SUBSTITUTE FOR HOUSE BILL NO. 5292

A bill to amend 1956 PA 218, entitled
"The insurance code of 1956,"

by amending sections 3503, 7911, 7918, 7921, 7925, 7931, 7941,
7945, 8111, 8124, and 8134 (MCL 500.3503, 500.7911, 500.7918,
500.7921, 500.7925, 500.7931, 500.7941, 500.7945, 500.8111,
500.8124, and 500.8134), section 3503 as added by 2000 PA 252,
sections 7911 and 7921 as amended by 1993 PA 200, section 7918 as
amended by 2001 PA 182, sections 7925, 7931, and 7945 as amended by
1980 PA 41, section 7941 as amended by 1990 PA 137, section 8111 as
amended by 1992 PA 182, section 8124 as added by 1989 PA 302, and
section 8134 as amended by 1998 PA 279, and by adding sections

8124a and 8133a.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Sec. 3503. (1) All of the provisions of this act that apply to
- 2 a domestic insurer authorized to issue an expense-incurred
- 3 hospital, medical, or surgical policy or certificate, including,
- 4 but not limited to, -section 223 SECTIONS 223 AND 7925 and
- 5 chapters 34 and 36, apply to a health maintenance organization
- 6 under this chapter unless specifically excluded, or otherwise
- 7 specifically provided for in this chapter.
- 8 (2) Sections 408, 410, 411, 901, and 5208, -and chapters
- 9 CHAPTER 77, and, EXCEPT AS OTHERWISE PROVIDED IN SUBSECTION (1),
- 10 CHAPTER 79 do not apply to a health maintenance organization.
- 11 Sec. 7911. (1) To implement this chapter, there shall be
- 12 maintained within this state, by all insurers authorized to
- 13 transact in this state insurance other than life or disability
- 14 insurance, except the Michigan basic property insurance association
- 15 created pursuant to section 2920, an association of those insurers
- 16 to be known as the property and casualty guaranty association,
- 17 hereafter referred to as the "association". Each insurer shall be a
- 18 member of the association as a condition of its authority to
- 19 continue to transact insurance in this state.
- 20 (2) An insurer from which insurance has been or may be
- 21 procured in this state solely by virtue of sections 1901 to 1955
- 22 CHAPTER 19 shall not be considered to be an insurer authorized to
- 23 transact insurance in this state for the purposes of this chapter.
- 24 (3) The association —shall be— IS subject to the requirements
- 25 of this chapter -, AND chapter 81 -, and section 3172a, but

- 1 shall IS not be subject to the other chapters of this act. The
- 2 association shall be subject to other laws of this state to the
- 3 extent that it would be subject to those laws if it were an insurer
- 4 organized and operating under chapter 50, to the extent that those
- 5 other laws are consistent with this chapter.
- 6 Sec. 7918. (1) The association may borrow funds when necessary
- 7 to implement this act.
- 8 (2) The association, either in its own name or through a
- 9 servicing facility, may sue or be sued, and may use the courts to
- 10 assert or defend any rights the association may have under this
- 11 chapter, to the extent necessary to fully exercise its rights and
- 12 perform its duties under, and to implement, this chapter.
- 13 (3) The association may retain and employ legal counsel in its
- 14 discretion to represent the association in all respects.
- 15 (4) THE ASSOCIATION MAY BRING AN ACTION AGAINST ANY THIRD
- 16 PARTY ADMINISTRATOR, AGENT, ATTORNEY, OR OTHER REPRESENTATIVE OF
- 17 THE INSOLVENT INSURER TO OBTAIN CUSTODY AND CONTROL OF ALL CLAIMS
- 18 INFORMATION, INCLUDING ALL FILES, RECORDS, AND ELECTRONIC DATA
- 19 RELATED TO AN INSOLVENT COMPANY THAT ARE APPROPRIATE OR NECESSARY
- 20 FOR THE ASSOCIATION, OR A SIMILAR ASSOCIATION IN OTHER STATES, TO
- 21 CARRY OUT ITS DUTIES UNDER THIS ACT. THE ASSOCIATION SHALL HAVE THE
- 22 ABSOLUTE RIGHT THROUGH EMERGENCY EQUITABLE RELIEF TO OBTAIN CUSTODY
- 23 AND CONTROL OF ALL CLAIMS INFORMATION IN THE CUSTODY OR CONTROL OF
- 24 THE THIRD PARTY ADMINISTRATOR, AGENT, ATTORNEY, OR OTHER
- 25 REPRESENTATIVE OF THE INSOLVENT INSURER, REGARDLESS OF WHERE THE
- 26 INFORMATION MAY BE PHYSICALLY LOCATED. IN BRINGING THE ACTION, THE
- 27 ASSOCIATION IS NOT SUBJECT TO ANY DEFENSE, LIEN, POSSESSORY OR

- 1 OTHERWISE, OR OTHER LEGAL OR EQUITABLE GROUND FOR REFUSAL TO
- 2 SURRENDER CLAIMS INFORMATION THAT MIGHT BE ASSERTED AGAINST THE
- 3 LIQUIDATOR OF THE INSOLVENT INSURERS. IF LITIGATION IS NECESSARY
- 4 FOR THE ASSOCIATION TO OBTAIN CUSTODY OF THE CLAIMS INFORMATION
- 5 REQUESTED AND IT RESULTS IN THE RELINQUISHMENT OF CLAIMS
- 6 INFORMATION TO THE ASSOCIATION AFTER REFUSAL TO PROVIDE THE
- 7 INFORMATION IN RESPONSE TO A WRITTEN DEMAND, THE COURT SHALL AWARD
- 8 THE ASSOCIATION ITS COSTS, EXPENSES, AND REASONABLE ATTORNEY FEES
- 9 INCURRED IN BRINGING THE ACTION. THIS SECTION DOES NOT AFFECT THE
- 10 RIGHTS AND REMEDIES THAT THE CUSTODIAN OF THE CLAIMS INFORMATION
- 11 MAY HAVE AGAINST THE INSOLVENT INSURERS, SO LONG AS THOSE RIGHTS
- 12 AND REMEDIES DO NOT CONFLICT WITH THE RIGHTS OF THE ASSOCIATION TO
- 13 CUSTODY AND CONTROL OF THE CLAIMS INFORMATION UNDER THIS ACT.
- 14 (5) -(4) Upon request of the commissioner, consent of the
- 15 association, and appointment by the court, the association may act
- 16 as deputy receiver in delinquency proceedings under chapter 81.
- 17 Sec. 7921. As used in this chapter:
- 18 (a) "Insolvent insurer" means an insurer for which a
- 19 domiciliary receiver has been appointed by a final order in this
- 20 state or in a reciprocal state, as defined in section 8103 for the
- 21 liquidation of the insurer and which has been a member insurer AND
- 22 AGAINST WHOM A FINAL ORDER OF LIQUIDATION HAS BEEN ENTERED WITH A
- 23 FINDING OF INSOLVENCY BY A COURT OF COMPETENT JURISDICTION IN THE
- 24 INSURER'S STATE OF DOMICILE. The date on which the order becomes
- 25 final shall be the date on which the receiver is appointed for
- 26 purposes of this chapter ALL APPEALS OF THE FINDING OF INSOLVENCY
- 27 ARE EXHAUSTED. IF THE FINDING OF INSOLVENCY IN THE ORDER OF

- 1 LIQUIDATION IS NOT APPEALED, THE ORDER OF LIQUIDATION SHALL BE
- 2 CONSIDERED FINAL ON THE DATE THE ORDER WAS ISSUED.
- 3 (b) "Member insurer" means an insurer required to be a member
- 4 of the association pursuant to section 7911.
- 5 Sec. 7925. (1) "Covered claims" means obligations of an
- 6 insolvent insurer -which THAT meet all of the following
- 7 requirements:
- 8 (a) Arise out of the insurance policy contracts of the
- 9 insolvent insurer issued to residents of this state or are payable
- 10 to residents of this state on behalf of insureds of the insolvent
- 11 insurer.
- 12 (b) Were unpaid by the insolvent insurer.
- 13 (c) Are presented as a claim to the receiver in this state or
- 14 the association ASSOCIATION on or before the last date fixed for
- 15 the filing of claims in the domiciliary delinquency proceedings.
- 16 (d) Were incurred or existed before, at the time of, or within
- 17 30 days after the date the receiver was appointed.
- 18 (e) Arise out of policy contracts of the insolvent insurer
- 19 issued for all kinds of insurance except life and disability
- 20 insurance.
- 21 (f) Arise out of insurance policy contracts issued on or
- 22 before the last date on which the insolvent insurer was a member
- 23 insurer.
- 24 (2) Covered claims shall not include any of the following:
- 25 (a) Obligations to refund unearned premiums above the first
- 26 \$500.00 of unearned premiums from each person from any 1 insolvent
- 27 insurer. The maximum amount of unearned premiums which shall

- 1 constitute a covered claim shall be adjusted annually to reflect
- 2 changes in the cost of living under rules prescribed by the
- 3 commissioner. A REFUND IN AN AMOUNT LESS THAN \$50.00 SHALL NOT BE
- 4 MADE FOR UNEARNED PREMIUMS.
- 5 (b) Obligations incurred after the expiration date of the
- 6 insurance policy, after the insurance policy has been replaced by
- 7 the insured, or after the insurance policy has been canceled by the
- 8 association as provided in this chapter.
- 9 (c) Obligations -which arise ARISING out of sections 2001 to
- 10 2050, or similar provisions of law in another jurisdiction.
- 11 (3) Covered claims shall not include -obligations to an
- 12 insurer, insurance pool, underwriting association, or to a person
- 13 who has a net worth greater than 1/10 of 1% of the aggregate
- 14 premiums written by member insurers in this state in the preceding
- 15 calendar year. ANY AMOUNT DUE ANY REINSURER, INSURER, INSURANCE
- 16 POOL, UNDERWRITING ASSOCIATION, HEALTH MAINTENANCE ORGANIZATION,
- 17 HEALTH CARE CORPORATION, OR SELF-INSURER AS SUBROGATION RECOVERIES,
- 18 CONTRIBUTION, INDEMNIFICATION, OR OTHER OBLIGATION. A CLAIM FOR ANY
- 19 AMOUNT DUE ANY REINSURER, INSURER, INSURANCE POOL, UNDERWRITING
- 20 ASSOCIATION, HEALTH MAINTENANCE ORGANIZATION, HEALTH CARE
- 21 CORPORATION, OR SELF-INSURER SHALL NOT BE BROUGHT AGAINST A PERSON
- 22 INSURED UNDER A POLICY ISSUED BY THE INSOLVENT INSURER UNLESS THE
- 23 CLAIM EXCEEDS THE ASSOCIATION'S OBLIGATION LIMITATIONS UNDER
- 24 SUBSECTION (6).
- 25 (4) COVERED CLAIMS SHALL NOT INCLUDE OBLIGATIONS FOR ANY FIRST
- 26 PARTY OR THIRD PARTY CLAIM BY OR AGAINST AN INSURED WHOSE NET WORTH
- 27 EXCEEDS \$25,000,000.00 ON DECEMBER 31, OR ON THE LAST DATE OF THE

- 1 INSURED'S FISCAL PERIOD IF THAT IS OTHER THAN DECEMBER 31, OF THE
- 2 YEAR IMMEDIATELY PRECEDING THE DATE THE INSURER BECOMES AN
- 3 INSOLVENT INSURER. IN DETERMINING NET WORTH ON THIS DATE, AN
- 4 INSURED'S NET WORTH SHALL INCLUDE THE AGGREGATE NET WORTH OF THE
- 5 INSURED AND ALL OF ITS SUBSIDIARIES AND AFFILIATES AS CALCULATED ON
- 6 A CONSOLIDATED BASIS. THE \$25,000,000.00 NET WORTH LIMIT SHALL BE
- 7 ADJUSTED ANNUALLY TO REFLECT THE AGGREGATE ANNUAL PERCENTAGE CHANGE
- 8 IN THE CONSUMER PRICE INDEX SINCE THE PREVIOUS ADJUSTMENT, ROUNDED
- 9 TO THE NEAREST \$10,000.00. THE EFFECTIVE DATE OF THE ADJUSTMENT
- 10 SHALL BE JANUARY 1 OF EACH YEAR.
- 11 (5) -(4)— Covered claims shall not include any portion of a
- 12 claim which THAT is in excess of an applicable limit provided in
- 13 the insurance policy.
- 14 (6) $\overline{(5)}$ Covered claims shall not include that portion of a
- 15 claim, other than a worker's compensation claim -, which is in
- 16 excess of 1/20 of 1% of the aggregate premiums written by member
- 17 insurers in this state in the preceding calendar year. OR A CLAIM
- 18 FOR PERSONAL PROTECTION INSURANCE BENEFITS UNDER SECTION 3107, THAT
- 19 IS IN EXCESS OF \$5,000,000.00. THE \$5,000,000.00 CLAIM CAP SHALL BE
- 20 ADJUSTED ANNUALLY TO REFLECT THE AGGREGATE ANNUAL PERCENTAGE CHANGE
- 21 IN THE CONSUMER PRICE INDEX SINCE THE PREVIOUS ADJUSTMENT, ROUNDED
- 22 TO THE NEAREST \$10,000.00. THE EFFECTIVE DATE OF THE ADJUSTMENT
- 23 SHALL BE JANUARY 1 OF EACH YEAR AND SHALL APPLY TO CLAIMS MADE ON
- 24 OR AFTER THAT DATE. THE CLAIM CAP IN EFFECT AT THE TIME OF PAYMENT
- 25 OF A CLAIM SHALL APPLY.
- 26 (7) -(6) Covered claims shall not include adjustment fees and
- 27 expenses, attorneys' fees and expenses, court costs, interest, or

- 1 bond premiums if the fees, expenses, costs, interest, or premiums
- 2 were incurred by the insolvent insurer before the receiver was
- 3 appointed.
- 4 (8) AS USED IN THIS SECTION:
- 5 (A) "CONSUMER PRICE INDEX" MEANS THE CONSUMER PRICE INDEX FOR
- 6 ALL URBAN CONSUMERS IN THE US CITY AVERAGE, AS MOST RECENTLY
- 7 REPORTED BY THE UNITED STATES DEPARTMENT OF LABOR, BUREAU OF LABOR
- 8 STATISTICS, AND AS CERTIFIED BY THE COMMISSIONER.
- 9 (B) "CONTROL" MEANS THAT TERM AS DEFINED IN SECTION 115(B)(i).
- 10 (C) "HEALTH CARE CORPORATION" MEANS THAT TERM AS DEFINED IN
- 11 SECTION 105 OF THE NONPROFIT HEALTH CARE CORPORATION REFORM ACT,
- 12 1980 PA 350, MCL 550.1105.
- 13 (D) "SELF-INSURER" MEANS A PERSON THAT COVERS ITS LIABILITY
- 14 THROUGH A QUALIFIED INDIVIDUAL OR GROUP SELF-INSURANCE PROGRAM OR
- 15 ANY OTHER FORMAL PROGRAM CREATED FOR THE SPECIFIC PURPOSE OF
- 16 COVERING LIABILITIES TYPICALLY COVERED BY INSURANCE.
- Sec. 7931. (1) The association shall pay and discharge
- 18 covered claims for the amount by which each covered claim exceeds
- 19 \$10.00. The association may pay or discharge -the- COVERED claims
- 20 directly, through a servicing facility, or through a contract for
- 21 reinsurance or transfer of liabilities with a member insurer, in
- 22 accordance with the plan of operation.
- 23 (2) The association shall be a party in interest in all
- 24 proceedings involving a covered claim and shall have the same
- 25 rights as the insolvent insurer would have had if not in
- 26 receivership, including the right to appear, defend, and appeal a
- 27 claim in a court of competent jurisdiction; to receive notice of,

- 1 investigate, adjust, compromise, settle, and pay a covered claim;
- 2 and to investigate, handle, and deny a noncovered claim. The
- 3 association shall not have a cause of action against the insureds
- 4 of the insolvent insurer for any sums it has paid out, except those
- 5 causes of action -which THAT the insolvent insurer would have had
- 6 if the sums had been paid by the insolvent insurer, or except as
- 7 otherwise provided by this chapter.
- 8 (3) If damages or benefits are recoverable by a claimant or
- 9 insured under an insurance policy other than a policy of the
- 10 insolvent insurer, or from the motor vehicle accident claims fund,
- 11 or a similar fund UNDER A WORKER'S COMPENSATION SELF-INSURED
- 12 PROGRAM OF A SELF-INSURED ENTITY, the damages or benefits
- 13 recoverable shall be a credit against a covered claim payable under
- 14 this chapter. THE CLAIMANT, INSURED, OR SELF-INSURED ENTITY SHALL
- 15 FIRST EXHAUST ALL COVERAGE PROVIDED BY ANY POLICY OR SELF-INSURED
- 16 PROGRAM. If damages against an insured who is not a resident of
- 17 this state are recoverable by a claimant who is a resident of this
- 18 state, in whole or in part, from any <u>insolvency</u> INSURANCE
- 19 GUARANTY ASSOCIATION OR fund or its equivalent in the state where
- 20 the insured is a resident, the damages recoverable shall be a
- 21 credit against a covered claim payable under this chapter. TO THE
- 22 EXTENT THAT THE ASSOCIATION'S OBLIGATION IS REDUCED BY THIS
- 23 SECTION, THE LIABILITY OF THE PERSON INSURED BY THE INSOLVENT
- 24 INSURER'S POLICY SHALL BE REDUCED IN THE SAME AMOUNT. An insurer,
- 25 or a fund may SELF-INSURED ENTITY, OR ANY OTHER PERSON SHALL not
- 26 maintain an action against an insured of the insolvent insurer to
- 27 recover an amount -which- THAT constitutes a credit against a

- 1 covered claim under this section. An amount paid to a claimant in
- 2 excess of the amount authorized by this section may be recovered by
- 3 an action brought by the association.
- 4 (4) The association shall continue coverage for covered claims
- 5 under each insurance policy of the insolvent insurer that was in
- 6 force on the date the receiver was appointed until the insurance
- 7 policy has expired in accordance with its terms, has been replaced
- 8 by the insured, or has been canceled by the association as provided
- 9 in this chapter, but in no event for more than 30 days after the
- 10 date the receiver was appointed.
- 11 (5) The association may cancel insurance policies of the
- 12 insolvent insurer by mailing or delivering to the insured at the
- 13 last known address within this state a 10 days' written notice of
- 14 cancellation, notwithstanding a statute or policy provision to the
- 15 contrary.
- Sec. 7941. (1) To the extent necessary to secure funds for the
- 17 association for payment of covered claims and for payment of
- 18 reasonable costs of administering the association, including the
- 19 cost of indemnifying members of the board of governors, other
- 20 member insurers, officers, employees, and other persons acting on
- 21 behalf of the association to the extent permitted by law and the
- 22 plan of the operation, the association shall levy assessments
- 23 upon all member insurers. The association shall allocate its claim
- 24 payments and costs to the following 5 categories:
- 25 (a) Worker's compensation insurance.
- 26 (b) Automobile insurance.
- (c) Title insurance.

- 1 (d) Fire, allied lines, farm owner's multiple peril,
- 2 homeowner's multiple peril, inland marine, earthquake, and credit
- 3 insurance.
- 4 (e) All other kinds of insurance except life and disability
- 5 insurance.
- **6** (2) Separate assessments shall be made for each category
- 7 prescribed in subsection (1). The assessment for each category
- 8 shall be used to pay the claim payments and costs allocated to that
- 9 category. The assessment for each category shall be in proportion
- 10 to the net direct premiums written, after deducting dividends paid
- 11 or credited to policyholders, by each member insurer in this state
- 12 for kinds of insurance included within each category, as reported
- 13 in the most recent annual statement available at the time of
- 14 assessment. The rate of assessment shall be a uniform percentage of
- 15 the premiums for all member insurers. The assessments shall be
- 16 remitted to and administered by the association in accordance with
- 17 the plan of operation. Each member insurer assessed shall have not
- 18 less than 30 days' advance written notice of the date the
- 19 assessment is due and payable.
- 20 (3) A member insurer shall not be assessed during a calendar
- 21 year for more than 1% of its net direct premiums written in this
- 22 state during the previous calendar year. The commissioner may
- 23 exempt a member insurer from all or part of an assessment or may
- 24 defer, in whole or in part, the assessment of a member insurer, if
- 25 the assessment would cause the member insurer's financial statement
- 26 to reflect amounts of capital or surplus less than the minimum
- 27 amounts required for a certificate of authority by any jurisdiction

- 1 in which the member insurer is authorized to transact insurance.
- 2 However, during the period of exemption or deferment, dividends
- 3 shall not be declared or paid to shareholders or policyholders. If
- 4 a member insurer is exempted from all or part of an assessment, or
- 5 if an assessment against a member insurer is deferred in whole or
- 6 in part, the amount of the exemption or deferred assessment may be
- 7 assessed against the other member insurers in a manner consistent
- 8 with the basis for assessments prescribed in this section. The
- 9 commissioner may impose conditions on an exemption or deferral
- 10 which he or she considers reasonable and necessary. The state
- 11 accident fund shall not be IS NOT liable for any assessment based
- 12 on premiums written after the effective date of this 1990
- 13 amendatory act JUNE 29, 1990 including any assessment for an
- 14 insolvency occurring before the date of termination of its
- 15 membership in the association.
- 16 (4) The assessments shall be recognized in the rate-making
- 17 procedures for insurance rates in the same manner that expenses and
- 18 premium taxes are recognized. Unused assessments and reimbursements
- 19 from the receiver remaining in a category in excess of covered
- 20 claims and expenses allocated to that category shall be refunded by
- 21 the association to each member insurer who paid the assessments for
- 22 that category in proportion to its assessments paid. An insurer
- 23 which THAT ceases to be a member of the association shall not have
- 24 a right to a refund of an assessment previously remitted to the
- 25 association. The commissioner may revoke the certificate of
- 26 authority to transact business in this state of a member insurer
- 27 which THAT fails to pay an assessment when due as provided in this

- 1 act and after a demand has been made.
- 2 Sec. 7945. All proceedings in any court of law of this state
- 3 OR ADMINISTRATIVE TRIBUNAL, INCLUDING WORKER'S COMPENSATION
- 4 PROCEEDINGS, to which the insolvent insurer is a party, or in which
- 5 the INSOLVENT insurer is obligated to defend or has assumed the
- 6 defense of a party, shall be stayed for 6 months after the date a
- 7 receiver is appointed, and for any additional time as determined by
- 8 the court -which OR ADMINISTRATIVE TRIBUNAL THAT has jurisdiction
- 9 over those proceedings, to permit proper defense of all pending
- 10 causes of action.
- Sec. 8111. (1) Except as provided in subsection (2), in all
- 12 proceedings and judicial review of these proceedings under sections
- 13 8109 and 8110, all records of the insurer, other documents,
- 14 insurance bureau OFFICE OF FINANCIAL AND INSURANCE SERVICES files,
- 15 and court records and papers, so far as they pertain to or are a
- 16 part of the record of the proceedings, are confidential and shall
- 17 be held by the clerk of the court in a confidential file except as
- 18 is necessary to obtain compliance therewith, unless the court,
- 19 after hearing arguments from the parties in chambers, orders
- 20 otherwise or the insurer requests that the matter be made public.
- 21 (2) Without compromising the confidentiality of the records of
- 22 the commissioner, -insurance bureau OFFICE OF FINANCIAL AND
- 23 INSURANCE SERVICES, or supervisor, the commissioner or his or her
- 24 supervisor may advise third parties of the existence of a
- 25 supervision order and of the supervisor's authority if considered
- 26 by either of them necessary to further the insurer's compliance
- 27 with the supervision order. The commissioner may advise third

- 1 parties of the existence of a supervision order and of facts
- 2 pertaining to the supervision order if considered necessary by the
- 3 commissioner with regard to other regulatory matters affecting the
- 4 insurer or a person or entity related to the insurer. Third parties
- 5 advised under this subsection are required to keep the existence of
- 6 a supervision confidential. As used in this subsection, "third
- 7 parties" means the following persons:
- 8 (a) Debtors and creditors of the insurer and its affiliates.
- 9 (b) Persons who hold or control assets of the insurer and its
- 10 affiliates.
- 11 (c) Reinsurers of the insurer and its affiliates.
- 12 (d) Insurance regulatory officials.
- (e) Law enforcement agencies.
- 14 (F) REPRESENTATIVES OF A GUARANTY ASSOCIATION OR FOREIGN
- 15 GUARANTY ASSOCIATION THAT MAY BECOME OBLIGATED AS A RESULT OF THE
- 16 INSOLVENCY OF THE INSURER. CONFIDENTIALITY OBLIGATIONS OF A
- 17 GUARANTY ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION TO THE
- 18 RECEIVER END UPON THE ENTRY OF AN ORDER OF LIQUIDATION WITH A
- 19 FINDING OF INSOLVENCY AGAINST THE INSURER.
- 20 Sec. 8124. (1) Upon issuance of an order appointing a
- 21 liquidator of a domestic insurer or of an alien insurer domiciled
- 22 in this state, an action at law or equity shall not be brought
- 23 against the insurer or liquidator, whether in this state or
- 24 elsewhere, and any such existing action shall not be maintained or
- 25 further presented after issuance of such order. The courts of this
- 26 state shall give full faith and credit to injunctions against the
- 27 liquidator or the company or the continuation of existing actions

- 1 against the liquidator or the company, if such injunctions are
- 2 included in an order to liquidate an insurer issued pursuant to
- 3 corresponding provisions in other states. If, in the liquidator's
- 4 judgment, protection of the estate of the insurer necessitates
- 5 intervention in an action against the insurer that is pending
- 6 outside this state, he or she may intervene in the action. The
- 7 liquidator may defend an action in which he or she intervenes under
- 8 this section at the expense of the estate of the insurer.
- 9 (2) The liquidator may, upon or after an order for
- 10 liquidation, within 2 years or such time in addition to 2 years as
- 11 applicable law may permit, institute an action or proceeding on
- 12 behalf of the estate of the insurer upon any cause of action
- 13 against which the period of limitation fixed by applicable law has
- 14 not expired at the time of the filing of the petition upon which
- 15 the order is entered. If, by agreement, a period of limitation is
- 16 fixed for instituting a suit or proceeding upon a claim, or for
- 17 filing a claim, proof of claim, proof of loss, demand, notice, or
- 18 the like, or if in a proceeding, judicial or otherwise, a period of
- 19 limitation is fixed, either in the proceeding or by applicable law,
- 20 for taking action, filing a claim or pleading, or doing any act,
- 21 and the period had not expired at the date of the filing of the
- 22 petition, the liquidator may, for the benefit of the estate, take
- 23 action or do an act required of or permitted to the insurer within
- 24 a period of 180 days subsequent to the entry of an order for
- 25 liquidation, or within such further period as is shown to the
- 26 satisfaction of the court not to be unfairly prejudicial to the
- 27 other party.

- 1 (3) A statute of limitation or defense of laches shall not run
- 2 with respect to an action against an insurer between the filing of
- 3 a petition for liquidation against an insurer and the denial of the
- 4 petition. An action against the insurer that might have been
- 5 commenced when the petition was filed may be commenced at least
- 6 within 60 days after the petition is denied.
- 7 (4) A guaranty association or foreign guaranty association
- 8 shall have standing to appear in a court proceeding concerning the
- 9 liquidation of an insurer if the association is or may become
- 10 liable to act as a result of the liquidation.
- 11 SEC. 8124A. ANY GUARANTY ASSOCIATION OR FOREIGN GUARANTY
- 12 ASSOCIATION HAS STANDING TO APPEAR AND MAY INTERVENE AS A PARTY AS
- 13 A MATTER OF RIGHT OR OTHERWISE APPEAR AND PARTICIPATE IN ANY COURT
- 14 PROCEEDING CONCERNING THE REHABILITATION OR LIQUIDATION OF AN
- 15 INSURER IF THE ASSOCIATION IS OR MAY BECOME LIABLE TO ACT AS A
- 16 RESULT OF THE LIQUIDATION. EXERCISE BY ANY GUARANTY ASSOCIATION OR
- 17 ITS DESIGNATED REPRESENTATIVE OF THE RIGHT TO INTERVENE CONFERRED
- 18 UNDER THIS SUBSECTION DOES NOT CONSTITUTE GROUNDS TO ESTABLISH
- 19 GENERAL PERSONAL JURISDICTION BY THE COURTS OF THIS STATE. THE
- 20 INTERVENING GUARANTY ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION IS
- 21 SUBJECT TO THE COURT'S JURISDICTION ONLY FOR THE LIMITED PURPOSE
- 22 FOR WHICH IT INTERVENES.
- 23 SEC. 8133A. (1) NOTWITHSTANDING ANY OTHER LAW OR CONTRACT TO
- 24 THE CONTRARY, ANY COLLATERAL HELD BY OR FOR THE BENEFIT OF OR
- 25 ASSIGNED TO THE INSURER OR SUBSEQUENTLY THE RECEIVER IN ORDER TO
- 26 SECURE THE OBLIGATIONS OF A POLICYHOLDER UNDER A DEDUCTIBLE
- 27 AGREEMENT SHALL NOT BE CONSIDERED AN ASSET OF THE ESTATE AND SHALL

- 1 BE MAINTAINED AND ADMINISTERED BY THE RECEIVER AS PROVIDED IN THIS
- 2 SECTION.
- 3 (2) IF COLLATERAL IS BEING HELD BY OR FOR THE BENEFIT OF OR
- 4 ASSIGNED TO THE INSURER OR SUBSEQUENTLY THE RECEIVER TO SECURE
- 5 OBLIGATIONS UNDER A DEDUCTIBLE AGREEMENT WITH A POLICYHOLDER, THE
- 6 COLLATERAL SHALL BE USED TO SECURE THE POLICYHOLDER'S OBLIGATION TO
- 7 FUND OR REIMBURSE CLAIMS PAYMENT WITHIN THE AGREED DEDUCTIBLE
- 8 AMOUNT AS PROVIDED IN THIS SECTION.
- 9 (3) IF A CLAIM THAT IS SUBJECT TO A DEDUCTIBLE AGREEMENT AND
- 10 SECURED BY COLLATERAL IS NOT COVERED BY ANY GUARANTY ASSOCIATION OR
- 11 FOREIGN GUARANTY ASSOCIATION AND THE POLICYHOLDER IS UNWILLING OR
- 12 UNABLE TO TAKE OVER THE HANDLING AND PAYMENT OF THE NONCOVERED
- 13 CLAIMS, THE RECEIVER SHALL ADJUST AND PAY THE NONCOVERED CLAIMS
- 14 USING THE COLLATERAL BUT ONLY TO THE EXTENT THE AVAILABLE
- 15 COLLATERAL AFTER ALLOCATION UNDER SUBSECTION (4) IS SUFFICIENT TO
- 16 PAY ALL OUTSTANDING AND ANTICIPATED CLAIMS. IF THE COLLATERAL IS
- 17 EXHAUSTED AND THE INSURED IS NOT ABLE TO PROVIDE FUNDS TO PAY THE
- 18 REMAINING CLAIMS WITHIN THE DEDUCTIBLE AFTER ALL REASONABLE MEANS
- 19 OF COLLECTION AGAINST THE INSURED HAVE BEEN EXHAUSTED, THE
- 20 RECEIVER'S OBLIGATION TO PAY THE CLAIMS FROM THE COLLATERAL
- 21 TERMINATES AND THE REMAINING CLAIMS SHALL BE CLAIMS AGAINST THE
- 22 INSURER'S ESTATE SUBJECT TO COMPLYING WITH OTHER PROVISIONS IN THIS
- 23 CHAPTER FOR THE FILING AND ALLOWANCE OF THOSE CLAIMS. IF THE
- 24 LIQUIDATOR DETERMINES THAT THE COLLATERAL IS INSUFFICIENT TO PAY
- 25 ALL ADDITIONAL AND ANTICIPATED CLAIMS, THE LIQUIDATOR MAY FILE A
- 26 PLAN, SUBJECT TO COURT APPROVAL, FOR EQUITABLY ALLOCATING THE
- 27 COLLATERAL AMONG CLAIMANTS.

- 1 (4) TO THE EXTENT THAT THE RECEIVER IS HOLDING COLLATERAL
- 2 PROVIDED BY A POLICYHOLDER THAT WAS OBTAINED TO SECURE A DEDUCTIBLE
- 3 AGREEMENT AND TO SECURE OTHER OBLIGATIONS OF THE POLICYHOLDER TO
- 4 PAY THE INSURER DIRECTLY OR INDIRECTLY AMOUNTS THAT BECOME ASSETS
- 5 OF THE ESTATE, SUCH AS REINSURANCE OBLIGATIONS UNDER A CAPTIVE
- 6 REINSURANCE PROGRAM OR ADJUSTABLE PREMIUM OBLIGATIONS UNDER A
- 7 RETROSPECTIVELY RATED INSURANCE POLICY WHERE THE PREMIUM DUE IS
- 8 SUBJECT TO ADJUSTMENT BASED UPON ACTUAL LOSS EXPERIENCE, THE
- 9 RECEIVER SHALL EQUITABLY ALLOCATE THE COLLATERAL AMONG THOSE
- 10 OBLIGATIONS AND ADMINISTER THE COLLATERAL ALLOCATED TO THE
- 11 DEDUCTIBLE AGREEMENT AS PROVIDED IN THIS SECTION. FOR COLLATERAL
- 12 ALLOCATED TO OBLIGATIONS UNDER THE DEDUCTIBLE AGREEMENT, IF THE
- 13 COLLATERAL SECURED REIMBURSEMENT OBLIGATION UNDER MORE THAN 1 LINE
- 14 OF INSURANCE, THEN THE COLLATERAL SHALL BE EQUITABLY ALLOCATED
- 15 AMONG THE VARIOUS LINES BASED UPON THE ESTIMATED ULTIMATE EXPOSURE
- 16 WITHIN THE DEDUCTIBLE AMOUNT FOR EACH LINE. THE RECEIVER SHALL
- 17 INFORM THE GUARANTY ASSOCIATIONS AND FOREIGN GUARANTY ASSOCIATIONS
- 18 OF THE METHOD AND DETAILS OF ALL THE FOREGOING ALLOCATIONS.
- 19 (5) REGARDLESS OF WHETHER THERE IS COLLATERAL, IF THE INSURER
- 20 HAS CONTRACTUALLY AGREED TO ALLOW THE POLICYHOLDER TO FUND ITS OWN
- 21 CLAIMS WITHIN THE DEDUCTIBLE AMOUNT PURSUANT TO A DEDUCTIBLE
- 22 AGREEMENT, EITHER THROUGH THE POLICYHOLDER'S OWN ADMINISTRATION OF
- 23 ITS CLAIMS OR THROUGH THE POLICYHOLDER PROVIDING FUNDS DIRECTLY TO
- 24 A THIRD PARTY ADMINISTRATOR WHO ADMINISTERS THE CLAIMS, THE
- 25 RECEIVER SHALL ALLOW THIS FUNDING ARRANGEMENT TO CONTINUE AND,
- 26 WHERE APPLICABLE, WILL ENFORCE THE ARRANGEMENT TO THE FULLEST
- 27 EXTENT POSSIBLE. THE FUNDING OF THESE CLAIMS BY THE POLICYHOLDER

- 1 WITHIN THE DEDUCTIBLE AMOUNT WILL ACT AS A BAR TO ANY CLAIM FOR
- 2 SUCH AMOUNT IN THE LIQUIDATION PROCEEDING, INCLUDING, BUT NOT
- 3 LIMITED TO, ANY CLAIM BY THE POLICYHOLDER OR THE THIRD PARTY
- 4 CLAIMANT. THIS FUNDING ARRANGEMENT EXTINGUISHES BOTH THE
- 5 OBLIGATION, IF ANY, OF ANY GUARANTY ASSOCIATION TO PAY THOSE CLAIMS
- 6 WITHIN THE DEDUCTIBLE AMOUNT, AS WELL AS THE OBLIGATIONS, IF ANY,
- 7 OF THE POLICYHOLDER OR THIRD PARTY ADMINISTRATOR TO REIMBURSE THE
- 8 GUARANTY ASSOCIATION. NO CHARGE OF ANY KIND SHALL BE MADE AGAINST
- 9 ANY GUARANTY ASSOCIATION ON THE BASIS OF THE POLICYHOLDER FUNDING
- 10 OF CLAIM PAYMENTS MADE PURSUANT TO AN ARRANGEMENT DESCRIBED IN THIS
- 11 SUBSECTION.
- 12 (6) IF THE INSURER HAS NOT CONTRACTUALLY AGREED TO ALLOW THE
- 13 POLICYHOLDER TO FUND ITS OWN CLAIMS WITHIN THE DEDUCTIBLE AMOUNT,
- 14 TO THE EXTENT A GUARANTY ASSOCIATION OR FOREIGN GUARANTY
- 15 ASSOCIATION IS REQUIRED BY APPLICABLE STATE LAW TO PAY ANY CLAIMS
- 16 FOR WHICH THE INSURER WOULD HAVE BEEN ENTITLED TO REIMBURSEMENT
- 17 FROM THE POLICYHOLDER UNDER THE TERMS OF THE DEDUCTIBLE AGREEMENT
- 18 AND TO THE EXTENT THE CLAIMS HAVE NOT BEEN PAID BY A POLICYHOLDER
- 19 OR THIRD PARTY, THE RECEIVER SHALL PROMPTLY BILL THE POLICYHOLDER
- 20 FOR REIMBURSEMENT AND THE POLICYHOLDER IS OBLIGATED TO PAY THE
- 21 REIMBURSEMENT AMOUNT TO THE RECEIVER FOR THE BENEFIT OF THE
- 22 GUARANTY ASSOCIATION OR FOREIGN GUARANTY ASSOCIATIONS WHO PAID THE
- 23 CLAIMS. NEITHER THE INSOLVENCY OF THE INSURER, NOR ITS INABILITY TO
- 24 PERFORM ANY OF ITS OBLIGATIONS UNDER THE DEDUCTIBLE AGREEMENT, IS A
- 25 DEFENSE TO THE POLICYHOLDER'S REIMBURSEMENT OBLIGATION UNDER THE
- 26 DEDUCTIBLE AGREEMENT. THE RECEIVER SHALL PROMPTLY REIMBURSE THE
- 27 GUARANTY ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION FOR CLAIMS

- 1 PAID THAT WERE SUBJECT TO THE DEDUCTIBLE WHEN THE POLICYHOLDER
- 2 REIMBURSEMENTS ARE COLLECTED. IF THE POLICYHOLDER FAILS TO PAY THE
- 3 AMOUNTS DUE WITHIN 60 DAYS AFTER THE BILL FOR THE REIMBURSEMENT IS
- 4 DUE, THE RECEIVER SHALL USE THE COLLATERAL TO THE EXTENT NECESSARY
- 5 TO REIMBURSE THE GUARANTY ASSOCIATION OR FOREIGN GUARANTY
- 6 ASSOCIATIONS, AND, AT THE SAME TIME, MAY PURSUE OTHER COLLECTIONS
- 7 EFFORTS AGAINST THE POLICYHOLDER. IF MORE THAN 1 GUARANTY
- 8 ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION HAS A CLAIM AGAINST THE
- 9 SAME COLLATERAL AND THE AVAILABLE COLLATERAL, AFTER ALLOCATION
- 10 UNDER SUBSECTION (4), ALONG WITH BILLING AND COLLECTION EFFORTS,
- 11 ARE TOGETHER INSUFFICIENT TO PAY EACH GUARANTY ASSOCIATION AND
- 12 FOREIGN GUARANTY ASSOCIATION IN FULL, THEN THE RECEIVER WILL
- 13 PRORATE PAYMENTS TO EACH GUARANTY ASSOCIATION AND FOREIGN GUARANTY
- 14 ASSOCIATION BASED UPON THE RELATIONSHIP THE AMOUNT OF CLAIMS EACH
- 15 GUARANTY ASSOCIATION AND FOREIGN GUARANTY ASSOCIATION HAS PAID
- 16 BEARS TO THE TOTAL OF ALL CLAIMS PAID BY THE GUARANTY ASSOCIATION
- 17 AND FOREIGN GUARANTY ASSOCIATIONS.
- 18 (7) THE RECEIVER IS ENTITLED TO DEDUCT FROM REIMBURSEMENTS
- 19 OWED TO A GUARANTY ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION OR
- 20 COLLATERAL TO BE RETURNED TO A POLICYHOLDER REASONABLE ACTUAL
- 21 EXPENSES INCURRED IN FULFILLING THE RESPONSIBILITIES UNDER THIS
- 22 SECTION, NOT TO EXCEED 3% OF THE COLLATERAL OR THE TOTAL DEDUCTIBLE
- 23 REIMBURSEMENTS ACTUALLY COLLECTED BY THE RECEIVER. FOR CLAIM
- 24 PAYMENTS MADE BY A GUARANTY ASSOCIATION OR FOREIGN GUARANTY
- 25 ASSOCIATION, THE RECEIVER SHALL PROMPTLY PROVIDE THE GUARANTY
- 26 ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION WITH A COMPLETE
- 27 ACCOUNTING OF THE RECEIVER'S DEDUCTIBLE BILLING AND COLLECTION

- 1 ACTIVITIES, INCLUDING COPIES OF THE POLICYHOLDER BILLINGS WHEN
- 2 RENDERED, THE REIMBURSEMENTS COLLECTED, THE AVAILABLE AMOUNTS AND
- 3 USE OF COLLATERAL FOR EACH ACCOUNT, AND ANY PRORATION OF PAYMENTS
- 4 WHEN IT OCCURS. IF THE RECEIVER FAILS TO MAKE A GOOD FAITH EFFORT
- 5 WITHIN 120 DAYS OF RECEIPT OF CLAIMS PAYMENT REPORTS TO COLLECT
- 6 REIMBURSEMENTS DUE FROM A POLICYHOLDER UNDER A DEDUCTIBLE AGREEMENT
- 7 BASED ON CLAIM PAYMENTS MADE BY THE GUARANTY ASSOCIATION OR FOREIGN
- 8 GUARANTY ASSOCIATION, THE GUARANTY ASSOCIATION OR FOREIGN GUARANTY
- 9 ASSOCIATION MAY PURSUE COLLECTION FROM THE POLICYHOLDERS DIRECTLY
- 10 ON THE SAME BASIS AS THE RECEIVER, AND WITH THE SAME RIGHTS AND
- 11 REMEDIES, AND SHALL REPORT ANY AMOUNTS COLLECTED FROM EACH
- 12 POLICYHOLDER TO THE RECEIVER. TO THE EXTENT THAT A GUARANTY
- 13 ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION PAYS CLAIMS WITHIN THE
- 14 DEDUCTIBLE AMOUNT, BUT IS NOT REIMBURSED BY EITHER THE RECEIVER
- 15 UNDER THIS SECTION OR BY POLICYHOLDER PAYMENTS FROM THE GUARANTY
- 16 ASSOCIATION'S OR FOREIGN GUARANTY ASSOCIATION'S OWN COLLECTION
- 17 EFFORTS, THE GUARANTY ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION
- 18 SHALL HAVE A CLAIM IN THE INSOLVENT INSURER'S ESTATE FOR
- 19 UNREIMBURSED CLAIMS PAYMENTS.
- 20 (8) THE RECEIVER SHALL ADJUST THE COLLATERAL BEING HELD AS THE
- 21 CLAIMS SUBJECT TO THE DEDUCTIBLE AGREEMENT ARE RUN OFF, SO LONG AS
- 22 ADEQUATE COLLATERAL IS MAINTAINED TO SECURE THE ENTIRE ESTIMATED
- 23 ULTIMATE OBLIGATION OF THE POLICYHOLDER PLUS A REASONABLE SAFETY
- 24 FACTOR. THE RECEIVER SHALL MAKE THESE ADJUSTMENTS PERIODICALLY, BUT
- 25 IS NOT REQUIRED TO ADJUST THE COLLATERAL MORE THAN ONCE A YEAR. THE
- 26 GUARANTY ASSOCIATION AND ANY FOREIGN GUARANTY ASSOCIATION SHALL BE
- 27 INFORMED OF ALL SUCH COLLATERAL REVIEWS, INCLUDING, BUT NOT LIMITED

- 1 TO, THE BASIS FOR THE ADJUSTMENT. ONCE ALL CLAIMS COVERED BY THE
- 2 COLLATERAL HAVE BEEN PAID AND THE RECEIVER IS SATISFIED THAT NO NEW
- 3 CLAIMS CAN BE PRESENTED, THE RECEIVER WILL RELEASE ANY REMAINING
- 4 COLLATERAL TO THE POLICYHOLDER.
- 5 (9) THE INGHAM COUNTY CIRCUIT COURT HAVING JURISDICTION OVER
- 6 THE LIQUIDATION PROCEEDINGS SHALL HAVE JURISDICTION TO RESOLVE
- 7 DISPUTES ARISING UNDER THIS SECTION.
- 8 (10) THIS SECTION DOES NOT LIMIT OR ADVERSELY AFFECT ANY RIGHT
- 9 A GUARANTY ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION MAY HAVE
- 10 UNDER APPLICABLE STATE LAW TO OBTAIN REIMBURSEMENT FROM CERTAIN
- 11 CLASSES OF POLICYHOLDERS FOR CLAIMS PAYMENTS MADE BY THE GUARANTY
- 12 ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION UNDER POLICIES OF THE
- 13 INSOLVENT INSURER OR FOR RELATED EXPENSES THE GUARANTY ASSOCIATION
- 14 OR FOREIGN GUARANTY ASSOCIATION INCURS.
- 15 (11) THIS SECTION APPLIES TO ALL DELINQUENCY PROCEEDINGS THAT
- 16 ARE OPEN AND PENDING ON THE EFFECTIVE DATE OF THIS SECTION.
- 17 (12) THIS SECTION DOES NOT APPLY TO FIRST PARTY CLAIMS OR TO
- 18 CLAIMS FUNDED BY A GUARANTY ASSOCIATION OR FOREIGN GUARANTY
- 19 ASSOCIATION NET OF THE DEDUCTIBLE UNLESS SUBSECTION (5) APPLIES.
- 20 (13) AS USED IN THIS SECTION:
- 21 (A) "DEDUCTIBLE AGREEMENT" MEANS ANY COMBINATION OF 1 OR MORE
- 22 POLICIES, ENDORSEMENTS, CONTRACTS, OR SECURITY AGREEMENTS THAT
- 23 PROVIDE FOR THE POLICYHOLDER TO BEAR THE RISK OF LOSS WITHIN A
- 24 SPECIFIED AMOUNT PER CLAIM OR OCCURRENCE COVERED UNDER A POLICY OF
- 25 INSURANCE AND MAY BE SUBJECT TO AGGREGATE LIMIT OF POLICYHOLDER
- 26 REIMBURSEMENT OBLIGATIONS.
- 27 (B) "NONCOVERED CLAIM" MEANS A CLAIM THAT IS SUBJECT TO A

- 1 DEDUCTIBLE AGREEMENT, MAY BE SECURED BY COLLATERAL, AND IS NOT
- 2 COVERED BY A GUARANTY ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION.
- 3 Sec. 8134. (1) Within 120 days of a final determination of
- 4 insolvency of an insurer by a court of competent jurisdiction of
- 5 this state, the liquidator shall make application to the court for
- 6 approval of a proposal to disburse assets out of marshalled
- 7 assets, from time to time as those assets become available, to a
- 8 guaranty association or foreign guaranty association having
- 9 obligations because of the insolvency. If the liquidator determines
- 10 that there are insufficient assets to disburse, the application
- 11 required by this section shall be considered satisfied by a filing
- 12 by the liquidator stating the reasons for this determination. TO
- 13 MAKE EARLY ACCESS DISBURSEMENTS OUT OF MARSHALED ASSETS, TO ANY
- 14 GUARANTY ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION HAVING
- 15 OBLIGATIONS BECAUSE OF THE INSOLVENCY. IF THE LIQUIDATOR DETERMINES
- 16 THAT THE ESTATE WILL NOT HAVE SUFFICIENT ASSETS TO MAKE ANY EARLY
- 17 ACCESS DISBURSEMENTS TO A GUARANTY ASSOCIATION OR FOREIGN GUARANTY
- 18 ASSOCIATION UNDER THIS SECTION, THE LIQUIDATOR SHALL FILE A REPORT
- 19 WITH THE COURT SUPPORTING THIS DETERMINATION. NOTICE TO THE STATE
- 20 INSURANCE COMMISSIONERS, GUARANTY ASSOCIATIONS, AND FOREIGN
- 21 GUARANTY ASSOCIATIONS AND COURT REVIEW OF THE REPORT SHALL BE
- 22 PROVIDED UNDER SUBSECTION (5). THIS REPORT MAY BE GIVEN INSTEAD OF
- 23 AN APPLICATION FOR A PROPOSAL TO MAKE EARLY ACCESS DISBURSEMENTS.
- 24 HOWEVER, IF AT ANY TIME THE ESTATE OBTAINS SUFFICIENT ASSETS TO
- 25 SUPPORT AN EARLY ACCESS DISBURSEMENT UNDER THIS SECTION, THE
- 26 LIQUIDATOR SHALL FILE AN APPLICATION FOR A PROPOSAL TO MAKE EARLY
- 27 ACCESS DISBURSEMENTS WITHIN 60 DAYS OF THE ESTATE OBTAINING THOSE

- 1 ASSETS. IF, WITHIN 120 DAYS OF A FINAL DETERMINATION OF INSOLVENCY,
- 2 THE LIQUIDATOR FAILS TO FILE AN APPLICATION WITH THE COURT FOR
- 3 APPROVAL OF A PROPOSAL TO MAKE EARLY ACCESS DISBURSEMENTS OR,
- 4 ALTERNATIVELY, FAILS TO FILE A REPORT WITH THE COURT SUPPORTING THE
- 5 DETERMINATION THAT THE ESTATE WILL NOT HAVE SUFFICIENT ASSETS TO
- 6 MAKE EARLY ACCESS DISBURSEMENTS, ANY GUARANTY ASSOCIATION OR
- 7 FOREIGN GUARANTY ASSOCIATION THAT MAY BECOME OBLIGATED TO PAY
- 8 CLAIMS AS A RESULT OF THE INSOLVENCY MAY FILE THIS APPLICATION. AN
- 9 APPLICATION FILED BY AN ASSOCIATION SHALL BE REVIEWED BY THE COURT
- 10 AND, IF THE PROPOSAL SUBMITTED BY THE ASSOCIATION MEETS THE
- 11 REQUIREMENTS SET OUT IN THIS SECTION, THE APPLICATION SHALL BE
- 12 APPROVED BY THE COURT. UPON COURT APPROVAL OF THE GUARANTY
- 13 ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION PROPOSAL, THE
- 14 LIQUIDATOR SHALL BEGIN MAKING EARLY ACCESS DISBURSEMENTS IN
- 15 ACCORDANCE WITH THE PROPOSAL.
- 16 (2) A proposal under subsection (1) shall at least include
- 17 provisions for all of the following:
- 18 (a) Reserving amounts for the payment of expenses of
- 19 administration and the payment of claims of secured creditors, to
- 20 the extent of the value of the security held, and claims falling
- 21 within the priorities established in section 8142(1)(a) and (b) and
- 22 (2). WHEN A RESERVE FOR UNCOVERED CLAIMS UNDER SECTION 8142(2) IS
- 23 APPROPRIATE, THE AMOUNT OF ESTATE ASSETS TO BE RESERVED FOR THOSE
- 24 CLAIMS SHALL BE A PERCENTAGE OF THE UNCOVERED CLAIMS UNDER SECTION
- 25 8142(2), EQUAL IN PROPORTION TO THE PERCENTAGE OF ASSETS
- 26 DISTRIBUTED, OR PROPOSED FOR DISTRIBUTION, TO THE GUARANTY
- 27 ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION WITH RESPECT TO COVERED

- 1 OBLIGATIONS AT THE TIME THE RESERVE FOR UNCOVERED CLAIMS IS
- 2 CALCULATED. RESERVES SHALL BE ESTABLISHED BASED ON THE BEST
- 3 AVAILABLE INFORMATION AT THE TIME THE DISTRIBUTION IS CALCULATED
- 4 AND MODIFIED FROM TIME TO TIME AS MORE REFINED INFORMATION BECOMES
- 5 AVAILABLE.
- 6 (b) Disbursement of the assets marshalled MARSHALED to date
- 7 and subsequent disbursement of assets as they become available.
- 8 (c) Equitable allocation of disbursements to each of the
- 9 guaranty associations and foreign guaranty associations entitled to
- 10 disbursements.
- 11 (d) The securing by the liquidator from each of the
- 12 associations entitled to disbursements pursuant to this section of
- 13 an agreement to return to the liquidator such assets, together with
- 14 income earned on assets previously disbursed, as may be required to
- 15 pay claims of secured creditors and claims falling within the
- 16 priorities established in section 8142 in accordance with those
- 17 priorities. A bond shall not be required of any such association.
- 18 (e) A full report to be made by each association to the
- 19 liquidator accounting for assets disbursed to the association, all
- 20 disbursements made from the assets, interest earned by the
- 21 association on the assets, and any other matter as the court
- 22 directs.
- 23 (3) The liquidator's proposal shall provide for disbursements
- 24 to the associations in amounts estimated at least equal to the
- 25 claim payments made or to be made thereby for which the
- 26 associations could assert a claim against the liquidator, and shall
- 27 further provide that if the assets available for disbursement from

- 1 time to time do not equal or exceed the amount of claim payments
- 2 made or to be made by the association, then disbursements shall be
- 3 in the amount of available assets.
- 4 (4) The liquidator's proposal shall, with respect to an
- 5 insolvent insurer writing life or health insurance or annuities,
- 6 provide for disbursements of assets to any guaranty association or
- 7 any foreign guaranty association covering life or health insurance
- 8 or annuities or to any other entity or organization reinsuring,
- 9 assuming, or guaranteeing policies or contracts of insurance under
- 10 the acts creating the associations.
- 11 (5) Notice of application shall be given to the association in
- 12 each state and to the commissioners of insurance of each state.
- 13 Notice shall be considered to have been given when deposited in the
- 14 United States certified mails, first-class postage prepaid, at
- 15 least 30 days before submission of the application to the court.
- 16 Action on the application may be taken by the court if the notice
- 17 under this subsection has been given and if the liquidator's
- 18 proposal complies with subsection (2)(a) and (b).
- 19 (6) THE LIQUIDATOR SHALL NOT OFFSET THE AMOUNT TO BE DISBURSED
- 20 TO ANY GUARANTY ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION BY ANY
- 21 SPECIAL OR STATUTORY DEPOSIT OR ANY OTHER ASSET OF THE INSOLVENT
- 22 INSURER EXCEPT TO THE EXTENT THE DEPOSIT OR ASSET HAS BEEN PAID TO
- 23 THE ASSOCIATION FOR THE PURPOSE OF SATISFYING THE ASSOCIATION'S
- 24 CLAIMS. IF A GUARANTY ASSOCIATION OR FOREIGN GUARANTY ASSOCIATION
- 25 HAS RECEIVED AN EARLY ACCESS DISTRIBUTION AND THEREAFTER ALSO
- 26 RECEIVES A SPECIAL OR STATUTORY DEPOSIT OR ANY OTHER ASSET OF THE
- 27 INSOLVENT INSURER, THE LIQUIDATOR MAY REQUEST THE RETURN OF THE

- 1 EARLY ACCESS FUNDS UP TO THE AMOUNT OF THE SPECIAL OR STATUTORY
- 2 DEPOSIT OR OTHER ASSET OF THE INSOLVENT INSURER.