By: Smithee H.B. No. 2835

## A BILL TO BE ENTITLED

1	AN ACT
2	relating to the functions of insurance holding company systems.
3	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
4	SECTION 1. Section 823.002, Insurance Code, is amended by
5	adding Subdivisions (3-a), (3-b), and (4-a) and amending
6	Subdivision (6) to read as follows:
7	(3-a) "Divesting person" means a person who has
8	control of a domestic insurer and who intends to divest control of
9	the domestic insurer.
10	(3-b) "Divestiture" means an abandonment of control of
11	a domestic insurer by a divesting person that does not result in the
12	transfer of control to another person.
13	(4-a) "Enterprise risk" means any activity,
14	circumstance, event, or series of events involving one or more
15	affiliates of an insurer that, if not remedied promptly, is likely
16	to have a material adverse effect on the financial condition or
17	liquidity of the insurer or its insurance holding company system as
18	a whole, including anything:
19	(A) that would cause the insurer's risk-based
20	capital to fall into company action level; or
21	(B) that would cause the insurer to be in
22	hazardous financial condition.
23	(6) "Insurer" means any insurance company organized

under the laws of this state, a commercially domiciled insurer, or

- 1 an insurer authorized to engage in the business of insurance in this
- 2 state. The term includes a capital stock company, mutual company,
- 3 farm mutual insurance company, title insurance company, fraternal
- 4 benefit society, local mutual aid association, statewide mutual
- 5 assessment company, county mutual insurance company, Lloyd's plan,
- 6 reciprocal or interinsurance exchange, stipulated premium
- 7 insurance company, and group hospital service corporation. The
- 8 term does not include an agency, authority, or instrumentality of
- 9 the United States, its possessions and territories, the
- 10 Commonwealth of Puerto Rico, the District of Columbia, or a state[7
- 11 or an agency, authority, instrumentality, or political
- 12 subdivision of a state.
- 13 SECTION 2. Section 823.010, Insurance Code, is amended by
- 14 amending Subsections (c) and (d) and adding Subsections (e) and (f)
- 15 to read as follows:
- 16 (c) Except as provided by Subsection (d), [After] the
- 17 disclaimer shall be deemed to have been allowed unless, not later
- 18 than 60 days after the receipt of a completed disclaimer, [is filed:
- 19 [(1) the insurer is not required to register or report
- 20 under Subchapter B because of a duty that arises out of the
- 21 insurer's relationship with the person unless] the commissioner
- 22 notifies the filing party that [disallows] the disclaimer is
- 23 disallowed[ , in which event the duty to register or report begins on
- 24 the date of the disallowance; and
- 25 [<del>(2) the person is not required to comply with</del>
- 26 Sections 823.154, 823.155, 823.159, and 823.160 unless the
- 27 commissioner disallows the disclaimer].

- 1 (d) Notwithstanding Subsection (c), if the commissioner at
- 2 any time determines that the information disclosed in the
- 3 <u>disclaimer</u> is inaccurate or is no longer accurate, the [The]
- 4 commissioner may disallow the disclaimer [only after:
- 5 [(1) providing to each party in interest notice of and
- 6 the opportunity to be heard on the disallowance; and
- 7 [(2) making specific findings of fact to support the
- 8 disallowance].
- 9 <u>(e) If the commissioner disallows a disclaimer, the party</u>
- 10 who filed the disclaimer may request an administrative hearing.
- 11 The commissioner shall grant the request for the hearing.
- 12 (f) If the commissioner allows a disclaimer, the party who
- 13 filed the disclaimer is not required to register under Subchapter B
- 14 <u>or comply with Section 823.154, 823.155, 823.159, or 823.160 unless</u>
- 15 the commissioner determines that the disclaimer should be
- 16 <u>disallowed under Subsection (d).</u>
- 17 SECTION 3. Section 823.011, Insurance Code, is amended by
- 18 amending Subsections (b) and (d) and adding Subsections (e), (f),
- 19 (g), and (h) to read as follows:
- 20 (b) The information shall be confidential and privileged
- 21 for all purposes [treated confidentially and is not subject to
- 22 subpoena]. Except as provided by Subsections (c) and (d), the
- 23 information may not be disclosed without the prior written consent
- 24 of the insurer to which it pertains.
- 25 (d) Except as provided by Subsection (e), if the recipient
- 26 of documents or other information agrees in writing to maintain the
- 27 confidential and privileged status of the documents or other

- 1 information, and verifies in writing the legal authority to
- 2 maintain the confidential and privileged status of the documents or
- 3 information, the [The] commissioner or another person may disclose
- 4 the information to any of the following entities functioning in an
- 5 official capacity:
- 6 (1) <u>a commissioner of insurance or</u> an insurance
- 7 department of another state;
- 8 (2) an authorized law enforcement official;
- 9 (3) a district attorney of this state;
- 10 (4) the attorney general; [<del>or</del>]
- 11 (5) a grand jury; or
- 12 (6) members of a supervisory college described by
- 13 Section 823.0145.
- 14 (e) Notwithstanding Subsection (d), the commissioner may
- 15 share confidential and privileged information reported under
- 16 Section 823.0595 only with the commissioner of insurance of a state
- 17 that has a statute or rule substantially similar to Subsection (d)
- 18 who agrees in writing not to disclose the information.
- 19 (f) Information described by Subsection (a), including
- 20 information in the possession of the National Association of
- 21 <u>Insurance Commissioners under this section</u>, is confidential and
- 22 privileged for all purposes, including for purposes of:
- 23 (1) Chapter 552, Government Code;
- 24 (2) a response to a subpoena; or
- 25 (3) discovery or admissibility in evidence in a
- 26 private civil action.
- 27 (g) The commissioner shall enter into written agreements

- 1 with the National Association of Insurance Commissioners regarding
- 2 the sharing and use of information provided under Subchapter B. An
- 3 agreement entered into under this subsection must:
- 4 (1) specify procedures and protocols regarding the
- 5 confidentiality and security of information shared with the
- 6 National Association of Insurance Commissioners and its affiliates
- 7 and subsidiaries under this section, including procedures and
- 8 protocols for sharing by the National Association of Insurance
- 9 Commissioners with other state, federal, or international
- 10 regulators;
- 11 (2) specify that ownership of information shared with
- 12 the National Association of Insurance Commissioners and its
- 13 affiliates and subsidiaries under this section remains with the
- 14 commissioner, and that use of the information by the National
- 15 Association of Insurance Commissioners is subject to the direction
- 16 of the commissioner;
- 17 (3) require prompt notice to an insurer whose
- 18 confidential information is in the possession of the National
- 19 Association of Insurance Commissioners under this section that the
- 20 information is subject to a request or subpoena to the National
- 21 <u>Association of Insurance Commissioners for disclosure or</u>
- 22 production; and
- 23 (4) require the National Association of Insurance
- 24 Commissioners and its affiliates and subsidiaries to give consent
- 25 to intervention by an insurer in any judicial or administrative
- 26 action in which the National Association of Insurance Commissioners
- 27 and its affiliates and subsidiaries may be required to disclose

- 1 confidential information about the insurer shared with the National
- 2 Association of Insurance Commissioners and its affiliates and
- 3 subsidiaries under this section.
- 4 (h) The commissioner remains solely responsible for the
- 5 administration, execution, and enforcement of this chapter, and the
- 6 commissioner's sharing of information does not constitute a
- 7 <u>delegation of regulatory or rulemaking authority.</u>
- 8 SECTION 4. Subchapter A, Chapter 823, Insurance Code, is
- 9 amended by adding Section 823.0145 to read as follows:
- Sec. 823.0145. SUPERVISORY COLLEGES. (a) With respect to
- 11 any insurer registered under Subchapter B, and in accordance with
- 12 Subsection (c), the commissioner may participate in a supervisory
- 13 college for a domestic insurer that is part of an insurance holding
- 14 company system with international operations in order to determine
- 15 the insurer's compliance with this chapter. The commissioner may:
- 16 (1) initiate the establishment of a supervisory
- 17 college;
- 18 (2) clarify the membership and participation of other
- 19 entities in the supervisory college;
- 20 (3) clarify the functions of the supervisory college
- 21 and the role of other entities in the supervisory college;
- 22 (4) establish a group-wide supervisor;
- 23 <u>(5) coordinate the ongoing activities of the</u>
- 24 supervisory college, including meetings, regulatory activities,
- 25 and processes for information sharing; and
- 26 (6) establish a crisis management plan.
- 27 (b) In order to assess the business strategy, financial

- 1 position, legal and regulatory position, risk exposure, risk management and governance processes, and as part of the examination 2 of individual insurers under Subchapter H, the commissioner may 3 participate in a supervisory college with other entities that 4 regulate the insurer or its affiliates, including other state, 5 federal, and international regulatory entities. The commissioner 6 may enter into agreements under Section 823.011 to cooperate with 7 other regulatory entities. Nothing in this section shall be 8 construed as delegating to the supervisory college 9 10 commissioner's authority to regulate the insurer or its affiliates. (c) A registered insurer subject to this section shall pay 11 12 the reasonable expenses, including reasonable travel expenses, of the commissioner's participation in a supervisory college under 13 Subsection (b). For purposes of this section, a supervisory 14 15 college may be convened as either a temporary or permanent forum for
- SECTION 5. Section 823.052, Insurance Code, is amended by amending Subsections (b) and (c) and adding Subsection (c-1) to read as follows:

related to the regulation of the insurer.

communication and cooperation between the entities that regulate

the insurer or its affiliates, and the commissioner may establish a

regular assessment to the insurer for the payment of expenses

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- 23 (b) The registration statement must <u>be in a format</u>
  24 <u>prescribed by the National Association of Insurance Commissioners</u>
  25 <u>or adopted by rule of the commissioner and</u> contain current
  26 information about:
- 27 (1) the identity and relationship of each affiliate in

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- 1 the insurance holding company system of which the insurer is a part;
- 2 (2) the capital structure, general financial
- 3 condition, and ownership and management of the insurer, the
- 4 insurer's holding company, the insurer's subsidiaries, and, if the
- 5 commissioner considers the information necessary, any of the
- 6 insurer's other affiliates; and
- 7 (3) any pledge of stock of the insurer or a subsidiary
- 8 or controlling affiliate of the insurer for a loan made to a member
- 9 of the insurer's insurance holding company system.
- 10 (c) The registration statement must also contain
- 11 information about:
- 12 (1) each outstanding loan the insurer makes to an
- 13 affiliate of the insurer or an affiliate makes to the insurer;
- 14 (2) each purchase, sale, or exchange of securities or
- 15 other investment between the insurer and an affiliate of the
- 16 insurer;
- 17 (3) each purchase, sale, or exchange of assets between
- 18 the insurer and an affiliate of the insurer;
- 19 (4) each management and service contract or
- 20 cost-sharing arrangement between the insurer and an affiliate of
- 21 the insurer;
- 22 (5) each reinsurance agreement between the insurer and
- 23 an affiliate of the insurer that covers one or more lines of
- 24 insurance of the ceding company;
- 25 (6) each agreement between the insurer and an
- 26 affiliate of the insurer to consolidate federal income tax returns;
- 27 (7) each transaction between the insurer and an

- 1 affiliated financial institution;
- 2 (8) each transaction between the insurer and an
- 3 affiliate of the insurer that is not in the ordinary course of
- 4 business;
- 5 (9) each guarantee or undertaking, other than an
- 6 insurance contract entered into in the ordinary course of the
- 7 insurer's business, for the benefit of an affiliate of the insurer
- 8 that results in a contingent exposure of the insurer's assets to
- 9 liability;
- 10 (10) each dividend or distribution to the insurer's
- 11 shareholders; [and]
- 12 (11) each transaction between the insurer and an
- 13 affiliate of the insurer not specified by this subsection that is
- 14 subject to Section 823.102, 823.103, or 823.104;
- 15 (12) the corporate governance and internal control
- 16 <u>responsibilities of the insurer's board of directors, including a</u>
- 17 statement that the insurer's senior management or officers have
- 18 approved and implemented, and continue to maintain and monitor,
- 19 corporate governance and internal control procedures; and
- 20 (13) any other information that the commissioner
- 21 requires by rule.
- 22 (c-1) On request of the commissioner, an insurer shall
- 23 include with the statement a copy of all financial statements for
- 24 the insurance holding company system, including annual audited
- 25 financial statements filed with the United States Securities and
- 26 Exchange Commission pursuant to the Securities Act of 1933 (15
- 27 U.S.C. Section 77a et seq.) or the Securities Act of 1934 (15 U.S.C.

- 1 Section 78a et seq.). An insurer required by the commissioner to
- 2 submit financial statements under this subsection may satisfy the
- 3 requirement by submitting to the commissioner the financial
- 4 statements that the insurer's parent corporation most recently
- 5 filed with the Securities and Exchange Commission.
- 6 SECTION 6. Subchapter B, Chapter 823, Insurance Code, is
- 7 amended by adding Section 823.0595 to read as follows:
- 8 Sec. 823.0595. ENTERPRISE RISK REPORT. (a) Except as
- 9 provided by Subsection (d), the ultimate controlling person, as
- 10 defined by Section 823.055, of each insurer required to file an
- 11 annual registration shall file with the registration an annual
- 12 enterprise risk report. The report must, to the best of the
- 13 ultimate controlling person's knowledge, identify the material
- 14 risks within the insurance holding company system that may pose
- 15 enterprise risk to the insurer. The report must be filed with the
- 16 lead state commissioner of the insurance holding company system, as
- 17 determined by the procedures adopted by the National Association of
- 18 Insurance Commissioners.
- 19 (b) The ultimate controlling person of an insurer shall file
- 20 the first enterprise risk report required by this section not later
- 21 <u>than:</u>
- 22 (1) January 1, 2012, if the total direct or assumed
- 23 annual premiums of the insurer were \$5 billion or more on September
- 24 1, 2011;
- 25 (2) January 1, 2013, if the total direct or assumed
- 26 annual premiums of the insurer were more than \$1 billion but less
- 27 than \$5 billion on September 1, 2011;

- 1 (3) January 1, 2014, if the total direct or assumed
- 2 annual premiums of the insurer were more than \$500 million but less
- 3 than \$1 billion on September 1, 2011; or
- 4 (4) January 1, 2015, if the total direct or assumed
- 5 annual premiums of the insurer were \$100 million or more but less
- 6 than \$500 million on September 1, 2011.
- 7 (c) Subsection (b) and this subsection expire January 2,
- 8 2015.
- 9 (d) Except as provided by Subsection (e), the ultimate
- 10 controlling person of an insurer with total direct or assumed
- 11 annual premiums of less than \$100 million is not required to submit
- 12 <u>an enterprise risk report under Subsection (a).</u>
- (e) Regardless of total direct or assumed annual premium,
- 14 the ultimate controlling person of an insurer that is not in
- 15 compliance with applicable risk-based capital standards or that is
- 16 otherwise in hazardous condition, as determined by the
- 17 commissioner, shall file an enterprise risk report required by
- 18 Subsection (a) as directed by the commissioner.
- 19 SECTION 7. Section 823.060, Insurance Code, is amended to
- 20 read as follows:
- Sec. 823.060. VIOLATION OF SUBCHAPTER. The failure to file
- 22 a registration statement or an amendment to a registration
- 23 statement, or an enterprise risk report, within the time specified
- 24 for filing the statement, [or report, as required by
- 25 this subchapter, is a violation of this subchapter.
- SECTION 8. The heading to Section 823.101, Insurance Code,
- 27 is amended to read as follows:

- 1 Sec. 823.101. STANDARDS FOR TRANSACTION <u>WITHIN AN INSURANCE</u>
- 2 HOLDING COMPANY SYSTEM [WITH AFFILIATE].
- 3 SECTION 9. Section 823.101, Insurance Code, is amended by
- 4 amending Subsection (a) and adding Subsection (b-1) to read as
- 5 follows:
- 6 (a) This section applies only to a material transaction
- 7 within an insurance holding company system to which an [between a
- 8 registered insurer and an affiliate of the] insurer subject to a
- 9 registration under Section 843.052 is a party.
- 10 (b-1) An agreement, including an agreement for
- 11 cost-sharing, services, or management, must include all provisions
- 12 required by rule of the commissioner.
- SECTION 10. Section 823.102, Insurance Code, is amended by
- 14 amending Subsection (a) and adding Subsections (d) and (e) to read
- 15 as follows:
- 16 (a) This section applies only to a sale, purchase, exchange,
- 17 loan or other extension of credit, or investment between a domestic
- 18 insurer and any person in the insurer's insurance holding company
- 19 system, including an amendment or modification of an affiliate
- 20 agreement previously filed under this section, that involves more
- 21 than the lesser of 5 percent of the insurer's admitted assets or 25
- 22 percent of the insurer's surplus, as of December 31 of the year
- 23 preceding the year in which the transaction occurs.
- 24 (d) The notice described by Subsection (c) must include:
- 25 (1) the reasons for entering into or changing the
- 26 transaction; and
- 27 (2) the financial impact of the transaction on the

- 1 <u>domestic insurer.</u>
- 2 (e) Not later than the 30th day after the termination of a
- 3 previously filed agreement, the domestic insurer shall give notice
- 4 of the termination to the commissioner.
- 5 SECTION 11. Section 823.103, Insurance Code, is amended by
- 6 amending Subsection (a) and adding Subsections (e) and (f) to read
- 7 as follows:
- 8 (a) This section applies only to:
- 9 (1) a sale, purchase, exchange, loan or other
- 10 extension of credit, or investment between a domestic insurer and
- 11 any person in the insurer's insurance holding company system,
- 12 including an amendment or modification of an affiliate agreement
- 13 previously filed under this section:
- 14 (A) that involves more than the lesser of
- 15 one-half of one percent of the insurer's admitted assets or five
- 16 percent of the insurer's surplus, as of December 31 of the year
- 17 preceding the year in which the transaction occurs; and
- 18 (B) the approval of which is not required under
- 19 Section 823.102;
- 20 (2) a reinsurance agreement, including a reinsurance
- 21 treaty or pooling agreement, or an amendment or modification of an
- 22 <u>agreement previously filed under this section</u>, between a domestic
- 23 insurer and any person in the insurer's holding company system [or a
- 24 modification of such an agreement];
- 25 (3) a rendering of services between a domestic insurer
- 26 and any person in the insurer's holding company system on a regular
- 27 or systematic basis, including a tax-allocation agreement, or an

- 1 amendment or modification of an agreement previously filed under
- 2 this section; or
- 3 (4) any material transaction between a domestic
- 4 insurer and any person in the insurer's holding company system that
- 5 is specified by rule and that the commissioner determines may
- 6 adversely affect the interests of the insurer's policyholders or of
- 7 the public, including an amendment or modification of an agreement
- 8 previously filed under this section.
- 9 (e) The notice described by Subsection (c) must include:
- 10 (1) the reasons for entering into or changing the
- 11 transaction; and
- 12 (2) the financial impact of the transaction on the
- 13 domestic insurer.
- 14 (f) Not later than the 30th day after the termination of a
- 15 previously filed agreement, the domestic insurer shall give notice
- 16 of the termination to the commissioner.
- 17 SECTION 12. Section 823.154, Insurance Code, is amended to
- 18 read as follows:
- 19 Sec. 823.154. REQUIREMENTS FOR ACQUISITION OR EXERCISE OF
- 20 CONTROL OR DIVESTITURE OF DOMESTIC INSURER. (a) Before a person
- 21 who directly or indirectly controls, or after the acquisition would
- 22 directly or indirectly control, a domestic insurer may in any
- 23 manner acquire a voting security of a domestic insurer or before a
- 24 person may otherwise acquire control of a domestic insurer or
- 25 exercise any control over a domestic insurer, or before a person may
- 26 initiate a divestiture of control of a domestic insurer:
- 27 (1) the acquiring person shall file with the

- 1 commissioner a statement that satisfies the requirements of
- 2 Subchapter E; [and]
- 3 (2) the acquisition or divestiture of control must be
- 4 approved by the commissioner in accordance with this subchapter;
- 5 and
- 6 (3) if the person is initiating a divestiture of
- 7 control, the divesting person shall file with the commissioner a
- 8 notice of divestiture on a form adopted by the National Association
- 9 of Insurance Commissioners or adopted by the commissioner by rule.
- 10 (b) The acquiring person or divesting person shall send a
- 11 copy of the statement filed under this section to the domestic
- 12 insurer.
- 13 (c) A statement or notice filed under this section must be
- 14 filed not later than the 60th day before the proposed effective date
- 15 of the acquisition or change of control or divestiture and is
- 16 subject to public inspection at the office of the commissioner.
- 17 (d) Notwithstanding Subsection (a), a divesting person is
- 18 not required to provide the commissioner with notice of divestiture
- 19 required by Subsection (a)(3) if an acquiring person submits the
- 20 statement required by Subsection (a)(1) and that acquisition is
- 21 approved by the commissioner.
- SECTION 13. Section 823.157, Insurance Code, is amended to
- 23 read as follows:
- Sec. 823.157. APPROVAL OF ACQUISITION, CHANGE, OR
- 25 DIVESTITURE OF CONTROL. (a) The commissioner shall approve or deny
- 26 an acquisition, [ex] change, or divestiture of control for which a
- 27 statement or notice is filed under Section 823.154 not later than

- 1 the 60th day after the date the statement required by that section
- 2 is filed. The 60-day period may be waived by the person filing the
- 3 statement or notice required by Section 823.154 and the domestic
- 4 insurer. On the request of either the person filing the statement
- 5 or notice required by Section 823.154, or the domestic insurer, the
- 6 commissioner shall hold a hearing on a denial.
- 7 (b) In considering whether to approve or deny, the
- 8 commissioner shall consider whether:
- 9 (1) immediately on the acquisition, [or] change, or
- 10 <u>divestiture</u> of control the domestic insurer would not be able to
- 11 satisfy the requirements for the issuance of a new certificate of
- 12 authority to write the line or lines of insurance for which the
- 13 insurer holds a certificate of authority;
- 14 (2) the effect of the acquisition, [or] change, or
- 15 divestiture of control would be substantially to lessen competition
- 16 in a line or subclassification lines of insurance in this state or
- 17 tend to create a monopoly in a line or subclassification lines of
- 18 insurance in this state;
- 19 (3) the financial condition of the acquiring person
- 20 may jeopardize the financial stability of the domestic insurer or
- 21 prejudice the interest of the domestic insurer's policyholders;
- 22 (4) the acquiring person has a plan or proposal to
- 23 liquidate the domestic insurer or cause the insurer to declare
- 24 dividends or make distributions, sell any of its assets,
- 25 consolidate or merge with any person, make a material change in its
- 26 business or corporate structure or management, or enter into a
- 27 material agreement, arrangement, or transaction of any kind with

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- 1 any person, and that the plan or proposal is unfair, prejudicial,
- 2 hazardous, or unreasonable to the insurer's policyholders and not
- 3 in the public interest;
- 4 (5) due to a lack of competence, trustworthiness,
- 5 experience, and integrity of the persons who would control the
- 6 operation of the domestic insurer, the acquisition or change of
- 7 control would not be in the interest of the insurer's policyholders
- 8 and the public;
- 9 (5-a) the divestiture of control may jeopardize the
- 10 financial stability of the domestic insurer or prejudice the
- 11 interest of the domestic insurer's policyholders and other
- 12 claimants; or
- 13 (6) the acquisition  $(\frac{1}{2})$  change  $(\frac{1}{2})$  or divestiture of
- 14 control would violate the law of this or another state or the United
- 15 States.
- 16 (c) If a proposed acquisition, change, or divestiture of
- 17 control will require the approval of more than one commissioner,
- 18 the commissioner may participate in a public hearing referred to in
- 19 this chapter held on a consolidated basis on request of the person
- 20 filing the statement required by Section 823.154. The person
- 21 filing the statement under Section 823.154 shall file the statement
- 22 with the National Association of Insurance Commissioners within
- 23 five days of making the request for a public hearing. A hearing
- 24 conducted on a consolidated basis shall be public and shall be held
- 25 <u>within the United States before the commissioners of the states in</u>
- 26 which the insurers are domiciled. The commissioners shall hear and
- 27 receive evidence at the hearing. The commissioner may attend the

- 1 hearing in person or by telecommunication.
- 2 (d) This section does not require the commissioner to hold a
- 3 hearing before approving or denying an acquisition, change, or
- 4 divestiture of control.
- 5 SECTION 14. Section 823.201, Insurance Code, is amended by
- 6 adding Subsections (d) and (e) to read as follows:
- 7 (d) If the acquiring person is also the ultimate controlling
- 8 person, the acquiring person shall agree to provide the annual
- 9 enterprise risk report required by Section 823.0595 for as long as
- 10 the acquiring person maintains control of the insurer.
- 11 (e) The acquiring person and all subsidiaries within the
- 12 insurer's control in the insurance holding company system shall
- 13 provide information to the commissioner on request of the
- 14 commissioner as the commissioner deems necessary to evaluate
- 15 enterprise risk to the insurer.
- SECTION 15. Section 823.205, Insurance Code, is amended by
- 17 adding Subsection (c) to read as follows:
- 18 (c) An insurer required to file information under Section
- 19 823.154 may satisfy the requirement of Section 823.052(c-1) by
- 20 providing the commissioner with the most recently filed parent
- 21 corporation reports that have been filed with the United States
- 22 Securities and Exchange Commission, if required by the
- 23 commissioner.
- SECTION 16. Section 823.351, Insurance Code, is amended by
- 25 amending Subsections (a) and (b) and adding Subsections (a-1),
- 26 (a-2), and (b-1) to read as follows:
- 27 (a) Subject to Section 823.352, the commissioner may

- examine [order] an insurer registered under Subchapter B and its

  affiliates [to produce records, books, or other information papers

  in the possession of the insurer or an affiliate of the insurer that

  are necessary] to ascertain the financial condition or legality of

  conduct of the insurer, including the enterprise risk to the

  insurer by the ultimate controlling party, or by any entity or

  combination of entities within the insurance holding company
- 9 consolidated basis.

  10 (a-1) The commissioner may order an insurer registered

  11 under Subchapter B to produce records, books, or other information

  12 in the possession of the insurer or its affiliates as are reasonably

  13 necessary to determine compliance with this chapter.

system, or by the insurance holding company system on a

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- 14 (a-2) To determine compliance with this chapter, the 15 commissioner may order any insurer registered under Subchapter B to produce information not in the possession of the insurer if the 16 17 insurer can obtain access to the information pursuant to contractual relationships, statutory obligations, or other 18 19 methods. In the event that the insurer is unable to obtain the information requested by the commissioner, the insurer shall 20 provide the commissioner with a detailed explanation of the reason 21 22 why the insurer is unable to obtain the information, and the identity of the holder of information. If it appears to the 23 commissioner that the insurer's explanation is without merit, the 24 commissioner may after notice and hearing: 25
- 26 <u>(1) require the insurer to pay a penalty of not less</u>
  27 than \$100 for each day the insurer delays producing the

## 1 <u>information; or</u>

- 2 (2) suspend or revoke the insurer's license.
- 3 (b) If an insurer fails to comply with an order under this
- 4 section [Subsection (a)], the commissioner by order may require the
- 5 examination of each holding company of the insurer and each
- 6 controlled person or affiliate in the insurer's insurance holding
- 7 company system if the commissioner has cause to believe that:
- 8 (1) the operations of that person may materially
- 9 affect the operations, management, or financial condition of any
- 10 controlled insurer in that system; and
- 11 (2) the commissioner is unable to obtain relevant
- 12 information from the controlled insurer.
- 13 <u>(b-1)</u> The commissioner may issue subpoenas, administer
- 14 oaths, and examine under oath any person for purposes of
- 15 determining compliance with this section. On the failure or
- 16 refusal of a person to obey a subpoena, the commissioner may
- 17 petition a court of competent jurisdiction, and on proper showing,
- 18 the court may enter an order compelling the witness to appear and
- 19 testify or produce documentary evidence. Failure to obey the court
- 20 order is punishable as contempt of court. A person shall attend as
- 21 a witness at the place specified in the subpoena, when subpoenaed,
- 22 at any location in this state. The person is entitled to the same
- 23 fees and mileage, if claimed, as a witness in district court. Fees,
- 24 mileage, and actual expenses necessarily incurred in securing the
- 25 attendance of a witness shall be itemized and charged against, and
- 26 be paid by, the insurer being examined.
- 27 SECTION 17. Section 823.452, Insurance Code, is amended by

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- 1 adding Subsection (a-1) to read as follows:
- 2 (a-1) If it appears to the commissioner that a person has
- 3 committed a violation of Subchapter D that prevents the full
- 4 understanding of the enterprise risk to the insurer by affiliates
- 5 or by the insurance holding company system, the violation may serve
- 6 as an independent basis for disapproving dividends or distributions
- 7 and for issuing an order under Chapter 404 or Chapter 441.
- 8 SECTION 18. This Act takes effect September 1, 2011.