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Changing Regulatory Landscape Gauging the Impact of the Corporate Governance Annual Disclosure Model Act and Regulation

Insurance company executivescontrolling owners, directors and officers-are used to the scrutiny and standards of fiduciary care that may apply to their positions. The standards that apply can be complicated for insurer senior management, who also have responsibilities related to their shareholders as well as obligations to the policyholders of the company. As part of its overall solvency modernization initiative, the National Association of Insurance Commissioners (NAIC) has been studying the states' general corporate fiduciary standards and working on model corporate governance disclosures that will apply to insurers and/or their holding companies. These disclosure standards create additional levels of review and possible oversight by the states as they are adopted in the years to come.

On November 14, 2014, the NA-IC's Executive Committee/Plenary

and practices in an annual filing. The annual filing is meant to provide the insurance commissioner an understanding of the insurer's corporate governance framework. According to the NAIC, states are expected to start requiring disclosures at the beginning of 2016, with all states and territories on board by 2019. In fact, legislation has already been introduced in Indiana to adopt components of the Acts.

Filing Requirements

Under the Acts, an insurer must submit a Corporate Governance Annual Disclosure (CGAD) no later than June 1 of each calendar year. Alternatively, if an insurer is a part of a holding company, then the holding company may submit a CGAD as an insurance group. The insurance group must submit the CGAD to the commissioner of the lead state, as determined by the disclosures should be made, the insurer or insurance group must decide which category of reporting it will use: (1) the level at which the insurer or the insurance group's risk appetite is determined; (2) the level at which the earnings, capital, liquidity, operations, and reputation of the insurer is overseen; or (3) the level at which legal liability for failure of general corporate governance duties would be placed. Interestingly, once insurers and their groups determine the corporate level at which they will disclose, all subsequent filings must be at the same level or any changes must be adequately explained. This highlights the need for a measured analysis of the proper level for insurer or holding company disclosure, with the understanding that any changes are likely to invite further review of the rationale for the change and any underlying issues that may apply.

The CGAD is required to address

the following information: (1) the insurer's corporate governance framework and structure; (2) the policies and practices of its board of directors and significant committees, including information regarding board member qualifications and

independence; (3) the policies and practices directing senior management, including information regarding significant compensation programs; and (4) the processes by which the board of directors, its committees and senior management ensure an appropriate level of oversight of the critical risk areas impacting the insurer's business activities.

These disclosure standards create additional levels of review and possible oversight by the states as they are adopted in the years to come.

voted to adopt the Corporate Governance Annual Disclosure Model Act and the Corporate Governance Annual Disclosure Model Regulation (collectively, the "Acts"). The Acts require the insurer or its holding company to provide its domiciliary insurance commissioner with a detailed summary of the insurer or insurance group's corporate governance structure, policies,

NAIC's Financial Analysis Handbook.

Depending on how the insurer or insurance group has structured its system of corporate governance, disclosures may be needed at the ultimate controlling party level, an intermediate holding company level and/or the individual legal entity level. In order to determine what

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The information must be as descriptive as possible and include any necessary supporting documentation in order to provide the domiciliary commissioner an understanding of the insurer's corporate governance structures, policies, and practices. Moreover, the commissioner may request additional information, as appro-

priate. A failure to file the CGAD will result in a daily fine with a maximum cap, which will be determined by the states.

Notably, insurers and their holding groups will need to address a number of issues for disclosure under these cor-

porate governance protocols. This will include basic governance documentation, such as bylaws and committee charters, through more strategic considerations, such as the rationale for the size and struc-

ture of the current board of directors. Disclosures will need to relate board member qualifications and expertise to benefits provided to the insurer or group, selection criteria, and processes to evaluate committee performance. Insurers or their groups will need to disclose processes related to suitability standards utilized in the selection and retention of key control function officers.

These disclosure requirements will lead



insurers and their controlling parties to focus on established codes of business conduct, the board's oversight of management performance, compensation and implementation of corrective actions, when needed. In addition, much like the Own Risk and Solvency Assessment disclosure and the enterprise risk Form F filing, insurers

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> will need to describe processes of management in reporting, evaluating, and monitoring critical risk areas related to a variety of functions, such as actuarial, reinsurance, business strategies, com-



pliance, financial reporting and auditing, and market conduct.

As with other transparency initiatives of the NAIC and state insurance commissioners, the corporate governance disclosure models represent another step in opening insurance groups up to more review and possible scrutiny by the state

> regulators. While insurers will incur more regulatory cost of compliance and there will be some overlap with other insurer filings, the goal is to monitor and hopefully assure better overall corporate governance and

accountability for insurers and their groups.

Confidentiality and its Consequences



Understandably, а critical issue surrounds the confidential treatment of the information disclosed in the CGAD. The corporate governance disclosures are to be treated with the same level of confidentiality as information disclosed under the holding company registration model law. Specifically, the information is confidential by law; shall not be subject to subpoena; and shall not be subject to discovery or be admissible in evidence in any private civil action.

While most states' laws will likely follow the model law regarding confidentiality, there can be variations. The Florida Office of Insurance Regulation, as an example, has raised some previously advanced constitutionality concerns related to broad-based confidentiality of governance filings. Thus, it will be important to assure that any insurer making a filing has a firm understanding of the possible scenarios where information in the filing may be subject to disclosure based on any state's public records laws or some provision of law that may permit discovery in a lawsuit.

In view of, and partially in response to, the ongoing evolution of a federal presence in insurance and the growing international influence on certain policies adopted in the U.S, the NAIC and states continue to implement initiatives intended to modernize state-based insurance regulation. The recent adoption of

the Corporate Governance Annual Disclosure Model Act and Regulation provide more transparency for regulators to better understand and assess risk tolerances and mitigation initiatives that may exist with insurers and within their holding company groups. Taken with already broadly adopted changes in insurance holding company disclosure laws and evolving enterprise risk assessments insurers will need to file, corporate governance disclosures will serve to provide another portal for regulatory scrutiny of insurers and their holding groups. 🖉

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CONTINUED FROM PAGE 20 Maintaining Liquidity in Today's Market

fords mid-size insurance companies the opportunity to enhance portfolio income given they have the ability to implement those ideas in the secondary market.

The new issue corporate bond market has been very robust and is also a good outlet to source attractive bonds. Insurers who lack the scale to access new issues bonds can look to a third party asset manager who actively participates in the market.

As an insurance company in this market, being the right size buyer of fixed income securities is crucial. In these challenging times of low prevailing interest rates, the ability to access and apply as many ideas as possible is essential to maximizing income. Reduced dealer inventories make it challenging for the largest investors to act on opportunities outside of the largest issuers which significantly inhibits the investment universe. Being too small on the other hand can limit access to the new issue market or the full universe of securities available in the fixed income market. Mid-sized insurers and investment managers that can actively implement their strategies in both the new issue and secondary markets have a significant advantage when attempting to enhance investment income.

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AAM is a premier manager of insurance assets and has survived multiple market cycles with a 30+ year track record of working exclusively with insurance companies.

The rest of the Demotech team not pictured in photo on page 7



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