## DRAFT ONLY NOT APPROVED FOR INTRODUCTION

Insurance-financial reporting requirements.

Joint Corporations, Elections and Political Sponsored by: Subdivisions Interim Committee

## A BILL

- for 1 AN ACT relating to insurance companies; providing for 2 independence of certified public accountants completing 3 audits; providing for audit committees; providing for conduct of insurers preparing financial statements; 4 5 providing for management reports of internal control over 6 financial reporting; and providing for an effective date. 7 8 Be It Enacted by the Legislature of the State of Wyoming: 9
- 10 **Section 1.** W.S. 26-3-315 through 26-3-317 are created
- to read: 11

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26-3-315. Requirements for audit committees. 13

1

2 (a) An audit committee shall be directly responsible 3 for the appointment, compensation and oversight of the work

4 of any accountant, including resolution of disagreements

5 between management and the accountant regarding financial

6 reporting, employed for the purpose of preparing or issuing

7 the audited financial report or related work pursuant to

8 this article and each accountant shall report directly to

9 the audit committee.

10

11 (b) Each member of the audit committee shall be a 12 member of the board of directors of the insurer or a member

13 of the board of directors of an entity elected pursuant to

14 W.S. 26-3-315 (e) and 26-3-302 (a) (vi).

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16 In order to be considered independent (C) purposes of this section, a member of the audit committee 17 18 shall not, other than in his capacity as a member of the audit committee, the board of directors or any other board 19 20 committee, accept any consulting, advisory or other compensatory fee from the entity or be an affiliated person 21 of the entity or any subsidiary thereof. If any other 22

provision of law requires board participation by otherwise

1 non-independent members, that law shall prevail and such

2 members may participate in the audit committee and be

3 designated as independent for audit committee purposes

4 unless they are an officer or employee of the insurer or

5 one (1) of its affiliates.

6

7 (d) If a member of the audit committee ceases to be

8 independent for reasons outside the member's reasonable

9 control, that person, with notice by the responsible entity

10 to the state, may remain an audit committee member of the

11 responsible entity until the earlier of the next annual

12 meeting of the responsible entity or one (1) year from the

13 occurrence of the event that caused the member to be no

14 longer independent.

15

16 (e) To exercise the election of the controlling

17 person to designate the audit committee for purposes of

18 this article, the ultimate controlling person shall provide

19 written notice to the commissioners of the affected

20 insurers. Notification shall be made timely prior to the

21 issuance of the statutory audit report and include a

22 description of the basis for the election. The election

23 may be changed through notice to the commissioner by the

1	insurer	which	shall	include	а	description	of	the	basis	for

- 2 the change. The election shall remain in effect for
- 3 perpetuity, until rescinded.

- 5 (f) The audit committee shall require the accountant
- 6 that performs for an insurer any audit required by this
- 7 article to timely report to the audit committee in
- 8 accordance with the requirements of SAS 61, Communication
- 9 with Audit Committees, or its replacement, including:

10

- \*\*\* Staff note: Should we have a definition of SAS
- 12 **61? \*\*\***

13

- 14 (i) All significant accounting policies and
- 15 material permitted practices;

16

- 17 (ii) All material alternative treatments of
- 18 financial information within statutory accounting
- 19 principles that have been discussed with management
- 20 officials of the insurer, ramifications of the use of the
- 21 alternative disclosures and treatments and the treatment
- 22 preferred by the accountant; and

1 (iii) Other material written communications

2 between the accountant and the management of the insurer,

3 such as any management letter or schedule of unadjusted

4 differences.

5

6 (g) If an insurer is a member of an insurance holding

7 company system the reports required under subsection (f) of

8 this section may be provided to the audit committee on an

9 aggregate basis for insurers in the holding company system,

10 provided that any substantial differences among insurers in

11 the system are identified to the audit committee.

12

14

13 (h) The proportion of independent audit committee

members shall meet or exceed the following criteria, except

15 that the commissioner has authority afforded by state law

16 to require the entity's board to enact improvements to the

17 independence of the audit committee membership if the

18 insurer is in a RBC action level event, meets one (1) or

19 more of the standards of an insurer deemed to be in

20 hazardous financial condition or otherwise exhibits

21 qualities of a troubled insurer:

1 (i) For insurers with prior calendar year direct

2 written and assumed premiums of three hundred million

3 dollars (\$300,000,000.00) or less there is no minimum

4 requirement, however such insurers are encouraged to

5 structure their audit committees with at least a

6 supermajority of independent audit committee members;

7

8 (ii) For insurers with prior calendar year

9 direct written and assumed premiums of between three

10 hundred million dollars (\$300,000,000.00) and five hundred

11 million dollars (\$500,000,000.00) the audit committee shall

12 have a majority of members that are independent and such

13 insurers are encouraged to structure their audit committees

14 with at least a supermajority of independent audit

15 committee members;

16

17 (iii) For insurers with prior calendar year

18 direct written and assumed premiums of more than five

19 hundred million dollars (\$500,000,000.00) at least seventy-

20 five percent (75%) of the members of the audit committee

21 shall be independent;

1 (iv) For purposes of this subsection, prior

2 calendar year direct written and assumed premiums shall be

3 the combined total of direct premiums and assumed premiums

4 from non-affiliates for the reporting entities.

5

6 (j) An insurer with direct written and assumed

7 premiums, excluding premiums reinsured with the Federal

8 Crop Insurance Corporation and Federal Flood Program, less

9 than five hundred million dollars (\$500,000,000.00) may

10 make application to the commissioner for a waiver from the

11 requirements of this section based on hardship. The

12 insurer shall file, with its annual statement filing, the

13 approval for relief from this section with the states that

14 it is licensed in or doing business in and the NAIC. If

15 the nondomestic state accepts electronic filing with the

16 NAIC, the insurer shall file the approval in an electronic

17 format acceptable to the NAIC.

18

19 (k) This section shall not apply to foreign or alien

20 insurers licensed in this state or an insurer that is a SOX

21 compliant entity or a direct or indirect wholly-owned

22 subsidiary of a SOX compliant entity.

1	(m) The requirements of this section shall be in
2	effect beginning January 1, 2010. An insurer or group of
3	insurers that is not required to have independent audit
4	committee members or only a majority of independent audit
5	committee members because the total written and assumed
6	premium is below the threshold and subsequently becomes
7	subject to any of the independence requirements due to
8	changes in premiums shall have one (1) year following the
9	year the threshold is exceeded to comply with the
10	independence requirements. An insurer that becomes subject
11	to any of the independence requirements as a result of a
12	business combination shall have one (1) calendar year
13	following the date of acquisition or combination to comply
14	with the independence requirements.

15

26-3-316. Conduct of insurer in connection with preparation of required reports and documents.

18

19 (a) No director or officer of an insurer shall, 20 directly or indirectly:

21

22 (i) Make or cause to be made a materially false 23 or misleading statement to an accountant in connection with 1 any audit, review or communication required under this

2 article; or

3

4 (ii) Omit to state or cause another person to

5 omit to state any material fact necessary in order to make

6 statements made, in light of the circumstances under which

7 the statements were made, not misleading to an accountant

8 in connection with any audit, review or communication

9 required under this article.

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11 No officer or director of an insurer or any other (b) person acting under the direction thereof shall directly or 12 13 indirectly take any action to coerce, manipulate, mislead 14 or fraudulently influence any accountant engaged in the performance of an audit pursuant to this article if that 15 person knew or should have known that the action, if 16 successful, could result in rendering the 17 insurer's 18 financial statements materially misleading. For purposes 19 of this subsection, actions that, if successful, could 20 result in rendering the insurer's financial statements materially misleading include, but are not limited to, 21

actions taken at any time with respect to the professional

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1	engagement period to coerce, manipulate, mislead or
2	fraudulently influence an accountant to:
3	
4	(i) Issue or reissue a report on an insurer's
5	financial statements that is not warranted in the
6	circumstances due to material violations of statutory
7	accounting principles prescribed by the commissioner,
8	generally accepted auditing standards or other professional
9	or regulatory standards;
10	
11	(ii) Not perform any audit, review or other
12	procedures required by generally accepted auditing
13	standards or other professional standards;
14	
15	(iii) Not withdraw an issued report; or
16	
17	(iv) Not communicate matters to an insurer's
18	audit committee.
19	
20	(c) Violation of this section shall be punishable as
21	provided in W.S. 26-1-107.

1 26-3-317. Management's report of internal control

2 over financial reporting.

preceding December 31.

3

4 Every insurer required to file an audited (a) 5 financial report pursuant to this article that has annual 6 direct written and assumed premiums, excluding premiums 7 reinsured with the Federal Crop Insurance Corporation and Federal Flood Program, of five hundred million dollars 8 9 (\$500,000,000.00) or more shall prepare a report of the insurer's or group of insurers' internal control over 10 11 financial reporting. The report shall be filed with the 12 commissioner along with the communication of internal control related matters noted in an audit described in W.S. 13 14 26-3-310. Management's report of internal control over

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18 (b) Notwithstanding the premium threshold in 19 subsection (a) of this section, the commissioner may 20 require an insurer to file management's report of internal 21 control over financial reporting if the insurer is in any 22 RBC level event or meets any one (1) or more of the

financial reporting shall be dated as of the immediately

1 standards of an insurer deemed to be in hazardous financial

2 condition as defined in W.S. 26-3-116.

3

(c) An insurer or group of insurers that is directly 4 5 subject to Section 404, part of a holding company system 6 whose parent is directly subject to Section 404, not 7 directly subject to Section 404 but is a SOX compliant entity or a member of a holding company system whose parent 8 9 is not directly subject to Section 404 but is a SOX 10 compliant entity may file its or its parent's Section 404 11 report and an addendum in satisfaction of this section 12 provided that those internal controls of the insurer or 13 group of insurers having material impact on the preparation 14 of the insurer's or group of insurers' audited statutory 15 financial statements were included in the scope of the Section 404 report. The addendum shall be a positive 16 that there 17 statement by management are no material 18 processes with respect to the preparation of the insurer's 19 or group of insurers' audited financial statements excluded 20 from the Section 404 report. If there are internal 21 controls of the insurer or group of insurers that have a material impact on the preparation of the insurer's or 22 group of insurers' audited statutory financial statements 23

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1 and those internal controls were not included in the scope

2 of the Section 404 report, the insurer or group of insurers

3 may either file a report under this section or the Section

4 404 report and a report under this section for those

5 internal controls that have a material impact on the

6 preparation of the insurer's or group of insurers' audited

7 statutory financial statements not covered by the Section

8 404 report.

9

10 (d) A management's report of internal control over

11 financial reporting shall include:

12

13 (i) A statement that management is responsible

14 for establishing and maintaining adequate internal control

15 over financial reporting;

16

17 (ii) A statement that management has established

18 internal control over financial reporting and an assertion

19 to the best of management's knowledge and belief, after

20 diligent inquiry, as to whether its internal control over

21 financial reporting is effective to provide reasonable

22 assurance regarding the reliability of financial statements

23 in accordance with statutory accounting principles;

2 (iii) A statement that briefly describes the

3 approach or processes by which management evaluated the

4 effectiveness of its internal control over financial

5 reporting;

6

7 (iv) A statement that briefly describes the

8 scope of work that is included and whether any internal

9 controls were excluded;

10

11 (v) Disclosure of any unremediated material

12 weaknesses in the internal control over financial reporting

13 identified by management as of the immediately preceding

14 December 31. Management is not permitted to conclude that

15 the internal control over financial reporting is effective

16 to provide reasonable assurance regarding the reliability

17 of financial statements in accordance with statutory

18 accounting principles if there is one (1) or more

19 unremediated material weakness in its internal controls

20 over financial reporting;

21

22 (vi) A statement regarding the inherent

23 limitations of internal control systems; and

2 (vii) Signatures of the chief executive officer

3 and the chief financial officer or the equivalent position.

4

5 (e) Management shall document and make available upon

6 financial condition examination the basis upon which its

7 assertions required in subsection (d) of this section are

8 made. Management may base its assertions, in part, upon

9 its review, monitoring and testing of internal controls

10 undertaken in the normal course of its activities.

11 Management shall have discretion as to the nature of the

12 internal control framework used and the nature and extent

13 of documentation in order to make its assertions in a cost

14 effective manner and may include assembly of or reference

15 to existing documentation. Management's report on internal

16 control over financial reporting and any documentation

17 provided in support thereof during the course of a

18 financial conditions examination shall be kept confidential

19 by the department.

20

21 (f) The requirements of this section are effective

22 beginning with the reporting period ending December 31,

23 2010 and each year thereafter. An insurer or group of

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- 1 insurers that is not required to file a report because the
- 2 total written premium is below the threshold and
- 3 subsequently becomes subject to the reporting requirements
- 4 shall have two (2) years following the year the threshold
- 5 is exceeded to file a report. An insurer that becomes
- 6 subject to any of the reporting requirements as a result of
- 7 a business combination shall have two (2) calendar years
- 8 following the date of acquisition or combination to comply
- 9 with the reporting requirements.

- 11 **Section 2.** W.S. 26-3-301 through 26-3-314 are amended
- 12 to read:

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14 **26-3-301.** Scope of article.

- 16 (a) Every insurer as defined by W.S. 26-1-102(a)(xvi)
- 17 shall be subject to this article. Insurers having direct
- 18 premiums written in this state of less than one million
- 19 dollars (\$1,000,000.00) in any calendar year or and less
- 20 than one thousand (1,000) policyholders or certificate
- 21 holders of directly direct written policies nationwide at
- 22 the end of a calendar year shall be exempt from this

1 article for that year except an insurer shall not be exempt 2 if:

3

4 (b) Foreign or alien insurers filing the audited 5 financial reports report in another state, pursuant to that state's requirement for filing of audited financial reports 6 7 which has been found by the commissioner to be substantially similar to the requirements of this article, 8 9 are exempt from this article W.S. 26-3-304 through 26-3-312 10 if:

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the report on significant (i) A copy of deficiencies in internal controls, audited financial report, communication of internal control related matters noted in an audit and the accountant's letter of qualifications which are filed with the other state are filed with the commissioner and a copy of the audited financial report which is on file with the other state is National Association of filed with the Commissioners in accordance with the filing dates specified in W.S. 26-3-303, 26-3-310 and 26-3-311, respectively. Canadian insurers may submit accountants' reports as filed with the Canadian dominion department of insurance office

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    of the superintendent of financial institutions, Canada;
2
    and
3
        (d) Foreign or alien insurers required to file
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    management's report of internal control over financial
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    reporting in another state are exempt from filing the
7
    report in this state provided the other state has
8
    substantially similar reporting requirements and the report
9
    is filed with the commissioner of the other state within
10
    the time specified.
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12
        26-3-302. Definitions.
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         (a)
             As used in this article:
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             (iv) "Insurer" means
                                          defined
                                      as
                                                    in
                                                        W.S.
17
    26-1-102(a)(xvi);-
18
19
             (v) "Affiliate of" or "affiliated with" a
    specific person means a person that directly, or indirectly
20
21
    through one (1) or more intermediaries, controls or is
22
    controlled by or is under common control with the person
23
    specified;
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procedures that:

1	
2	(vi) "Audit committee" means a committee
3	established by the board of directors of an entity for the
4	purpose of overseeing the accounting and financial
5	reporting processes of an insurer or group of insurers and
6	audits of financial statements of the insurer or group of
7	insurers. The audit committee of any entity that controls
8	a group of insurers may be deemed to be the audit committee
9	for one (1) or more of these controlled insurers solely for
10	the purposes of this regulation at the election of the
11	controlling person. If an audit committee is not
12	designated by the insurer, the insurer's entire board of
13	directors shall constitute the audit committee;
14	
15	(vii) "Independent board member" means as
16	defined in W.S. 26-3-315(c);
17	
18	(viii) "Internal control over financial
19	reporting" means a process effected by an entity's board of
20	directors, management and other personnel designed to
21	provide reasonable assurance regarding the reliability of
22	the financial statements and includes those policies and

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2	(A) Pertain to the maintenance of records
3	that, in reasonable detail, accurately and fairly reflect
4	the transactions and dispositions of assets;
5	
6	(B) Provide reasonable assurance that
7	transactions are recorded as necessary to permit
8	preparation of the financial statements and that receipts
9	and expenditures are being made only in accordance with
10	authorizations of management and directors; and
11	
12	(C) Provide reasonable assurance regarding
13	prevention or timely detection of unauthorized acquisition,
14	use or disposition of assets that could have a material
15	effect on the financial statements.
16	
17	(ix) "Group of insurers" means those licensed
18	insurers included in the reporting requirements of W.S. 26-
19	44-101 through 26-44-117 or a set of insurers as identified
20	by management, for the purpose of assessing the

effectiveness of internal control over financial reporting;

1	(x) "SEC" means the United States Securities and
2	Exchange Commission;
3	
4	(xi) "Section 404" means section 404 of the
5	Sarbanes-Oxley Act of 2002 and the SEC's rules and
6	regulations promulgated thereunder;
7	
8	(xii) "Section 404 report" means management's
9	report on internal control over financial reporting as
10	defined by the SEC and the related attestation report of
11	the independent certified public accountant;
12	
13	(xiii) "SOX compliant entity" means an entity
14	that either is required to be compliant with or voluntarily
15	is compliant with all of the following provisions of the
16	Sarbanes-Oxley Act of 2002:
17	
18	(A) The preapproval requirements of Section
19	<u>201;</u>
20	
21	(B) The audit committee independence
22	requirements of Section 301; and
23	

1	(C) The internal control over financial
2	reporting requirements of Section 404.
3	
4	26-3-303. General requirements related to filing and
5	extensions for filing of annual audited financial reports;
6	audit committee appointment.
7	
8	(a) All insurers shall have an annual audit by an
9	independent certified public accountant and shall file an
10	audited financial report with the commissioner on or before
11	June 1 for the immediately preceding calendar year. The
12	commissioner may require an insurer to file an audited
13	financial report earlier than June 1 with ninety (90) days
14	advance notice to the insurer.
15	
16	(b) Extensions of the June 1 filing date may be
17	granted by the commissioner for thirty (30) day periods
18	upon a showing by the insurer and its independent certified
19	public accountant of the reasons for requesting the
20	extension and a determination by the commissioner there is
21	good cause for an extension. The request for extension
22	shall be submitted in writing not less than ten (10) days
23	prior to the due date in sufficient detail to permit the

1	commissioner to make an informed decision with respect to
2	the requested extension.
3	
4	(c) If an extension is granted in accordance with
5	subsection (b) of this section, a similar extension of
6	thirty (30) days is granted to the filing of the
7	management's report of internal control over financial
8	reporting.
9	
10	(d) Every insurer required to file an annual audited
11	financial report pursuant to this section shall designate a
12	group of individuals as constituting its audit committee.
13	The audit committee of an entity that controls an insurer
14	may be deemed to be the insurer's audit committee for
15	purposes of this article at the election of the controlling
16	person.
17	
18	26-3-305. Designation of independent certified public
19	accountant.

(a) Each insurer required by this article to file an 21 annual audited financial report shall within sixty (60) 22 days after becoming subject to the requirement, register 23

1 with the commissioner in writing the name and address	writing the name and addres	writing	in	commissioner	the	with	1
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- 2 the independent certified public accountant or accounting
- 3 firm retained to conduct the annual audit. Insurers not
- 4 retaining an independent certified public accountant on or
- 5 before April 1, 1994 shall register the name and address of
- 6 their retained independent certified public accountant not
- 7 less than six (6) months before the date when the first
- 8 audited financial report is to be filed.

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## 10 26-3-306. Qualifications of independent certified

11 public accountant.

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- 13 (a) The commissioner shall not recognize any person
- 14 or firm as a qualified independent certified public
- 15 accountant if that person or firm:

16

- 17 (i) Is not in good standing with the American
- 18 Institute of Certified Public Accountants and in all states
- 19 in which the accountant is licensed to practice, or, for a
- 20 Canadian or British company, that is not a chartered
- 21 accountant; or

1 (ii) Has either directly or indirectly entered

2 into an agreement of indemnification with respect to the

3 audit of the insurer.

4

5 Except as otherwise provided in this section, the 6 commissioner shall recognize an independent certified 7 public accountant as qualified as long as he conforms to the standards of his profession, as contained in the code 8 professional ethics of the American Institute of 9 10 Certified Public Accountants and rules and regulations and 11 code of ethics and rules of professional conduct of the 12 Wyoming board of certified public accountants, or similar

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code.

responsible for rendering a report under this article After

January 1, 2010, the lead or coordinating audit partner

having primary responsibility for the audit shall not act

in that capacity for more than seven (7)—five (5)

consecutive years. Following that period of service the

person shall be disqualified from acting The person shall

be disqualified from acting in that or a similar capacity

for the same company or its insurance subsidiaries or

1	affiliates for a period of two (2) five (5) consecutive
2	years. An insurer may make application to the commissioner
3	for relief from the rotation requirement on the basis of
4	unusual circumstances. This application shall be made at
5	least thirty (30) days before the end of the calendar year.
6	The insurer shall file with its annual statement, the
7	approval for relief pursuant to this subsection with the
8	states in which it is licensed or doing business and with
9	the NAIC. If the nondomestic state accepts electronic
10	filing with the NAIC, the insurer shall file the approval
11	in an electronic format acceptable to the NAIC. The
12	commissioner may consider the following factors in
13	determining whether the relief should be granted:
14	
15	(i) Number of partners, expertise of the
16	partners or the number of insurance clients in the
17	currently registered firm;
18	
19	(ii) Premium volume of the insurer; or
20	
21	(iii) Number of jurisdictions in which the
2.2	insurer transacts business.

1 (d) The commissioner shall not neither recognize as a qualified independent certified public accountant, nor 2 3 accept any annual audited financial report, prepared in whole or in part by, any natural person who: 4 5 6 (i) Has been convicted of fraud, bribery, a 7 violation of the Racketeer Influenced and Corrupt Organizations Act, 18 U.S.C. Sections 1961 through 1968, or 8 any dishonest conduct or practices under federal or state 9 10 law; 11 12 been found to have violated the (ii) Has 13 insurance laws of this state with respect to any previous 14 reports submitted under this article; or 15 16 (iii) Has demonstrated a pattern or practice of failing to detect or disclose material information in 17 18 previous reports filed under the provisions of this 19 article. 20 21 (e) The commissioner may hold a hearing to determine whether a an independent certified public accountant is 22

qualified and, considering the evidence presented, may rule

1	t.hat.	the	accountant	is	not.	qualified	for	purposes	of
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- 2 expressing his opinion on the financial statements in the
- 3 annual audited financial report made pursuant to this
- 4 article and require the insurer to replace the accountant
- 5 with another whose relationship with the insurer is
- 6 qualified within the meaning of this article.

7

- 8 (f) A qualified independent certified public
- 9 accountant may enter into an agreement with an insurer to
- 10 have disputes relating to an audit resolved by mediation or
- 11 arbitration. However, in the event of a delinquency
- 12 proceeding commenced against the insurer under chapter 28
- 13 of this code, the mediation or arbitration provisions shall
- 14 operate at the option of the statutory successor.

15

- 16 (g) The commissioner shall not recognize as a
- 17 qualified independent certified public accountant, nor
- 18 accept an annual audited financial report, prepared in
- 19 whole or in part by an accountant who provides to an
- 20 insurer, contemporaneously with the audit, the following
- 21 non-audit services:

1 Bookkeeping or other services related to the (i) accounting records or financial statements of the insurer; 2 3 4 Financial information systems design and (ii) 5 implementation; 6 7 (iii) Appraisal or valuation services, fairness 8 opinion or contribution-in-kind reports; 9 10 (iv) Actuarially-oriented advisory services 11 involving the determination of amounts recorded in the 12 financial statements. The accountant may assist an insurer in understanding the methods, assumptions and inputs used 13 14 in the determination of amounts recorded in the financial 15 statement only if is reasonable to conclude that the services provided will not be subject to audit procedures 16 17 during an audit of the insurer's financial statements. An 18 accountant's actuary may also issue an actuarial opinion or certification on an insurer's reserves if the following 19 20 conditions have been met: 21

Τ	(A) Neither the accountant nor the
2	accountant's actuary has performed any management functions
3	or made any management decisions;
4	
5	(B) The insurer has competent personnel or
6	engages a third party actuary to estimate the reserves for
7	which management takes responsibility; and
8	
9	(C) The accountant's actuary tests the
10	reasonableness of the reserves after insurer's management
11	has determined the amount of the reserves.
12	
13	(v) Internal audit outsourcing services;
14	
15	(vi) Management functions or human resources;
16	
17	(vii) Broker or dealer, investment adviser or
18	investment banking services;
19	
20	(viii) Legal services or expert services
21	unrelated to the audit; or
22	

1 (ix)Any other services that the commissioner 2 determines by regulation to be impermissible. In 3 determining whether other services are impermissible, the 4 commissioner shall consider the principle that the accountant may not function in the role of management, may 5 not audit his own work and may not serve in an advocacy 6 7 role for the insurer. 8 9 (h) Insurers having direct written and assumed 10 premiums of less than one hundred million dollars 11 (\$100,000,000.00) in any calendar year may request an 12 exemption from subsection (g) of this section. The insurer 13 shall file with the commissioner a written statement 14 discussing the reasons why the insurer should be exempt 15 from subsection (g) of this section. If the commissioner finds, upon review of the statement, that compliance with 16 17 subsection (g) of this section would constitute a financial 18 or organizational hardship on the insurer, an exemption may be granted. 19 20 21 independent certified public (j) A qualified 22 accountant who performs the audit may engage in other non-23 audit services, including tax services, that are not

activity is approved in advance by the audit committee  accordance with subsection (k) of this section.  (k) All auditing services and non-audit service  provided to an insurer by the qualified independ  certified public accountant of the insurer shall  preapproved by the audit committee. The preapprovence requirement shall be waived with respect to non-audit services if the insurer is a SOX compliant entity or direct or indirect wholly-owned subsidiary of a service of the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services provided to the insurer constitutes not more than the services and non-audit	1	described in subsection (g) of this section or that do not
accordance with subsection (k) of this section.  (k) All auditing services and non-audit services provided to an insurer by the qualified independence of the insurer shall preapproved by the audit committee. The preapproved requirement shall be waived with respect to non-audit services if the insurer is a SOX compliant entity or direct or indirect wholly-owned subsidiary of a service provided to the insurer constitutes not more to five percent (5%) of the total amount of fees paid by insurer to its qualified independent certified publications are provided;	2	conflict with paragraph (g)(ix) of this section only if the
(k) All auditing services and non-audit services provided to an insurer by the qualified independence of the insurer shall preapproved by the audit committee. The preapprover requirement shall be waived with respect to non-audit services if the insurer is a SOX compliant entity or direct or indirect wholly-owned subsidiary of a service provided to the insurer constitutes not more the five percent (5%) of the total amount of fees paid by insurer to its qualified independent certified publications are provided;	3	activity is approved in advance by the audit committee in
6 (k) All auditing services and non-audit services provided to an insurer by the qualified independence of the insurer shall services if the audit committee. The preapprovided requirement shall be waived with respect to non-audit services if the insurer is a SOX compliant entity or direct or indirect wholly-owned subsidiary of a service of a compliant entity or if:  (i) The aggregate amount of all non-audit services provided to the insurer constitutes not more the five percent (5%) of the total amount of fees paid by insurer to its qualified independent certified publications are provided;	4	accordance with subsection (k) of this section.
provided to an insurer by the qualified independence of the insurer shall preapproved by the audit committee. The preapproved to requirement shall be waived with respect to non-audit services if the insurer is a SOX compliant entity or direct or indirect wholly-owned subsidiary of a compliant entity or if:  (i) The aggregate amount of all non-audit services provided to the insurer constitutes not more that five percent (5%) of the total amount of fees paid by insurer to its qualified independent certified public accountant during the fiscal year in which the non-audit services are provided;	5	
8 certified public accountant of the insurer shall 9 preapproved by the audit committee. The preapprovence of the preapprovence of the insurer is a SOX compliant entity or direct or indirect wholly-owned subsidiary of a second compliant entity or if:  14 (i) The aggregate amount of all non-audit of the percent (5%) of the total amount of fees paid by insurer to its qualified independent certified public accountant during the fiscal year in which the non-audit of services are provided;	6	(k) All auditing services and non-audit services
preapproved by the audit committee. The preapproved requirement shall be waived with respect to non-audit services if the insurer is a SOX compliant entity or direct or indirect wholly-owned subsidiary of a second compliant entity or if:  (i) The aggregate amount of all non-audit services provided to the insurer constitutes not more the five percent (5%) of the total amount of fees paid by insurer to its qualified independent certified publication accountant during the fiscal year in which the non-audit services are provided;	7	provided to an insurer by the qualified independent
requirement shall be waived with respect to non-auditions services if the insurer is a SOX compliant entity or direct or indirect wholly-owned subsidiary of a scompliant entity or if:  (i) The aggregate amount of all non-auditions provided to the insurer constitutes not more the five percent (5%) of the total amount of fees paid by insurer to its qualified independent certified publications accountant during the fiscal year in which the non-audition services are provided;	8	certified public accountant of the insurer shall be
services if the insurer is a SOX compliant entity or direct or indirect wholly-owned subsidiary of a scompliant entity or if:  (i) The aggregate amount of all non-auditive percent (5%) of the total amount of fees paid by insurer to its qualified independent certified public accountant during the fiscal year in which the non-auditive services are provided;	9	preapproved by the audit committee. The preapproval
direct or indirect wholly-owned subsidiary of a compliant entity or if:  (i) The aggregate amount of all non-auditions are provided to the insurer constitutes not more the five percent (5%) of the total amount of fees paid by insurer to its qualified independent certified publications accountant during the fiscal year in which the non-auditions are provided;	10	requirement shall be waived with respect to non-audit
compliant entity or if:  (i) The aggregate amount of all non-auc services provided to the insurer constitutes not more the five percent (5%) of the total amount of fees paid by insurer to its qualified independent certified publications accountant during the fiscal year in which the non-auc services are provided;	11	services if the insurer is a SOX compliant entity or a
(i) The aggregate amount of all non-auditions are provided to the insurer constitutes not more to five percent (5%) of the total amount of fees paid by insurer to its qualified independent certified public accountant during the fiscal year in which the non-audition services are provided;	12	direct or indirect wholly-owned subsidiary of a SOX
(i) The aggregate amount of all non-auditions are provided to the insurer constitutes not more that five percent (5%) of the total amount of fees paid by insurer to its qualified independent certified publications accountant during the fiscal year in which the non-audition services are provided;	13	compliant entity or if:
services provided to the insurer constitutes not more the five percent (5%) of the total amount of fees paid by insurer to its qualified independent certified public accountant during the fiscal year in which the non-audient services are provided;	14	
five percent (5%) of the total amount of fees paid by insurer to its qualified independent certified public accountant during the fiscal year in which the non-auditory services are provided;	15	(i) The aggregate amount of all non-audit
insurer to its qualified independent certified publications accountant during the fiscal year in which the non-august services are provided;	16	services provided to the insurer constitutes not more than
accountant during the fiscal year in which the non-auc services are provided;	17	five percent (5%) of the total amount of fees paid by the
services are provided; 21	18	insurer to its qualified independent certified public
21	19	accountant during the fiscal year in which the non-audit
	20	services are provided;
22 *** Staff note: "and" or "or"? ***	21	
	22	*** Staff note: "and" or "or"? ***

1 (ii) The services were not recognized by the 2 insurer at the time of the engagement to be non-audit 3 services. 4 5 The audit committee may delegate to one (1) or 6 more designated members of the audit committee the 7 authority to grant the preapprovals required under 8 paragraph (k)(iii) of this section. The decisions of any 9 member to whom this authority is delegated shall be 10 presented to the full audit committee at each of its 11 scheduled meetings. 12 13 The commissioner shall not recognize 14 independent certified public accountant as qualified for a 15 particular insurer if a member of the board, president, chief executive officer, controller, chief financial 16 17 officer, chief accounting officer or any person serving in 18 an equivalent position for that insurer was employed by the independent certified public accountant and participated in 19 the audit of that insurer during the one (1) year period 20 preceding the date that the most current statutory opinion 21 22 is due. This subsection shall only apply to partners and 23 senior managers involved in the audit. An insurer may make

- 1 application to the commissioner for relief from this
- 2 subsection on the basis of unusual circumstances. The
- 3 insurer shall file with its annual statement filing the
- 4 approval for relief under this subsection with the states
- 5 that it is licensed in or doing business in and with the
- 6 NAIC. If the nondomestic state accepts electronic filing
- 7 with the NAIC, the insurer shall file the approval in an
- 8 electronic format acceptable to the NAIC.

- 10 26-3-308. Scope of audit and report of independent
- 11 certified public accountant.

- 13 Financial statements furnished pursuant to W.S. 26-3-304
- 14 shall be examined by an the independent certified public
- 15 accountant. The examination—audit of the insurer's
- 16 financial statements shall be conducted in accordance with
- 17 generally accepted auditing standards. In accordance with
- 18 AU Section 319 of the professional standards of the
- 19 American Institute of Certified Public Accountants,
- 20 Consideration of Internal Control in a Financial Statement
- 21 Audit, the independent certified public accountant shall
- 22 obtain an understanding of internal control sufficient to
- 23 plan the audit. To the extent required by AU 319, for

1 those insurers required to file a management's report of

2 <u>internal control over financial reporting pursuant to W.S.</u>

3 26-3-317, the independent certified public accountant shall

4 consider the most recently available report in planning and

5 performing the audit of the statutory financial statements.

6 Consideration shall be given to the procedures illustrated

7 in the financial condition examiner's handbook promulgated

8 by the National Association of Insurance Commissioners as

9 the independent certified public accountant deems

10 necessary.

11

12 **26-3-309.** Notification of adverse financial

13 condition.

14

15 (a) An insurer required to furnish an annual audited

16 financial report shall require the independent certified

17 public accountant to report, in writing, within five (5)

18 business days to the board of directors or its audit

19 committee any determination supported by adequate research

20 conducted by the independent certified public accountant:

21

22 (i) That the insurer has materially misstated

23 its financial condition reported to the commissioner as of

1 the balance sheet date currently under examination audit;

2 or

4 (ii) That the insurer does not meet the minimum

5 capital and surplus requirement of this code as of that

6 date.

8 26-3-310. Communication of internal control related

9 matters noted in an audit.

statements report, each insurer shall furnish the commissioner with a written report prepared by the accountant describing significant deficiencies in the insurer's communication as to any unremediated material weakness, as defined in statement on auditing standard 60 or its replacement, in its internal control structure—over financial reporting noted by the accountant during the audit. No additional report shall be issued if the accountant does not identify significant deficiencies. If significant deficiencies are noted, the written report shall be filed annually by the insurer with the department Such communication shall be prepared by the accountant

within sixty (60) days after the filing of the annual 1 2 audited financial statements report and shall contain a description of any unremediated material weakness as of 3 December 31 immediately preceding in the insurer's internal 4 5 control over financial reporting noted by the accountant during the course of the audit of the financial statements. 6 7 If no remediated material weaknesses were noted, the communication shall so state. The insurer shall provide a 8 9 description of remedial actions taken or proposed to 10 correct significant deficiencies unremediated material 11 weaknesses, if the actions are not described in the 12 accountant's report communication.

13

26-3-312. Definition, availability and maintenance of independent certified public accountants' workpapers.

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the (a) Workpapers are records kept by the independent certified public accountant of the procedures followed, the tests performed, the information obtained, and the conclusions reached pertinent to his examination audit of the financial statements of an insurer. Workpapers may include audit planning documentation, work programs, analyses, memoranda, letters of confirmation and

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1 representation, abstracts of company documents and

2 schedules or commentaries prepared or obtained by the

3 independent certified public accountant in the course of

4 his examination audit of the financial statements of an

5 insurer and which support his opinion of those financial

6 statements.

7

8 (b) Every insurer required to file an audited 9 financial report pursuant to this article shall require the

10 accountant to make available for review by department

11 examiners, all workpapers prepared in the conduct of his

12 examination audit and any communications related to the

13 audit between the accountant and the insurer, at the

14 offices of the insurer, the department or at any other

15 reasonable place designated by the commissioner. The

16 insurer shall require that the accountant retain the audit

17 workpapers and communications until the department has

18 filed a report on examination covering the period of the

19 audit but no longer than seven (7) years from the date of

20 the audit report.

21

22 **26-3-313.** Exemptions and effective dates.

1	(a)	Upon v	written	applica	ation o	f an	y insurer,	the
2	commissio	ner may	grant	an exe	mption :	from	compliance	with
3	any or a	ll prov	isions o	f this	article	if	the commiss	sioner

4 finds, upon review of the application, that compliance with

5 this article would constitute a financial or organizational

6 hardship upon the insurer. Exemptions may be granted at

7 any time for a specified period. Within ten (10) days from

8 a denial of an insurer's written request for an exemption

9 from this article, the insurer may request in writing a

10 hearing on its application for an exemption. The hearing

11 shall be held in accordance with the rules and regulations

12 of the department pertaining to administrative hearing

13 procedures.

14

15 (b) Domestic insurers shall comply with this article

16 for the year ending December 31, 1993 and each year

17 thereafter unless the commissioner permits otherwise.

18

19 (c) Foreign insurers shall comply with this article

20 for the year ending December 31, 1994 and each year

21 thereafter, unless the commissioner permits otherwise.

1	*** Staff note: The model act provides for phase in
2	of the provisions. We need to know whether the
3	commissioner wants those provisions included. ***
4	
5	26-3-314. Canadian and British companies.
6	
7	In the case of Canadian and British insurers, the annual
8	audited financial report shall be defined as the annual
9	statement of total business on the form filed by such
10	companies with their domiciliary supervision authority duly
11	audited by an independent chartered accountant. For
12	Canadian and British insurers, the letter required in W.S.
13	26-3-305(b) shall state that the accountant is aware of the
14	requirements relating to the annual audited statement
15	financial report filed with the commissioner pursuant to
16	W.S. $26-3-303$ and shall affirm that the opinion expressed
17	is in conformity with those requirements.
18	
19	26-34-110. Annual report.
20	
21	(b) The health maintenance organization shall file on
22	or before March 1, unless otherwise stated:

1 (i) Audited financial statements in accordance with
2 the provisions of W.S. 26-3-301 through 26-3-314 26-3-317
3 on or before June 1;
4
5 Section 3. This act is effective January 1, 2010.
6
7 (END)