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Permanent Final Adoptions

TITLE 365. INSURANCE DEPARTMENT CHAPTER 10. LIFE, ACCIDENT AND HEALTH

[OAR Docket #24-644]

RULEMAKING ACTION:

PERMANENT final adoption

RULES:

Subchapter 1. General Provisions

Part 1. GENERAL PROVISIONS

365:10-1-18. Annual provider directory audit report [NEW]

AUTHORITY:

Insurance Commissioner; 15 O.S. § 141.3; 36 O.S. §§ 307.1, 1541, 1641, 6123, 6958-6968; 59 O.S. § 358 and 1302.

SUBMISSION OF PROPOSED RULES TO GOVERNOR AND CABINET SECRETARY:

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APPROVED BY GOVERNORS DECLARATION:

Approved by Governor's declaration on June 21, 2024

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INCORPORATIONS BY REFERENCE:**INCORPORATED STANDARDS:**

N/A

INCORPORATING RULES:

N/A

AVAILABILITY:

N/A

GIST/ANALYSIS:

Sets up timelines and processes for submitting reports required by SB442 (2023).

CONTACT PERSON:

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Permanent Final Adoptions

365:15-1-26. Motor vehicle repairs [NEW]

(a) **“Core Based Statistical Area” or “CBSA”** means the geographic area designated by the U.S. Office of Management and Budget based on the most recent census data.

(b) **“Repair facility”** means a motor vehicle repair or motor vehicle glass repair or replacement facility, whichever is applicable.

(c) **To establish a competitive price for motor vehicle repairs in accordance with 36 O.S. § 1250.8(H), an insurer shall conduct a market survey of the prices charged for repairs performed in accordance with manufacturing standards by repair facilities within the CBSA the facility performing the repairs is located within or is nearest to. A competitive price shall be an amount equal to or greater than the mean of all of the prices provided to the insurer by repair facilities within the CBSA that are capable of making the repairs in accordance with the applicable manufacturing standards.**

(d) **Insurers may use automobile collision repair estimating software to establish competitive prices if the software complies with the requirements set forth in 36 O.S. § 1250.8 and this rule.**

(e) **Market Surveys shall be updated sufficiently to reflect current market conditions.**

(f) **Upon request by the Department, insurers shall provide copies of the market surveys and all related documentation to the Department within twenty (20) days.**

(g) **Insurers and their representatives shall not make false or misleading statements about market surveys or competitive prices for motor vehicle repairs to repair facilities, policyholders, or members of the public.**

[OAR Docket #24-645; filed 6-25-24]

TITLE 365. INSURANCE DEPARTMENT CHAPTER 25. OTHER LICENSEES

[OAR Docket #24-646]

RULEMAKING ACTION:

PERMANENT final adoption

RULES:

Subchapter 3. Producers, Brokers, Limited Lines Producers, Service Warranties and Vehicle Protection Product Warrantors [AMENDED]

365:25-3-13. Surplus line insurance with non-admitted insurer; approval prior to issuance; collection and remittance of taxes; claims for tax adjustments; procedures; forms [AMENDED]

365:25-3-22. Service warranty quarterly statement filings and fees [NEW]

Subchapter 7. Companies

Part 5. OKLAHOMA INSURANCE HOLDING COMPANY SYSTEM REGULATORY ACT

365:25-7-23. Forms: general requirements [AMENDED]

365:25-7-29.1. Transactions subject to prior notice - notice filing (Form D) [AMENDED]

Subchapter 15. Captive Insurance Companies Regulation

365:25-15-1.1. Definitions [AMENDED]

Subchapter 29. Pharmacy Benefit Managers

365:25-29-7.1. Retail pharmacy network access - audit [REVOKE]

365:25-29-8. PBM to file certain financial statements with the Commissioner [AMENDED]

365:25-29-10. Penalty for noncompliance [AMENDED]

365:25-29-14. Inquiry/complaint handling process [REVOKE]

365:25-29-15. Examinations and investigations of PBMs and health insurers [AMENDED]

365:25-29-16. Transparency requirements and aggregate reporting [REVOKE]

AUTHORITY:

Insurance Commissioner; 15 O.S. § 141.3; 36 O.S. §§ 307.1, 1541, 1641, 6123, 6958-6968; 59 O.S. §§ 358 and 1302.

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365:25-3-13. Updates language for a new electronic process for submitting information related to surplus lines quarterly and annual filings and tax payments. 365:25-3-22. Adds new language specifying when quarterly financial statements and fees are due. 365:25-7-23. Updates requirements in the receivership process to be in compliance with accreditation standards. 365:25-7-29.1. Updates requirements in the receivership process to be in compliance with accreditation standards. 365:25-15-1.1. Updates language to include other qualified individuals to be approved by the Commissioner for feasibility studies. 365:25-29-7.1. Removed unnecessary language after enforcement of pharmacy benefit managers ("PBMs") moved to the Attorney General's Office effective November 1, 2023. 365:25-29-8. Removes audited requirement from financial statements. 365:25-29-10. Amended to update language after enforcement of PBMs moved to the Attorney General's Office effective November 1, 2023. 365:25-29-14. Revoked due to changes in statute. 365:25-29-15. Amended to update language due to changes in statute. 365:25-29-16. Revoked due to changes in statute.

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PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING RULES ARE CONSIDERED FINALLY ADOPTED AS SET FORTH IN 75 O.S., SECTIONS 250.3(7) AND 308(E), WITH AN EFFECTIVE DATE OF AUGUST 11, 2024:

SUBCHAPTER 3. PRODUCERS, BROKERS, LIMITED LINES PRODUCERS, SERVICE WARRANTIES AND VEHICLE PROTECTION PRODUCT WARRANTORS [AMENDED]

365:25-3-13. Surplus line insurance with non-admitted insurer; approval prior to issuance; collection and remittance of taxes; claims for tax adjustments; procedures; forms [AMENDED]

(a) **Purpose.** The purpose of this section is to set forth the requirements regarding the procurement of policies from non-admitted carriers.