



# SENATE BILL No. 1022

May 14, 1996, Introduced by Senator BOUCHARD and referred to the Committee on Financial Services.

A bill to amend sections 2236, 2242, 3402, 3474, 3606, 3620, 3638, 4040, and 4430 of Act No. 218 of the Public Acts of 1956, entitled as amended

"The insurance code of 1956,"

section 2236 as amended by Act No. 200 of the Public Acts of 1993, sections 2242 and 3606 as amended by Act No. 305 of the Public Acts of 1990, and section 4430 as amended by Act No. 349 of the Public Acts of 1993, being sections 500.2236, 500.2242, 500.3402, 500.3474, 500.3606, 500.3620, 500.3638, 500.4040, and 500.4430 of the Michigan Compiled Laws; and to add sections 2236b and 3606a.

## THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 Section 1. Sections 2236, 2242, 3402, 3474, 3606, 3620,  
2 3638, 4040, and 4430 of Act No. 218 of the Public Acts of 1956,  
3 section 2236 as amended by Act No. 200 of the Public Acts of

1 1993, sections 2242 and 3606 as amended by Act No. 305 of the  
2 Public Acts of 1990, and section 4430 as amended by Act No. 349  
3 of the Public Acts of 1993, being sections 500.2236, 500.2242,  
4 500.3402, 500.3474, 500.3606, 500.3620, 500.3638, 500.4040, and  
5 500.4430 of the Michigan Compiled Laws, are amended and  
6 sections 2236b and 3606a are added to read as follows:

7       Sec. 2236. (1) A basic insurance policy form or annuity  
8 contract form shall not be issued or delivered to any person in  
9 this state, and an insurance or annuity application form if a  
10 written application is required and is to be made a part of the  
11 policy or contract, a printed rider or indorsement form or form  
12 of renewal certificate, and a group certificate in connection  
13 with the policy or contract, shall not be issued or delivered to  
14 a person in this state, ~~until a copy of the form is filed with~~  
15 ~~the insurance bureau and approved by the commissioner as conform-~~  
16 ~~ing with the requirements of~~ UNLESS IT CONFORMS WITH this act  
17 and IS not inconsistent with ~~the~~ law. ~~Failure of the commis-~~  
18 ~~sioner to act within 30 days after submittal shall constitute~~  
19 ~~approval. All such forms, except policies of disability insur-~~  
20 ~~ance as defined in section 3400, shall be plainly printed with~~  
21 ~~type size not less than 8 point unless the commissioner deter-~~  
22 ~~mines that portions of such a form printed with type less than~~  
23 ~~8 point is not deceptive or misleading.~~

24       (2) An insurer ~~may satisfy its obligations to make form~~  
25 ~~filings by becoming~~ THAT IS a member of, or a subscriber to, a  
26 rating organization, licensed under section 2436 or 2630, which  
27 makes ~~such~~ FORM filings ~~and by filing~~ SHALL FILE with the

1 commissioner a copy of its authorization of the rating  
2 organization to make the filings on its behalf. NO MEMBER OF OR  
3 SUBSCRIBER TO A RATING ORGANIZATION SHALL ISSUE A FORM DEVELOPED  
4 BY A RATING ORGANIZATION UNTIL A COPY OF THE FORM IS FILED WITH  
5 THE INSURANCE BUREAU AND APPROVED BY THE COMMISSIONER AS CONFORM-  
6 ING WITH THIS ACT AND NOT INCONSISTENT WITH LAW. FAILURE OF THE  
7 COMMISSIONER TO ACT WITHIN 30 DAYS AFTER SUBMITTAL OF THE FORM  
8 CONSTITUTES APPROVAL. Every member of or subscriber to a rating  
9 organization shall adhere to the form filings made on its behalf  
10 by the organization except that an insurer may file with the com-  
11 missioner a substitute form, and thereafter if a subsequent form  
12 filing by the rating organization affects the use of the substi-  
13 tute form, the insurer shall review its use and notify the com-  
14 missioner WHETHER to withdraw its substitute form. AN INSURER  
15 SHALL FILE THAT PORTION OF A DOCUMENT OR FORM THAT AFFECTS OR  
16 ESTABLISHES A RELATIONSHIP BETWEEN GROUP DISABILITY INSURANCE AND  
17 PERSONAL PROTECTION INSURANCE BENEFITS SUBJECT TO EXCLUSIONS OR  
18 DEDUCTIBLES PURSUANT TO SECTION 3109A.

19 (3) UPON WRITTEN NOTICE TO THE INSURER OR RATING ORGANIZA-  
20 TION, THE COMMISSIONER MAY DISAPPROVE OR WITHDRAW APPROVAL OF ANY  
21 FORM USED IN THIS STATE IF HE OR SHE FINDS 1 OR MORE OF THE  
22 FOLLOWING:

23 (A) THAT IT IS UNFAIRLY DISCRIMINATORY, MISLEADING, DECEP-  
24 TIVE, OBSCURE, OR ENCOURAGES MISREPRESENTATION, INCLUDING CASES  
25 WHERE THE FORM:

26 (i) IS MISLEADING BECAUSE ITS BENEFITS ARE TOO RESTRICTED TO  
27 ACHIEVE THE PURPOSES FOR WHICH THE POLICY IS SOLD.

1           (ii) CONTAINS PROVISIONS WHOSE NATURAL CONSEQUENCE IS TO  
2 LESSEN COMPETITION.

3           (iii) IS UNNECESSARILY VERBOSE OR COMPLEX IN LANGUAGE.

4           (iv) IS MISLEADING, DECEPTIVE, OR OBSCURE BECAUSE OF SUCH  
5 PHYSICAL ASPECTS AS FORMAT, TYPOGRAPHY, STYLE, COLOR, MATERIAL,  
6 OR ORGANIZATION.

7           (B) THAT IT PROVIDES BENEFITS OR CONTAINS OTHER PROVISIONS  
8 THAT ENDANGER THE INSURER'S SOLIDITY.

9           (C) THAT, FOR A POLICY ONLY, IT FAILS TO PROVIDE THE EXACT  
10 NAME AND THE FULL ADDRESS OF THE INSURER. THIS SUBDIVISION DOES  
11 NOT APPLY TO A RIDER OR ENDORSEMENT.

12           (D) THAT IT DOES NOT CONFORM WITH THIS ACT OR A RULE PROMUL-  
13 GATED BY THE COMMISSIONER, OR IS OTHERWISE INCONSISTENT WITH  
14 LAW.

15           (4) WHEN WRITTEN NOTICE IS PROVIDED TO AN INSURER PURSUANT  
16 TO SUBSECTION (3), THE NOTICE SHALL SPECIFY THE OBJECTIONABLE  
17 PROVISIONS OR CONDITIONS AND STATE THE REASONS FOR THE  
18 COMMISSIONER'S DECISION. IF THE FORM IS LEGALLY IN USE BY THE  
19 INSURER IN THIS STATE, THE NOTICE SHALL GIVE THE EFFECTIVE DATE  
20 OF THE COMMISSIONER'S DISAPPROVAL OR WITHDRAWAL OF APPROVAL,  
21 WHICH SHALL NOT BE LESS THAN 30 DAYS AFTER THE MAILING OR DELIV-  
22 ERY OF THE NOTICE TO THE INSURER. IF THE FORM IS NOT LEGALLY IN  
23 USE, THEN DISAPPROVAL OR WITHDRAWAL OR APPROVAL IS EFFECTIVE  
24 IMMEDIATELY.

25           (5) IF THE COMMISSIONER DETERMINES THAT CERTAIN FORMS MAY  
26 HAVE A TENDENCY NOT TO CONFORM WITH THE REQUIREMENTS OF THIS ACT,  
27 THE COMMISSIONER MAY ORDER THAT INSURERS FILE FOR PRIOR APPROVAL

1 FORMS FOR A SPECIFIED CLASSIFICATION, TYPE, OR KIND OF  
2 INSURANCE. THE ORDER SHALL STATE, IN WRITING, THE REASONS FOR  
3 THE COMMISSIONER'S DECISION TO ORDER THE FILING. IF SUCH AN  
4 ORDER IS IN EFFECT, THE FORMS SHALL BE FILED AT LEAST 30 DAYS  
5 BEFORE THE PROPOSED EFFECTIVE DATE. FAILURE OF THE COMMISSIONER  
6 TO ACT WITHIN 30 DAYS AFTER SUBMITTAL CONSTITUTES APPROVAL.

7 (6) IN THE REASONABLE EXERCISE OF DISCRETION, THE COMMIS-  
8 SIONER MAY REQUEST THAT INSURERS PROVIDE HIM OR HER WITH COPIES  
9 OF SPECIFIC FORMS THAT ARE IN USE FOR NEW OR OLD BUSINESS. THESE  
10 SUBMISSIONS SHALL NOT BE CONSIDERED FORMS FILED FOR THE  
11 COMMISSIONER'S APPROVAL.

12 (7) ~~(3) Beginning January 1, 1992, the commissioner shall~~  
13 ~~not approve a form filed pursuant~~ INSURERS SHALL NOT ISSUE A  
14 FORM SUBJECT to this section providing for or relating to an  
15 insurance policy or an annuity contract for personal, family, or  
16 household purposes if the form fails to obtain the readability  
17 score or meet the other requirements of this subsection, as  
18 applicable:

19 (a) The readability score for a form for which approval is  
20 required by this section shall not be less than 45, as determined  
21 by the method provided in subdivisions (b) and (c).

22 (b) The readability score for a form shall be determined as  
23 follows:

24 (i) For a form containing not more than 10,000 words, the  
25 entire form shall be analyzed. For a form containing more than  
26 10,000 words, not less than two 200-word samples per page shall

1 be analyzed instead of the entire form. The samples shall be  
2 separated by at least 20 printed lines.

3       (ii) Count the number of words and sentences in the form or  
4 samples and divide the total number of words by the total number  
5 of sentences. Multiply this quotient by a factor of 1.015.

6       (iii) Count the total number of syllables in the form or  
7 samples and divide the total number of syllables by the total  
8 number of words. Multiply this quotient by a factor of 84.6. As  
9 used in this subparagraph, "syllable" means a unit of spoken lan-  
10 guage consisting of 1 or more letters of a word as indicated by  
11 an accepted dictionary. If the dictionary shows 2 or more  
12 equally acceptable pronunciations of a word, the pronunciation  
13 containing fewer syllables may be used.

14       (iv) Add the figures obtained in subparagraphs (ii) and  
15 (iii) and subtract this sum from 206.835. The figure obtained  
16 equals the readability score for the form.

17       (c) For the purposes of subdivision (b)(ii) and (iii), the  
18 following procedures shall be used:

19       (i) A contraction, hyphenated word, or numbers and letters  
20 when separated by spaces shall be counted as 1 word.

21       (ii) A unit of words ending with a period, semicolon, or  
22 colon, but excluding headings and captions, shall be counted as 1  
23 sentence.

24       (d) In determining the readability score, the method pro-  
25 vided in subdivisions (b) and (c):

26       (i) Shall be applied to an insurance policy form or an  
27 annuity contract, together with a rider or indorsement form

1 usually associated with such an insurance policy form or annuity  
2 contract.

3 (ii) Shall not be applied to words or phrases that are  
4 defined in an insurance policy form, an annuity contract, or  
5 riders, indorsements, or group certificates pursuant to an insur-  
6 ance policy form or annuity contract.

7 (iii) Shall not be applied to language specifically agreed  
8 upon through collective bargaining or required by a collective  
9 bargaining agreement.

10 (iv) Shall not be applied to language that is prescribed by  
11 state or federal statute or by rules or regulations promulgated  
12 pursuant to a state or federal statute.

13 (e) Each form for which approval is required by this section  
14 shall contain both of the following:

15 (i) Topical captions.

16 (ii) An identification of exclusions.

17 (f) Each insurance policy and annuity contract that has more  
18 than 3,000 words printed on not more than 3 pages of text or that  
19 has more than 3 pages of text regardless of the number of words  
20 shall contain a table of contents. This subdivision does not  
21 apply to indorsements.

22 (g) Each rider or indorsement form that changes coverage  
23 shall do all of the following:

24 (i) Contain a properly descriptive title.

25 (ii) Reproduce either the entire paragraph or the provision  
26 as changed.

1 (iii). Be accompanied by an explanation of the change.

2 (h) If a computer system approved by the commissioner  
3 calculates the readability score of a form as being in compliance  
4 with this subsection, the form is considered in compliance with  
5 the readability score requirements of this subsection.

6 ~~(4) After January 1, 1992, any change or addition to a  
7 policy or annuity contract form for personal, family, or house-  
8 hold purposes, whether by indorsement, rider, or otherwise, or a  
9 change or addition to a rider or indorsement form to such policy  
10 or annuity contract form, which policy or annuity contract form  
11 has not been previously approved under subsection (3), shall be  
12 submitted for approval pursuant to subsection (3).~~

13 ~~(5) Upon written notice to the insurer, the commissioner may  
14 disapprove, withdraw approval or prohibit the issuance, advertis-  
15 ing or delivery of any form to any person in this state if it  
16 violates any provisions of this act, or contains inconsistent,  
17 ambiguous or misleading clauses, or contains exceptions and con-  
18 ditions that unreasonably or deceptively affect the risk pur-  
19 ported to be assumed in the general coverage of the policy. The  
20 notice shall specify the objectionable provisions or conditions  
21 and state the reasons for the commissioner's decision. If the  
22 form is legally in use by the insurer in this state, the notice  
23 shall give the effective date of the commissioner's disapproval,  
24 which shall not be less than 30 days subsequent to the mailing or  
25 delivery of the notice to the insurer. If the form is not  
26 legally in use, then disapproval shall be effective immediately.~~

1       (8) ~~(6)~~ If a form is disapproved or approval is withdrawn  
2 under the provisions of this act, the insurer shall be entitled  
3 upon demand to a hearing before the commissioner or a deputy com-  
4 missioner within 30 days after the notice of disapproval or of  
5 withdrawal of approval. ~~, and after~~ AFTER the hearing, the  
6 commissioner shall make findings of fact and law, and either  
7 affirm, modify, or withdraw his or her original order or  
8 decision.

9       (9) ~~(7)~~ Any issuance, use, or delivery by an insurer of  
10 any form ~~without the prior approval of the commissioner as~~  
11 ~~required by subsection (1) or after withdrawal of approval as~~  
12 ~~provided by subsection (5)~~ THAT DOES NOT CONFORM WITH THIS ACT  
13 OR IS INCONSISTENT WITH LAW constitutes a separate violation for  
14 which the commissioner may order the imposition of a civil pen-  
15 alty of \$25.00 for each offense, but not to exceed the maximum  
16 penalty of \$500.00 for any 1 series of offenses relating to any 1  
17 basic policy form, which penalty may be recovered by the attorney  
18 general as provided in section 230.

19       (10) A NONCONFORMING FORM IN USE BY AN INSURER SHALL BE CON-  
20 STRUED IN A MANNER NOT LESS FAVORABLE TO THE POLICYHOLDER THAN  
21 THAT WHICH IS ALLOWABLE UNDER THIS ACT.

22       (11) INSURERS USING A FORM FILED PURSUANT TO SUBSECTION (2)  
23 OR (5) REQUIRING APPROVAL BY THE COMMISSIONER, OR A FORM NOT  
24 FILED PURSUANT TO SUBSECTION (12), ARE NOT SUBJECT TO THE PENAL-  
25 TIES IN SUBSECTION (9) FOR THE USE OF THAT FORM IF IT IS LATER  
26 DETERMINED NONCONFORMING.

1 (12) ~~(8)~~ The filing requirements of this section ~~shall~~  
2 DO not apply to:

3 (a) Insurance against loss of or damage to:

4 (i) Imports, exports, or domestic shipments.

5 (ii) Bridges, tunnels, or other instrumentalities of trans-  
6 portation and communication.

7 (iii) Aircraft and attached equipment.

8 (iv) Vessels and watercraft under construction or owned by  
9 or used in a business or having a straight-line hull length of  
10 more than 24 feet.

11 (b) Insurance against loss resulting from liability, other  
12 than worker's compensation or employers' liability arising out of  
13 the ownership, maintenance, or use of:

14 (i) Imports, exports, or domestic shipments.

15 (ii) Aircraft and attached equipment.

16 (iii) Vessels and watercraft under construction or owned by  
17 or used in a business or having a straight-line hull length of  
18 more than 24 feet.

19 (c) Surety bonds other than fidelity bonds.

20 (d) Policies, riders, indorsements, or forms of unique char-  
21 acter designed for and used with relation to insurance upon a  
22 particular subject, or ~~which~~ THAT relate to the manner of dis-  
23 tribution of benefits or to the reservation of rights and bene-  
24 fits under life or disability insurance policies and are used at  
25 the request of the individual policyholder, contract holder, or  
26 certificate holder. ~~Beginning September 1, 1968, the~~

27 ~~commissioner by order may exempt from the filing requirements of~~

1 ~~this section and sections 2242, 3606, and 4430 for so long as he~~  
2 ~~or she considers proper any insurance document or form, except~~  
3 ~~that portion of the document or form that establishes a relation~~  
4 ~~ship between group disability insurance and personal protection~~  
5 ~~insurance benefits subject to exclusions or deductibles pursuant~~  
6 ~~to section 3109a, as specified in the order to which this section~~  
7 ~~practicably may not be applied, or the filing and approval of~~  
8 ~~which are considered unnecessary for the protection of the~~  
9 ~~public. Insurance documents or forms providing medical payments~~  
10 ~~or income replacement benefits, except that portion of the docu~~  
11 ~~ment or form that establishes a relationship between group dis~~  
12 ~~ability insurance and personal protection insurance benefits~~  
13 ~~subject to exclusions or deductibles pursuant to section 3109a,~~  
14 ~~exempt by order of the commissioner from the filing requirements~~  
15 ~~of this section and sections 2242 and 3606 are considered~~  
16 ~~approved by the commissioner for purposes of section 3430.~~

17 (13) ~~(9)~~ Every order made by the commissioner under the  
18 provisions of this section ~~shall be~~ IS subject to court review  
19 as provided in section 244.

20 SEC. 2236B. A FORM OR DOCUMENT ISSUED IN THIS STATE BY AN  
21 INSURER THAT CONFORMS WITH THIS ACT AND IS NOT INCONSISTENT WITH  
22 LAW IS APPROVED UNTIL THE COMMISSIONER TAKES ACTION PURSUANT TO  
23 THIS ACT TO DISAPPROVE OR WITHDRAW APPROVAL FOR THE FORM OR  
24 DOCUMENT.

25 Sec. 2242. (1) Except as otherwise provided in section  
26 ~~2236(8)(d)~~ 2236(12)(D), a group disability policy shall not be  
27 issued or delivered in this state unless ~~a copy of the form has~~

1 ~~been filed with the commissioner and approved by him or her~~ IT  
2 CONFORMS WITH THIS ACT AND IS NOT INCONSISTENT WITH LAW.

3 ~~(2) The commissioner may within 30 days after the filing of~~  
4 ~~a disability insurance policy form applicable to individual or~~  
5 ~~family expense coverage, disapprove the form for any of the fol-~~  
6 ~~lowing, subject to the requirements as to notice, hearing, and~~  
7 ~~appeal set forth in sections 244 and 2236:~~

8 ~~(a) The benefits provided therein are unreasonable in rela-~~  
9 ~~tion to the premium charged.~~

10 ~~(b) It contains a provision or provisions which are unjust,~~  
11 ~~unfair, inequitable, misleading, deceptive, or encourage misrep-~~  
12 ~~resentation of the policy.~~

13 ~~(c) It does not comply with other provisions of law.~~

14 (2) UPON WRITTEN NOTICE TO THE INSURER, THE COMMISSIONER MAY  
15 DISAPPROVE OR WITHDRAW APPROVAL OF ANY FORM USED IN THIS STATE IF  
16 HE OR SHE FINDS 1 OR MORE OF THE FOLLOWING:

17 (A) THAT IT IS UNFAIRLY DISCRIMINATORY, MISLEADING, DECEP-  
18 TIVE, OBSCURE, OR ENCOURAGES MISREPRESENTATION, INCLUDING CASES  
19 WHERE THE FORM:

20 (i) IS MISLEADING BECAUSE ITS BENEFITS ARE TOO RESTRICTED TO  
21 ACHIEVE THE PURPOSES FOR WHICH THE POLICY IS SOLD.

22 (ii) CONTAINS PROVISIONS WHOSE NATURAL CONSEQUENCE IS TO  
23 LESSEN COMPETITION.

24 (iii) IS UNNECESSARILY VERBOSE OR COMPLEX IN LANGUAGE.

25 (iv) IS MISLEADING, DECEPTIVE, OR OBSCURE BECAUSE OF SUCH  
26 PHYSICAL ASPECTS AS FORMAT, TYPOGRAPHY, STYLE, COLOR, MATERIAL,  
27 OR ORGANIZATION.

1 (B) THAT IT PROVIDES BENEFITS OR CONTAINS OTHER PROVISIONS  
2 THAT ENDANGER THE INSURER'S SOLIDITY.

3 (C) THAT FOR A POLICY ONLY, IT FAILS TO PROVIDE THE EXACT  
4 NAME AND THE FULL ADDRESS OF THE INSURER. THIS SUBDIVISION DOES  
5 NOT APPLY TO A RIDER OR ENDORSEMENT.

6 (D) THAT IT DOES NOT CONFORM WITH THE REQUIREMENTS OF THIS  
7 ACT OR A RULE PROMULGATED BY THE COMMISSIONER, OR IS OTHERWISE  
8 INCONSISTENT WITH LAW.

9 (3) WHEN WRITTEN NOTICE IS PROVIDED TO AN INSURER PURSUANT  
10 TO SUBSECTION (2), THE NOTICE SHALL SPECIFY THE OBJECTIONABLE  
11 PROVISIONS OR CONDITIONS AND STATE THE REASONS FOR THE  
12 COMMISSIONER'S DECISION. IF THE FORM IS LEGALLY IN USE BY THE  
13 INSURER IN THIS STATE, THE NOTICE SHALL GIVE THE EFFECTIVE DATE  
14 OF THE COMMISSIONER'S DISAPPROVAL OR WITHDRAWAL OF APPROVAL,  
15 WHICH SHALL NOT BE LESS THAN 30 DAYS AFTER THE MAILING OR DELIV-  
16 ERY OF THE NOTICE TO THE INSURER. IF THE FORM IS NOT LEGALLY IN  
17 USE, THEN DISAPPROVAL OR WITHDRAWAL OF APPROVAL IS EFFECTIVE  
18 IMMEDIATELY.

19 (4) IF THE COMMISSIONER DETERMINES THAT CERTAIN FORMS MAY  
20 HAVE A TENDENCY TO NOT CONFORM WITH THE REQUIREMENTS OF THIS ACT,  
21 THE COMMISSIONER MAY ORDER THAT INSURERS FILE FOR PRIOR APPROVAL  
22 OF FORMS FOR A SPECIFIED CLASSIFICATION, TYPE, OR KIND OF  
23 INSURANCE. THE ORDER SHALL STATE, IN WRITING, THE REASONS FOR  
24 THE COMMISSIONER'S DECISION TO ORDER THE FILING. IF SUCH AN  
25 ORDER IS IN EFFECT, THE FORMS SHALL BE FILED AT LEAST 30 DAYS  
26 BEFORE THE PROPOSED EFFECTIVE DATE. FAILURE OF THE COMMISSIONER  
27 TO ACT WITHIN 30 DAYS AFTER SUBMITTAL CONSTITUTES APPROVAL.

1 (5) ~~(3)~~ The commissioner may at any time DISAPPROVE OR  
 2 withdraw ~~his or her~~ approval of ~~an individual or family~~  
 3 ~~expense~~ A policy form on any of the grounds stated in subsection  
 4 (2), subject to the requirements as to notice, hearing, and  
 5 appeal set forth in sections 244 and 2236. An insurer shall not  
 6 issue the form after the effective date of the DISAPPROVAL OR  
 7 withdrawal of approval.

8 (6) IN THE REASONABLE EXERCISE OF DISCRETION, THE COMMIS-  
 9 SIONER MAY REQUEST THAT INSURERS PROVIDE HIM OR HER WITH COPIES  
 10 OF SPECIFIC FORMS THAT ARE IN USE FOR NEW OR OLD BUSINESS. THESE  
 11 SUBMISSIONS SHALL NOT BE CONSIDERED FORMS FILED FOR THE  
 12 COMMISSIONER'S APPROVAL.

13 (7) EVERY ORDER MADE BY THE COMMISSIONER UNDER THE PROVI-  
 14 SIONS OF THIS SECTION IS SUBJECT TO COURT REVIEW AS PROVIDED IN  
 15 SECTION 244.

16 Sec. 3402. ~~No~~ A policy of disability insurance ~~as~~  
 17 ~~defined in section 3400 (1),~~ shall NOT be delivered or issued  
 18 for delivery to any person in this state unless ALL OF THE FOL-  
 19 LOWING ARE MET:

20 (A) ~~(1)~~ The entire money and other considerations  
 21 ~~therefor~~ FOR THE POLICY are expressed ~~therein, and~~ IN THE  
 22 POLICY.

23 (B) ~~(2)~~ The time at which the insurance takes effect and  
 24 terminates is ~~expressed therein, and~~ IN THE POLICY.

25 (C) ~~(3) It purports to insure~~ THE POLICY INSURES only 1  
 26 person, except that a policy may insure, originally or by  
 27 subsequent amendment, upon the application of an adult member of

1 a family who shall be ~~deemed~~ CONSIDERED the policyholder, any 2  
 2 or more eligible members of that family, including husband, wife,  
 3 dependent children or any children under a specified age ~~which~~  
 4 ~~shall~~ THAT DOES not exceed 19 years, and any other person depen-  
 5 dent upon the policyholder. ~~;~~ ~~and~~

6 (D) ~~(4)~~ The style, arrangement, and over-all appearance of  
 7 the policy give no undue prominence to any portion of the text,  
 8 and unless every printed portion of the text of the policy and of  
 9 any endorsements or attached papers is plainly printed in  
 10 light-faced type of a style in general use, the size of which  
 11 shall be uniform and not less than 10-point with a lower-case  
 12 unspaced alphabet length, not less than 120-point in length of  
 13 line. ~~(the AS USED IN THIS SUBDIVISION, "text" shall include~~  
 14 INCLUDES all printed matter except the name and address of the  
 15 insurer, name or title of the policy, the brief description, if  
 16 any, and captions and subcaptions. ~~);~~ ~~and~~

17 (E) ~~(5)~~ The exceptions and reductions of indemnity are set  
 18 forth in the policy and, except those ~~which~~ THAT are set forth  
 19 in sections 3406 through ~~3454~~ 3452, are printed, at the  
 20 insurer's option, either included with the benefit provision to  
 21 which they apply, or under an appropriate caption such as  
 22 "EXCEPTIONS", or "EXCEPTIONS AND REDUCTIONS". ~~;~~ ~~Provided, That~~  
 23 HOWEVER, if an exception or reduction specifically applies only  
 24 to a particular benefit of the policy, a statement of ~~such~~ THAT  
 25 exception or reduction shall be included with the benefit provi-  
 26 sion to which it applies. ~~;~~ ~~and~~

1 (F) ~~(6)~~ Each such form, including riders and endorsements,  
2 ~~shall be~~ IS identified by a form number in the lower left-hand  
3 corner of the first page ~~thereof, and~~ OF THE FORM.

4 (G) ~~(7) It~~ THE POLICY contains no provision purporting to  
5 make any portion of the charter, rules, constitution, or bylaws  
6 of the insurer a part of the policy unless ~~such~~ THAT portion is  
7 set forth in full in the policy, except in the case of the incor-  
8 poration of, or reference to, a statement of rates or classifica-  
9 tion of risks, or short-rate table. ~~filed with the~~  
10 ~~commissioner.~~

11 Sec. 3474. No policy of insurance against loss or expense  
12 from the sickness, or from the bodily injury or death from acci-  
13 dent of the insured, nor any application, rider, or endorsement  
14 to be used in connection ~~therewith,~~ WITH THE POLICY shall be  
15 delivered or issued for delivery to any person in this state,  
16 ~~until the classification of risks and any premium rates pertain-~~  
17 ~~ing thereto have been filed with the department of insurance-~~  
18 UNLESS IT CONFORMS WITH THIS ACT AND IS NOT INCONSISTENT WITH  
19 LAW.

20 Sec. 3606. (1) An insurer authorized to write disability  
21 insurance in this state shall have the power to issue group dis-  
22 ability insurance policies.

23 (2) Except as otherwise provided in section ~~2236(8)(d)~~  
24 2236(12)(D), a group disability insurance policy shall not be  
25 issued or delivered in this state unless ~~a copy of the form~~  
26 ~~shall have been filed with the commissioner and approved by him~~

1 ~~or her~~ IT CONFORMS WITH THIS ACT AND IS NOT INCONSISTENT WITH  
2 LAW.

3 SEC. 3606A. (1) UPON WRITTEN NOTICE TO THE INSURER, THE  
4 COMMISSIONER MAY DISAPPROVE OR WITHDRAW APPROVAL OF ANY FORM USED  
5 IN THIS STATE IF HE OR SHE FINDS 1 OR MORE OF THE FOLLOWING:

6 (A) THAT IT IS UNFAIRLY DISCRIMINATORY, MISLEADING, DECEP-  
7 TIVE, OBSCURE, OR ENCOURAGES MISREPRESENTATION, INCLUDING CASES  
8 WHERE THE FORM:

9 (i) IS MISLEADING BECAUSE ITS BENEFITS ARE TOO RESTRICTED TO  
10 ACHIEVE THE PURPOSES FOR WHICH THE POLICY IS SOLD.

11 (ii) CONTAINS PROVISIONS WHOSE NATURAL CONSEQUENCE IS TO  
12 LESSEN COMPETITION.

13 (iii) IS UNNECESSARILY VERBOSE OR COMPLEX IN LANGUAGE.

14 (iv) IS MISLEADING, DECEPTIVE, OR OBSCURE BECAUSE OF SUCH  
15 PHYSICAL ASPECTS AS FORMAT, TYPOGRAPHY, STYLE, COLOR, MATERIAL,  
16 OR ORGANIZATION.

17 (B) THAT IT PROVIDES BENEFITS OR CONTAINS OTHER PROVISIONS  
18 THAT ENDANGER THE INSURER'S SOLIDITY.

19 (C) THAT FOR A POLICY ONLY, IT FAILS TO PROVIDE THE EXACT  
20 NAME AND THE FULL ADDRESS OF THE INSURER. THIS SUBDIVISION DOES  
21 NOT APPLY TO A RIDER OR ENDORSEMENT.

22 (D) THAT IT DOES NOT CONFORM WITH THE REQUIREMENTS OF THIS  
23 ACT OR A RULE PROMULGATED BY THE COMMISSIONER, OR IS OTHERWISE  
24 INCONSISTENT WITH LAW.

25 (2) WHEN WRITTEN NOTICE IS PROVIDED TO AN INSURER PURSUANT  
26 TO SUBSECTION (1), THE NOTICE SHALL SPECIFY THE OBJECTIONABLE  
27 PROVISIONS OR CONDITIONS AND STATE THE REASONS FOR THE

1 COMMISSIONER'S DECISION. IF THE FORM IS LEGALLY IN USE BY THE  
2 INSURER IN THIS STATE, THE NOTICE SHALL GIVE THE EFFECTIVE DATE  
3 OF THE COMMISSIONER'S DISAPPROVAL OR WITHDRAWAL OF APPROVAL,  
4 WHICH SHALL NOT BE LESS THAN 30 DAYS AFTER THE MAILING OR DELIV-  
5 ERY OF THE NOTICE TO THE INSURER. IF THE FORM IS NOT LEGALLY IN  
6 USE, THEN DISAPPROVAL OR WITHDRAWAL OF APPROVAL IS EFFECTIVE  
7 IMMEDIATELY.

8 (3) IF A FORM IS DISAPPROVED OR APPROVAL IS WITHDRAWN UNDER  
9 THE PROVISIONS OF THIS ACT, THE INSURER SHALL BE ENTITLED UPON  
10 DEMAND TO A HEARING BEFORE THE COMMISSIONER OR A DEPUTY COMMIS-  
11 SIONER WITHIN 30 DAYS AFTER THE NOTICE OF DISAPPROVAL OR OF WITH-  
12 DRAWAL OF APPROVAL. AFTER THE HEARING, THE COMMISSIONER SHALL  
13 MAKE FINDINGS OF FACT AND LAW, AND EITHER AFFIRM, MODIFY, OR  
14 WITHDRAW HIS OR HER ORIGINAL ORDER OR DECISION.

15 (4) IF THE COMMISSIONER DETERMINES THAT CERTAIN FORMS MAY  
16 HAVE A TENDENCY TO NOT CONFORM WITH THE REQUIREMENTS OF THIS ACT,  
17 THE COMMISSIONER MAY ORDER THAT INSURERS FILE FOR PRIOR APPROVAL  
18 OF FORMS FOR A SPECIFIED CLASSIFICATION, TYPE, OR KIND OF  
19 INSURANCE. THE ORDER SHALL STATE, IN WRITING, THE REASONS FOR  
20 THE COMMISSIONER'S DECISION TO ORDER THE FILING. IF SUCH AN  
21 ORDER IS IN EFFECT, THE FORMS SHALL BE FILED AT LEAST 30 DAYS  
22 BEFORE THE PROPOSED EFFECTIVE DATE. FAILURE OF THE COMMISSIONER  
23 TO ACT WITHIN 30 DAYS AFTER SUBMITTAL CONSTITUTES APPROVAL.

24 (5) IN THE REASONABLE EXERCISE OF DISCRETION, THE COMMIS-  
25 SIONER MAY REQUEST THAT INSURERS PROVIDE HIM OR HER WITH COPIES  
26 OF SPECIFIC FORMS THAT ARE IN USE FOR NEW OR OLD BUSINESS. THESE

1 SUBMISSIONS SHALL NOT BE CONSIDERED FORMS FILED FOR THE  
2 COMMISSIONER'S APPROVAL.

3 (6) EVERY ORDER MADE BY THE COMMISSIONER UNDER THE PROVI-  
4 SIONS OF THIS SECTION IS SUBJECT TO COURT REVIEW AS PROVIDED IN  
5 SECTION 244.

6 Sec. 3620. (1) Family expense insurance is that form of  
7 accident and health or hospitalization, medical, surgical and  
8 sick-care insurance ~~which~~ THAT is written under 1 policy issued  
9 to the head of a family who may be either spouse, and insuring  
10 ~~such~~ THE head and 1 or more dependents, and may include a  
11 non-dependent spouse. Benefits under ~~such~~ THE policy, except  
12 as applied to the head of the family, shall not include indemni-  
13 ties for loss of time from any cause.

14 (2) ~~Any~~ AN insurer authorized to write accident and health  
15 or hospitalization, medical, surgical and sick-care insurance in  
16 this state is authorized to issue family expense insurance  
17 policies.

18 (3) ~~No such policy may~~ A FAMILY EXPENSE INSURANCE POLICY  
19 SHALL NOT be issued or delivered in this state unless ~~a copy of~~  
20 ~~the form thereof shall have been filed with the commissioner and~~  
21 ~~approved by him~~ IT CONFORMS WITH THIS ACT AND IS NOT INCONSIS-  
22 TENT WITH LAW.

23 (4) Every policy of family expense insurance shall contain  
24 the applicable provisions of sections 3406 through 3466  
25 ~~(required and optional provisions for individual disability~~  
26 ~~insurance policies),~~ and shall contain the following provisions  
27 in substance:

1 (a) A provision that the policy and the application signed  
2 by the husband or wife acting as the head of the family for the  
3 purpose of this insurance shall constitute the entire contract  
4 between the parties, and that all statements made by the head of  
5 the family shall, in the absence of fraud, be ~~deemed~~ CONSIDERED  
6 representations and not warranties, and that no statement shall  
7 be used in defense of a claim under the policy unless it is con-  
8 tained in a written application.

9 (b) A provision that to the family group originally insured  
10 may be added, from time to time, on application of the head of  
11 the family, any new members of the family eligible for insurance  
12 in ~~such~~ THE family group.

13 (5) ~~Such policies shall be~~ FAMILY EXPENSE INSURANCE POLI-  
14 CIES ARE subject to ~~section 3474 (filing of risk classifications~~  
15 ~~and rates)~~ SECTIONS 3401A AND 3474.

16 Sec. 3638. (1) ~~Any~~ AN insurer authorized to write dis-  
17 ability insurance in this state shall have the power to issue  
18 blanket disability insurance policies.

19 (2) ~~No such~~ A blanket DISABILITY policy ~~may~~ SHALL NOT be  
20 issued or delivered in this state unless ~~a copy of the form~~  
21 ~~shall have been filed with the commissioner and approved by him~~  
22 IT CONFORMS WITH THIS ACT AND IS NOT INCONSISTENT WITH LAW.

23 (3) ~~Such policies shall~~ BLANKET DISABILITY POLICIES ARE  
24 also ~~be~~ subject to ~~section 3474 (filing of risk classifica-~~  
25 ~~tions and rates)~~ SECTIONS 3401A AND 3474.

26 Sec. 4040. (1) ~~Any~~ A life insurer may include in its  
27 policy a provision intended to safeguard ~~such~~ THE life

1 insurance against lapse, or provisions that shall provide a  
2 special surrender value ~~therefor in the event that~~ FOR THE  
3 POLICY IF the insured ~~thereunder shall~~ UNDER THE POLICY, by  
4 reason of accidental bodily injury or disease, ~~be~~ IS unable to  
5 continue the premium payments ~~thereon~~ ON THE POLICY.

6 (2) A life insurance policy may also contain, or provide  
7 through contracts supplemental ~~thereto, such~~ TO THE POLICY pro-  
8 visions relating to accident and sickness insurance as are autho-  
9 rized under section 602(2). ~~(accidental death, dismemberment, or~~  
10 ~~loss of sight; certain benefits in event of total and permanent~~  
11 ~~disability). No such~~ A supplemental contract shall NOT be  
12 issued or delivered to any person in this state unless ~~and until~~  
13 ~~a copy of the form thereof has been submitted to and approved by~~  
14 ~~the commissioner, under such reasonable rules and regulations as~~  
15 ~~he shall make concerning the provisions in such contracts and~~  
16 ~~their submission to and approval by him~~ IT CONFORMS WITH THIS  
17 ACT AND IS NOT INCONSISTENT WITH LAW.

18 (3) UPON WRITTEN NOTICE TO THE INSURER, THE COMMISSIONER MAY  
19 DISAPPROVE OR WITHDRAW APPROVAL OF ANY FORM USED IN THIS STATE IF  
20 HE OR SHE FINDS 1 OR MORE OF THE FOLLOWING:

21 (A) THAT IT IS UNFAIRLY DISCRIMINATORY, MISLEADING, DECEP-  
22 TIVE, OBSCURE, OR ENCOURAGES MISREPRESENTATION, INCLUDING CASES  
23 WHERE THE FORM:

24 (i) IS MISLEADING BECAUSE ITS BENEFITS ARE TOO RESTRICTED TO  
25 ACHIEVE THE PURPOSES FOR WHICH THE POLICY IS SOLD.

26 (ii) CONTAINS PROVISIONS WHOSE NATURAL CONSEQUENCE IS TO  
27 LESSEN COMPETITION.

1 (iii) IS UNNECESSARILY VERBOSE OR COMPLEX IN LANGUAGE.

2 (iv) IS MISLEADING, DECEPTIVE, OR OBSCURE BECAUSE OF SUCH  
3 PHYSICAL ASPECTS AS FORMAT, TYPOGRAPHY, STYLE, COLOR, MATERIAL,  
4 OR ORGANIZATION.

5 (B) THAT IT PROVIDES BENEFITS OR CONTAINS OTHER PROVISIONS  
6 THAT ENDANGER THE INSURER'S SOLIDITY.

7 (C) THAT FOR A POLICY ONLY, IT FAILS TO PROVIDE THE EXACT  
8 NAME AND THE FULL ADDRESS OF THE INSURER. THIS SUBDIVISION DOES  
9 NOT APPLY TO A RIDER OR ENDORSEMENT.

10 (D) THAT IT DOES NOT CONFORM WITH THE REQUIREMENTS OF THIS  
11 ACT OR A RULE PROMULGATED BY THE COMMISSIONER, OR IS OTHERWISE  
12 INCONSISTENT WITH LAW.

13 (4) WHEN WRITTEN NOTICE IS PROVIDED TO AN INSURER PURSUANT  
14 TO SUBSECTION (3), THE NOTICE SHALL SPECIFY THE OBJECTIONABLE  
15 PROVISIONS OR CONDITIONS AND STATE THE REASONS FOR THE  
16 COMMISSIONER'S DECISION. IF THE FORM IS LEGALLY IN USE BY THE  
17 INSURER IN THIS STATE, THE NOTICE SHALL GIVE THE EFFECTIVE DATE  
18 OF THE COMMISSIONER'S DISAPPROVAL OR WITHDRAWAL OF APPROVAL,  
19 WHICH SHALL NOT BE LESS THAN 30 DAYS AFTER THE MAILING OR DELIV-  
20 ERY OF THE NOTICE TO THE INSURER. IF THE FORM IS NOT LEGALLY IN  
21 USE, THEN DISAPPROVAL OR WITHDRAWAL OF APPROVAL IS EFFECTIVE  
22 IMMEDIATELY.

23 (5) THE COMMISSIONER MAY AT ANY TIME DISAPPROVE OR WITHDRAW  
24 APPROVAL OF A POLICY FORM ON ANY OF THE GROUNDS STATED IN SUBSEC-  
25 TION (2), SUBJECT TO THE REQUIREMENTS AS TO NOTICE, HEARING, AND  
26 APPEAL SET FORTH IN SECTIONS 244 AND 2236. AN INSURER SHALL NOT

1 ISSUE THE FORM AFTER THE EFFECTIVE DATE OF THE DISAPPROVAL OR  
2 WITHDRAWAL OF APPROVAL.

3 (6) IF THE COMMISSIONER DETERMINES THAT CERTAIN FORMS MAY  
4 HAVE A TENDENCY TO NOT CONFORM WITH THE REQUIREMENTS OF THIS ACT,  
5 THE COMMISSIONER MAY ORDER THAT INSURERS FILE FOR PRIOR APPROVAL  
6 OF FORMS FOR A SPECIFIED CLASSIFICATION, TYPE, OR KIND OF  
7 INSURANCE. THE ORDER SHALL STATE, IN WRITING, THE REASONS FOR  
8 THE COMMISSIONER'S DECISION TO ORDER THE FILING. IF SUCH AN  
9 ORDER IS IN EFFECT, THE FORMS SHALL BE FILED AT LEAST 30 DAYS  
10 BEFORE THE PROPOSED EFFECTIVE DATE. FAILURE OF THE COMMISSIONER  
11 TO ACT WITHIN 30 DAYS AFTER SUBMITTAL CONSTITUTES APPROVAL.

12 (7) IN THE REASONABLE EXERCISE OF DISCRETION, THE COMMIS-  
13 SIONER MAY REQUEST THAT INSURERS PROVIDE HIM OR HER WITH COPIES  
14 OF SPECIFIC FORMS THAT ARE IN USE FOR NEW OR OLD BUSINESS. THESE  
15 SUBMISSIONS SHALL NOT BE CONSIDERED FORMS FILED FOR THE  
16 COMMISSIONER'S APPROVAL.

17 (8) EVERY ORDER MADE BY THE COMMISSIONER UNDER THE PROVI-  
18 SIONS OF THIS SECTION IS SUBJECT TO COURT REVIEW AS PROVIDED IN  
19 SECTION 244.

20 Sec. 4430. (1) Except as otherwise provided in section  
21 ~~2236(8)(d)~~ 2236(12)(D), a policy of group life insurance shall  
22 not be issued or delivered in this state unless ~~and until a copy~~  
23 ~~of the form of the group life insurance has been filed with and~~  
24 ~~approved by the commissioner~~ IT CONFORMS WITH THIS ACT AND IS  
25 NOT INCONSISTENT WITH LAW.

26 (2) A policy of group life insurance shall not be issued or  
27 delivered unless it contains in substance the provisions of

1 sections 4432 through 4442. A group universal life policy as  
2 defined in section 4001(g) shall not be issued or delivered  
3 unless it complies with the provisions of chapter 40.

4 (3) UPON WRITTEN NOTICE TO THE INSURER, THE COMMISSIONER MAY  
5 DISAPPROVE OR WITHDRAW APPROVAL OF ANY FORM USED IN THIS STATE IF  
6 HE OR SHE FINDS 1 OR MORE OF THE FOLLOWING:

7 (A) THAT IT IS UNFAIRLY DISCRIMINATORY, MISLEADING, DECEP-  
8 TIVE, OBSCURE, OR ENCOURAGES MISREPRESENTATION, INCLUDING CASES  
9 WHERE THE FORM:

10 (i) IS MISLEADING BECAUSE ITS BENEFITS ARE TOO RESTRICTED TO  
11 ACHIEVE THE PURPOSES FOR WHICH THE POLICY IS SOLD.

12 (ii) CONTAINS PROVISIONS WHOSE NATURAL CONSEQUENCE IS TO  
13 LESSEN COMPETITION.

14 (iii) IS UNNECESSARILY VERBOSE OR COMPLEX IN LANGUAGE.

15 (iv) IS MISLEADING, DECEPTIVE, OR OBSCURE BECAUSE OF SUCH  
16 PHYSICAL ASPECTS AS FORMAT, TYPOGRAPHY, STYLE, COLOR, MATERIAL,  
17 OR ORGANIZATION.

18 (B) THAT IT PROVIDES BENEFITS OR CONTAINS OTHER PROVISIONS  
19 THAT ENDANGER THE INSURER'S SOLIDITY.

20 (C) THAT FOR A POLICY ONLY, IT FAILS TO PROVIDE THE EXACT  
21 NAME AND THE FULL ADDRESS OF THE INSURER. THIS SUBDIVISION DOES  
22 NOT APPLY TO A RIDER OR ENDORSEMENT.

23 (D) THAT IT DOES NOT CONFORM WITH THE REQUIREMENTS OF THIS  
24 ACT OR A RULE PROMULGATED BY THE COMMISSIONER, OR IS OTHERWISE  
25 INCONSISTENT WITH LAW.

26 (4) WHEN WRITTEN NOTICE IS PROVIDED TO AN INSURER PURSUANT  
27 TO SUBSECTION (3), THE NOTICE SHALL SPECIFY THE OBJECTIONABLE

1 PROVISIONS OR CONDITIONS AND STATE THE REASONS FOR THE  
2 COMMISSIONER'S DECISION. IF THE FORM IS LEGALLY IN USE BY THE  
3 INSURER IN THIS STATE, THE NOTICE SHALL GIVE THE EFFECTIVE DATE  
4 OF THE COMMISSIONER'S DISAPPROVAL OR WITHDRAWAL OF APPROVAL,  
5 WHICH SHALL NOT BE LESS THAN 30 DAYS AFTER THE MAILING OR DELIV-  
6 ERY OF THE NOTICE TO THE INSURER. IF THE FORM IS NOT LEGALLY IN  
7 USE, THEN DISAPPROVAL OR WITHDRAWAL OF APPROVAL IS EFFECTIVE  
8 IMMEDIATELY.

9 (5) IF THE COMMISSIONER DETERMINES THAT CERTAIN FORMS MAY  
10 HAVE A TENDENCY TO NOT CONFORM WITH THE REQUIREMENTS OF THIS ACT,  
11 THE COMMISSIONER MAY ORDER THAT INSURERS FILE FOR PRIOR APPROVAL  
12 OF FORMS FOR A SPECIFIED CLASSIFICATION, TYPE, OR KIND OF  
13 INSURANCE. THE ORDER SHALL STATE, IN WRITING, THE REASONS FOR  
14 THE COMMISSIONER'S DECISION TO ORDER THE FILING. IF SUCH AN  
15 ORDER IS IN EFFECT, THE FORMS SHALL BE FILED AT LEAST 30 DAYS  
16 BEFORE THE PROPOSED EFFECTIVE DATE. FAILURE OF THE COMMISSIONER  
17 TO ACT WITHIN 30 DAYS AFTER SUBMITTAL CONSTITUTES APPROVAL.

18 (6) THE COMMISSIONER MAY AT ANY TIME DISAPPROVE OR WITHDRAW  
19 APPROVAL OF A POLICY FORM ON ANY OF THE GROUNDS STATED IN SUBSEC-  
20 TION (2), SUBJECT TO THE REQUIREMENTS AS TO NOTICE, HEARING, AND  
21 APPEAL SET FORTH IN SECTIONS 244 AND 2236. AN INSURER SHALL NOT  
22 ISSUE THE FORM AFTER THE EFFECTIVE DATE OF THE DISAPPROVAL OR  
23 WITHDRAWAL OF APPROVAL.

24 (7) IN THE REASONABLE EXERCISE OF DISCRETION, THE COMMIS-  
25 SIONER MAY REQUEST THAT INSURERS PROVIDE HIM OR HER WITH COPIES  
26 OF SPECIFIC FORMS THAT ARE IN USE FOR NEW OR OLD BUSINESS. THESE

1 SUBMISSIONS SHALL NOT BE CONSIDERED FORMS FILED FOR THE  
2 COMMISSIONER'S APPROVAL.

3 (8) EVERY ORDER MADE BY THE COMMISSIONER UNDER THE PROVI-  
4 SIONS OF THIS SECTION IS SUBJECT TO COURT REVIEW AS PROVIDED IN  
5 SECTION 244.