# Senate Bill 632

Sponsored by Senator METSGER

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## **SUMMARY**

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced.** 

Modifies laws regulating Oregon Insurance Guaranty Association.

## 1 A BILL FOR AN ACT

Relating to Oregon Insurance Guaranty Association; creating new provisions; and amending ORS
734.510, 734.520, 734.570, 734.580, 734.630, 734.640, 734.690 and 734.695.

## 4 Be It Enacted by the People of the State of Oregon:

- **SECTION 1.** ORS 734.510 is amended to read:
- 734.510. As used in ORS 734.510 to 734.710, unless the context requires otherwise:
- 7 (1) "Association" means the Oregon Insurance Guaranty Association created by ORS 734.550.
  - (2) "Board" means the board of directors of the association.
  - (3) "Claimant" means a person insured under an insurance policy to which ORS 734.510 to 734.710 apply or a person suffering injury or damage for which a person insured under a policy to which ORS 734.510 to 734.710 apply is legally liable.
  - [(3)] (4) "Controlled insurer" means an insurer 70 percent or more of whose stock is owned by a corporation, or by two or more corporations that are under common ownership.
  - [(4)(a)] (5)(a) "Covered claim" means an unpaid claim, including a claim for unearned premiums, [and] a claim by the Workers' Benefit Fund for payments made pursuant to ORS chapter 656, a claim under a pre-insolvency settlement agreement and a derivative claim of a third party claimant, that arises out of and is within the coverage and limits of an insurance policy to which ORS 734.510 to 734.710 apply and [which] that is in force at the time of the occurrence giving rise to the unpaid claim, made by a [person insured under such policy or by a person suffering injury or damage for which a person insured under such policy is legally liable] claimant, if:
    - (A) The insurer issuing the policy becomes an insolvent insurer after September 9, 1971; and
  - (B) The claimant [or insured] is a resident of this state at the time of the occurrence or claim giving rise to the unpaid claim against the association, or the property for which claim arises is permanently located in this state.
    - (b) "Covered claim" does not include:
  - (A) Any amount in excess of the applicable limits of liability provided by an insurance policy to which ORS 734.510 to 734.710 apply;
  - (B) Any amount due any reinsurer, insurer, insurance pool or underwriting association as subrogated recoveries or otherwise;
  - (C) Except for claims arising out of workers' compensation policies subject to ORS chapter 656, a claim filed with the association after the final date set by the court for the filing of claims against the liquidator or receiver of an insolvent insurer; or

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted. New sections are in **boldfaced** type.

- (D) Any first party claim by an insured whose net worth exceeds \$25 million on December 31 of the year next preceding the date the insurer becomes an insolvent insurer, provided that an insured's net worth on such date is deemed to include the aggregate net worth of the insured and all of its subsidiaries as calculated on a consolidated basis. This subparagraph applies to one insured under the policy and may not be construed to exclude covered claims of other qualified insureds under the same policy.
- [(5)] (6) "Dividend" means any payment made to the stockholders of a controlled insurer, which payment is directly related to ownership of the stock.
  - [(6)] (7) "Insolvent insurer" means a member insurer:

- (a) Authorized to transact insurance in this state either at the time the policy was issued or at the time of the occurrence giving rise to the unpaid claim;
- (b) Against which a final order of liquidation, with a finding of insolvency, has been entered by a court of competent jurisdiction in the insurer's domicile after September 9, 1971; and
- (c) With respect to which no order, judgment or finding relating to the insolvency of the insurer, whether preliminary or temporary in nature or otherwise, has been issued by a court of competent jurisdiction or by any insurance commissioner, insurance department or similar official or body prior to September 9, 1971, or which was in fact insolvent prior to September 9, 1971, and such de facto insolvency was or should have been known by the chief insurance regulatory official of its domicile.
- [(7)] (8) "Member insurer" means an insurer, including a reciprocal insurer, authorized to transact insurance in this state that writes any kind of insurance to which ORS 734.510 to 734.710 apply.
- [(8)] (9) "Net direct written premiums" means direct gross premiums written in this state on insurance policies to which ORS 734.510 to 734.710 apply, less return premiums thereon and dividends paid or credited to policyholders on such direct business. "Net direct written premiums" does not include premiums on contracts between insurers or reinsurers.
- [(9)] (10) "Plan" means the plan of operation of the association established pursuant to ORS 734.590.

#### **SECTION 2.** ORS 734.520 is amended to read:

734.520. The purpose of ORS 734.510 to 734.710 is to:

- (1) Provide for the payment of covered claims under certain insurance policies to avoid excessive delay in payment and to avoid financial loss to claimants [or policyholders] because of the insolvency of an insurer[, to];
  - (2) Assist in the detection and prevention of insurer insolvencies[, to];
  - (3) Provide an association to assess the cost of such protection among insurers; and [to]
  - (4) Assist in the liquidation of insurers as provided in this chapter.

# SECTION 3. ORS 734.570 is amended to read:

734.570. The Oregon Insurance Guaranty Association shall:

(1) Be obligated to pay covered claims existing at the time of determination of insolvency of an insurer or arising within 30 days after the determination of insolvency. Except for covered claims arising out of workers' compensation policies, [such] the obligation [shall include] includes only that amount of [each] a claimant's covered claim that is less than \$300,000. The association shall pay the full amount of any covered claim arising out of a workers' compensation policy, less any amount paid on a covered claim by the Workers' Benefit Fund pursuant to ORS chapter 656. In no event shall the association be obligated in an amount in excess of the obligation of the insolvent insurer under the policy from which the claim arises, or for claims arising after the policy expiration, policy

replacement by the insured or policy cancellation caused by the insured.

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- (2) If a claimant has a covered claim, be the insurer [to the extent of the association's obligation on the covered claims] and [to such extent] have all the rights, duties and obligations of the insolvent insurer as if the insurer had not become insolvent, including but not limited to the duty to defend and settle a covered claim on behalf of an insured according to the policy issued by the insolvent insurer and the obligation, when applicable, to pay interest, attorney fees, punitive damages or statutory penalties arising from the covered claim.
- (3) Assess member insurers the amounts necessary to pay the expenses incurred by the association in meeting its obligations and exercising its duties and powers under ORS 734.510 to 734.710. The assessments of each member insurer shall be in the proportion that the net direct written premiums of the member insurer for the preceding calendar year bears to the net direct written premiums of all member insurers for the preceding calendar year, but shall in no event exceed in any one year two percent of the member insurer's net direct written premiums for the preceding calendar year. Each member insurer shall be notified of an assessment not later than the 30th day before the day it is due. If the funds of the association do not provide in any one year an amount sufficient to pay the obligations and expenses of the association, the funds available shall be prorated among the obligations and expenses, and the unpaid portions shall be paid as soon thereafter as funds become available. If an assessment would cause a member insurer's financial statement to reflect amounts of capital or surplus less than the minimum amounts required for a certificate of authority by any jurisdiction in which the member insurer is authorized to transact insurance, the association may exempt from or defer payment of the assessment, in whole or in part, by the member insurer. However, if the member insurer is a controlled insurer, the association, in making determinations regarding the exemption or deferral of assessments, shall treat all dividends paid during the three calendar years immediately preceding the year in which the assessment is made as assets of the insurer just as if such dividends had not been paid. Each member insurer designated as a servicing facility may set off against any assessment authorized payments made on covered claims and expenses incurred in the payment of such claims by the member insurer in its capacity as a servicing facility.
- (4) Investigate claims brought against the association and adjust, compromise, settle and pay covered claims to the extent of the association's obligation[,] and review settlements, releases and judgments to which the insolvent insurer or its insureds were parties to determine the extent to which such settlements, releases and judgments may be properly contested.
- (5) Reimburse servicing facilities and employees of the association for obligations and expenses incurred and paid in the handling of claims on behalf of the association, and pay all other expenses the association incurs in carrying out ORS 734.510 to 734.710.

# SECTION 4. ORS 734.580 is amended to read:

734.580. The Oregon Insurance Guaranty Association may:

- (1) With the approval of the Director of the Department of Consumer and Business Services, employ or retain such persons or designate such servicing facilities as are necessary to handle claims and perform the other duties of the association. Servicing facilities so designated may be foreign corporations or associations.
- (2) Borrow funds necessary to carry out ORS 734.510 to 734.710, in such manner as may be specified in the plan.
  - (3) Sue or be sued.
  - (4) Negotiate and become a party to such contracts as are necessary to carry out ORS 734.510

1 to 734.710.

- (5) At the end of any calendar year, refund to member insurers, in proportion to an insurer's payments to the association, that amount by which the board of directors [find] **finds** that the funds of the association exceed its current claims and expenses plus the liabilities estimated for the coming year.
  - (6) Perform such other acts as are necessary or proper to carry out ORS 734.510 to 734.710.
- (7) Settle claims with claimants and other associations that perform functions similar to those performed by the association.

**SECTION 5.** ORS 734.630 is amended to read:

- 734.630. (1) [Any person] A claimant who recovers on a covered claim under ORS 734.510 to 734.710 thereby assigns the rights of the [person] claimant under the insurance policy to the Oregon Insurance Guaranty Association to the extent of such recovery. [Every person who seeks the protection of ORS 734.510 to 734.710] A claimant shall cooperate with the association to the same extent [such person] the claimant would have been required to cooperate with the insolvent insurer. The association shall have no cause of action against the insureds of an insolvent insurer for any sums paid, except for those causes of action the insolvent insurer would have had if such sums had been paid by the insolvent insurer. If an insolvent insurer operates on the assessment plan, the payment of claims by the association does not reduce the liability of the insured to the receiver for unpaid assessments.
- (2) Periodically the association shall file with the receiver statements of the covered claims paid by the association and estimates of anticipated claims against the association. Such filings shall preserve the rights of the association against the assets of the insolvent insurer.
- (3) The receiver shall be bound by settlements of covered claims by the association or a similar organization in another state. The court having jurisdiction shall grant such claims priority in accordance with ORS 734.360.

# SECTION 6. ORS 734.640 is amended to read:

- 734.640. (1) [Any person who has a claim under an insurance policy against an insurer other than an insolvent insurer which would also be a covered claim against an insolvent insurer must first exhaust the remedies under such policy.] Before submitting a claim to the Oregon Insurance Guaranty Association:
- (a) A first party claimant who has a claim under a liability insurance policy issued by a solvent insurer must first seek recovery under the policy if the policy insures the same liability as the liability insurance policy that is the subject of a covered claim.
- (b) A first party claimant who has a claim under a property insurance policy issued by a solvent insurer must first seek recovery under the policy if the policy insures loss to the same property as the property insurance policy that is the subject of a covered claim.
- (c) A third party claimant who has a claim under an insurance policy issued by a solvent insurer must first seek recovery under the policy if the policy insures against the underinsurance or lack of insurance of a defendant.
- (2) A claimant described in subsection (1) of this section may seek recovery from the association only after accepting a payment from a solvent insurer in full satisfaction of the claimant's claim against the solvent insurer. The payment may be in an amount that is less than or equal to the policy limits of the policy.
- [(2)] (3) [Any person] A claimant who has a claim that may also be recovered from one or more insurance guaranty agencies that perform functions similar to that of the Oregon Insurance Guar-

- anty Association shall first seek recovery from whichever organization serves the place of residence of the insured, except that:
  - (a) Recovery on first party claims for damage to property with a permanent location shall first be sought from whichever organization serves the location of the property; and
  - (b) Recovery on workers' compensation claims shall first be sought from whichever organization serves the residence of the claimant.
  - [(3) Any recovery under ORS 734.510 to 734.710 from the association shall be reduced by the amount of any recovery pursuant to subsections (1) and (2) of this section.]
  - (4)(a) A payment received under subsection (2) of this section is a credit against recovery by a claimant described in subsection (1) of this section. A claimant's covered claim may be reduced under this subsection only if the amount of the payment received under subsection (2) of this section is greater than the difference between the amount of the claimant's loss and the amount of the covered claim.
  - (b) A payment received under subsection (2) of this section is a credit against the total loss of a claimant who is eligible to recover on a claim from one or more insurance guaranty agencies that perform functions similar to that of the association.
  - (c) The association may allocate liability for covered claims involving the same loss or liability with insurance guaranty agencies that perform functions similar to that of the association if the claimant recovers no less than the amount to which the claimant is entitled under ORS 734.510 to 734.710.
  - (d) A claimant may not recover an amount from the association under ORS 734.510 to 734.710 that, in combination with the amount recovered under subsection (1) of this section, is greater than the amount of the claimant's total loss.

**SECTION 7.** ORS 734.690 is amended to read:

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734.690. No person shall have a cause of action against any member insurer, [the] Oregon Insurance Guaranty Association [or its] employees or servicing facilities, any member of the board, or the Director of the Department of Consumer and Business Services or employees of the director for any action taken by [them] the association in carrying out ORS 734.510 to 734.710.

**SECTION 8.** ORS 734.695 is amended to read:

- 734.695. (1) The insured of an insolvent insurer may not be personally liable for amounts due any reinsurer, insurer, insurance pool or underwriting association as subrogation recoveries or otherwise up to the applicable limits of liability provided by the insurance policy issued by the insolvent insurer.
- (2) Notwithstanding the provisions of subsection (1) of this section, and except for claims arising out of workers' compensation policies subject to ORS chapter 656, the Oregon Insurance Guaranty Association may recover from the following persons the amount of any covered claim paid on behalf of such person under ORS 734.510 to 734.710:
- (a) Any insured whose net worth exceeds \$25 million on December 31 of the year next preceding the date the insurer becomes an insolvent insurer and whose liability obligations to [other persons] third party claimants are satisfied in whole or in part by payments made under ORS 734.510 to 734.710; and
- (b) Any person who is an affiliate of the insolvent insurer and whose liability obligations to [other persons] **third party claimants** are satisfied in whole or in part by payments made under ORS 734.510 to 734.710.
  - SECTION 9. The amendments to ORS 734.510, 734.520, 734.570, 734.580, 734.630, 734.640,

- 734.690 and 734.695 by sections 1 to 8 of this 2005 Act apply to claims filed with the Oregon
- 2 Insurance Guaranty Association on or after the effective date of this 2005 Act.

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