

CR 87-118

RECEIVED

STATE OF WISCONSIN)
OFFICE OF THE COMMISSIONER OF INSURANCE)

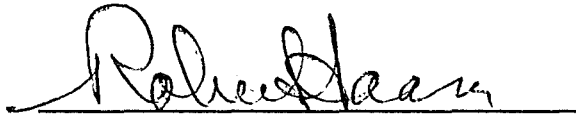
NOV 24 1987
9:00 am
Revisor of Statutes
Bureau

TO ALL TO WHOM THESE PRESENTS SHALL COME, GREETINGS:

I, Robert D. Haase, Commissioner of Insurance and custodian of the official records of said office, do hereby certify that the annexed order repealing and recreating rules relating to the filing of insurance forms was issued by this office on November 23, 1987.

I further certify that said copy has been compared by me with the original on file in this office and that the same is a true copy thereof, and of the whole of such original.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name in the City of Madison, State of Wisconsin, this 23rd day of November, 1987.



Robert D. Haase
Commissioner of Insurance

9478K-2

STATE OF WISCONSIN
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NOV 23 1987

DOUGLAS LA FOLLETTE
SECRETARY OF STATE

1-1-88

ORDER OF THE COMMISSIONER OF INSURANCE

The Wisconsin Office of the Commissioner of Insurance proposes an order to repeal Ins 3.12 and Ins 9; and to repeal and recreate Ins 6.05 relating to the filing of insurance forms.

ANALYSIS PREPARED BY THE COMMISSIONER OF INSURANCE

Statutory authority: ss. 601.41 (3) and 601.42.

Statutes interpreted: ss. 631.20, 631.22 and 631.61, Stats.

The purpose of this rule is to revise the procedures for filing disability and property and casualty insurance policy forms. Currently there is a rule for disability forms and a rule for property and casualty forms. These rules are being combined. The procedures for filing forms are being modified to simplify data entry and recordkeeping for the forms data base which is being developed. The filing procedures will be identical for all lines of insurance and will ensure that all insurers are treated similarly.

SECTION 1.

Ins 3.12 is repealed.

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SECTION 2.

Ins 6.05 is repealed and recreated to read:

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DOUGLAS LA FOLLETTE
SECRETARY OF STATE

Ins 6.05 FILING OF INSURANCE FORMS.

(1) PURPOSE. This section interprets and implements ss. 601.42, 631.20, 631.22 and 631.61, Stats.

(2) SCOPE. The requirements of this section shall apply to forms subject to s. 631.01, Stats., for the lines of insurance listed in s. Ins 6.75, except sub. (2) (b) and (k).

(3) DEFINITIONS. (a) "Affiliated insurer" means an insurer which is a member or subscriber to a rate service organization licensed under s. 625.32, Stats., and which has authorized the rate service organization to file forms on its behalf.

(b) "Certificate of compliance" means a document in substantially identical format to Appendix A which is signed by an officer of the insurer.

(c) "Certificate of readability" means a written statement signed by an officer of the insurer stating that the form is subject to s. Ins 6.07 and that the form meets the minimum standards set forth in that section.

(d) "Insurance policy form transmittal" means a document substantially identical in format to the form included as Appendix B, on which an insurer shall list each form submitted for approval.

(e) "OCI" means the office of the commissioner of insurance.

(f) "Submission" means any request received by the office of the commissioner of insurance for approval of a single form or combination of forms.

(4) FILING PROCEDURE. (a) Each submission of forms shall include the following:

1. A properly completed insurance policy form transmittal;
2. A properly completed certificate of compliance in substantially identical format as in Appendix A;
3. A properly completed certificate of readability, if the forms are consumer insurance policies subject to s. Ins 6.07;
4. A filing letter in duplicate which contains the following information:
 - a. In the case of a form which alters a previously approved form, a description of the change;

b. The form number and approval date of any form superseded by the new form;

5. One copy of each form in final printed format or typed facsimile exactly as it will be offered for issuance or delivery in the state of Wisconsin except for hypothetical data and other appropriate variable material;

6. A second copy of each form, if the insurer requires an OCI stamped copy for its records;

7. A copy of the previously approved form clearly marked "for reference only" if the current form is to supersede the previously approved form; and

8. A self-addressed return envelope of sufficient size to return one copy of the materials in subd. 4. and 6 to the insurer.

(b) A submission filed by a rate service organization will be considered as filed on behalf of all affiliated insurers.

(5) ANNUAL LISTINGS - PROPERTY AND CASUALTY ONLY

(a) In 1988, each insurer shall submit a list of all forms approved in Wisconsin which provide coverage for any of the lines or classes of insurance listed in s. Ins 6.75 (2) (a), (d) to (j), and (l) to (n). In 1989 and subsequent years each insurer shall submit annually a list of all forms approved since the previous annual listing and a list of all forms superseded or withdrawn since the previous listing.

(b) Insurer groups must submit the annual listing for each insurer in the group.

(c) Annual filings of lists are due during the month shown opposite the first letter of the company name in the following schedule:

A	February	M	July
B-C	March	N-O	August
D-F	April	P-R	September
G-H	May	S-T	October
I-L	June	U-Z	November

(6) INSURER RECORDS. Each insurer shall maintain a file of all forms approved for use in Wisconsin until all exposure on the risks insured against has terminated. The file is subject to examination and the commissioner may request that any portion of the file be available for review within ten days of a written request.

(7) DISAPPROVAL. The commissioner shall disapprove without further review any filing which does not include all of the items in sub. (4).


(8) PENALTY. Insurers violating the provisions of this rule by using unapproved forms shall be subject to the penalties in s. 601.64, Stats. Each form issued to an individual policyholder shall constitute a separate violation.

SECTION 3.

Ins 9.01 is repealed.

EFFECTIVE DATE. This rule shall take effect on January 1, 1988.

Dated at Madison, Wisconsin, this 23rd day of November, 1987.



 Robert D. Haase
 Commissioner of Insurance

APPENDIX A

CERTIFICATE OF COMPLIANCE

I, _____ (name), an officer
of _____ (company name), hereby certify that I have
authority to bind and obligate the company by filing this (these) form(s). I
further certify that, to the best of my information, knowledge and belief:

1. The accompanying form(s) as identified by the attached listing
comply(ies) with all applicable provisions of the Wisconsin Statutes and with
all applicable administrative rules of the Commissioner of Insurance;

2. The form(s) does (do) not contain any inconsistent, ambiguous, or
misleading clauses;

3. The form(s) does (do) not contain specifications or conditions
that unreasonably or deceptively limit the risk purported to be assumed in the
general coverage of the policy form(s);

4. The only variations from a form currently on file with the
commissioner of insurance and the only unconventional policy provisions are
clearly marked or otherwise indicated on pages _____ of the attached
form(s) or in an attachment; and

5. The attached form(s) is (are) in final printed format or camera
ready copy and is (are) as will be offered for issuance or delivery in
Wisconsin after approval by the Commissioner of Insurance, except for
hypothetical data and other appropriate variable material.

(signature)

(title)

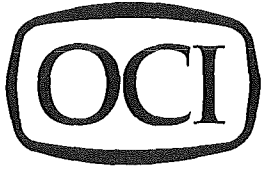
(date)

Individual responsible for this filing:

Name: _____ Title: _____

Address: _____

Phone Number: _____ Date: _____



The State of Wisconsin
Office of the Commissioner of Insurance

Robert D. Haase
Commissioner
(608) 266-3585

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NOV 24 1987

Revisor of Statutes
Bureau

DATE: November 23, 1987
TO: Gary Poulson
FROM: Fred Nepple, General Counsel
Office of the Commissioner of Insurance
SUBJECT: Ins 6.05, Clearinghouse No. 87-118

Enclosed are two copies of an Order of the Commissioner of Insurance repealing and recreating rules Ins 6.05 relating to the filing of insurance forms.

FN:LH:imk
Enclosure
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