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A bill for an act

the reporting of loss experience data; amending Minnesota Statutes 2008, section

relating to commerce; regulating insurance industry trade practices; regulating

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State of Minnesota HOUSE OF REPRESENTATIVES

EIGHTY-SIXTH SESSION

House File no. 1908

March 19, 2009

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Authored by Zellers

The bill was read for the first time and referred to the Committee on Commerce and Labor

1.4	72A.20, subdivision 26.
1.5	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.6	Section 1. Minnesota Statutes 2008, section 72A.20, subdivision 26, is amended to
1.7	read:
1.8	Subd. 26. Loss experience. An insurer shall without cost to the insured provide an
1.9	insured with the loss or claims experience of that insured for the current policy period and
1.10	for the two policy periods preceding the current one for which the insurer has provided
1.11	coverage, within 30 days of a request for the information by the policyholder. Whenever
1.12	reporting loss experience data, actual claims paid on behalf of the insured must be reported
1.13	separately from claims incurred but not paid, pooling charges for catastrophic claim
1.14	protection, and any other administrative fees or charges that may be charged as an incurred
1.15	claim expense. Claims experience data must be provided to the insured in accordance with
1.16	state and federal requirements regarding the confidentiality of medical data. The insurer
1.17	shall not be responsible for providing information without cost more often than once in
1.18	a 12-month period. The insurer is not required to provide the information if the policy
1.19	covers the employee of more than one employer and the information is not maintained
1.20	separately for each employer and not all employers request the data.
1.21	An insurer, health maintenance organization, or a third-party administrator may not
1.22	request more than three years of loss or claims experience as a condition of submitting an
1.23	application or providing coverage.

This subdivision only applies to group life policies and group health policies.

Section 1.