

Article - Insurance

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§11-314.

(a) Each rating organization and each insurer subject to this subtitle that makes its own rates shall provide reasonable means within the State by which a person aggrieved by the application of its rating system may be heard in person or by an authorized representative on the person's written request to review the manner in which the rating system has been applied in connection with the insurance afforded the aggrieved person.

(b) If the rating organization or insurer fails to grant or reject the aggrieved person's request within 30 days after it is made, the applicant may proceed as if the application had been rejected.

(c) (1) Within 30 days after written notice of the action of a rating organization or insurer on a request for review, any party affected by the action may apply, in writing, for an appeal to the Commissioner.

(2) An application under this subsection shall set forth the basis for the appeal and the grounds on which the applicant will rely.

(d) (1) The Commissioner shall review the application for appeal.

(2) If the Commissioner finds that the application is made in good faith and sets forth on its face grounds that reasonably justify a hearing, the Commissioner shall hold a hearing.

(3) The Commissioner shall give written notice of the hearing to the applicant and rating organization or insurer at least 10 days before the hearing.

(4) After the hearing, the Commissioner shall affirm or reverse the action.

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