## House Substitute for SENATE BILL No. 78

By Committee on Insurance and Pensions

3-24

AN ACT concerning insurance; relating to the regulation of the business 1 2 thereof; reinsurance of risk; updating the national association of 3 insurance commissioners credit for reinsurance model law; insurance 4 company holding act; codifying the national association of insurance 5 commissioners credit for reinsurance model regulation; updating 6 certain definitions relating to service contracts and surplus lines 7 insurance; interest rates calculations relating to nonforfeiture law for 8 individual deferred annuities; application requirements for certification 9 of utilization review organizations; requirements for out-of-state risk 10 retention groups to do business in state; applications for registration of professional employer organizations; abolishing the automobile club 11 12 services act; amending K.S.A. 40-22a04, 40-22a06 and 40-4103 and 13 K.S.A. 2020 Supp. 40-201a, 40-221a, 40-246i, 40-4,104, 40-22a05, 40-14 3302, 40-3304, 40-3306 and 44-1704 and repealing the existing 15 sections; also repealing K.S.A. 40-2405, 40-2501, 40-2502, 40-2503, 16 40-2504, 40-2505, 40-2506, 40-2507, 40-2508, 40-2509, 40-2510, 40-17 2511, 40-2512 and 40-2513.

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19 Be it enacted by the Legislature of the State of Kansas:

New Section 1. (a) *Purpose*. The actions and information required by this section are declared to be necessary and appropriate in the public interest and for the protection of the ceding insurers in this state.

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

(c) Credit for reinsurance – reinsurer licensed in this state. Pursuant
to K.S.A. 40-221a(a), and amendments thereto, the commissioner shall
allow credit for reinsurance ceded by a domestic insurer to an assuming
insurer that was licensed in this state as of any date on which statutory
financial statement credit for reinsurance is claimed.

(d) Credit for reinsurance – accredited reinsurers. (1) Pursuant to
K.S.A. 40-221a(a)(2), and amendments thereto, the commissioner shall
allow credit for reinsurance ceded by a domestic insurer to an assuming
insurer that is accredited as a reinsurer in this state as of the date on which
statutory financial statement credit for reinsurance is claimed. An

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1 accredited reinsurer shall:

2 (A) File a properly executed form ar-1 in accordance with the 3 instructions and as prescribed and adopted by the national association of 4 insurance commissioners and the commissioner of insurance as evidence 5 of its submission to this state's jurisdiction and to this state's authority to 6 examine its books and records;

7 (B) file with the commissioner a certified copy of a certificate of 8 authority or other acceptable evidence that it is licensed to transact 9 insurance or reinsurance in at least one state, or, in the case of a United 10 States branch of an alien assuming insurer, is entered through and licensed 11 to transact insurance or reinsurance in at least one state;

12 (C) file annually with the commissioner a copy of its annual 13 statement filed with the insurance department of its state of domicile or, in 14 the case of an alien assuming insurer, with the state through which it is 15 entered and in which it is licensed to transact insurance or reinsurance, and 16 a copy of its most recent audited financial statement; and

17 (D) maintain a surplus as regards policyholders in an amount not less 18 than \$20,000,000, or obtain the affirmative approval of the commissioner 19 upon a finding that it has adequate financial capacity to meet its 20 reinsurance obligations and is otherwise qualified to assume reinsurance 21 from domestic insurers.

(2) (2) If the commissioner determines that the assuming insurer has failed to meet or maintain any of these qualifications, the commissioner may, upon written notice and opportunity for hearing, suspend or revoke the accreditation. Credit shall not be allowed a domestic ceding insurer under this section if the assuming insurer's accreditation has been revoked by the commissioner, or if the reinsurance was ceded while the assuming insurer's accreditation was under suspension by the commissioner.

(e) Credit for reinsurance – reinsurer domiciled in another state. (1)
Pursuant to K.S.A. 40-221a(a)(3), and amendments thereto, the
commissioner shall allow credit for reinsurance ceded by a domestic
insurer to an assuming insurer that, as of any date on which statutory
financial statement credit for reinsurance is claimed:

(A) Is domiciled in or, in the case of a United States branch of an
alien assuming insurer, is entered through, a state that employs standards
regarding credit for reinsurance substantially similar to those applicable
under K.S.A. 40-221a, and amendments thereto, and this section;

(B) maintains a surplus as regards policyholders in an amount not less
 than \$20,000,000; and

40 (C) files a properly executed form ar-1, in accordance with the 41 instructions and as prescribed and adopted by the national association of 42 insurance commissioners and the commissioner of insurance, with the 43 commissioner as evidence of its submission to this state's authority to 1 examine its books and records.

2 (2) The provisions of this section relating to surplus as regards 3 policyholders shall not apply to reinsurance ceded and assumed pursuant 4 to pooling arrangements among insurers in the same holding company 5 system. As used in this section, "substantially similar" standards means 6 credit for reinsurance standards that the commissioner determines are 7 equal to or exceed the standards of K.S.A. 40-221a, and amendments 8 thereto, and this section.

9 (f) Credit for reinsurance – reinsurers maintaining trust funds. (1) 10 Pursuant to K.S.A. 40-221a(a)(4), and amendments thereto, the commissioner shall allow credit for reinsurance ceded by a domestic 11 12 insurer to an assuming insurer that, as of any date on which statutory 13 financial statement credit for reinsurance is claimed, and thereafter for so long as credit for reinsurance is claimed, maintains a trust fund in an 14 15 amount prescribed below in a qualified United States financial institution, 16 as defined in K.S.A. 40-221a(c)(2), and amendments thereto, for the 17 payment of the valid claims of its United States-domiciled ceding insurers, 18 their assigns and successors in interest. The assuming insurer shall report 19 annually to the commissioner substantially the same information as that required to be reported on the national association of insurance 20 21 commissioners annual statement form by licensed insurers, to enable the 22 commissioner to determine the sufficiency of the trust fund.

23 (2) The following requirements apply to the following categories of24 assuming insurer:

(A) The trust fund for a single assuming insurer shall consist of funds
in trust in an amount not less than the assuming insurer's liabilities
attributable to reinsurance ceded by United States-domiciled insurers and,
in addition, the assuming insurer shall maintain a trusteed surplus of not
less than \$20,000,000, except as provided in subparagraph (B).

30 (B) At any time after the assuming insurer has permanently 31 discontinued underwriting new business secured by the trust for at least 32 three full years, the commissioner with principal regulatory oversight of 33 the trust may authorize a reduction in the required trusteed surplus, but 34 only after a finding, based on an assessment of the risk, that the new 35 required surplus level is adequate for the protection of United States 36 ceding insurers, policyholders and claimants in light of reasonably 37 foreseeable adverse loss development. The risk assessment may involve an 38 actuarial review, including an independent analysis of reserves and cash 39 flows, and shall consider all material risk factors, including, when 40 applicable, the lines of business involved, the stability of the incurred loss 41 estimates and the effect of the surplus requirements on the assuming 42 insurer's liquidity or solvency. The minimum required trusteed surplus may 43 not be reduced to an amount less than 30% of the assuming insurer's

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liabilities attributable to reinsurance ceded by United States ceding
 insurers covered by the trust.

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(C) (i) The trust fund for a group including incorporated and individual unincorporated underwriters shall consist of:

5 (a) For reinsurance ceded under reinsurance agreements with an 6 inception date, amendment or renewal date on or after January 1, 1993, 7 funds in trust in an amount not less than the respective underwriters' 8 several liabilities attributable to business ceded by United States-domiciled 9 ceding insurers to any underwriter of the group;

10 (b) for reinsurance ceded under reinsurance agreements with an 11 inception date on or before December 31, 1992, and not amended or 12 renewed after that date, notwithstanding the other provisions of this 13 section, funds in trust in an amount not less than the respective 14 underwriters' several insurance and reinsurance liabilities attributable to 15 business written in the United States; and

16 (c) in addition to these trusts, the group shall maintain a trusteed 17 surplus of which \$100,000,000 shall be held jointly for the benefit of the 18 United States-domiciled ceding insurers of any member of the group for 19 all the years of account.

(ii) The incorporated members of the group shall not be engaged in
any business other than underwriting as a member of the group and shall
be subject to the same level of regulation and solvency control by the
group's domiciliary regulator as are the unincorporated members. The
group shall, within 90 days after its financial statements are due to be filed
with the group's domiciliary regulator, provide to the commissioner:

(a) An annual certification by the group's domiciliary regulator of the
 solvency of each underwriter member of the group; or

(b) if a certification is unavailable, a financial statement, prepared byindependent public accountants, of each underwriter member of the group.

30 (D) (i) The trust fund for a group of incorporated insurers under 31 common administration, whose members possess aggregate policyholders 32 surplus of \$10,000,000,000 as calculated and reported in substantially the 33 same manner as prescribed by the annual statement instructions and 34 accounting practices and procedures manual of the national association of 35 insurance commissioners and that has continuously transacted an 36 insurance business outside the United States for at least three years 37 immediately prior to making application for accreditation, shall:

(a) Consist of funds in trust in an amount not less than the assuming
insurers' several liabilities attributable to business ceded by United Statesdomiciled ceding insurers to any members of the group pursuant to
reinsurance contracts issued in the name of such group;

42 (b) maintain a joint trusteed surplus of which \$100,000,000 shall be 43 held jointly for the benefit of United States-domiciled ceding insurers of

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1 any member of the group; and

2 (c) file a properly executed form ar-1, in accordance with the 3 instructions and as prescribed and adopted by the national association of 4 insurance commissioners and the commissioner of insurance, as evidence 5 of the submission to this state's authority to examine the books and records 6 of any of its members and shall certify that any member examined will 7 bear the expense of any such examination.

8 (ii) Within 90 days after the statements are due to be filed with the 9 group's domiciliary regulator, the group shall file with the commissioner 10 an annual certification of each underwriter member's solvency by the 11 member's domiciliary regulators and financial statements, prepared by 12 independent public accountants, of each underwriter member of the group.

13 (3) (A) Credit for reinsurance shall not be granted unless the form of the trust and any amendments to the trust have been approved by either the 14 15 commissioner of the state where the trust is domiciled or the commissioner 16 of another state who, pursuant to the terms of the trust instrument, has 17 accepted responsibility for regulatory oversight of the trust. The form of 18 the trust and any trust amendments also shall be filed with the 19 commissioner of every state in which the ceding insurer beneficiaries of 20 the trust are domiciled. The trust instrument shall provide that:

(i) Contested claims shall be valid and enforceable out of funds in
 trust to the extent remaining unsatisfied 30 days after entry of the final
 order of any court of competent jurisdiction in the United States;

(ii) legal title to the assets of the trust shall be vested in the trustee for
the benefit of the grantor's United States ceding insurers, their assigns and
successors in interest;

(iii) the trust shall be subject to examination as determined by thecommissioner;

(iv) the trust shall remain in effect for as long as the assuming insurer,
 or any member or former member of a group of insurers, shall have
 outstanding obligations under reinsurance agreements subject to the trust;
 and

(v) not later than February 28 of each year, the trustee of the trust
shall report to the commissioner in writing setting forth the balance in the
trust and listing the trust's investments at the preceding year-end, and shall
certify the date of termination of the trust, if so planned, or certify that the
trust shall not expire prior to the following December 31.

(B) (i) Notwithstanding any other provisions in the trust instrument, if the trust fund is inadequate because it contains an amount less than the amount required by this subsection or if the grantor of the trust has been declared insolvent or placed into receivership, rehabilitation, liquidation or similar proceedings under the laws of its state or country of domicile, the trustee shall comply with an order of the commissioner with regulatory oversight over the trust or with an order of a court of competent
 jurisdiction directing the trustee to transfer to the commissioner with
 regulatory oversight over the trust or other designated receiver all of the
 assets of the trust fund.

5 (ii) The assets shall be distributed by and claims shall be filed with 6 and valued by the commissioner with regulatory oversight over the trust in 7 accordance with the laws of the state in which the trust is domiciled 8 applicable to the liquidation of domestic insurance companies.

9 (iii) If the commissioner with regulatory oversight over the trust 10 determines that the assets of the trust fund or any part thereof are not 11 necessary to satisfy the claims of the United States beneficiaries of the 12 trust, the commissioner with regulatory oversight over the trust shall return 13 the assets, or any part thereof, to the trustee for distribution in accordance 14 with the trust agreement.

(iv) The grantor shall waive any right otherwise available to it underUnited States law that is inconsistent with this provision.

17 (4) For purposes of this section, the term "liabilities" means the 18 assuming insurer's gross liabilities attributable to reinsurance ceded by 19 United States-domiciled insurers, excluding liabilities that are otherwise 20 secured by acceptable means, and includes:

(A) For business ceded by domestic insurers authorized to write
 accident and health and property and casualty insurance:

(i) Losses and allocated loss expenses paid by the ceding insurer,
 recoverable from the assuming insurer;

(ii) reserves for losses reported and outstanding;

(iii) reserves for losses incurred but not reported;

(iv) reserves for allocated loss expenses; and

28 (v) unearned premiums.

(B) For business ceded by domestic insurers authorized to write life,health and annuity insurance:

(i) Aggregate reserves for life policies and contracts net of policyloans and net due and deferred premiums;

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(ii) aggregate reserves for accident and health policies;

(iii) deposit funds and other liabilities without life or disabilitycontingencies; and

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(iv) liabilities for policy and contract claims.

(5) Assets deposited in trusts established pursuant to K.S.A. 40-221a(a), and amendments thereto, and this subsection shall be valued according to their current fair market value and shall consist only of cash in United States dollars, certificates of deposit issued by a United States financial institution, as defined in K.S.A. 40-221a(c), and amendments thereto, clean, irrevocable, unconditional and "evergreen" letters of credit issued or confirmed by a qualified United States financial institution, as

1 defined in K.S.A. 40-221a(c), and amendments thereto, and investments of 2 the type specified in this subsection, but investments in or issued by an entity controlling, controlled by or under common control with either the 3 4 grantor or beneficiary of the trust shall not exceed 5% of total investments. 5 Not more than 20% of the total of the investments in the trust may be 6 foreign investments authorized under subparagraph (A)(v), (C), (F)(ii) or 7 (G), and not more than 10% of the total of the investments in the trust may 8 be securities denominated in foreign currencies. For purposes of applying the preceding sentence, a depository receipt denominated in United States 9 dollars and representing rights conferred by a foreign security shall be 10 classified as a foreign investment denominated in a foreign currency. The 11 12 assets of a trust established to satisfy the requirements of K.S.A. 40-221a(a), and amendments thereto, shall be invested only as follows: 13

(A) Government obligations that are not in default as to principal or
 interest, that are valid and legally authorized and that are issued, assumed
 or guaranteed by:

(i) The United States or by any agency or instrumentality of theUnited States;

(ii) a state of the United States;

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20 (iii) a territory, possession or other governmental unit of the United 21 States;

22 (iv) an agency or instrumentality of a governmental unit referred to in 23 clauses (ii) and (iii) if the obligations shall be by law, statutory or otherwise, payable, as to both principal and interest, from taxes levied or 24 25 by law required to be levied or from adequate special revenues pledged or 26 otherwise appropriated or by law required to be provided for making these 27 payments, but shall not be obligations eligible for investment under this 28 paragraph if payable solely out of special assessments on properties 29 benefited by local improvements; or

(v) the government of any other country that is a member of the
organization for economic cooperation and development and whose
government obligations are rated "A" or higher, or the equivalent, by a
rating agency recognized by the securities valuation office of the national
association of insurance commissioners.

(B) Obligations that are issued in the United States, or that are dollar
denominated and issued in a non-U.S. market, by a solvent United States
institution, other than an insurance company, or that are assumed or
guaranteed by a solvent United States institution, other than an insurance
company and that are not in default as to principal or interest if the
obligations:

41 (i) Are rated "A" or higher, or the equivalent, by a securities rating
42 agency recognized by the securities valuation office of the national
43 association of insurance commissioners, or if not so rated, are similar in

structure and other material respects to other obligations of the same
 institution that are so rated;

3 (ii) are insured by at least one authorized insurer, other than the 4 investing insurer or a parent, subsidiary or affiliate of the investing insurer, 5 licensed to insure obligations in this state and, after considering the 6 insurance, are rated "AAA," or the equivalent, by a securities rating 7 agency recognized by the securities valuation office of the national 8 association of insurance commissioners; or

9 (iii) have been designated as class one or class two by the securities 10 valuation office of the national association of insurance commissioners.

11 (C) Obligations issued, assumed or guaranteed by a solvent non-U.S. 12 institution chartered in a country that is a member of the organization for 13 economic cooperation and development or obligations of United States 14 corporations issued in a non-U.S. currency, provided that in either case the 15 obligations are rated "A" or higher, or the equivalent, by a rating agency 16 recognized by the securities valuation office of the national association of 17 insurance commissioners.

(D) An investment made pursuant to the provisions of subparagraph(A), (B) or (C) shall be subject to the following additional limitations:

(i) An investment in or loan upon the obligations of an institution
other than an institution that issues mortgage-related securities shall not
exceed 5% of the assets of the trust;

(ii) an investment in any one mortgage-related security shall not
 exceed 5% of the assets of the trust;

(iii) the aggregate total investment in mortgage-related securities shall
 not exceed 25% of the assets of the trust; and

(iv) preferred or guaranteed shares issued or guaranteed by a solvent
United States institution are permissible investments if all of the
institution's obligations are eligible as investments under subparagraphs
(B)(i) and (B)(iii), but shall not exceed 2% of the assets of the trust.

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(E) As used in this section:

(i) "Mortgage-related security" means an obligation that is rated
"AA" or higher, or the equivalent, by a securities rating agency recognized
by the securities valuation office of the national association of insurance
commissioners and that either:

(a) Represents ownership of one or more promissory notes or
certificates of interest or participation in the notes, including any rights
designed to assure servicing of, or the receipt or timeliness of receipt by
the holders of the notes, certificates, or participation of amounts payable
under, the notes, certificates or participation, that:

41 (1) Are directly secured by a first lien on a single parcel of real estate,
42 including stock allocated to a dwelling unit in a residential cooperative
43 housing corporation, upon which is located a dwelling or mixed residential

and commercial structure, or on a residential manufactured home, as
 defined in 42 U.S.C. § 5402(6), whether the manufactured home is
 considered real or personal property under the laws of the state in which it
 is located; and

5 (2) were originated by a savings and loan association, savings bank, 6 commercial bank, credit union, insurance company, or similar institution 7 that is supervised and examined by a federal or state housing authority, or 8 by a mortgagee approved by the United States secretary of housing and urban development pursuant to 12 U.S.C. §§ 1709 and 1715b, or, where 9 the notes involve a lien on the manufactured home, by an institution or by 10 a financial institution approved for insurance by the United States 11 secretary of housing and urban development pursuant to 12 U.S.C. § 1703; 12 13 or

(b) is secured by one or more promissory notes or certificates of
deposit or participations in the notes, with or without recourse to the
insurer of the notes, and, by its terms, provides for payments of principal
in relation to payments, or reasonable projections of payments, or notes
meeting the requirements of subclauses (a)(1) and (a)(2);

(ii) "promissory note," when used in connection with a manufactured
 home, shall also include a loan, advance or credit sale as evidenced by a
 retail installment sales contract or other instrument.

(F) *Equity interests.* (i) Investments in common shares or partnership
 interests of a solvent United States institution are permissible if:

(a) Its obligations and preferred shares, if any, are eligible asinvestments under this subsection; and

26 (b) the equity interests of the institution, except an insurance 27 company, are registered on a national securities exchange as provided in 28 the federal securities exchange act of 1934, 15 U.S.C. §§ 78a to 78kk, or 29 otherwise registered pursuant to that act, and if otherwise registered, price 30 quotations for them are furnished through a nationwide automated 31 quotations system approved by the financial industry regulatory authority. 32 or its successor organization. A trust shall not invest in equity interests 33 under this subparagraph an amount exceeding 1% of the assets of the trust 34 even though the equity interests are not so registered and are not issued by 35 an insurance company;

(ii) investments in common shares of a solvent institution organized
under the laws of a country that is a member of the organization for
economic cooperation and development, if:

(a) All its obligations are rated "A" or higher, or the equivalent, by a
 rating agency recognized by the securities valuation office of the national
 association of insurance commissioners; and

42 (b) the equity interests of the institution are registered on a securities 43 exchange regulated by the government of a country that is a member of the 1 organization for economic cooperation and development;

2 (iii) an investment in or loan upon any one institution's outstanding 3 equity interests shall not exceed 1% of the assets of the trust. The cost of 4 an investment in equity interests made pursuant to this subparagraph, when 5 added to the aggregate cost of other investments in equity interests held 6 pursuant to this paragraph, shall not exceed 10% of the assets in the trust.

7 (G) Obligations issued, assumed or guaranteed by a multinational 8 development bank, provided the obligations are rated "A," or higher, or the 9 equivalent, by a rating agency recognized by the securities valuation office 10 of the national association of insurance commissioners.

(H) *Investment companies.* (i) Securities of an investment company
registered pursuant to the investment company act of 1940, 15 U.S.C. §
80a, are permissible investments if the investment company:

(a) Invests at least 90% of its assets in the types of securities that
qualify as an investment under subparagraph (A), (B) or (C) or invests in
securities that are determined by the commissioner to be substantively
similar to the types of securities set forth in subparagraph (A), (B) or (C);
or

(b) invests at least 90% of its assets in the types of equity intereststhat qualify as an investment under subparagraph (F)(i).

(ii) investments made by a trust in investment companies under thisparagraph shall not exceed the following limitations:

(a) An investment in an investment company qualifying under clause
(i)(a) shall not exceed 10% of the assets in the trust and the aggregate
amount of investment in qualifying investment companies shall not exceed
25% of the assets in the trust; and

(b) investments in an investment company qualifying under clause (i)
(b) shall not exceed 5% of the assets in the trust and the aggregate amount
of investment in qualifying investment companies shall be included when
calculating the permissible aggregate value of equity interests pursuant to
subparagraph (F)(i);

(I) Letters of credit. (i) In order for a letter of credit to qualify as an asset of the trust, the trustee shall have the right and the obligation pursuant to the deed of trust or some other binding agreement, as duly approved by the commissioner, to immediately draw down the full amount of the letter of credit and hold the proceeds in trust for the beneficiaries of the trust if the letter of credit will otherwise expire without being renewed or replaced; and

(ii) the trust agreement shall provide that the trustee shall be liable for
its negligence, willful misconduct or lack of good faith. The failure of the
trustee to draw against the letter of credit in circumstances where such
draw would be required shall be deemed to be negligence or willful
misconduct.

1 (6) A specific security provided to a ceding insurer by an assuming 2 insurer pursuant to subsection (k) shall be applied, until exhausted, to the 3 payment of liabilities of the assuming insurer to the ceding insurer holding 4 the specific security prior to, and as a condition precedent for, presentation 5 of a claim by the ceding insurer for payment by a trustee of a trust 6 established by the assuming insurer pursuant to this section.

7 (g) Credit for reinsurance - certified reinsurers. (1) Pursuant to 8 K.S.A. 40-221a(a)(5), and amendments thereto, the commissioner shall allow credit for reinsurance ceded by a domestic insurer to an assuming 9 insurer that has been certified as a reinsurer in this state at all times for 10 which statutory financial statement credit for reinsurance is claimed under 11 12 this section. The credit allowed shall be based upon the security held by or on behalf of the ceding insurer in accordance with a rating assigned to the 13 certified reinsurer by the commissioner. The security shall be in a form 14 consistent with the provisions of K.S.A. 40-221a(a)(5) and 40-221a(b), 15 16 and amendments thereto, and subsection (k), (l) or (m). The amount of 17 security required in order for full credit to be allowed shall correspond 18 with the following requirements:

19	(A)	Ratings	Security Required	
20		Saarra 1	00/	

20	Secure - 1	0%
21	Secure - 2	10%

22	Soouro	2	20%
22	Secure -	3	20%

23 Secure - 4 50%

24	Secure - 5	75%
	Secure c	1010

25 Secure - 6 100%

(B) Affiliated reinsurance transactions shall receive the same
 opportunity for reduced security requirements as all other reinsurance
 transactions.

(C) The commissioner shall require the certified reinsurer to post for
the benefit of the ceding insurer or its estate, 100% security upon the entry
of an order of rehabilitation, liquidation or conservation against the ceding
insurer.

33 (D) In order to facilitate the prompt payment of claims, a certified reinsurer shall not be required to post security for catastrophe recoverables 34 for a period of one year from the date of the first instance of a liability 35 reserve entry by the ceding company as a result of a loss from a 36 37 catastrophic occurrence as recognized by the commissioner. The one-year 38 deferral period shall be contingent upon the certified reinsurer continuing 39 to pay claims in a timely manner. Reinsurance recoverables for only the following lines of business as reported on the national association of 40 insurance commissioners annual financial statement related specifically to 41 42 the catastrophic occurrence shall be included in the deferral:

43 (i) Line 1: Fire.

- 1 Line 2: Allied lines. (ii)
- 2 (iii) Line 3: Farmowners multiple peril.
- (iv) Line 4: Homeowners multiple peril. 3
- 4 (v) Line 5: Commercial multiple peril.
- 5 (vi) Line 9: Inland marine.
- 6 (vii) Line 12: Earthquake. 7
  - (viii) Line 21: Auto physical damage.

8 (E) Credit for reinsurance under this section shall apply only to 9 reinsurance contracts entered into or renewed on or after the effective date 10 of the certification of the assuming insurer. Any reinsurance contract entered into prior to the effective date of the certification of the assuming 11 12 insurer that is subsequently amended after the effective date of the 13 certification of the assuming insurer, or a new reinsurance contract, covering any risk for which collateral was provided previously, shall only 14 15 be subject to this section with respect to losses incurred and reserves 16 reported from and after the effective date of the amendment or new 17 contract

18 (F) Nothing in this section shall prohibit the parties to a reinsurance 19 agreement from agreeing to provisions establishing security requirements 20 that exceed the minimum security requirements established for certified 21 reinsurers under this section.

22 (2) Certification procedure. (A) The commissioner shall post notice 23 on the insurance department's website promptly upon receipt of any 24 application for certification, including instructions on how members of the 25 public may respond to the application. The commissioner shall not take 26 final action on the application until at least 30 days after posting the notice 27 required by this paragraph.

28 (B) The commissioner shall issue written notice to an assuming 29 insurer that has made application and been approved as a certified 30 reinsurer. Included in such notice shall be the rating assigned the certified 31 reinsurer in accordance with subsection (g)(2)(A). The commissioner shall 32 publish a list of all certified reinsurers and their ratings.

33 (C) In order to be eligible for certification, the assuming insurer shall 34 meet the following requirements:

35 (i) The assuming insurer must be domiciled and licensed to transact 36 insurance or reinsurance in a qualified jurisdiction, as determined by the 37 commissioner pursuant to subsection (g)(3);

38 (ii) the assuming insurer shall maintain capital and surplus, or its 39 equivalent, of no less than \$250,000,000 calculated in accordance with 40 subsection (g)(2)(D)(viii). This requirement may also be satisfied by an 41 association including incorporated and individual unincorporated 42 underwriters having minimum capital and surplus equivalents, net of 43 liabilities, of at least \$250,000,000 and a central fund containing a balance

of at least \$250,000,000; 1

2 (iii) the assuming insurer shall maintain financial strength ratings from two or more rating agencies deemed acceptable by the commissioner. 3 These ratings shall be based on interactive communication between the 4 rating agency and the assuming insurer and shall not be based solely on 5 6 publicly available information. These financial strength ratings shall be 7 one factor used by the commissioner in determining the rating that is 8 assigned to the assuming insurer. Acceptable rating agencies include the 9 following:

- 10 (a) Standard & poor's;
- (b) Moody's investors service; 11
- (c) Fitch ratings; 12

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- (d) a.m. best company; or
- (e) any other nationally recognized statistical rating organization; and
- (iv) the certified reinsurer shall comply with any other requirements 15 16 reasonably imposed by the commissioner.

17 (D) Each certified reinsurer shall be rated on a legal entity basis, with due consideration being given to the group rating where appropriate, 18 19 except that an association including incorporated and individual 20 unincorporated underwriters that has been approved to do business as a 21 single certified reinsurer may be evaluated on the basis of its group rating. 22 Factors that may be considered as part of the evaluation process include, 23 but are not limited to, the following:

(i) The certified reinsurer's financial strength rating from an 24 25 acceptable rating agency. The maximum rating that a certified reinsurer 26 may be assigned shall correspond to its financial strength rating as outlined 27 in the table below. The commissioner shall use the lowest financial 28 strength rating received from an approved rating agency in establishing the maximum rating of a certified reinsurer. A failure to obtain or maintain at 29 30 least two financial strength ratings from acceptable rating agencies shall 31 result in loss of eligibility for certification;

32 (ii) the business practices of the certified reinsurer in dealing with its ceding insurers, including its record of compliance with reinsurance 33 contractual terms and obligations: 34

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35	Ratings	Best	S&P	Moody's	Fitch
36	Secure - 1	A++	AAA	Aaa	AAA
37	Secure - 2	A+	AA+, AA	Aa1, Aa2, Aa3	AA+, AA,
38			AA-		AA-
39	Secure - 3	А	A+, A	A1, A2	A+, A
40	Secure - 4	A-	A-	A3	A-
41	Secure - 5	B++, B+	BBB+, BBB	Baa1, Baa2,	BBB+, BBB,
42			BBB-	Baa3	BBB-
43	Vulnerable				

43 Vulnerable

1	- 6	B, B-,	BB+, BB,	Ba1, Ba2,	BB+, BB,
2		C++, C+	BB-, B+,	Ba3, B1,	BB-, B+, B
3			В,		
4		C, C-, D	B, CCC,	B2, B3, Caa,	B-, CCC+,
5			CC,		CC,
6		E, F	C, D, R	Ca, C	CCC-, DD
_	() 0			1.1 .1 .1 . 10	

7 (iii) for certified reinsurers domiciled in the United States, a review of 8 the most recent applicable national association of insurance commissioners 9 annual statement blank, either schedule f, for property and casualty 10 reinsurers, or schedule s, for life and health reinsurers, in accordance with 11 the instructions and as prescribed and adopted by the national association 12 of insurance commissioners and the commissioner of insurance;

(iv) for certified reinsurers not domiciled in the United States, a review annually of form cr-f, for property and casualty reinsurers, in accordance with the instructions and as prescribed and adopted by the national association of insurance commissioners and the commissioner of insurance or form cr-s, for life and health reinsurers, in accordance with the instructions and as prescribed and adopted by the national association of insurance commissioners and the commissioner of insurance;

(v) the reputation of the certified reinsurer for prompt payment of
claims under reinsurance agreements, based on an analysis of ceding
insurers' schedule f reporting of overdue reinsurance recoverables,
including the proportion of obligations that are more than 90 days past due
or are in dispute, with specific attention given to obligations payable to
companies that are in administrative supervision or receivership;

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(vi) regulatory actions against the certified reinsurer;

(vii) the report of the independent auditor on the financial statements
of the insurance enterprise, on the basis described in clause (viii);

(viii) for certified reinsurers not domiciled in the United States, audited financial statements, regulatory filings, and actuarial opinion, as filed with the non-U.S. jurisdiction supervisor, with a translation into English. Upon the initial application for certification, the commissioner will consider audited financial statements for the last two years filed with its non-U.S. jurisdiction supervisor;

(ix) the liquidation priority of obligations to a ceding insurer in the
 certified reinsurer's domiciliary jurisdiction in the context of an insolvency
 proceeding;

(x) a certified reinsurer's participation in any solvent scheme of
arrangement, or similar procedure, that involves United States ceding
insurers. The commissioner shall receive prior notice from a certified
reinsurer that proposes participation by the certified reinsurer in a solvent
scheme of arrangement; and

43 (xi) any other information deemed relevant by the commissioner.

1 (E) Based on the analysis conducted under subparagraph (D)(v) of a 2 certified reinsurer's reputation for prompt payment of claims, the 3 commissioner may make appropriate adjustments in the security the 4 certified reinsurer is required to post to protect its liabilities to United States ceding insurers, provided that the commissioner shall, at a 5 6 minimum, increase the security the certified reinsurer is required to post 7 by one rating level under subparagraph (D)(i) if the commissioner finds 8 that.

9 (i) More than 15% of the certified reinsurer's ceding insurance clients 10 have overdue reinsurance recoverables on paid losses of 90 days or more 11 that are not in dispute and that exceed \$100,000 for each cedent; or

(ii) the aggregate amount of reinsurance recoverables on paid losses
that are not in dispute that are overdue by 90 days or more exceeds
\$50,000,000.

15 (F) The assuming insurer shall submit a properly executed form cr-1 16 in accordance with the instructions and as prescribed and adopted by the 17 national association of insurance commissioners and the commissioner of 18 insurance as evidence of its submission to the jurisdiction of this state, 19 appointment of the commissioner as an agent for service of process in this 20 state, and agreement to provide security for 100% of the assuming 21 insurer's liabilities attributable to reinsurance ceded by United States 22 ceding insurers if it resists enforcement of a final United States judgment. 23 The commissioner shall not certify any assuming insurer that is domiciled 24 in a jurisdiction that the commissioner has determined does not adequately 25 and promptly enforce final United States judgments or arbitration awards.

26 (G) The certified reinsurer shall agree to meet applicable information 27 filing requirements as determined by the commissioner, both with respect 28 to an initial application for certification and on an ongoing basis. All 29 information submitted by certified reinsurers that is not otherwise public 30 information subject to disclosure shall be exempted from disclosure under 31 the open records act, K.S.A. 45-215, et seq., and amendments thereto, and shall be withheld from public disclosure. The provisions of this 32 33 subparagraph providing for the confidentiality of public records shall 34 expire on July 1, 2026, unless the legislature reviews and continues such 35 provisions in accordance with K.S.A. 45-229, and amendments thereto. 36 The applicable information filing requirements are, as follows:

(i) Notification within 10 days of any regulatory actions taken against
the certified reinsurer, any change in the provisions of its domiciliary
license or any change in rating by an approved rating agency, including a
statement describing such changes and the reasons therefor;

41 (ii) annually, form cr-f or cr-s, in accordance with the instructions and
42 as prescribed and adopted by the national association of insurance
43 commissioners and the commissioner of insurance as applicable;

1 (iii) annually, the report of the independent auditor on the financial 2 statements of the insurance enterprise, on the basis described in clause 3 (iv);

4 (iv) annually, the most recent audited financial statements, regulatory 5 filings and actuarial opinion, as filed with the certified reinsurer's 6 supervisor, with a translation into English. Upon the initial certification, 7 audited financial statements for the last two years filed with the certified 8 reinsurer's supervisor;

9 (v) at least annually, an updated list of all disputed and overdue 10 reinsurance claims regarding reinsurance assumed from United States 11 domestic ceding insurers;

(vi) a certification from the certified reinsurer's domestic regulator
 that the certified reinsurer is in good standing and maintains capital in
 excess of the jurisdiction's highest regulatory action level; and

15 (vii) any other information that the commissioner may reasonably 16 require.

17 (H) Change in rating or revocation of certification. (i) In the case of a 18 downgrade by a rating agency or other disqualifying circumstance, the 19 commissioner upon written notice shall assign a new rating to the certified 20 reinsurer in accordance with the requirements of subsection (g)(2)(D)(i).

(ii) The commissioner shall have the authority to suspend, revoke or otherwise modify a certified reinsurer's certification at any time if the certified reinsurer fails to meet its obligations or security requirements under this section, or if other financial or operating results of the certified reinsurer, or documented significant delays in payment by the certified reinsurer lead the commissioner to reconsider the certified reinsurer's ability or willingness to meet its contractual obligations.

28 (iii) If the rating of a certified reinsurer is upgraded by the 29 commissioner, the certified reinsurer may meet the security requirements 30 applicable to its new rating on a prospective basis, but the commissioner 31 shall require the certified reinsurer to post security under the previously 32 applicable security requirements as to all contracts in force on or before 33 the effective date of the upgraded rating. If the rating of a certified 34 reinsurer is downgraded by the commissioner, the commissioner shall 35 require the certified reinsurer to meet the security requirements applicable 36 to its new rating for all business it has assumed as a certified reinsurer.

(iv) Upon revocation of the certification of a certified reinsurer by the commissioner, the assuming insurer shall be required to post security in accordance with subsection (k) in order for the ceding insurer to continue to take credit for reinsurance ceded to the assuming insurer. If funds continue to be held in trust in accordance with subsection (f), the commissioner may allow additional credit equal to the ceding insurer's pro rata share of such funds, discounted to reflect the risk of uncollectibility

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and anticipated expenses of trust administration. Notwithstanding the
 change of a certified reinsurer's rating or revocation of its certification, a
 domestic insurer that has ceded reinsurance to that certified reinsurer may
 not be denied credit for reinsurance for a period of three months for all
 reinsurance ceded to that certified reinsurer, unless the reinsurance is
 found by the commissioner to be at high risk of uncollectibility.

7 (3) *Qualified jurisdictions*. (A) If, upon conducting an evaluation 8 under this section with respect to the reinsurance supervisory system of 9 any non-U.S. assuming insurer, the commissioner determines that the 10 jurisdiction qualifies to be recognized as a qualified jurisdiction, the 11 commissioner shall publish notice and evidence of such recognition in an 12 appropriate manner. The commissioner may establish a procedure to 13 withdraw recognition of those jurisdictions that are no longer qualified.

(B) In order to determine whether the domiciliary jurisdiction of a 14 15 non-U.S. assuming insurer is eligible to be recognized as a qualified 16 jurisdiction, the commissioner shall evaluate the reinsurance supervisory 17 system of the non-U.S. jurisdiction, both initially and on an ongoing basis, 18 and consider the rights, benefits and the extent of reciprocal recognition 19 afforded by the non-U.S. jurisdiction to reinsurers licensed and domiciled in the United States. The commissioner shall determine the appropriate 20 21 approach for evaluating the qualifications of such jurisdictions, and create 22 and publish a list of jurisdictions whose reinsurers may be approved by the 23 commissioner as eligible for certification. A qualified jurisdiction shall 24 agree to share information and cooperate with the commissioner with 25 respect to all certified reinsurers domiciled within that jurisdiction. 26 Additional factors to be considered in determining whether to recognize a 27 qualified jurisdiction, in the discretion of the commissioner, include, but 28 are not limited to, the following:

(i) The framework under which the assuming insurer is regulated;

(ii) the structure and authority of the domiciliary regulator withregard to solvency regulation requirements and financial surveillance;

(iii) the substance of financial and operating standards for assuminginsurers in the domiciliary jurisdiction;

(iv) the form and substance of financial reports required to be filed or
 made publicly available by reinsurers in the domiciliary jurisdiction and
 the accounting principles used;

(v) the domiciliary regulator's willingness to cooperate with United
 States regulators in general and the commissioner in particular;

(vi) the history of performance by assuming insurers in thedomiciliary jurisdiction;

41 (vii) any documented evidence of substantial problems with the 42 enforcement of final judgments in the domiciliary jurisdiction. A 43 jurisdiction shall not be considered to be a qualified jurisdiction if the commissioner has determined that it does not adequately and promptly
 enforce final United States judgments or arbitration awards;

3 (viii) any relevant international standards or guidance with respect to 4 mutual recognition of reinsurance supervision adopted by the international 5 association of insurance supervisors or successor organization; and

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(ix) any other matters deemed relevant by the commissioner.

7 (C) A list of qualified jurisdictions shall be published through the 8 national association of insurance commissioners committee process. The 9 commissioner shall consider this list in determining qualified jurisdictions. 10 If the commissioner approves a jurisdiction as qualified that does not 11 appear on the list of qualified jurisdictions, the commissioner shall provide 12 thoroughly documented justification with respect to the criteria provided 13 under paragraphs (3)(B)(i) through (ix).

(D) United States jurisdictions that meet the requirements for
 accreditation under the national association of insurance commissioners
 financial standards and accreditation program shall be recognized as
 qualified jurisdictions.

(4) Recognition of certification issued by a national association of 18 19 insurance commissioners accredited jurisdiction. (A) If an applicant for 20 certification has been certified as a reinsurer in a national association of 21 insurance commissioners-accredited jurisdiction, the commissioner has the 22 discretion to defer to that jurisdiction's certification and to defer to the 23 rating assigned by that jurisdiction, if the assuming insurer submits a 24 properly executed form cr-1 in accordance with the instructions and as 25 prescribed and adopted by the national association of insurance 26 commissioners and the commissioner of insurance and such additional 27 information as the commissioner requires. The assuming insurer shall be 28 considered to be a certified reinsurer in this state.

(B) Any change in the certified reinsurer's status or rating in the other jurisdiction shall apply automatically in this state as of the date it takes effect in the other jurisdiction. The certified reinsurer shall notify the commissioner of any change in its status or rating within 10 days after receiving notice of the change.

(C) The commissioner may withdraw recognition of the other
 jurisdiction's rating at any time and assign a new rating in accordance with
 subsection (g)(2)(H).

37 (D) The commissioner may withdraw recognition of the other 38 jurisdiction's certification at any time, with written notice to the certified 39 reinsurer. Unless the commissioner suspends or revokes the certified 40 reinsurer's certification in accordance with subsection (g)(2)(H), the 41 certified reinsurer's certification shall remain in good standing in this state 42 for a period of three months, and such period shall be extended if 43 additional time is necessary to consider the assuming insurer's application 1 for certification in this state.

2 (5) *Mandatory funding clause*. In addition to the clauses required 3 under subsection (n) reinsurance contracts entered into or renewed under 4 this section shall include a proper funding clause, that requires the certified 5 reinsurer to provide and maintain security in an amount sufficient to avoid 6 the imposition of any financial statement penalty on the ceding insurer 7 under this section for reinsurance ceded to the certified reinsurer.

8 (6) The commissioner shall comply with all reporting and notification 9 requirements that may be established by the national association of 10 insurance commissioners with respect to certified reinsurers and qualified 11 jurisdictions.

12 (h) *Credit for reinsurance – reciprocal jurisdictions.* (1) Pursuant to 13 K.S.A. 40-221a(a)(6), and amendments thereto, the commissioner shall 14 allow credit for reinsurance ceded by a domestic insurer to an assuming 15 insurer that is licensed to write reinsurance by, and has its head office or is 16 domiciled in, a reciprocal jurisdiction, and that meets the other 17 requirements of this section.

18 (2) A "reciprocal jurisdiction" is a jurisdiction, as designated by the 19 commissioner pursuant to subsection (h)(4), that meets one of the 20 following:

21 (A) A non-U.S. jurisdiction that is subject to an in-force covered 22 agreement with the United States, each within its legal authority, or, in the 23 case of a covered agreement between the United States and the European union, is a member state of the European union. For purposes of this 24 subsection, a "covered agreement" is an agreement entered into pursuant to 25 the dodd-frank wall street reform and consumer protection act. 31 U.S.C. 26 §§ 313 and 314, that is currently in effect or in a period of provisional 27 28 application and addresses the elimination, under specified conditions, of 29 collateral requirements as a condition for entering into any reinsurance agreement with a ceding insurer domiciled in this state or for allowing the 30 31 ceding insurer to recognize credit for reinsurance;

(B) a United States jurisdiction that meets the requirements for
 accreditation under the national association of insurance commissioners
 financial standards and accreditation program; or

35 (C) a qualified jurisdiction, as determined by the commissioner 36 pursuant to K.S.A. 40-221a(a)(5)(C), and amendments thereto, and 37 subsection (g)(3), that is not otherwise described in subparagraph (A) or 38 (B) and that the commissioner determines meets all of the following 39 additional requirements:

(i) Provides that an insurer that has its head office or is domiciled in
such qualified jurisdiction shall receive credit for reinsurance ceded to a
United States-domiciled assuming insurer in the same manner as credit for
reinsurance is received for reinsurance assumed by insurers domiciled in

1 such qualified jurisdiction;

2 (ii) does not require a United States-domiciled assuming insurer to 3 establish or maintain a local presence as a condition for entering into a 4 reinsurance agreement with any ceding insurer subject to regulation by the 5 non-U.S. jurisdiction or as a condition for allowing the ceding insurer to 6 recognize credit for such reinsurance;

7 (iii) recognizes the United States state regulatory approach to group 8 supervision and group capital, by providing written confirmation by a 9 competent regulatory authority, in such qualified jurisdiction, that insurers 10 and insurance groups that are domiciled or maintain their headquarters in this state or another jurisdiction accredited by the national association of 11 12 insurance commissioners shall be subject only to worldwide prudential 13 insurance group supervision including worldwide group governance, solvency and capital and reporting, as applicable, by the commissioner or 14 15 the commissioner of the domiciliary state and shall not be subject to group 16 supervision at the level of the worldwide parent undertaking of the 17 insurance or reinsurance group by the qualified jurisdiction; and

18 (iv) provides written confirmation by a competent regulatory 19 authority in such qualified jurisdiction that information regarding insurers 20 and their parent, subsidiary or affiliated entities, if applicable, shall be 21 provided to the commissioner in accordance with a memorandum of 22 understanding or similar document between the commissioner and such 23 qualified jurisdiction, including, but not limited to, the international association of insurance supervisors multilateral memorandum of 24 25 understanding or other multilateral memoranda of understanding 26 coordinated by the national association of insurance commissioners.

(3) Credit shall be allowed when the reinsurance is ceded from an
 insurer domiciled in this state to an assuming insurer meeting each of the
 conditions set forth below.

30 (A) The assuming insurer shall be licensed to transact reinsurance by,31 and have its head office or be domiciled in, a reciprocal jurisdiction.

32 (B) The assuming insurer shall have and maintain on an ongoing 33 basis minimum capital and surplus, or its equivalent, calculated on at least 34 an annual basis as of the preceding December 31 or at the annual date 35 otherwise statutorily required to be reported to the reciprocal jurisdiction, 36 and confirmed as set forth in paragraph (3)(G) according to the 37 methodology of its domiciliary jurisdiction, in the following amounts:

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(i) Not less than \$250,000,000; or

39 (ii) if the assuming insurer is an association, including incorporated40 and individual unincorporated underwriters:

(a) Minimum capital and surplus equivalent, net of liabilities, or own
funds of the equivalent of at least \$250,000,000; and

43 (b) a central fund containing a balance of the equivalent of at least

1 \$250,000,000.

2 (C) The assuming insurer shall have and maintain on an ongoing3 basis a minimum solvency or capital ratio, as applicable, as follows:

4 (i) If the assuming insurer has its head office or is domiciled in a 5 reciprocal jurisdiction, as defined in subsection (h)(2)(A), the ratio 6 specified in the applicable covered agreement;

7 (ii) if the assuming insurer is domiciled in a reciprocal jurisdiction, as 8 defined in subsection (h)(2)(B), a risk-based capital ratio of 300% of the 9 authorized control level, calculated in accordance with the formula 10 developed by the national association of insurance commissioners; or

11 (iii) if the assuming insurer is domiciled in a reciprocal jurisdiction, 12 as defined in subsection (h)(2)(C), after consultation with the reciprocal 13 jurisdiction and considering any recommendations published through the 14 national association of insurance commissioners committee process, such 15 solvency or capital ratio as the commissioner determines to be an effective 16 measure of solvency.

17 (D) The assuming insurer shall agree to and provide adequate 18 assurance, in the form of a properly executed form rj-1 in accordance with 19 the instructions and as prescribed and adopted by the national association 20 of insurance commissioners and the commissioner of insurance, of its 21 agreement to the following:

(i) The assuming insurer shall agree to provide prompt written notice
 and explanation to the commissioner if it falls below the minimum
 requirements set forth in subparagraph (B) or (C) or if any regulatory
 action is taken against it for serious noncompliance with applicable law;
 and

(ii) the assuming insurer shall consent in writing to the jurisdiction of
the courts of this state and to the appointment of the commissioner as
agent for service of process.

(a) The commissioner may also require that such consent be provided
 and included in each reinsurance agreement under the commissioner's
 jurisdiction.

(b) Nothing in this provision shall limit or in any way alter the
capacity of parties to a reinsurance agreement to agree to alternative
dispute resolution mechanisms, except to the extent such agreements are
unenforceable under applicable insolvency or delinquency laws.

(iii) The assuming insurer shall consent in writing to pay all final
judgments, wherever enforcement is sought, obtained by a ceding insurer,
that have been declared enforceable in the territory where the judgment
was obtained.

41 (iv) Each reinsurance agreement shall include a provision requiring
42 the assuming insurer to provide security in an amount equal to 100% of the
43 assuming insurer's liabilities attributable to reinsurance ceded pursuant to

that agreement if the assuming insurer resists enforcement of a final 1 2 judgment that is enforceable under the law of the jurisdiction in which it 3 was obtained or a properly enforceable arbitration award, whether 4 obtained by the ceding insurer or by its legal successor on behalf of its 5 estate, if applicable, assuming insurer resists enforcement of a final 6 judgment that is enforceable under the law of the jurisdiction in which it 7 was obtained or a properly enforceable arbitration award, whether 8 obtained by the ceding insurer or by its legal successor on behalf of its 9 estate, if applicable.

(v) The assuming insurer shall confirm that it is not presently 10 participating in any solvent scheme of arrangement that involves this 11 12 state's ceding insurers and agree to notify the ceding insurer and the 13 commissioner and to provide 100% security to the ceding insurer consistent with the terms of the scheme, if the assuming insurer enters into 14 15 such a solvent scheme of arrangement. Such security shall be in a form consistent with the provisions of K.S.A. 40-221a(a)(5) and (b), and 16 17 amendments thereto, and subsections (k), (l) and (m). For purposes of this 18 section, the term "solvent scheme of arrangement" means a foreign or alien 19 statutory or regulatory compromise procedure subject to requisite majority 20 creditor approval and judicial sanction in the assuming insurer's home 21 jurisdiction either to finally commute liabilities of duly noticed classed 22 members or creditors of a solvent debtor, or to reorganize or restructure the 23 debts and obligations of a solvent debtor on a final basis, and that may be 24 subject to judicial recognition and enforcement of the arrangement by a 25 governing authority outside the ceding insurer's home jurisdiction.

26 (vi) The assuming insurer shall agree in writing to meet the 27 applicable information filing requirements as set forth in subparagraph (E).

(E) The assuming insurer or its legal successor shall provide, if
 requested by the commissioner, on behalf of itself and any legal
 predecessors, the following documentation to the commissioner:

(i) For the two years preceding entry into the reinsurance agreement
and annually thereafter, the assuming insurer's annual audited financial
statements, in accordance with the applicable law of the jurisdiction of its
head office or domiciliary jurisdiction, as applicable, including the
external audit report;

(ii) for the two years preceding entry into the reinsurance agreement,
the solvency and financial condition report or actuarial opinion, if filed
with the assuming insurer's supervisor;

(iii) prior to entry into the reinsurance agreement and not more than
semi-annually thereafter, an updated list of all disputed and overdue
reinsurance claims outstanding for 90 days or more, regarding reinsurance
assumed from ceding insurers domiciled in the United States; and

43 (iv) prior to entry into the reinsurance agreement and not more than

semi-annually thereafter, information regarding the assuming insurer's
 assumed reinsurance by the ceding insurer, ceded reinsurance by the
 assuming insurer, and reinsurance recoverable on paid and unpaid losses
 by the assuming insurer to allow for the evaluation of the criteria set forth
 in subparagraph (F).

6 (F) The assuming insurer shall maintain a practice of prompt payment 7 of claims under reinsurance agreements. The lack of prompt payment will 8 be evidenced if any of the following criteria is met:

9 (i) More than 15% of the reinsurance recoverables from the assuming 10 insurer are overdue and in dispute as reported to the commissioner;

(ii) more than 15% of the assuming insurer's ceding insurers or
reinsurers have overdue reinsurance recoverable on paid losses of 90 days
or more that are not in dispute and that exceed \$100,000 for each ceding
insurer, or as otherwise specified in a covered agreement; or

(iii) the aggregate amount of reinsurance recoverable on paid losses
that are not in dispute, but are overdue by 90 days or more, exceeds
\$50,000,000, or as otherwise specified in a covered agreement.

18 (G) The assuming insurer's supervisory authority shall confirm to the 19 commissioner on an annual basis that the assuming insurer complies with 20 the requirements set forth in subparagraphs (B) and (C).

(H) Nothing in this provision precludes an assuming insurer from
 providing the commissioner with information on a voluntary basis.

23 (4) The commissioner shall timely create and publish a list of24 reciprocal jurisdictions.

25 (A) A list of reciprocal jurisdictions is published through the national association of insurance commissioners' committee process. The 26 27 commissioner's list shall include any reciprocal jurisdiction, as defined 28 under subsections (h)(2)(A) and (B), and shall consider any other 29 reciprocal jurisdiction included on the NAIC list. The commissioner may 30 approve a jurisdiction that does not appear on the national association of 31 insurance commissioners' list of reciprocal jurisdictions as provided by 32 applicable law, regulation, or in accordance with criteria published through 33 the national association of insurance commissioner committee process.

34 (B) The commissioner may remove a jurisdiction from the list of 35 reciprocal jurisdictions upon a determination that the jurisdiction no longer 36 meets one or more of the requirements of a reciprocal jurisdiction, as 37 provided by applicable law, regulation, or in accordance with a process 38 published through the national association of insurance commissioner 39 committee process, except that the commissioner shall not remove from 40 the list a reciprocal jurisdiction, as defined under subsections (h)(2)(A) and (B). Upon removal of a reciprocal jurisdiction from this list credit for 41 42 reinsurance ceded to an assuming insurer domiciled in that jurisdiction 43 shall be allowed, if otherwise allowed pursuant to K.S.A. 40-221a, and

1 amendments thereto, or this section.

2 (5) The commissioner shall timely create and publish a list of 3 assuming insurers that have satisfied the conditions set forth in this section 4 and to which cessions shall be granted credit in accordance with this 5 section.

6 (A) If a national association of insurance commissioners accredited 7 jurisdiction has determined that the conditions set forth in paragraph (3) 8 have been met, the commissioner has the discretion to defer to that 9 jurisdiction's determination, and add such assuming insurer to the list of 10 assuming insurers to which cessions shall be granted credit in accordance commissioner may accept financial 11 with this subsection The documentation filed with another national association of insurance 12 13 commissioners accredited jurisdiction or with the national association of 14 insurance commissioners in satisfaction of the requirements of paragraph 15 (3).

16 (B) When requesting that the commissioner defer to another national 17 insurance commissioners accredited jurisdiction's association of 18 determination, an assuming insurer shall submit a properly executed form 19 ri-1 in accordance with the instructions and as prescribed and adopted by 20 the national association of insurance commissioners and the commissioner 21 of insurance and additional information as the commissioner may require. 22 A state that has received such a request shall notify other states through the 23 national association of insurance commissioners committee process and 24 provide relevant information with respect to the determination of 25 eligibility.

(6) If the commissioner determines that an assuming insurer no
longer meets one or more of the requirements under this section, the
commissioner may revoke or suspend the eligibility of the assuming
insurer for recognition under this section.

(A) While an assuming insurer's eligibility is suspended, no
reinsurance agreement issued, amended or renewed after the effective date
of the suspension qualifies for credit except to the extent that the assuming
insurer's obligations under the contract are secured in accordance with
subsection (j).

(B) If an assuming insurer's eligibility is revoked, no credit for reinsurance may be granted after the effective date of the revocation with respect to any reinsurance agreements entered into by the assuming insurer, including reinsurance agreements entered into prior to the date of revocation, except to the extent that the assuming insurer's obligations under the contract are secured in a form acceptable to the commissioner and consistent with the provisions of subsection (j).

42 (7) Before denying statement credit or imposing a requirement to post 43 security with respect to subsection (h)(6) or adopting any similar

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1 requirement that will have substantially the same regulatory impact as 2 security, the commissioner shall:

3 (A) Communicate with the ceding insurer, the assuming insurer, and 4 the assuming insurer's supervisory authority that the assuming insurer no 5 longer satisfies one of the conditions listed in paragraph (3);

6 (B) provide the assuming insurer with 30 days from the initial 7 communication to submit a plan to remedy the defect, and 90 days from 8 the initial communication to remedy the defect, except in exceptional 9 circumstances in which a shorter period is necessary for policyholder and 10 other consumer protection;

(C) after the expiration of 90 days or less, as set out in subparagraph
(B), if the commissioner determines that no or insufficient action was
taken by the assuming insurer, the commissioner may impose any of the
requirements as set out in this subsection; and

15 (D) provide a written explanation to the assuming insurer of any of 16 the requirements set out in this subsection.

17 (8) If subject to a legal process of rehabilitation, liquidation or 18 conservation, as applicable, the ceding insurer, or its representative, may 19 seek and, if determined appropriate by the court in which the proceedings 20 are pending, may obtain an order requiring that the assuming insurer post 21 security for all outstanding liabilities.

22 Credit for reinsurance required by law. Pursuant to K.S.A. 40-(i) 23 221a(a)(7), and amendments thereto, the commissioner shall allow credit for reinsurance ceded by a domestic insurer to an assuming insurer not 24 25 meeting the requirements of K.S.A. 40-221a(a)(1) through (6), and amendments thereto, but only as to the insurance of risks located in 26 27 jurisdictions where the reinsurance is required by the applicable law or 28 regulation of that jurisdiction. As used in this section, "jurisdiction" means 29 state, district or territory of the United States and any lawful national 30 government.

(j) Asset or reduction from liability for reinsurance ceded to an
 unauthorized assuming insurer not meeting the requirements of
 subsections (c) through (i).

34 (1) Pursuant to K.S.A. 40-221a(b), and amendments thereto, the 35 commissioner shall allow a reduction from liability for reinsurance ceded 36 by a domestic insurer to an assuming insurer not meeting the requirements 37 of K.S.A. 40-221a(a), and amendments thereto, in an amount not 38 exceeding the liabilities carried by the ceding insurer. The reduction shall 39 be in the amount of funds held by or on behalf of the ceding insurer, including funds held in trust for the exclusive benefit of the ceding insurer, 40 41 under a reinsurance contract with such assuming insurer as security for the payment of obligations under the reinsurance contract. The security shall 42 43 be held in the United States subject to withdrawal solely by, and under the

exclusive control of, the ceding insurer or, in the case of a trust, held in a
 qualified United States financial institution, as defined in K.S.A. 40 221a(c)(2), and amendments thereto. This security may be in the form of
 any of the following:

(A) Cash;

6 (B) securities listed by the securities valuation office of the national 7 association of insurance commissioners, including those deemed exempt 8 from filing, as defined by the purposes and procedures manual of the 9 securities valuation office and qualifying as admitted assets;

10 (C) clean, irrevocable, unconditional and "evergreen" letters of credit issued or confirmed by a qualified United States institution, as defined in 11 K.S.A. 40-221a(c), and amendments thereto, effective no later than 12 December 31 of the year for which filing is being made, and in the 13 possession of, or in trust for, the ceding insurer on or before the filing date 14 15 of its annual statement. Letters of credit meeting applicable standards of 16 issuer acceptability as of the dates of their issuance, or confirmation, shall, 17 notwithstanding the issuing, or confirming, institution's subsequent failure 18 to meet applicable standards of issuer acceptability, continue to be 19 acceptable as security until their expiration, extension, renewal, 20 modification or amendment, whichever occurs first; or

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(D) any other form of security acceptable to the commissioner.

(2) An admitted asset or a reduction from liability for reinsurance
ceded to an unauthorized assuming insurer pursuant to this section shall be
allowed only when the requirements of subsection (n) and the applicable
portions of subsection (k), (l) or (m) have been satisfied.

(k) Trust agreements qualified under subsection (j).

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(1) As used in this subsection:

(A) "Beneficiary" means the entity for whose sole benefit the trust
has been established and any successor of the beneficiary by operation of
law. If a court of law appoints a successor in interest to the named
beneficiary, then the named beneficiary includes and is limited to the court
appointed domiciliary receiver, including conservator, rehabilitator or
liquidator.

(B) "Grantor" means the entity that has established a trust for the sole
benefit of the beneficiary. When established in conjunction with a
reinsurance agreement, the grantor is the unlicensed, unaccredited
assuming insurer.

38 (C) "Obligations" means:

39 (i) Reinsured losses and allocated loss expenses paid by the ceding40 company, but not recovered from the assuming insurer;

41 (ii) reserves for reinsured losses reported and outstanding;

- 42 (iii) reserves for reinsured losses incurred but not reported; and
- 43 (iv) reserves for allocated reinsured loss expenses and unearned

1 premiums.

2 (2) *Required conditions*. (A) The trust agreement shall be entered into 3 between the beneficiary, the grantor and a trustee, that shall be a qualified 4 United States financial institution, as defined in K.S.A. 40-221a(c)(2), and 5 amendments thereto.

6 (B) The trust agreement shall create a trust account into which assets 7 shall be deposited.

8 (C) All assets in the trust account shall be held by the trustee at the 9 trustee's office in the United States.

(D) The trust agreement shall provide that:

(i) The beneficiary shall have the right to withdraw assets from the
trust account at any time, without notice to the grantor, subject only to
written notice from the beneficiary to the trustee;

(ii) no other statement or document shall be required to be presented
to withdraw assets, except that the beneficiary may be required to
acknowledge receipt of withdrawn assets;

(iii) it is not subject to any conditions or qualifications outside of thetrust agreement; and

(iv) it shall not contain references to any other agreements ordocuments except as provided for in subparagraphs (K) and (L).

21 (E) The trust agreement shall be established for the sole benefit of the 22 beneficiary.

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(F) The trust agreement shall require the trustee to:(i) Receive assets and hold all assets in a safe place;

(ii) determine that all assets are in such form that the beneficiary, or
the trustee upon direction by the beneficiary, may whenever necessary
negotiate any such assets, without consent or signature from the grantor or
any other person or entity;

(iii) furnish to the grantor and the beneficiary a statement of all assets
in the trust account upon its inception and at intervals no less frequent than
the end of each calendar quarter;

(iv) notify the grantor and the beneficiary within 10 days, of any
 deposits to or withdrawals from the trust account;

(v) upon written demand of the beneficiary, immediately take any and
all steps necessary to transfer absolutely and unequivocally all right, title
and interest in the assets held in the trust account to the beneficiary and
deliver physical custody of the assets to the beneficiary; and

(vi) allow no substitutions or withdrawals of assets from the trust account, except on written instructions from the beneficiary, except that the trustee may, without the consent of but with notice to the beneficiary, upon call or maturity of any trust asset, withdraw such asset upon condition that the proceeds are paid into the trust account.

43 (G) The trust agreement shall provide that at least 30 days, but not

more than 45 days, prior to termination of the trust account, written
 notification of termination shall be delivered by the trustee to the
 beneficiary.

4 (H) The trust agreement shall be made subject to, and governed by, 5 the laws of the state in which the trust is domiciled.

6 The trust agreement shall prohibit invasion of the trust corpus for (I)7 the purpose of paying a commission to, or reimbursing the expenses of, the 8 trustee. In order for a letter of credit to qualify as an asset of the trust, the 9 trustee shall have the right and the obligation pursuant to the deed of trust 10 or some other binding agreement, as duly approved by the commissioner, to immediately draw down the full amount of the letter of credit and hold 11 12 the proceeds in trust for the beneficiaries of the trust if the letter of credit 13 will otherwise expire without being renewed or replaced.

(J) The trust agreement shall provide that the trustee shall be liable
for its negligence, willful misconduct or lack of good faith. The failure of
the trustee to draw against the letter of credit in circumstances where such
draw would be required shall be deemed to be negligence or willful
misconduct.

19 (K) Notwithstanding other provisions of this section, when a trust 20 agreement is established in conjunction with a reinsurance agreement 21 covering risks other than life, annuities and accident and health, where it is 22 customary practice to provide a trust agreement for a specific purpose, the 23 trust agreement may provide that the ceding insurer shall undertake to use 24 and apply amounts drawn upon the trust account, without diminution 25 because of the insolvency of the ceding insurer or the assuming insurer, 26 only for the following purposes:

(i) To pay or reimburse the ceding insurer for the assuming insurer's
share under the specific reinsurance agreement regarding any losses and
allocated loss expenses paid by the ceding insurer, but not recovered from
the assuming insurer, or for unearned premiums due to the ceding insurer
if not otherwise paid by the assuming insurer;

(ii) to make payment to the assuming insurer of any amounts held in
 the trust account that exceed 102% of the actual amount required to fund
 the assuming insurer's obligations under the specific reinsurance
 agreement; or

36 (iii) where the ceding insurer has received notification of termination 37 of the trust account and where the assuming insurer's entire obligations 38 under the specific reinsurance agreement remain unliquidated and 39 undischarged 10 days prior to the termination date, to withdraw amounts 40 equal to the obligations and deposit those amounts in a separate account, in the name of the ceding insurer in any qualified United States financial 41 institution, as defined in K.S.A. 40-221a(c)(2), and amendments thereto, 42 43 apart from its general assets, in trust for such uses and purposes specified in clauses (i) and (ii) as may remain executory after such withdrawal and
 for any period after the termination date.

3 (L) Notwithstanding other provisions of this subsection, when a trust 4 agreement is established to meet the requirements of subjection (i) in 5 conjunction with a reinsurance agreement covering life, annuities or 6 accident and health risks, where it is customary to provide a trust 7 agreement for a specific purpose, the trust agreement may provide that the 8 ceding insurer shall undertake to use and apply amounts drawn upon the trust account, without diminution because of the insolvency of the ceding 9 10 insurer or the assuming insurer, only for the following purposes:

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(i) To pay or reimburse the ceding insurer for:

(a) The assuming insurer's share under the specific reinsurance
 agreement of premiums returned, but not yet recovered from the assuming
 insurer, to the owners of policies reinsured under the reinsurance
 agreement on account of cancellations of the policies; and

(b) the assuming insurer's share under the specific reinsurance
agreement of surrenders and benefits or losses paid by the ceding insurer,
but not yet recovered from the assuming insurer, under the terms and
provisions of the policies reinsured under the reinsurance agreement;

(ii) to pay to the assuming insurer amounts held in the trust account in
 excess of the amount necessary to secure the credit or reduction from
 liability for reinsurance taken by the ceding insurer; or

23 (iii) where the ceding insurer has received notification of termination 24 of the trust and where the assuming insurer's entire obligations under the 25 specific reinsurance agreement remain unliquidated and undischarged 10 days prior to the termination date, to withdraw amounts equal to the 26 27 assuming insurer's share of liabilities, to the extent that the liabilities have 28 not vet been funded by the assuming insurer, and deposit those amounts in 29 a separate account, in the name of the ceding insurer in any qualified 30 United States financial institution apart from its general assets, in trust for 31 the uses and purposes specified in clauses (i) and (ii) as may remain 32 executory after withdrawal and for any period after the termination date.

33 (M) Either the reinsurance agreement or the trust agreement shall 34 stipulate that assets deposited in the trust account shall be valued 35 according to their current fair market value and shall consist only of cash 36 in United States dollars, certificates of deposit issued by a United States 37 bank and payable in United States dollars, and investments permitted by 38 the insurance code or any combination of the above, provided investments 39 in or issued by an entity controlling, controlled by or under common 40 control with either the grantor or the beneficiary of the trust shall not 41 exceed 5% of total investments. The agreement may further specify the types of investments to be deposited. If the reinsurance agreement covers 42 43 life, annuities or accident and health risks, then the provisions required by

1 this paragraph shall be included in the reinsurance agreement.

2 (3) Permitted conditions. (A) The trust agreement may provide that the trustee may resign upon delivery of a written notice of resignation, 3 effective not less than 90 days after the beneficiary and grantor receive the 4 5 notice and that the trustee may be removed by the grantor by delivery to 6 the trustee and the beneficiary of a written notice of removal, effective not 7 less than 90 days after the trustee and the beneficiary receive the notice, 8 provided that no such resignation or removal shall be effective until a 9 successor trustee has been duly appointed and approved by the beneficiary 10 and the grantor and all assets in the trust have been duly transferred to the 11 new trustee

12 (B) The grantor may have the full and unqualified right to vote any 13 shares of stock in the trust account and to receive from time to time 14 payments of any dividends or interest upon any shares of stock or 15 obligations included in the trust account. Any interest or dividends shall be 16 either forwarded promptly upon receipt to the grantor or deposited in a 17 separate account established in the grantor's name.

(C) The trustee may be given authority to invest, and accept 18 19 substitutions of, any funds in the account, provided that no investment or 20 substitution shall be made without prior approval of the beneficiary, unless 21 the trust agreement specifies categories of investments acceptable to the 22 beneficiary and authorizes the trustee to invest funds and to accept 23 substitutions that the trustee determines are at least equal in current fair 24 market value to the assets withdrawn and that are consistent with the 25 restrictions in paragraph (4)(A)(ii).

26 (D) The trust agreement may provide that the beneficiary may at any 27 time designate a party to which all or part of the trust assets are to be 28 transferred. Transfer may be conditioned upon the trustee receiving, prior 29 to or simultaneously, other specified assets.

30 (E) The trust agreement may provide that, upon termination of the 31 trust account, all assets not previously withdrawn by the beneficiary shall, 32 with written approval by the beneficiary, be delivered over to the grantor.

4) Additional conditions applicable to reinsurance agreements. (A)
 A reinsurance agreement may contain provisions that:

(i) Require the assuming insurer to enter into a trust agreement and to
establish a trust account for the benefit of the ceding insurer, and
specifying what the agreement is to cover;

(ii) require the assuming insurer, prior to depositing assets with the trustee, to execute assignments or endorsements in blank, or to transfer legal title to the trustee of all shares, obligations or any other assets requiring assignments, in order that the ceding insurer, or the trustee upon the direction of the ceding insurer, may whenever necessary negotiate these assets without consent or signature from the assuming insurer or any 1 other entity;

2 (iii) require that all settlements of account between the ceding insurer 3 and the assuming insurer be made in cash or its equivalent; and

4 (iv) stipulate that the assuming insurer and the ceding insurer agree 5 that the assets in the trust account, established pursuant to the provisions of 6 the reinsurance agreement, may be withdrawn by the ceding insurer at any 7 time, notwithstanding any other provisions in the reinsurance agreement, 8 and shall be utilized and applied by the ceding insurer or its successors in 9 interest by operation of law, including without limitation any liquidator, 10 rehabilitator, receiver or conservator of such company, without diminution because of insolvency on the part of the ceding insurer or the assuming 11 insurer, only for the following purposes: 12

13

(a) To pay or reimburse the ceding insurer for:

(1) The assuming insurer's share under the specific reinsurance
agreement of premiums returned, but not yet recovered from the assuming
insurer, to the owners of policies reinsured under the reinsurance
agreement because of cancellations of such policies;

(2) the assuming insurer's share of surrenders and benefits or losses
 paid by the ceding insurer pursuant to the provisions of the policies
 reinsured under the reinsurance agreement; and

(3) any other amounts necessary to secure the credit or reductionfrom liability for reinsurance taken by the ceding insurer;

(b) to make payment to the assuming insurer of amounts held in the
 trust account in excess of the amount necessary to secure the credit or
 reduction from liability for reinsurance taken by the ceding insurer.

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(B) The reinsurance agreement also may contain provisions that:

(i) Give the assuming insurer the right to seek approval from the
ceding insurer, which shall not be unreasonably or arbitrarily withheld, to
withdraw from the trust account all or any part of the trust assets and
transfer those assets to the assuming insurer, provided:

(a) The assuming insurer shall, at the time of withdrawal, replace the
withdrawn assets with other qualified assets having a current fair market
value equal to the market value of the assets withdrawn so as to maintain
at all times the deposit in the required amount; or

(b) after withdrawal and transfer, the current fair market value of the
 trust account is no less than 102% of the required amount;

37 (ii) provide for the return of any amount withdrawn in excess of the 38 actual amounts required for subsection (k)(4)(A)(iv), and for interest 39 payments at a rate not in excess of the prime rate of interest on such 40 amounts;

41 (iii) permit the award by any arbitration panel or court of competent 42 jurisdiction of:

43 (a) Interest at a rate different from that provided in subparagraph (ii)

1 of this paragraph;

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- (b) court or arbitration costs;
- (c) attorney's fees; and
- (d) any other reasonable expenses.

5 (5) *Financial reporting*. A trust agreement may be used to reduce any 6 liability for reinsurance ceded to an unauthorized assuming insurer in 7 financial statements required to be filed with this department in 8 compliance with the provisions of this section when established on or 9 before the date of filing of the financial statement of the ceding insurer. 10 Further, the reduction for the existence of an acceptable trust account may be up to the current fair market value of acceptable assets available to be 11 12 withdrawn from the trust account at that time, but such reduction shall be 13 no greater than the specific obligations under the reinsurance agreement 14 that the trust account was established to secure

15 (6) The failure of any trust agreement to specifically identify the 16 beneficiary, as defined in paragraph (1), shall not be construed to affect 17 any actions or rights that the commissioner may take or possess pursuant 18 to the provisions of the laws of this state.

19 (1) Letters of credit qualified under subsection (i)(1). (1) The letter of credit shall be clean, irrevocable, unconditional and issued or confirmed 20 21 by a qualified United States financial institution, as defined in K.S.A. 40-22 221a(c)(1), and amendments thereto. The letter of credit shall contain an 23 issue date and expiration date and shall stipulate that the beneficiary need 24 only draw a sight draft under the letter of credit and present it to obtain 25 funds and that no other document need be presented. The letter of credit 26 also shall indicate that it is not subject to any condition or qualifications 27 outside of the letter of credit. In addition, the letter of credit itself shall not 28 contain reference to any other agreements, documents or entities, except as 29 provided in subsection (m)(8)(A). As used in this subsection, "beneficiary" means the domestic insurer for whose benefit the letter of credit has been 30 31 established and any successor of the beneficiary by operation of law. If a 32 court of law appoints a successor in interest to the named beneficiary, then 33 the named beneficiary includes and is limited to the court appointed 34 domiciliary receiver, including conservator, rehabilitator or liquidator.

35 (2) The heading of the letter of credit may include a boxed section 36 containing the name of the applicant and other appropriate notations to 37 provide a reference for the letter of credit. The boxed section shall be 38 clearly marked to indicate that such information is for internal 39 identification purposes only.

40 (3) The letter of credit shall contain a statement to the effect that the 41 obligation of the qualified United States financial institution under the 42 letter of credit is in no way contingent upon reimbursement with respect 43 thereto. 1 (4) The term of the letter of credit shall be for at least one year and 2 shall contain an "evergreen clause" that prevents the expiration of the letter 3 of credit without due notice from the issuer. The "evergreen clause" shall 4 provide for a period of no less than 30 days notice prior to expiration date 5 or nonrenewal.

6 (5) The letter of credit shall state whether it is subject to and 7 governed by the laws of this state or the uniform customs and practice for 8 documentary credits of the international chamber of commerce publication 9 600, UCP 600, or international standby practices of the international 10 chamber of commerce publication 590, ISP98, or any successor 11 publication, and all drafts drawn thereunder shall be presentable at an 12 office in the United States of a qualified United States financial institution.

13 (6) If the letter of credit is made subject to the uniform customs and practice for documentary credits of the international chamber of commerce 14 publication 600, UCP 600, or international standby practices of the 15 16 international chamber of commerce publication 590, ISP98, or any 17 successor publication, then the letter of credit shall specifically address and provide for an extension of time to draw against the letter of credit in 18 19 the event that one or more of the occurrences specified in article 36 of 20 publication 600 or any other successor publication, occur.

(7) If the letter of credit is issued by a financial institution authorized
to issue letters of credit, other than a qualified United States financial
institution as described in subsection (m)(1), then the following additional
requirements shall be met:

(A) The issuing financial institution shall formally designate the
 confirming qualified United States financial institution as its agent for the
 receipt and payment of the drafts; and

(B) the "evergreen clause" shall provide for 30 days' notice prior tothe expiration date for nonrenewal.

30 (8) *Reinsurance agreement provisions.* (A) The reinsurance 31 agreement in conjunction with which the letter of credit is obtained may 32 contain provisions that:

(i) Require the assuming insurer to provide letters of credit to theceding insurer and specify what they are to cover;

(ii) stipulate that the assuming insurer and ceding insurer agree that the letter of credit provided by the assuming insurer pursuant to the provisions of the reinsurance agreement may be drawn upon at any time, notwithstanding any other provisions in the agreement, and shall be utilized by the ceding insurer or its successors in interest only for one or more of the following reasons:

41

(a) To pay or reimburse the ceding insurer for:

42 (1) The assuming insurer's share under the specific reinsurance 43 agreement of premiums returned, but not yet recovered from the assuming insurers, to the owners of policies reinsured under the reinsurance
 agreement on account of cancellations of such policies;

3 (2) the assuming insurer's share, under the specific reinsurance 4 agreement, of surrenders and benefits or losses paid by the ceding insurer, 5 but not yet recovered from the assuming insurers, under the terms and 6 provisions of the policies reinsured under the reinsurance agreement; and

7 (3) any other amounts necessary to secure the credit or reduction 8 from liability for reinsurance taken by the ceding insurer;

9 (b) where the letter of credit will expire without renewal or be reduced or replaced by a letter of credit for a reduced amount and where 10 the assuming insurer's entire obligations under the reinsurance agreement 11 remain unliquidated and undischarged 10 days prior to the termination 12 date, to withdraw amounts equal to the assuming insurer's share of the 13 liabilities, to the extent that the liabilities have not yet been funded by the 14 assuming insurer and exceed the amount of any reduced or replacement 15 16 letter of credit, and deposit those amounts in a separate account in the 17 name of the ceding insurer in a qualified United States financial institution 18 apart from its general assets, in trust for such uses and purposes specified 19 in paragraph (8)(A)(ii)(a) as may remain after withdrawal and for any 20 period after the termination date: and

(iii) all of the provisions of subparagraph (A) shall be applied without
 diminution because of insolvency on the part of the ceding insurer or
 assuming insurer.

(B) Nothing contained in subparagraph (A) shall preclude the cedinginsurer and assuming insurer from providing for:

(i) An interest payment, at a rate not in excess of the prime rate of
 interest, on the amounts held pursuant to paragraph (8)(A)(ii); or

(ii) the return of any amounts drawn down on the letters of credit in
 excess of the actual amounts required for the above or any amounts that
 are subsequently determined not to be due.

(m) Other security. A ceding insurer may take credit for
unencumbered funds withheld by the ceding insurer in the United States
subject to withdrawal solely by the ceding insurer and under its exclusive
control.

(n) *Reinsurance contract.* Credit will not be granted, nor an asset or
reduction from liability allowed, to a ceding insurer for reinsurance
effected with assuming insurers meeting the requirements of subsection
(c), (d), (e), (f), (g), (h), or (j) or otherwise in compliance with K.S.A. 40221a(a), and amendments thereto, after the adoption of this section unless
the reinsurance agreement:

(1) Includes a proper insolvency clause, that stipulates that
reinsurance is payable directly to the liquidator or successor without
diminution regardless of the status of the ceding company;

(2) includes a provision pursuant to K.S.A. 40-221a(a), and 1 2 amendments thereto, whereby the assuming insurer, if an unauthorized assuming insurer, has submitted to the jurisdiction of an alternative dispute 3 resolution panel or court of competent jurisdiction within the United 4 5 States, has agreed to comply with all requirements necessary to give the 6 court or panel jurisdiction, has designated an agent upon whom service of 7 process may be effected, and has agreed to abide by the final decision of 8 the court or panel; and

9 (3) includes a proper reinsurance intermediary clause, if applicable, 10 that stipulates that the credit risk for the intermediary is carried by the 11 assuming insurer.

Sec. 2. K.S.A. 2020 Supp. 40-201a is hereby amended to read as follows: 40-201a. (a) The marketing, sale, offering for sale, issuance, making, proposing to make and administration of a service contract shall not be construed to be the business of insurance and shall be exempt from regulation as insurance pursuant to chapter 40 of the Kansas Statutes Annotated, and amendments thereto.

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(b) For the purposes of this section:

19 (1) "Service contract" means a contract or agreement for a separate or 20 additional consideration, for any specified duration, to service, repair, 21 replace or maintain all or any part of any structural component, appliance 22 or utility system of any residential property, consumer good or other 23 property; or to indemnify for service, repair, replacement or maintenance for consumer good or other property, due to a defect in materials, 24 25 workmanship, normal wear and tear; or as a result of power surges or as a result of accidental damage from the handling of any consumer good or 26 27 other property, with or without additional provision for indemnity 28 payments, when service repair or replacement is not reasonably, 29 commercially or economically feasible. A service contract may also include additional provisions for incidental payment of indemnity under 30 31 limited circumstances, including, but not limited to, towing, rental and 32 emergency road service.

33 (2) "Service contract" also includes any nonconsumer commercial34 service contract.

35 (3) "Service contract" does not include an automobile club service as
 36 defined in K.S.A. 40-2507, and amendments thereto.

37 (4)—"Service contract" includes, but is not limited to, a contract that
 38 offers any one or more of the following services:

39 (A) The repair or replacement of tires or wheels on a motor vehicle40 damaged as a result of coming into contact with road hazards;

(B) the removal of dents, dings or creases on a motor vehicle that can
be repaired using the process of paintless dent removal without affecting
the existing paint finish and without replacing vehicle body panels,

1 sanding, bonding or painting; and

2 (C) the replacement of a motor vehicle key or key-fob in the event 3 that the key or key-fob becomes inoperable or is lost or stolen.

4 (5)(4) "Service contract" does not include an automobile club service 5 contract. As used in this paragraph, "automobile club service contract" 6 means a service contract that provides, in consideration of dues, 7 assessments or periodic payments of money, promises to assist in matters 8 relating to travel and the operation, use and maintenance of an 9 automobile in the supply of features or services or reimbursement thereof, 10 which may include:

(A) Such services as community traffic safety services, travel and
touring service, theft or reward service, map service, towing service,
emergency road service, bail bond service and legal fee reimbursement
service in the defense of traffic offenses, none of which enumerated
features or services, if provided by the promisor itself, shall be subject to
the insurance laws of this state;

(B) the purchase of accidental injury and death benefits insurance
coverage issued, as provided by applicable statutes, by an insurance
company authorized to do business in Kansas; or

20 (C) such other features or services not deemed by the commissioner 21 to constitute the business of insurance.

(5) "Road hazard" means a hazard that is encountered while driving a
 motor vehicle, including, but not be limited to, potholes, rocks, wood
 debris, metal parts, glass, plastic, curbs or composite scraps.

(c) (1) No service contract that is exempt from regulation as insurance pursuant to chapter 40 of the Kansas Statutes Annotated, and amendments thereto, pursuant to this section shall contain any provision for consequential damages unless such consequential damages are caused by the failure of service, repair, replacement or maintenance rendered under the service contract.

(2) No service contract that is exempt from regulation as insurance
pursuant to chapter 40 of the Kansas Statutes Annotated, and amendments
thereto, pursuant to this section shall contain any provision, except as
exempt by this section, that would otherwise be covered by a contract of
property or liability insurance issued in this state.

36 Sec. 3. K.S.A. 2020 Supp. 40-221a is hereby amended to read as 37 follows: 40-221a. (a) Credit for reinsurance shall be allowed a domestic 38 ceding insurer as either an asset or a reduction from liability on account of 39 reinsurance ceded only when the reinsurer meets the requirements of 40 paragraphs paragraph (1), (2), (3), (4), (5)-or, (6) or (7). Credit shall be 41 allowed under-paragraphs paragraph (1), (2) or (3)-of this subsection only 42 as respects cessions of those kinds or classes of business that the assuming 43 insurer is licensed or otherwise permitted to write or assume in its state of domicile or, in the case of a United States branch of an alien assuming
insurer, in the state through which it is entered and licensed to transact
insurance or reinsurance. Credit shall be allowed only under-paragraphs *paragraph* (3) or (4)-of this subsection if the applicable requirements of
paragraph (7) have been satisfied.

6 (1) Credit shall be allowed when the reinsurance is ceded to an 7 assuming insurer that is licensed to transact insurance or reinsurance in 8 this state.

9 (2) Credit shall be allowed when the reinsurance is ceded to an 10 assuming insurer that is accredited by the commissioner as a reinsurer in 11 this state. In order to be eligible for accreditation, an assuming insurer 12 must:

(A) File with the commissioner evidence of the assuming insurer'ssubmission to this state's jurisdiction;

15 (B) submit to this state's authority to examine the assuming insurer's 16 books and records;

(C) be licensed to transact insurance or reinsurance in at least one
state, or in the case of a United States branch of an alien assuming insurer,
be entered through and licensed to transact insurance or reinsurance in at
least one state;

(D) file annually with the commissioner a copy of the assuming
 insurer's annual statement filed with the insurance department of the
 assuming insurer's state of domicile and a copy of the assuming insurer's
 most recent audited financial statement; and

25 (E) demonstrate to the satisfaction of the commissioner that it has adequate financial capacity to meet the assuming insurer's reinsurance 26 27 obligations and is otherwise qualified to assume reinsurance from 28 domestic insurers. An assuming insurer is deemed to meet this requirement 29 as of the time of the assuming insurer's application if it maintains a surplus as regards policyholders in an amount not less than \$20,000,000 and its 30 31 accreditation has not been denied by the commissioner within 90 days 32 after submission of its application.

(3) (A) Credit shall be allowed when the reinsurance is ceded to an
assuming insurer that is domiciled in, or in the case of a United States
branch of an alien assuming insurer is entered through, a state that
employs standards regarding credit for reinsurance substantially similar to
those applicable under this statute and the assuming insurer or United
States branch of an alien assuming insurer:

39 (i) Maintains a surplus as regards policyholders in an amount not less40 than \$20,000,000; and

41 (ii) submits to the authority of this state to examine the assuming 42 insurer's books and records.

43 (B) The requirement of subsection (a)(3)(A)(i) does not apply to

reinsurance ceded and assumed pursuant to pooling arrangements among
 insurers in the same holding company system.

3 (4) (A) Credit shall be allowed when the reinsurance is ceded to an 4 assuming insurer that maintains a trust fund in a qualified United States 5 financial institution, as defined in subsection (c)(2), for the payment of the 6 valid claims of the assuming insurer's United States ceding insurers, their 7 assigns and successors in interest. To enable the commissioner to 8 determine the sufficiency of the trust fund, the assuming insurer shall 9 report annually to the commissioner information substantially the same as 10 that required to be reported on the national association of insurance commissioners annual statement form by licensed insurers. The assuming 11 12 insurer shall submit to examination of its books and records by the 13 commissioner and bear the expense of examination;

(B) (i) credit for reinsurance shall not be granted under this
subsection unless the form of the trust and any amendments to the trust
have been approved by either of the following:

(a) The commissioner of the state where the trust is domiciled; or

(b) the commissioner of another state who, pursuant to the terms of
 the trust instrument, has accepted principal regulatory oversight of the
 trust.

21 (ii) The form of the trust and any trust amendments also shall be filed 22 with the commissioner of every state in which the ceding insurer's 23 beneficiaries of the trust are domiciled. The trust instrument shall provide 24 that contested claims shall be valid and enforceable upon the final order of 25 any court of competent jurisdiction in the United States. The trust shall 26 vest legal title to the trust's assets in its trustees for the benefit of the 27 assuming insurer's United States ceding insurers, their assigns and 28 successors in interest. The trust and the assuming insurer shall be subject 29 to examination as determined by the commissioner.

(iii) The trust shall remain in effect for as long as the assuming insurer has outstanding obligations due under the reinsurance agreements subject to the trust. No later than February 28 of each year, the trustee of the trust shall report to the commissioner in writing the balance of the trust and the listing of the trust's investments at the preceding year-end and shall certify the date of termination of the trust, if so planned, or certify that the trust will not expire prior to the following December 31.

37 (C) The following requirements apply to the following categories of38 the assuming insurer:

(i) The trust fund for a single assuming insurer shall consist of funds
in trust in an amount not less than the assuming insurer's liabilities
attributable to reinsurance ceded by United States ceding insurers, and, in
addition, the assuming insurer shall maintain a trusteed surplus of not less
than \$20,000,000, except as provided in subsection (a)(4)(C)(ii).

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1 (ii) At any time after the assuming insurer has permanently 2 discontinued underwriting new business secured by the trust for at least 3 three full years, the commissioner with principal regulatory oversight of 4 the trust may authorize a reduction in the required trusteed surplus, but 5 only after a finding, based on an assessment of the risk, that the new 6 required surplus level is adequate for the protection of United States 7 ceding insurers, policyholders and claimants in light of reasonably 8 foreseeable adverse loss development. The risk assessment may involve an 9 actuarial review, including an independent analysis of reserves and cash 10 flows, and shall consider all material risk factors, including, when applicable, the lines of business involved, the stability of the incurred loss 11 12 estimates and the effect of the surplus requirements on the assuming insurer's liquidity or solvency. The minimum required trusteed surplus 13 14 shall not be reduced to an amount less than 30% of the assuming insurer's 15 liabilities attributable to reinsurance ceded by United States ceding 16 insurers covered by the trust;

(iii) (a) in the case of a group including incorporated and individualunincorporated underwriters, all of the following requirements are met:

(1) For reinsurance ceded under reinsurance agreements with an
inception, amendment or renewal date on or after January 1, 1993, the trust
shall consist of a trusteed account in an amount not less than the respective
underwriters' several liabilities attributable to business ceded by United
States domiciled ceding insurers to any underwriter of the group;

(2) for reinsurance ceded under reinsurance agreements with an inception date on or before December 31, 1992, and not amended or renewed after that date, notwithstanding the other provisions of this act, the trust shall consist of a trusteed account in an amount not less than the respective underwriters' several insurance and reinsurance liabilities attributable to business written in the United States; and

(3) in addition to the trusts described in subsections (a)(4)(B)(iii)(a)
(1) and (a)(4)(B)(iii)(a)(2), the group shall maintain in trust a trusteed
surplus of which \$100,000,000 shall be held jointly for the benefit of the
United States domiciled ceding insurers of any member of the group for all
years of account.

(b) The incorporated members of the group shall not be engaged in any business other than underwriting as a member of the group and shall be subject to the same level of regulation and solvency control by the group's domiciliary regulator as are the unincorporated members of the group; and

40 (c) within 90 days after its financial statements are due to be filed
41 with the group's domiciliary regulator, the group shall provide to the
42 commissioner an annual certification by the group's domiciliary regulator
43 of the solvency of each underwriter member, or if a certification is

unavailable, financial statements prepared by independent public
 accountants of each underwriter member of the group.

3 (iv) In the case of a group of incorporated underwriters under 4 common administration, the group shall meet all of the following 5 requirements:

6 (a) Have continuously transacted an insurance business outside the 7 United States for at least three years immediately prior to making 8 application for accreditation;

9 (b) maintain an aggregate policyholders' surplus of at least 10 \$10,000,000,000;

(c) maintain a trust fund in an amount not less than the group's
 several liabilities attributable to business ceded by United States domiciled
 ceding insurers to any member of the group pursuant to reinsurance
 contracts issued in the name of the group;

(d) in addition, maintain a joint trusteed surplus of which
\$100,000,000 shall be held jointly for the benefit of United States
domiciled ceding insurers of any member of the group as additional
security for these liabilities; and

(e) within 90 days after the group's financial statements are due to be
filed with the group's domiciliary regulator, make available to the
commissioner an annual certification of each underwriter member's
solvency by the member's domiciliary regulator and financial statements of
each underwriter member of the group prepared by its independent public
accountant.

(5) Credit shall be allowed when the reinsurance is ceded to an
 assuming insurer that has been certified by the commissioner as a reinsurer
 in this state and the reinsurer secures its obligations in accordance with the
 following requirements:

(A) In order to be eligible for certification, the assuming insurer shallmeet all of the following requirements:

(i) Be domiciled and licensed to transact insurance or reinsurance in a
 qualified jurisdiction, as determined by the commissioner pursuant to
 subsection (a)(5)(C);

(ii) maintain minimum capital and surplus, or its equivalent, in anamount to be determined by the commissioner pursuant to regulation;

(iii) maintain financial strength ratings from two or more ratingagencies deemed acceptable by the commissioner pursuant to regulation;

(iv) agree to submit to the jurisdiction of this state, appoint the commissioner as the assuming insurer's agent for service of process in this state, and agree to provide security for 100% of the assuming insurer's liabilities attributable to reinsurance ceded by United States ceding insurers if the assuming insurer resists enforcement of a final United States judgment;

1 (v) agree to meet applicable information filing requirements as 2 determined by the commissioner, both with respect to an initial application 3 for certification and on an ongoing basis; and

4 (vi) satisfy any other requirements for certification deemed relevant 5 by the commissioner.

6 (B) An association including incorporated and individual 7 unincorporated underwriters may be a certified reinsurer. In order to be 8 eligible for certification, in addition to satisfying the requirements of 9 subsection (a)(5)(A) and all of the following requirements:

(i) The association shall satisfy its minimum capital and surplus
requirements through the capital and surplus equivalents, net of liabilities,
of the association and its members, which *that* shall include a joint central
fund that may be applied to any unsatisfied obligation of the association or
any of its members, in an amount determined by the commissioner to
provide adequate protection;

16 (ii) the incorporated members of the association shall not be engaged 17 in any business other than underwriting as a member of the association and 18 shall be subject to the same level of regulation and solvency control by the 19 association's domiciliary regulator as are the unincorporated members of 20 the association; and

(iii) within 90 days after the association's financial statements are due to be filed with the association's domiciliary regulator, the association shall provide to the commissioner an annual certification by the association's domiciliary regulator of the solvency of each underwriter member. If a certification is unavailable, financial statements prepared by independent public accountants of each underwriter member of the association shall be provided instead.

(C) The commissioner shall create and publish a list of qualified jurisdictions under which an assuming insurer licensed and domiciled in such jurisdiction is eligible to be considered for certification by the commissioner as a certified reinsurer.

(i) In order to determine whether the domiciliary jurisdiction of a 32 33 non-United States non-U.S. assuming insurer is eligible to be recognized 34 as a qualified jurisdiction, the commissioner shall evaluate the 35 appropriateness and effectiveness of the reinsurance supervisory system of 36 the jurisdiction, both initially and on an ongoing basis, and consider the 37 rights, benefits and the extent of reciprocal recognition afforded by the 38 non-United States non-U.S. jurisdiction to reinsurers licensed and 39 domiciled in the United States. In order to be recognized as a qualified jurisdiction, a jurisdiction must agree to share information and cooperate 40 with the commissioner with respect to all certified reinsurers domiciled 41 42 within that jurisdiction. A jurisdiction shall not be recognized as a 43 qualified jurisdiction if the commissioner has determined that the

jurisdiction does not adequately and promptly enforce final United States
 judgments and arbitration awards. Additional factors may be considered in
 the discretion of the commissioner.

4 (ii) A list of qualified jurisdictions shall be published through the 5 national association of insurance commissioners' process. The 6 commissioner shall consider this list in determining qualified jurisdictions. 7 If the commissioner recognizes a jurisdiction as qualified that does not 8 appear on the list of qualified jurisdictions, the commissioner shall provide 9 thoroughly documented justification in accordance with criteria to be 10 developed under rules and regulations.

(iii) United States jurisdictions that meet the requirement for
 accreditation under the national association of insurance commissioners'
 financial standards and accreditation program shall be recognized as
 qualified jurisdictions.

15 (iv) If a certified reinsurer's domiciliary jurisdiction ceases to be a 16 qualified jurisdiction, the commissioner has the discretion to suspend the 17 reinsurer's certification indefinitely, in lieu of revocation.

18 (D) The commissioner shall assign a rating to each certified reinsurer, 19 giving due consideration to the financial strength ratings that have been 20 assigned by rating agencies deemed acceptable to the commissioner 21 pursuant to rules and regulations. The commissioner shall publish a list of 22 all certified reinsurers and their ratings.

(E) A certified reinsurer shall secure obligations assumed from
 United States ceding insurers under this subsection at a level consistent
 with the certified reinsurer's rating, as specified in rules and regulations
 promulgated by the commissioner.

(i) In order for a domestic ceding insurer to qualify for full financial
statement credit for reinsurance ceded to a certified reinsurer, the certified
reinsurer shall maintain security in a form acceptable to the commissioner
and consistent with the provisions of subsection (b), or in a multibeneficiary trust in accordance with subsection (a)(4), except as otherwise
provided in this subsection.

33 (ii) If a certified reinsurer maintains a trust to fully secure its 34 obligations subject to subsection (a)(4), and chooses to secure its 35 obligations incurred as a certified reinsurer in the form of a multi-36 beneficiary trust, the certified reinsurer shall maintain separate trust 37 accounts for its obligations incurred under reinsurance agreements issued 38 or renewed as a certified reinsurer with reduced security as permitted by 39 this subsection or comparable laws of other United States jurisdictions and 40 for its obligations subject to subsection (a)(4). It shall be a condition to the grant of certification under subsection (a)(5) that the certified reinsurer 41 shall have bound itself, by the language of the trust and agreement with the 42 43 commissioner who has principal regulatory oversight of each such trust

account, to fund, upon termination of any such trust account, any
 deficiency of any other such trust account out of the remaining surplus of
 the terminated trust account.

4 (iii) The minimum trusteed surplus requirements provided in
5 subsection (a)(4) are not applicable with respect to a multi-beneficiary
6 trust maintained by a certified reinsurer for the purpose of securing
7 obligations incurred under this subsection, except that such trust shall
8 maintain a minimum trusteed surplus of \$10,000,000.

9 (iv) With respect to obligations incurred by a certified reinsurer under 10 this subsection, if the security is insufficient, the commissioner shall 11 reduce the allowable credit by an amount proportionate to the deficiency, 12 and the commissioner has the discretion to impose further reductions in 13 allowable credit upon finding there is a material risk that the certified 14 reinsurer's obligations will not be paid in full when due.

15 (v) For purposes of this subsection, a certified reinsurer whose 16 certification has been terminated for any reason shall be treated as a 17 certified reinsurer required to secure 100% of its obligations.

(a) As used in this paragraph, the term "terminated" includesrevocation, suspension, voluntary surrender and inactive status.

20 (b) If the commissioner continues to assign a higher rating as 21 permitted by other provisions of this subsection, this requirement does not 22 apply to a certified reinsurer in inactive status or to a reinsurer whose 23 certification has been suspended.

(F) If an assuming insurer applying for certification as a reinsurer in this state has been certified as a reinsurer in an another jurisdiction accredited by the national association of insurance commissioners, the commissioner has the discretion to defer to that jurisdiction's certification, and has the discretion to defer to the rating assigned by that jurisdiction, and such assuming insurer shall be considered to be a certified reinsurer in this state.

31 (G) A certified reinsurer that ceases to assume new business in this 32 state may request to maintain the reinsurer's certification in inactive status 33 in order to continue to qualify for a reduction in amount of security 34 required for the reinsurer's in force business. An inactive certified reinsurer shall continue to comply with all applicable requirements of this 35 36 subsection, and the commissioner shall assign a rating that takes into 37 account, if relevant, the reasons why the reinsurer is not assuming new 38 business

39 (6) (*A*) Credit shall be allowed when the reinsurance is ceded to an 40 assuming insurer meeting each of the conditions set forth below.

(i) The assuming insurer must have its head office or be domiciled in,
as applicable, and be licensed in a reciprocal jurisdiction. A "reciprocal
jurisdiction" is a jurisdiction that meets one of the following:

1 (a) A non-U.S. jurisdiction that is subject to an in-force covered 2 agreement with the United States, each within its legal authority, or, in the case of a covered agreement between the United States and the European 3 Union, is a member state of the European Union. For purposes of this 4 subsection, a "covered agreement" is an agreement entered into pursuant 5 6 to Dodd-Frank wall street reform and consumer protection act, 31 U.S.C. 7 §§ 313 and 314, that is currently in effect or in a period of provisional 8 application and addresses the elimination, under specified conditions, of 9 collateral requirements as a condition for entering into any reinsurance agreement with a ceding insurer domiciled in this state or for allowing the 10 ceding insurer to recognize credit for reinsurance; 11

(b) a United States jurisdiction that meets the requirements for
 accreditation under the national association of insurance commissioners
 financial standards and accreditation program; or

15 (c) a qualified jurisdiction, as determined by the commissioner 16 pursuant to subsection (a)(5)(C), that is not otherwise described in 17 subsection (a)(6)(A)(i)(a) or (b) and that meets certain additional 18 requirements, consistent with the terms and conditions of in-force covered 19 agreements, as specified by the commissioner.

(ii) The assuming insurer shall have and maintain, on an ongoing 20 21 basis, minimum capital and surplus, or its equivalent, calculated 22 according to the methodology of its domiciliary jurisdiction, in an amount 23 to be set forth by the commissioner. If the assuming insurer is an association, including incorporated and individual unincorporated 24 25 underwriters, it shall have and maintain, on an ongoing basis, minimum capital and surplus equivalents, net of liabilities, calculated according to 26 27 the methodology applicable in its domiciliary jurisdiction, and a central 28 fund containing a balance in amounts to be set forth by the commissioner.

(iii) The assuming insurer shall have and maintain, on an ongoing basis, a minimum solvency or capital ratio, as applicable, to be set forth by the commissioner. If the assuming insurer is an association, including incorporated and individual unincorporated underwriters, it shall have and maintain, on an ongoing basis, a minimum solvency or capital ratio in the reciprocal jurisdiction where the assuming insurer has its head office or is domiciled, as applicable, and is also licensed.

(iv) The assuming insurer shall agree and provide adequate
assurance to the commissioner, in a form specified by the commissioner, as
follows:

39 (a) The assuming insurer shall provide prompt written notice and 40 explanation to the commissioner if it falls below the minimum 41 requirements set forth in subsection (a)(6)(A)(ii) or (iii), or if any 42 regulatory action is taken against the assuming insurer for serious 43 noncompliance with applicable law; 1 (b) the assuming insurer shall consent in writing to the jurisdiction of 2 the courts of this state and to the appointment of the commissioner as the assuming insurer's agent for service of process. The commissioner may 3 require that consent for service of process be provided to the 4 commissioner and included in each reinsurance agreement. Nothing in 5 6 this provision shall limit, or in any way alter, the capacity of parties to a 7 reinsurance agreement to agree to alternative dispute resolution 8 mechanisms, except to the extent such agreements are unenforceable under applicable insolvency or delinguency laws; 9

10 (c) the assuming insurer shall consent in writing to pay all final 11 judgments, wherever enforcement is sought, obtained by a ceding insurer 12 or its legal successor, that have been declared enforceable in the 13 jurisdiction where the judgment was obtained;

14 (d) each reinsurance agreement shall include a provision requiring 15 the assuming insurer to provide security in an amount equal to 100% of 16 the assuming insurer's liabilities attributable to reinsurance ceded pursuant to that agreement if the assuming insurer resists enforcement of a 17 final judgment that is enforceable under the law of the jurisdiction in 18 19 which it was obtained or a properly enforceable arbitration award, 20 whether obtained by the ceding insurer or by its legal successor on behalf 21 of its resolution estate: and

22 (e) the assuming insurer shall confirm that it is not presently 23 participating in any solvent scheme of arrangement that involves this state's ceding insurers, agree to notify the ceding insurer and the 24 25 commissioner and to provide security in an amount equal to 100% of the assuming insurer's liabilities to the ceding insurer, should the assuming 26 27 insurer enter into such a solvent scheme of arrangement. Such security 28 shall be in a form consistent with the provisions of subsections (a)(5) and 29 *(b) and as specified by the commissioner.* 

30 (v) The assuming insurer or its legal successor shall provide, if 31 requested by the commissioner, on behalf of itself and any legal 32 predecessors, certain documentation to the commissioner, as specified by 33 the commissioner.

(vi) The assuming insurer shall maintain a practice of prompt
 payment of claims under reinsurance agreements.

36 (vii) The assuming insurer's supervisory authority must confirm to 37 the commissioner on an annual basis, as of the preceding December 31 or 38 at the annual date otherwise statutorily reported to the reciprocal 39 jurisdiction, that the assuming insurer complies with the requirements set 40 forth in subsection (a)(6)(A)(ii) or (iii).

41 (viii) Nothing in this provision precludes an assuming insurer from
42 providing the commissioner with information on a voluntary basis.

43 (B) The commissioner shall timely create and publish a list of

1 reciprocal jurisdictions.

2 (i) A list of reciprocal jurisdictions is published through the national association of insurance commissioners committee process. 3 The commissioner's list shall include any reciprocal jurisdiction, as defined 4 under subsections (a)(6)(A)(i)(a) and (b), and shall consider any other 5 6 reciprocal jurisdiction included on the national association of insurance 7 commissioners list. The commissioner may approve a jurisdiction that 8 does not appear on the national association of insurance commissioners list of reciprocal jurisdictions in accordance with criteria to be developed 9 10 by the commissioner.

(ii) The commissioner may remove a jurisdiction from the list of 11 12 reciprocal jurisdictions upon a determination that the jurisdiction no longer meets the requirements of a reciprocal jurisdiction, in accordance 13 with a process set forth by the commissioner, except that the commissioner 14 shall not remove from the list a reciprocal jurisdiction, as defined under 15 subsections (a)(6)(A)(i)(a) and (b). Upon removal of a reciprocal 16 jurisdiction from this list, credit for reinsurance ceded to an assuming 17 insurer that has its home office or is domiciled in that jurisdiction shall be 18 19 allowed, if otherwise allowed pursuant to this section.

(C) The commissioner shall timely create and publish a list of 20 21 assuming insurers that have satisfied the conditions set forth in this subsection and to which cessions shall be granted credit in accordance 22 23 with this subsection. The commissioner may add an assuming insurer to such list if a national association of insurance commissioners accredited 24 25 jurisdiction has added such assuming insurer to a list of such assuming insurers or if, upon initial eligibility, the assuming insurer submits the 26 information to the commissioner as required under subsection (a)(6)(A)27 (iv) and complies with any additional requirements that the commissioner 28 may impose, except to the extent that they conflict with an applicable 29 30 covered agreement.

(D) If the commissioner determines that an assuming insurer no
longer meets one or more of the requirements under this subsection, the
commissioner may revoke or suspend the eligibility of the assuming
insurer for recognition under this subsection.

(i) While an assuming insurer's eligibility is suspended, no
reinsurance agreement issued, amended or renewed after the effective date
of the suspension qualifies for credit except to the extent that the assuming
insurer's obligations under the contract are secured in accordance with
subsection (b).

(ii) If an assuming insurer's eligibility is revoked, no credit for
reinsurance may be granted after the effective date of the revocation with
respect to any reinsurance agreements entered into by the assuming
insurer, including reinsurance agreements entered into prior to the date of

revocation, except to the extent that the assuming insurer's obligations
 under the contract are secured in a form acceptable to the commissioner
 and consistent with the provisions of subsection (b).

4 (E) If subject to a legal process of rehabilitation, liquidation or 5 conservation, as applicable, the ceding insurer, or its representative, may 6 seek and, if determined appropriate by the court in which the proceedings 7 are pending, may obtain an order requiring that the assuming insurer post 8 security for all outstanding ceded liabilities.

9 (F) Nothing in this subsection shall limit or in any way alter the 10 capacity of parties to a reinsurance agreement to agree on requirements 11 for security or other terms in that reinsurance agreement, except as 12 expressly prohibited by this section or other applicable law or regulation.

13 (G) Credit may be taken under this subsection only for reinsurance 14 agreements entered into, amended or renewed on or after July 1, 2021, 15 and only with respect to losses incurred and reserves reported on or after 16 the later of the date on which the assuming insurer has met all eligibility 17 requirements pursuant to subsection (a)(6)(A), or the effective date of the 18 new reinsurance agreement, amendment or renewal.

(H) This paragraph does not alter or impair a ceding insurer's right
to take credit for reinsurance, to the extent that credit is not available
under this subsection, as long as the reinsurance qualifies for credit under
any other applicable provision of this section.

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(I) Nothing in this subsection shall:

(i) Authorize an assuming insurer to withdraw or reduce the security
 provided under any reinsurance agreement except as permitted by the
 terms of the agreement; or

(ii) limit, or in any way alter, the capacity of parties to any
 reinsurance agreement to renegotiate the agreement.

29 (7) Credit shall be allowed when the reinsurance is ceded to an 30 assuming insurer that does not meet the requirements of subsections (a)(1)31 through (a)(5)(6), but only as to the insurance of risks located in 32 jurisdictions where the reinsurance is required by applicable law or 33 regulation of that jurisdiction.

(7)(8) If the assuming insurer is not licensed, accredited or certified to transact insurance or reinsurance in this state, the credit permitted by subsections (a)(3) and (a)(4) of this section shall not be allowed, unless the assuming insurer agrees in the reinsurance agreement to do all of the following:

(A) (i) In the event of the failure of the assuming insurer to perform
its obligations under the terms of the reinsurance agreement, the assuming
insurer, at the request of the ceding insurer, will: Submit to the jurisdiction
of any court of competent jurisdiction in any state of the United States;
comply with all requirements necessary to give the court jurisdiction; and

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abide by the final decision of the court or of any appellate court in the
 event of an appeal; and

3 (ii) the assuming insurer will designate the commissioner or a 4 designated attorney as its true and lawful attorney to receive lawful 5 process in any action, suit or proceeding instituted by or on behalf of the 6 ceding insurer.

7 (B) This subsection is not intended to conflict with or override the 8 obligation of the parties to a reinsurance agreement to arbitrate their 9 disputes, if the obligation is created in the agreement.

10 (8)(9) If the assuming insurer does not meet the requirements of 11 subsection (a)(1), (a)(2)—or, (a)(3) or (a)(6), the credit permitted by 12 subsection (a)(4) or (a)(5) shall not be allowed unless the assuming insurer 13 agrees in a trust agreement to the following conditions:

(A) Notwithstanding any other provisions in the trust instrument, if 14 the trust fund is inadequate because the trust fund contains an amount less 15 than the amount required by subsection (a)(4)(C), or if the grantor of the 16 17 trust has been declared insolvent or has been placed into receivership, 18 rehabilitation, liquidation or similar proceedings under the laws of the trust's state or country of domicile, the trustee shall comply with an order 19 20 of the commissioner with regulatory oversight over the trust or with an 21 order of a court of competent jurisdiction directing the trustee to transfer 22 all of the assets of the trust fund to the commissioner with regulatory 23 oversight over the trust.

(B) The assets shall be distributed and claims shall be filed with and
valued by the commissioner with regulatory oversight in accordance with
the laws of the state in which the trust is domiciled that are applicable to
the liquidation of domestic insurance companies.

(C) If the commissioner with regulatory oversight over the trust determines that the assets of the trust fund or any part of the trust fund are not necessary to satisfy the claims of the United States ceding insurers of the grantor of the trust, the assets of the trust or part of those assets shall be returned by the commissioner with regulatory oversight over the trust to the trustee for distribution in accordance with the trust agreement.

(D) The grantor shall waive any right otherwise available to it under
 United States law that is inconsistent with the provisions of this
 subsection.

37 (9)(10) Credit for reinsurance ceded to a certified reinsurer is limited 38 to reinsurance contracts entered or renewed on or after the effective date of 39 the certification of the assuming insurer by the commissioner.

1 (A) The commissioner shall give the reinsurer notice and opportunity 2 for a hearing prior to such suspension or revocation. The suspension or 3 revocation shall not take effect until after the commissioner's order on 4 hearing, unless one of the following applies:

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(i) The reinsurer waives its right to a hearing;

6 (ii) the commissioner's order is based on regulatory action by the 7 reinsurer's domiciliary jurisdiction or by the voluntary surrender or 8 termination of the reinsurer's eligibility to transact insurance or reinsurance 9 business in its domiciliary jurisdiction or in the primary certifying state of 10 the reinsurer under subsection (a)(5)(F); or

11 (iii) the commissioner finds that an emergency requires immediate 12 action and a court of competent jurisdiction has not stayed the 13 commissioner's action.

14 (B) While a reinsurer's accreditation or certification is suspended, a reinsurance contract issued or renewed after the effective date of the 15 16 suspension does not qualify for credit, except to the extent that the reinsurer's obligations under the reinsurance contract are secured in 17 accordance with subsection (b). If a reinsurer's accreditation or 18 19 certification is revoked, credit for reinsurance shall not be granted after the 20 effective date of the revocation, except to the extent that the reinsurer's 21 obligations under the contract are secured in accordance with subsection 22 (a)(5)(A) or (a)(5)(B).

23 (11)(12) (A) A domestic ceding insurer shall take steps to manage its 24 reinsurance recoverables proportionate to its own book of business. A 25 domestic ceding insurer shall notify the commissioner within 30 days after reinsurance recoverables from any single assuming insurer, or group of 26 affiliated assuming insurers, exceeds 50% of the domestic ceding insurer's 27 28 last reported surplus to policyholders, or after it is determined that 29 reinsurance recoverables from any single assuming insurer, or group of affiliated assuming insurers, is likely to exceed this limit. The notification 30 31 shall demonstrate that the exposure is safely managed by the domestic 32 ceding insurer.

33 (B) A domestic ceding insurer shall take steps to diversify its 34 reinsurance program. A domestic ceding insurer shall notify the 35 commissioner within 30 days after ceding to any single assuming insurer, 36 or group of affiliated assuming insurers, more than 20% of the ceding 37 insurer's gross written premium in the prior calendar year, or after the 38 domestic ceding insurer has determined that the reinsurance ceded to any 39 single assuming insurer, or group of affiliated assuming insurers, is likely 40 to exceed this limit. The notification shall demonstrate that the exposure is 41 safely managed by the domestic ceding insurer.

42 (b) An asset or a reduction from liability for the reinsurance ceded by 43 a domestic insurer to an assuming insurer not meeting the requirements of 1 subsection (a) shall be allowed in an amount not exceeding the liabilities 2 carried by the ceding insurer. The reduction shall be in the amount of funds 3 held by or on behalf of the ceding insurer, including funds held in trust for 4 the ceding insurer, under a reinsurance contract with the assuming insurer 5 as security for the payment of obligations under the contract, if the security 6 is held in the United States subject to withdrawal solely by, and under the 7 exclusive control of, the ceding insurer; or, in the case of a trust, held in a 8 qualified United States financial institution, as defined in subsection (c)(2). 9 The security may be in the form of any of the following:

(1) Cash;

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(2) a security listed by the securities valuation office of the national
 association of insurance commissioners, including those securities deemed
 exempt from filing, as defined by the purposes and procedures manual of
 the national association of insurance commissioners investment analysis
 office, and qualifying as admitted assets;

16 (3) (A) clean, irrevocable, unconditional letters of credit, issued or 17 confirmed by a qualified United States financial institution, as defined in 18 subsection (c)(1), effective no later than December 31 of the year for 19 which the filing is being made, and in the possession of, or in trust for, the 20 ceding insurer on or before the filing date of the ceding insurer's annual 21 statement; or

(B) a letter of credit meeting applicable standards of issuer acceptability as of the date of the letter of credit's issuance, or confirmation, shall, notwithstanding the issuing or confirming, institution's subsequent failure to meet applicable standards of issuer acceptability, continue to be acceptable as security until their expiration, extension, renewal, modification or amendment, whichever first occurs; or

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(4) any other form of security acceptable to the commissioner.

(c) (1) For purposes of subsection (b)(3), a "qualified United States
financial institution" means an institution that meets all of the following
requirements:

(A) Is organized or, in the case of a United States office of a foreign
 banking organization, licensed under the laws of the United States or any
 state thereof;

(B) is regulated, supervised and examined by United States federal or
 state authorities having regulatory authority over banks and trust
 companies; and

38 (C) has been determined by either the commissioner or the securities 39 valuation office of the national association of insurance commissioners to 40 meet the standards of financial condition and standing as are considered 41 necessary and appropriate to regulate the quality of financial institutions 42 whose letters of credit will be acceptable to the commissioner.

43 (2) For purposes of those provisions of this law specifying those

institutions that are eligible to act as a fiduciary of a trust, a "qualified
 United States financial institution" means an institution that meets all of
 the following requirements:

4 (i) Is organized, or in the case of a United States branch or agency 5 office of a foreign banking organization, is licensed under the laws of the 6 United States or any state of the United States and has been granted 7 authority to operate with fiduciary powers; and

8 (ii) is regulated, supervised and examined by federal or state 9 authorities having regulatory authority over banks and trust companies.

(d) The commissioner is hereby authorized to adopt any rules and
 regulations necessary to implement the provisions of this law. Such rules
 and regulations shall be adopted no later than January 1, 2019.

(e) This section shall apply to all cessions under reinsurance contracts
 that occur on or after January 1, 2018.

Sec. 4. K.S.A. 2020 Supp. 40-246i is hereby amended to read as
follows: 40-246i. The following definitions shall apply to K.S.A. 40-246b
through 40-246e, and amendments thereto, and K.S.A. 2020 Supp. 40246g, and amendments thereto:

(a) "Exempt commercial purchaser" means any person purchasing
 commercial insurance that, at the time of placement, meets the following
 requirements:

(1) The person employs or retains a qualified risk manager tonegotiate insurance coverage;

(2) the person has paid aggregate nationwide commercial property
 and casualty insurance premiums in excess of \$100,000 in the immediately
 preceding 12 months; and

(3) the person:

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(A) Possesses a net worth in excess of \$20,040,000, except that this
 amount shall be adjusted every five years by rules and regulations of
 *publication in the Kansas register by* the commissioner of insurance to
 account for the percentage change in the consumer price index;

(B) generates annual revenues in excess of \$55,100,000, except that
 this amount shall be adjusted every five years by rules and regulations of
 *publication in the Kansas register by* the commissioner of insurance to
 account for the percentage change in the consumer price index;

36 (C) employs more than 500 full-time or full-time-equivalent
37 employees per insured entity or is a member of an affiliated group
38 employing more than 1,000 employees in the aggregate;

(D) is a not-for-profit organization or public entity generating annual
budgeted expenditures of at least \$33,060,000, except that this amount
shall be adjusted every five years by rules and regulations of *publication in the Kansas register by* the commissioner of insurance to account for the
percentage change in the consumer price index; or

(E) is a municipality with a population in excess of 50,000 persons.

(b) "Home state": (1) In general, except as provided in subparagraph
(2), the term "home state" means, with respect to an insured:

(A) The state in which an insured maintains its principal place of business or, in the case of an individual, the individual's principal residence; or

(B) if 100% of the insured risk is located out of the state referred to in
paragraph (1)(A), the state to which the greatest percentage of the insured's
taxable premium for that insurance contract is allocated.

10 (2) Affiliated groups. If more than one insured from an affiliated 11 group are named insureds on a single non-admitted insurance contract, the 12 term "home state" means the home state, as determined pursuant to 13 paragraph (1), of the member of the affiliated group that has the largest 14 percentage of premium attributed to it under such insurance contract.

15 (c) "Nonadmitted insurer" means an insurer that is not authorized or 16 admitted to transact the business of insurance under the law of the home 17 state, but does not include a risk retention group as that term is defined in 18 15 U.S.C. § 3901(a)(4), as in effect on July 1, 2015.

(d) "Principal place of business" means, with respect to determining
the home state of the insured, the state where the insured maintains its
headquarters and where the insured's high-level officers direct, control and
coordinate the business activities of the insured.

(e) "Surplus lines insurance" means insurance procured by a surplus
lines licensee from a surplus lines insurer as permitted under the law of the
home state. "Surplus lines insurance" shall also mean excess lines
insurance as may be defined by applicable state law.

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(f) This section shall take effect on and after January 1, 2016.

Sec. 5. K.S.A. 2020 Supp. 40-4,104 is hereby amended to read as follows: 40-4,104. The minimum values as specified in K.S.A. 2020 Supp. 40-4,105, 40-4,106, 40-4,107, 40-4,108 and 40-4,110, and amendments thereto, of any paid-up annuity, cash surrender or death benefits available under an annuity contract shall be based upon minimum nonforfeiture amounts as defined in this section and amendments thereto.

(a) (1) The minimum nonforfeiture amount at any time at or prior to
the commencement of any annuity payments shall be equal to an
accumulation up to such time at rates of interest as indicated in subsection
(b) of the net considerations, as hereinafter defined, paid prior to such
time, decreased by the sum of subparagraphs (A) through (D)-below:

(A) Any prior withdrawals from or partial surrenders of the contractaccumulated at rates of interest as indicated in subsection (b).

41 (B) An annual contract charge of \$50, accumulated at rates of interest42 as indicated in subsection (b).

43 (C) Any premium tax paid by the company for the contract,

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1 accumulated at rates of interest as indicated in subsection (b).

2 (D) The amount of any indebtedness to the company on the contract, 3 including interest due and accrued.

4 (2) The net considerations for a given contract year used to define the 5 minimum nonforfeiture amount shall be an amount equal to 87.5% of the 6 gross considerations credited to the annuity contract during that contract 7 year.

8 (b) The interest rate used in determining minimum nonforfeiture 9 amounts shall be an annual rate of interest determined as the lesser of three 10 percent per annum and the following, which shall be specified in the 11 annuity contract if the interest rate will be reset:

12 (1) The five-year constant maturity treasury rate reported by the 13 federal reserve as of a date, or average over a period, rounded to the 14 nearest  $\frac{1}{20}$ <sup>th</sup> of one percent, specified in the contract no longer than 15 15 months prior to the annuity contract's issue date or redetermination date of 16 <del>paragraph (4) of</del> subsection (b) of this section and amendments thereto(4);</del>

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(2) reduced by 125 basis points;

(3) where the resulting interest rate is not less than-one percent 15 *basis points or 0.15%*; and

(4) the interest rate shall apply for an initial period and may be
redetermined for additional periods. The redetermination date, basis and
period, if any, shall be stated in the annuity contract. The basis is the date
or average over a specified period that produces the value of the five-year
constant maturity treasury rate to be used at each redetermination date.

25 (c) During the period or term that an annuity contract provides substantive participation in an equity indexed benefit, such annuity 26 27 contract may increase the reduction described in paragraph (2) of 28 subsection (b) above(2) by up to an additional 100 basis points to reflect 29 the value of the equity index benefit. The present value at the issue date of 30 such annuity contract, and at each redetermination date thereafter, of the 31 additional reduction shall not exceed the market value of the benefit. The 32 commissioner may require a demonstration that the present value of the 33 additional reduction does not exceed the market value of the benefit. 34 Lacking such a demonstration that is acceptable to the commissioner, the 35 commissioner may disallow or limit the additional reduction.

(d) The commissioner may adopt rules and regulations to implement the provisions of subsection (c)-of this section, and amendments thereto, and to provide for further adjustments to the calculation of minimum nonforfeiture amounts for annuity contracts that provide substantive participation in an equity index benefit and for such other annuity contracts that the commissioner determines adjustments are justified.

42 Sec. 6. K.S.A. 40-22a04 is hereby amended to read as follows: 40-43 22a04. (a) The commissioner shall adopt rules and regulations<del>, with the</del> 1 advice of the advisory committee created by K.S.A. 40-22a05, establishing

2 standards governing the conduct of utilization review activities performed 3 in this state or affecting residents *or healthcare providers* of this state by 4 utilization review organizations. Unless granted an exemption under 5 K.S.A. 40-22a06, *and amendments thereto*, no utilization review 6 organization may conduct utilization review services in this state or 7 affecting residents of this state<u>on</u> or after May 1, 1995, without first 8 obtaining a certificate from the commissioner.

9 (b) The commissioner shall not issue a certificate to a utilization 10 review organization until the applicant:

(1) Files a formal application for certification in such form and detail
as required by the commissioner and such application has been executed
under oath by the chief executive officer, *president or other head official*of the applicant;

15 (2) files with the commissioner a certified copy of its charter or 16 articles of incorporation and bylaws, if any;

(3) states the location of the office or offices of the utilization review
 organization where utilization review affecting residents or health care
 providers of this state will be principally performed;

(4) provides a summary of the qualifications and experience of
 persons performing utilization review affecting the persons and at the
 locations identified pursuant to paragraph (3);

(5) makes payment of a certification fee of \$100 to the commission;and

25 (6) provides such other information or documentation as the 26 commissioner requires.

(c) Certificates issued by the commissioner pursuant to this act shall
 remain effective until suspended, surrendered or revoked subject to
 payment of an annual continuation fee of \$50.

(d) The commissioner with the advice of the advisory committee may suspend or revoke the certificate or any exemption from certification requirements upon determination that the interests of Kansas insureds are not being properly served under such certificate or exemption. Any such action shall be taken only after a hearing conducted in accordance with the provisions of the Kansas administrative procedure act.

Sec. 7. K.S.A. 2020 Supp. 40-22a05 is hereby amended to read as follows: 40-22a05. (a) There is hereby created an advisory committeewhich shall assist the commissioner in the adoption of rules and regulations to implement the provisions of this act. The advisorycommittee shall consist of 13 persons appointed by the commissioner as follows:

42 (1) The commissioner, or the designee of the commissioner, who 43 shall be the chairperson;

1	(2) one member appointed from the public at large;
2	(3) four members who are representatives of utilization review-
3	organizations; and
4	(4) seven members who are representatives of health care providers,
5	one of which shall be a representative of a Kansas hospital, and two of
6	which shall be persons licensed to practice medicine and surgery in-
7	Kansas.
8	(b) Members of the advisory committee shall be appointed for a term
9	of three years, except that the first term of office of two members-
10	representing utilization review organizations and two members
11	representing health care providers shall be for a term of two years, and the
12	first term for two members representing health care providers and one
13	member representing utilization review organizations shall be for a term of
14	one year.
15	(c) The advisory committee shall be attached to the insurance
16	department, and all administrative functions of the advisory committee-
17	shall be under the direction and supervision of the commissioner. Within
18	available appropriations therefor, members of the advisory committee shall
19	be paid subsistence allowances, mileage and other expenses as provided in
20	subsection (e) of K.S.A. 75-3223, and amendments thereto.
21	(d) Before adopting rules and regulations to carry out the provisions
22	of this act, the commissioner with the advice of the advisory committee
23	shall:
24	(1) Establish utilization review standards which provide for-
25	uniformity in the procedures for interaction between utilization review-
26	organizations and health care providers, payors and consumers of health
27	<del>care;</del>
28	(2) establish utilization review procedures that prevent unnecessary
29	and inappropriate disruption to the health care delivery system;
30	(3) strive to achieve an efficient process for the certification of
31	utilization review organizations; and
32	(4) specify the kinds of insurance or types of insurance products to
33	which the standards apply and the scope of such application.
34	(c) This act The utilization review organization act shall not apply to:
35	(1)(a) Utilization review of health care services provided to patients
36	under the authority of the Kansas workers compensation act, K.S.A. 44-
37	501 et seq., and amendments thereto;
38	(2)(b) reviews conducted by any insurance company, health
39	maintenance organization, prepaid service plan, group-funded self-insured
40	plan or similar entity solely for the purpose of determining compliance
41	with the specific terms and conditions of an insurance policy, agreement or
42	contract as a part of the normal claim settlement process; or
43	(3)(c) any medical programs operated by the secretary for aging and

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disability services or any entity to the extent it is acting under contract
 with the secretary.

3 Sec. 8. K.S.A. 40-22a06 is hereby amended to read as follows: 40-4 22a06. (a) No certificate shall be required for utilization review activities 5 conducted by or on behalf of:

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(1) An agency of the federal government;

7 (2) a person, agency or utilization review organization acting on
8 behalf of the federal government, but only to the extent such person,
9 agency or organization is providing services under federal regulation;

(3) a federally qualified health maintenance organization authorized
to transact business in Kansas-which *that* is administering a quality
assurance program and performing utilization review activities for its own
members as required by 42 U.S.C. § 300e(c)(8) and 42 U.S.C. § 300e(c)
(6) respectively;

(4) a person employed or used by a utilization review organization 15 16 authorized to perform utilization review in Kansas, including, but not limited to, individual nurses and other health care providers. This 17 18 exemption shall not apply with respect to individual persons performing 19 utilization review activities in conjunction with any insurance contract or 20 health benefit plan pursuant to a direct contractual relationship with a 21 health maintenance organization, group-funded self-insurance plan or 22 insurance company;

(5) a health benefit plan that is self-insured and qualified under the
 federal employee retirement income security act of 1974 as amended;

(6) hospitals, home health agencies, clinics, private health care
provider offices or any other authorized health care facility or entity
conducting general, in-house utilization review unless such review is for
the purpose of approving or denying payment for hospital or medical
services in a particular case; or

(7) utilization review organizations conducting utilization review only with respect to mental health, chemical dependency, chiropractic, optometric, podiatric, dental or any other health care service or services other than the practice of medicine and surgery, until utilization review standards governing such treatment or service are incorporated in rules and regulations adopted pursuant to K.S.A. 40-22a04, and amendments thereto.

(b) The provisions of K.S.A. 40-22a04(b)(2), (3), (4), (5); and (6) and
subsection (c), and amendments thereto, shall not apply to:

(1) Utilization review organizations accredited by and adhering to the
 national utilization review standards approved by the American accreditation health care commission URAC, an independent, nonprofit
 accreditation entity; or

43 (2) such other utilization review organizations-as the advisory-

1 committee may recommend and the commissioner approves.

Sec. 9. K.S.A. 2020 Supp. 40-3302 is hereby amended to read as
follows: 40-3302. As used in-this aet the insurance holding company act,
unless the context otherwise requires:

(a) "Affiliate" of, or person "affiliated" with, a specific person, means
a person that directly, or indirectly through one or more intermediaries,
controls, is controlled by, or is under common control with, the person
specified.

9 (b) "Commissioner of insurance" *or "commissioner"* means the 10 commissioner of insurance, the commissioner's deputies, or the insurance 11 department, as appropriate.

12 (c) "Control" including the terms "controlling," "controlled by" and "under common control with," means the possession, direct or indirect, of 13 14 the power to direct or cause the direction of the management or policies of a person, whether through the ownership of voting securities, by contract 15 16 other than a commercial contract for goods or nonmanagement services, or 17 otherwise, unless the power is the result of an official position with or 18 corporate office held by the person. Control shall be presumed to exist if 19 any person, directly or indirectly, owns, controls, holds with the power to 20 vote, or holds proxies representing 10% or more of the voting securities of 21 any other person. This presumption may be rebutted by a showing made in 22 the manner provided by subsection (k) of K.S.A. 40-3305(k), and 23 amendments thereto, that control does not exist in fact. The commissioner 24 of insurance may determine, after a hearing in accordance with the 25 provisions of the Kansas administrative procedure act, that control exists 26 in fact, notwithstanding the absence of a presumption to that effect.

(d) "Enterprise risk" means any activity, circumstance, event or series 27 28 of events involving one or more affiliates of an insurer that, if not 29 remedied promptly, is likely to have a material adverse effect upon the financial condition or liquidity of the insurer or its insurance holding 30 31 company system as a whole, including, but not limited to, anything that 32 would cause the insurer's risk-based capital to fall into company action 33 level RBC, as such term is defined in either K.S.A. 40-2c01 et seq., and 34 amendments thereto, or K.S.A. 40-2d01 et seq., and amendments thereto, 35 as appropriate, or would cause the insurer to be in hazardous financial 36 condition as set forth in K.S.A. 40-222b, 40-222c and 40-222d, and 37 amendments thereto.

(e) "Group-wide supervisor" means the regulatory official authorized
to engage in conducting and coordinating group-wide supervision
activities who is determined or acknowledged by the commissioner under
K.S.A. 40-3318, and amendments thereto, to have sufficient significant
contacts with the internationally active insurance group.

43 (f) "Insurance holding company system" means two or more affiliated

1 persons, one or more of which is an insurer.

*(2) meets the following criteria:* 

2 (f)(g) "Insurer" means any corporation, company, association, society, 3 fraternal benefit society, health maintenance organization, nonprofit 4 medical and hospital service corporation, nonprofit dental service 5 corporation, reciprocal exchange, person or partnership writing contracts 6 of insurance, indemnity or suretyship in this state upon any type of risk or 7 loss except lodges, societies, persons or associations transacting business 8 pursuant to the provisions of K.S.A. 40-202, and amendments thereto.

9 (h) "Internationally active insurance group" means an insurance 10 holding company system that:

11 *(1)* Includes an insurer registered under K.S.A. 40-3305, and 12 amendments thereto; and

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(A) Has premiums written in at least three countries;

15 (B) the percentage of gross premiums written outside the United 16 States is at least 10% of the insurance holding company system's total 17 gross written premiums; and

18 (C) based on a three-year rolling average, the total assets of the 19 insurance holding company system are at least \$50,000,000,000 or the 20 total gross written premiums of the insurance holding company system are 21 at least \$10,000,000,000.

29 (i)(k) "Subsidiary" of a specified person means an affiliate controlled 30 by such person directly, or indirectly, through one or more intermediaries.

31 (i)(l) "Voting security" means any security convertible into or 32 evidencing a right to acquire a voting security.

Sec. 10. K.S.A. 2020 Supp. 40-3304 is hereby amended to read as 33 follows: 40-3304. (a) (1) No person other than the issuer shall make a 34 35 tender offer for or a request or invitation for tenders of, or enter into any 36 agreement to exchange securities or, seek to acquire, or acquire, in the 37 open market or otherwise, any voting security of a domestic insurer if, 38 after the consummation thereof, such person would, directly or indirectly, 39 or by conversion or by exercise of any right to acquire, be in control of such insurer, and no person shall enter into an agreement to merge with or 40 otherwise to acquire control of a domestic insurer or any person 41 42 controlling a domestic insurer unless, at the time any such offer, request, or 43 invitation is made or any such agreement is entered into, or prior to the

acquisition of such securities if no offer or agreement is involved, such 1 2 person has filed with the commissioner of insurance and has sent to such 3 insurer, a statement containing the information required by this section and 4 such offer, request, invitation, agreement or acquisition has been approved 5 by the commissioner of insurance in the manner hereinafter prescribed. 6 The requirements of this section shall not apply to the merger or 7 consolidation of those companies subject to the requirements of K.S.A. 40-8 507 and 40-1216-to through 40-1225, inclusive, and amendments thereto.

9 (2) For purposes of this section, any controlling person of a domestic insurer seeking to divest its controlling interest in the domestic insurer, in 10 any manner, shall file with the commissioner, with a copy to the insurer, 11 confidential notice of its proposed divestiture at least 30 days prior to the 12 cessation of control. The commissioner shall determine those instances in 13 14 which each party seeking to divest or to acquire a controlling interest in 15 an insurer shall be required to file for and obtain approval of the transaction. The information shall remain confidential until the conclusion 16 17 of the transaction unless the commissioner, in the commissioner's discretion, determines that confidential treatment will interfere with 18 19 enforcement of this section. If the statement referred to in paragraph (1) is 20 otherwise filed, this paragraph shall not apply.

(3) With respect to a transaction subject to this section, the acquiring person shall also be required to file a preacquisition notification with the commissioner, and such preacquisition notification shall contain the information in the form and manner prescribed by the commissioner through rules and regulations.

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(4) For the purposes of this section:

(A) A domestic insurer shall include any person controlling a
 domestic insurer unless such person as determined by the commissioner of
 insurance is either directly or through its affiliates primarily engaged in
 business other than the business of insurance.

(B) "Person" shall not include any securities broker holding, in the
usual and customary broker's function, less than 20% of the voting
securities of the insurance company or of any person which controls the
insurance company.

(b) The statement to be filed with the commissioner of insurance
hereunder shall be made under oath or affirmation, shall be accompanied
by a nonrefundable filing fee of \$1,000 and shall contain the following
information:

(1) The name and address of each person by whom or on whose
behalf the merger or other acquisition of control referred to in subsection
(a) is to be affected, hereinafter called "acquiring party," and:

42 (A) If such person is an individual, such individual's principal 43 occupation, all offices and positions held by such individual during the past five years and any conviction of crimes other than minor traffic
 violations during the past 10 years;

(B) if such person is not an individual, a report of the nature of its 3 4 business operations during the past five years or for such lesser period as 5 such person and any predecessors thereof shall have been in existence; an 6 informative description of the business intended to be done by such person 7 and such person's subsidiaries; and a list of all individuals who are or who 8 have been selected to become directors or executive officers of such 9 person, or who perform or will perform functions appropriate to such 10 positions. Such list shall include for each such individual the information 11 required by subparagraph (A);

12 (2) the source, nature and amount of the consideration used or to be used in effecting the merger or other acquisition of control, a description 13 of any transaction wherein funds were or are to be obtained for any such 14 purpose including any pledge of the insurer's stock, or the stock of any of 15 its subsidiaries or controlling affiliates, and the identity of persons 16 furnishing such consideration, except that where a source of such 17 18 consideration is a loan made in the lender's ordinary course of business, 19 the identity of the lender shall remain confidential, if the person filing such 20 statement so requests:

(3) fully audited financial information as to the earnings and financial condition of each acquiring party for the preceding five fiscal years of each such acquiring party or for such lesser period as such acquiring party and any predecessors thereof shall have been in existence, and similar unaudited information as of a date not earlier than 90 days prior to the filing of the statement;

(4) any plans or proposals-which *that* each acquiring party may have
to liquidate such insurer, to sell its assets, merge or consolidate it with any
person or to make any other material change to its business, corporate
structure or management;

(5) the number of shares of any security referred to in subsection (a)
which *that* each acquiring party proposes to acquire and the terms of the
offer, request, invitation, agreement or acquisition referred to in subsection
(a), and a statement-as to *regarding* the method-by which utilized to *determine* the fairness of the proposal-was arrived at;

(6) the amount of each class of any security referred to in subsection
(a) which that is beneficially owned or concerning which there is a right to
acquire beneficial ownership by each acquiring party;

39 (7) a full description of any contracts, arrangements or 40 understandings with respect to any security referred to in subsection (a) in 41 which any acquiring party is involved, including, but not limited to, 42 transfer of any of the securities, joint ventures, loan or option 43 arrangements, puts or calls, guarantees of loans, guarantees against loss or guarantees of profits, division of losses or profits, or the giving or
 withholding of proxies. Such description shall identify the persons with
 whom such contracts, arrangements or understandings have been entered
 into;

5 (8) a description of the purchase of any security referred to in 6 subsection (a) during the 12 calendar months preceding the filing of the 7 statement, by any acquiring party, including the dates of purchase, names 8 of the purchasers<del>,</del> and consideration paid or agreed to be paid therefor;

9 (9) a description of any recommendations to purchase any security 10 referred to in subsection (a) made during the 12 calendar months preceding 11 the filing of the statement, by any acquiring party, or by anyone based 12 upon interviews or at the suggestion of such acquiring party;

(10) copies of all tender offers for, requests or invitations for tenders
 of, exchange offers for and agreements to acquire or exchange any
 securities referred to in subsection (a), and, if distributed, of additional
 soliciting material relating thereto;

17 (11) the terms of any agreement, contract or understanding made with 18 or proposed to be made with any broker-dealer as to solicitation of 19 securities referred to in subsection (a) for tender, and the amount of any 20 fees, commissions or other compensation to be paid to broker-dealers with 21 regard thereto;

(12) an agreement by the person required to file the statement
referred to in subsection (a) that such person will provide the annual
report, specified in-subsection (l) of K.S.A. 40-3305(l), and amendments
thereto, for so long as control exists;

(13) an acknowledgment by the person required to file the statement referred to in subsection (a) that the person and all subsidiaries within its control in the insurance holding company system will provide to the commissioner of insurance upon request such information as the commissioner of insurance deems necessary to evaluate enterprise risk to the insurer; and

(14) such additional information as the commissioner of insurance
 may by rule or regulation prescribe as necessary or appropriate for the
 protection of policyholders of the insurer or in the public interest.

35 If the person required to file the statement referred to in subsection (a) 36 is a partnership, limited partnership, syndicate or other group, the 37 commissioner of insurance may require that the information called for by 38 paragraphs (1) through (14) of subsection (b) shall be given with respect to 39 each partner of such partnership or limited partnership, each member of 40 such syndicate or group, and each person who controls such partner or 41 member. If any such partner, member or person is a corporation or the 42 person required to file the statement referred to in subsection (a) is a 43 corporation, the commissioner of insurance may require that the

information called for by paragraphs (1) through (14) of subsection (b)
shall be given with respect to such corporation, each officer and director of
such corporation and each person who is directly or indirectly the
beneficial owner of more than 10% of the outstanding voting securities of
such corporation.

6 If any material change occurs in the facts set forth in the statement filed 7 with the commissioner of insurance and sent to such insurer pursuant to 8 this section, an amendment setting forth such change, together with copies 9 of all documents and other material relevant to such change, shall be filed 10 with the commissioner of insurance and sent to such insurer within two 11 business days after the person learns of such change.

12 (c) If any offer, request, invitation, agreement or acquisition referred to in subsection (a) is proposed to be made by means of a registration 13 statement under the securities act of 1933 or in circumstances requiring the 14 disclosure of similar information under the securities exchange act of 15 16 1934, or under a state law requiring similar registration or disclosure, the 17 person required to file the statement referred to in subsection (a) may 18 utilize such documents in furnishing the information called for by that 19 statement.

(d) (1) The commissioner of insurance shall approve any merger or
other acquisition of control referred to in subsection (a) unless, after a
public hearing thereon conducted in accordance with the provisions of the
Kansas administrative procedure act, the commissioner of insurance finds
that:

(A) After the change of control the domestic insurer referred to in
subsection (a) would not be able to satisfy the requirements for the
issuance of a license to write the line or lines of insurance for which it is
presently licensed;

(B) the financial condition of any acquiring party is such as might
 jeopardize the financial stability of the insurer or prejudice the interest of
 its policyholders;

32 (C) the plans or proposals which the acquiring party has to liquidate 33 the insurer, sell its assets, consolidate or merge it with any person, or to 34 make any other material change in its business, corporate structure or 35 management, are unfair and unreasonable to policyholders of the insurer or 36 are not in the public interest; or

(D) the competence, experience and integrity of those persons who
would control the operation of the insurer are such that it would not be in
the interest of policyholders of the insurer or of the public to permit the
merger or other acquisition of control; or

41 (E) the acquisition is likely to be hazardous or prejudicial to the 42 insurance-buying public.

43 (2) The public hearing referred to in paragraph (1) of subsection (d)

1 (1) shall be held as soon as practical after the statement required by this 2 subsection (a) is filed, and at least 20 days' notice thereof shall be given by 3 the commissioner of insurance to the person filing the statement. Not less 4 than seven days' notice of such public hearing shall be given by the person 5 filing the statement to the insurer and to such other persons as may be 6 designated by the commissioner of insurance. At such hearing, the person 7 filing the statement, the insurer, any person to whom notice of hearing was 8 sent; and any other person whose interests may be affected thereby shall 9 have the right to present evidence, examine and cross-examine witnesses, and offer oral and written arguments in accordance with the Kansas 10 administrative procedure act. In the absence of intervention, such insurer 11 12 or person shall have the right to present oral or written statements in accordance with subsection (c) of K.S.A. 77-523(c), and amendments 13 14 thereto

15 (3) If the proposed acquisition of control will require the approval of more than one commissioner of insurance, the public hearing referred to in 16 17 paragraph (2) may be held on a consolidated basis upon request of the 18 person filing the statement referred to in subsection (a). Such person shall 19 file the statement referred to in subsection (a) with the national association 20 of insurance commissioners within five days of making the request for a 21 public hearing. A commissioner of insurance may opt out of a consolidated 22 hearing, and shall provide notice to the applicant of the opt-out within 10 23 days of the receipt of the statement referred to in subsection (a). A hearing 24 conducted on a consolidated basis shall be public and shall be held within 25 the United States before the commissioners of insurance of the states in 26 which the insurers are domiciled. Such commissioners of insurance shall 27 hear and receive evidence. A commissioner of insurance may attend such 28 hearing in person or by telecommunication.

(4) As a condition of a change of control of a domestic insurer, any determination by the commissioner of insurance that the person acquiring control of the insurer shall be required to maintain or restore the capital of the insurer to the level required by the laws and regulations of this state shall be made not later than 60 days after the date of notification of the change in control submitted pursuant to subsection (a).

(5) The commissioner of insurance may retain at the acquiring person's expense any attorneys, actuaries, accountants and other experts not otherwise a part of the staff of the commissioner of insurance as the commissioner of insurance deems to be reasonably necessary to assist the commissioner of insurance in reviewing the proposed acquisition of control.

41 (e) The provisions of this section shall not apply to: any offer,
42 request, invitation, agreement or acquisition-which that the commissioner
43 of insurance by order shall exempt therefrom as:

1 (1) Not having been made or entered into for the purpose and not 2 having the effect of changing or influencing the control of a domestic 3 insurer; or

4 (2) as otherwise not comprehended within the purposes of this 5 section

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The following shall be violations of this section: (f)

7 (1) The failure to file any statement, amendment or other material 8 required to be filed pursuant to subsection (a) or (b); or

9 (2) the effectuation or any attempt to effectuate an acquisition of 10 control of, or merger with, a domestic insurer unless the commissioner of insurance has given the requisite approval thereto. 11

(g) The courts of this state are hereby vested with jurisdiction over 12 every securityholder of a domestic insurer and every person not resident, 13 domiciled or authorized to do business in this state who files a statement 14 with the commissioner of insurance under this section and over all actions 15 16 involving such person arising out of violations of this section. Each such person shall be deemed to have performed acts equivalent to and 17 18 constituting an appointment by such a person of the commissioner of 19 insurance to be such person's true and lawful attorney upon whom may be 20 served all lawful process in any action, suit or proceeding arising out of 21 violations of this section. Copies of all such lawful process shall be served 22 on the commissioner of insurance and transmitted by registered or certified 23 mail by the commissioner of insurance to such person at such person's last 24 known address.

25 K.S.A. 2020 Supp. 40-3306 is hereby amended to read as Sec. 11. follows: 40-3306. (a) Material transactions by registered insurers with 26 27 their affiliates shall be subject to the following standards:

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(1) The terms shall be fair and reasonable;

29 (2) agreements for cost-sharing services and management shall include such provisions as required by rules and regulations adopted by the 30 31 commissioner of insurance;

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(3) the charges or fees for services performed shall be reasonable;

33 (4) expenses incurred and payment received with respect to such 34 transactions shall be allocated to the insurer in conformity with the 35 requirements of K.S.A. 40-225, and amendments thereto;

36 (5) the books, accounts and records of each party to all such 37 transactions shall be so maintained as to clearly and accurately disclose the 38 nature and details of the transactions including such accounting 39 information necessary to support the reasonableness of the charges or fees 40 to the respective parties; and

41 (6) the insurer's surplus as regards policyholders following any 42 transactions, dividends or distributions to shareholder affiliates shall be 43 reasonable in relation to the insurer's outstanding liabilities and adequate

1 to its financial needs.

2 (b) The following transactions involving a domestic insurer and any 3 person in such insurer's insurance holding company system, *including* 4 amendments or modifications of affiliate agreements previously filed 5 pursuant to this section, may not be entered into unless the insurer has 6 notified the commissioner of insurance in writing of such insurer's 7 intention to enter into such transaction at least 30 days prior thereto, or 8 such shorter period as the commissioner of insurance may permit, and the 9 commissioner of insurance has not disapproved such transaction within 10 such period.

(1) Sales, purchases, exchanges, loans or extensions of credit,
 guarantees or investments provided such transactions are equal to or
 exceed:

(A) With respect to nonlife insurers, the lesser of 3% of the insurer's
 admitted assets or 25% of surplus as regards policyholders; or

(B) with respect to life insurers, 3% of the insurer's admitted assets,each as of December 31 immediately preceding.

18 (2) Loans or extensions of credit to any person who is not an affiliate, 19 where the insurer makes such loans or extensions of credit with the 20 agreement or understanding that the proceeds of such transactions, in 21 whole or in substantial part, are to be used to make loans or extensions of 22 credit to, purchase assets of, or make investments in, any affiliate of the 23 insurer making such loans or extensions of credit provided such 24 transactions are equal to or exceed:

(A) With respect to nonlife insurers, the lesser of 3% of the insurer's
admitted assets or 25% of surplus as regards policyholders;

(B) with respect to life insurers, 3% of the insurer's admitted assets,each as of December 31 immediately preceding.

29 30 (3) Reinsurance agreements or modifications thereto, including:

(A) All reinsurance pooling agreements; and

31 agreements in which the reinsurance premium or a change in the (B) 32 insurer's liabilities, or the projected reinsurance premium or a projected 33 change in the insurer's liabilities in any of the next three consecutive years 34 equals or exceeds 5% of the insurer's surplus as regards policyholders, as 35 of December 31 immediately preceding, including those agreements which 36 may require as consideration the transfer of assets from an insurer to a 37 nonaffiliate, if an agreement or understanding exists between the insurer 38 and nonaffiliate that any portion of such assets will be transferred to one or 39 more affiliates of the insurer:

40 (4) all management agreements, service contracts, tax allocation 41 agreements and all cost-sharing arrangements; and

42 (5) any material transactions, specified by rules and regulations, 43 which the commissioner of insurance determines may adversely affect the 1 interests of an insurer's policyholders.

2 Nothing herein contained shall be deemed to authorize or permit any 3 transactions which, in the case of an insurer not a member of the same 4 insurance holding company system, would be otherwise contrary to law.

5 (c) A domestic insurer may not enter into transactions which are part 6 of a plan or series of like transactions with persons within the insurance 7 holding company system if the purpose of those separate transactions is to 8 avoid the threshold amount required under this section and thus avoid the 9 review that would occur otherwise. If the commissioner of insurance 10 determines that such separate transactions were entered into over any 12month period for such purpose, the commissioner of insurance may 11 exercise authority under K.S.A. 40-3311, and amendments thereto. 12

13 (d) The commissioner of insurance, in reviewing transactions pursuant to subsection (b), shall consider whether the transactions comply 14 with the standards set forth in subsection (a), and whether such 15 transactions may adversely affect the interests of policyholders. 16

17 (e) The commissioner of insurance shall be notified within 30 days of 18 any investment of the domestic insurer in any one corporation if the total 19 investment in such corporation by the insurance holding company system 20 exceeds 10% of such corporation's voting securities.

21 (f) A transaction subject to approval by the commissioner of 22 insurance pursuant to K.S.A. 40-3304, and amendments thereto, shall not 23 be subject to the requirements of this section.

24 (g) (1) No insurer subject to registration under K.S.A. 40-3305, and 25 amendments thereto, shall pay any extraordinary dividend or make any other extraordinary distribution to such insurer's shareholders until: 26

27 (A) Thirty30 days after the commissioner of insurance has received 28 notice of the declaration thereof and has not within such period 29 disapproved such payment; or

(B) the commissioner of insurance has approved such payment within 30 31 such 30-day period.

32 (2) (A) For purposes of this section, an extraordinary dividend or 33 distribution includes any dividend or distribution of cash or other property, 34 the fair market value of which, together with that of other dividends or 35 distributions made within the preceding 12 months exceeds the greater of:

36 Ten percent10% of such insurer's surplus as regards policyholders (i) 37 as of December 31 immediately preceding; or

38 (ii) the net gain from operations of such insurer, if such insurer is a 39 life insurer, or the net income, if such insurer is not a life insurer, not 40 including realized capital gains for the 12-month period ending December 31 immediately preceding, but shall not include pro rata distributions of 41 any class of the insurer's own securities. 42

43 (B) In determining whether a distribution dividend or is

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1 extraordinary, an insurer, other than a life insurer, may carry forward net 2 income from the previous two calendar years that has not already been 3 paid out as dividends. This carry-forward shall be computed by taking the 4 net income from the second and third preceding calendar years, not 5 including realized capital gains, less dividends paid in the second and 6 <u>immediate *immediately*</u> preceding calendar years.

7 (C) An extraordinary dividend or distribution shall also include any 8 dividend or distribution made or paid out of any funds other than earned 9 surplus arising from the insurer's business, as defined in K.S.A. 40-233, 10 and amendments thereto. The provisions of K.S.A. 40-233, and amendments thereto, shall not be construed so as to prohibit an insurer, 11 12 subject to registration under K.S.A. 40-3305, and amendments thereto, 13 from making or paying an extraordinary dividend or distribution in accordance with this section 14

(3) Notwithstanding any other provisions of law, an insurer may
declare an extraordinary dividend or distribution which is conditional upon
the approval of the commissioner of insurance. No declaration shall confer
any rights upon shareholders until:

(A) The commissioner of insurance has approved the payment ofsuch dividend or distribution; or

(B) the commissioner of insurance has not disapproved such payment
 within the 30-day period referred to above.

(h) (1) Notwithstanding the control of a domestic insurer by any
person, the officers and directors of the insurer shall not thereby be
relieved of any obligation or liability to which they would otherwise be
subject by law, and the insurer shall be managed so as to assure its separate
operating identity consistent with this act.

(2) Nothing herein shall preclude a domestic insurer from having or
sharing a common management or cooperative or joint use of personnel,
property or services with one or more other persons under arrangements
meeting the standards of K.S.A. 40-3306, and amendments thereto.

(i) For purposes of this act, in determining whether an insurer's
 surplus as regards policyholders is reasonable in relation to the insurer's
 outstanding liabilities and adequate to such insurer's financial needs, the
 following factors, among others, shall be considered:

(1) The size of the insurer as measured by such insurer's assets,
capital and surplus, reserves, premium writings, insurance in force and
other appropriate criteria;

39 (2) the extent to which the insurer's business is diversified among the40 several lines of insurance;

(3) the number and size of risks insured in each line of business;

42 (4) the extent of the geographical dispersion of the insurer's insured 43 risks; (5) the nature and extent of the insurer's reinsurance program;

2 (6) the quality, diversification, and liquidity of the insurer's 3 investment portfolio;

4 (7) the recent past and projected future trend in the size and 5 performance of the insurer's surplus as regards policyholders;

6 (8) the surplus as regards policyholders maintained by other 7 comparable insurers;

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(9) the adequacy of the insurer's reserves;

9 (10) the quality and liquidity of investments in affiliates. The 10 commissioner of insurance may treat any such investment as a disallowed 11 asset for purposes of determining the adequacy of surplus as regards 12 policyholders whenever in the judgment of the commissioner of insurance 13 such investment so warrants; and

14 (11) the quality of the insurer's earnings and the extent to which the 15 reported earnings include extraordinary items.

16 Sec. 12. K.S.A. 40-4103 is hereby amended to read as follows: 40-17 4103. Risk retention groups chartered in states other than this state seeking 18 to do business as a risk retention group in this state shall observe and abide 19 by the laws of this state as follows:

(a) Notice of operations and designation of commissioner as agent.
Before offering insurance in this state, a risk retention group shall submit to the commissioner:

23 (1) A statement identifying the state or states in which the risk 24 retention group is chartered and licensed as a liability insurance company, 25 date of chartering, its principal place of business and such other 26 information including information on its membership, as the commissioner 27 of this state may require to verify that the risk retention group is qualified 28 under-subsection (k) of K.S.A. 40-4101(k), and amendments thereto;

(2) a copy of its plan of operations or a feasibility study and revisions
of such plan or study submitted to its state of domicile; but, except that the
provision relating to the submission of a plan of operation or a feasibility
study shall not apply with respect to any line or classification of liability
insurance which that:

(A) Was defined in the product liability risk retention act of 1981
before October 27, 1986; and

(B) was offered before such date by any risk retention group-which
 *that* had been chartered and operating for not less than three years before
 such date;

39 (3) a statement of registration—which that designates the
40 commissioner as its agent for the purpose of receiving service of legal
41 documents or process; and

42 (4) a notification fee in the amount of \$250.

43 (b) *Financial condition*. Any risk retention group doing business in

1 this state shall submit to the commissioner:

2 (1) A copy of the group's financial statement submitted to its state of 3 domicile, which shall be certified by an independent public accountant and 4 eontain that contains a statement of opinion on loss and loss adjustment 5 expense reserves made by a member of the American academy of actuaries 6 or a qualified loss reserve specialist (under criteria established by the 7 national association of insurance commissioners);

8 (2) a copy of each examination of the risk retention group as certified
9 by the commissioner or public official conducting the examination;

(3) upon request by the commissioner, a copy of any audit performedwith respect to the risk retention group; and

12 (4) such information as may be required to verify its continuing 13 qualification as a risk retention group under subsection (k) of K.S.A. 40-14 4101(k), and amendments thereto.

(c) *Taxation.* (1) All premiums paid for coverages within this state to
risk retention groups chartered outside this state shall be subject to taxation
at the same rate and subject to the same interest, fines and penalties for
nonpayment as that provided by K.S.A. 40-246c, and amendments thereto.
Risk retention groups chartered or licensed in this state shall be taxed in
accordance with K.S.A. 40-252, and amendments thereto.

(2) To the extent agents or brokers are utilized, they shall report and
pay the taxes for the premiums for risks-which *that* they have placed with
or on behalf of a risk retention group not chartered in this state.

(3) To the extent agents or brokers are not utilized or fail to pay the tax, each risk retention group shall pay the tax for risks insured within the state. Further, Each risk retention group shall report all premiums paid to it for risks insured within the state.

(d) Compliance with unfair claims settlement practices law. Any risk
 retention group, its agents and representatives, shall comply with
 subsection (9) of K.S.A. 40-2404(9), and amendments thereto.

(e) Deceptive, false or fraudulent practices. Any risk retention group
shall comply with the laws of this state regarding deceptive, false or
fraudulent acts or practices. However, except that if the commissioner
seeks an injunction regarding such conduct, the injunction shall be
obtained from a court of competent jurisdiction.

(f) Examination regarding financial condition. Any risk retention group shall submit to an examination in accordance with K.S.A. 40-222 and 40-223, and amendments thereto, by the commissioner to determine its financial condition if the commissioner of the jurisdiction in which the group is chartered has not initiated an examination or does not initiate an examination within 60 days after a request by the commissioner of this state.

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(g) Notice to purchasers. Any policy issued by a risk retention group

1 shall contain in 10 point type on the front page and the declaration page. 2 the following notice:

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## NOTICE

4 This policy is issued by your risk retention group. Your risk retention 5 group may not be subject to all of the insurance laws and regulations of your state. State insurance insolvency guaranty funds are not available for 6 7 your risk retention group.

(h) Prohibited acts regarding solicitation or sale. The following acts 8 9 by a risk retention group are hereby prohibited:

10 (1) The solicitation or sale of insurance by a risk retention group to any person who is not eligible for membership in such group; and 11

12 (2) the solicitation or sale of insurance by, or operation of, a risk 13 retention group that is in a hazardous financial condition or is financially 14 impaired.

15 (i) Prohibition on ownership by an insurance company. No risk 16 retention group shall be allowed to do business in this state if an insurance 17 company is directly or indirectly a retention group all of whose members 18 are insurance companies.

19 Prohibited coverage. No risk retention group may offer insurance (i) 20 policy coverage prohibited by the laws of this state or declared unlawful 21 by the supreme court of the state of Kansas.

22 (k) Delinquency proceedings. A risk retention group not chartered in 23 this state and doing business in this state must comply with a lawful order 24 issued in a voluntary dissolution proceeding or in a delinquency 25 proceeding commenced by a state insurance commissioner if there has 26 been a finding of financial impairment after an examination under 27 subsection (f) of this section.

28 Sec. 13. K.S.A. 2020 Supp. 44-1704 is hereby amended to read as follows: 44-1704. (a) A person engaged in the business of providing 29 professional employer services pursuant to co-employment relationships in 30 31 which all or a majority of the employees of a client are covered employees 32 shall be registered pursuant to this section.

33 (b) A person who is not registered pursuant to this section shall not 34 offer or provide professional employer services in this state, and shall not 35 use the names PEO, professional employer organization, staff leasing 36 company, employee leasing company, administrative employer or any 37 other name or title representing professional employer services.

38 (c) Each applicant for registration shall submit an application to the 39 commissioner in such form and manner as prescribed by the 40 commissioner. The application shall contain the following information:

(1) The name or names under which the professional employer 41 42 organization conducts business; 43

(2) the address of the principal place of business of the professional

employer organization, and the address of each office the professional
 employer organization maintains in this state;

3 (3) the professional employer organization's taxpayer or employer 4 identification number;

5 (4) a list, by jurisdiction, of each name under which the professional 6 employer organization has operated in the preceding five years, including 7 any alternative names, names of predecessors and, if known, successor 8 business entities;

9 (5) a statement of ownership<del>, which</del> *that* shall include the name and 10 evidence of the business experience of any person that, individually, or 11 acting in concert with one or more other persons, owns or controls, 12 directly or indirectly, 15% or more of the equity interest of the professional 13 employer organization;

(6) a statement of management, which *that* shall include the name and
evidence of the business experience of any individual who serves as
president, chief executive officer or otherwise has the authority to act as
senior executive officer of the professional employer organization; and

(7) a financial statement setting forth the financial condition of the
 professional employer organization or professional employer group, which
 that shall comply with the provisions of subsection (h).

(d) (1) Each professional employer organization operating within this state as of the effective date of this act shall complete its initial registration not later than 60 days after the effective date of this act. Such initial registration shall be valid until 60 days from the end of the professional employer organization's first fiscal year that is more than one year after the effective date of this act.

27 (2) Each professional employer organization not operating within this 28 state as of the effective date of this act shall complete its initial registration 29 prior to initiating operations within this state. If a professional employer organization not registered in this state becomes aware that an existing 30 31 client, not based in this state, has employees and operations in this state, 32 the professional employer organization shall either decline to provide 33 professional employer services for those employees, or notify the 34 commissioner within five business days of the professional employer 35 organization's knowledge of this fact and file a limited registration 36 application pursuant to subsection (g), or a full registration if there are 37 more than 50 covered employees employed by such client. The 38 commissioner may issue an interim operating permit for the period of time 39 the application is pending if the professional employer organization is 40 currently registered or licensed by another state; and the commissioner 41 determines it is in the best interests of the potential covered employees.

42 (e) A registrant's application shall automatically expire 120 days 43 after the end of the registrant's fiscal year. Within-60 120 days after the end of a registrant's fiscal year, such registrant shall renew its registration
 by notifying the commissioner of any changes in the information provided
 in such registrant's most recent registration or renewal. A registrant's
 existing registration shall remain in effect for the period of time the
 renewal application is pending.

6 (f) Professional employer organizations in a professional employer 7 group may satisfy any reporting and financial requirements of this section 8 on a combined or consolidated basis, provided that each member of the 9 professional employer group guarantees the financial capacity obligations required by K.S.A. 2020 Supp. 44-1706, and amendments thereto, of each 10 other member of the professional employer group. In the case of a 11 professional employer group that submits a combined or consolidated 12 audited financial statement, including entities that are not professional 13 14 employer organizations or that are not in the professional employer group, 15 the controlling entity of the professional employer group under the consolidated or combined statement must guarantee the obligations of the 16 17 professional employer organizations in the professional employer group.

18 (g) (1) A professional employer organization is eligible for a limited 19 registration if such professional employer organization:

20 (A) Submits a written request for limited registration in such form 21 and manner as prescribed by the commissioner;

(B) is domiciled outside this state; and is licensed or registered as a
 professional employer organization in another state;

(C) does not maintain an office in this state, or directly solicit clients
 located or domiciled within this state; and

26 (D) does not have more than 50 covered employees employed or 27 domiciled in this state on any given day.

(2) A limited registration is valid for one year; and may be renewed
 *thereafter*.

30 (3) A professional employer organization requesting limited 31 registration under this subsection shall provide the commissioner with 32 such information and documentation as required by the commissioner to 33 show that the professional employer organization qualifies for a limited 34 registration.

(4) The provisions of K.S.A. 2020 Supp. 44-1706, and amendments
 thereto, shall not apply to applicants for limited registration.

(h) At the time of initial registration, the applicant shall submit the
most recent audit of the applicant or such applicant's parent holding
company<del>, which</del>. *The most recent* audit shall not be older than 13 months.
Thereafter, a professional employer organization or professional employer
group shall file on an annual basis, within-60 120 days after the end of the
professional employer organization's or parent holding company's fiscal
year, a succeeding audit *and renewal registration application*. An applicant

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may apply to the commissioner for an extension of time to submit such 1 2 audit, but any such request shall be accompanied by a letter from the 3 auditor stating the reasons for the delay and the anticipated audit 4 completion date. For the initial application, if the closing date of the 5 audited financial statements required by this section is older than three 6 months from the date of the application, the application also shall include 7 updated, though-unaudited, financial statements for the most recent 8 quarter. The financial statement shall be prepared in accordance with 9 generally accepted accounting principles and audited by an independent 10 certified public accountant licensed to practice in the jurisdiction in which such accountant is located, and shall be without qualification as to the 11 going concern status of the professional employer organization. A 12 professional employer group may submit combined or consolidated 13 14 audited financial statements to meet the requirements of this section. A 15 professional employer organization that has not had sufficient operating 16 history to have audited financial statements based upon at least 12 months 17 of operating history shall meet the financial capacity requirements of subsection (f) and present financial statements reviewed by a certified 18 19 public accountant.

(i) The department shall maintain a list of professional employer
 organizations registered under this section, and such list shall be readily
 available to the public by electronic or other means.

23 (i) The commissioner, to the extent practical *feasible*, shall permit the 24 acceptance of electronic filings, including applications, documents, reports 25 and other filings required by the commissioner under this section. The commissioner may provide for the acceptance of electronic filings and 26 27 other assurance documents by an independent and qualified entity 28 approved by the commissioner that provides satisfactory assurance of 29 compliance acceptable to the commissioner consistent with, or in lieu of, 30 the requirements of this section and K.S.A. 2020 Supp. 44-1706, and 31 amendments thereto. The commissioner shall permit a professional 32 employer organization to authorize such entity approved by the 33 commissioner to act on the professional employer organization's behalf, 34 including electronic filings of information and payment of registration fees 35 in complying with the registration requirements of this section, including 36 electronic filings of information and payment of registration fees. Use of 37 such an approved entity shall be optional and not mandatory for a 38 registrant. Nothing in this subsection shall limit or change the 39 commissioner's authority to register or terminate registration of a 40 professional employer organization; or to investigate or enforce any provision of K.S.A. 2020 Supp. 44-1701 through 44-1711, and 41 42 amendments thereto.

43 Sec. 14. K.S.A. 40-22a04, 40-22a06, 40-2405, 40-2501, 40-2502, 40-

- 1 2503, 40-2504, 40-2505, 40-2506, 40-2507, 40-2508, 40-2509, 40-2510,
- 2 40-2511, 40-2512, 40-2513 and 40-4103 and K.S.A. 2020 Supp. 40-201a,
- 3 40-221a, 40-246i, 40-4,104, 40-22a05, 40-3302, 40-3304, 40-3306 and 44-
- 4 1704 are hereby repealed.
- 5 Sec. 15. This act shall take effect and be in force from and after its 6 publication in the statute book.