granted.
- (6) **Review.** Course approval shall be reviewed every three (3) years. The association shall re-submit the items required in subparagraph 365:25-3-14(H)(3)(B) of this section during the fourth quarter of the last approval year.
- (7) **Agency management courses.** Agency management courses shall not be considered for presumptive continuing education approval.
- (i) **Self study and distance learning courses.** The Insurance Commissioner shall determine appropriate guidelines and standards for self-study and distance learning CEC offerings. The guidelines and standards shall include authentication of the registered licensee, technology requirements for course delivery and testing protocols. Guidelines and standards shall be reviewed and updated as appropriate and published on the Commissioner's website annually. Failure to follow the guidelines and standards established by the Commissioner may result in denial of continuing education credit for the adjuster and revocation of the course approval and or provider status for the Provider.
- (j) **Repeating courses.** An insurance adjuster may repeat a course within the twenty-four month period if the maximum credits designated for the course were not attained in the first attempt. By repeating the course, the adjuster may not during the twenty-four month period earn more than the maximum credits designated for the course. An adjuster may repeat a course after two (2) years have elapsed and receive the maximum credits designated for the course.
- (k) **Extension of time.** For good cause shown, the Commissioner may grant an extension of time during which the requirements imposed by the act may be completed. The extension shall not exceed twelve (12) months. The extension will not alter the requirements or due date of the succeeding twelve-month period. "Good cause" includes disability, natural disaster, or other extenuating circumstances. Each request for extension of time shall be in writing from the licensee and shall include details and any documentation to support the request. Each request must be received by the Commissioner no less than thirty (30) days before the expiration of the twenty-four month period.

(l) Continuing education advisory committee.

- (1) There shall hereby be established the Continuing Education Advisory Committee. This committee shall consist of representatives from the Licensing Division, and representatives from the industry as designated by the Commissioner. Members of the Advisory Board established by 36 O.S. § 6221 may also serve on the Continuing Education Advisory Committee. The committee shall meet at least quarterly and additionally as required. Members of the committee shall serve without pay and shall not be reimbursed for any expenses associated therewith.
- (2) Prior to the Commissioner's approval or disapproval of a course in 365:25-3-14(f), a continuing education advisory committee will review the course submitted and make its nonbinding recommendation to the Commissioner on granting or denying approval based upon information submitted in 365:25-3-14-(f) regarding the course or additional information regarding the course, if necessary, the number of CE hours awarded for an approved course and the line or lines of insurance for which the course qualifies. Each course approval shall be valid for a period of not more than two (2) years,

unless the course has a material change. Material changes to courses require course resubmission for overall course review and approval. Course approval following the review of material changes shall reset the validity period. At the expiration of the validity period, providers shall submit the course for approval by the Commissioner if the provider wants to continue to offer the course for continuing education credit.

(m) **Severability provision.** If any provision of this section, or application of such provision to any person or circumstances, shall be held invalid, the remainder of the section, and the application of such provision to person or circumstances other than those as to which it is held invalid, shall not be affected thereby.

SUBCHAPTER 5. BAIL BONDSMEN

PART 5. GENERAL PROVISIONS PERTAINING TO BAIL BONDSMEN

365:25-5-31. Business and residence Residence, business, mailing, and e-mail addresses on applications

- (a) Original and renewal applications shall include the following:
 - (1) applicant's residence mailing address,
 - (2) applicant's residence street (physical)business address,
 - (3) prospective place of business applicant's mailing address, and
 - (4) prospective place of business street (physical) address applicant's e-mail address.
- (b) An applicant's business address and mailing address shall be in the same county.

365:25-5-33. Change of <u>mailing</u> address, <u>legal name</u>, <u>e-mail address</u>, <u>or telephone</u> requirements

- (a) 59 O.S. §1310 requires bail bondsmen to notify the Insurance Commissioner within five (5) days after a change of <u>mailing</u> address, <u>legal name</u>, <u>e-mail address</u>, <u>or telephone number</u>. This notification must include:
 - (1) signaturename and license number of the bondsman,
 - (2) date of the notification, and
 - (3) the bondsman's current telephone number., and
 - (4) the bondsman's current e-mail address.
- (b) This notification may be in any form acceptable to the Insurance Commissioner.

SUBCHAPTER 15. CAPTIVE INSURANCE COMPANIES REGULATION

365:25-15-1. Purpose and authority

This regulationsubchapter provides rules for administering the Oklahoma Captive Insurance Company Act, 36 O.S. §§ 6470.1, et seq., and applicable provisions of the Oklahoma Insurance Code. This regulationsubchapter sets forth the financial, and reporting, and other requirements which the Insurance Commissioner deems necessary for the regulation of captive insurance companies, as authorized by the Oklahoma Insurance Code and the Oklahoma Captive Insurance Company Act. References to "company" in this regulationsubchapter shall mean captive insurance company or companies, unless otherwise specified.

365:25-15-2. Annual reporting requirements

- (a) An association A pure, association, sponsored, or industrial captive insurance company doing business in this State shall annually, prior to March 1, submit to the Insurance Commissioner a report of its financial condition, verified by oath of two of its executive officers. The report shall be that required by Section 311 of Title 36 of the Oklahoma Statutes.prescribed by the Insurance Commissioner as "Oklahoma Captive Insurance Company Annual Report."
- (b) A pure or industrial insured captive insurance company A risk retention group doing business in this State shall annually submit to the Insurance Commissioner a report of its financial condition, verified by oath of two of its executive officers. The report shall be that prescribed by the Insurance Commissioner as "Captive Annual Statement: Pure or Industrial Insured." The reports shall be those required by Section 311 of Title 36 of the Oklahoma Statutes.

365:25-15-3. Annual Audit

- (a) All companies shall have an annual audit by an independent certified public accountant, authorized by the Insurance Commissioner, and shall file such annual audited financial report with the Insurance Commissioner on or before June 30 for the year ending December 31 immediately preceding.
- (b) A pure captive insurance company may make written application to file its annual report on a fiscal year basis and shall file such report no later than sixty (60) days following the close of the fiscal year.
- (c) A company that elects to file its annual report on a fiscal year basis shall submit, concurrently with each premium tax return required, a schedule detailing the net direct written premium and assumed premium for the fiscal year in question.
- (b)(d) The annual audited financial report shall be considered part of the company's annual report of financial condition except with respect to the date by which it must be filed with the Insurance Commissioner.
- (e)(e) The annual audited financial report shall consist of the following:

(1) **Opinion of Independent Certified Public Accountant**

- (A) Financial statements furnished pursuant to this section shall be examined by independent certified public accountants in accordance with statutorygenerally accepted accounting principles as set out in the Oklahoma Insurance Code, or as required by any other comprehensive basis of accounting in use by the company and approved by the Insurance Commissioner and the National Association of Insurance Commissioners.
- (B) The opinion of the independent certified public accountant shall cover all years presented.
- (C) The opinion shall be addressed to the company on stationery of the accountant showing the address of issuance, shall bear original manual signatures and shall be dated.

(2) Report of Evaluation of Internal Controls

- (A) This report shall include an evaluation of the internal controls of the company relating to the methods and procedures used in the securing of assets and the reliability of the financial records, including but not limited to, such controls as the system of authorization and approval and the separation of duties.
- (B) The review shall be conducted in accordance with <u>statutorygenerally</u> accepted accounting principles, or as required by any other comprehensive basis

- of accounting in use by the company and approved by the Insurance Commissioner, and the report shall be filed with the Insurance Commissioner.
- (3) **Accountant's Letter.** The accountant shall furnish the company, for inclusion on the filing of the annual audited financial report, a letter stating:
 - (A) That (s)he is independent with respect to the company and conforms to the standards of his/her profession as contained in the Code of Professional Ethics and pronouncements of the American Institute of Certified Public Accountants and pronouncements of the Financial Accounting Standards Board.
 - (B) The general background and experience of the staff engaged in audit including the experience in auditing captives or other insurance companies.
 - (C) That the accountant understands that the audited annual report and his opinions thereon will be filed in compliance with this regulation with the Department.
 - (D) That the accountant consents to the requirements of 365:25-15-4(c) of this regulation and that the accountant consents and agrees to make available for review by the Insurance Commissioner, or his appointed agent, the work papers as defined in 365:25-15-4(c).
 - (E) That the accountant is properly licensed by an appropriate state licensing authority and that (s)he is a member in good standing in the American Institute of Certified Public Accountants.
- (4) **Financial Statements.** Statements required shall be as follows:
 - (A) Balance sheet,
 - (B) Statement of gain or loss from operations,
 - (C) Statement of changes in financial position,
 - (D) Statement of changes in capital paid up, gross paid in and contributed surplus and unassigned funds (surplus), and
 - (E) Notes to financial statements. The notes to financial statements shall be those required by <u>statutorygenerally accepted</u> accounting principles, <u>or as required by any other comprehensive basis of accounting in use by the company and approved by the Insurance Commissioner</u>, and shall include:
 - (i) A reconciliation of differences, if any, between the audited financial report and the statement or form filed with the Insurance Commissioner.
 - (ii) A summary of ownership and relationship of the company and all affiliated corporations or companies insured by the captive.
 - (iii) A narrative explanation of all material transactions and balances with the company.

(5) Certification of Loss Reserves and Loss Expense Reserves

- (A) The annual audit shall include an opinion as to the adequacy of the company's <u>life</u>, <u>health</u>, <u>or annuity reserves</u>, <u>or its</u> loss reserves and loss expense reserves.
- (B) The individual who certifies as to the adequacy of reserves shall be approved by the Insurance Commissioner and shall be a Fellow of the Casualty Actuarial Society, a member in good standing of the American Academy of Actuaries, or an individual who has demonstrated his competence in loss reserve evaluation to the satisfaction of the Insurance Commissioner.

- (C) Certification shall be in such form as the Insurance Commissioner deems appropriate.
- (f) Any company having direct written premiums of Two Million Dollars (\$2,000,000) or less in the preceding year may request exemption from the annual audit requirement.

365:25-15-4. Independent Certified Public Accountant

- (a) **Designation of Independent Certified Public Accountant.** Companies, after becoming subject to this regulation, an annual audit shall, within ninety days, report to the Insurance Commissioner in writing, the name and address of the independent certified public accountant retained to conduct the annual audit set forth in this regulation subchapter. The certified public accountant that is retained to conduct the annual audit may only be appointed from the list of approved certified public accounting firms or individual certified public accountants maintained by the Insurance Commissioner.
- (b) **Notification of Adverse Financial Condition.** A company shall require the independent certified public accountant to immediately notify in writing an officer and all members of the Board of Directors of the company of any determination by the independent certified public accountant that the company has materially misstated its financial condition in its report to the Insurance Commissioner as required in Sections 311 andor 6470.11 of Title 36 of the Oklahoma Statutes. The company, or its designated captive insurance manager, shall furnish such notification to the Insurance Commissioner within five working days of receipt thereof.
- (c) Availability and Maintenance of Working Papers of the Independent Certified Public Accountant.
 - (1) Each company shall require the independent certified public accountant to make available for review by the Insurance Commissioner, or his appointed agent or examiner, the work papers prepared in the conduct of the audit of the company. The company shall require that the accountant retain the audit work papers for a period of not less than seven (7) five (5) years after the period reported upon.
 - (2) The aforementioned review by the Insurance Commissioner shall be considered investigations and/or examination and all working papers obtained during the course of such investigations and/or examination shall be confidential. The company shall require that the independent certified public accountant provide photocopiescopies of any of the working papers which the Insurance Commissioner considers relevant. Such working papers may be retained by the Insurance Commissioner.
 - (3) "Work Papers" as referred to in this section include, but are not necessarily limited to, schedules, analyses, reconciliations, abstracts, memoranda, narratives, flow charts, copies of company records or other documents prepared or obtained by the accountant and his employees in the conduct of their examination of the company.

365:25-15-5. Deposit Requirement

Whenever the Insurance Commissioner deems that the financial condition of the company warrants additional security, he may require a company to deposit with the Department cash, or securities which satisfy the requirements of Section 613 and Article 17 of Title 36 of the Oklahoma Statutesapproved by the Insurance Commissioner, or a clean irrevocable letter of credit issued by a bank chartered by the State of Oklahoma or a member bank of the Federal Reserve System and approved by the Insurance Commissioner. The company may receive interest or dividends from said deposit or exchange the deposits for others of equal value with the

approval of the Insurance Commissioner. If such company discontinues business, the Insurance Commissioner shall return such deposit only after being satisfied that all obligations of the company have been discharged.

365:25-15-6. Organizational examination

In addition to the processing of the application, an organizational investigation or examination may be performed before <u>or after</u> an applicant is licensed. Such investigation or examination shall consist of a general survey of the company's corporate records, including charter, bylaws and minute books; verification of capital and surplus; verification of principal place of business; determination of assets and liabilities; biographical affidavits—with background checks made by an independent third party; and a review of such other factors as the Insurance Commissioner deems necessary.

365:25-15-9. Executive officers and directors

- (a) Every company shall report to the Insurance Commissioner within thirty days after any change in its executive officers or directors, including in its report a statement of the business and professional affiliations of any new executive officer or director. Every executive officer or director shall provide a biographical affidavit and a background checked conducted by an independent third party to the Insurance Commissioner within forty-five (45) days of his/her appointment as an executive officer or to the board of directors of the company.
- (b) No director, officer, or employee of a company shall, except on behalf of the company, accept, or be the beneficiary of, any fee, brokerage, gift, or other emolument because of any investment, loan, deposit, purchase, sale, payment or exchange made by or for the company, but such person may receive reasonable compensation for necessary services rendered to the company in his or her usual private, professional or business capacity.
- (c) Any profit or gain received by or on behalf of any person in violation of this section shall inure to and be recoverable by the company.

365:25-15-12. Acquisition of control of or merger with domestic company

- (a) Companies shall comply with Section 1653 of Title 36 when seeking to acquire control of or merge with a domestic company, notwithstanding the Insurance Commissioner may waive or modify the requirements for public notice and hearing when the Insurance Commissioner concludes the public hearing is not necessary due to the limited public interest in the change of control.
- (b) Definitions of terms found in Section 1651 of Title 36 shall apply when a captive insurance company seeks to acquire control of or merge with a domestic company. For purposes of this section, the definition of the term insurer as set out in Section 1651 of Title 36 shall include captive insurance companies.

365:25-15-13. Change of business

Any change in the nature of the captive business from that stated in the company's plan of operation filed with the Insurance Commissioner upon application requires prior approval from the Insurance Commissioner. Any change in any other information filed with the application must be filed with the Insurance Commissioner within sixty (60) days of the change, but does not require prior approval.

365:25-15-14. Prior approval

- (a) Requests for the prior approval of the Insurance Commissioner of mergers, consolidations, conversions, mutualizations, redomestications or any other matter for which prior approval is required shall be made on the appropriate forms as set out in this Chapter for use by insurers or on forms as determined by the Insurance Commissioner.
- (b) Requests for prior approval of the Insurance Commissioner other than as set out in Subsection (a) of this Section shall be made on Form D as set forth in Appendix O of this Chapter.

Requests for the prior approval of the Insurance Commissioner of mergers, consolidations, conversions, mutualizations, redomestications or any other matter for which prior approval is required shall be made on the appropriate forms as set out in this Chapter for use by insurers or on forms as determined by the Insurance Commissioner.

365:25-15-15. Severability Provision

If any provisions of this subchapter or its applicability to any person or circumstance are held invalid, the remainder of the subchapter, and the application of such provisions to other persons or circumstances shall not be affected. To this end, the provisions of this subchapter are declared severable.

SUBCHAPTER 19. ANNUITY DISCLOSURE REGULATION

365:25-19-5. Standards for the disclosure document and buyer's guide

- (a) Disclosure document and buyer's guide.
 - (1) Where the application for an annuity contract is taken in a face-to-face meeting, the applicant shall at or before the time of application be given both the disclosure document described in Subsection (b) and the Buyer's Guide contained in Appendix S of this Chapter, based on the type of annuity product involved in the application, the most current and appropriate version of the NAIC Buyer's Guide to Annuities ("Buyer's Guide").
 - (2) Where the application for an annuity contract is taken by means other than in a face-to-face meeting, the applicant shall be sent both the disclosure document and the Buyer's Guide no later than five (5) business days after the completed application is received by the insurer.
 - (A) With respect to an application received as a result of a direct solicitation through the mail:
 - (i) Providing a Buyer's Guide in a mailing inviting prospective applicants to apply for an annuity contract shall be deemed to satisfy the requirement that the Buyer's Guide be provided no later than five (5) business days after receipt of the application.
 - (ii) Providing a disclosure document in a mailing inviting a prospective applicant to apply for an annuity contract shall be deemed to satisfy the requirement that the disclosure document be provided no later than five (5) business days after receipt of the application.
 - (B) With respect to an application received via the Internet:
 - (i) Taking reasonable steps to make the Buyer's Guide available for viewing and printing on the insurer's website shall be deemed to satisfy

the requirement that the Buyer's Guide be provided no later than five (5) business day of receipt of the application.

- (ii) Taking reasonable steps to make the disclosure document available for viewing and printing on the insurer's website shall be deemed to satisfy the requirement that the disclosure document be provided no later than five (5) business days after receipt of the application.
- (C) A solicitation for an annuity contract provided in other than a face-to face meeting shall include a statement that the proposed applicant may contact the insurance department of the state for a free annuity Buyer's Guide. In lieu of the foregoing statement, an insurer may include a statement that the prospective applicant may contact the insurer for a free annuity Buyer's Guide.
- (3) Where the Buyer's Guide and disclosure document are not provided at or before the time of application, a free look period of no less than fifteen (15) days shall be provided for the applicant to return the annuity contract without penalty. This free look shall run concurrently with any other free look provided under state law or regulation.
- (b) **Minimum information included in disclosure document.** At a minimum, the following information shall be included in the disclosure document required to be provided under this regulation:
 - (1) The generic name of the contract, the company product name, if different, and form number, and the fact that it is an annuity;
 - (2) The insurer's name and address;
 - (3) A description of the contract and its benefits, emphasizing its long-term nature, including examples where appropriate:
 - (A) The guaranteed, non-guaranteed and determinable elements of the contract, and their limitations, if any, and an explanation of how they operate;
 - (B) An explanation of the initial crediting rate, specifying any bonus or introductory portion, the duration of the rate and the fact that rates may change from time to time and are not guaranteed;
 - (C) Periodic income options both on a guaranteed and non-guaranteed basis;
 - (D) Any value reductions caused by withdrawals from or surrender of the contract;
 - (E) How values in the contract can be accessed;
 - (F) The death benefit, if available and how it will be calculated;
 - (G) A summary of the federal tax status of the contract and any penalties applicable on withdrawal of values from the contract; and
 - (H) Impact of any rider, such as a long-term care rider.
 - (4) Specific dollar amount or percentage charges and fees shall be listed with an explanation of how they apply.
 - (5) Information about the current guaranteed rate for new contracts that contains a clear notice that the rate is subject to change.
- (c) **Understanding by a typical person.** Insurers shall define terms used in the disclosure statement in language that facilitates the understanding by a typical person within the segment of the public to which the disclosure statement is directed.

APPENDIX S. BUYER'S GUIDE [REVOKED]