## **SENATE BILL NO. 793**

March 14, 2024, Introduced by Senators CAVANAGH, BAYER, POLEHANKI, SHINK, GEISS, MCBROOM, RUNESTAD, WOJNO, MCCANN, IRWIN, KLINEFELT and CHANG and referred to the Committee on Finance, Insurance, and Consumer Protection.

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

by amending sections 134 and 3104 (MCL 500.134 and 500.3104), section 134 as amended by 1990 PA 256 and section 3104 as amended by 2019 PA 21.

## THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Sec. 134. (1) Every certificate of authority or license in
- 2 force immediately prior to before January 1, 1957 and existing
- 3 under any act repealed by this act is valid until its original
- 4 expiration date, unless earlier terminated in accordance with this

- 1 act.
- 2 (2) Any plan of operation adopted by an association or
- 3 facility, and any premium or assessment levied against an insurer
- 4 member of that association or facility, is hereby validated valid
- 5 retroactively to the date of its original adoption or levy and
- 6 shall continue continues in force and effect according to the terms
- 7 of the plan of operation, premium, or assessment until otherwise
- 8 changed by the commissioner director or the board of directors of
- 9 the association or facility pursuant to this act.
- 10 (3) An association or facility or the board of directors of
- 11 the association or facility is not a state agency and the money of
- 12 an association or facility is not state money.
- 13 (4) A—Except as otherwise provided in section 3104, a record
- 14 of an association or facility shall be exempted is exempt from
- 15 disclosure pursuant to under section 13 of the freedom of
- 16 information act, Act No. 442 of the Public Acts of 1976, being
- 17 section 15.243 of the Michigan Compiled Laws 1976 PA 442, MCL
- 18 15.243.
- 19 (5) Any premium or assessment levied by an association or
- 20 facility, or any premium or assessment of a similar association or
- 21 facility formed under a law in force outside this state, is not a
- 22 burden or special burden for purposes of a calculation under
- 23 section 476a, and any premium or assessment paid to an association
- 24 or facility shall not be included in determining the aggregate
- 25 amount a foreign insurer pays to the commissioner department of
- 26 treasury under section 476a.
- 27 (6) As used in this section, "association or facility" means
- 28 an association of insurers created under this act and any other
- 29 association or facility formed under this act as a nonprofit

- 1 organization of insurer members, including, but not limited to, the
  2 following:
- 3 (a) The Michigan worker's compensation placement facility4 created under chapter 23.
- 5 (b) The Michigan basic property insurance association created
  6 under section chapter 29.
- 7 (c) The catastrophic claims association created under chapter
  8 31.
- 9 (d) The Michigan automobile insurance placement facility10 created under chapter 33.
- (e) The Michigan life and health insurance guarantyassociation created under chapter 77.
- 13 (f) The property and casualty guaranty association created
  14 under chapter 79.
- 15 (g) The assigned claims facility created under section 3171.
- Sec. 3104. (1) The catastrophic claims association is created
- 17 as an unincorporated, nonprofit association. Each insurer engaged
- 18 in writing insurance coverages that provide the security required
- 19 by section  $\frac{3101(1)}{3101}$  in this state, as a condition of its
- 20 authority to transact insurance in this state, shall be a member of
- 21 the association and is bound by the plan of operation of the
- 22 association. An insurer engaged in writing insurance coverages that
- 23 provide the security required by section 3103(1) in this state, as
- 24 a condition of its authority to transact insurance in this state,
- 25 is considered to be a member of the association, but only for
- 26 purposes of premiums under subsection (7)(d). Except as expressly
- 27 provided in this section, the association is not subject to any
- 28 laws of this state with respect to insurers, but in all other
- 29 respects the association is subject to the laws of this state to

- the extent that the association would be if it were an insurer
  organized and subsisting under chapter 50.
- 3 (2) For all motor vehicle accident policies issued or renewed4 before July 2, 2020 and for a motor vehicle accident policy issued
- 5 or renewed after July 1, 2020 to which section 3107c(1)(d) applies,
- 6 the association shall provide and each member shall accept
- 7 indemnification for 100% of the amount of ultimate loss sustained
- 8 under personal protection insurance coverages in excess of the
- 9 following amounts in each loss occurrence:

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- 10 (a) For a motor vehicle accident policy issued or renewed11 before July 1, 2002, \$250,000.00.
  - (b) For a motor vehicle accident policy issued or renewed during the period July 1, 2002 to June 30, 2003, \$300,000.00.
- 14 (c) For a motor vehicle accident policy issued or renewed 15 during the period July 1, 2003 to June 30, 2004, \$325,000.00.
  - (d) For a motor vehicle accident policy issued or renewed during the period July 1, 2004 to June 30, 2005, \$350,000.00.
  - (e) For a motor vehicle accident policy issued or renewed during the period July 1, 2005 to June 30, 2006, \$375,000.00.
  - (f) For a motor vehicle accident policy issued or renewed during the period July 1, 2006 to June 30, 2007, \$400,000.00.
  - (g) For a motor vehicle accident policy issued or renewed during the period July 1, 2007 to June 30, 2008, \$420,000.00.
  - (h) For a motor vehicle accident policy issued or renewed during the period July 1, 2008 to June 30, 2009, \$440,000.00.
  - (i) For a motor vehicle accident policy issued or renewed during the period July 1, 2009 to June 30, 2010, \$460,000.00.
- 28 (j) For a motor vehicle accident policy issued or renewed
  29 during the period July 1, 2010 to June 30, 2011, \$480,000.00.

- (k) For a motor vehicle accident policy issued or renewed during the period July 1, 2011 to June 30, 2013, \$500,000.00.
- (l) For a motor vehicle accident policy issued or renewed during the period July 1, 2013 to June 30, 2015, \$530,000.00.
- (m) For a motor vehicle accident policy issued or renewedduring the period July 1, 2015 to June 30, 2017, \$545,000.00.
  - (n) For a motor vehicle accident policy issued or renewed during the period July 1, 2017 to June 30, 2019, \$555,000.00.
  - (o) For a motor vehicle accident policy issued or renewed during the period July 1, 2019 to June 30, 2021, \$580,000.00.
  - (p) For a motor vehicle accident policy issued or renewed during the period July 1, 2021 to June 30, 2023, \$600,000.00.
- 13 (q) For a motor vehicle accident policy issued or renewed 14 during the period July 1, 2023 to June 30, 2025, \$635,000.00.
- 15 Beginning July 1, <del>2021, </del>2025, this <del>\$580,000.00 </del>**\$635,000.00** amount
- 16 must be increased biennially on July 1 of each odd-numbered year,
- 17 for policies issued or renewed before July 1 of the following odd-
- 18 numbered year, by the lesser of 6% or the Consumer Price Index, and
- 19 rounded to the nearest \$5,000.00. The association shall calculate
- 20 this biennial adjustment by January 1 of the year of its July 1
- 21 effective date.

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- (3) An insurer may withdraw from the association only on
  ceasing to write insurance that provides the security required by
  section 3101(1)—3101 in this state.
  - (4) An insurer whose membership in the association has been terminated by withdrawal continues to be bound by the plan of operation, and on withdrawal, all unpaid premiums that have been charged to the withdrawing member are payable as of the effective date of the withdrawal.

- 1 (5) An unsatisfied net liability to the association of an
  2 insolvent member must be assumed by and apportioned among the
  3 remaining members of the association as provided in the plan of
  4 operation. The association has all rights allowed by law on behalf
  5 of the remaining members against the estate or funds of the
  6 insolvent member for money due the association.
- 7 (6) If a member has been merged or consolidated into another
  8 insurer or another insurer has reinsured a member's entire business
  9 that provides the security required by section 3101(1)—3101 in this
  10 state, the member and successors in interest of the member remain
  11 liable for the member's obligations.
- 12 (7) The association shall do all of the following on behalf of the members of the association:
- 14 (a) Assume 100% of all liability as provided in subsection
  15 (2).
- 16 (b) Establish procedures by which members must promptly report to the association each claim that, on the basis of the injuries or 17 18 damages sustained, may reasonably be anticipated to involve the 19 association if the member is ultimately held legally liable for the 20 injuries or damages. Solely for the purpose of reporting claims, the member shall in all instances consider itself legally liable 21 for the injuries or damages. The member shall also advise the 22 23 association of subsequent developments likely to materially affect 24 the interest of the association in the claim.
- (c) Maintain relevant loss and expense data relating to all liabilities of the association and require each member to furnish statistics, in connection with liabilities of the association, at the times and in the form and detail as required by the plan of operation.

(d) In a manner provided for in the plan of operation, and 1 subject to the director's approval, calculate and charge to members 2 of the association a total premium sufficient to cover the expected 3 losses and expenses of the association that the association will 4 5 likely incur during the period for which the premium is applicable. 6 The total premium must include an amount to cover incurred but not 7 reported losses for the period and must be adjusted for any excess 8 or deficient premiums from previous periods. Excesses or 9 deficiencies from previous periods must either be fully adjusted in 10 a single period or be adjusted over several periods in a manner 11 provided for in the plan of operation. The director may disapprove any total premium amount or any other amount, including a deficit 12 13 recoupment amount, that the director considers to be excessive, 14 inadequate, or unfairly discriminatory. Each member must be charged 15 an amount equal to that member's total written car years of 16 insurance providing the security required by section 3101(1) 3101 or 3103(1), or both, written in this state during the period to 17 18 which the premium applies, with the total written car years of 19 insurance multiplied by the applicable average premium per car. The 20 average premium per car is the total premium, as adjusted for any 21 excesses or deficiencies, divided by the total written car years of 22 insurance providing the security required by section 3101(1)—3101 23 or 3103(1), or both, written in this state of all members during the period to which the premium applies, excluding cars insured 24 25 under a policy with a coverage limit under section 3107c(1)(a), (b), or (c), cars as to which an election to not maintain personal 26 27 protection insurance benefits has been made under section 3107d, or as to which an exclusion under section 3109a(2) applies. , except 28 29 for any portion of total premium that is an adjustment for a

- 1 deficiency in a previous period. A member may not be charged a
- 2 premium for a car insured under a policy with a coverage limit
- 3 under section 3107c(1)(a), (b), or (c), as to which an election to
- 4 not maintain personal protection insurance benefits has been made
- 5 under section 3107d, or as to which an exclusion under section
- 6 3109a(2) applies. , other than for the portion of the total premium
- 7 attributable to an adjustment for a deficiency in a previous
- 8 period. A member must be charged a premium for a historic vehicle
- ${f 9}$  that is insured with the member of 20% of the premium charged for a
- 10 car insured with the member.
- 11 (e) Require and accept the payment of premiums from members of
- 12 the association as provided for in the plan of operation. The
- 13 association shall do either of the following:
- (i) Require payment of the premium in full within 45 days after
- 15 the premium charge.
- 16 (ii) Require payment of the premiums to be made periodically to
- 17 cover the actual cash obligations of the association.
- 18 (f) Receive and distribute all money required by the operation
- 19 of the association.
- (g) Establish procedures for reviewing claims procedures and
- 21 practices of members of the association. If the claims procedures
- 22 or practices of a member are considered inadequate to properly
- 23 service the liabilities of the association, the association may
- 24 undertake or may contract with another person, including another
- 25 member, to adjust or assist in the adjustment of claims for the
- 26 member on claims that create a potential liability to the
- 27 association and may charge the cost of the adjustment to the
- 28 member.

(h) Cooperate with the department of treasury to allow the

- department of treasury to manage the investment of all money held by the association.
- (i) (h) Provide any records necessary or requested by the
   director for the actuarial examination under subsection (21).
- 5 (j) (i) Subject to subsection (23), obey an order of the
  6 director for a refund under subsection (22).

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- (8) In addition to other powers granted to it by this section, the association may do all of the following:
- 9 (a) Sue and be sued in the name of the association. A judgment against the association does not create any direct liability 11 against the individual members of the association. The association 12 may provide for the indemnification of its members, members of the board of directors of the association, and officers, employees, and other persons lawfully acting on behalf of the association.
- (b) Reinsure all or any portion of its potential liability
  with reinsurers licensed to transact insurance in this state or
  approved by the director.
  - (c) Provide for appropriate housing, equipment, and personnel as necessary to assure the efficient operation of the association.
- 20 (d) Pursuant to the plan of operation, adopt reasonable rules 21 for the administration of the association, enforce those rules, and 22 delegate authority, as the board considers necessary to assure the 23 proper administration and operation of the association consistent 24 with the plan of operation.
  - (e) Contract for goods and services, including independent claims management, actuarial, investment, and legal services, from others in or outside of this state to assure the efficient operation of the association.
  - (f) Hear and determine complaints of a company or other

- 1 interested party concerning the operation of the association.
- 2 (g) Perform other acts not specifically enumerated in this
- 3 section that are necessary or proper to accomplish the purposes of
- 4 the association and that are not inconsistent with this section or
- 5 the plan of operation.
- **6** (9) A board of directors is created and shall operate the
- 7 association consistent with the plan of operation and this section.
- 8 (10) The plan of operation must provide for all of the
- 9 following:
- 10 (a) The establishment of necessary facilities.
- 11 (b) The management and operation of the association.
- 12 (c) Procedures to be utilized in charging premiums, including
- 13 adjustments from excess or deficient premiums from prior periods.
- 14 The plan must require that any deficiency from a prior period be
- 15 amortized over not fewer than 15 years.
- 16 (d) Procedures for a refund to members of the association, for
- 17 distribution to insureds as provided in subsection (24), as ordered
- 18 by the director under subsection (22). The procedures must provide
- 19 for a distribution of a refund attributable to a historic vehicle
- 20 equal to 20% of the refund for a car that is not a historic
- 21 vehicle.
- (e) Procedures governing the actual payment of premiums to the
- 23 association.
- 24 (f) Reimbursement of each member of the board by the
- 25 association for actual and necessary expenses incurred on
- 26 association business.
- 27 (g) The investment policy of the association.
- (g) (h) Any other matters required by or necessary to
- 29 effectively implement this section.

- (11) The board must include members that would contribute a
  total of not less than 40% of the total premium calculated under
  subsection (7) (d). Each board member is entitled to 1 vote. The
- 4 initial term of office of a board member is 2 years.
- 5 (12) As part of the plan of operation, the board shall adopt
- 6 rules providing for the composition of the board and the terms of
- 7 board members, consistent with the membership composition
- 8 requirements in subsections (11) and (13). Terms of the board
- 9 members must be staggered so that the terms of all the board
- 10 members do not expire at the same time and so that a board member
- 11 does not serve a term of more than 4 years.
- 12 (13) The board must consist of 5-10 voting board members, and
- 13 the as follows:
- 14 (a) The director, who shall serve as an ex officio member of
- 15 the board. without vote.
- 16 (b) Five members that include the members that meet the
- 17 contribution requirements of subsection (11).
- 18 (c) Two members representing motor vehicle operators in this
- 19 state.
- 20 (d) One member representing individuals who have sustained
- 21 injuries covered by personal protection insurance.
- (e) One member representing physicians, hospitals, clinics, or
- 23 other persons that render treatment or rehabilitative occupational
- 24 training to individuals who have sustained injuries covered by
- 25 personal protection insurance.
- 26 (14) The director shall appoint the board members. The
- 27 director shall appoint the members under subsection (13)(c) to (e)
- 28 not later than 3 months after the effective date of the amendatory
- 29 act that added this sentence. A board member shall serve until his

- or her successor is selected and qualified. The board shall elect the chairperson of the board. The director shall fill any vacancy on the board as provided in the plan of operation.
- 4 (15) The board shall meet as often as the chairperson, the 5 director, or the plan of operation requires, or at the request of 6 any 3-5 board members. The chairperson may vote on all issues. Four 7 Six board members constitute a guorum.

- (16) The board shall furnish to each member of the association an annual report of the operations of the association in a form and detail as determined by the board.
  - (17) Any amendments to the plan of operation are subject to majority approval by the board, ratification by a majority of the membership of the association having a vote, with voting rights being apportioned according to the premiums charged in subsection (7)(d), and approval by the director.
- (18) An insurer authorized to write insurance providing the security required by section 3101(1)—3101 in this state, as provided in this section, is bound by and shall formally subscribe to and participate in the plan of operation as a condition of maintaining its authority to transact insurance in this state.
  - (19) The association is subject to all the reporting —and loss reserve —and investment—requirements of the director to the same extent as is a member of the association.
  - (20) Premiums charged members by the association must be recognized in the rate-making procedures for insurance rates in the same manner that expenses and premium taxes are recognized. If a member of the association passes on any portion of the premium payable under this section to an insured, the amount passed on must equal the portion of the premium payable by the member under this

- 1 section attributable to the car or historic vehicle insured,
- 2 including any adjustments for excesses or deficiencies from a
- 3 previous period.
- 4 (21) The director or an authorized representative of the
- 5 director may visit the association at any time and examine any and
- 6 all of the association's affairs. Beginning July 1, 2022, and every
- 7 third year annually after 2022, the director shall engage 1 or more
- 8 independent actuaries to examine the affairs and records of the
- 9 association for the previous 3 years. The actuarial
- 10 examination must be conducted using sound actuarial principles
- 11 consistent with the applicable statements of principles and the
- 12 code of professional conduct adopted by the Casualty Actuarial
- 13 Society. By September 1, 2022 and by September 1 of every third
- 14 year after 2022, the director shall provide a report to the
- 15 legislature on the results of the audit conducted under this
- 16 subsection.
- 17 (22) If the actuarial examination under subsection (21) shows
- 18 that the assets of the association exceed 120% of its liabilities,
- 19 including incurred but not reported liabilities, and if the refund
- 20 will not threaten the association's ongoing ability to provide
- 21 reimbursements for personal protection insurance benefits based on
- 22 sound actuarial principles consistent with the applicable
- 23 statements of principles and the code of professional conduct
- 24 adopted by the Casualty Actuarial Society, the director shall order
- 25 the association to refund an amount equal to the difference between
- 26 the total excess assets and 120% of the liabilities of the
- 27 association, including incurred but not reported liabilities, under
- 28 subsection (10)(d) and order the members of the association to
- 29 distribute the refunds under subsection (24).

1 (23) Within 30 days after receiving an order from the director 2 under subsection (22), the association may request a hearing to 3 review the order by filing a written request with the director. The 4 department shall conduct the review as a contested case under the 5 administrative procedures act of 1969, 1969 PA 306, MCL 24.201 to

24.328.

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- 7 (24) A member of the association shall distribute any refund 8 it receives under subsection (10)(d) to the persons that it insures 9 under policies that provide the security required under section 10 3101(1) 3101 or 3103(1), or both, and that are subject to a premium 11 under this section on a uniform basis per car and historic vehicle 12 in a manner and on the date or dates provided by the director in accordance with an order issued by the director. A refund 13 14 attributable to a historic vehicle must be equal to 20% of the 15 refund for a car that is not a historic vehicle.
- 16 (25) By September 1 of each year, the association shall
  17 prepare, submit to the committees of the senate and house of
  18 representatives with jurisdiction over insurance matters, and post
  19 on the association website an annual consumer statement, written in
  20 a manner intended for the general public. The statement must
  21 include all of the following:
- (a) The number of claims opened during the preceding 12
  months, the amount expended on the claims, and the future
  anticipated costs of the claims.
- (b) For each of the preceding 10 years, the total number of
  open claims, the amount expended on the claims, and the anticipated
  future costs of the claims.
- (c) For each of the preceding 10 years, the total number ofclaims closed and the amount expended on the claims.

- (d) For each of the preceding 10 years, the ratio of claims
   opened to claims closed.
- 3 (e) For each of the preceding 10 years, the average length of4 open claims.
- (f) A statement of the current financial condition of the
  association and the reasons for any deficit or surplus in collected
  assessments compared to losses.
- 8 (g) A statement, from the department of the treasury, of the
  9 assumptions, methodology, and data used to make revenue
  10 projections. As used in this subdivision, "revenue" means return on
  11 investments.
- (h) A statement of the assumptions, methodology, and data usedto make cost projections.
- (i) A list, from the department of the treasury, of the association's assets, sorted by category or type of asset, such as stocks, bonds, or mutual funds, and the expected return on each asset.
- 18 (j) The total amount of the association's discounted and
  19 undiscounted liabilities and a description and explanation of the
  20 liabilities, including an explanation of the association's
  21 definition of the terms discounted and undiscounted. As used in
  22 this subdivision, "liabilities" includes any indebtedness.
- 23 (k) Measures taken by the association to contain costs.
- 24 (l) A statement explaining what portion of the assessment to
  25 insureds as recognized in rates under subsection (20) is
  26 attributable to claims occurring in the previous 12 months,
  27 administrative costs, and the amount, if any, to adjust for past
  28 deficits.
- 29 (m) A statement explaining any qualifications identified by

- the independent auditors in the most recent audit report prepared
  under subsection (21).
- 3 (n) A loss payment summary for each of the preceding years by4 category.
- 5 (o) For each of the preceding 10 years, an injury type
- 6 summary, categorizing the injuries suffered by claimants the
- 7 payment of whose claims are being reimbursed by the association, by
- 8 brain injuries, injuries resulting in quadriplegia, injuries
- 9 resulting in paraplegia, burn injuries, and other injuries.
- 10 (p) A summary of investment returns over the preceding 10
- 11 years showing the investment balance, the investment gain, and the
- 12 percentage return on the investment balance.
- 13 (q) A summary of the mortality assumptions used in making cost
- 14 projections.
- 15 (r) A summary of any financial practices that differ from
- 16 those found in the National Association of Insurance Commissioners
- 17 Accounting Practices and Procedures Manual.
- 18 (26) By September 1 of each year, the association shall
- 19 prepare and provide to the committees of the senate and house of
- 20 representatives with jurisdiction over insurance matters an annual
- 21 report of the association. The report must contain all of the
- 22 following:
- 23 (a) An executive summary.
- 24 (b) A discussion of the mortality assumptions used by the
- 25 association in making cost projections.
- 26 (c) An evaluation of the accuracy of the association's
- 27 actuarial assumptions over the preceding 5 years.
- 28 (d) The annual consumer statement prepared under subsection
- **29** (25).

- (e) Anything else the association determines is necessary to
   advise the legislature about the operations of the association.
- 3 (27) Annually, within 15 days after the association charges 4 members the total premium under subsection (7)(d), the association
- 5 shall disclose to the public on its website all data used in
- 6 computing the premium and expected losses and expenses, including
- 7 the amount that covers incurred but not reported losses for the
- 8 period and any adjustment for any excess or deficient premiums from
- 9 previous periods and the actuarial computation used in making these
- 10 determinations, including estimates and assumptions. The disclosure
- 11 must include, but not be limited to, all of the following:
- 12 (a) The actuarial computation used in making determinations of unpaid losses and loss adjustment expenses.
- 14 (b) All documents used in establishing the following:
- 15 (i) The calculation of the present value of disbursements 16 expected to be made in the ultimate settlement of the claims 17 reported.
- 18 (ii) The actuarial tables used to reflect the probabilities of 19 each claimant surviving to incur the costs projected.
- 20 (iii) The calculation of incurred but not reported losses.
- (iv) The actuarial assumptions and calculations used in producing the short-term discount rate and the long-term discount rate.
- 24 (v) The forecasts producing the economic assumptions for claim 25 cost inflation and investment returns used.
- 26 (vi) The current economic data and historical long-term
  27 Consumer Price Index data for any cost component categories used in
  28 producing inflation assumptions.
- 29 ( $v\ddot{u}$ ) Any loss development factor or any other loss development

- 1 analysis used to calculate, estimate, or set the premium, or that
- 2 in any way impacts the actuarial determination of the plan of
- 3 operation.
- 4 (viii) Any loss trends, including both frequency and severity
- 5 trends, or any other loss trend analysis used to calculate,
- 6 estimate, or set the premium, or that in any way impacts the
- 7 actuarial determination of the plan of operation.
- 8 (c) The annual actuarial evaluation used in establishing the
- 9 premium.
- 10 (d) The annual assessment reports of members used in
- 11 establishing the premium.
- 12 (e) The annuity model used by the opining actuary in his or
- 13 her actuarial opinion projecting future payment streams at the
- 14 claimant level and the mortality adjustment applied.
- 15 (f) Any explanatory memorandum explaining the various
- 16 components of the premium and the judgments made to produce the
- 17 premium.
- 18 (28) (27) The association does not have liability for losses
- 19 occurring before July 1, 1978. After July 1, 2020, the association
- 20 does not have liability for an ultimate loss under personal
- 21 protection insurance coverage for a motor vehicle accident policy
- 22 to which a limit under section 3107c(1) (a), (b), or (c) is
- 23 applicable.
- 24 (29) The board shall conduct its business at a public meeting
- 25 of the board held in compliance with the open meetings act, 1976 PA
- 26 267, MCL 15.261 to 15.275.
- 27 (30) A writing prepared, owned, used, in the possession of, or
- 28 retained by the board in the performance of an official function is
- 29 subject to disclosure under the freedom of information act, 1976 PA

- 1 442, MCL 15.231 to 15.246, as if the board were a public body 2 subject to that act.
- 3 (31)  $\frac{(28)}{}$  As used in this section:
- 4 (a) "Association" means the catastrophic claims association5 created in subsection (1).
- 6 (b) "Board" means the board of directors of the association7 created in subsection (9).
- 8 (c) "Car" includes a motorcycle but does not include a9 historic vehicle.
- 10 (d) "Consumer Price Index" means the percentage of change in
  11 the Consumer Price Index for all urban consumers in the United
- 12 States city average for all items for the 24 months before October
- 13 1 of the year before the July 1 effective date of the biennial
- 14 adjustment under subsection (2)(o) as reported by the United States
- 15 Department of Labor, Bureau of Labor Statistics, and as certified
- 16 by the director.
- 17 (e) "Historic vehicle" means a vehicle that is a registered 18 historic vehicle under section 803a or 803p of the Michigan vehicle 19 code, 1949 PA 300, MCL 257.803a and 257.803p.
- 20 (f) "Motor vehicle accident policy" means a policy providing 21 the coverages required under section 3101(1).3101.
- 22 (g) "Ultimate loss" means the actual loss amounts that a
  23 member is obligated to pay and that are paid or payable by the
  24 member, and do not include claim expenses. An ultimate loss is
  25 incurred by the association on the date that the loss occurs.
- Enacting section 1. This amendatory act does not take effect unless Senate Bill No. 794 of the 102nd Legislature is enacted into law.