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HOUSE BILL No. 5147

November 13, 2013, Introduced by Reps. Goike, Leonard, Glardon, Hovey-Wright, Segal and Cochran and referred to the Committee on Insurance.

A bill to amend 1956 PA 218, entitled
"The insurance code of 1956,"
by amending section 2236 (MCL 500.2236), as amended by 2002 PA 664;
and to repeal acts and parts of acts.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

Sec. 2236. (1) A basic insurance policy form or annuity contract form shall not be issued or delivered to any person in this state, and an insurance or annuity application form if a written application is required and is to be made a part of the policy or contract, a printed rider or indorsement form or form of renewal certificate, and a group certificate in connection with the policy or contract, shall not be issued or delivered to a person in this state, until a copy of the form is filed with the insurance

- 1 bureau DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES and approved
- 2 by the commissioner DIRECTOR OF THE DEPARTMENT OF INSURANCE AND
- 3 FINANCIAL SERVICES as conforming with the requirements of this act
- 4 and not inconsistent with the law. Failure of the commissioner
- 5 DIRECTOR OF THE DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES to
- 6 act within 30 days after submittal constitutes approval. All such
- 7 forms, A FORM DESCRIBED IN THIS SECTION, except policies A POLICY
- 8 of disability insurance as defined in section 3400, shall MUST be
- 9 plainly printed with type size not less than 8-point unless the
- 10 commissioner DIRECTOR OF THE DEPARTMENT OF INSURANCE AND FINANCIAL
- 11 SERVICES determines that portions of such a THE form printed with
- 12 type less than 8-point is not deceptive or misleading.
- 13 (2) An insurer may satisfy its obliqations to make form
- 14 filings by becoming a member of, or a subscriber to, a rating
- 15 organization —licensed under section 2436 or 2630 which THAT
- 16 makes such THOSE filings and by filing with the commissioner
- 17 DIRECTOR OF THE DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES a
- 18 copy of its authorization of the rating organization to make the
- 19 filings on its behalf. Every member of or subscriber to a rating
- 20 organization shall adhere to the form filings made on its behalf by
- 21 the organization except that an insurer may file with the
- 22 commissioner DIRECTOR OF THE DEPARTMENT OF INSURANCE AND FINANCIAL
- 23 SERVICES a substitute form, and thereafter if a subsequent form
- 24 filing by the rating organization affects the use of the substitute
- 25 form, the insurer shall review its use and notify the commissioner
- 26 DIRECTOR OF THE DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES
- 27 whether to withdraw its substitute form.

- 1 (3) Beginning January 1, 1992, the commissioner DIRECTOR OF
- 2 THE DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES shall not
- 3 approve a form filed pursuant to UNDER this section providing for
- 4 or relating to an insurance policy or an annuity contract for
- 5 personal, family, or household purposes if the form fails to obtain
- 6 the FOLLOWING readability score or meet the other requirements of
- 7 this subsection, as applicable:
- 8 (a) The readability score for a form for which approval is
- 9 required by this section shall MUST not be less than 45, as
- 10 determined by the method provided in subdivisions (b) and (c).
- 11 (b) The readability score for a form shall be determined as
- 12 follows:
- (i) For a form containing not more than 10,000 words, the
- 14 entire form shall be analyzed. For a form containing more than
- 15 10,000 words, not less than two 200-word samples per page shall be
- 16 analyzed instead of the entire form. The samples shall MUST be
- 17 separated by at least 20 printed lines.
- (ii) Count the number of words and sentences in the form or
- 19 samples and divide the total number of words by the total number of
- 20 sentences. Multiply this quotient by a factor of 1.015.
- 21 (iii) Count the total number of syllables in the form or samples
- 22 and divide the total number of syllables by the total number of
- 23 words. Multiply this quotient by a factor of 84.6. As used in this
- 24 subparagraph, "syllable" means a unit of spoken language consisting
- 25 of 1 or more letters of a word as indicated by an accepted
- 26 dictionary. If the dictionary shows 2 or more equally acceptable
- 27 pronunciations of a word, the pronunciation containing fewer

- 1 syllables may be used.
- (iv) Add the figures obtained in subparagraphs (ii) and (iii) and
- 3 subtract this sum from 206.835. The figure obtained equals the
- 4 readability score for the form.
- 5 (c) For the purposes of subdivision (b) (ii) and (iii), the
- 6 following procedures shall be used:
- 7 (i) A contraction, hyphenated word, or numbers and letters when
- 8 separated by spaces shall be IS counted as 1 word.
- 9 (ii) A unit of words ending with a period, semicolon, or colon,
- 10 but excluding headings and captions, shall be IS counted as 1
- 11 sentence.
- 12 (d) In determining the readability score, the method provided
- in subdivisions (b) and (c):
- 14 (i) Shall be applied to an insurance policy form or an annuity
- 15 contract, together with a rider or indorsement form usually
- 16 associated with such an THE insurance policy form or annuity
- 17 contract.
- (ii) Shall not be applied to words or phrases that are defined
- 19 in an insurance policy form, an annuity contract, or riders,
- 20 indorsements, or group certificates pursuant to UNDER an insurance
- 21 policy form or annuity contract.
- 22 (iii) Shall not be applied to language specifically agreed upon
- 23 through collective bargaining or required by a collective
- 24 bargaining agreement.
- 25 (iv) Shall not be applied to language that is prescribed by
- 26 state or federal statute or by rules or regulations promulgated
- 27 pursuant to UNDER a state or federal statute.

- 1 (e) Each THE form for which approval is required by this
- 2 section shall MUST contain both of the following:
- 3 (i) Topical captions.
- 4 (ii) An identification of exclusions.
- 5 (f) Each insurance policy and annuity contract that has more
- 6 than 3,000 words printed on not more than 3 pages of text or that
- 7 has more than 3 pages of text regardless of the number of words
- 8 shall MUST contain a table of contents. This subdivision does not
- 9 apply to indorsements.
- 10 (g) Each rider or indorsement form that changes coverage shall
- 11 MUST do all of the following:
- 12 (i) Contain a properly descriptive title.
- (ii) Reproduce either the entire paragraph or the provision as
- 14 changed.
- 15 (iii) Be accompanied by an explanation of the change.
- 16 (h) If a computer system approved by the commissioner DIRECTOR
- 17 OF THE DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES calculates
- 18 the readability score of a form as being in compliance with this
- 19 subsection, the form is considered in compliance with the
- 20 readability score requirements of this subsection.
- 21 (I) A VARIABLE LIFE PRODUCT OR VARIABLE ANNUITY PRODUCT
- 22 APPROVED BY THE UNITED STATES SECURITIES AND EXCHANGE COMMISSION
- 23 FOR SALE IN THIS STATE IS COMPLIANT WITH THIS SECTION.
- 24 (4) After January 1, 1992, any change or addition to a policy
- 25 or annuity contract form for personal, family, or household
- 26 purposes, whether by indorsement, rider, or otherwise, or a change
- 27 or addition to a rider or indorsement form to such THE policy or

- 1 annuity contract form, which policy or annuity contract form has
- 2 not been previously approved under subsection (3), shall be
- 3 submitted for approval pursuant to UNDER subsection (3).
- 4 (5) Upon written notice to the insurer, the commissioner
- 5 DIRECTOR OF THE DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES may
- 6 disapprove, withdraw approval or prohibit the issuance,
- 7 advertising, or delivery of any form to any person in this state if
- 8 it THE FORM violates any provisions of this act, or contains
- 9 inconsistent, ambiguous, or misleading clauses, or contains
- 10 exceptions and conditions that unreasonably or deceptively affect
- 11 the risk purported to be assumed in the general coverage of the
- 12 policy. The notice shall MUST specify the objectionable provisions
- 13 or conditions and state the reasons for the commissioner's DIRECTOR
- 14 OF THE DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES' decision. If
- 15 the form is legally in use by the insurer in this state, the notice
- 16 shall MUST give the effective date of the commissioner's DIRECTOR
- 17 OF THE DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES' disapproval,
- 18 which shall not be less than 30 days subsequent to AFTER the
- 19 mailing or delivery of the notice to the insurer. If the form is
- 20 not legally in use, then disapproval shall be IS effective
- 21 immediately.
- 22 (6) If a form is disapproved or approval is withdrawn under
- 23 the provisions of this act, the insurer is entitled upon demand to
- 24 a hearing before the commissioner DIRECTOR OF THE DEPARTMENT OF
- 25 INSURANCE AND FINANCIAL SERVICES or a deputy commissioner DIRECTOR
- 26 OF THE DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES within 30
- 27 days after the notice of disapproval or of withdrawal of approval.

- 1 After the hearing, the commissioner DIRECTOR OF THE DEPARTMENT OF
- 2 INSURANCE AND FINANCIAL SERVICES shall make findings of fact and
- 3 law, and either affirm, modify, or withdraw his or her original
- 4 order or decision.
- 5 (7) Any issuance, use, or delivery by an insurer of any form
- 6 without the prior approval of the commissioner DIRECTOR OF THE
- 7 DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES as required by
- 8 subsection (1) or after withdrawal of approval as provided by
- 9 subsection (5) constitutes—IS a separate violation for which the
- 10 commissioner DIRECTOR OF THE DEPARTMENT OF INSURANCE AND FINANCIAL
- 11 SERVICES may order the imposition of a civil penalty of \$25.00 for
- 12 each offense, but not to exceed the maximum penalty of \$500.00 for
- 13 any 1 series of offenses relating to any 1 basic policy form, which
- 14 penalty may be recovered by the attorney general as provided in
- **15** section 230.
- 16 (8) The filing requirements of this section do not apply to
- 17 any of the following:
- 18 (a) Insurance against loss of or damage to ANY OF THE
- 19 FOLLOWING:
- 20 (i) Imports, exports, or domestic shipments.
- 21 (ii) Bridges, tunnels, or other instrumentalities of
- 22 transportation and communication.
- 23 (iii) Aircraft and attached equipment.
- 24 (iv) Vessels and watercraft under construction or owned by or
- 25 used in a business or having a straight-line hull length of more
- 26 than 24 feet.
- 27 (b) Insurance against loss resulting from liability, other

- 1 than worker's compensation or employers' liability arising out of
- 2 the ownership, maintenance, or use of ANY OF THE FOLLOWING:
- 3 (i) Imports, exports, or domestic shipments.
- 4 (ii) Aircraft and attached equipment.
- 5 (iii) Vessels and watercraft under construction or owned by or
- 6 used in a business or having a straight-line hull length of more
- 7 than 24 feet.
- 8 (c) Surety bonds other than fidelity bonds.
- 9 (d) Policies, riders, indorsements, or forms of unique
- 10 character designed for and used with relation to insurance upon a
- 11 particular subject, or that relate to the manner of distribution of
- 12 benefits or to the reservation of rights and benefits under life or
- 13 disability insurance policies and are used at the request of the
- 14 individual policyholder, contract holder, or certificate holder.
- 15 Beginning September 1, 1968, the commissioner DIRECTOR OF THE
- 16 DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES by order may exempt
- 17 from the filing requirements of this section and sections 2242,
- 18 3606, and 4430 for so long as he or she considers proper any
- 19 insurance document or form, except that portion of the document or
- 20 form that establishes a relationship between group disability
- 21 insurance and personal protection insurance benefits subject to
- 22 exclusions or deductibles pursuant to UNDER section 3109a, as
- 23 specified in the order to which this section IS NOT practicably may
- 24 not be—applied, or the filing and approval of which are considered
- 25 unnecessary for the protection of the public. Insurance documents
- 26 or forms providing medical payments or income replacement benefits,
- 27 except that portion of the document or form that establishes a

- 1 relationship between group disability insurance and personal
- 2 protection insurance benefits subject to exclusions or deductibles
- 3 pursuant to UNDER section 3109a, exempt by order of the
- 4 commissioner DIRECTOR OF THE DEPARTMENT OF INSURANCE AND FINANCIAL
- 5 SERVICES from the filing requirements of this section and sections
- 6 2242 and 3606 are considered approved by the commissioner DIRECTOR
- 7 OF THE DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES for purposes
- 8 of section 3430.
- 9 (e) Insurance that meets both of the following:
- 10 (i) Is sold to an exempt commercial policyholder.
- 11 (ii) Contains a prominent disclaimer that states "This policy
- 12 is exempt from the filing requirements of section 2236 of the
- 13 insurance code of 1956, 1956 PA 218, MCL 500.2236." or words that
- 14 are substantially similar.
- 15 (9) As used in this section and sections 2401 and 2601,
- 16 "exempt commercial policyholder" means an insured that purchases
- 17 the insurance for other than personal, family, or household
- 18 purposes.
- 19 (10) Every order made by the commissioner DIRECTOR OF THE
- 20 DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES under the provisions
- 21 of this section is subject to court review as provided in section
- 22 244.
- 23 Enacting section 1. Section 2206 of the insurance code of
- 24 1956, 1956 PA 218, MCL 500.2206, is repealed.