17:23C-1 to 17:23C-13

LEGISLATIVE HISTORY CHECKLIST

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LAWS OF: 1999 CHAPTER: 183

NJSA: 17:23C-1 to 17:23C-13 (Life and health insurers—compliance review)

BILL NO: S1771 (Substituted for A2176)

SPONSOR(S): Kavanaugh

DATE INTRODUCED: March 18, 1999

COMMITTEE: ASSEMBLY: ---

SENATE: Commerce

AMENDED DURING PASSAGE: No

DATE OF PASSAGE: ASSEMBLY: June 10, 1999

SENATE: May 24, 1999

DATE OF APPROVAL: August 16, 1999

FOLLOWING ARE ATTACHED IF AVAILABLE:

FINAL TEXT OF BILL: Senate Committee Substitute

(Amendments during passage denoted by superscript numbers)

S1771

SPONSORS STATEMENT: (Begins on page 4 of original bill)

Yes

COMMITTEE STATEMENT: ASSEMBLY: No

SENATE: Yes

FLOOR AMENDMENT STATEMENTS: No

LEGISLATIVE FISCAL ESTIMATE: No

A2176

SPONSORS STATEMENT: (Begins on page 4 of original bill)

Yes

Bill and statement identical to S1771

COMMITTEE STATEMENT: ASSEMBLY: Yes

SENATE: No

FLOOR AMENDMENT STATEMENTS: Yes

LEGISLATIVE FISCAL ESTIMATE: No

VETO MESSAGE: No

GOVERNOR'S PRESS RELEASE ON SIGNING: Yes

| FOLLOWING WERE PRINTED: |
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|-------------------------|

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| REPORTS: | No |
|---------------------|----|
| HEARINGS: | No |
| NEWSPAPER ARTICLES: | No |

Title 17.
Chapter 23C. (New)
Voluntary
Compliance
Reviews.
§§ 1 - 13
C. 17:23C-1
To 17:23C-13

P.L. 1999, CHAPTER 183, *approved August 16*, *1999*Senate Committee Substitute for Senate, No. 1771

AN ACT concerning compliance reviews of insurance carriers and supplementing Title 17 of the Revised Statutes.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

1. a. The Legislature finds and declares that it is in the public interest for insurance carriers in this State to conduct voluntary internal reviews and audits of their operations, practices and procedures for the purpose of discovering and correcting any operations, practices or procedures which do not comply with applicable law or regulation or which do not comply with recognized industry standards or with the insurance carrier's own standards and for the purpose of preventing continuing and more serious violations. However, if studies and reports beyond those legally required are available to third parties other than regulators and potentially can result in the insurance carrier's liability to such third parties, the insurance carrier may be discouraged from making these additional efforts and from sharing these results with regulators. A legal structure that promotes self-policing programs can achieve improved compliance effectively at less cost to the State and to the insurance carriers. Voluntary compliance review, when properly conducted and implemented, results not only in improved compliance with law, but in the adoption of procedures and policies by the insurance carriers that exceed minimum legal requirements, and that save money by benefiting customers, lowering costs and reducing potential liabilities.

b. The Legislature therefore determines that it is the public policy of the State to encourage insurance carriers to undertake voluntary compliance reviews and corrective action programs by protecting the results of voluntary compliance reviews from third parties other than regulators. Voluntary compliance reviews shall be privileged and shall not be considered public records or public documents subject to inspection or examination under any statutory or common-law right to know request. This privilege is intended to apply only to protect reports created for the express purpose of testing and monitoring compliance, which otherwise might not be undertaken because they are not legally required. Information required to be maintained pursuant to any federal or State law or regulation will not become privileged

just because it is utilized or incorporated in a voluntary compliance
 review report.

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- 2. As used in this act:
- 5 "Department" means the Department of Banking and Insurance.
- "Enforcement action" means a criminal investigation or prosecution, or an administrative proceeding, civil action or order by a governmental unit, agency or authority which is intended to ensure the safe and sound operation of an insurance carrier.

10 "Insurance carrier" means:

- 11 (1) Any corporation, association, partnership, reciprocal exchange, 12 interinsurer, Lloyd's insurer, fraternal benefit society or other person 13 engaged in the business of insurance pursuant to Subtitle 3 of Title 17 14 of the Revised Statutes (R.S.17:17-1 et seq.), or Subtitle 3 of Title 15 17B of the New Jersey Statutes (N.J.S.17B:17-1 et seq.);
- 16 (2) Any medical service corporation operating pursuant to P.L.1940, c.74 (C.17:48A-1 et seq.);
- 18 (3) Any hospital service corporation operating pursuant to 19 P.L.1938, c.366 (C.17:48-1 et seq.);
- 20 (4) Any health service corporation operating pursuant to P.L.1985, c.236 (C.17:48E-1 et seq.);
- 22 (5) Any dental service corporation operating pursuant to P.L.1968, c.305 (C.17:48C-1 et seq.);
- 24 (6) Any dental plan organization operating pursuant to P.L.1979, c.478 (C.17:48D-1 et seq.);
- 26 (7) Any insurance plan operating pursuant to P.L.1970, c.215 (C.17:29D-1 et seq.);
- 28 (8) The New Jersey Insurance Underwriting Association operating 29 pursuant to P.L.1968, c.129 (C.17:37A-1 et seq.);
- 30 (9) Any risk retention group or purchasing group operating 31 pursuant to the "Liability Risk Retention Act of 1986," 15 U.S.C. 32 sections 3901 et seq.;
- 33 (10) Any health maintenance organization operating pursuant to 34 P.L.1973, c.337 (C.26:2J-1 et seq.); and
- 35 (11) Any joint insurance fund operating pursuant to P.L.1983, c.108 (C.18A:18B-1 et seq.), P.L.1983, c.372 (C.40A:10-36-1 et seq.), P.L.1985, c.204 (C.18A:64A-25.33 et seq.) or P.L.1987, c.431 (C.17:49A-1 et seq.).
- Timely discloses" or "timely disclosure" means the voluntary disclosure of the findings of a voluntary compliance review to the department within 90 days of the completion of a voluntary compliance review report or the delivery of or access to a voluntary compliance review report within 20 days of a request by the department.
- "Voluntary compliance review" means review, project, testingprogram, assessment, audit or evaluation instituted by an insurance

carrier to collect information or prepare analyses, not required by statute, regulation, bulletin or order and which would otherwise not be collected, maintained or prepared, for the purposes of identifying and correcting problems of compliance with applicable laws and regulations.

"Voluntary compliance review report" means any document or documents prepared or assembled by any person or group of persons, committee or entity conducting a voluntary compliance review, including without limitation, supporting information and documents such as notes, records of observations, findings, conclusions, drafts, memoranda, drawings, photographs, electronic or computerized mail, audio or video recordings or transcriptions or depictions of any type, stored computer data, including floppy or other disks, hard drives, printer memory, software or other data compilations from which information can be obtained, charts, graphs and surveys, provided, however, that the documents and supporting information are developed for the purpose of and in the course of a voluntary compliance review.

3. A voluntary compliance review report shall be privileged and neither it nor its existence shall be discoverable or admissible as evidence in any legal action or administrative proceeding of any nature involving the insurance carrier, except as provided in section 5 of this act.

4. Persons involved in the preparation of a voluntary compliance review report shall not be required to give answers to any questions or provide testimony regarding the existence, contents or conclusions of any voluntary compliance review report, except as provided in section 5 of this act.

 5. a. The provisions of sections 3 and 4 of this act shall not apply if:

(1) an enforcement action is taken, that enforcement action is contested, and an administrative law judge or a court of competent jurisdiction determines that a voluntary compliance review report is relevant to that enforcement action; provided however, that disclosure of a voluntary compliance review report shall be made under seal, with no disclosure beyond the department, the administrative law judge or court of competent jurisdiction, and resulting in no waiver of the privilege to any other individuals or entities seeking disclosure; or

- (2) there is a statutory requirement that the violation identified or discovered as a result of the voluntary compliance review be reported; provided however, that a court may order disclosure only in accordance with the terms of this act.
 - b. The disclosure authorized under paragraphs (1) and (2) of

subsection a. of this section shall apply only to those sections and portions of the voluntary compliance review report that pertain to the specific violation which is the subject of the enforcement action. All other sections and portions of the voluntary compliance review report shall remain privileged.

c. If there is a dispute concerning the sections or portions of the voluntary compliance review report subject to disclosure, an administrative law judge or a court of competent jurisdiction, upon petition of either party, shall conduct an in camera review of those sections or portions subject to dispute.

6. At the conclusion of an enforcement action in which a court or administrative law judge determines that an insurance carrier has committed no statutory or regulatory violation, all voluntary compliance review reports contained within the case file of the proceeding shall be placed under seal and the department shall treat that material as confidential, as if no enforcement action had been taken.

- 7. The following materials described in this section shall not become privileged pursuant to the provisions of sections 3 and 4 of this act because they are utilized or incorporated in a voluntary compliance review report:
- (1) documents, communications, data, reports or other information required to be collected, developed, maintained, reported or made available to a regulatory agency pursuant to any federal or State law, regulation, permit, bulletin or order or in the normal processing of customer transactions;
- (2) information obtained by observation, sampling, examining, auditing or monitoring by any regulatory agency;
- (3) information obtained from a source independent of the voluntary compliance review; and
- (4) information exchanged by and among the department and other appropriate regulators pursuant to an agreement between or among the regulatory agencies; provided, however, that notwithstanding this permitted exchange of information by the regulatory agencies, sections 3 and 4 of this act shall continue to apply with respect to a person who is not a regulatory agency.

 8. No person shall use any information privileged pursuant to this act to discover any other information and any information so discovered shall be inadmissible in any action or proceeding. If an administrative law judge or a court of competent jurisdiction determines that any information is not privileged, it shall, by the entry of appropriate protective orders, ensure that information is disclosed only to the extent required for the proper conduct of the subject action

or proceeding.

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9. Nothing in this act shall limit, waive or abrogate the scope or nature of any statutory or common law privilege, including, without limitation, the work product doctrine and the attorney-client privilege.

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10. No regulatory agency shall adopt a rule for the purpose of circumventing the privilege established in this act by requiring disclosure of a voluntary compliance review report.

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11. a. If an insurance carrier timely discloses information it obtained from a voluntary compliance review to the department or to another appropriate regulatory agency, that information and the voluntary compliance review which resulted in the information shall remain subject to sections 3 and 4 of this act, except that the agency receiving the information may use it with respect to an enforcement action.

b. The regulatory agency, in deciding on the appropriate penalty or sanction, if any, for a violation shall consider the timely disclosure as a mitigating factor if the violation is disclosed and the insurance carrier responsible for the violation demonstrates, and the regulator determines, that the violation is not the result of knowing, purposeful, reckless or criminally negligent conduct, that reasonable corrective action has been or is being taken to rectify and eliminate any detected violation and that the insurance carrier has made or is making a good-faith effort to prevent similar violations.

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12. Nothing in this act shall be construed to permit any third party access to any voluntary compliance review report subject to the provisions of this act. For the purpose of this section, "third party" means a person other than a federal, State or local governmental agency; however, those agencies shall only be provided access to voluntary compliance review reports if they agree in writing to be bound by the terms of this act.

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13. a. The department may require production of any document from an insurance carrier through timely disclosure or pursuant to compulsion of law, for its review. This production shall not constitute a waiver of the privilege established by this act.

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b. The privilege provided by this act shall not be waived if the department or an employee of the department discloses a document provided to the department to a third-party. For the purpose of this section, "third party" means a person other than a federal, State or local governmental agency; however, those agencies shall only be provided access to voluntary compliance reports if they agree in

46 writing to be bound by the terms of this act.

SCS for S1771

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| 1 | c. Any person who is found to have intentionally or recklessly |
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| 2 | disclosed any document to a third party in violation of this act shall be |
| 3 | guilty of a crime of the third degree. |
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| 5 | 14. This act shall take effect immediately and shall apply to all |
| 6 | voluntary compliance reviews and reports. |
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| 11 | Concerns certain voluntary compliance reviews by insurance carriers. |

SENATE, No. 1771

STATE OF NEW JERSEY

208th LEGISLATURE

INTRODUCED MARCH 18, 1999

Sponsored by: Senator WALTER J. KAVANAUGH District 16 (Morris and Somerset)

Co-Sponsored by: Senator Furnari

SYNOPSIS

Establishes evidentiary privilege for compliance reviews of life and health insurers.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 5/11/1999)

ANACT concerning compliance reviews of life and health insurers and supplementing Title 17B of the New Jersey Statutes.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

1. As used in this act:

"Compliance review committee" or "committee" means the individuals, designated either specifically or in their job descriptions, by an insurer to monitor, evaluate, review, audit, assess or investigate the operations of the insurer for the purpose of identifying or preventing violations of law, marketplace practices that could result in violations of law, or noncompliance with industry or professional market conduct standards, and to report their findings to the appropriate officers of the insurer.

"Division" means the Division of Insurance within the Department of Banking and Insurance.

"Document" means all or any portion of any written memorandum, letter, note, record, report, instrument, or other information printed on paper or in computerized electronic media, or contained in audio or video recordings, created by one or more members of a compliance review committee, an employee of the insurer that designated members of the committee, or an independent contractor engaged by the insurer to assist the committee in performing its duties, to facilitate or memorialize the process of monitoring, evaluating, reviewing, auditing, assessing, or investigating the operations of an insurer for the purpose of identifying or preventing violations of law, marketplace practices that could result in violations of law, or noncompliance with industry or professional market conduct standards.

"Insurer" means an insurer admitted to transact the business of insurance in this State pursuant to Title 17B of the New Jersey Statutes.

2. A document shall be privileged and neither it nor its existence shall be discoverable or admissible as evidence in any legal action or administrative proceeding of any nature involving the insurer or an affiliate of the insurer.

3. Members of a compliance review committee, an employee of the insurer that designated the members of a compliance review committee, or an independent contractor engaged by the insurer to assist a compliance review committee in performing its duties, shall not be required to give answers to any questions or provide testimony regarding the existence, contents or conclusions of any document, finding, recommendation, evaluation, opinion or other action of the committee or member thereof.

- 4. a. All or any portion of any written memorandum, letter, note record, report, instrument, or other information printed on paper or in computerized electronic media, or contained in audio or video recordings, otherwise available from an original source, is not to be construed as unavailable for discovery or for use in any civil action or administrative proceeding because it was presented to a compliance review committee.
- b. An individual who communicated with a compliance review committee or who is a member of a compliance review committee shall not be prevented from testifying as to matters within his knowledge but shall not be asked about or testify about his communications with the committee or his opinions formed because of his work with the committee.

- 5. a. No person shall use any information privileged pursuant to this act to discover any other information and any information so discovered shall be inadmissible in any civil action or administrative proceeding. If a court or an administrative law judge determines that any information is not privileged, it shall by the entry of an appropriate protective order ensure that information is disclosed only to the extent required for the proper conduct of the subject action or proceeding.
- b. No regulatory agency shall adopt a rule for the purpose of circumventing the privilege established in this act by requiring disclosure of a document.

- 6. a. The division may require production of any document from an insurer through voluntary cooperation or pursuant to compulsion of law, for its review. This production shall not waive the privileges established by this act.
- b. The privilege provided by this act shall not be waived if the division or an employee of the division discloses a document provided to the division to a third-party. For the purpose of this section, "third-party" means a person other than a State or local enforcing agency.
- c. An employee of the division who makes an unauthorized disclosure of a document to a third-party shall be guilty of a civil offense:
- (1) The offense shall be enforced by summons and complaint as if it were a disorderly persons action and which shall be subject to a fine of up to \$1,000, which fine shall be collectible by any court of competent jurisdiction; and
- (2) The employee shall be disqualified from acting as an officer or employee or in any capacity under appointment or employment by the division; and
- 44 (3) The employee shall be personally liable to the insurer for all costs incurred by the insurer in defending the privilege violated by the disclosure.

S1771 KAVANAUGH

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| 1 | 7. Nothing in this act shall limit, waive or abrogate the scope or |
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| 2 | nature of any statutory or common law privilege, including, without |
| 3 | limitation, the work product doctrine and the attorney-client privilege. |
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| 5 | 8. This act shall take effect immediately and shall apply to all |
| 6 | document requests initiated on or after the effective date. |
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| 9 | STATEMENT |
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| 11 | This bill establishes an evidentiary privilege for compliance reviews |
| 12 | of life and health insurers. Insurers often voluntarily create |
| 13 | compliance review committees to monitor, evaluate, review, audit, |
| 14 | assess or investigate the operations of the insurer for the purpose of |
| 15 | identifying or preventing violations of law, marketplace practices that |
| 16 | could result in violations of law, or noncompliance with industry or |
| 17 | professional market conduct standards. |
| 18 | This bill recognizes and encourages life and health insurers to |
| 19 | initiate voluntary compliance reviews to identify and correct problems |
| 20 | by providing that the compliance review committee and the documents |
| 21 | associated with that committee are privileged and not evidential in |
| 22 | legal and administrative proceedings. The bill also provides for |
| 23 | penalties if an employee of the Division of Insurance improperly |
| 24 | discloses a privileged document resulting from a voluntary compliance |
| 25 | review. |
| 26 | Insurers are subject to many legal and regulatory provisions and are |
| 27 | responsible for insuring millions of individuals in this State. Self- |
| 28 | examinations are critical in recognizing the cause of past problems and |
| 29 | the elimination of future problems. Failure to create and preserve this |

evidentiary privilege will act as a disincentive to insurers to conduct

frank, productive self-examinations and will lead to increased

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regulatory costs and expenses.

SENATE COMMERCE COMMITTEE

STATEMENT TO

SENATE COMMITTEE SUBSTITUTE FOR SENATE, No. 1771

STATE OF NEW JERSEY

DATED: MAY 6, 1999

The Senate Commerce Committee reports favorably Senate Committee Substitute for Senate Bill No. 1771.

The provisions of this bill, a Senate Committee Substitute for Senate, No.1771, apply to property-casualty, life and health insurance carriers.

Under the provisions of the bill, voluntary compliance review reports of insurance carriers are privileged and are not public records or public documents subject to inspection or examination under any statutory or common-law right to know request, except as provided in the bill. The exceptions include situations of administrative civil actions or criminal actions in which a court may order disclosure.

The bill provides that the privilege afforded voluntary compliance reviews applies only to reports created for the express purpose of testing and monitoring compliance, which otherwise might not be undertaken because they are not legally required. Information required to be maintained pursuant to any federal or State law or regulation will not become privileged just because it is utilized or incorporated in a voluntary compliance review report. The bill further provides that information exchanged by and among the Department of Banking and Insurance and other appropriate regulators pursuant to an agreement between or among the regulatory agencies does not become subject to the compliance privilege, but that the compliance privilege shall continue to apply with respect to entities that are not regulatory agencies.

Furthermore, the bill provides that if an insurance carrier timely discloses information it obtains from a voluntary compliance review to the department or to another appropriate regulatory agency, that information and the voluntary compliance review remains privileged. However, the regulatory agency may use the information with respect to an enforcement action. In deciding an appropriate penalty or sanction, however, the regulatory agency shall consider that the information was voluntarily disclosed as a mitigating factor.

The bill provides that the privilege is not waived if the department or an employee of the department discloses a document provided to the department to a third-party. "Third party" is defined as a person other than a federal, State or local governmental agency. Under the bill, any person who is found to have intentionally or recklessly disclosed any document to a third party in violation of the provisions of the bill shall be guilty of a crime of the third degree.

The provisions of the bill apply to all voluntary compliance reviews and reports.

The bill will encourage insurance carriers to undertake voluntary compliance reviews and corrective action programs by protecting the results of voluntary compliance reviews from third parties other than regulators.

ASSEMBLY, No. 2176

STATE OF NEW JERSEY

208th LEGISLATURE

INTRODUCED JUNE 11, 1998

Sponsored by:

Assemblyman JOHN V. KELLY District 36 (Bergen, Essex and Passaic) Assemblyman JOSEPH V. DORIA, JR. District 31 (Hudson)

SYNOPSIS

Establishes evidentiary privilege for compliance reviews of life and health insurers.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 11/24/1998)

AN ACT concerning compliance reviews of life and health insurers and supplementing Title 17B of the New Jersey Statutes.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

1. As used in this act:

"Compliance review committee" or "committee" means the individuals, designated either specifically or in their job descriptions, by an insurer to monitor, evaluate, review, audit, assess or investigate the operations of the insurer for the purpose of identifying or preventing violations of law, marketplace practices that could result in violations of law, or noncompliance with industry or professional market conduct standards, and to report their findings to the appropriate officers of the insurer.

"Division" means the Division of Insurance within the Department of Banking and Insurance.

"Document" means all or any portion of any written memorandum, letter, note, record, report, instrument, or other information printed on paper or in computerized electronic media, or contained in audio or video recordings, created by one or more members of a compliance review committee, an employee of the insurer that designated members of the committee, or an independent contractor engaged by the insurer to assist the committee in performing its duties, to facilitate or memorialize the process of monitoring, evaluating, reviewing, auditing, assessing, or investigating the operations of an insurer for the purpose of identifying or preventing violations of law, marketplace practices that could result in violations of law, or noncompliance with industry or professional market conduct standards.

"Insurer" means an insurer admitted to transact the business of insurance in this State pursuant to Title 17B of the New Jersey Statutes.

2. A document shall be privileged and neither it nor its existence shall be discoverable or admissible as evidence in any legal action or administrative proceeding of any nature involving the insurer or an affiliate of the insurer.

3. Members of a compliance review committee, an employee of the insurer that designated the members of a compliance review committee, or an independent contractor engaged by the insurer to assist a compliance review committee in performing its duties, shall not be required to give answers to any questions or provide testimony regarding the existence, contents or conclusions of any document, finding, recommendation, evaluation, opinion or other action of the committee or member thereof.

- 4. a. All or any portion of any written memorandum, letter, note record, report, instrument, or other information printed on paper or in computerized electronic media, or contained in audio or video recordings, otherwise available from an original source, is not to be construed as unavailable for discovery or for use in any civil action or administrative proceeding because it was presented to a compliance review committee.
 - b. An individual who communicated with a compliance review committee or who is a member of a compliance review committee shall not be prevented from testifying as to matters within his knowledge but shall not be asked about or testify about his communications with the committee or his opinions formed because of his work with the committee.

- 5. a. No person shall use any information privileged pursuant to this act to discover any other information and any information so discovered shall be inadmissible in any civil action or administrative proceeding. If a court or an administrative law judge determines that any information is not privileged, it shall by the entry of an appropriate protective order ensure that information is disclosed only to the extent required for the proper conduct of the subject action or proceeding.
- b. No regulatory agency shall adopt a rule for the purpose of circumventing the privilege established in this act by requiring disclosure of a document.

- 6. a. The division may require production of any document from an insurer through voluntary cooperation or pursuant to compulsion of law, for its review. This production shall not waive the privileges established by this act.
- b. The privilege provided by this act shall not be waived if the division or an employee of the division discloses a document provided to the division to a third-party. For the purpose of this section, "third-party" means a person other than a State or local enforcing agency.
- c. An employee of the division who makes an unauthorized disclosure of a document to a third-party shall be guilty of a civil offense:
- (1) The offense shall be enforced by summons and complaint as if it were a disorderly persons action and which shall be subject to a fine of up to \$1,000, which fine shall be collectible by any court of competent jurisdiction; and
- (2) The employee shall be disqualified from acting as an officer or employee or in any capacity under appointment or employment by the division; and
- 44 (3) The employee shall be personally liable to the insurer for all costs incurred by the insurer in defending the privilege violated by the disclosure.

A2176 KELLY, DORIA

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| 1 | 7. Nothing in this act shall limit, waive or abrogate the scope or |
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| 2 | nature of any statutory or common law privilege, including, without |
| 3 | limitation, the work product doctrine and the attorney-client privilege. |
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| 5 | 8. This act shall take effect immediately and shall apply to all |
| 6 | document requests initiated on or after the effective date. |
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| 9 | STATEMENT |
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| 11 | This bill establishes an evidentiary privilege for compliance reviews |
| 12 | of life and health insurers. Insurers often voluntarily create |
| 13 | compliance review committees to monitor, evaluate, review, audit, |
| 14 | assess or investigate the operations of the insurer for the purpose of |
| 15 | identifying or preventing violations of law, marketplace practices that |
| 16 | could result in violations of law, or noncompliance with industry or |
| 17 | professional market conduct standards. |
| 18 | This bill recognizes and encourages life and health insurers to |
| 19 | initiate voluntary compliance reviews to identify and correct problems |
| 20 | by providing that the compliance review committee and the documents |
| 21 | associated with that committee are privileged and not evidential in |
| 22 | legal and administrative proceedings. The bill also provides for |
| 23 | penalties if an employee of the Division of Insurance improperly |
| 24 | discloses a privileged document resulting from a voluntary compliance |
| 25 | review. |
| 26 | Insurers are subject to many legal and regulatory provisions and are |
| 27 | responsible for insuring millions of individuals in this State. Self- |
| 28 | examinations are critical in recognizing the cause of past problems and |
| 29 | the elimination of future problems. Failure to create and preserve this |

evidentiary privilege will act as a disincentive to insurers to conduct

frank, productive self-examinations and will lead to increased

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regulatory costs and expenses.

ASSEMBLY BANKING AND INSURANCE COMMITTEE

STATEMENT TO

ASSEMBLY COMMITTEE SUBSTITUTE FOR ASSEMBLY, No. 2176

STATE OF NEW JERSEY

DATED: MARCH 18, 1999

The Assembly Banking and Insurance Committee reports favorably Assembly Committee Substitute for Assembly Bill No. 2176.

Insurers are subject to many legal and regulatory provisions and are responsible for insuring millions of individuals in this State. Insurers often voluntarily create compliance review committees to monitor, evaluate, review, audit, assess or investigate the operations of the insurer for the purpose of identifying or preventing violations of law, marketplace practices that could result in violations of law, or noncompliance with industry or professional market conduct standards. This bill an Assembly Committee Substitute for Assembly Bill No. 2176, encourages insurance carriers to undertake voluntary compliance reviews and corrective action programs by protecting the results of voluntary compliance reviews from third parties other than regulators.

Under the provisions of the bill, voluntary compliance reviews are privileged and are not public records or public documents subject to inspection or examination under any statutory or common-law right to know request, except as provided in the bill. The exceptions include situations of administrative civil actions or criminal actions in which a court may order disclosure. The evidentiary privilege applies only to documents, data, communications, reports or other information disclosed through the self-review process which are not otherwise available or discoverable. Failure to create and preserve this evidentiary privilege will act as a disincentive to insurers to conduct self-examinations and will lead to increased regulatory costs and expenses.

The bill clarifies that the privilege afforded voluntary compliance reviews applies only to reports created for the express purpose of testing and monitoring compliance, which otherwise might not be undertaken because they are not legally required. Information required to be maintained pursuant to any federal or State law or regulation will not become privileged just because it is utilized or incorporated in a voluntary compliance review report. The bill further provides that information exchanged by and among the Department

of Banking and Insurance and other appropriate regulators pursuant to an agreement between or among the regulatory agencies does not become subject to the compliance privilege, but that the compliance privilege shall continue to apply with respect to entities that are not regulatory agencies.

Furthermore the bill provides that if an insurance carrier timely discloses information it obtains from a voluntary compliance review to the department or to another appropriate regulatory agency, that information and the voluntary compliance review remains privileged. However, the regulatory agency may use the information with respect to an enforcement action. In deciding an appropriate penalty or sanction, however, the regulatory agency shall consider that the information was voluntarily disclosed as a mitigating factor.

Finally, the bill provides that the privilege is not waived if the department or an employee of the department discloses a document provided to the department to a third-party. "Third party" is defined as a person other than a federal, State or local governmental agency. Under the bill, any person who is found to have intentionally or recklessly disclosed any document to a third party in violation of the provisions of the bill shall be guilty of a crime of the third degree.

STATEMENT TO

ASSEMBLY COMMITTEE SUBSTITUTE FOR ASSEMBLY, No. 2176

with Assembly Floor Amendments (Sponsored By Assemblyman KELLY)

ADOPTED: MAY 10, 1999

This amendment provides that the bill is applicable to all voluntary compliance reviews and reports and not just to those reviews and reports completed on or after the effective date of the bill.

PO BOX 004 TRENTON, NJ 08625

Office of the Governor NEWS RELEASE

CONTACT: Gene Herman 609-777-2600

RELEASE: August 16, 1999

Gov. Christie Whitman today signed the following pieces of legislation:

S-827, sponsored by Senator Louis F. Kosco (R-Bergen) and Assembly Members Gerald J. Luongo (R-Camden/Gloucester), and Kenneth C. LeFevre (R-Atlantic), prohibits the obstruction of special parking spaces designed to benefit handicapped individuals. The bill provides that a person who owns or controls a parking area which contains special parking spaces for the handicapped shall be responsible for assuring that access to those spaces and to curb cuts are not obstructed. If the obstruction is ice or snow, the bill requires that the ice or snow be removed from the special parking spaces or curb cuts within 48 hours after the weather condition causing the ice or snow ceases. The bill provides for a penalty of not less than \$200 or more than \$500 for a violation of the act.

SJR-10, sponsored by Senator Anthony R. Bucco (R-Morris) and Assembly Members Marion Crecco (R-Essex/Passaic) and Guy F. Talarico (R-Bergen), designates December 7th of each year as Pearl Harbor Remembrance Day in New Jersey. The resolution calls for the Governor to annually issue a proclamation calling on citizens to observe the day with appropriate ceremonies and activities. The resolution urges state and local governments, as well as interested organizations, groups and individuals to fly the flags of the United States and the State of New Jersey at half-staff on December 7th in honor of the individuals who died in the Pearl Harbor attack.

S-1771, sponsored by Senator Walter J. Kavanaugh (R- Morris/Somerset) and Assembly Members Joseph V. Doria, Jr. (D- Hudson) and John V. Kelly (R-Bergen), encourages insurance carriers to employ internal compliance reviews by protecting the results of those reviews from disclosure to third parties, other than state and federal regulators. Insurers often voluntarily create compliance review committees to monitor, evaluate, review, audit, assess or investigate the operations of the insurer for the purpose of identifying or preventing violations of law, marketplace practices that could result in violations of law, or noncompliance with industry or professional market standards. The bill provides for incentives for life and health insurers to initiate voluntary compliance reviews to identify and correct problems by providing that the deliberations and discussions of the compliance review committee and the documents associated with that committee are privileged and not evidential in legal and administrative proceedings involving the insurance carrier.