1	State of Arkansas
2	95th General Assembly A Bill
3	Regular Session, 2025 SENATE BILL 499
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5	By: Senators Irvin, J. Dismang, Gilmore, Hester, M. McKee, Stone, Hill, J. Petty, Flippo, B. Davis, J.
6	Boyd, K. Hammer, J. English
7	By: Representative J. Moore
8	
9	For An Act To Be Entitled
10	AN ACT TO REPEAL CERTAIN REPORTING REQUIREMENTS FOR
11	THE STATE INSURANCE DEPARTMENT AND THE STATE
12	SECURITIES DEPARTMENT; TO REVISE CERTAIN REPORTING
13	REQUIREMENTS FOR THE STATE INSURANCE DEPARTMENT; AND
14	FOR OTHER PURPOSES.
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17	Subtitle
18	TO REPEAL CERTAIN REPORTING REQUIREMENTS
19	FOR THE STATE INSURANCE DEPARTMENT AND
20	THE STATE SECURITIES DEPARTMENT; AND TO
21	REVISE CERTAIN REPORTING REQUIREMENTS
22	FOR THE STATE INSURANCE DEPARTMENT.
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24	BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:
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26	SECTION 1. Arkansas Code § 23-42-111 is repealed.
27	23-42-111. Quarterly reports.
28	(a) The State Securities Department shall provide to the Legislative
29	Council, or to the Joint Budget Committee if the General Assembly is in
30	session, on a quarterly basis a report of all funds received or any external
31	fund transactions recognized or required through court orders or settlement
32	agreements. □
33	(b) The report required under subsection (a) of this section shall
34	include:
35	(1) The case name of the court order or settlement agreement;
36	(2) The amount of funds received or transaction recognized or

1	required by the department for each court order or settlement agreement;
2	(3)(A) A plan for disbursement of the received funds.
3	(B) If funds received from a court order or settlement
4	agreement are expended for any purpose, including investor education and
5	enforcement activities, the report shall itemize specific activities subject
6	to the exclusions provided in § 25-1-403(1)(B);
7	(4) An itemization of the specific investor education and
8	enforcement activities funded for the department;
9	(5) An explanation of whether the funds received or transactions
10	recognized or required from a court order or settlement agreement are
11	directed to a specific entity, and if so, the department shall provide a
12	summary of input regarding the drafting of the court order or settlement
13	agreement;
14	(6) A report of the rationale for disbursing funds to a specific
15	entity if the department receives funds from a court order or settlement
16	agreement that does not require disbursement of funds to a specific entity;
17	and and
18	(7) A report of current balances of all unappropriated fund
19	holdings the department received from a court order or settlement agreement.
20	(c) The department shall provide the reports required under this
21	section no later than the fifteenth day of the month immediately following
22	the end of each quarter.
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24	SECTION 2. Arkansas Code § 23-61-112(a), concerning the information
25	required in the annual report of the State Insurance Department, is amended
26	to read as follows:
27	(a) As early in the calendar year as reasonably possible, the
28	Insurance Commissioner annually shall prepare and deliver a report to the
29	Secretary of the Department of Commerce showing, with respect to the
30	preceding calendar year:
31	(1) Names of the authorized insurers transacting insurance in
32	this state, with a summary of their financial statements that the
33	commissioner considers proper;
34	(2) Names of admitted insurers that closed during the year or
35	entered liquidation, a concise statement concerning the cause for each
36	proceeding, and the amount of assets and liabilities as ascertainable;

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1	(3) The total receipts and expenses of the State Insurance
2	Department for the year; and
3	(4) A summary of the department's activities to investigate and
4	combat health insurance fraud, including without limitation information
5	regarding:
6	(A) Referrals received;
7	(B) Investigations initiated;
8	(C) Investigations completed; and
9	(D) Other material necessary or desirable to evaluate the
10	department's efforts to investigate and combat health insurance fraud; and
11	(5) Other pertinent information and matters the commissioner
12	considers proper.
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14	SECTION 3. Arkansas Code § 23-61-116 is repealed.
15	23-61-116. Annual report on health insurance fraud.
16	Annually on or before March 1, the Insurance Commissioner shall submit
17	to the Secretary of the Department of Commerce, the President Pro Tempore of
18	the Senate, the Speaker of the House of Representatives, and the Attorney
19	General a report summarizing the State Insurance Department's activities to
20	investigate and combat health insurance fraud, including without limitation
21	information regarding:
22	(1) Referrals received;
23	(2) Investigations initiated;
24	(3) Investigations completed; and
25	(4) Other material necessary or desirable to evaluate the
26	department's efforts under this section.
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28	SECTION 4. Arkansas Code § 23-61-610 is repealed.
29	23-61-610. Annual report.
30	The Administrator of the Risk Management Division shall report annually
31	to the Governor and the Legislative Council on his or her findings and
32	recommendations.
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34	SECTION 5. Arkansas Code § 23-61-805(a), concerning reports of the
35	assessment and user fee under the Arkansas Health Insurance Marketplace, is
36	amended to read as follows:

1	(a) <del>(l)</del> The General Assembly shall establish a reasonable initial
2	assessment or user fee and reasonable increases or decreases in the amount of
3	future assessments or user fees and penalties and interest charges for
4	nonpayment of an assessment or user fee charged to participating health
5	insurers for the efficient operation of the Arkansas Health Insurance
6	Marketplace.
7	(2) Annually by October 1, the State Insurance Department shall
8	report to the Legislative Council in the manner and format that the
9	Legislative Council requires the recommendations of the department for the
10	initial assessment or user fee and increases or decreases in the amount of
11	future assessments or user fees and penalties and interest charges for
12	nonpayment of an assessment or user fee charged to participating health
13	insurers.
14	(3) Annually by December 1, the Legislative Council shall review
15	the recommendations of the department under subdivision (a)(2) of this
16	section and report to the President Pro Tempore of the Senate and the Speaker
17	of the House of Representatives the recommendations of the Legislative
18	Council for the initial assessment or user fee and future increases or
19	decreases in the amount of assessments or user fees and penalties and
20	interest charges for nonpayment of an assessment or user fee charged to
21	participating health insurers.
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23	SECTION 6. Arkansas Code § 23-67-313(b) and (c), concerning the report
24	of the Arkansas Workers' Compensation Insurance Plan and servicing carriers,
25	are amended to read as follows:
26	(b) The commissioner shall review the plan operations to ensure
27	compliance with this act. The commissioner shall review and report to the
28	Legislative Council and the Senate Committee on Insurance and Commerce and
29	the House Committee on Insurance and Commerce by September 1 of each year,
30	with the first report to be submitted no later than September 1, 1997,
31	including, but not limited to, the following information:
32	(1) Competitive selection of the administrator and servicing
33	<del>carriers;</del>
34	(2) Plan operating performance and service in accordance with
35	the intent of this act, including performance reviews of the administrator,
36	servicing carriers, and plan rules;

1	(3) Proper authority and independence of the Arkansas office to
2	properly perform and secure prompt, fair, and reasonable service as required
3	by this act; and
4	(4) Coverage provided by the plan in other states, including
5	evidence providing that carriers promptly provide coverage for employees of
6	Arkansas employers working in other states as provided in this act.
7	(c) The commissioner is encouraged to hold public hearings as needed
8	to assist in achieving the objectives of this act <del>and to assist with the</del>
9	review and report provided to the Legislative Council and the Senate
10	Committee on Insurance and Commerce and the House Committee on Insurance and
11	Commerce.
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13	SECTION 7. Arkansas Code § 23-79-1503(c), concerning the rules and
14	reporting requirements under Wendelyn's Craniofacial Law — Craniofacial
15	Coverage, is amended to read as follows:
16	(c) The department shall submit <del>biannual reports</del> <u>a report</u> to the Chair
17	of the House Committee on Insurance and Commerce and the Chair of the Senate
18	Committee on Insurance and Commerce upon receipt of a request from:
19	(1) A cochair of the House Committee on Insurance and Commerce;
20	<u>or</u>
21	(2) A cochair of the Senate Committee on Insurance and Commerce.
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