SENATE BILL 812

C42lr2441CF HB 1097 By: Senator Astle Introduced and read first time: February 3, 2012 Assigned to: Finance Committee Report: Favorable with amendments Senate action: Adopted Read second time: March 16, 2012 CHAPTER AN ACT concerning Insurance – Suspected Fraud – Reporting Requirement Liability for Reporting or for Furnishing or Receiving Information FOR the purpose of altering the list of persons that are required to report suspected insurance fraud to certain persons and entities in a certain manner under certain circumstances; authorizing the withholding of certain information provided by certain persons to whom a person may report suspected insurance fraud and not be subject to civil liability; providing that a person is not subject to civil liability for furnishing or receiving information relating to suspected, anticipated, or completed fraudulent insurance acts under circumstances; making stylistic changes; and generally relating to required reporting of suspected insurance fraud. BY repealing and reenacting, with amendments, Article – Insurance Section 27–802 Annotated Code of Maryland (2011 Replacement Volume) SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

1

2

3

4

5 6

7

8 9

10 11

12

13

14

15

16

17

18 19

20

21

27 - 802.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.

Article - Insurance



31 32

33

1	(a) THIS SECTION APPLIES TO:												
2 3	(1) {An} authorized {insurer, its} INSURERS AND THEIR employees{,};												
4	(2) fund producers [,] AND insurance producers [, a];												
5	(3) viatical settlement { provider, or a } PROVIDERS;												
6 7 8 9	that insurance fraud has been or is being committed shall report the suspected insurance fraud in writing to the Commissioner, the Fraud Division, or the												
10 11 12	[(2)] (5) [An] independent insurance [producer shall meet the reporting requirement of this subsection by reporting the suspected insurance fraud in writing to the Fraud Division.] PRODUCERS ;												
13 14 15	• (3) (6) • (A) registered premium finance (company shall meet the requirement of this subsection by reporting suspected insurance fraud in writing to the Fraud Division. (COMPANIES AND THEIR EMPLOYEES;												
16 17	(7) THE NATIONAL ASSOCIATION OF INSURANCE COMMISSIONERS AND ITS EMPLOYEES;												
18 19 20	(8) ORGANIZATIONS ESTABLISHED TO DETECT AND PREVENT FRAUDULENT INSURANCE ACTS AND THE AGENTS, EMPLOYEES, AND DESIGNEES OF THE ORGANIZATIONS; AND												
21 22 23	(9) PROVIDERS OF A RECOGNIZED COMPREHENSIVE DATABASE SYSTEM APPROVED BY THE COMMISSIONER TO MONITOR ACTIVITIES INVOLVING INSURANCE FRAUD AND THE EMPLOYEES OF THE PROVIDERS.												
24 25 26 27 28	(B) IF A PERSON SUBJECT TO THIS SECTION HAS CAUSE TO BELIEVE IN GOOD FAITH THAT INSURANCE FRAUD HAS BEEN OR IS BEING COMMITTED, THE PERSON SHALL REPORT THE SUSPECTED INSURANCE FRAUD IN WRITING TO THE COMMISSIONER, THE FRAUD DIVISION, OR THE APPROPRIATE FEDERAL, STATE, OR LOCAL LAW ENFORCEMENT AUTHORITY.												
29 30	إ (b) ∤ (€) In addition to any protection provided under § 10–618 of the State Government Article, any information, documentation, or other evidence provided												

under this section Hoy an insurer, its employees, fund producers, or insurance

producers, a viatical settlement provider, a viatical settlement broker, an independent insurance producer, or a registered premium finance company to the Commissioner,

1	the	Fraud	Division,	or a	federal,	State,	or	local	law	enforcemen	t author	ity	in
2	conr	nection	with an ii	nvestig	gation of	suspecte	d ir	nsuran	ce fr	aud is not s	ubject to	pub	lic

- 3 inspection for as long as the Commissioner, Fraud Division, or law enforcement
- 4 authority considers the withholding to be necessary to complete an investigation of the
- 5 suspected fraud or to protect the person investigated from unwarranted injury.
- 10 (1) the report was made <u>OR THE INFORMATION WAS FURNISHED</u> to 11 OR RECEIVED FROM:
- 12 (I) the Commissioner, Fraud Division, or an appropriate 13 federal, State, or local law enforcement authority;
- 14 (II) THE NATIONAL ASSOCIATION OF INSURANCE
 15 COMMISSIONERS OR ITS AGENT, EMPLOYEE, OR DESIGNEE;
- 16 <u>(III) A NOT-FOR-PROFIT ORGANIZATION ESTABLISHED TO</u> 17 <u>DETECT AND PREVENT FRAUDULENT INSURANCE ACTS OR ITS AGENT,</u>
- 18 EMPLOYEE, OR DESIGNEE;
- 19 <u>(IV) A PERSON THAT CONTRACTS TO PROVIDE SPECIAL</u> 20 INVESTIGATIVE UNIT SERVICES TO AN INSURER; OR
- 21 <u>(V) A PROVIDER OF A RECOGNIZED COMPREHENSIVE</u>
 22 <u>DATABASE SYSTEM THAT THE COMMISSIONER APPROVES TO MONITOR</u>
 23 <u>ACTIVITIES INVOLVING INSURANCE FRAUD OR AN EMPLOYEE OF THE</u>
 24 **PROVIDER;** and
- 25 (2) the person that reported the suspected insurance fraud, <u>OR</u>
 26 <u>FURNISHED OR RECEIVED THE INFORMATION</u>, acted in good faith when making
 27 the report **OR FURNISHING OR RECEIVING THE INFORMATION**.
- SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2012.