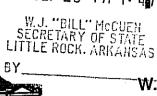
# ARKANSASEREGISTER DIV.

91 SEP 20 PM 1: Transmittal Sheet



W.J. "Bill" McCuen
Secretary of State

State Capitol Rm. 010

Little Rock, Arkansas 72201-1094

For Office Use Only:	Effective Date 9/1	/91 Code Number <u>054 00.91008</u>
Name of Ag	gency ARKANSAS	INSURANCE DEPARTMENT
Department	Legal Division	
Contact Per	rSON <u>J. Denhammccle</u>	ndon
Statutory Au	uthority for Promulgat	ing Rules Ark. Code Ann. §§23-61-108; 23-76-125; 25-15-202 et seq. and
Intended	Effective Date	Act 534 of 1983 Date
Emerge		Legal Notice Published
☐ 20 Day	rs After Filing	Final Date for Public Comment
Other		Filed With Legislative Council 9/19/91
Septe	ember 1, 1991	Reviewed by Legislative Council
		Adopted by State Agency
	CERTIFICATIO	N OF AUTHORIZED OFFICER
	I Hereby Certify T In Compliance	That The Attached Rules Were Adopted with Act 434 of 1967 As Amended.
	J. Al	Mullendon Signature
	<u>Associate</u>	Title
		9/ /9/9/ Date

004,00,41--008

### RULE AND REGULATION 31

# EDUCATIONAL REQUIREMENTS FOR INSURANCE AGENTS

# FILED AR. REGISTER DIV. 91 SEP 20 PM 1: 47 W.J. "BILL" MCCUEH SECRETARY OF STATE LITTLE ROCK, ARKANSAS BY

### SECTION

- 1. Purpose
- 2. Authority
- 3. Applicability and Scope
- 4. Effective Date
- 5. Course Requirements
- 6. Instructor Qualifications
- 7. Provider Requirements
- 8. Program Review
- 9. Licensing Procedure of Applicant
- 10. Completion of Course Requirements
- 11. Violations
- 12. Expiration Date
- 13. Severability

Appendices 1 to 4

### SECTION 1. PURPOSE

The purpose of this rule is to implement Act 534 of 1983, as amended by establishing curricula for courses of instruction required to be completed by applicants seeking insurance licenses in Arkansas, to establish criteria for approval of providers of the courses of instruction, to establish a mechanism of examination and review of the performance and quality of the instruction and to establish duties of The Insurance Advisory Examining Board.

### SECTION 2. AUTHORITY

The rule is used pursuant to the authority vested in the Commissioner under Ark. Code Ann.  $\S23-61-108$  (1987), 23-76-125 (1987), 25-15-202 (1987), et seq., and Act 534 of 1983, as amended.

### SECTION 3. APPLICABILITY AND SCOPE

This rule shall apply to all applicants seeking a license as an insurance agent, broker, solicitor, and consultant, and seeking a license as a health maintenance organization ("HMO") agent, except those specifically exempted pursuant to the provisions of Arkansas law. This rule is intended to complement the provisions of Rule and Regulation 35, "Agent License for Health Maintenance Organizations", and is not intended to supersede Regulation 35.

### SECTION 4. EFFECTIVE DATE

Under the emergency provisions of Ark. Code Ann. §25-15-204 (b) (Supp. 1991), it is hereby declared that the immediate adoption of this Rule is necessary to prevent any imminent peril to the public health, safety or welfare of the citizens of this State. Therefore, the effective date of this Rule is September 1. 1991.

### SECTION 5. COURSE REQUIREMENTS

- A. All candidates for an Arkansas life and/or disability agent's license, and for a health maintenance organization agents license are hereby required to complete a course of instruction with a minimum of 36 hours of classroom instruction which includes, but is not limited to, all of the following, as applicable:
  - 1. Life Policy Provisions
  - 2. Life Policy Options
  - 3. Whole Life, Term, and Endowment Life Insurance
  - 4. Annuity Contract Provisions
  - 5. Universal Life Insurance
  - 6. Credit Life
  - 7. Rate Making and Reverses
  - 8. Interest Adjusted Cost Index
  - 9. Disability Income
  - 10. Accident and Health
  - 11. Medicare Supplement Insurance
  - 12 Five hours of state regulation
- B. All candidates for a property and casualty license as agent, broker, solicitor, or consultant are hereby required to complete a course of instruction with a minimum of 36 hours of classroom instruction which includes all of the following:
  - 1. Fire and Allied Lines
  - 2. Homeowners and Dwelling
  - 3. Automobile-Private Passenger and Commercial
  - 4. Farmowners, Ranchowners
  - 5. Commercial Multi-Peril, Businessowners
  - 6. Workers' Compensation
  - 7. Medical Malpractice
  - 8. Liability, General, Garage Keepers, and Professional
  - 9. Inland Marine

- 10. Fidelity and Surety
- 11. Five hours of state regulation
- C. Any applicant for life, disability, and/or HMO license and the property/casualty agent's license may combine the five hours of instruction on state regulation.

### SECTION 6. INSTRUCTOR QUALIFICATION

- A. Instructors must have had specific insurance training or educational experience satisfactory to the Insurance Advisory Examining Board and approved by the State Insurance Commissioner in order to be certified to teach any part of an approved course. Each instructor must have five (5) or more years of specific insurance experience and/or education in each part of the insurance training program in which he instructs and must be approved prior to teaching any course, or any part of a course, by the Insurance Advisory Examining Board and the Insurance Commissioner. Applicants for approval as an instructor shall complete and submit Appendix 4 to the Insurance Advisory Examining Board c/o Arkansas Insurance Department.
- B. No person will be approved as an instructor who has received disciplinary action by the Arkansas Insurance Department, the Insurance Department of another state, or any similar regulatory body or court. The Commissioner shall have the authority to waive this requirement after a hearing to determine the applicant's qualifications.

### SECTION 7. PROVIDER REQUIREMENTS

- A. Application for approval as a provider shall be submitted to the Insurance Advisory Examining Board c/o Arkansas Insurance department not less than sixty (60) days prior to the expected use of the program. A provider shall include the following information in duplicate:
  - 1. Detailed description of the instruction program including a course outline and list of resource materials.
  - 2. Completion of Appendix 1 for the initial certification or completion of Appendix 2 upon any change in curriculum or instructor.
  - 3. Schedules of classes for all locations.
- B. Changes in class schedules are to be filed with the Insurance Department no later than two (2) weeks before each class begins.
- C. The Board may consider the type of facility to be used for training, the sufficiency of teaching aids, and the exclusive use of that portion of the facility being used for training in making a determination to certify the provider.

D. The provider shall maintain detailed attendance records for all students for all classes for three (3) years following completion of the classes. Rosters of attendees, including courses completed and completion dates, shall be maintained as a permanent record by course providers. These records may be reviewed by the Commissioner and the Board. In this regard, any studying which is not conducted under the direct supervision of the instructor at the facility during scheduled classes may not be credited toward completion of the required thirty-six (36) hours.

### SECTION 8. PROGRAM REVIEW

The Board and the Department shall have the authority to visit a training facility and review its program at anytime, including, but not limited to, curriculum records, and attendance records.

### SECTION 9. LICENSING PROCEDURE OF APPLICANT

- A. The required hours of classroom instruction may be completed prior to the date of the licensing examination, but not later than sixty (60) days after the license is issued. If the applicant fails to complete the required classroom instruction within sixty (60) days of licensing, the applicant will be required to apply as if he had never taken the insurance examination.
- B. The instructor or designated official of the provider is responsible for transmitting the certification of completion of required hours to the Insurance Department immediately upon the applicant's completion of the course. The instructor or designated official of the provider shall complete an original and one copy of each individual certification, Appendix 3, and forward to the Insurance Department with a self-addressed stamped envelope. The Insurance Department will return a copy indicating proof of receipt to the instructor or designated official of the provider. Failure of the instructor or the designated official of the provider to file the certification within the time required will be considered a violation of this Regulation.
- C. Certification must be on the form as shown in Appendix 3 and must be signed by the applicant and the instructor or designated official of the provider where more than one instructor is used. The Insurance Department must actually receive certification within sixty-five (65) days of the date the license is issued.
  - If the required certification is not received by the Insurance Department within sixty-five (65) days of the issuance of license, the license will be terminated. In such case where the applicant has actually completed the required classroom instruction within sixty (60) days of licensing, but the certification is not received by the Insurance Department within the required sixty-five (65) days, the course provider must pay an reappointment fees required prior to reissuance of the license.

### SECTION 10. COMPLETION OF COURSE REQUIREMENTS

Educational requirements must be completed no more than two (2) years prior to taking the license exam for course certification to be valid.

### SECTION 11. VIOLATIONS

Pursuant to the Administrative Procedures Act, approval of instructors and providers of instruction courses may be suspended or revoked for violations of this Regulation and pertinent provisions of the Arkansas Insurance Code upon notice and hearing.

### SECTION 12. EXPIRATION DATE

This Rule will expire three (3) years after it becomes effective if the Commissioner does not call a hearing thirty (30) days prior to the expiration date to determine whether this Rule should remain in effect, be revised, or allowed to expire. Notice of a hearing to determine whether this Rule should remain in effect, be revised, or allowed to expire shall be given in writing to all interested parties at least twenty (20) days prior to the hearing date.

### SECTION 13. SEVERABILITY

Any section or provision of this Rule held by a court to be invalid or unconstitutional will not affect the validity of any other section or provision of this Rule.

Lee Douglass

Insurance Commissioner

9-1-91

Date

TO:	Arkansas Insurance Department Licensing Division			
	University Tower Building			
	12th and University	)4 (SUBMIT IN DUPLICATE)		
	Little Rock, Alkansas /220	74 (DUBILL IN DULILIONILL)		
Name	of Training Facility			
Addr	ess			
	and Telephone Numberontact person			
Cour	se of Study	N-1-1-1-1		
(Pro	perty/Casualty or Life and I	Disability)		
Wher	e Course will be Held			
ATTA	CH FOLLOWING DOCUMENTS			
1) C	ourse Outline			
2) L	ist of Resources Materials			
3) N	ames of Instructors and Qual	ifications		
4) S	chedule of Classes pursuant	to Section 6		
5) N	ame of Instructor serving as	Designated Officials of the Provider		
		(Typed Name of Training Facility Official)		
		(Signature of Training Facility Official)		
		(Date)		
	POR	DEDAUTMENT HEE ONLY		
	APPROVED BY:	DEPARTMENT USE ONLY DATE:		
	DISAPPROVED BY:			

To: Arkansas Insurance Department Licensing Division University Tower Building 12th and University Little Rock, Arkansas 72204 (SUBMIT IN DUPLICATE)

### CHANGE IN CURRICULUM OR INSTRUCTOR

Name of Training Facility
Address
Name and Telephone Numberof contact person
The following changes have been made in our Course Curriculum and/or Instructors:
(Attach the Applicable Changes)
1) Course Outline
2) List of Resource Materials
3) Names of Instructors and Qualifications
4) Names of instructors serving as Designated Officials of Provider
(Typed Name of Training Facility Official)
(Signature of Training Facility Official)
(Date)
FOR DEPARTMENT USE ONLY
APPROVED BY: DATE:

To: Arkansas Insurance Department Licensing Division University Tower Building 12th and University Little Rock, Arkansas 72204

(SUBMIT IN DUPLICATE)

This is to certify that the following hours of classroom instruction in the a		ted 36
Name		
Address		
Agency or Company Sponsor		•
The course was conducted by (Name of A	pproved Training Facility_	
and was completed on	(Date)	
With classes held at the following time		
		•
		•
		• •
We acknowledge the falsifying this stat taken against us by the Arkansas Insura	ement will result in disciplinary nce Department.	action
(Signature of Student)	(Typed Name of Instructor)	
(Date Signed)	(Signature of Instructor)	
	(Date Signed)	

To: Arkansas Insurance Department Licensing Division University Tower Building 12th and University Little Rock, Arkansas 72204

(SUBMIT IN DUPLICATE)

## APPLICATION FOR APPROVAL AS INSTRUCTOR

1	Name				
	Address				
	Phone: Office ( )Home ( )				
2)	Name and Address of Current Employer				
3)	Name of Sponsoring Training Facility				
	Address				
4)	) Please list all resident and non-resident insurance licenses you currently hold as agent, broker, solicitor, consultant, adjuster, managing general agent, etc.:				
5)	Please summarize your insurance experience and training, totalling five (5) years (Attach additional sheets, if necessary):				
	Please summarize your insurance education, including, but not limited to college/university insurance course(s) hours; insurance seminars and training course(s); number of hours completed toward certifications such as CLU, CPCU, FLMI, LOMA, etc. (Attach additional sheets, as necessary):				

[Note: As specific training on insurance is a prerequisite, please <u>do not</u> include general education hours or degrees, such as BA or MBA Degrees in Business, Marketing, etc.]

7)	Instructor:
	ATTACH FOLLOWING DOCUMENTS:
b)	Resume or Curriculum Vitae if any; Appendix 2 completed by Training Facility Official; and As to non-resident applicants <u>only</u> , please attach written verification from your domiciliary state insurance department confirming that you have held an insurance license(s) for a minimum of five (5) years, and that your license(s) has not ever been suspended or revoked.
of	Name of Applicant Subscribed to and sworn or affirmed before me thisday
	Notary Public
Му	Commission expires
	FOR DEPARTMENT USE ONLY  APPROVED BY:  DATE:  DISAPPROVED BY:  DATE: