

2022 Regular Session

SENATE BILL NO. 198

BY SENATORS TALBOT, BERNARD, FESI, JACKSON, PEACOCK, SMITH AND STINE

INSURANCE CLAIMS. Provides relative to the adjustment of residential claims. (1/1/23)

1 AN ACT

2 To enact R.S. 22:46(14.1) and 1897, relative to the adjustment of claims; to provide for
3 definitions; to provide for a written status report; to provide for a primary contact
4 with the insurer; and to provide for related matters.

5 Be it enacted by the Legislature of Louisiana:

6 Section 1. R.S. 22:46(14.1) and 1897 are hereby enacted to read as follows:

7 §46. General definitions

8 In this Code, unless the context requires, the following definitions apply:

9 * * *

10 **(14.1) "Residential coverage" means coverage for persons that have an**
11 **interest in residential property that is either personal or commercial and**
12 **includes coverage for particular perils like wind, named storms, and hurricanes.**

13 **(a) "Personal residential coverage" means the type of coverage provided**
14 **by homeowners, mobile homeowners, dwelling, tenant, condominium unit**
15 **owner, and similar policies.**

16 **(b) "Commercial residential coverage" means the type of coverage**
17 **provided by condominium or homeowners' association, apartment building, and**

1 similar policies.

2 * * *

3 §1897. Adjuster communications

4 A. For an insurance claim that arises out of a state of emergency or
5 disaster declared pursuant to R.S. 29:724, and the insurer within a six-month
6 period assigns a third or subsequent claims adjuster to be primarily responsible
7 for the insurance claim, the insurer shall provide the insured in a timely manner
8 all of the following:

9 (1) A written status report that shall include at least the following:

10 (a) A summary of any decisions or actions that are substantially related
11 to the disposition of the claim.

12 (b) The dollar amount of coverage for losses to structures and contents.

13 (c) The undisputed dollar amount of losses to structures and contents.

14 (d) The retention of or intention to consult design or construction
15 professionals.

16 (e) All items of dispute.

17 (2) A primary contact for the insured.

18 (3) Two or more direct means of communications with the primary
19 contact.

20 B."Primary contact" in Paragraph (A)(2) of this Section means an
21 adjuster or team employed as a member or members of the insurer's staff who
22 are knowledgeable about the claim. Once assigned, the primary contact shall
23 remain assigned to the insured's claim until the insurer closes the claim or a
24 party files suit on the claim. The designation of a primary contact shall not
25 preclude other claims personnel, vendors, or professionals, including clerical
26 staff members, and call center staff members from working on portions of the
27 insured's claim.

28 C. If the insured needs additional information or otherwise requests the
29 insurer shall ensure that the primary contact refers and transfers the insured

- 1 **to the appropriate supervisor with a span of control over the primary contact,**
 2 **that shall be satisfied by a referral to a first-tier or second-tier manager who has**
 3 **authority over claim handling.**

The original instrument and the following digest, which constitutes no part of the legislative instrument, were prepared by Beth O'Quin.

DIGEST

SB 198 Engrossed

2022 Regular Session

Talbot

Present law provides general definitions applicable to the insurance code.

Proposed law retains present law and adds definitions for "residential coverage", "personal residential coverage", and "commercial residential coverage".

Proposed law provides that if an insurance claim that arises out of a declared state of emergency or disaster, and within a six-month period the insurer assigns a third or subsequent claims adjuster to be primarily responsible for the insurance claim, requires the insurer in a timely manner provide insured all of the following:

- (1) Requires the insurer to provide the insured a written status report that includes at least the following:
 - (a) Provide a summary of decisions or actions that are substantially related to the disposition of the claim.
 - (b) Provide the dollar amount of coverage for losses to structures and contents.
 - (c) Provide the undisputed dollar amount of losses to structures and contents.
 - (d) Provide information on whether the insurer retains or intends to consult design or construction professionals.
 - (e) Provide all items in dispute.
- (2) Provide the insured a primary contact.
- (3) Provide the insured with two or more direct means of communication with the primary contact.

Proposed law defines "primary contact" is an adjuster or team employed as a member or members of the insurer's staff who is knowledgeable about the claim. Requires the primary contact to remain assigned to the insured's claim until the insurer closes the claim or a party files suit on the claim. Requires the designation of the primary contact does not preclude other claims personnel, vendors, or professionals, including clerical staff members and call staff members from working on portions of the insured's claim.

Proposed law provides that if the insured needs information or otherwise requests, the insurer is required to ensure that the primary contact refers and transfers the insured to the appropriate supervisor that has a span of control over the primary contact, and is satisfied by a referral to a first-tier or second tier manager who has authority over claim handling.

Effective on January 1, 2023.

(Adds R.S. 22:46(14.1) and R.S. 22:1897)

Summary of Amendments Adopted by Senate

Committee Amendments Proposed by Senate Committee on Insurance to the original
bill

1. Makes technical changes.