GENERAL ASSEMBLY OF NORTH CAROLINA

SESSION 1989

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SENATE BILL 498 Judiciary I Committee Substitute Adopted 5/9/89

Short Title: Insurance Crimes.	(Public)
Sponsors:	
Referred to:	· -

March 20, 1989

A BILL TO BE ENTITLED

1 2 AN ACT TO IMPROVE THE LAWS RELATING TO THE REPORTING AND 3 INVESTIGATION OF INSURANCE FRAUD AND THE FINANCIAL CONDITION OF INSURANCE LICENSEES; THE LAWS RELATING TO 4 5 EMBEZZLEMENT BY AGENTS AND BROKERS AND THE REPORTING 6

THEREOF; AND THE LAWS RELATING TO FALSE STATEMENTS BY PERSONS IN THE BUSINESS OF INSURANCE.

8 The General Assembly of North Carolina enacts:

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Section 1. G.S. 58-18.1 reads as rewritten:

"§ 58-18.1. Reporting and investigation of insurance and reinsurance fraud and the financial condition of licensees; Immunity-immunity from liability-for reporting insurance fraud.

For the purpose of As used in this section, 'Commissioner' includes an (a) employee, agent, or designee of the Commissioner. A person, or an employee or agent of that person, acting without actual malice, is not subject to civil liability for libel, slander, or any other cause of action by virtue of furnishing to the Commissioner under the requirements of law or at the direction of the Commissioner reports or other information relating to: (i) any known or suspected fraudulent insurance or reinsurance claim, transaction, or act or (ii) the financial condition of any licensee. In the absence of actual malice, members of the NAIC, their duly authorized committees, subcommittees, task forces, delegates and employees, and all other persons charged with the responsibility for collecting, reviewing, analyzing, or disseminating the information developed from filings of financial statements or examinations of licensees 1

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43 44 are not subject to civil liability for libel, slander, or any other cause of action by virtue of their collection, review, analysis, or dissemination of the data and information collected from these filings or examinationsa "fraudulent insurance act" is committed by any person who, knowingly and with the intent to defraud: (1) presents, causes to be presented, or prepares with the knowledge or belief that it will be presented to or by an insurer, purported insurer, broker, or any agent or employee thereof, any written statement as part of an insurance policy, or in support of an insurance policy, an application for the issuance of an insurance policy, or the rating of an insurance policy, or a claim for payment or other benefit pursuant to an insurance policy, that he knows to contain materially false information concerning any material fact; or (2) conceals information concerning any material fact.

- In the absence of fraud or bad faith, no person is subject to civil liability for defamation for filing reports or furnishing other information, without malice, required by this Chapter or required by the The Commissioner under the authority granted in this Chapter; and no cause of action for defamation arises against such person (1) for any information relating to suspected fraudulent insurance acts furnished to or received from the Commissioner, his designee, or law enforcement officials or their agents and employees; (2) for any information relating to suspected fraudulent insurance acts furnished to or received from other persons subject to the provisions of this Chapter; or (3) for any such information furnished in reports to the Commissioner or his staff, the Attorney General or his staff, acting without actual malice, is not subject to civil liability for libel, slander, or any other cause of action by virtue of an investigation of: (i) any known or suspected fraudulent insurance or reinsurance claim, transaction, or act or (ii) the financial condition of any licensee; or by virtue of publication or dissemination of any official report related to any investigation. The Commissioner is not subject to civil liability in relation to collecting, reviewing, analyzing, or dissemination of information that is developed by the NAIC, or any organization established to detect and prevent fraudulent insurance acts, or their agents, employees or designees; nor shall the Commissioner or his staff, the Attorney General or his staff, or any representative of from the filing of financial statements with the NAIC, acting without malice, in the absence of fraud or bad faith, be subject to liability for defamation, and no cause of action for defamation arises against such person for the publication of any confidential report or bulletin related to the official activities of the Commissioner, the Attorney General, or or from the examination of insurers by the NAIC. Nothing in this section abrogates or modifies any common law or statutory privilege or immunity enjoyed by any person and that is communicated to the Commissioner, including any investigation or publication or dissemination of any report or other information in relation thereto.
- (c) During the course of an investigation of a suspected fraudulent insurance act,: (i) a known or suspected fraudulent insurance or reinsurance claim, transaction, or act or (ii) the financial condition of any licensee, the Commissioner may personally or through his representative-request any insurer-person to furnish copies of any information relative to that suspected act that is in the insurer's possessionthe (i) known or suspected fraudulent insurance or reinsurance claim, transaction, or act or (ii) the financial condition of the licensee. The insurer-person shall release the information requested and cooperate with

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- the Commissioner or his representative pursuant to this subsectionsection. The information shall include without limitation to:
- (1) Any insurance policy and application therefor relevant to a suspected fraudulent insurance act under investigation;
 - (2) Policy premium payment records;
 - (3) History of previous loss claims made by the insured;
- (4) Material relating to the investigation of the suspected act, including statements of any person, proof of loss, and any other relevant evidence."
- Sec. 2. Article 2 of Chapter 58 of the General Statutes is amended by adding the following new sections:

"§ 58-18.2. Insurance fraud; claims forms.

- (a) Any person who, with the intent to defraud, or deceive any insurance company does any of the following is guilty of a Class I felony:
 - (1) Presents or causes to be presented to any insurer, any written or oral statement, including computer-generated documents, as part of or in support of a claim for payment or other benefit pursuant to an insurance policy, knowing that the statement contains any false, incomplete, or misleading information concerning any fact or thing material to the claim;
 - Assists, abets, solicits, or conspires with another to prepare or make any written or oral statement that is intended to be presented to any insurance company in connection with or in support of any claim for payment or other benefit pursuant to an insurance policy, knowing that the statement contains any false, incomplete, or misleading information concerning any fact or thing material to the claim;
 - (3) Conceals information concerning any fact or thing material to a claim for payment or other benefit pursuant to an insurance policy;
 - (4) Prepares or causes to be presented to any insurer any written or oral statement that contains true and complete information as part of or in support of a fraudulent claim for payment or other benefit pursuant to an insurance policy; or
 - (5) Prepares any statement referred to in subdivision (1) of this subsection with knowledge or belief that it will be presented to or by an insurer.
 - (b) For the purposes of this section:
 - (1) 'Insurer' includes an entity under Chapter 57 or 57B of the General Statutes and includes the Teachers' and State Employees' Comprehensive Major Medical Plan.
 - 'Statement' includes any notice, statement, proof of loss, bill of lading, receipt for payment, invoice, account, estimate of property damages, bill for services, diagnosis, prescription, hospital or doctor records, X rays, test result, or other evidence of loss, injury, or expense.
- "§ 58-18.3. Embezzlement by insurance agents and brokers.

If any insurance agent or broker embezzles or fraudulently converts to his own use, or, with intent to use or embezzle, takes, secretes or otherwise disposes of, or fraudulently withholds, appropriates, lends, invests or otherwise uses or applies any money, negotiable instrument, or other consideration received by him in his performance as an agent or broker, he shall be punished as a Class F felon.

"§ 58-18.4. Report to Commissioner.

Whenever any insurance company or employee or representative of any insurance company knows or has reasonable cause to believe that any person has violated G.S. 58-18.3, 58-92, or 58-340.37(e), it is the duty of that company or person, within 30 days after acquiring the knowledge, to file with the Commissioner a complete statement of all of the relevant facts and circumstances. These reports shall be privileged communications, and when filed without malice, shall not subject the company or individuals making the reports to any liability. The Commissioner may suspend or revoke the license of any insurance company or person who willfully fails to comply with this section."

Sec. 3. G.S. 58-340.37 is amended by adding a new subsection to read:

"(e) Any person who willfully makes a false statement in a verified report or declaration under oath that is required by law from fraternal benefit societies, is guilty of perjury under G.S. 14-209."

Sec. 4. G.S. 58-92 reads as rewritten:

"§ 58-92. Mutual insurance companies organized; requisites for doing business.

No policy may be issued by a mutual company until the president and the secretary of the company have certified under oath that every subscription for insurance in the list presented to the Commissioner for approval is genuine, and made with an agreement with every subscriber for insurance that he will take the policies subscribed for by him within 30 days after the granting of a license to the company by the Commissioner to issue policies.

Any person taking a false oath in respect to the certificate required by this section is guilty of perjury under G.S. 14-209."

Sec. 5. G.S. 58-22 reads as rewritten:

"§ 58-22. Punishment for making false statement.

If any insurance company in its annual or other statement required by law shall wilfully misstate the facts, the insurance company and the person in any financial or other statement required by law willfully misstates information, that person making oath to or subscribing the statement shall be guilty of a misdemeanor perjury under G.S. 14-209 and, upon conviction, shall be severally punished by and the entity on whose behalf the person made the oath or subscribed the statement shall be subject to a fine imposed by the court of not less than two thousand dollars (\$2,000) nor more than five thousand dollars (\$5,000)."

Sec. 6. G.S. 14-96, 14-96.1, 14-213, 14-214, 14-215, and 14-216 are repealed.

Sec. 7. In the event any provision of this act is held to be invalid by any court of competent jurisdiction, the court's holding as to that provision shall not affect the

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validity or operation of other provisions of this act; and to that end the provisions of this act are severable.

Sec. 8. This act is effective upon ratification except for Sections 3 through 6 of this act which shall become effective October 1, 1989. Prosecutions for offenses occurring before the effective date of this act are not abated or affected by this act, and the statutes that would be applicable but for this act remain applicable to those prosecutions.