GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2005

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SENATE BILL 319 Judiciary I Committee Substitute Adopted 5/23/05

	Short Title: Workers Comp. Self-Insurance Security. (Public)					
	Sponsors:					
	Referred to:					
	March 3, 2005					
1		A BILL TO BE ENTITLED				
2	AN ACT ES	STABLISHING THE NORTH CAROLINA SELF-INSUR	ANCE			
3	SECURITY SYSTEM AND MAKING CONFORMING CHANGES TO THE					
4	WORKERS' COMPENSATION LAWS.					
5	The General Assembly of North Carolina enacts:					
6	SECTION 1. G.S. 97-130 reads as rewritten:					
7	"§ 97-130. Definitions.					
8	As used in this Article:					
9	(1)	"Association" means the North Carolina Self-Insurance Gu	iaranty			
10		Security Association established by G.S. 97-131.				
11	<u>(1a)</u>	"Association Aggregate Security System" means the security	<u>system</u>			
12		established by the Association pursuant to G.S. 97-133 w	<u>hereby</u>			
13		self-insurers collectively secure their aggregate self-insured w	orkers'			
14		compensation liabilities through the North Carolina Self-Ins	urance			
15		Security Association.				
16	(2)	"Board" means the Board of Directors of the Association estal	olished			
17		by G.S. 97-132.				
18	(3)	"Commissioner" means the North Carolina Commission	ier of			
19		Insurance.	_			
20	(4)	"Covered claim" means an unpaid claim against an ins				
21		self-insurer that relates to an injury that occurs while the self-ins				
22		a member of the Association and that is compensable und	er this			
23	(5)	Chapter.	•,			
24	(5)	"Fund" means the North Carolina Self-Insurance Guaranty S	ecurity			
25		Fund established by G.S. 97-133.	L:-1- :-			
26	(6)	"Member self-insurer" or "member" means a self-insurer when the control of the self-insurer with a self-in				
27		authorized that retains liability pursuant to G.S. 97-93 and G.S.				
28		and is licensed by the Commissioner to self-insure pursu	ant to			
29		G.S. 97-93 and G.S. 97-94. Article 5 of this Chapter.				

"Plan" means the Plan of Operation authorized by G.S. 97-134. (7) 1 "Self-insurer" means either: (i) an individual employer who has 2 (8) 3 demonstrated under G.S. 97-93 the financial ability to directly pay compensation in the amounts and manner and when due as provided in 4 5 licensed to self-insure pursuant to Article 5 of this Chapter or (ii) a 6 group of two or more employers who have agreed to pool their liabilities under this Chapter pursuant to G.S. 97-93. licensed to 7 8 self-insure pursuant to Article 47 of Chapter 58 of the General Statues. 9 (9) "Servicing facility" means those persons that are delegated the 10 authority to settle and compromise claims and expend Fund assets to pay claims pursuant to a delegation of authority from the Board." 11 12

SECTION 2. G.S. 97-131 reads as rewritten:

"§ 97-131. Creation.

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- There is created a nonprofit unincorporated legal entity to be known as the North Carolina Self-Insurance Guaranty Security Association. The Association is to provide mechanisms for the payment of covered claims under self-insurance coverage, against member self-insurers, to avoid excessive delay in payment, payment of covered claims, to avoid financial loss to claimants because of the insolvency of a member self-insurer, and to assist, when called upon to do so by the Commissioner, to assist the Commissioner in the detection of self-insurer insolvencies, to fund the Association Aggregate Security System, and to capitalize the Fund to insure the availability of financial resources to pay covered claims and to fund the activities of the Association.
- (b) All individual and group self-insurers shall be and remain members of the Association as a condition of authority being licensed to self-insure in this State under G.S. 97-93. State. The Association shall perform its functions under a Plan of Operation established or amended, or both, by the Board and approved by the Commissioner, and shall exercise its powers through the Board.
 - A self-insurer shall be deemed to be a member of the Association for (1) purposes of another self-insurer's insolvency, as defined in G.S. 97-135, when:
 - The self-insurer is a member of the Association when an insolvency occurs, or
 - The self-insurer has been a member of the Association at some b. point in time during the 12-month period immediately preceding the insolvency in question.
 - A self-insurer shall be deemed to be a member of the Association for (2) purposes of its own insolvency if it is a member when the compensable injury occurs.
 - In determining the membership of the Association pursuant to for the (3) purposes of subdivisions (1) and (2) of this subsection for any date after the effective date of this Article, no employer or group of employers claiming self-insurer status may be deemed to be a member of the Association on any date after the effective date of this Article,

unless that employer or is on that date licensed as a self-insurer by the Commissioner pursuant to Article 5 of this Chapter or a group of employers is at that time authorized licensed as a group self-insurer by the Commissioner pursuant to G.S. 97-93 and G.S. 97-94. Article 47 of Chapter 58 of the General Statutes."

SECTION 3. G.S. 97-132 reads as rewritten:

"§ 97-132. Board of directors.

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The Board shall consist of not less than nine persons directors serving terms as established in the Plan. The members of the Board directors shall be selected by the member self-insurers, members of the Association, subject to the approval of the Commissioner, and shall serve for terms which shall not exceed three years. If no members of the Board are selected within 60 days after the effective date of this Article, the Commissioner may appoint the initial members of the Board. three-year terms and until a successor is elected and qualified. There is no limitation on the number of terms a director may serve. In approving selections to the Board, the Commissioner shall consider, among other things, whether all member individual and group self-insurers are fairly represented. Members of the Board Directors may be reimbursed from the assets of the Association for expenses incurred by them as members of the Board directors."

SECTION 4. G.S. 97-133 reads as rewritten:

"§ 97-133. Powers and duties of the Association.

- (a) The Association shall:
 - (1) Repealed by Session Laws 1999-219, s. 7.2, effective June 25, 1999.
 - Administer a fund, to be known as the North Carolina Self-Insurance (1a) Security Fund, which shall receive the assessments required by subdivision (2a) of this subsection and any other sums received by the Association. In its discretion, the Board may determine that the assets of the Fund should be segregated or that a separate accounting shall be made in order to identify that portion of the Fund which represents assessments paid by individual self-insurers and that portion of the Fund which represents assessments paid by group self-insurers. If the Board determines to segregate the Fund in this manner, the Association shall thereafter pay covered claims against individual member self-insurers from that portion of the Fund that represents assessments against individual self-insurers and shall thereafter pay covered claims against group member self-insurers from that portion of the Fund that represents assessments against group self-insurers. The costs of administering the Association shall be borne by the Fund. The Association is authorized to secure insurance, primary excess insurance, reinsurance, bonds, other insurance, financial guarantees and related financial instruments to effectuate the purposes of the Association. The Board will invest the Fund assets, and the earnings from investment of Fund assets shall be placed in or credited to the Fund.
 - (2) Assess each member of the Association as follows:

a.

- Each individual member self insurer shall be annually assessed an amount equal to two percent (2%) of the annual gross premiums, as determined under G.S. 105 228.5(b), (b1), and (c), that would have been paid by that member self-insurer for workers' compensation insurance during the prior calendar year; and payment to the Association shall be made no later than May 15 following the close of that calendar year. Where any such assessment is paid based in whole or in part upon estimates of annual gross premiums for the prior calendar year, there shall be made in the next year's assessment an adjustment of the assessment of such prior year based on actual audited annual gross premiums. Each group member self-insurer shall be annually assessed an amount equal to two percent (2%) of the annual gross premiums, as determined under G.S. 105-228.5(b), (b1), and (c), of the group member self-insurer during the prior calendar year; and payment to the Association shall be made no later than May 15 following the close of that calendar year. Regardless of the size of the Fund, during its first 12 months of membership, no member self-insurer may discount or reduce this two percent (2%) assessment. For the purpose of making the assessments authorized by this subsection and subsections (c) and (d) of this section, the Secretary of Revenue shall provide to the Association the self-insurer premium and payroll information as determined under G.S. 105-228.5(b), (b1) and (c), and the Commissioner shall provide to the Association the group self-insurer premium information reported to the Commissioner under G.S. 58-47-75 and G.S. 58-2-165.
- b. Each member self-insurer shall be notified of the assessment no later than 30 days before it is due.
- c. If a self-insurer is a member of the Association for less than a full calendar year, the annual gross premiums shall be adjusted by that portion of the year the self-insurer is not a member of the Association.
- d. If application of the contribution rates referenced in sub-subdivision a. of this subdivision would produce an amount in excess of the five million dollar (\$5,000,000) limits of the fund, an equitable proration may be made; provided that every self-insurer that becomes a member of the Association shall pay an initial assessment, in an amount established by the Board, regardless of the size of the fund at the time the member joins the Association.
- (2a) Establish, operate, and maintain the Association Aggregate Security System as defined in G.S. 97-130 and G.S. 97-165 as follows:

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- a. The Association shall annually prepare and submit to the Commissioner a written plan to provide an Association Aggregate Security System through a combination of cash on deposit in the Fund, securities, surety bonds, irrevocable letters of credit, insurance, or other financial instruments or guarantees owned or entered into by the Association and acceptable to the Commissioner. The noncash elements of the composite security may be one-year or multiple-year instruments.
- b. Within 60 days following the submission of the plan pursuant to sub-subdivision a. of this subdivision, the Commissioner shall either approve or disapprove the plan and shall notify the Association in writing. If the Commissioner does not approve or disapprove the plan within 60 days following submission, then the plan shall be deemed to be approved by the Commissioner.
- c. The Commissioner shall also determine the total undiscounted claims liability of each self-insurer that will participate in the Association Aggregate Security System as well as the aggregate total undiscounted outstanding claims liabilities of all the self-insurers that are to participate in the Association Aggregate Security System and shall notify the Guaranty Association of this determination.
- d. Upon approval by the Commissioner of the Association's plan for the Association Aggregate Security System, the Association shall assess the member self-insurers that participate in the Association Aggregate Security System pursuant to subdivision (3a) of this subsection.
- Administer a fund, to be known as the North Carolina Self-Insurance (3)Guaranty Fund, which shall receive the assessments required in subdivision (2) of this subsection. Once the Fund reaches five million dollars (\$5,000,000), no further assessments shall be made except initial assessments of new member self-insurers that are required to be made in subdivision (2)d. of this subsection. Assessments may be subsequently made only to maintain the Fund at a level of five million dollars (\$5,000,000). In its discretion, the Board may determine that the assets of the Fund should be segregated, or, that a separate accounting shall be made, in order to identify that portion of the Fund which represents assessments paid by individual self-insurers and that portion of the Fund which represents assessments paid by group self-insurers. If the Board determines to segregate the Fund in this manner, the Association shall thereafter pay covered claims against individual member self-insurers from that portion of the Fund which represents assessments against individual self-insurers and shall thereafter pay covered claims against group member self-insurers from

that portion of the Fund which represents assessments against group self-insurers. The cost of administration incurred by the Association shall be borne by the Fund and the Association is authorized to secure reinsurance and bonds and to otherwise invest the assets of the Fund to effectuate the purpose of the Association, subject to the approval of the Commissioner. All earnings from investment of Fund assets shall be placed in or credited to the Fund.

The Association may purchase primary excess insurance from an insurer licensed by the Commissioner for the appropriate lines of authority to defray its exposure to loss occasioned by the default of one of its members. The terms of any excess insurance so purchased shall be limited to providing coverage of liabilities which exceed the Fund's assets after the payment by member self-insurers of the maximum post insolvency assessment provided in subdivision (c)(1) of this section herein and the Association shall fund any such purchase by levying a special assessment on its members for this purpose or by application of any unencumbered earnings of the Fund or any other available funds. The Association may obtain from each member any information the Association may reasonably require in order to facilitate the securing of this primary excess insurance. The Association shall establish reasonable safeguards designed to insure that information so received is used only for this purpose and is not otherwise disclosed:

(3a) Assess members of the Association as follows:

- a. Association Aggregate Security System assessments. The Association shall assess each member participating in the Association Aggregate Security System a security system assessment. The amount of the security system assessment charged to each member participating in the Association Aggregate Security System shall be based on the Association's reasonable consideration of all of the following factors:
 - 1. The total amount of assessments necessary to provide aggregate security for all participating members.
 - 2. The member's total workers' compensation liabilities under the Act.
 - 3. The financial strength and creditworthiness of the member.
 - 4. Any other relevant factors.
- Special assessment. In the event that there are covered claims against an insolvent member or members and the assets of the Fund are not sufficient to pay the obligations of the Association, then the Association may collect a special assessment from the members in an amount sufficient to pay the aggregate value of such covered claims. Each member's special assessment shall

1		be determined by the Board and shall be based on the
2		proportion of the member's total obligations under the Act to
3		the aggregate total of all members' obligations under the Act.
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5		<u>c. Initial assessments. – A self-insurer that becomes a member and does not initially participate in the Association Aggregate</u>
6		Security System shall pay an initial assessment to the
7		Association in an amount determined by the Board.
8		d. Each member shall be notified of assessments no later than 30
9		days before the assessment is due.
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11		<u>Delinquent assessments, except as otherwise provided, shall</u> bear interest at a rate to be established by the Board.
12	(4)	Be obligated to the extent of covered claims occurring prior to the
13	(4)	determination of the member self insurer's insolvency, or occurring
14		after such determination but prior to the obtaining by the self insurer
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16		of workers' compensation insurance as otherwise required under this
17	(5)	Chapter.pay covered claims. After paying any claim resulting from a salf insurer's insolvency
18	(5)	After paying any claim resulting from a self-insurer's insolvency,
19		covered claim, be subrogated to the rights of the injured employee and
20		dependents and be entitled to enforce liability against the self-insurer
		or any third party by any appropriate action brought in its own name or
21 22	(6)	in the name of the injured employee and dependents; dependents.
	(6)	Assess the Fund in an amount necessary to pay only: Expend Fund
23		assets in amounts necessary to pay all of the following:
24		a. The obligations for of the Association under this Article
25		subsequent to an insolvency; insolvency.
26 27		b. The expenses of handling covered claims subsequent to an incolven avincely and the covered claims subsequent to an incolven avincely and the covered claims are subsequent to an incolven avincely and the covered claims are subsequent to an incolven avincely and the covered claims are subsequent to an incolven avincely and the covered claims are subsequent to an incolven avincely are subsequent to a subseq
28		insolvency; insolvency. The cost of exeminations under G.S. 07, 137; and G.S. 07, 137.
29		 c. The cost of examinations under G.S. 97-137; and G.S. 97-137. d. The costs of implementing and operating the Association
		
30		Aggregate Security System.
31 32	(7)	e. Other expenses authorized by this Article; Article.
33	(7)	Investigate claims brought against the Association and adjust,
		compromise, settle, and pay covered claims to the extent of the
34 35		Association's obligation; and deny all other claims. The Association
36		may review settlements to which the insolvent self-insurer was a party
		to determine the extent to which such settlements may be properly
37	(9)	contested; contested.
38	(8)	Notify such persons as the Commissioner directs under
39	(0)	G.S. 97-136; G.S. 97-136. Handle claims through its amployees directors its amployees or
40	(9)	Handle claims through its employees directors, its employees, or through one or more self-insurers or other persons designated as
41		through one or more self-insurers or other persons designated as
42		servicing facilities. Designation of a servicing facility is subject to the
43		approval of the Commissioner, but designation of a member

- self-insurer as a servicing facility may be declined by such 1 2 self-insurer; self-insurer. 3 Reimburse each servicing facility for obligations of the Association (10)paid by the facility and for expenses incurred by the facility while 4 5 handling claims on behalf of the Association; Association. 6 (11)Pay the any other expenses of the Association authorized by this 7 section; and section. 8 Establish in the Plan a mechanism to calculate the assessments (12)9 required by subdivisions (2) and (3) of this subsection by a simple and 10 equitable means to convert from policy or fund years that are different from a calendar year. 11 12 (b) The Association may: 13 (1) Employ or retain such persons as are necessary to handle claims and 14 perform other duties of the Association; Association. 15 (2) Borrow funds necessary to effect the purposes of this Article in accord with the Plan; Plan, including entering into standby lines of credit. 16 17 (3) Sue or be sued; sued. Negotiate and become a party to such contracts as are necessary to 18 (4) 19 carry out the purpose of this section; and section. 20 Perform such other acts as are necessary or proper to effectuate the (5) 21 purpose of this section. In the event that the assets of the Fund are not sufficient to pay the 22 obligations of the Association, then the Association shall impose an additional 23 assessment upon its members, which shall be known as a post insolvency assessment 24 25 which shall be imposed as follows: 26 (1) Each individual member self-insurer shall be assessed in an amount 27 not to exceed two percent (2%) each year of the annual gross 28 premiums, as determined under G.S. 105-228.5(b), (b1), and (c), that 29 would have been paid by that member self-insurer during the prior 30 calendar year. The assessments of each individual member self-insurer 31 shall be in the proportion that the annual gross premiums, as 32 determined under G.S. 105-228.5(b), (b1), and (c), of the individual 33 member self-insurer for the premium calendar year bears to the annual gross premiums of all individual member self-insurers for the 34 35 preceding calendar year. For group member self-insurers, the assessment shall not exceed two percent (2%) each year the annual 36 premium collected by that group member self-insurer during the prior 37 calendar year. The assessments of each group member self-insurer 38 39 shall be in the proportion that the annual gross premiums of the group member self-insurer for the premium calendar year bears to the annual 40
 - (2) Each member self-insurer shall be notified of the assessment no later than 30 days before it is due.

gross premiums of all group member self-insurers for the preceding

calendar year.

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- The Association may exempt or defer, in whole or in part, the assessment of any member self-insurer, if the assessment would cause that member's financial statement to reflect liabilities in excess of assets.
 - (4) Delinquent assessments, except as provided in subdivision (3) of this subsection, shall bear interest at the rate to be established by the Board, but not to exceed the discount rate of the Federal Reserve Bank, Richmond, Virginia, on the due date of the assessment, plus four percent (4%) annually, computed from the due date of the assessment.
 - (5) The Association shall establish in the Plan a mechanism to calculate the assessments required by subdivision (1) of this subsection by a simple and equitable means to convert from policy or fund years that are different from a calendar year.
 - (d) No individual member self insurer may be assessed in any calendar year an amount greater than two and one half percent (2.5%) of the annual gross premiums, as determined under G.S. 105–228.5(b), (b1), and (c), that would have been paid by that individual member self insurer during the prior calendar year. No group member self insurer may be assessed in any calendar year an amount greater than two and one half percent (2.5%) of the annual gross premiums of that group member self insurer during the prior calendar year. If the maximum assessment does not provide in any one year an amount sufficient to make all necessary payments, the funds available shall be prorated and the unpaid portion shall be paid as soon thereafter as funds become available. There shall be established in the Plan a mechanism to calculate the assessments required by this section by a simple and equitable means to convert from policy or fund years that are different from a calendar year."

SECTION 5. G.S. 97-134 reads as rewritten: "§ 97-134. Plan of Operation.

The Plan is as follows:

- (1) The Association shall submit to the Commissioner a Plan and any amendments necessary or suitable to assure the fair, reasonable, and equitable administration of the Association. The Plan and any amendments become effective upon approval in writing by the Commissioner. If the Association at any time fails to submit a <u>suitable</u> Plan or suitable amendment to the Plan the Commissioner shall, after notice and hearing, adopt such reasonable rules as are necessary or advisable to effectuate this Article. Such rules shall continue in force until modified by the Commissioner or superseded by a Plan submitted by the Association and approved by the Commissioner.
- (2) All member self-insurers shall comply with the Plan.
- (3) The Plan shall:
 - a. Establish the procedures whereby all the powers and duties of the Association under G.S. 97-133 will be performed; performed.

1	b.	Establish procedures for handling assets of the
2		Association; investing and managing Fund assets.
3	c.	Adopt a reasonable mechanism and procedure to achieve equity
4		in assessing the funds required in G.S. 97-133. Consideration
5		shall be given to adjustments for audited payroll, differentia
6		effects caused by rate changes, and other relevan-
7		factors; members pursuant to G.S. 97-133.
8	d.	Establish the amount and method of reimbursing members of
9		the Board under G.S. 97-132; G.S. 97-132.
10	e.	Establish procedures by which claims may be filed with the
11		Association and establish acceptable forms of proof of covered
12		claims. A list of such claims shall be periodically submitted to
13		the Association;
14	f.	Establish regular places and times for meetings of the
15		Board;Board.
16	g.	Establish procedures for records to be kept of all financial
17	-	transactions of the Association, its agents, and the Board; Board.
18	h.	Provide that any member self-insurer aggrieved by any fina
19		action or decision of the Association may appeal to the
20		Commissioner within 30 days after the action of
21		decision; decision.
22	i.	Establish the procedures whereby selections for the Board shall
23		be submitted to the Commissioner; and Commissioner.
24	j.	Contain additional provisions necessary or proper for the
25		execution of the powers and duties of the Association."
26	SECTION	6. G.S. 97-135 reads as rewritten:
27	"§ 97-135. Insolvenc	y .
28	A member self-in	surer shall be insolvent for the purposes of this Article-Article
29	other than the definit	ion of insolvency adopted by the Board for the purposes of the
30		e Security System, under any of the following circumstances:
31	(1) Dete	rmination of insolvency by a court of competent jurisdiction
32	<u> </u>	isdiction.
33		cution of bankruptcy proceedings by or regarding the member
34	self-i	nsurer; orself-insurer.

they fall due or in the ordinary course of business." **SECTION 7.** G.S. 97-140 reads as rewritten:

"§ 97-140. Nonduplication of recovery.

(3)

Any person having a covered claim that may be recovered under more than one insurance or self-insurance guaranty or security association or its equivalent shall seek recovery first from the association of the place or residence of the claimant. Any recovery under this Article shall be reduced by the amount of recovery from any other insurance guaranty or security association or its equivalent."

The Board determines that the self-insurer's total liabilities exceed its total assets or the self-insurer is unable or ceases to pay its debts as

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SECTION 8. G.S. 97-143 reads as rewritten:

"§ 97-143. Use of deposits made by insolvent member self-insurers.

After the Commissioner has notified the Association, under G.S. 97-136(a), that a member is insolvent, the Commissioner shall assign and deliver to the Association, and the Association is authorized to expend the any deposit made by the insolvent member under G.S. 58-47-90 or G.S. 97-185, to the extent the deposit is needed by the Association to pay covered claims against the insolvent member as required by this Article, and to the extent the deposit is needed to pay expenses of the Association relating to covered claims against the insolvent member. For insolvent members that participate in the Association Aggregate Security System, the Association is authorized to pursue recovery under every instrument, contract, and form of security comprising the composite security. The Association shall account to the Commissioner and the insolvent member or its successor for all deposits received from the Commissioner under this section."

SECTION 9. G.S. 97-165 is amended by adding a new subdivision to read:

"(1a) "Association Aggregate Security System" means the security system established pursuant to G.S. 97-133 whereby self-insurers collectively secure their aggregate self-insured workers' compensation liabilities under the Act through the North Carolina Self-Insurance Security Association."

SECTION 10. G.S. 97-170 reads as rewritten:

"§ 97-170. License applications; required information.

- (a) No employer shall self-insure its workers' compensation liabilities under the Act unless it is licensed by the Commissioner under this Article. This subsection does not apply to an employer authorized to self-insure its workers' compensation liabilities under the Act prior to December 1, 1997, whose authority to self-insure its workers' compensation liabilities under the Act has not terminated after that date.
- (b) An applicant for a license as a self-insurer shall file with the Commissioner the information required by subsection (d) of this section on a form prescribed by the Commissioner at least 90 days before the proposed licensing date. No application is complete until the Commissioner has received all required information. A copy of the application must also be filed with the North Carolina Self-Insurance Security Association at least 90 days before the proposed licensing date.
- (c) Only an applicant whose total fixed assets amount to five hundred thousand dollars (\$500,000) or more may apply for a license. In judging the applicant's financial strength and liquidity relative to its ability to comply with the Act, the Commissioner shall consider all of the following relative to the applicant's:applicant:
 - (1) Organizational structure and management; management.
 - (2) Financial strength; strength.
 - (3) Source and reliability of financial information; information.
 - (4) Risks to be retained; retained.
- (5) Workers' compensation loss history;history.
 - (6) Number of employees; employees.
 - (7) Claims administration; administration.

- 1 (8) Excess insurance; and insurance.
 - (9) Access to excess insurance.
 - (d) The license application shall comprise the following information:
 - (1) Company name, organizational structure, location of principal office, contact person, organization date, type of operations within this State, management background, and addresses of all plants or offices in this State.
 - (2) Certified audited GAAP financial statements prepared by a CPA for the two most recent years. The financial statement formulation shall facilitate application of ratio and trend analysis.
 - (3) Evidence of the insurance required by G.S. 97-190.
 - (4) Repealed by Session Laws 1999-132, s. 13.7, effective June 4, 1999.
 - (5) For applicants with 20 or more full-time employees, a certificate or other evidence of safety inspection, satisfactory to the Commissioner, that certifies that all safety requirements of the Department of Labor have been met.
 - (6) Summary of workers' compensation benefits paid for the last three calendar years, as well as the total liability for all open claims within 30 days or some other period acceptable to the Commissioner not to exceed 90 days, before the filing of the application.
 - (7) Summary, by risk classification, of annual payroll and number of employees within the State.
 - (8) Book value of fixed assets located within the State.
 - (9) Proof of compliance with the claims administration provisions of Article 47 of Chapter 58 of the General Statutes.
 - (10) A letter of assent, stipulating the applicant's acceptance of membership status in approval by the North Carolina Self-Insurance Guaranty Security Association under Article 4 of this Chapter. Chapter upon the granting of a license to the applicant.
 - (e) Every applicant shall execute and file with the Commissioner an agreement, as part of the application, in which the applicant agrees to participate in the Association Aggregate Security System, or if excluded from the Association Aggregate Security System, to deposit with the Commissioner pursuant to G.S. 97-185, cash, acceptable securities, or a surety bond issued by a corporate surety that will guarantee the applicant's compliance with this Article and the Act pursuant to G.S. 97-185. Act."

SECTION 11. G.S. 97-185 reads as rewritten:

"§ 97-185. Deposits; surety bonds; letters of credit.

(a) (Effective January 1, 2005, until January 1, 2006) Every self-insurer shall deposit with the Commissioner an amount not less than seventy five percent (75%) of the self-insurer's total undiscounted outstanding claim liability per the most recent certification from a qualified actuary as required by G.S. 97-180(b), but not less than five hundred thousand dollars (\$500,000), or such other greater amount as the Commissioner prescribes based on, but not limited to, the financial condition of the self-insurer and the risk retained by the self-insurer.

- (a) (Effective January 1, 2006) Every self insurer shall deposit with the Commissioner an amount not less than one hundred percent (100%) of the self insurer's total undiscounted outstanding claim liability per the most recent certification from a qualified actuary as required by G.S. 97-180(b), but not less than five hundred thousand dollars (\$500,000), or such other greater amount as the Commissioner prescribes based on, but not limited to, the financial condition of the self-insurer and the risk retained by the self-insurer.
- All self-insurers shall participate in the Association Aggregate Security (a1) System established pursuant to G.S. 97-131 unless excluded by the Board of Directors of the North Carolina Self-Insurance Security Association. The Board of Directors of the North Carolina Self-Insurance Security Association shall notify the Commissioner of the self-insurers that are excluded from participating in the Association Aggregate Security System. The Board of Directors of the North Carolina Self-Insurance Security Association shall exclude all self-insurers whose licenses have previously been revoked by the Commissioner. The Board of Directors of the North Carolina Self-Insurance Security Association shall exclude self-insurers with a debt rating as established by Standard & Poor's Rating Service or by Moody's Investor Service, below the minimum Standard & Poor's and Moody's ratings established in the written plan for the Association Aggregate Security System submitted by the Association and approved by the Commissioner pursuant to G.S. 97-131. The Board of Directors of the North Carolina Self-Insurance Security Association shall exclude all self-insurers that have defaulted on the payment of its self-insured workers' compensation liabilities from participation in the Association Aggregate Security System.
 - (b) Repealed by Session Laws 2003-115, s. 3, effective January 1, 2004.
- (b1) Notwithstanding subsection (a) of this section, member self-insurers with a debt rating of BBB or better from Standard and Poor's Rating Service, a division of McGraw Hill, Inc., or an equivalent rating from another national rating agency shall deposit with the Commissioner an amount not less than twenty five percent (25%) of the self-insurer's total undiscounted outstanding claim liability per the most recent certification from a qualified actuary as required by G.S. 97-180(b), but not less than five hundred thousand dollars (\$500,000). The Commissioner shall consider and may, in the Commissioner's discretion, increase or reduce the deposit to a greater or lesser percentage of the member self-insurer's claims liability based on the financial strength of the self-insurer and other financial information submitted by the self-insurer.
- (b2) A self-insurer that is excluded from participation in the Association Aggregate Security System, including self-insurers that are granted a license to self-insure after the North Carolina Self-Insurance Security Association annually implements the Association Aggregate Security System, shall deposit with the Commissioner an amount not less than one hundred percent (100%) of the self-insurer's total undiscounted outstanding claims liability per the most recent certification from a qualified actuary as required by G.S. 97-180(b), but not less than five hundred thousand dollars (\$500,000), or such greater amount as the Commissioner prescribes based on, but not limited to, the financial condition of the self-insurer and the risk retained by the self-insurer.

1	"	
2	SECT	FION 12. G.S. 97-195(a) reads as rewritten:
3	"(a) The C	Commissioner summarily may revoke a license if there is satisfactory
4	evidence for the	revocation. In determining whether to revoke a license summarily, the
5	Commissioner n	nay consider any or all of the following:
6	(1)	Determination of insolvency by a court of competent jurisdiction.
7	(2)	Institution of bankruptcy proceedings.
8	(3)	If the self-insurer is in a hazardous financial condition.
9	<u>(4)</u>	Failure to pay any North Carolina Self-Insurance Security Association
10		assessments made pursuant to G.S. 97-133.
11	<u>(5)</u>	Failure to participate in the Association Aggregate Security System or,
12		if excluded from participation in the Association Aggregate Security
13		System, failure to provide and maintain the deposit required by
14		<u>G.S. 97-185.</u> "
15	SECT	TION 13. This act becomes effective January 1, 2006.