

CALIFORNIA CODE OF REGULATIONS

Title 10. Investment

Chapter 5. Insurance Commissioner

Subchapter 2. Policy Forms and Other Documents

Article 1. Document Submission and Approval Procedures; Fees

§ 2203. Fee Computation Rules.

(a) The fee for a "policy" (including fraternal benefit society certificates) includes riders without which the policy could not be approved and applications, rates and risk classifications if required to be filed, but only if such documents are submitted before the authorization date of the policy. The fee for a group policy does not include fees for certificates. Fees for additional documents for use with a policy and submitted before the authorization date of the policy shall be charged separately. The fee charged for a "shell" policy also includes one insert page or set of insert pages which, together with the policy shell, comprises the simplest policy which the insurer intends to issue. Submitters of shell policies must stipulate which documents comprise the "simplest policy" to avoid being charged separately for each document.

(b) The fee for a revision of a document previously approved or filed by the Commissioner within 180 days of its submission shall be the lesser of the fee otherwise provided or \$ ~~80~~ 280 if the form is in substance the same as that previously acted upon, the only changes being minor ones to correct typographical errors or to make detailed language changes to meet the requirements of other jurisdictions.

(c) "Substantially Similar Documents." If the cover letter states that a document is substantially similar to another document in the filing or to a document previously filed with or approved by the Commissioner within one year for the same company or an affiliated company, and the document is found to be so, the fee shall be one half of the usual fee.

(d) "Simultaneous Filings by Affiliated Insurers." Where documents which are identical other than company name, address and officers, are submitted simultaneously by affiliated insurers and the cover letters so state, fees for one such insurer's submission shall be computed as otherwise provided and the greater of one half that amount or the minimum fee shall be charged for each other insurer's submission.

(e) Only one fee shall be charged for a document, regardless of the number of documents with which it will be used.

(f) The fee for a "wrap-around" group policy submitted at the same time as the certificate(s) which are incorporated by reference therein is one-half the fee otherwise provided for.

(g) Fees for submissions of all documents described in subdivisions (1) through (11) of Section 2202(a) shall be increased by 10 percent of their original amount for each time a submission is resubmitted following its second substantive rejection by the Commissioner. For the purpose of this subdivision, a new objection to text previously submitted as part of the filing shall not be a "substantive rejection" unless new text in the resubmission clarifies the previously submitted text so that it is now objectionable.

(h) Where a rate filing applies to multiple experience groups and the same rating methodology is applied to the rates for more than one such experience group, the fee for one experience group shall be computed as otherwise provided and the fee for each remaining experience group subject to that rating methodology shall be one-quarter of that for the first experience group.

Note: Authority cited: Sections 742.43, 779.21, ~~40195.1~~, 10192.3, 10234, 10327, 10506, 10704 and 12973.9, California Insurance Code. Reference: Sections 742.42, 779.8, 795.5, 1320, 10112.5, 10163.35, ~~40195.1~~, 10192.15, ~~40195.45~~, ~~40195.65~~, 10192.19, 10205, 10225, 10231.2, 10231.6, 10232, 10236.11, 10236.13, 10270, 10270.1, 10270.2, 10270.3, 10270.5, 10270.507, 10270.57, 10270.9, 10270.93, 10290, 10292, 10436, 10506, 10705, 10717, 11011, ~~11027~~, ~~11029~~, 11066, 11069 and 11658, California Insurance Code.