

2003

## 2003 Legislative Summary

Assembly Committee on Insurance

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CALIFORNIA STATE LEGISLATURE  
ASSEMBLY COMMITTEE ON INSURANCE

2003  
LEGISLATIVE SUMMARY

JUAN VARGAS, CHAIR

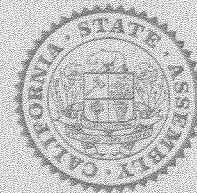
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**Staff:**

Michael S. Mattoch, Chief Consultant  
Christine Ebbink, Consultant  
Chris Clay, Consultant  
Tracy Ainsworth Elwell, Committee Secretary

KFC  
290  
.A24  
2003

STATE CAPITOL  
P.O. BOX 942849  
SACRAMENTO, CA 94249-0106  
Phone (916) 319-2086  
Facsimile (916) 319-2186  
**CHIEF CONSULTANT**  
Michael S. Mattoch  
**CONSULTANTS**  
Christine Ebbink  
Chris Clay  
**COMMITTEE SECRETARY**  
Tracy Ainsworth Elwell

Assembly  
California Legislature  
Committee on Insurance  
JUAN VARGAS  
CHAIR

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October 20, 2003

To All Interested Parties:

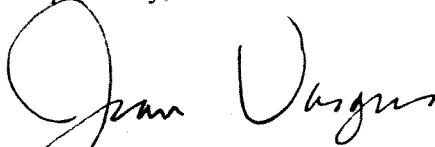
The following summary of legislation lists all of the bills that came before the Assembly Insurance Committee during the 2003 legislative year. Each is organized in numerical order and indicates the results for each bill. The summary of each bill is not intended as a definitive or comprehensive statement of the provisions of the bill. Rather, it is intended to provide general information to the reader of the subject that the bill addresses. For more detailed information about any bill, please go to the Assembly's web page at [www.assembly.ca.gov](http://www.assembly.ca.gov) and click on "Legislation."

In addition to policy hearings on insurance legislation, the Assembly Insurance Committee's primary area of concern was to enact comprehensive reforms in the workers' compensation system. The Committee and the Senate Labor and Industrial Relations Committee sent 20 workers' compensation bills to conference committee for debate and discussion.

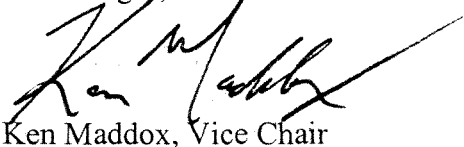
The Committee also addressed the important issue of financial privacy by holding an informational hearing on the Gramm-Leach-Bliley Act and issues relating to the collection and sharing of confidential consumer information by the insurance industry, as well as continuing its oversight of the Department of Insurance, the State Compensation Insurance Fund, and the California Insurance Guaranty Association.

For additional information regarding this summary or other activities of the committee, please contact the committee staff at (916) 319-2086.

Respectfully,



Juan Vargas, Chair



Ken Maddox, Vice Chair

# ASSEMBLY INSURANCE COMMITTEE

2003

## Legislative Summary

AB 149 (Cohn) *[Chapter 831 / 2003]*  
Extends the statute of limitations for claims for workers' compensation death benefits in the case of firefighters whose death results from asbestosis.

AB 226 (Vargas) *[Chapter 328 / 2003]*  
Prohibits an insurer from issuing or delivering corporate-owned life insurance (COLI) policies.

AB 227 (Vargas) *[Chapter 635 / 2003]*  
Requires the Administrative Director of the Division of Workers' Compensation in the Department of Industrial Relations to adopt an interim outpatient surgery facility fee schedule using data that meets specified criteria pending development of a fee schedule as required by AB 749 (Calderon), Chapter 6, Statutes of 2002.

AB 284 (Chavez) *[Chapter 381 / 2003]*  
Requires that certain annuity contracts provide for paid-up annuity benefits upon written request of the contract owner. Eliminates the requirement that a company reserve the right to defer cash surrender benefit for six months, but allows the company to reserve that right after receiving written approval of the Insurance Commissioner.

AB 331 (Kehoe and Koretz) *[Vetoed]*  
Waives the one-week waiting period for UI benefits when an individual's unemployment is due to an unforeseen lockout.

AB 444 (Vargas) *[Chapter 352 / 2003]*  
Authorizes the Insurance Commissioner to issue bulletins, providing for approval on one or more expedited bases, of policies, contracts, or agreements, guaranteed by an admitted life insurers, and filed with the Insurance Commissioner.

AB 794 (Frommer) *[Chapter 310 / 2003]*  
Requires the Department of Insurance remove from its Web site any order or pleading or restricted license regarding specified licenses 10 years from the date the disciplinary or enforcement action becomes final, or the restriction is removed.

AB 943 (Chavez) *[Chapter 392 / 2003]*  
Requires that provisional contributions to each mortgage guaranty insurer to establish contingency reserve, in specified amounts, be made on a quarterly basis and would change the way the required contributions are calculated. It would require the commissioner's approval to make withdrawals from the reserve when incurred losses exceed 35% of the total year-to-date net earned premium.

AB 978 (Negrete McLeod) *[Chapter 841 / 2003]*  
Requires the California State University Trustees to become employers whose employees are eligible for payment of disability benefits from the Unemployment Compensation Disability Fund. Provides that eligibility for disability benefits could occur as a result of an election held by a recognized employee organization as well as through a negotiated agreement.

AB 984 (Vargas) *[Chapter 439 / 2003]*  
Defines "vehicle service contract" and provides that this type of contract does not constitute automobile insurance if it meets specified requirements and requires an obligor (one who is financially responsible for the performance of a contract) under a vehicle service contract who is not a seller to possess a vehicle service contract provider license

AB 996 (Wiggins) *[Chapter 647 / 2003]*  
Extends to reproductive health services facilities the prohibition on insurers from canceling or refusing to renew a property insurance policy because the facility has been the victim of a hate crime. Expands this existing prohibition to also include anti-reproductive-rights crimes committed against reproductive health services facilities.

AB 1005 (Dutra) *[Chapter 440 / 2003]*  
Allows title insurers to lower prices for title insurance within a given county immediately after filing the rates with the Department of Insurance.

AB 1048 (Calderon) *[Chapter 144 / 2003]*  
Changes the California Earthquake Authority (CEA) statute by revising the definition of available capital. Excludes unearned premiums and the proceeds of bonds issued by or in the name of the CEA from the definition of available capital. Creates a definition of "unearned premium reserve" and requires assets equal to the unearned premium reserve to be retained until the policyholder claims and liabilities have been paid.

AB 1049 (Calderon) *[Chapter 442 / 2003]*  
Prohibits insurers from basing adverse underwriting decisions on any indication obtained from a loss underwriting database upon specified conditions.

AB 1083 (Cogdill) *[Chapter 115 / 2003]*  
Prohibits an insurer from issuing a policy to an applicant that insures the life of the applicant's spouse unless the spouse has signed the policy application or has otherwise been notified in advance of the issuance of the policy. Applies to life insurance policies with face amounts exceeding \$50,000 that are issued on or after July 1, 2004.

AB 1099 (Negrete McLeod) *[Chapter 636 / 2003]*  
Includes the Employment Development Department among the agencies authorized to request and receive information regarding workers' compensation fraud.

AB 1181 (Ridley-Thomas) *[Chapter 360 / 2003]*  
Requires specified information used in determining the premium that was charged for an automobile insurance policy to be provided to the policyholder at the time of application for an auto insurance policy and in each renewal notice.

AB 1191 (Wiggins) *[Chapter 571 / 2003]*  
Requires insurers to provide policyholders with the reasons for the nonrenewal of their homeowner's insurance policies and requires insurers to provide policyholders, upon request, with the reasons for the change in their annual premium.

AB 1252 (Jackson) *[Chapter 217 / 2003]*  
Makes several technical changes to conform state law to the federal Gramm-Leach-Bliley Act. Renames various continuing education requirements for long-term care insurance agents, adds "territory of the United States" to the list of non-resident jurisdictions, and repeals a provision of current law regarding reinsurance intermediaries not allowed under federal law.

AB 1262 (Matthews) *[Chapter 637 / 2003]*  
Requires insurers to certify that their claims adjusters meet minimum standards. Requires the Department of Insurance to adopt applicable regulations setting forth those standards.

AB 1274 (Chavez) *[Chapter 88 / 2003]*  
Clarifies current law to distinguish between risk-based motor clubs, such as the American Automobile Association and non-risk-based motor clubs that provide only maps and discount coupons. The latter category of motor clubs is not subject to regulation by the Insurance Commissioner of the Department of Insurance

AB 1430 (Shirley Horton) *[Chapter 183 / 2003]*  
Increases the amount of calendar year earnings that an election poll worker may reasonably expect to earn in order to be exempt from unemployment insurance benefits from \$200 to \$1,000.

AB 1598 (Corbett) *[Chapter 448 / 2003]*  
Extends the sunset date for the Earthquake Grant and Loan Program and increases the amount of money appropriated to the Program.

AB 1600 (Nakano) *[Chapter 166 / 2003]*  
Extends the period of time that life and disability insurers must maintain records relating to the activities of their agents, authorizes the Insurance Commissioner (IC) to collect and report data relating to life and disability insurance, and establishes civil penalties for failure to comply with the IC's request for information.

AB 1727 (Committee on Insurance) *[Chapter 148 / 2003]*  
Requires homeowners and residential property or liability insurers to give a 20-day written advance notice of cancellation, except in the case of non-payment of premiums, or for fraud, in which case a 10-day advance written notice of cancellation is required.



## ASSEMBLY INSURANCE COMMITTEE'S 2001-2002 SENATE BILLS

SB 125 (Chesbro)

*[ Vetoed]*

Extends the leave-of-absence in lieu of temporary disability benefits for injured public safety employees ("4850 time") to injured county welfare fraud investigators or inspectors, who are peace officers as specified in the Penal Code, and a coroner and deputy coroner.

SB 176 (Johnson)

*[Chapter 121 / 2003]*

Requires workers compensation insurance rating organizations to provide written notification to policyholders when the rating organization imposes a change in the policyholder's classification assignment.

SB 200 (Murray)

*[Chapter 408 / 2003]*

Prohibits, until January 1, 2008, long-term care insurers from using genetic testing to determine insurability or for underwriting purposes.

SB 228 (Alarcon)

*[Chapter 639 / 2003]*

Creates an outpatient-facility fee schedule, not to exceed 120% of Medicare; creates a pharmaceutical and pharmacy services fee schedule, not to exceed 100% of Medi-Cal; updates the official medical fee schedule for hospital inpatient and provider services, not to exceed 120% of Medicare; reduces the prompt payment requirement from 60 days to 45 days for payments to providers; and, requires implementation of a medical billing fraud referral protocol between the Department of Industrial Relations, the Department of Insurance and the Department of Justice.

SB 551 (Speier)

*[Chapter 791 / 2003]*

Codifies existing regulatory law and prohibits an insurer from requiring that an automobile be repaired at a specific automotive repair dealer.

SB 618 (Scott)

*[Chapter 546 / 2003]*

Authorizes the Insurance Commissioner to suspend or revoke an insurer's license under specified circumstances.

SB 620 (Scott)

*[Chapter 547 / 2003]*

Increases the restrictions on the marketing of life insurance and annuities to senior citizens. Creates new training requirements for insurance agents and brokers, requires additional disclosures for life insurance and annuity products, and imposes restrictions on the sale of life insurance and annuities in the home of a senior.

SB 686 (Ortiz)

*[Chapter 899 / 2003]*

Requires an insurer issuing liability insurance policies to long-term health care facilities, residential care facilities for the elderly, or physicians who provide services to residents in those facilities to notify the Department of Insurance (DOI) at least 90 days prior to the date it intends to cease offering liability insurance to those facilities or physicians; requires insurers to report specified information regarding those policies to DOI; allows the Insurance Commissioner to authorize the formation of a market assistance program to assist in securing liability insurance and to order the creation of a joint underwriting association.

SB 727 (Kuehl) [Chapter 797 / 2003]  
Provides conforming, clarifying, and technical changes to the recently enacted family temporary disability insurance program.

SB 841 (Perata) [Chapter 169 / 2003]  
Authorizes an insurer to use persistency of automobile insurance coverage as an optional rating factor in determining rates and premiums.

SB 1007 (Speier) [Chapter 641 / 2003]  
Expands the definition of "common trade or business" for the purposes of association or trade group workers' compensation insurance policies to include manufacturing facilities as identified in the North American Industry Classification System.

**BILLS NOT SENT TO THE GOVERNOR:**

The following bills, if enacted, would:

AB 81 (Wyland)  
Prohibit insurers from declining to offer insurance based upon an inquiry about the scope or nature of coverage under a policy, if that policy was made known to the insurer by a specified database supplying information to insurers, and the inquiry did not result in the filing of a claim. *In Senate Appropriations.*

AB 87 (Bogh)  
Establish the Workers' Compensation for Disaster Service Workers Fund which would be continuously appropriated to provide payments to volunteer disaster service workers who are injured while performing volunteer duties. *In Assembly Appropriations.*

AB 136 (Kehoe)  
Expand the scope and duration of "4850" (disability-related) benefits paid to certain police officers, sheriffs and firefighters. Specifically, this bill significantly expands the number of public safety professionals who receive these benefits and also expands the maximum duration of these benefits from one to two years. *In Assembly Appropriations.*

AB 237 (Bermudez)  
Require the Employment Development Department to conduct a study of its process of granting unemployment insurance benefits to temporary employees of the community colleges and to report the findings to the Legislature by January 1, 2005. *In Assembly Appropriations.*

AB 412 (Chan)  
Require the Insurance Commissioner to convene a task force and on-going work group on insurance fraud as it relates to senior citizens. *In Assembly Appropriations.*

AB 431 (Mountjoy)  
Require courts to liberally construe workers' compensation laws only after a determination that an injury is specific and results in serious physical or bodily harm; require an employee to prove,



by a preponderance of evidence, that a cumulative injury was substantially caused by actual activities of employment. *In Assembly Insurance.*

AB 456 (Mullin)

Require every driver and every owner of a motor vehicle at all times to be able to establish financial responsibility. *In Assembly Insurance.*

AB 595 (Dutton)

Give the Administrative Director of the Division of Workers' Compensation in the Department of Industrial Relations the sole authority to develop a durable medical equipment fee schedule. *In Assembly Insurance.*

AB 596 (Dutton)

Require the pharmaceutical fee schedule to apply to all medicines and medical supplies dispensed or prescribed regardless of whether these medicines or medical supplies are dispensed or prescribed by a physician, pharmacist, or by another source. *In Assembly Insurance.*

AB 597 (Dutton)

Require the Administrative Director of the Division of Workers' Compensation in the Department of Industrial Relations to adopt an outpatient surgery facility fee schedule on or before July 1, 2004. *In Assembly Insurance.*

AB 606 (Liu)

Require the Director of the Department of Industrial Relations, or his or her designee, and the Governor's Advocate for Small Business to meet at least two times annually with employees and representatives of small business, solely on issues related to California's workers' compensation system. *In Senate Labor and Industrial Relations.*

AB 631 (Koretz)

Define "automobile medical payments insurance" and require specific forms of policy language and certain disclosures to be included in contracts for versions of automobile insurance. Require insurers to provide 60 days notice, and other specified conditions prior to changing any provision of an insurance agreement for automobile medical payments insurance. *In Assembly Insurance.*

AB 700 (Diaz)

Provide that an insurer with a certificate of authority to transact the business of financial guarantee insurance may also transact the business surety insurance. *In Assembly Insurance.*

AB 752 (Plescia)

Provide that any endorsement issued by an admitted insurer or nonadmitted insurer and governed by the Insurance Code that names an individual or entity as an additional insured under any insurance policy that is collateral to, or affects, any residential construction contract governed by the legal requirements for actions for constructive defective shall only provide the additionally named insured individual or entity with a defense for those claims arising from or related to the named insured activity. *In Assembly Insurance.*

AB 968 (Correa)

Makes clear that any injury suffered by an employee as a result of a vaccination administered to prevent infection by a biochemical substance or blood-borne infectious disease arises out of and in the course of employment for workers' compensation purposes. *To Workers' Compensation Conference Committee.*

AB 1060 (Lieber)

Prohibit an employer from obtaining a life insurance policy on an employee unless it first obtains the clearly expressed consent of the employee in writing and in the employee's own words and unless it transmits that consent to the insurer. *In Assembly Insurance.*

AB 1087 (Frommer)

Provide that only specified persons shall perform venipuncture or skin puncture for the purpose of gathering information to make underwriting determinations for life, health, or disability insurance. *In Assembly.*

AB 1103 (Laird)

Expand the definition of "insurance settlement" to include viatical settlements, life settlements, senior settlements, or any other type of similar transaction. Require insurance settlement licensees to obtain a written acknowledgement that the policy may be resold to other licensed persons. *In Assembly Insurance.*

AB 1136 (Maddox)

Authorize, under certain conditions, the disclosure of wage information to consumer reporting agencies for the purpose of verifying information provided by an individual in connection with a credit or employment transaction. *In Assembly Insurance.*

AB 1215 (Vargas)

Require the Compensation Insurance Fund, in consultation with the Employment Development Department (EDD), to develop a program that allows insurers offering workers' compensation insurance to have access to quarterly wage and withholding reports filed with EDD for the purpose of confirming payroll reported to the insurer for premium calculations. *To Workers' Compensation Conference Committee.*

AB 1227 (McCarthy)

List the Bureau of Automotive Repair among the agencies authorized to request and receive motor vehicle theft or motor vehicle insurance fraud information from insurers, and provide that it is declarative of existing law. *Rescinded.*

AB 1297 (Frommer)

Create a conclusive presumption that a licensee not appointed as an agent was acting as a broker in transaction involving auto or homeowner's insurance. Require that an insurer be responsible for the acts and omissions of the licensee to the same extent as if the licensee were an agent. Permit substitute service of process on the insurer and require that an insurer pay pursuant to a settlement agreement that the insurer signs, even if an insured does not sign the agreement.

Allow an injured person to request policy limit information from an insurer, and require that brokers retain errors and omissions insurance of not less than \$250,000. *In Senate Insurance.*

AB 1318 (Maddox)

Specify that an insurer is not required to notify the insured of the degree to which the insured was at-fault in an automobile accident. *In Senate Insurance.*

AB 1324 (Steinberg)

Provide that if a person who is a specified state or local firefighting, law enforcement, or patrol member sustains an injury that meets the definition of a blood-borne infectious disease, and a dependent of that person contracts the blood-borne infectious disease from that person, the dependent may elect to receive compensation under the workers' compensation law, for the duration of the disease, for all medically necessary health care costs associated with the disease. *In Senate Judiciary.*

AB 1327 (Wyland)

Provide that only businesses that employ 50 or more individuals within a 75-mile radius of the worksite of the individual requesting leave are subject to the temporary disability insurance work program. Require an employee to work at least 1,250 hours during the 12-month period prior to the period for which the individual is requesting the family temporary disability leave. *In Assembly Insurance.*

AB 1357 (Matthews)

Allow the Governor to appoint members to the board of directors of the State Compensation Insurance Fund who are not policyholders thereof. *In Assembly Appropriations.*

AB 1434 (Wyland)

Authorize private employers and unions in any industry to establish alternative workers' compensation programs, also known as "carve outs," via the collective bargaining process. *In Assembly Insurance.*

AB 1480 (Richman)

Require additional physician reporting to employers; alter medical treatment payment timeframe; restructure administrative penalties for delayed and contested claims; and change statute of limitation on medical payment penalties. *In Assembly Insurance.*

AB 1481 (Richman)

Require physicians to use established medical guidelines when evaluating an injured worker; and amend apportionment language so that injuries can not cumulatively total more than a 100% disability for a given body part. *In Assembly Insurance.*

AB 1482 (Richman)

Require the Administrative Director (AD) of the Division of Workers' Compensation in the Department of Industrial Relations to revise the Official Medical Fee Schedule (OMFS) to include an outpatient facility fee schedule, pharmacy services, ambulance services, and home health care services; require AD to use the resource-based relative value scale; prohibit medical

providers from balance billing above the OMFS; and codify the Kunz Decision. *In Assembly Insurance.*

AB 1483 (Richman)

Require every physician who treats and evaluates injured workers, on and after January 1, 2006, to be certified by the Industrial Medical Council as a Qualified Workers' Compensation Physician To Workers' Compensation Conference Committee.

AB 1552 (Pavley)

Prohibit a life or disability income insurance policy from being issued if the policy contains a provision giving the insurer discretionary authority to interpret the terms of the policy. *In Assembly Health.*

AB 1578 (Vargas)

Increase the fine for committing workers' compensation insurance fraud from \$50,000 to \$150,000. *In Senate Labor and Industrial Relations.*

AB 1579 (Cogdill)

Prohibit a physician from referring a workers' compensation claimant for outpatient surgery services if the physician or his or her immediate family has a financial interest in the referral. *In Senate Appropriations.*

AB 1580 (Cogdill)

Delete various provisions and benefits of current law pertaining to workers' compensation benefits paid to former inmates of city and county jails. *In Assembly Appropriations.*

AB 1581 (Cogdill)

Require that an experience rating plan include merit credits that decrease a policyholder's rates based upon its record of job safety. *In Assembly Insurance.*

AB 1728 (Committee on Insurance)

Authorize the Insurance Commissioner to review and negotiate rates charged to long-term care insurers by actuaries. *In Senate Insurance.*

AB 1729 (Committee on Insurance)

Sunset recently passed legislation relative to "portable persistency" as of December 31, 2009, and require that the California Research Bureau contract with a nationally recognized actuarial firm to complete a study regarding whether "portable persistency" adversely affects low-income and previously uninsured individuals more so than the "loyalty discount" currently allowed by the Department of Insurance. *In Senate Appropriations.*

SB 64 (Speier)

Prohibit an insurer from refusing to renew homeowners insurance to an existing customer unless the home is uninsurable. Expand the notice for non-renewal to 75 calendar days. Authorize the Insurance Commissioner to approve/disapprove any proposed non-renewal eligibility underwriting guidelines. Prohibit insurers from using credit ratings, reports or information to

underwrite, classify or rate insurance policies. Prohibit insurers from adverse underwriting decisions regarding an existing or new applicant based merely upon an applicant's inquiry about coverage. *In Assembly Insurance.*

SB 191 (Alarcon)

Regulate and stabilize the workers compensation insurance market by requiring that workers' compensation insurance rates not be excessive. Provide a formula for the Insurance Commissioner (IC) to determine whether rates are excessive; require the IC to disapprove rates, which are excessive, require the IC to maintain an online comparison guide for workers' compensation insurance rates; require insurers, desiring to use rates lower than the IC's pure premium rates, to file an application with the IC, and to provide for a method of review, determination and appeal as specified; and require an experience rating plan to contain a provision for rewarding employers that have been claim free for a specified length of time. *In Assembly Appropriations.*

SB 223 (Margett)

Provide that the generic-drug-dispensing requirement, currently imposed on pharmacies, applies to any person or entity that dispenses medicines to a worker for a workers' compensation related injury, except under specified circumstances. *To Workers' Compensation Conference Committee.*

SB 229 (Burton)

Prohibits the State Compensation Insurance Fund (SCIF) from raising small employers premiums, for a two year period, if such small employers are claim free for five years and if they provide health insurance coverage for their employees. The bill also requires the SCIF to submit their findings to the Legislature by January 1, 2005. *To Workers' Compensation Conference Committee.*

SB 354 (Speier)

Makes four changes to the statutes governing workers compensation insurance: sets a limit of 15 one hour visits to a chiropractor, absent approval by a physician for more visits, doubles the maximum fine for fraudulent claims to \$100,000 or double the value of the fraud, whichever is greater, doubles the maximum fine on employers who fraudulently obtain lower premiums (premium fraud) to \$100,000 or double the value of the fraud, whichever is greater, prohibits physicians from referring workers' compensation claimants to outpatient surgical centers owned by the referring physician or his/her immediate family (physician self-referral). *To Workers' Compensation Conference Committee.*

SB 457 (McPherson)

Specifies a new penalty structure for instances where payment of compensation has been unreasonably delayed or refused, as follows: that portion of the order, decision or award that was unreasonably delayed or refused must be increased by 25 percent or five hundred dollar (\$500), whichever is greater; such increase may not exceed five thousand dollar (\$5,000) per claim, in the aggregate. *To Workers' Compensation Conference Committee.*

SB 673 (Florez)

Require prior approval of rates for mortgage guaranty insurance by the Insurance Commissioner and would, generally speaking, impose on mortgage guaranty insurance requirements for public hearings and rate evaluations similar to those of Proposition 103. The costs associated with implementing requires that these provisions be paid by an assessment on mortgage insurers and requires the Department of Insurance to impose the assessment starting on January 1, 2004. *In Assembly Insurance.*

SB 691 (Escutia)

Prohibit insurers from using credit scores to underwrite, rate, or determine placement in a particular payment plan for homeowner's insurance policies. *In Assembly Insurance.*

SB 757 (Poochigian)

Require the Commission on Health and Safety and Workers' Compensation, by July 1, 2004, to conduct a survey and evaluation of existing medical treatment utilization standards in other states, at the national level, and in other medical benefit systems. The commission shall then prepare a report of its findings and recommendations with respect to the survey and evaluation as it relates to workers' compensation utilization guidelines and protocols. *In Assembly Appropriations.*

SB 850 (Burton)

Permit a vacancy on the general election ballot caused by the death or disqualification of the nominee to be filled by appointment by the Speaker of the Assembly or the Minority Leader of the Assembly, as specified, or by the President pro Tempore of the Senate or the Minority Leader of the Senate. Permit the applicable county central committees to fill the vacancy by appointment only if the vacancy cannot be filled pursuant to the above procedure. Require the elections official to ascertain if a candidate is unqualified to seek an office a certain number of days before the ensuing general election. *In Assembly Insurance.*

SB 899 (Poochigian)

Prohibit a physician from referring a person for outpatient surgery purposes if the physician or his or her immediate family has a financial interest with the person or in the entity that receives the referral. *To Workers' Compensation Conference Committee.*

SB 962 (McClintock)

Require the Employment Development Department to take additional steps to verify eligibility of new unemployment insurance claimants and to upgrade computer systems to improve anti-fraud efforts. *In Assembly Appropriations.*

SB 1071 (Vincent)

Permit a diagnostic or other medical imaging center to contract with a contracting agent, employer, carrier, or an agent on behalf of a contracting agent, employer, or carrier, for reimbursement rates different from those in the medical fee schedule. *To Workers' Compensation Conference Committee.*

## Subject Index

Construction defects	AB 752
Deferred annuities	AB 284
Department of Insurance	AB 794
Disability benefits	AB 978, AB 1327
Insurance	AB 996, AB 1252, AB 1297
Actuaries	AB 1728
Automobile	AB 456, AB 631, AB 984, AB 1181, AB 1318, AB 1729, SB 551
Cancellation	AB 1727
Consumer protection	AB 412
Earthquake	AB 1048
Fraud	AB 1099, AB 1227
Homeowners	SB 64, SB 691
Life	AB 226, AB 1083, AB 1103, AB 1552, AB 1600, SB 620
Long-term care	SB 200, SB 686
Mortgage guarantee	AB 943
Property	AB 1191
Title	AB 1005
Underwriting	AB 1087
Unfair acts	AB 618
Life insurers guarantees	AB 444
Motor Clubs	AB 1274
Seismic Safety	AB 1598
State Compensation Insurance Fund	AB 1357
Underwriting information	AB 81, AB 1049
Unemployment	AB 1136, AB 1430, SB 727, SB 962
Benefits	AB 331
Insurance	SB 237, AJR 1
Workers' Compensation	AB 87, AB 136, AB 149, AB 227, AB 431, AB 595, SB 596, AB 597, AB 606, AB 968, AB 1215, AB 1262, AB 1324, AB 1434, AB 1480, AB 1481, AB 1482, AB 1483, AB 1578, AB 1579, AB 1580, AB 1581, SB 125, SB 176, SB 191, SB 223, SB 228, SB 229, SB 354, SB 457, SB 757, SB 1007, SB 1071