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State of Minnesota

Printed Page No.

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HOUSE OF REPRESENTATIVES

NINETY-FOURTH SESSION

H. F. No. 2403

03/17/2025 Authored by O'Driscoll

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The bill was read for the first time and referred to the Committee on Commerce Finance and Policy

04/07/2025 Adoption of Report: Placed on the General Register as Amended

Read for the Second Time

04/29/2025 Calendar for the Day, Amended

Read Third Time as Amended

Passed by the House as Amended and transmitted to the Senate to include Floor Amendments

A bill for an act

relating to commerce; modifying and adding various provisions governing financial institutions, insurance, limited long-term care insurance; Medicare supplement insurance, and insurance holding company systems; modifying the Minnesota Business Corporations Act; modifying various provisions implemented or enforced by the Department of Commerce; authorizing administrative rulemaking; making technical and conforming changes; amending Minnesota Statutes 2024, sections 41A.09, subdivision 2a; 45.027, subdivisions 1, 2, by adding a subdivision; 45.24; 46A.04; 47.20, subdivisions 2, 4a, 8; 47.77; 53B.61; 55.07, by adding a subdivision; 58B.02, subdivision 8a; 60D.09, by adding a subdivision; 60D.15, subdivisions 1.10 4, 7, by adding subdivisions; 60D.16, subdivision 2; 60D.17, subdivision 1; 60D.18, 1.11 subdivision 3; 60D.19, subdivision 4, by adding subdivisions; 60D.20, subdivision 1.12 1; 60D.217; 60D.22, subdivisions 1, 3, 6, by adding a subdivision; 60D.24, 1.13 subdivision 2; 60D.25; 62A.31, subdivisions 1, 1f, 1h, 1p, 1u, 4; 62A.44, 1.14 subdivision 2; 62A.65, subdivision 2, by adding a subdivision; 62D.12, subdivisions 1.15 2, 2a; 62D.121, subdivision 1; 62Q.73, subdivision 4; 65B.02, subdivision 7; 1.16 65B.05; 65B.06, subdivisions 1, 2, 3; 65B.10, subdivision 2; 72A.20, by adding 1.17 a subdivision; 80A.66; 80E.12; 82B.19, subdivision 5; 168.27, by adding a 1.18 subdivision; 239.761, subdivisions 3, 4, 5, 6; 239.791, subdivision 11; 296A.01, 1.19 subdivisions 20, 23, 24; 302A.011, subdivision 41, by adding subdivisions; 1.20 302A.111, subdivision 2; 302A.161, by adding a subdivision; 302A.181, by adding 1.21 a subdivision; 302A.201, subdivision 1; 302A.237, by adding a subdivision; 1.22 302A.361; 302A.461, subdivision 4; 302A.471, subdivisions 1, 3; 302A.611, by 1.23 adding a subdivision; 334.01, subdivision 2; 580.07, subdivisions 1, 2; 581.02; 1.24 proposing coding for new law in Minnesota Statutes, chapters 60D; 62A; 302A; 1.25 325F; repealing Minnesota Statutes 2024, sections 62A.3099, subdivision 18b; 1.26 62A.31, subdivision 1w; 65B.10, subdivision 3; 325F.02; 325F.03; 325F.04; 1.27 1.28 325F.05; 325F.06; 325F.07; Laws 2023, chapter 57, article 2, section 66.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

REVISOR

2.2	ARTICLE 1
2.3	FINANCIAL INSTITUTIONS
2.4	Section 1. Minnesota Statutes 2024, section 46A.04, is amended to read:
2.5	46A.04 EXCEPTIONS AND EXEMPTIONS.
2.6	(a) The requirements under section 46A.03, subdivisions 3, paragraph (b); 5, paragraph
2.7	(a) (b); 9; and 10, do not apply to financial institutions that maintain customer information
2.8	concerning fewer than 5,000 consumers.
2.9	(b) This chapter does not apply to credit unions or federally insured depository
2.10	institutions.
2.11	Sec. 2. Minnesota Statutes 2024, section 47.20, subdivision 2, is amended to read:
2.12	Subd. 2. Definitions. For the purposes of this section the terms defined in this subdivision
2.13	have the meanings given them:
2.14	(1) "Actual closing costs" mean reasonable charges for or sums paid for the following,
2.15	whether or not retained by the mortgagee or lender:
2.16	(a) Any insurance premiums including but not limited to premiums for title insurance,
2.17	fire and extended coverage insurance, flood insurance, and private mortgage insurance, but
2.18	excluding any charges or sums retained by the mortgagee or lender as self-insured retention.
2.19	(b) Abstracting, title examination and search, and examination of public records.
2.20	(c) The preparation and recording of any or all documents required by law or custom
2.21	for closing a conventional or cooperative apartment loan.
2.22	(d) Appraisal and survey of real property securing a conventional loan or real property
2.23	owned by a cooperative apartment corporation of which a share or shares of stock or a
2.24	membership certificate or certificates are to secure a cooperative apartment loan.
2.25	(e) A single service charge, which includes any consideration, not otherwise specified
2.26	herein as an "actual closing cost" paid by the borrower and received and retained by the
2.27	lender for or related to the acquisition, making, refinancing or modification of a conventional
2.28	or cooperative apartment loan, and also includes any consideration received by the lender
2.29	for making a borrower's interest rate commitment or for making a borrower's loan
2.30	commitment, whether or not an actual loan follows the commitment. The term service charge
2.31	does not include forward commitment fees. The service charge shall not exceed one percent

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of the original bona fide principal amount of the conventional or cooperative apartment loan, except that in the case of a construction loan, the service charge shall not exceed two percent of the original bona fide principal amount of the loan. That portion of the service charge imposed because the loan is a construction loan shall be itemized and a copy of the itemization furnished the borrower. A lender shall not collect from a borrower the additional one percent service charge permitted for a construction loan if it does not perform the service for which the charge is imposed or if third parties perform and charge the borrower for the service for which the lender has imposed the charge. A loan that meets the Federal Qualified Mortgage standards in Code of Federal Regulations, title 12, section 1026.43(e)(3), is exempt from the service charge limitations of this section.

- (f) Charges and fees necessary for or related to the transfer of real or personal property securing a conventional or cooperative apartment loan or the closing of a conventional or cooperative apartment loan paid by the borrower and received by any party other than the lender.
- (2) "Contract for deed" means an executory contract for the conveyance of real estate, the original principal amount of which is less than \$300,000. A commitment for a contract for deed shall include an executed purchase agreement or earnest money contract wherein the seller agrees to finance any part or all of the purchase price by a contract for deed.
- (3) "Conventional loan" means a loan or advance of credit, other than a loan or advance of credit made by a credit union or made pursuant to section 334.011, to a noncorporate borrower in an original principal amount of less than or equal to the conforming loan limit established by the Federal Housing Finance Agency under the Housing and Recovery Act of 2018, Public Law 110-289, secured by a mortgage upon real property containing one or more residential units or upon which at the time the loan is made it is intended that one or more residential units are to be constructed, and which is not insured or guaranteed by the secretary of housing and urban development, by the administrator of veterans affairs, or by the administrator of the Farmers Home Administration, and which is not made pursuant to the authority granted in subdivision 1, clause (3) or (4). The term mortgage does not include contracts for deed or installment land contracts.
- (4) "Cooperative apartment loan" means a loan or advance of credit, other than a loan or advance of credit made by a credit union or made pursuant to section 334.011, to a noncorporate borrower in an original principal amount of less than \$100,000, secured by a security interest on a share or shares of stock or a membership certificate or certificates issued to a stockholder or member by a cooperative apartment corporation, which may be accompanied by an assignment by way of security of the borrower's interest in the proprietary

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- lease or occupancy agreement in property issued by the cooperative apartment corporation and which is not insured or guaranteed by the secretary of housing and urban development, by the administrator of veterans affairs, or by the administrator of the Farmers Home Administration.
- (5) "Cooperative apartment corporation" means a corporation or cooperative organized under chapter 308A or 317A, the shareholders or members of which are entitled, solely by reason of their ownership of stock or membership certificates in the corporation or association, to occupy one or more residential units in a building owned or leased by the corporation or association.
- (6) "Forward commitment fee" means a fee or other consideration paid to a lender for the purpose of securing a binding forward commitment by or through the lender to make conventional loans to two or more credit worthy purchasers, including future purchasers, of residential units, or a fee or other consideration paid to a lender for the purpose of securing a binding forward commitment by or through the lender to make conventional loans to two or more credit worthy purchasers, including future purchasers, of units to be created out of existing structures pursuant to chapter 515B, or a fee or other consideration paid to a lender for the purpose of securing a binding forward commitment by or through the lender to make cooperative apartment loans to two or more credit worthy purchasers, including future purchasers, of a share or shares of stock or a membership certificate or certificates in a cooperative apartment corporation; provided, that the forward commitment rate of interest does not exceed the maximum lawful rate of interest effective as of the date the forward commitment is issued by the lender.
- (7) "Borrower's interest rate commitment" means a binding commitment made by a lender to a borrower wherein the lender agrees that, if a conventional or cooperative apartment loan is made following issuance of and pursuant to the commitment, the conventional or cooperative apartment loan shall be made at a rate of interest not in excess of the rate of interest agreed to in the commitment, provided that the rate of interest agreed to in the commitment is not in excess of the maximum lawful rate of interest effective as of the date the commitment is issued by the lender to the borrower.
- (8) "Borrower's loan commitment" means a binding commitment made by a lender to a borrower wherein the lender agrees to make a conventional or cooperative apartment loan pursuant to the provisions, including the interest rate, of the commitment, provided that the commitment rate of interest does not exceed the maximum lawful rate of interest effective as of the date the commitment is issued and the commitment when issued and agreed to shall constitute a legally binding obligation on the part of the mortgagee or lender to make

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a conventional or cooperative apartment loan within a specified time period in the future at a rate of interest not exceeding the maximum lawful rate of interest effective as of the date the commitment is issued by the lender to the borrower; provided that a lender who issues a borrower's loan commitment pursuant to the provisions of a forward commitment is authorized to issue the borrower's loan commitment at a rate of interest not to exceed the maximum lawful rate of interest effective as of the date the forward commitment is issued by the lender.

- (9) "Finance charge" means the total cost of a conventional or cooperative apartment loan including extensions or grant of credit regardless of the characterization of the same and includes interest, finders fees, and other charges levied by a lender directly or indirectly against the person obtaining the conventional or cooperative apartment loan or against a seller of real property securing a conventional loan or a seller of a share or shares of stock or a membership certificate or certificates in a cooperative apartment corporation securing a cooperative apartment loan, or any other party to the transaction except any actual closing costs and any forward commitment fee. The finance charges plus the actual closing costs and any forward commitment fee, charged by a lender shall include all charges made by a lender other than the principal of the conventional or cooperative apartment loan. The finance charge, with respect to wraparound mortgages, shall be computed based upon the face amount of the wraparound mortgage note, which face amount shall consist of the aggregate of those funds actually advanced by the wraparound lender and the total outstanding principal balances of the prior note or notes which have been made a part of the wraparound mortgage note.
- (10) "Lender" means any person making a conventional or cooperative apartment loan, or any person arranging financing for a conventional or cooperative apartment loan. The term also includes the holder or assignee at any time of a conventional or cooperative apartment loan.
- (11) "Loan yield" means the annual rate of return obtained by a lender over the term of a conventional or cooperative apartment loan and shall be computed as the annual percentage rate as computed in accordance with sections 226.5 (b), (c), and (d) of Regulation Z, Code of Federal Regulations, title 12, part 226, but using the definition of finance charge provided for in this subdivision. For purposes of this section, with respect to wraparound mortgages, the rate of interest or loan yield shall be based upon the principal balance set forth in the wraparound note and mortgage and shall not include any interest differential or yield differential between the stated interest rate on the wraparound mortgage and the stated

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- interest rate on the one or more prior mortgages included in the stated loan amount on a wraparound note and mortgage.
 - (12) "Person" means an individual, corporation, business trust, partnership or association or any other legal entity.
 - (13) "Residential unit" means any structure used principally for residential purposes or any portion thereof, and includes a unit in a common interest community, a nonowner occupied residence, and any other type of residence regardless of whether the unit is used as a principal residence, secondary residence, vacation residence, or residence of some other denomination.
 - (14) "Vendor" means any person or persons who agree to sell real estate and finance any part or all of the purchase price by a contract for deed. The term also includes the holder or assignee at any time of the vendor's interest in a contract for deed.
 - Sec. 3. Minnesota Statutes 2024, section 47.20, subdivision 4a, is amended to read:
 - Subd. 4a. **Maximum interest rate.** (a) No conventional or cooperative apartment loan or contract for deed shall be made at a rate of interest or loan yield in excess of a maximum lawful interest rate in an amount equal to the Federal National Mortgage Association posted yields on 30-year mortgage commitments for delivery within 60 days on standard conventional fixed-rate mortgages published in the Wall Street Journal for the last business day of the second preceding month average prime offer rate, as defined in Code of Federal Regulations, title 12, section 1026.35(a)(2), that applies to a comparable transaction, as most recently published by the United States Consumer Financial Protection Bureau on the last date the discounted interest rate for the transaction is set before consummation, plus four percentage points. If the index is not available, a substitute index may be adopted by a commissioner order.
 - (b) The maximum lawful interest rate applicable to a cooperative apartment loan or contract for deed at the time the loan or contract is made is the maximum lawful interest rate for the term of the cooperative apartment loan or contract for deed. Notwithstanding the provisions of section 334.01, a cooperative apartment loan or contract for deed may provide, at the time the loan or contract is made, for the application of specified different consecutive periodic interest rates to the unpaid principal balance, if no interest rate exceeds the maximum lawful interest rate applicable to the loan or contract at the time the loan or contract is made.

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(c) The maximum interest rate that can be charged on a conventional loan or a contract for deed, with a duration of ten years or less, for the purchase of real estate described in section 83.20, subdivisions 11 and 13, is three percentage points above the rate permitted under paragraph (a) or 15.75 percent per year, whichever is less. This paragraph is effective August 1, 1992.

(d) Contracts for deed executed pursuant to a commitment for a contract for deed, or conventional or cooperative apartment loans made pursuant to a borrower's interest rate commitment or made pursuant to a borrower's loan commitment, or made pursuant to a commitment for conventional or cooperative apartment loans made upon payment of a forward commitment fee including a borrower's loan commitment issued pursuant to a forward commitment, which commitment provides for consummation within some future time following the issuance of the commitment may be consummated pursuant to the provisions, including the interest rate, of the commitment notwithstanding the fact that the maximum lawful rate of interest at the time the contract for deed or conventional or cooperative apartment loan is actually executed or made is less than the commitment rate of interest, provided the commitment rate of interest does not exceed the maximum lawful interest rate in effect on the date the commitment was issued. The refinancing of: (1) an existing conventional or cooperative apartment loan, (2) a loan insured or guaranteed by the secretary of housing and urban development, the administrator of veterans affairs, or the administrator of the Farmers Home Administration, or (3) a contract for deed by making a conventional or cooperative apartment loan is deemed to be a new conventional or cooperative apartment loan for purposes of determining the maximum lawful rate of interest under this subdivision. The renegotiation of a conventional or cooperative apartment loan or a contract for deed is deemed to be a new loan or contract for deed for purposes of paragraph (b) and for purposes of determining the maximum lawful rate of interest under this subdivision. A borrower's interest rate commitment or a borrower's loan commitment is deemed to be issued on the date the commitment is hand delivered by the lender to, or mailed to the borrower. A forward commitment is deemed to be issued on the date the forward commitment is hand delivered by the lender to, or mailed to the person paying the forward commitment fee to the lender, or to any one of them if there should be more than one. A commitment for a contract for deed is deemed to be issued on the date the commitment is initially executed by the contract for deed vendor or the vendor's authorized agent.

(e) A contract for deed executed pursuant to a commitment for a contract for deed, or a loan made pursuant to a borrower's interest rate commitment, or made pursuant to a borrower's loan commitment, or made pursuant to a forward commitment for conventional

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or cooperative apartment loans made upon payment of a forward commitment fee including a borrower's loan commitment issued pursuant to a forward commitment at a rate of interest not in excess of the rate of interest authorized by this subdivision at the time the commitment was made continues to be enforceable in accordance with its terms until the indebtedness is fully satisfied.

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- Sec. 4. Minnesota Statutes 2024, section 47.20, subdivision 8, is amended to read:
- 8.7 Subd. 8. **Conventional loan provisions.** (a) A lender making a conventional loan shall comply with the following:
 - (1) the promissory note and mortgage evidencing a conventional loan shall be printed in not less than the equivalent of 8-point type, .075 inch computer type, or elite-size typewritten numerals, or shall be legibly handwritten-;
 - (2) the mortgage evidencing a conventional loan shall contain a provision whereby the lender agrees to furnish the borrower with a conformed copy of the promissory note and mortgage at the time they are executed or within a reasonable time after recordation of the mortgage-; and
 - (3) the mortgage evidencing a conventional loan shall contain a provision whereby the lender, if it intends to foreclose, agrees to give the borrower written notice of any default under the terms or conditions of the promissory note or mortgage, by sending the notice by eertified: (i) first-class mail to the address of the mortgaged property or such other a different address as the borrower may have designated designates in writing to the lender; or (ii) email or other electronic communication, if agreed to by the lender and the borrower in writing. The lender need not give the borrower the notice required by this paragraph clause if the default consists of the borrower selling the mortgaged property without the required consent of the lender.
 - (b) The mortgage shall further provide that the notice under paragraph (a), clause (3), shall contain the following provisions:
 - $\frac{\text{(a)}}{\text{(1)}}$ the nature of the default by the borrower;
- 8.28 $\frac{\text{(b)}(2)}{\text{(b)}}$ the action required to cure the default;
- 8.29 (e) (3) a date, not less than 30 days from the date the notice is mailed by which the default must be cured;

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- (d) (4) that failure to cure the default on or before the date specified in the notice may result in acceleration of the sums secured by the mortgage and sale of the mortgaged premises;
 - (e) (5) that the borrower has the right to reinstate the mortgage after acceleration; and
- (f) (6) that the borrower has the right to bring a court action to assert the nonexistence of a default or any other defense of the borrower to acceleration and sale.
- Sec. 5. Minnesota Statutes 2024, section 47.77, is amended to read:

47.77 TRANSFER OF ACCOUNTS PROHIBITED; NOTICE ON CLOSING.

- (a) No financial institution shall initiate a transfer of a deposit account to another deposit account bearing different identification information without sending at least 30 days' prior notice to at least one of the deposit account holders at the last known address on file with the financial institution. If the new account is subject to different terms, the financial institution must obtain the written consent of at least one of the deposit account holders before the new terms become effective.
- (b) No financial institution shall initiate a closure of a deposit account without first sending at least one of the deposit account holders a notice of intent to close the deposit account. The notice must be sent to the deposit account holder's last known address on file with the financial institution at least 30 days before the financial institution closes the deposit account; except that; if the financial institution has reasonable suspicion to believe that account is being used in connection with a check-related fraud or other crime or that, funds will not be available to pay items drawn on the account, or the deposit account holder has engaged in harassment, as defined in section 609.749, subdivision 2, paragraph (c), toward financial institution employees or customers, the notice may be sent the same day as the account is closed.
- (c) As used in this section, the following terms have the meanings given them. "Deposit account" means a contract of deposit of funds between a depositor and a financial institution, and includes a checking account, savings account, certificate of deposit share account, and other like arrangement. "Financial institution" means any organization authorized to do business under state or federal laws relating to financial institutions, including, without limitation, banks and trust companies, savings banks, savings associations, industrial loan and thrift companies, and credit unions.

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Sec. 6. Minnesota Statutes 2024, section 53B.61, is amended to read:

53B.61 MAINTENANCE OF PERMISSIBLE INVESTMENTS.

- (a) A licensee must maintain at all times permissible investments that have a market value computed in accordance with United States generally accepted accounting principles of not less than the aggregate amount of all of the licensee's outstanding money transmission obligations.
- (b) Except for permissible investments enumerated in section 53B.62, paragraph (a) subdivision 1, clause (1), the commissioner may by administrative rule or order, with respect to any licensee, limit the extent to which a specific investment maintained by a licensee within a class of permissible investments may be considered a permissible investment, if the specific investment represents undue risk to customers not reflected in the market value of investments.
- (c) Permissible investments, even if commingled with other assets of the licensee, are held in trust for the benefit of the purchasers and holders of the licensee's outstanding money transmission obligations in the event of insolvency; the filing of a petition by or against the licensee under the United States Bankruptcy Code, United States Code, title 11, sections 101 to 110, as amended or recodified from time to time, for bankruptcy or reorganization; the filing of a petition by or against the licensee for receivership; the commencement of any other judicial or administrative proceeding for the licensee's dissolution or reorganization; or in the event of an action by a creditor against the licensee who is not a beneficiary of this statutory trust. No permissible investments impressed with a trust pursuant to this paragraph are subject to attachment, levy of execution, or sequestration by order of any court, except for a beneficiary of the statutory trust.
- (d) Upon the establishment of a statutory trust in accordance with paragraph (c), or when any funds are drawn on a letter of credit pursuant to section 53B.62, paragraph (a), clause (4), the commissioner must notify the applicable regulator of each state in which the licensee is licensed to engage in money transmission, if any, of the establishment of the trust or the funds drawn on the letter of credit, as applicable. Notice is deemed satisfied if performed pursuant to a multistate agreement or through NMLS. Funds drawn on a letter of credit, and any other permissible investments held in trust for the benefit of the purchasers and holders of the licensee's outstanding money transmission obligations, are deemed held in trust for the benefit of the purchasers and holders of the licensee's outstanding money transmission obligations on a pro rata and equitable basis in accordance with statutes pursuant to which permissible investments are required to be held in Minnesota and other states, as defined

Article 1 Sec. 6.

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11.1	by a substantially similar statute in the other state. Any statutory trust established under this
11.2	section terminates upon extinguishment of all of the licensee's outstanding money
11.3	transmission obligations.
11.4	(e) The commissioner may by rule or by order allow other types of investments that the
11.5	commissioner determines are of sufficient liquidity and quality to be a permissible
11.6	investment. The commissioner is authorized to participate in efforts with other state regulators
11.7	to determine that other types of investments are of sufficient liquidity and quality to be a
11.8	permissible investment.
11.9	Sec. 7. Minnesota Statutes 2024, section 55.07, is amended by adding a subdivision to
11.10	read:
11.11	Subd. 3. Safe deposit lease; automatic renewal. A safe deposit lease may renew
11.12	automatically at the end of the lease's term. A consumer may terminate a safe deposit lease
11.13	at any time in writing or in any other manner described in the lease.
11.14	Sec. 8. Minnesota Statutes 2024, section 58B.02, subdivision 8a, is amended to read:
11.15	Subd. 8a. Lender. "Lender" means an entity engaged in the business of securing, making,
11.16	or extending student loans. Lender does not include, to the extent that state regulation is
11.17	preempted by federal law:
11.18	(1) a bank, savings banks, savings and loan association, or credit union;
11.19	(2) a wholly owned subsidiary of a bank or credit union;
11.20	(3) an operating subsidiary where each owner is wholly owned by the same bank or
11.21	credit union;
11.22	(4) the United States government, through Title IV of the Higher Education Act of 1965.
11.23	as amended, and administered by the United States Department of Education;
11.24	(5) an agency, instrumentality, or political subdivision of Minnesota;
11.25	(6) a regulated lender organized under chapter 56, except that a regulated lender must
11.26	file the annual report required for lenders under section 58B.03, subdivision 11 10; or

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(7) a person who is not in the business of making student loans and who makes no more

than three student loans, with the person's own funds, during any 12-month period.

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Sec. 9. Minnesota Statutes 2024, section 334.01, subdivision 2, is amended to read:

- Subd. 2. **Contracts of \$100,000 or more.** Notwithstanding any law to the contrary, except as stated in section 58.137, and with respect to <u>contracts a conventional loan or contract</u> for deed, section 47.20, subdivision 4a, no limitation on the rate or amount of interest, points, finance charges, fees, or other charges applies to a loan, mortgage, credit sale, or advance made under a written contract, signed by the debtor, for the extension of credit to the debtor in the amount of \$100,000 or more, or any written extension and other written modification of the written contract. The written contract, written extension, and written modification are exempt from the other provisions of this chapter.
- Sec. 10. Minnesota Statutes 2024, section 580.07, subdivision 1, is amended to read:
- Subdivision 1. **Postponement by mortgagee.** (a) The sale may be postponed, from time to time, by the party conducting the foreclosure. The party requesting the postponement must, at the party's expense:
- 12.14 (1) publish, only once, a notice of the postponement and the rescheduled date of the sale, 12.15 if known, as soon as practicable, in the newspaper in which the notice under section 580.03 12.16 was published; and
- 12.17 (2) send by first class mail to the occupant, postmarked within three business days of 12.18 the postponed sale, notice:
- (i) of the postponement; and
 - (ii) if known, of the rescheduled date of the sale and the date on or before which the mortgagor must vacate the property if the sheriff's sale is not further postponed, the mortgage is not reinstated under section 580.30, the property is not redeemed under section 580.23, or the redemption period is not reduced under section 582.032. The notice must state that the time to vacate the property is 11:59 p.m. on the specified date.
- (b) If the rescheduled date of the sale is not known at the time of the initial publication and notice to the occupant of postponement, the foreclosing party must, at its expense if and when a new date of sale is scheduled:
- (1) publish, only once, notice of the rescheduled date of the sale, as soon as practicable, in the newspaper in which the notice under section 580.03 and the notice of postponement under paragraph (a) was published; and
- 12.31 (2) send by first class mail to the occupant, postmarked within ten days of the rescheduled 12.32 sale, notice:

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- (i) of the date of the rescheduled sale; and
- (ii) of the date on or before which the mortgagor must vacate the property if the mortgage is not reinstated under section 580.30 or the property redeemed under section 580.23. The notice must state that the time to vacate the property is 11:59 p.m. on the specified date.
- (c) The right of a mortgagee to postpone a foreclosure sale under this section applies to
 a foreclosure by action taken under chapter 581.
- 13.7 <u>EFFECTIVE DATE.</u> This section is effective August 1, 2025, for judicial foreclosures

 13.8 with the lis pendens recorded on or after the effective date.
- Sec. 11. Minnesota Statutes 2024, section 580.07, subdivision 2, is amended to read:
 - Subd. 2. **Postponement by mortgagor or owner.** (a) If all or a part of the property to be sold is classified as homestead under section 273.124 and contains one to four dwelling units, the mortgagor or owner may, in the manner provided in this subdivision, postpone the sale to the first date that is not a Saturday, Sunday, or legal holiday and is:
 - (1) five months after the originally scheduled date of sale if the original redemption period was six months under section 580.23, subdivision 1; or
 - (2) 11 months after the originally scheduled date of sale if the original redemption period was 12 months under section 580.23, subdivision 2. To postpone a foreclosure sale pursuant to this subdivision, at any time after the first publication of the notice of mortgage foreclosure sale under section 580.03 but at least 15 days prior to the scheduled sale date specified in that notice, the mortgagor shall: (1) execute a sworn affidavit in the form set forth in subdivision 3, (2) record the affidavit in the office of each county recorder and registrar of titles where the mortgage was recorded, and (3) file with the sheriff conducting the sale and deliver to the attorney foreclosing the mortgage a copy of the recorded affidavit, showing the date and office in which the affidavit was recorded. Recording of the affidavit and postponement of the foreclosure sale pursuant to this subdivision shall automatically reduce the mortgagor's redemption period under section 580.23 to five weeks. The postponement of a foreclosure sale pursuant to this subdivision does not require any change in the contents of the notice of sale, service of the notice of sale if the occupant was served with the notice of sale prior to postponement under this subdivision, or publication of the notice of sale if publication was commenced prior to postponement under this subdivision, notwithstanding the service and publication time periods specified in section 580.03, but the sheriff's certificate of sale shall indicate the actual date of the foreclosure sale and the actual length of the mortgagor's redemption period. No notice of postponement need be published. An

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- affidavit complying with subdivision 3 shall be prima facie evidence of the facts stated therein, and shall be entitled to be recorded. The right to postpone a foreclosure sale pursuant to this subdivision may be exercised only once, regardless whether the mortgagor reinstates the mortgage prior to the postponed mortgage foreclosure sale.
- (b) If the automatic stay under United States Code, title 11, section 362, applies to the mortgage foreclosure after a mortgagor or owner requests postponement of the sheriff's sale under this section, then when the automatic stay is no longer applicable, the mortgagor's or owner's election to shorten the redemption period to five weeks under this section remains applicable to the mortgage foreclosure.
- (c) Except for the circumstances set forth in paragraph (b), this section does not reduce the mortgagor's redemption period under section 580.23 for any subsequent foreclosure of the mortgage.
- 14.13 (d) The right of a mortgagor or owner to postpone a foreclosure sale under this section
 14.14 applies to a foreclosure by action taken under chapter 581.
- 14.15 **EFFECTIVE DATE.** This section is effective August 1, 2025, for judicial foreclosures
 14.16 with the lis pendens recorded on or after the effective date.
- 14.17 Sec. 12. Minnesota Statutes 2024, section 581.02, is amended to read:
- 14.18 **581.02 APPLICATION, CERTAIN SECTIONS.**
- (a) The provisions of sections 580.08, 580.09, 580.12, 580.22, 580.25, and 580.27, so far as they relate to the form of the certificate of sale, shall apply to and govern the foreclosure of mortgages by action.
- 14.22 (b) Section 580.07 applies to actions for the foreclosure of mortgages taken under this
 14.23 chapter.
- 14.24 **EFFECTIVE DATE.** This section is effective August 1, 2025, for judicial foreclosures

 14.25 with the lis pendens recorded on or after the effective date.
- 14.26 Sec. 13. CERTAIN COMPLIANCE OPTIONAL.
- A lender's compliance with Minnesota Statutes, section 47.20, subdivision 8, is optional with respect to conventional loan mortgage documents dated between August 1, 2024, and July 31, 2025.
- 14.30 **EFFECTIVE DATE.** This section is effective retroactively from July 31, 2024.

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ARTICLE 2

15.2	INSURANCE
15.3	Section 1. Minnesota Statutes 2024, section 62A.65, subdivision 2, is amended to read:
15.4	Subd. 2. Guaranteed renewal. No individual health plan may be offered, sold, issued,
15.5	or renewed to a Minnesota resident unless the health plan provides that the plan is guaranteed
15.6	renewable at a premium rate that does not take into account the claims experience or any
15.7	change in the health status of any covered person that occurred after the initial issuance of
15.8	the health plan to the person. The premium rate upon renewal must also otherwise comply
15.9	with this section. A health carrier must not refuse is prohibited from refusing to renew an
15.10	a Minnesota resident's individual health plan, except for nonpayment of premiums, fraud,
15.11	or misrepresentation. unless:
15.12	(1) the enrollee has failed to pay premiums in accordance with the health plan's terms,
15.13	including any timeliness requirements;
15.14	(2) the enrollee has performed an act or practice that constitutes fraud or made an
15.15	intentional misrepresentation of material fact under the health plan's terms;
15.16	(3) the enrollee no longer lives in the area where the issuer is authorized to operate;
15.17	(4) a health carrier discontinues an individual health plan as provided under subdivision
15.18	<u>2a; or</u>
15.19	(5) a health carrier discontinues issuing new individual health plans and refuses to renew
15.20	all of the health carrier's existing individual health plans issued in Minnesota as provided
15.21	under subdivision 8.
15.22	Sec. 2. Minnesota Statutes 2024, section 62A.65, is amended by adding a subdivision to
15.23	read:
15.24	Subd. 2a. Discontinuing individual health plan. (a) In order to discontinue a particular
15.25	type of individual health plan in Minnesota for purposes of subdivision 2, clause (4), a health
15.26	carrier must:
15.27	(1) provide written notice to the commissioner that approves the individual health plan's
15.28	policy forms and filings, in the form and manner approved by the commissioner, regarding
15.29	the health carrier's intent to discontinue a particular type of individual health plan in
15.30	Minnesota. The notice must be provided no later than May 1 of the year before the date the
15.31	individual health plan intends to discontinue the particular type of individual health plan;

16.1	(2) provide written notice to each individual enrolled in the individual health plan no
16.2	later than 90 days before the date the coverage is discontinued;
16.3	(3) offer each individual covered by the individual health plan that the health carrier
16.4	intends to discontinue the option to purchase on a guaranteed-issue basis any other individual
16.5	health plan currently offered by the health carrier for individuals in that market; and
16.6	(4) act uniformly without regard to any factor relating to the health status factor of
16.7	covered individuals or dependents of covered individuals who may become eligible for
16.8	coverage.
16.9	(b) The commissioner may disapprove a health carrier discontinuing a particular type
16.10	of individual health plan within 60 days after receiving notice under paragraph (a) if the
16.11	commissioner determines discontinuing the plan is not in Minnesota policyholders' best
16.12	interest. When making the determination under this paragraph, the commissioner may
16.13	consider the size of plan enrollment, the availability of comparable individual health plan
16.14	options offered by the health carrier in Minnesota, or any other factor the commissioner
16.15	deems relevant.
16.16	(c) A health carrier may appeal the commissioner's determination under paragraph (b)
16.17	to disapprove the health carrier's plan to discontinue a particular type of individual health
16.18	plan in Minnesota. An appeal under this paragraph is subject to the contested case procedures
16.19	under chapter 14 and must be made within 30 days of the date the commissioner makes a
16.20	written determination under paragraph (b).
16.21	Sec. 3. Minnesota Statutes 2024, section 62D.12, subdivision 2, is amended to read:
16.22	Subd. 2. Coverage cancellation; nonrenewal. No health maintenance organization may
16.23	cancel or fail to renew the coverage of an enrollee except for (1) failure to pay the charge
16.24	for health care coverage; (2) termination of the health care plan subject to section 62A.65,
16.25	subdivisions 2 and 2a; (3) termination of the group plan; (4) enrollee moving out of the area
16.26	served, subject to section 62A.17, subdivisions 1 and 6, and section 62D.104; (5) enrollee
16.27	moving out of an eligible group, subject to section 62A.17, subdivisions 1 and 6, and section
16.28	62D.104; (6) failure to make co-payments required by pay premiums as provided by the
16.29	terms of the health care plan, including timeliness requirements; (7) fraud or
16.30	misrepresentation by the enrollee with respect to eligibility for coverage or any other material
16.31	fact; or (8) other reasons established in rules promulgated by the commissioner of health.

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Sec. 4. Minnesota Statutes 2024, section 62D.12, subdivision 2a, is amended to read:

Subd. 2a. Cancellation or nonrenewal notice. Enrollees shall be given 30 days' notice of any cancellation or nonrenewal, except that: (1) enrollees in a plan terminated under section 62A.65, subdivisions 2, clause (4), and 2a, must receive the 90 days' notice required under section 62A.65, subdivision 2a, paragraph (a), clause (2); and (2) enrollees who are eligible to receive replacement coverage under section 62D.121, subdivision 1, shall receive 90 days' notice as provided under section 62D.121, subdivision 5.

Sec. 5. Minnesota Statutes 2024, section 62D.121, subdivision 1, is amended to read:

Subdivision 1. **Replacement coverage.** When membership of an enrollee who has individual health coverage is terminated by the health maintenance organization for a reason other than (a) failure to pay the charge for health care coverage; (b) failure to make eo-payments required by pay premiums as provided by the terms of the health care plan, including timeliness requirements; (c) enrollee moving out of the area served; or (d) a materially false statement or misrepresentation by the enrollee in the application for membership, the health maintenance organization must offer or arrange to offer replacement coverage, without evidence of insurability, without preexisting condition exclusions, and without interruption of coverage.

- Sec. 6. Minnesota Statutes 2024, section 62Q.73, subdivision 4, is amended to read:
- Subd. 4. **Contract.** Pursuant to a request for proposal, the commissioner of administration, in consultation with the commissioners of health and commerce, shall must contract with at least three organizations more than one organization or business entities entity to provide independent external reviews of all adverse determinations submitted for external review.

 The contract shall must ensure that the fees for services rendered in connection with the reviews are reasonable.
- 17.25 Sec. 7. Minnesota Statutes 2024, section 65B.02, subdivision 7, is amended to read:
- Subd. 7. **Participation ratio.** "Participation ratio" means the ratio of the member's

 Minnesota premiums, or other measure of business written approved by the commissioner,

 in relation to the comparable statewide totals for all members.
 - (1) For private passenger nonfleet automobile insurance coverages the participation ratio shall be based on voluntary car years written in this state for the calendar year ending December 31 of the second prior year, as reported by the statistical agent of each member as private passenger nonfleet exposures.

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(2) For insurance coverages on all other automobiles, including insurance for fleets, commercial vehicles, public vehicles and garages, the ratio shall be based on the total Minnesota gross, direct automobile insurance premiums written, including both policy and membership fees less return premiums and premiums on policies not taken, without including reinsurance assumed and without deducting reinsurance ceded, and less the amount of such premiums reported as received for insurance on private passenger nonfleet vehicles, for the calendar year ending December 31 of the second prior year.

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- (3) For the purpose of determining each member's responsibility for expenses and assessments to operate the facility, the ratio shall be based on each member's total Minnesota car years and gross, direct premiums written, including both policy and membership fees less return premiums and premiums on policies not taken, without including reinsurance assumed and without deducting reinsurance ceded, for the calendar year ending December 31 of the second prior year, provided, however, that the preliminary determination of each member's responsibility for expenses and assessments may use the calendar year ending December 31 of the third prior year.
- Sec. 8. Minnesota Statutes 2024, section 65B.05, is amended to read:

65B.05 POWER OF FACILITY, GOVERNING COMMITTEE.

- (a) The facility is authorized to: (1) issue or cause to be issued insurance policies in the name of the Minnesota automobile insurance plan to applicants for the types of insurance available under the plan, subject to limits specified in the plan of operation; (2) underwrite the insurance and adjust and pay losses with respect to the plan; and (3) retain, hire, or appoint an individual or company to perform a function under clause (1) or (2).
- (b) The governing committee shall have the power to direct the operation of the facility in all pursuits consistent with the purposes and terms of sections 65B.01 to 65B.12, including but not limited to the following:
- (1) To sue and be suing and being sued in the name of the facility and to assess each member in accord with its participation ratio to pay any judgment against the facility as an entity, provided, however, that no judgment against the facility shall create any liabilities in one or more members disproportionate to their participation ratio or an individual representing members on the governing committee-;
- (2) <u>To delegate delegating ministerial duties</u>, <u>to hire hiring a manager</u>, and <u>to contract</u> contracting for goods and services from others-;

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(3) To assess assessing members on the basis of participation ratios to cover anticipated costs of operation and administration of the facility-; and

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- (4) To impose imposing limitations on cancellation or nonrenewal by members of insureds covered pursuant to placement through the facility in addition to the limitations imposed by chapter 72A and sections 65B.1311 to 65B.21.
- Sec. 9. Minnesota Statutes 2024, section 65B.06, subdivision 1, is amended to read: 19.6
 - Subdivision 1. Distribution of private passenger, nonfleet auto risks. With respect to private passenger, nonfleet automobiles, the facility shall provide for the equitable distribution of qualified applicants to members to share premium, losses, costs, and expenses in accordance with the participation ratio or among these insurance companies as selected under the provisions of the plan of operation.
- Sec. 10. Minnesota Statutes 2024, section 65B.06, subdivision 2, is amended to read: 19.12
- Subd. 2. Private passenger; nonfleet auto coverage. With respect to private passenger, 19.13 nonfleet automobiles, the facility shall provide for the issuance of policies of automobile 19.14 insurance by members with coverage as follows: 19.15
- (1) bodily injury liability and property damage liability coverage in the minimum amounts 19.16 specified in section 65B.49, subdivision 3; 19.17
- (2) uninsured and underinsured motorist coverages as required by section 65B.49, 19.18 subdivisions 3a and 4a; 19.19
 - (3) a reasonable selection of higher limits of liability coverage up to \$50,000 because of bodily injury to or death of one person in any one accident and, subject to such limit for one person, up to \$100,000 because of bodily injury to or death of two or more persons in any one accident, and up to \$25,000 because of injury to or destruction of property of others in any one accident, or higher limits of liability coverage as recommended by the governing committee and approved by the commissioner;
- 19.26 (4) basic economic loss benefits, as required by section 65B.44, and other optional coverages as recommended by the governing committee and approved by the commissioner; 19.27 and 19.28
- (5) automobile physical damage coverage, including coverage of loss by collision, subject 19.29 to deductible options. 19.30

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20.1	Sec. 11. Minnesota Statutes 2024, section 65B.06, subdivision 3, is amended to read:
20.2	Subd. 3. Other auto coverage. With respect to all automobiles not included in
20.3	subdivisions 1 and 2, the facility shall provide:
20.4	(1) the minimum limits of coverage required by section 65B.49, subdivisions 2, 3, 3a,
20.5	and 4a, or higher limits of liability coverage as recommended by the governing committee
20.6	and approved by the commissioner;
20.7	(2) for the equitable distribution of qualified applicants sharing of premium, losses,
20.8	costs, and expenses for this coverage among the members in accordance with the
20.9	applicable participation ratio, or among these insurance companies as selected under the
20.10	provisions of the plan of operation; and
20.11	(3) for a school district or contractor transporting school children under contract with a
20.12	school district, that amount of automobile liability insurance coverage, not to exceed
20.13	\$1,000,000, required by the school district by resolution or contract, or that portion of such
20.14	\$1,000,000 of coverage for which the school district or contractor applies and for which it
20.15	is eligible under section 65B.10.
20.16	Sec. 12. Minnesota Statutes 2024, section 65B.10, subdivision 2, is amended to read:
20.17	Subd. 2. Termination of eligibility. Eligibility for placement through the facility will
20.18	terminate if an insured is offered equivalent coverage in the voluntary market at a rate lower
20.19	than the facility rate. If the member that is required to provide coverage by the facility makes
20.20	such an offer after giving 30 days' advance written notice to the agent of record before
20.21	making the offer, the member shall have no further obligation to the agent of record.
20.22	Sec. 13. Minnesota Statutes 2024, section 72A.20, is amended by adding a subdivision to
20.23	read:
20.24	Subd. 42. Availability of current policy. After an original policy of automobile insurance
20.25	under section 65B.14, subdivision 2, or homeowner's insurance under section 65A.27,
20.26	subdivision 4, has been issued, an insurer must deliver a copy of the current policy to the
20.27	first named insured within 21 days of the date a request for the current policy is received.
20.28	The copy may be delivered in paper form, electronically, or via a website link. An insurer

per policy period.

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is required to provide a current policy in response to a request under this subdivision once

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Sec. 14. **REPEALER.**

21.2	Minnesota Statutes 2024, section 65B.10, subdivision 3, is repealed.
21.3	ARTICLE 3
21.4	LIMITED LONG-TERM CARE INSURANCE
21.5	Section 1. [62A.481] LIMITED LONG-TERM CARE INSURANCE.
21.6	Subdivision 1. Short title. This section may be known and cited as the "Limited
21.7	Long-Term Care Insurance Act."
21.8	Subd. 2. Definitions. (a) For purposes of this section, the following terms have the
21.9	meanings given.
21.10	(b) "Applicant" means:
21.11	(1) in the case of an individual limited long-term care insurance policy, the person who
21.12	seeks to contract for benefits; or
21.13	(2) in the case of a group limited long-term care insurance policy, the proposed certificate
21.14	holder.
21.15	(c) "Certificate" means a certificate issued under a group limited long-term care insurance
21.16	policy that has been delivered or issued for delivery in Minnesota.
21.17	(d) "Commissioner" means the commissioner of commerce.
21.18	(e) "Elimination period" means the length of time between meeting the eligibility for
21.19	benefit payment and receiving benefit payments from an insurer.
21.20	(f) "Group limited long-term care insurance" means a limited long-term care insurance
21.21	policy that is delivered or issued for delivery in Minnesota and issued to:
21.22	(1) one or more employers or labor organizations, a trust or the trustees of a fund
21.23	established by one or more employers, labor organizations, or a combination of employers
21.24	and labor organizations for: (i) employees, former employees, or a combination of employees
21.25	or former employees; or (ii) members, former members, or a combination of members or
21.26	former members of the labor organizations;
21.27	(2) a professional, trade, or occupational association for the association's members,
21.28	former members, retired members, or a combination of members, former members, or retired
21.29	members, if the association:

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22.1	(i) is composed of individuals, all of whom are or were actively engaged in the same
22.2	profession, trade, or occupation; and
22.3	(ii) has been maintained in good faith for purposes other than obtaining insurance;
22.4	(3) an association, a trust, or the trustees of a fund established, created, or maintained
22.5	for the benefit of members of one or more associations. Prior to advertising, marketing, or
22.6	offering the policy within Minnesota, the association or associations, or the insurer of the
22.7	association or associations, must file evidence with the commissioner that the association
22.8	or associations have at the outset:
22.9	(i) a minimum of 100 persons;
22.10	(ii) been organized and maintained in good faith for purposes other than obtaining
22.11	insurance;
22.12	(iii) been in active existence for at least one year; and
22.13	(iv) a constitution and bylaws that provide:
22.14	(A) the association or associations hold regular meetings not less than annually to further
22.15	purposes of the members;
22.16	(B) except for credit unions, the association or associations collect dues or solicit
22.17	contributions from members; and
22.18	(C) the members have voting privileges and representation on the governing board and
22.19	committees.
22.20	Thirty days after the filing, the association or associations are deemed to satisfy the
22.21	organizational requirements unless the commissioner makes a finding that the association
22.22	or associations do not satisfy the organizational requirements; or
22.23	(4) a group other than a group described in clauses (1) to (3), subject to the commissioner
22.24	finding that:
22.25	(i) issuing the policy is not contrary to the public interest;
22.26	(ii) issuing the policy results in acquisition or administrative economies; and
22.27	(iii) the policy's benefits are reasonable in relation to the premiums charged.
22.28	(g) "Limited long-term care insurance" means an insurance policy or rider:
22.29	(1) issued by: (i) an insurer; (ii) a fraternal benefit society; (iii) a nonprofit health, hospital,
22.30	or medical service corporation; (iv) a prepaid health plan; (v) a health maintenance

23.1	organization; or (vi) a similar organization, to the extent the organization is authorized to
23.2	issue life or health insurance;
23.3	(2) advertised, marketed, offered, or designed to provide coverage for less than 12
23.4	consecutive months for each covered person on an expense-incurred, indemnity, prepaid,
23.5	or other basis; and
23.6	(3) for one or more necessary or medically necessary diagnostic, preventive, therapeutic,
23.7	rehabilitative, maintenance, or personal care service provided in a setting other than a
23.8	hospital's acute care unit.
23.9	Limited long-term care insurance includes a policy or rider that provides for payment of
23.10	benefits based upon cognitive impairment or the loss of functional capacity. Limited
23.11	long-term care insurance does not include an insurance policy that is offered primarily to
23.12	provide basic Medicare supplement coverage, basic hospital expense coverage, basic
23.13	medical-surgical expense coverage, hospital confinement indemnity coverage, major medical
23.14	expense coverage, disability income or related asset-protection coverage, accident-only
23.15	coverage, specified disease or specified accident coverage, or limited benefit health coverage.
23.16	(h) "Policy" means a policy, contract, subscriber agreement, rider, or endorsement
23.17	delivered or issued for delivery in Minnesota by an insurer; fraternal benefit society; nonprofit
23.18	health, hospital, or medical service corporation; prepaid health plan; health maintenance
23.19	organization; or any similar organization.
23.20	(i) "Waiting period" means the time an insured individual must wait before some or all
23.21	of the insured individual's coverage becomes effective.
23.22	Subd. 3. Scope. (a) This section applies to policies delivered or issued for delivery in
23.23	Minnesota on or after January 1, 2026. This section does not supersede an obligation that
23.24	an entity subject to this section has to comply with other applicable insurance laws to the
23.25	extent the other insurance laws do not conflict with this section, except that laws and
23.26	regulations designed and intended to apply to Medicare supplement insurance policies must
23.27	not be applied to limited long-term care insurance.
23.28	(b) Notwithstanding any other provision of this section, a product, policy, certificate, or
23.29	rider advertised, marketed, or offered as limited long-term care insurance is subject to this
23.30	section.
23.31	Subd. 4. Group limited long-term care insurance; extra-territorial jurisdiction. Group
23.32	limited long-term care insurance coverage must not be offered to a Minnesota resident under
23.33	a group policy issued in another state to a group described in subdivision 2, paragraph (f),

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clause (4), unless Minnesota or another state having statutory and regulatory limited long-term care insurance requirements substantially similar to those adopted in Minnesota makes a determination that the statutory and regulatory limited long-term care insurance requirements have been met.

Subd. 5. Limited long-term care insurance; disclosure and performance **standards.** (a) A limited long-term care insurance policy must not:

- (1) cancel, not renew, or otherwise terminate on the basis of the insured individual's or certificate holder's age, gender, or deterioration of mental or physical health;
- (2) contain a provision that establishes a new waiting period in the event existing coverage is converted to or replaced by a new or other form of coverage within the same company, 24.10 except with respect to an increase in benefits voluntarily selected by the insured individual or group policyholder; or
 - (3) provide coverage for only skilled nursing care or provide significantly more coverage for skilled nursing care in a facility than coverage provided for lower levels of care.
 - (b) A limited long-term care insurance policy or certificate issued to a group identified in subdivision 2, paragraph (f), clauses (2) to (4), is prohibited from: (1) using a definition for preexisting condition that is more restrictive than or excludes a condition for which medical advice or treatment was recommended by or received from a health care services provider within the six months preceding the date an insured individual's coverage is effective; and (2) excluding coverage for a loss or confinement that is the result of a preexisting condition unless the loss or confinement begins within six months of the date an insured individual's coverage is effective. The commissioner may extend the limitation periods established in clauses (1) and (2) with respect to specific age group categories in specific policy forms upon a finding that the extension is in the public interest. The definition of preexisting condition required under clause (1) does not prohibit an insurer from using an application form designed to elicit the complete health history of an applicant and, on the basis of the applicant's answers on the application, from underwriting in accordance with that insurer's established underwriting standards. Unless otherwise provided in the policy or certificate, an insurer is not required to cover a preexisting condition, regardless of whether the preexisting condition is disclosed on the application, until the waiting period under clause (2) expires. A limited long-term care insurance policy or certificate is prohibited from excluding or using waivers or riders of any kind to exclude, limit, or reduce coverage or benefits for specifically named or described preexisting diseases or physical conditions beyond the waiting period established in clause (2).

25.1	(c) A limited long-term care insurance policy must not be delivered or issued for delivery
25.2	in Minnesota if the policy conditions eligibility: (1) for any benefits, on a prior hospitalization
25.3	requirement; (2) for benefits provided in an institutional care setting, on the receipt of a
25.4	higher level of institutional care; or (3) for any benefits other than waiver of premium,
25.5	post-confinement, post-acute care, or recuperative benefits, on a prior institutionalization
25.6	requirement. A limited long-term care insurance policy, certificate, or rider is prohibited
25.7	from conditioning eligibility for noninstitutional benefits on the prior or continuing receipt
25.8	of skilled care services.
25.9	(d) The commissioner may adopt administrative rules that establish loss ratio standards
25.10	for limited long-term care insurance policies if a specific reference to limited long-term
25.11	care insurance policies is contained in the administrative rule.
25.12	(e) A limited long-term care insurance applicant has the right to: (1) return the policy,
25.13	certificate, or rider to the company or the company's agent or insurance producer within 30
25.14	days of the date the policy, certificate, or rider is received; and (2) have the premium refunded
25.15	if, after examination of the policy, certificate, or rider, the applicant is not satisfied with the
25.16	policy, certificate, or rider for any reason.
25.17	(f) A limited long-term care insurance policy, certificate, or rider must have a notice
25.18	prominently printed on the first page or attached to the policy, certificate, or rider that
25.19	includes specific instructions for a limited long-term care insurance applicant to return a
25.20	policy, certificate, or rider under paragraph (e). The following statement or a substantially
25.21	similar statement must be included with the instructions:
25.22	"You have 30 days from the date you receive this policy, certificate, or rider to review
25.23	and return it to the company if you decide not to keep it. You do not have to tell the company
25.24	why you are returning it. If you decide to not keep the policy, certificate, or rider, simply
25.25	return it to the company at the company's administrative office, or you may return it to the
25.26	agent or insurance producer that you bought it from. You must return the policy, certificate,
25.27	or rider within 30 days of the date you first received it. The company must refund the full
25.28	amount of any premium paid within 30 days of the date the company receives the returned
25.29	policy, certificate, or rider. The premium refund is sent directly to the person who paid it.
25.30	A returned policy, certificate, or rider is void, as if it never was issued."
25.31	This paragraph does not apply to certificates issued pursuant to a policy issued to a group
25.32	defined in subdivision 2, paragraph (f), clause (1).
25.33	(g) A coverage outline must be delivered to a prospective applicant for limited long-term
25.34	care insurance at the time an initial solicitation is made, using a means that prominently

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26.1	directs the recipient's attention to the coverage outline and the coverage outline's purpose.
26.2	The commissioner must prescribe: (1) a standard format, including style, arrangement, and
26.3	overall appearance; and (2) the content that must be contained on a coverage outline. With
26.4	respect to an agent solicitation, the agent must deliver the coverage outline before presenting
26.5	an application or enrollment form. With respect to a direct response solicitation, the coverage
26.6	outline must be provided in conjunction with an application or enrollment form. Delivery
26.7	of a coverage outline is not required for a policy issued to a group defined in subdivision
26.8	2, paragraph (f), clause (1), if the information described in paragraph (h) is contained in
26.9	other materials relating to enrollment. A copy of the other materials must be made available
26.10	to the commissioner upon request.
26.11	(h) The coverage outline provided under paragraph (g) must include:
26.12	(1) a description of the principal benefits and coverage provided in the policy;
26.13	(2) a description of the eligibility triggers for benefits and how the eligibility triggers
26.14	are met;
26.15	(3) a statement identifying the principal exclusions, reductions, and limitations contained
26.16	in the policy;
26.17	(4) a statement describing the terms under which the policy, certificate, or both may be
26.18	continued in force or discontinued, including any reservation in the policy of a right to
26.19	change premium. A continuation or conversion provision for group coverage must be
26.20	specifically described;
26.21	(5) a statement indicating that coverage outline is a summary only and not an insurance
26.22	contract, and that the policy or group master policy contains the governing contractual
26.23	provisions;
26.24	(6) a description of the terms under which the policy or certificate may be returned and
26.25	premium refunded;
26.26	(7) a brief description of the relationship between cost of care and benefits; and
26.27	(8) a statement that discloses to the policyholder or certificate holder that the policy is
26.28	not long-term care insurance.
26.29	(i) A certificate issued pursuant to a group limited long-term care insurance policy that
26.30	is delivered or issued for delivery in Minnesota must include:
26.31	(1) a description of the principal benefits and coverage provided in the policy;

27.1	(2) a statement identifying the principal exclusions, reductions, and limitations contained
27.2	in the policy; and
27.3	(3) a statement indicating that the group master policy determines governing contractual
27.4	provisions.
27.5	(j) If an application for a limited long-term care insurance contract or certificate is
27.6	approved, the issuer must deliver the contract or certificate of insurance to the applicant no
27.7	later than 30 days after the date the application is approved.
27.8	(k) If a claim under a limited long-term care insurance contract is denied, the issuer
27.9	must, within 60 days of the date the policyholder, certificate holder, or a representative of
27.10	the policyholder or certificate holder submits a written request:
27.11	(1) provide a written explanation detailing the reasons for the denial; and
27.12	(2) make available all information directly related to the denial.
27.13	(l) A disclosure, statement, or written information and explanation required in this section,
27.14	whether in print or electronic form, must accommodate the communication needs of
27.15	individuals with disabilities and persons with limited English proficiency, as required by
27.16	<u>law.</u>
27.17	Subd. 6. Incontestability period. (a) An insurer may (1) rescind a limited long-term
27.18	care insurance policy or certificate, or (2) deny an otherwise valid limited long-term care
27.19	insurance claim, for a policy or certificate that has been in force for less than six months
27.20	upon a showing of misrepresentation that is material to the coverage acceptance.
27.21	(b) An insurer may (1) rescind a limited long-term care insurance policy or certificate,
27.22	or (2) deny an otherwise valid limited long-term care insurance claim, for a policy or
27.23	certificate that has been in force for at least six months but less than two years upon a
27.24	ecrimente that has been in force for at least six months but less than two years upon a
	showing of misrepresentation that is both material to the coverage acceptance and that
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27.2527.26	showing of misrepresentation that is both material to the coverage acceptance and that
	showing of misrepresentation that is both material to the coverage acceptance and that pertains to the condition for which benefits are sought.
27.26	showing of misrepresentation that is both material to the coverage acceptance and that pertains to the condition for which benefits are sought. (c) A policy or certificate that has been in force for two years is not contestable upon
27.26 27.27	showing of misrepresentation that is both material to the coverage acceptance and that pertains to the condition for which benefits are sought. (c) A policy or certificate that has been in force for two years is not contestable upon the grounds of misrepresentation alone. A policy or certificate that has been in force for
27.26 27.27 27.28	showing of misrepresentation that is both material to the coverage acceptance and that pertains to the condition for which benefits are sought. (c) A policy or certificate that has been in force for two years is not contestable upon the grounds of misrepresentation alone. A policy or certificate that has been in force for two years may be contested only upon a showing that the insured knowingly and intentionally
27.26 27.27 27.28 27.29	showing of misrepresentation that is both material to the coverage acceptance and that pertains to the condition for which benefits are sought. (c) A policy or certificate that has been in force for two years is not contestable upon the grounds of misrepresentation alone. A policy or certificate that has been in force for two years may be contested only upon a showing that the insured knowingly and intentionally misrepresented relevant facts relating to the insured individual's health.
27.26 27.27 27.28 27.29 27.30	showing of misrepresentation that is both material to the coverage acceptance and that pertains to the condition for which benefits are sought. (c) A policy or certificate that has been in force for two years is not contestable upon the grounds of misrepresentation alone. A policy or certificate that has been in force for two years may be contested only upon a showing that the insured knowingly and intentionally misrepresented relevant facts relating to the insured individual's health. (d) A limited long-term care insurance policy or certificate may be field issued if

28.1	to the producer or third-party administrator by an insurer, and (2) using the insurer's
28.2	underwriting guidelines.
28.3	(e) If an insurer paid benefits under the limited long-term care insurance policy or
28.4	certificate, the benefit payments are not recoverable by the insurer if the policy or certificate

- Subd. 7. Nonforfeiture benefits. (a) A limited long-term care insurance policy may offer the option to purchase a policy or certificate that includes a nonforfeiture benefit. A nonforfeiture benefit may be offered in the form of a rider that is attached to the policy. If the policyholder or certificate holder does not purchase the nonforfeiture benefit, the insurer must provide a contingent benefit upon lapse that must be available for a specified period of time after a substantial increase in premium rates, as determined by the commissioner under paragraph (c).
- (b) When a group limited long-term care insurance policy is issued, a nonforfeiture benefit offer must be made to the group policyholder. If the policy is issued as group limited long-term care insurance, as defined in subdivision 2, paragraph (f), clause (4), to an entity other than a continuing care retirement community or other similar entity, a nonforfeiture benefit offer must be made to each proposed certificate holder.
- (c) The commissioner must adopt administrative rules that specify: (1) the type or types of nonforfeiture benefits that must be offered as part of limited long-term care insurance policies and certificates; (2) the standards for nonforfeiture benefits; and (3) requirements regarding contingent benefit upon lapse, including determining the specified period of time during which a contingent benefit upon lapse is available and the substantial premium rate increase that triggers a contingent benefit upon lapse, as described in paragraph (a).
- Subd. 8. Administrative rulemaking. (a) The commissioner must adopt reasonable administrative rules to: (1) promote premium adequacy; (2) protect a policyholder in the event of a substantial rate increase; and (3) establish minimum standards for producer education, marketing practices, producer compensation, producer testing, independent review of benefit determinations, penalties, and reporting practices for limited long-term care insurance.
- (b) Administrative rules adopted under this section are subject to chapter 14.
- Subd. 9. Severability. If any provision of this section or the application of the provision 28.31 to any person or circumstance is held invalid for any reason, the remainder of the section 28.32 and the application of the invalid provision to other persons or circumstances is not affected. 28.33

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Subd. 10. Penalties. In addition to any other penalties provided by the laws of Minnesota, an insurer or producer that violates any requirement under this section or other law relating to the regulation of limited long-term care insurance or the marketing of limited long-term care insurance is subject to a fine of up to three times the amount of commissions paid for each policy involved in the violation or up to \$10,000, whichever is greater.

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EFFECTIVE DATE. This section is effective January 1, 2026.

ARTICLE 4

MEDICARE SUPPLEMENT INSURANCE

Section 1. Minnesota Statutes 2024, section 62A.31, subdivision 1, is amended to read:

Subdivision 1. **Policy requirements.** No individual or group policy, certificate, subscriber contract issued by a health service plan corporation regulated under chapter 62C, or other evidence of accident and health insurance the effect or purpose of which is to supplement Medicare coverage, including to supplement coverage under Medicare Advantage plans established under Medicare Part C, issued or delivered in this state or offered to a resident of this state shall be sold or issued to an individual covered by Medicare unless the requirements in subdivisions 1a to 1w 1v are met.

Sec. 2. Minnesota Statutes 2024, section 62A.31, subdivision 1f, is amended to read:

Subd. 1f. Suspension based on entitlement to medical assistance. (a) The policy or certificate must provide that benefits and premiums under the policy or certificate shall be suspended for any period that may be provided by federal regulation at the request of the policyholder or certificate holder for the period, not to exceed 24 months, in which the policyholder or certificate holder has applied for and is determined to be entitled to medical assistance under title XIX of the Social Security Act, but only if the policyholder or certificate holder notifies the issuer of the policy or certificate within 90 days after the date the individual becomes entitled to this assistance.

- (b) If suspension occurs and if the policyholder or certificate holder loses entitlement to this medical assistance, the policy or certificate shall be automatically reinstated, effective as of the date of termination of this entitlement, if the policyholder or certificate holder provides notice of loss of the entitlement within 90 days after the date of the loss and pays the premium attributable to the period, effective as of the date of termination of entitlement.
- (c) The policy must provide that upon reinstatement (1) there is no additional waiting period with respect to treatment of preexisting conditions, (2) coverage is provided which

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is substantially equivalent to coverage in effect before the date of the suspension. If the suspended policy provided coverage for outpatient prescription drugs, reinstitution of the policy for Medicare Part D enrollees must be without coverage for outpatient prescription drugs and must otherwise provide coverage substantially equivalent to the coverage in effect before the date of suspension, and (3) premiums are classified on terms that are at least as favorable to the policyholder or certificate holder as the premium classification terms that would have applied to the policyholder or certificate holder had coverage not been suspended.

Sec. 3. Minnesota Statutes 2024, section 62A.31, subdivision 1h, is amended to read:

Subd. 1h. Limitations on denials, conditions, and pricing of coverage. No health carrier issuing Medicare-related coverage in this state may impose preexisting condition limitations or otherwise deny or condition the issuance or effectiveness of any such coverage available for sale in this state, nor may it discriminate in the pricing of such coverage, because of the health status, claims experience, receipt of health care, medical condition, or age of an applicant where an application for such coverage is submitted: (1) prior to or during the six-month period beginning with the first day of the month in which an individual first enrolled for benefits under Medicare Part B; or (2) during the open enrollment period. This subdivision applies to each Medicare-related coverage offered by a health carrier regardless of whether the individual has attained the age of 65 years. If an individual who is enrolled in Medicare Part B due to disability status is involuntarily disenrolled due to loss of disability status, the individual is eligible for another six-month enrollment period provided under this subdivision beginning the first day of the month in which the individual later becomes eligible for and enrolls again in Medicare Part B and during the open enrollment period. An individual who is or was previously enrolled in Medicare Part B due to disability status is eligible for another six-month enrollment period under this subdivision beginning the first day of the month in which the individual has attained the age of 65 years and either maintains enrollment in, or enrolls again in, Medicare Part B and during the open enrollment period. If an individual enrolled in Medicare Part B voluntarily disenrolls from Medicare Part B because the individual becomes enrolled under an employee welfare benefit plan, the individual is eligible for another six-month enrollment period, as provided in this subdivision, beginning the first day of the month in which the individual later becomes eligible for and enrolls again in Medicare Part B and during the open enrollment period.

Sec. 4. Minnesota Statutes 2024, section 62A.31, subdivision 1p, is amended to read:

Subd. 1p. **Renewal or continuation provisions.** Medicare supplement policies and certificates shall include a renewal or continuation provision. The language or specifications

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of the provision shall be consistent with the type of contract issued. The provision shall be appropriately captioned and shall appear on the first page of the policy or certificate, and shall include any reservation by the issuer of the right to change premiums. Except for riders or endorsements by which the issuer effectuates a request made in writing by the insured, exercises a specifically reserved right under a Medicare supplement policy or certificate, or is required to reduce or eliminate benefits to avoid duplication of Medicare benefits, all riders or endorsements added to a Medicare supplement policy or certificate after the date of issue or at reinstatement or renewal that reduce or eliminate benefits or coverage in the policy or certificate shall require a signed acceptance by the insured. After the date of policy or certificate issue, a rider or endorsement that increases benefits or coverage with a concomitant increase in premium during the policy or certificate term shall be agreed to in writing and signed by the insured, unless the benefits are required by the minimum standards for Medicare supplement policies or if the increased benefits or coverage is required by law. Where a separate additional premium is charged for benefits provided in connection with riders or endorsements, the premium charge shall be set forth in the policy, declaration page, or certificate. If a Medicare supplement policy or certificate contains limitations with respect to preexisting conditions, the limitations shall appear as a separate paragraph of the policy or certificate and be labeled as "preexisting condition limitations."

Issuers of accident and sickness policies or certificates that provide hospital or medical expense coverage on an expense incurred or indemnity basis to persons eligible for Medicare shall provide to those applicants a "Guide to Health Insurance for People with Medicare" in the form developed by the Centers for Medicare and Medicaid Services and in a type size no smaller than 12-point type. Delivery of the guide must be made whether or not such policies or certificates are advertised, solicited, or issued as Medicare supplement policies or certificates as defined in this section and section 62A.3099. Except in the case of direct response issuers, delivery of the guide must be made to the applicant at the time of application, and acknowledgment of receipt of the guide must be obtained by the issuer. Direct response issuers shall deliver the guide to the applicant upon request, but no later than the time at which the policy is delivered.

Sec. 5. Minnesota Statutes 2024, section 62A.31, subdivision 1u, is amended to read:

Subd. 1u. **Guaranteed issue for eligible persons.** (a)(1) Eligible persons are those individuals described in paragraph (b) who seek to enroll under the policy during the period specified in paragraph (c) and who submit evidence of the date of termination or disenrollment described in paragraph (b), or of the date of Medicare Part D enrollment, with the application for a Medicare supplement policy.

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(2) With respect to eligible persons, an issuer shall not: deny or condition the issuance or effectiveness of a Medicare supplement policy described in paragraph (c) that is offered and is available for issuance to new enrollees by the issuer; discriminate in the pricing of such a Medicare supplement policy because of health status, claims experience, receipt of health care, medical condition, or age; or impose an exclusion of benefits based upon a preexisting condition under such a Medicare supplement policy.

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- (b) An eligible person is an individual described in any of the following:
- (1) the individual is enrolled under an employee welfare benefit plan that provides health benefits that supplement the benefits under Medicare; and the plan terminates, or the plan ceases to provide all such supplemental health benefits to the individual;
- (2) the individual is enrolled with a Medicare Advantage organization under a Medicare Advantage plan under Medicare Part C, and any of the following circumstances apply, or the individual is 65 years of age or older and is enrolled with a Program of All-Inclusive Care for the Elderly (PACE) provider under section 1894 of the federal Social Security Act, and there are circumstances similar to those described in this clause that would permit discontinuance of the individual's enrollment with the provider if the individual were enrolled in a Medicare Advantage plan:
- (i) the organization's or plan's certification under Medicare Part C has been terminated or the organization has terminated or otherwise discontinued providing the plan in the area in which the individual resides;
- (ii) the individual is no longer eligible to elect the plan because of a change in the individual's place of residence or other change in circumstances specified by the secretary, but not including termination of the individual's enrollment on the basis described in section 1851(g)(3)(B) of the federal Social Security Act, United States Code, title 42, section 1395w-21(g)(3)(b) (where the individual has not paid premiums on a timely basis or has engaged in disruptive behavior as specified in standards under section 1856 of the federal Social Security Act, United States Code, title 42, section 1395w-26), or the plan is terminated for all individuals within a residence area;
- (iii) the individual demonstrates, in accordance with guidelines established by the Secretary, that:
- (A) the organization offering the plan substantially violated a material provision of the organization's contract in relation to the individual, including the failure to provide an enrollee on a timely basis medically necessary care for which benefits are available under

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33.1	the plan or the failure to provide such covered care in accordance with applicable quality
33.2	standards; or
33.3	(B) the organization, or agent or other entity acting on the organization's behalf, materially
33.4	misrepresented the plan's provisions in marketing the plan to the individual; or
33.5	(iv) the individual meets such other exceptional conditions as the secretary may provide;
33.6	(3)(i) the individual is enrolled with:
33.7	(A) an eligible organization under a contract under section 1876 of the federal Social
33.8	Security Act, United States Code, title 42, section 1395mm (Medicare cost);
33.9	(B) a similar organization operating under demonstration project authority, effective for
33.10	periods before April 1, 1999;
33.11	(C) an organization under an agreement under section 1833(a)(1)(A) of the federal Social
33.12	Security Act, United States Code, title 42, section 1395l(a)(1)(A) (health care prepayment
33.13	plan); or
33.14	(D) an organization under a Medicare Select policy under section 62A.318 or the similar
33.15	law of another state; and
33.16	(ii) the enrollment ceases under the same circumstances that would permit discontinuance
33.17	of an individual's election of coverage under clause (2);
33.18	(4) the individual is enrolled under a Medicare supplement policy, and the enrollment
33.19	ceases because:
33.20	(i)(A) of the insolvency of the issuer or bankruptcy of the nonissuer organization; or
33.21	(B) of other involuntary termination of coverage or enrollment under the policy;
33.22	(ii) the issuer of the policy substantially violated a material provision of the policy; or
33.23	(iii) the issuer, or an agent or other entity acting on the issuer's behalf, materially
33.24	misrepresented the policy's provisions in marketing the policy to the individual;
33.25	(5)(i) the individual was enrolled under a Medicare supplement policy and terminates
33.26	that enrollment and subsequently enrolls, for the first time, with any Medicare Advantage
33.27	organization under a Medicare Advantage plan under Medicare Part C; any eligible
33.28	organization under a contract under section 1876 of the federal Social Security Act, United
33.29	States Code, title 42, section 1395mm (Medicare cost); any similar organization operating
33.30	under demonstration project authority; any PACE provider under section 1894 of the federal

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Social Security Act, or a Medicare Select policy under section 62A.318 or the similar law of another state; and

- (ii) the subsequent enrollment under item (i) is terminated by the enrollee during any period within the first 12 months of the subsequent enrollment during which the enrollee is permitted to terminate the subsequent enrollment under section 1851(e) of the federal Social Security Act;
- (6) the individual, upon first enrolling for benefits under Medicare Part B, enrolls in a Medicare Advantage plan under Medicare Part C, or with a PACE provider under section 1894 of the federal Social Security Act, and disenrolls from the plan by not later than 12 months after the effective date of enrollment;
- (7) the individual enrolls in a Medicare Part D plan during the initial Part D enrollment period, as defined under United States Code, title 42, section 1395ss(v)(6)(D), and, at the time of enrollment in Part D, was enrolled under a Medicare supplement policy that covers outpatient prescription drugs and the individual terminates enrollment in the Medicare supplement policy and submits evidence of enrollment in Medicare Part D along with the application for a policy described in paragraph (e), clause (4); or
- (8) the individual was enrolled in a state public program and is losing coverage due to the unwinding of the Medicaid continuous enrollment conditions, as provided by Code of Federal Regulations, title 45, section 155.420 (d)(9) and (d)(1), and Public Law 117-328, section 5131 (2022).
- (c)(1) In the case of an individual described in paragraph (b), clause (1), the guaranteed issue period begins on the later of: (i) the date the individual receives a notice of termination or cessation of all supplemental health benefits or, if a notice is not received, notice that a claim has been denied because of a termination or cessation; or (ii) the date that the applicable coverage terminates or ceases; and ends 63 days after the later of those two dates.
- (2) In the case of an individual described in paragraph (b), clause (2), (3), (5), or (6), whose enrollment is terminated involuntarily, the guaranteed issue period begins on the date that the individual receives a notice of termination and ends 63 days after the date the applicable coverage is terminated.
- (3) In the case of an individual described in paragraph (b), clause (4), item (i), the guaranteed issue period begins on the earlier of: (i) the date that the individual receives a notice of termination, a notice of the issuer's bankruptcy or insolvency, or other such similar notice if any; and (ii) the date that the applicable coverage is terminated, and ends on the date that is 63 days after the date the coverage is terminated.

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(4) In the case of an individual described in paragraph (b), clause (2), (4), (5), or (6),
who disenrolls voluntarily, the guaranteed issue period begins on the date that is 60 days
before the effective date of the disenrollment and ends on the date that is 63 days after the
effective date.

- (5) In the case of an individual described in paragraph (b), clause (7), the guaranteed issue period begins on the date the individual receives notice pursuant to section 1882(v)(2)(B) of the Social Security Act from the Medicare supplement issuer during the 60-day period immediately preceding the initial Part D enrollment period and ends on the date that is 63 days after the effective date of the individual's coverage under Medicare Part D.
- (6) In the case of an individual described in paragraph (b) but not described in this paragraph, the guaranteed issue period begins on the effective date of disenrollment and ends on the date that is 63 days after the effective date.
- (7) For all individuals described in paragraph (b), the open enrollment period is a guaranteed issue period.
- (d)(1) In the case of an individual described in paragraph (b), clause (5), or deemed to be so described, pursuant to this paragraph, whose enrollment with an organization or provider described in paragraph (b), clause (5), item (i), is involuntarily terminated within the first 12 months of enrollment, and who, without an intervening enrollment, enrolls with another such organization or provider, the subsequent enrollment is deemed to be an initial enrollment described in paragraph (b), clause (5).
- (2) In the case of an individual described in paragraph (b), clause (6), or deemed to be so described, pursuant to this paragraph, whose enrollment with a plan or in a program described in paragraph (b), clause (6), is involuntarily terminated within the first 12 months of enrollment, and who, without an intervening enrollment, enrolls in another such plan or program, the subsequent enrollment is deemed to be an initial enrollment described in paragraph (b), clause (6).
- (3) For purposes of paragraph (b), clauses (5) and (6), no enrollment of an individual with an organization or provider described in paragraph (b), clause (5), item (i), or with a plan or in a program described in paragraph (b), clause (6), may be deemed to be an initial enrollment under this paragraph after the two-year period beginning on the date on which the individual first enrolled with the organization, provider, plan, or program.
 - (e) The Medicare supplement policy to which eligible persons are entitled under:

Article 4 Sec. 5.

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(1) paragraph (b), clauses (1) to (4), is any Medicare supplement policy that has a benefit
package consisting of the basic Medicare supplement plan described in section 62A.316,
paragraph (a), plus any combination of the three optional riders described in section 62A.316,
paragraph (b), clauses (1) to (3), offered by any issuer;

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- (2) paragraph (b), clause (5), is the same Medicare supplement policy in which the individual was most recently previously enrolled, if available from the same issuer, or, if not so available, any policy described in clause (1) offered by any issuer, except that after December 31, 2005, if the individual was most recently enrolled in a Medicare supplement policy with an outpatient prescription drug benefit, a Medicare supplement policy to which the individual is entitled under paragraph (b), clause (5), is:
- (i) the policy available from the same issuer but modified to remove outpatient prescription drug coverage; or
- (ii) at the election of the policyholder, a policy described in clause (4), except that the policy may be one that is offered and available for issuance to new enrollees that is offered by any issuer;
 - (3) paragraph (b), clause (6), is any Medicare supplement policy offered by any issuer;
- (4) paragraph (b), clause (7), is a Medicare supplement policy that has a benefit package classified as a basic plan under section 62A.316 if the enrollee's existing Medicare supplement policy is a basic plan or, if the enrollee's existing Medicare supplement policy is an extended basic plan under section 62A.315, a basic or extended basic plan at the option of the enrollee, provided that the policy is offered and is available for issuance to new enrollees by the same issuer that issued the individual's Medicare supplement policy with outpatient prescription drug coverage. The issuer must permit the enrollee to retain all optional benefits contained in the enrollee's existing coverage, other than outpatient prescription drugs, subject to the provision that the coverage be offered and available for issuance to new enrollees by the same issuer.
- (f)(1) At the time of an event described in paragraph (b), because of which an individual loses coverage or benefits due to the termination of a contract or agreement, policy, or plan, the organization that terminates the contract or agreement, the issuer terminating the policy, or the administrator of the plan being terminated, respectively, shall notify the individual of the individual's rights under this subdivision, and of the obligations of issuers of Medicare supplement policies under paragraph (a). The notice must be communicated contemporaneously with the notification of termination.

Article 4 Sec. 5.

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- (2) At the time of an event described in paragraph (b), because of which an individual ceases enrollment under a contract or agreement, policy, or plan, the organization that offers the contract or agreement, regardless of the basis for the cessation of enrollment, the issuer offering the policy, or the administrator of the plan, respectively, shall notify the individual of the individual's rights under this subdivision, and of the obligations of issuers of Medicare supplement policies under paragraph (a). The notice must be communicated within ten working days of the issuer receiving notification of disenrollment.
- (g) Reference in this subdivision to a situation in which, or to a basis upon which, an individual's coverage has been terminated does not provide authority under the laws of this state for the termination in that situation or upon that basis.
- 37.11 (h) An individual's rights under this subdivision are in addition to, and do not modify 37.12 or limit, the individual's rights under subdivision 1h.
- Sec. 6. Minnesota Statutes 2024, section 62A.31, subdivision 4, is amended to read:
- Subd. 4. **Prohibited policy provisions.** (a) A Medicare supplement policy or certificate in force in the state shall not contain benefits that duplicate benefits provided by Medicare or contain exclusions on coverage that are more restrictive than those of Medicare.
- Duplication of benefits is permitted to the extent permitted under subdivision 1s, paragraph
 (a), for benefits provided by Medicare Part D.
- (b) No Medicare supplement policy or certificate may use waivers to exclude, limit, or reduce coverage or benefits for specifically named or described preexisting diseases or physical conditions, except as permitted under subdivision 1b.
- Sec. 7. Minnesota Statutes 2024, section 62A.44, subdivision 2, is amended to read:
- Subd. 2. **Questions.** (a) Application forms shall include the following questions designed to elicit information as to whether, as of the date of the application, the applicant has another Medicare supplement or other health insurance policy or certificate in force or whether a Medicare supplement policy or certificate is intended to replace any other accident and sickness policy or certificate presently in force. A supplementary application or other form to be signed by the applicant and agent containing the questions and statements may be used.
 - "(1) You do not need more than one Medicare supplement policy or certificate.
- 37.31 (2) If you purchase this policy, you may want to evaluate your existing health coverage and decide if you need multiple coverages.

REVISOR

38.1	(3) You may be eligible for benefits under Medicaid and may not need a Medicare
38.2	supplement policy or certificate.
38.3	(4) The benefits and premiums under your Medicare supplement policy or certificate
38.4	can be suspended, if requested, during your entitlement to benefits under Medicaid for
38.5	24 months. You must request this suspension within 90 days of becoming eligible for
38.6	Medicaid. If you are no longer entitled to Medicaid, your policy or certificate will be
38.7	reinstated if requested within 90 days of losing Medicaid eligibility.
38.8	(5) Counseling services may be available in Minnesota to provide advice concerning
38.9	medical assistance through state Medicaid, Qualified Medicare Beneficiaries (QMBs),
38.10	and Specified Low-Income Medicare Beneficiaries (SLMBs).
38.11	To the best of your knowledge:
38.12	(1) Do you have another Medicare supplement policy or certificate in force?
38.13	(a) If so, with which company?
38.14	(b) If so, do you intend to replace your current Medicare supplement policy with this
38.15	policy or certificate?
38.16	(2) Do you have any other health insurance policies that provide benefits which this
38.17	Medicare supplement policy or certificate would duplicate?
38.18	(a) If so, please name the company.
38.19	(b) What kind of policy?
38.20	(3) Are you covered for medical assistance through the state Medicaid program? If so,
38.21	which of the following programs provides coverage for you?
38.22	(a) Specified Low-Income Medicare Beneficiary (SLMB),
38.23	(b) Qualified Medicare Beneficiary (QMB), or
38.24	(c) full Medicaid Beneficiary?"
38.25	(b) Agents shall list any other health insurance policies they have sold to the applicant.
38.26	(1) List policies sold that are still in force.
38.27	(2) List policies sold in the past five years that are no longer in force.
38.28	(c) In the case of a direct response issuer, a copy of the application or supplemental
38.29	form, signed by the applicant, and acknowledged by the insurer, shall be returned to the
38.30	applicant by the insurer on delivery of the policy or certificate.

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(d) Upon determining that a sale will involve replacement of Medicare supplement

39.2	coverage, any issuer, other than a direct response issuer, or its agent, shall furnish the
39.3	applicant, before issuance or delivery of the Medicare supplement policy or certificate, a
39.4	notice regarding replacement of Medicare supplement coverage. One copy of the notice
39.5	signed by the applicant and the agent, except where the coverage is sold without an agent,
39.6	shall be provided to the applicant and an additional signed copy shall be retained by the
39.7	issuer. A direct response issuer shall deliver to the applicant at the time of the issuance of
39.8	the policy or certificate the notice regarding replacement of Medicare supplement coverage.
39.9	(e) The notice required by paragraph (d) for an issuer shall be provided in substantially
39.10	the following form in no less than 12-point type:
39.11	"NOTICE TO APPLICANT REGARDING REPLACEMENT
39.12	OF MEDICARE SUPPLEMENT INSURANCE
39.13	(Insurance company's name and address)
39.14	SAVE THIS NOTICE! IT MAY BE IMPORTANT TO YOU IN THE FUTURE.
39.15	According to (your application) (information you have furnished), you intend to terminate
39.16	existing Medicare supplement insurance and replace it with a policy or certificate to be
39.17	issued by (Company Name) Insurance Company. Your new policy or certificate will provide
39.18	30 days within which you may decide without cost whether you desire to keep the policy
39.19	or certificate.
39.20	You should review this new coverage carefully. Compare it with all accident and sickness
39.21	coverage you now have. If, after due consideration, you find that purchase of this Medicare
39.22	supplement coverage is a wise decision you should terminate your present Medicare
39.23	supplement policy. You should evaluate the need for other accident and sickness coverage
39.24	you have that may duplicate this policy.
39.25	STATEMENT TO APPLICANT BY ISSUER, AGENT, (BROKER OR OTHER
39.26	REPRESENTATIVE): I have reviewed your current medical or health insurance
39.27	coverage. To the best of my knowledge this Medicare supplement policy will not duplicate
39.28	your existing Medicare supplement policy because you intend to terminate the existing
39.29	Medicare supplement policy. The replacement policy or certificate is being purchased
39.30	for the following reason(s) (check one):
39.31	Additional benefits
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39.33	Fewer benefits and lower premiums
39.34	Other (please specify)

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*Signature not required for direct response sales."

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41.1	(f) Paragraph (e), clauses (1) and (2), of the replacement notice (applicable to preexisting
11.2	conditions) may be deleted by an issuer if the replacement does not involve application of
41.3	a new preexisting condition limitation.
11.4	Sec. 8. REPEALER.
41.5	(a) Minnesota Statutes 2024, sections 62A.3099, subdivision 18b; and 62A.31, subdivision
41.6	1w, are repealed.
11.7	(b) Laws 2023, chapter 57, article 2, section 66, is repealed.
11.8	Sec. 9. EFFECTIVE DATE.
11.9	Sections 1 to 8 are effective the day following final enactment.
41.10	ARTICLE 5
11.11	INSURANCE HOLDING COMPANY SYSTEMS
11.12	Section 1. Minnesota Statutes 2024, section 60D.09, is amended by adding a subdivision
41.13	to read:
11.14	Subd. 5. Other violations. If the commissioner believes a person has committed a
41.15	violation of section 60D.17 that prevents the full understanding of the enterprise risk to the
11.16	insurer by affiliates or by the insurance holding company system, the violation may serve
11.17	as an independent basis for disapproving dividends or distributions and for placing the
41.18	insurer under an order of supervision under chapter 60B.
11.19	Sec. 2. Minnesota Statutes 2024, section 60D.15, subdivision 4, is amended to read:
41.20	Subd. 4. Control. The term "control," including the terms "controlling," "controlled
11.21	by," and "under common control with," means the possession, direct or indirect, of the
11.22	power to direct or cause the direction of the management and policies of a person, whether
11.23	through the ownership of voting securities, by contract other than a commercial contract
11.24	for goods or nonmanagement services, or otherwise, unless the power is the result of an
11.25	official position with, or corporate office held by, or court appointment of, the person.
11.26	Control is presumed to exist if any person, directly or indirectly, owns, controls, holds with
11.27	the power to vote, or holds proxies representing, ten percent or more of the voting securities
11.28	of any other person. This presumption may be rebutted by a showing made in the manner
11.29	provided by section 60D.19, subdivision 11, that control does not exist in fact. The
11.30	commissioner may determine, after furnishing all persons in interest notice and opportunity

REVISOR

42.1	to be heard and making specific findings of fact to support such the determination, that
42.2	control exists in fact, notwithstanding the absence of a presumption to that effect.
42.3	Sec. 3. Minnesota Statutes 2024, section 60D.15, is amended by adding a subdivision to
42.4	read:
42.5	Subd. 4c. Group capital calculation instructions. "Group capital calculation
42.6	instructions" means the group capital calculation instructions adopted by the NAIC and as
42.7	amended by the NAIC from time to time in accordance with procedures adopted by the
42.8	NAIC.
42.9	Sec. 4. Minnesota Statutes 2024, section 60D.15, is amended by adding a subdivision to
42.10	read:
42.11	Subd. 6b. NAIC. "NAIC" means the National Association of Insurance Commissioners.
42.12	Sec. 5. Minnesota Statutes 2024, section 60D.15, is amended by adding a subdivision to
42.13	read:
42.14	Subd. 6c. NAIC liquidity stress test framework. "NAIC liquidity stress test framework"
42.15	means an NAIC publication which includes a history of the NAIC's development of
42.16	regulatory liquidity stress testing, the scope criteria applicable for a specific data year, and
42.17	the liquidity stress test instructions and reporting templates for a specific data year, scope
42.18	criteria, instructions, and reporting template being adopted by the NAIC, and as amended
42.19	by the NAIC from time to time in accordance with the procedures adopted by the NAIC.
42.20	Sec. 6. Minnesota Statutes 2024, section 60D.15, subdivision 7, is amended to read:
42.21	Subd. 7. Person. A "person" is an individual, a corporation, a limited liability company.
42.22	a partnership, an association, a joint stock company, a trust, an unincorporated organization,
42.23	any similar entity or any combination of the foregoing acting in concert, but does not include
42.24	any joint venture partnership exclusively engaged in owning, managing, leasing, or
42.25	developing real or tangible personal property.
42.26	Sec. 7. Minnesota Statutes 2024, section 60D.15, is amended by adding a subdivision to
42.27	read:
42.28	Subd. 7a. Scope criteria. "Scope criteria," as detailed in the NAIC liquidity stress test
42.29	framework, means the designated exposure bases along with minimum magnitudes of the
42 30	designated exposure bases for the specified data year that are used to establish a preliminary

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43.1 <u>list of insurers considered scoped into the NAIC liquidity stress test framework for that data</u>
 43.2 <u>year.</u>

- Sec. 8. Minnesota Statutes 2024, section 60D.16, subdivision 2, is amended to read:
- Subd. 2. **Additional investment authority.** In addition to investments in common stock, preferred stock, debt obligations, and other securities otherwise permitted <u>under this chapter</u>, a domestic insurer may also:
- (a) Invest, in common stock, preferred stock, debt obligations, and other securities of one or more subsidiaries, amounts that do not exceed the lesser of ten percent of the insurer's assets or 50 percent of the insurer's surplus as regards policyholders, provided that after the investments, the insurer's surplus as regards policyholders will be is reasonable in relation to the insurer's outstanding liabilities and adequate to its financial needs. In calculating the amount of these investments, investments in domestic or foreign insurance subsidiaries and health maintenance organizations must be excluded, and there must be included:
- (1) total net money or other consideration expended and obligations assumed in the acquisition or formation of a subsidiary, including all organizational expenses and contributions to capital and surplus of the subsidiary whether or not represented by the purchase of capital stock or issuance of other securities; and
- (2) all amounts expended in acquiring additional common stock, preferred stock, debt obligations, and other securities; and all contributions to the capital or surplus, of a subsidiary subsequent to its acquisition or formation.
- (b) Invest any amount in common stock, preferred stock, debt obligations, and other securities of one or more subsidiaries engaged or organized to engage exclusively in the ownership and management of assets authorized as investments for the insurer provided that the subsidiary agrees to limit its investments in any asset so that the investments will do not cause the amount of the total investment of the insurer to exceed any of the investment limitations specified in paragraph (a) or other statutes applicable to the insurer. For the purpose of this paragraph, "the total investment of the insurer" includes:
 - (1) any direct investment by the insurer in an asset; and
- (2) the insurer's proportionate share of any investment in an asset by any subsidiary of the insurer, which must be calculated by multiplying the amount of the subsidiary's investment by the percentage of the ownership of the subsidiary.
 - (c) With the approval of the commissioner, invest any greater amount in common stock, preferred stock, debt obligations, or other securities of one or more subsidiaries, if after the

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investment the insurer's surplus as regards policyholders will be is reasonable in relation to the insurer's outstanding liabilities and adequate to its financial needs.

Sec. 9. Minnesota Statutes 2024, section 60D.17, subdivision 1, is amended to read:

Subdivision 1. **Filing requirements.** (a) No person other than the issuer shall: (1) make a tender offer for or a request or invitation for tenders of, or enter into any agreement to exchange securities or for, seek to acquire, or acquire, in the open market or otherwise, any voting security of a domestic insurer if, after the consummation thereof, the person would, directly or indirectly, or by conversion or by exercise of any right to acquire, be in control of the insurer; or (2) enter into an agreement to merge with or otherwise to acquire control of a domestic insurer or any person controlling a domestic insurer unless, at the time the offer, request, or invitation is made or the agreement is entered into, or before the acquisition of the securities if no offer or agreement is involved, the person has filed with the commissioner and has sent to the insurer, a statement containing the information required by this section and the offer, request, invitation, agreement, or acquisition has been approved by the commissioner in the manner prescribed in this section.

- (b) For purposes of this section, a controlling person of a domestic insurer seeking to divest its controlling interest in the domestic insurer, in any manner, shall file with the commissioner, with a copy to the insurer, confidential notice of its proposed divestiture at least 30 days before the cessation of control. The commissioner shall determine those instances in which the party or parties seeking to divest or to acquire a controlling interest in an insurer will be required to file for and obtain approval of the transaction.
- (c) With respect to a transaction subject to this section, the acquiring person must also file a preacquisition notification with the commissioner, which must contain the information set forth in section 60D.18, subdivision 3, paragraph (b). A failure to file the notification may be subject to penalties specified in section 60D.18, subdivision 5.
- (d) For purposes of this section, a domestic insurer includes a person controlling a domestic insurer unless the person, as determined by the commissioner, is either directly or through its affiliates primarily engaged in business other than the business of insurance. For the purposes of this section, "person" does not include any securities broker holding, in the usual and customary <u>brokers broker's</u> function, less than 20 percent of the voting securities of an insurance company or of any person that controls an insurance company.
- (e) The statement filed with the commissioner pursuant to subdivisions 1 and 2 must remain confidential until the transaction is approved by the commissioner, except that all attachments filed with the statement remain confidential after the approval unless the

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commissioner, in the commissioner's discretion, determines that confidential treatment of any of this information will interfere with enforcement of this section.

Sec. 10. Minnesota Statutes 2024, section 60D.18, subdivision 3, is amended to read:

- Subd. 3. **Preacquisition notification; waiting period.** (a) An acquisition covered by subdivision 2 may be subject to an order pursuant to subdivision 4<u>5</u> unless the acquiring person files a preacquisition notification and the waiting period has expired. The acquired person may file a preacquisition notification. The commissioner shall give confidential treatment to information submitted under this section in the same manner as provided in section 60D.22.
- (b) The preacquisition notification must be in the form and contain the information as prescribed by the National Association of Insurance Commissioners relating to those markets that, under subdivision 2, paragraph (b), clause (5) (4), cause the acquisition not to be exempted from the provisions of this section. The commissioner may require the additional material and information as the commissioner deems necessary to determine whether the proposed acquisition, if consummated, would violate the competitive standard of subdivision 4. The required information may include an opinion of an economist as to the competitive impact of the acquisition in this state accompanied by a summary of the education and experience of the person indicating that person's ability to render an informed opinion.
- (c) The waiting period required begins on the date of receipt of the commissioner of a preacquisition notification and ends on the earlier of the 30th day after the date of its receipt, or termination of the waiting period by the commissioner. Before the end of the waiting period, the commissioner on a onetime basis may require the submission of additional needed information relevant to the proposed acquisition, in which event the waiting period shall end on the earlier of the 30th day after receipt of the additional information by the commissioner or termination of the waiting period by the commissioner.
- Sec. 11. Minnesota Statutes 2024, section 60D.19, subdivision 4, is amended to read:
- Subd. 4. **Materiality.** No information need be disclosed on the registration statement filed pursuant to subdivision 2 if the information is not material for the purposes of this section. Unless the commissioner by rule or order provides otherwise; sales, purchases, exchanges, loans or extensions of credit, investments, or guarantees involving one-half of one percent or less of an insurer's admitted assets as of the 31st day of December next preceding shall not be deemed material for purposes of this section. The definition of

ma	teriality provided in this subdivision does not apply for purposes of the group capital
cal	culation or the NAIC liquidity stress test framework.
S	ec. 12. Minnesota Statutes 2024, section 60D.19, is amended by adding a subdivision to
rea	d:
	Subd. 11b. Group capital calculation. (a) Except as otherwise provided in this paragraph,
the	ultimate controlling person of every insurer subject to registration must concurrently
file	e with the registration an annual group capital calculation as directed by the commissioner.
Th	e report must be completed in accordance with the NAIC group capital calculation
ins	tructions, which may permit the commissioner to allow a controlling person that is not
the	ultimate controlling person to file the group capital calculation. The report must be filed
wi	th the commissioner, as determined by the commissioner in accordance with the procedures
wi	thin the Financial Analysis Handbook adopted by the NAIC. The following insurance
10	ding company systems are exempt from filing the group capital calculation:
	(1) an insurance holding company system that (i) has only one insurer within the insurance
10	ding company system's holding company structure, (ii) only writes business and is only
ic	ensed in the insurance holding company system's domestic state, and (iii) assumes no
u	siness from any other insurer;
	(2) an insurance holding company system that is required to perform a group capital
al	culation specified by the United States Federal Reserve Board. The commissioner must
ec	uest the calculation from the Federal Reserve Board under the terms of information
ha	aring agreements in effect. If the Federal Reserve Board is unable to share the calculation
vi1	th the commissioner, the insurance holding company system is not exempt from the group
ap	pital calculation filing;
	(3) an insurance holding company system whose non-United States groupwide supervisor
s 1	ocated within a reciprocal jurisdiction as described in section 60A.092, subdivision 10b,
ha	t recognizes the United States state regulatory approach to group supervision and group
ap	oital; or
	(4) an insurance holding company system:
	(i) that provides information to the commissioner that meets the requirements for
acc	ereditation under the NAIC financial standards and accreditation program, either directly
or	indirectly through the groupwide supervisor, that has determined the information is
sat	isfactory to allow the commissioner to comply with the NAIC group supervision approach,

as detailed in the NAIC Financial Analysis Handbook; and

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47.1	(ii) whose non-United States groupwide supervisor that is not in a reciprocal jurisdiction
47.2	recognizes and accepts, as specified by the commissioner by rule, the group capital
47.3	calculation as the worldwide group capital assessment for United States insurance groups
47.4	that operate in that jurisdiction.
47.5	(b) Notwithstanding paragraph (a), clauses (3) and (4), a commissioner must require the
47.6	group capital calculation for the United States operations of any non-United States based
47.7	insurance holding company system where, after any necessary consultation with other
47.8	supervisors or officials, requiring the group capital calculation is deemed appropriate by
47.9	the commissioner for prudential oversight and solvency monitoring purposes or for ensuring
47.10	the competitiveness of the insurance marketplace.
47.11	(c) Notwithstanding the exemptions from filing the group capital calculation under
47.12	paragraph (a), the commissioner may exempt the ultimate controlling person from filing
47.13	the annual group capital calculation or accept a limited group capital filing or report in
47.14	accordance with criteria specified by the commissioner by rule.
47.15	(d) If the commissioner determines that an insurance holding company system no longer
47.16	meets one or more of the requirements for an exemption from filing the group capital
47.17	calculation under this subdivision, the insurance holding company system must file the
47.18	group capital calculation at the next annual filing date unless given an extension by the
47.19	commissioner based on reasonable grounds shown.
47.20	See 12 Minnesote Statutes 2024 coation 60D 10 is amonded by adding a subdivision to
47.20	Sec. 13. Minnesota Statutes 2024, section 60D.19, is amended by adding a subdivision to read:
47.21	reau.
47.22	Subd. 11c. Liquidity stress test. (a) The ultimate controlling person of every insurer
47.23	subject to registration and also scoped into the NAIC liquidity stress test framework must
47.24	file the results of a specific year's liquidity stress test. The filing must be made to the
47.25	commissioner, as determined by the procedures within the Financial Analysis Handbook
47.26	adopted by the NAIC.
47.27	(b) The NAIC liquidity stress test framework includes scope criteria applicable to a
47.28	specific data year. The scope criteria must be reviewed at least annually by the NAIC
47.29	Financial Stability Task Force or the NAIC Financial Stability Task Force's successor. Any
47.30	change made to the NAIC liquidity stress test framework or to the data year for which the
47.31	scope criteria must be measured is effective January 1 of the year following the calendar
47.32	year in which the change is adopted. An insurer meeting at least one threshold of the scope
47.33	criteria is scoped into the NAIC liquidity stress test framework for the specified data year
47.34	unless the commissioner, in consultation with the NAIC Financial Stability Task Force or

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48.1	the NAIC Financial Stability Task Force's successor, determines the insurer should not be
48.2	scoped into the framework for that data year. An insurer that does not trigger at least one
48.3	threshold of the scope criteria is scoped out of the NAIC liquidity stress test framework for
48.4	the specified data year unless the commissioner, in consultation with the NAIC Financial
48.5	Stability Task Force or the NAIC Financial Stability Task Force's successor, determines
48.6	the insurer should be scoped into the framework for the specified data year.
48.7	(c) The commissioner and other state insurance commissioners must avoid scoping
48.8	insurers in and out of the NAIC liquidity stress test framework on a frequent basis. The
48.9	commissioner, in consultation with the NAIC Financial Stability Task Force or the NAIC
48.10	Financial Stability Task Force's successor, must assess irregular scope status as part of an
48.11	insurer's determination.
	(1) [7]
48.12	(d) The performance of and filing of the results from a specific year's liquidity stress
48.13	test must comply with (1) the NAIC liquidity stress test framework's instructions and
48.14	reporting templates for the specific year, and (2) any commissioner determinations, in
48.15	consultation with the NAIC Financial Stability Task Force or the NAIC Financial Stability
48.16	Task Force's successor, provided within the framework.
	G 14 IGAD 4051 CDOUD CADITAL CALCULATION
48.17	Sec. 14. [60D.195] GROUP CAPITAL CALCULATION.
48.18	Subdivision 1. Annual group capital calculation; exemption permitted. The
48.19	commissioner may exempt the ultimate controlling person from filing the annual group
48.20	capital calculation if the commissioner makes a determination that the insurance holding
48.21	company system meets the following criteria:
48.22	(1) has annual direct written and unaffiliated assumed premium, including international
48.23	direct and assumed premium but excluding premiums reinsured with the Federal Crop
48.24	Insurance Corporation and Federal Flood Program, of less than \$1,000,000,000;
40 25	(2) has no insurers within the insurance holding company's structure that are domiciled
48.25	(2) has no insurers within the insurance holding company's structure that are domiciled
48.26	outside of the United States or a United States territory;
48.27	(3) has no banking, depository, or other financial entity that is subject to an identified
48.28	regulatory capital framework within the insurance holding company's structure;
48.29	(4) attests that no material changes in the transactions between insurers and noninsurers
48.30	in the group have occurred since the last annual group capital filing; and
48.31	(5) the noninsurers within the holding company system do not pose a material financial
48.31 48.32	(5) the noninsurers within the holding company system do not pose a material financial risk to the insurer's ability to honor policyholder obligations.

49.1	Subd. 2. Limited group capital filing. The commissioner may accept a limited group
49.2	capital filing in lieu of the group capital calculation if:
49.3	(1) the insurance holding company system has annual direct written and unaffiliated
49.4	assumed premium, including international direct and assumed premium but excluding
49.5	premiums reinsured with the Federal Crop Insurance Corporation and Federal Flood Program,
49.6	of less than \$1,000,000,000; and
49.7	(2) the insurance holding company system:
49.8	(i) has no insurers within the insurance holding company's structure that are domiciled
49.9	outside of the United States or a United States territory;
49.10	(ii) does not include a banking, depository, or other financial entity that is subject to an
49.11	identified regulatory capital framework; and
49.12	(iii) attests that no material changes in transactions between insurers and noninsurers in
49.13	the group have occurred and the noninsurers within the holding company system do not
49.14	pose a material financial risk to the insurer's ability to honor policyholder obligations.
49.15	Subd. 3. Previous exemption; required filing. For an insurance holding company that
49.16	has previously met an exemption with respect to the group capital calculation under
49.17	subdivision 1 or 2, the commissioner may at any time require the ultimate controlling person
49.18	to file an annual group capital calculation, completed in accordance with the NAIC group
49.19	capital calculation instructions, if:
49.20	(1) an insurer within the insurance holding company system is in a risk-based capital
49.21	action level event under section 60A.62 or a similar standard for a non-United States insurer;
49.22	(2) an insurer within the insurance holding company system meets one or more of the
49.23	standards of an insurer deemed to be in hazardous financial condition, as defined under
49.24	section 60E.02, subdivision 5; or
49.25	(3) an insurer within the insurance holding company system otherwise exhibits qualities
49.26	of a troubled insurer, as determined by the commissioner based on unique circumstances,
49.27	including but not limited to the type and volume of business written, ownership and
49.28	organizational structure, federal agency requests, and international supervisor requests.
49.29	Subd. 4. Non-United States jurisdictions; recognition and acceptance. A non-United
49.30	States jurisdiction is deemed to recognize and accept the group capital calculation if the
49.31	non-United States jurisdiction:
49.32	(1) with respect to section 60D.19, subdivision 11b, paragraph (a), clause (4):

50.1	(i) recognizes the United States state regulatory approach to group supervision and group
50.2	capital by providing confirmation by a competent regulatory authority in the non-United
50.3	States jurisdiction that insurers and insurance groups whose lead state is accredited by the
50.4	NAIC under the NAIC accreditation program: (A) are subject only to worldwide prudential
50.5	insurance group supervision, including worldwide group governance, solvency and capital,
50.6	and reporting, as applicable, by the lead state; and (B) are not subject to group supervision,
50.7	including worldwide group governance, solvency and capital, and reporting, at the level of
50.8	the worldwide parent undertaking of the insurance or reinsurance group by the non-United
50.9	States jurisdiction; or
50.10	(ii) if no United States insurance group operates in the non-United States jurisdiction,
50.11	indicates formally in writing to the lead state with a copy to the International Association
50.12	of Insurance Supervisors that the group capital calculation is an acceptable international
50.13	capital standard. The formal indication under this item serves as the documentation otherwise
50.14	required under item (i); and
50.15	(2) provides confirmation by a competent regulatory authority in the non-United States
50.16	jurisdiction that information regarding an insurer and the insurer's parent, subsidiary, or
50.17	affiliated entities, if applicable, must be provided to the commissioner in accordance with
50.18	a memorandum of understanding or similar document between the commissioner and the
50.19	non-United States jurisdiction, including but not limited to the International Association of
50.20	Insurance Supervisors Multilateral Memorandum of Understanding or other multilateral
50.21	memoranda of understanding coordinated by the NAIC. The commissioner must determine,
50.22	in consultation with the NAIC committee process, if the information sharing agreement
50.23	requirements are effective.
50.24	Subd. 5. Non-United States jurisdiction; publication. (a) A list of non-United States
50.25	jurisdictions that recognize and accept the group capital calculation under section 60D.19,
50.26	subdivision 11b, paragraph (a), clause (4), must be published through the NAIC committee
50.27	process to assist the commissioner determine what insurers must file an annual group capital
50.28	calculation. The list must clarify the situations in which a jurisdiction is exempt from filing
50.29	under section 60D.19, subdivision 11b, paragraph (a), clause (4). To assist with a
50.30	determination under section 60D.19, subdivision 11b, paragraph (b), the list must also
50.31	identify whether a jurisdiction that is exempt under section 60D.19, subdivision 11b,
50.32	paragraph (a), clause (3) or (4), requires a group capital filing for any United States insurance
50.33	group's operations in the non-United States jurisdiction.
50.34	(b) For a non-United States jurisdiction where no United States insurance group operates,

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the confirmation provided to comply with subdivision 4, clause (1), item (ii), serves as

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51.1	support for a recommendation to be published that the non-United States jurisdiction is a
51.2	jurisdiction that recognizes and accepts the group capital calculation pursuant to the NAIC
51.3	committee process.
51.4	(c) If the commissioner makes a determination pursuant to section 60D.19, subdivision
51.5	11b, that differs from the NAIC list, the commissioner must provide thoroughly documented
51.6	justification to the NAIC and other states.
51.7	(d) Upon a determination by the commissioner that a non-United States jurisdiction no
51.8	longer meets one or more of the requirements to recognize and accept the group capital
51.9	calculation, the commissioner may provide a recommendation to the NAIC that the
51.10	non-United States jurisdiction be removed from the list of jurisdictions that recognize and
51.11	accept the group capital calculation.
51.12	Sec. 15. Minnesota Statutes 2024, section 60D.20, subdivision 1, is amended to read:
51.13	Subdivision 1. Transactions within an insurance holding company system. (a)
51.14	Transactions within an insurance holding company system to which an insurer subject to
51.15	registration is a party are subject to the following standards:
51.16	(1) the terms shall be fair and reasonable;
51.17	(2) agreements for cost-sharing services and management shall include the provisions
51.18	required by rule issued by the commissioner;
51.19	(3) charges or fees for services performed shall be reasonable;
51.20	(4) expenses incurred and payment received shall be allocated to the insurer in conformity
51.21	with customary insurance accounting practices consistently applied;
51.22	(5) the books, accounts, and records of each party to all such transactions shall be so
51.23	maintained as to clearly and accurately disclose the nature and details of the transactions
51.24	including this accounting information as is necessary to support the reasonableness of the
51.25	charges or fees to the respective parties; and
51.26	(6) the insurer's surplus as regards policyholders following any dividends or distributions
51.27	to shareholder affiliates shall be reasonable in relation to the insurer's outstanding liabilities
51.28	and adequate to its financial needs-;
51.29	(7) if the commissioner determines an insurer subject to this chapter is in a hazardous
51.30	financial condition, as defined under section 60E.02, subdivision 5, or a condition that would
51.31	be grounds for supervision, conservation, or a delinquency proceeding, the commissioner
51.32	may require the insurer to secure and maintain either a deposit, held by the commissioner,

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or a bond, as determined by the insurer at the insurer's discretion, to protect the insurer for the duration of the contract, agreement, or the existence of the condition for which the commissioner required the deposit or bond. When determining whether a deposit or bond is required, the commissioner must consider whether concerns exist with respect to the affiliated person's ability to fulfill the contract or agreement if the insurer entered into liquidation. Once the insurer is deemed to be in a hazardous financial condition or a condition that would be grounds for supervision, conservation, or a delinquency proceeding, and a deposit or bond is necessary, the commissioner may determine the amount of the deposit or bond, not to exceed the value of the contract or agreement in any one year, and whether the deposit or bond is required for a single contract, multiple contracts, or a contract only with a specific person or persons;

(8) all of an insurer's records and data held by an affiliate are and remain the property of the insurer, are subject to control of the insurer, are identifiable, and are segregated or readily capable of segregation, at no additional cost to the insurer, from all other persons' records and data. For purposes of this clause, records and data include all records and data that are otherwise the property of the insurer in whatever form maintained, including but not limited to claims and claim files, policyholder lists, application files, litigation files, premium records, rate books, underwriting manuals, personnel records, financial records, or similar records within the affiliate's possession, custody, or control. At the request of the insurer, the affiliate must provide that the receiver may (i) obtain a complete set of all records of any type that pertain to the insurer's business, (ii) obtain access to the operating systems on which the data are maintained, (iii) obtain the software that runs the operating systems either through assumption of licensing agreements or otherwise, and (iv) restrict the use of the data by the affiliate if the affiliate is not operating the insurer's business. The affiliate must provide a waiver of any landlord lien or other encumbrance to provide the insurer access to all records and data in the event the affiliate defaults under a lease or other agreement; and

(9) premiums or other funds belonging to the insurer that are collected or held by an affiliate are the exclusive property of the insurer and are subject to the control of the insurer.

Any right of offset in the event an insurer is placed into receivership is subject to chapter 576.

(b) The following transactions involving a domestic insurer and any person in its insurance holding company system, including amendments or modifications of affiliate agreements previously filed pursuant to this section, which are subject to any materiality standards contained in clauses (1) to (7), may not be entered into unless the insurer has

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notified the commissioner in writing of its intention to enter into the transaction at least 30 days prior thereto, or a shorter period the commissioner permits, and the commissioner has not disapproved it within this period. The notice for amendments or modifications must include the reasons for the change and the financial impact on the domestic insurer. Informal notice must be reported, within 30 days after a termination of a previously filed agreement, to the commissioner for determination of the type of filing required, if any:

- (1) sales, purchases, exchanges, loans or extensions of credit, guarantees, or investments provided the transactions are equal to or exceed: (i) with respect to nonlife insurers, the lesser of three percent of the insurer's admitted assets, or 25 percent of surplus as regards policyholders; (ii) with respect to life insurers, three percent of the insurer's admitted assets; each as of the 31st day of December next preceding;
- (2) loans or extensions of credit to any person who is not an affiliate, where the insurer makes the loans or extensions of credit with the agreement or understanding that the proceeds of the transactions, in whole or in substantial part, are to be used to make loans or extensions of credit to, to purchase assets of, or to make investments in, any affiliate of the insurer making such loans or extensions of credit provided the transactions are equal to or exceed: (i) with respect to nonlife insurers, the lesser of three percent of the insurer's admitted assets or 25 percent of surplus as regards policyholders; (ii) with respect to life insurers, three percent of the insurer's admitted assets; each as of the 31st day of December next preceding;
- (3) reinsurance agreements or modifications to those agreements, including: (i) all reinsurance pooling agreements; and (ii) agreements in which the reinsurance premium or a change in the insurer's liabilities, or the projected reinsurance premium or a change in the insurer's liabilities in any of the next three years, equals or exceeds five percent of the insurer's surplus as regards policyholders, as of the 31st day of December next preceding, including those agreements which may require as consideration the transfer of assets from an insurer to a nonaffiliate, if an agreement or understanding exists between the insurer and nonaffiliate that any portion of such the assets will be transferred to one or more affiliates of the insurer;
- (4) all management agreements, service contracts, tax allocation agreements, guarantees, and all cost-sharing arrangements;
- (5) guarantees when made by a domestic insurer; provided, however, that a guarantee which is quantifiable as to amount is not subject to the notice requirements of this paragraph unless it exceeds the lesser of one-half of one percent of the insurer's admitted assets or ten percent of surplus as regards policyholders as of the 31st day of December next preceding.

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Further, all guarantees which are not quantifiable as to amount are subject to the notice requirements of this paragraph;

- (6) direct or indirect acquisitions or investments in a person that controls the insurer or in an affiliate of the insurer in an amount which, together with its present holdings in the investments, exceeds 2-1/2 percent of the insurer's surplus to policyholders. Direct or indirect acquisitions or investments in subsidiaries acquired pursuant to section 60D.16, as otherwise authorized under this chapter, or in nonsubsidiary insurance affiliates that are subject to the provisions of sections 60D.15 to 60D.29, are exempt from this requirement; and
- (7) any material transactions, specified by regulation, which the commissioner determines may adversely affect the interests of the insurer's policyholders.
- Nothing contained in this section authorizes or permits any transactions that, in the case of an insurer not a member of the same insurance holding company system, would be otherwise contrary to law.
- (c) A domestic insurer may not enter into transactions which are part of a plan or series of like transactions with persons within the insurance holding company system if the purpose of those separate transactions is to avoid the statutory threshold amount and thus avoid the review that would occur otherwise. If the commissioner determines that the separate transactions were entered into over any 12-month period for the purpose, the commissioner may exercise the authority under section 60D.25.
- (d) The commissioner, in reviewing transactions pursuant to paragraph (b), shall consider whether the transactions comply with the standards set forth in paragraph (a), and whether they may adversely affect the interests of policyholders.
- (e) The commissioner shall be notified within 30 days of any investment of the domestic insurer in any one corporation if the total investment in the corporation by the insurance holding company system exceeds ten percent of the corporation's voting securities.
- (f) An affiliate that is party to an agreement or contract with a domestic insurer that is subject to paragraph (b), clause (4), is subject to the jurisdiction of any supervision, seizure, conservatorship, or receivership proceedings against the insurer and to the authority of a supervisor, conservator, rehabilitator, or liquidator for the insurer appointed pursuant to chapters 60B and 576 for the purpose of interpreting, enforcing, and overseeing the affiliate's obligations under the agreement or contract to perform services for the insurer that are: (1) an integral part of the insurer's operations, including but not limited to management, administrative, accounting, data processing, marketing, underwriting, claims handling, investment, or any other similar functions; or (2) essential to the insurer's ability to fulfill

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the insurer's obligations under insurance policies. The commissioner may require that an agreement or contract pursuant to paragraph (b), clause (4), to provide the services described in clauses (1) and (2) must specify that the affiliate consents to the jurisdiction as provided under this paragraph.

REVISOR

Sec. 16. Minnesota Statutes 2024, section 60D.217, is amended to read:

60D.217 GROUPWIDE SUPERVISION OF INTERNATIONALLY ACTIVE INSURANCE GROUPS.

- (a) The commissioner is authorized to act as the groupwide supervisor for any internationally active insurance group in accordance with the provisions of this section. However, the commissioner may otherwise acknowledge another regulatory official as the groupwide supervisor where the internationally active insurance group:
 - (1) does not have substantial insurance operations in the United States;
 - (2) has substantial insurance operations in the United States, but not in this state; or
- (3) has substantial insurance operations in the United States and this state, but the commissioner has determined pursuant to the factors set forth in subsections paragraphs (b) and (f) that the other regulatory official is the appropriate groupwide supervisor.
- An insurance holding company system that does not otherwise qualify as an internationally active insurance group may request that the commissioner make a determination or acknowledgment as to a groupwide supervisor pursuant to this section.
- (b) In cooperation with other state, federal, and international regulatory agencies, the commissioner will must identify a single groupwide supervisor for an internationally active insurance group. The commissioner may determine that the commissioner is the appropriate groupwide supervisor for an internationally active insurance group that conducts substantial insurance operations concentrated in this state. However, the commissioner may acknowledge that a regulatory official from another jurisdiction is the appropriate groupwide supervisor for the internationally active insurance group. The commissioner shall consider the following factors when making a determination or acknowledgment under this subsection paragraph:
- (1) the place of domicile of the insurers within the internationally active insurance group that hold the largest share of the group's written premiums, assets, or liabilities;
- 55.30 (2) the place of domicile of the top-tiered <u>insurer(s)</u> <u>insurer or insurers</u> in the insurance 55.31 holding company system of the internationally active insurance group;

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- (3) the location of the executive offices or largest operational offices of the internationally active insurance group;
- (4) whether another regulatory official is acting or is seeking to act as the groupwide supervisor under a regulatory system that the commissioner determines to be:
- 56.5 (i) substantially similar to the system of regulation provided under the laws of this state; or 56.6
 - (ii) otherwise sufficient in terms of providing for groupwide supervision, enterprise risk analysis, and cooperation with other regulatory officials; and
 - (5) whether another regulatory official acting or seeking to act as the groupwide supervisor provides the commissioner with reasonably reciprocal recognition and cooperation. However, a commissioner identified under this section as the groupwide supervisor may determine that it is appropriate to acknowledge another supervisor to serve as the groupwide supervisor. The acknowledgment of the groupwide supervisor shall be made after consideration of the factors listed in clauses (1) to (5), and shall be made in cooperation with and subject to the acknowledgment of other regulatory officials involved with supervision of members of the internationally active insurance group, and in consultation with the internationally active insurance group.
 - (c) Notwithstanding any other provision of law, when another regulatory official is acting as the groupwide supervisor of an internationally active insurance group, the commissioner shall acknowledge that regulatory official as the groupwide supervisor. However, in the event of a material change in the internationally active insurance group that results in:
 - (1) the internationally active insurance group's insurers domiciled in this state holding the largest share of the group's premiums, assets, or liabilities; or
 - (2) this state being the place of domicile of the top-tiered insurer(s) insurer or insurers in the insurance holding company system of the internationally active insurance group, the commissioner shall make a determination or acknowledgment as to the appropriate groupwide supervisor for such an internationally active insurance group pursuant to subsection paragraph (b).
 - (d) Pursuant to section 60D.21, the commissioner is authorized to collect from any insurer registered pursuant to section 60D.19 all information necessary to determine whether the commissioner may act as the groupwide supervisor of an internationally active insurance group or if the commissioner may acknowledge another regulatory official to act as the groupwide supervisor. Prior to issuing a determination that an internationally active insurance

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group is subject to groupwide supervision by the commissioner, the commissioner shall notify the insurer registered pursuant to section 60D.19 and the ultimate controlling person within the internationally active insurance group. The internationally active insurance group shall have not less than 30 days to provide the commissioner with additional information pertinent to the pending determination. The commissioner shall publish in the State Register and on the department's website the identity of internationally active insurance groups that the commissioner has determined are subject to groupwide supervision by the commissioner.

- (e) If the commissioner is the groupwide supervisor for an internationally active insurance group, the commissioner is authorized to engage in any of the following groupwide supervision activities:
- 57.11 (1) assess the enterprise risks within the internationally active insurance group to ensure 57.12 that:
 - (i) the material financial condition and liquidity risks to the members of the internationally active insurance group that are engaged in the business of insurance are identified by management; and
 - (ii) reasonable and effective mitigation measures are in place; or
 - (2) request, from any member of an internationally active insurance group subject to the commissioner's supervision, information necessary and appropriate to assess enterprise risk, including but not limited to information about the members of the internationally active insurance group regarding:
 - (i) governance, risk assessment, and management;
- 57.22 (ii) capital adequacy; and
- 57.23 (iii) material intercompany transactions;
 - (3) coordinate and, through the authority of the regulatory officials of the jurisdictions where members of the internationally active insurance group are domiciled, compel development and implementation of reasonable measures designed to ensure that the internationally active insurance group is able to timely recognize and mitigate enterprise risks to members of such the internationally active insurance group that are engaged in the business of insurance;
 - (4) communicate with other state, federal and international regulatory agencies for members within the internationally active insurance group and share relevant information subject to the confidentiality provisions of section 60D.22, through supervisory colleges as set forth in section 60D.215 or otherwise;

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- (5) enter into agreements with or obtain documentation from any insurer registered under section 60D.19, any member of the internationally active insurance group, and any other state, federal, and international regulatory agencies for members of the internationally active insurance group, providing the basis for or otherwise clarifying the commissioner's role as groupwide supervisor, including provisions for resolving disputes with other regulatory officials. Such Agreements or documentation under this clause shall not serve as evidence in any proceeding that any insurer or person within an insurance holding company system not domiciled or incorporated in this state is doing business in this state or is otherwise subject to jurisdiction in this state; and
- (6) other groupwide supervision activities, consistent with the authorities and purposes enumerated above, as considered necessary by the commissioner.
- (f) If the commissioner acknowledges that another regulatory official from a jurisdiction that is not accredited by the NAIC is the groupwide supervisor, the commissioner is authorized to reasonably cooperate, through supervisory colleges or otherwise, with groupwide supervision undertaken by the groupwide supervisor, provided that:
 - (1) the commissioner's cooperation is in compliance with the laws of this state; and
- (2) the regulatory official acknowledged as the groupwide supervisor also recognizes and cooperates with the commissioner's activities as a groupwide supervisor for other internationally active insurance groups where applicable. Where such recognition and cooperation by the groupwide supervisor is not reasonably reciprocal, the commissioner is authorized to refuse recognition and cooperation.
- (g) The commissioner is authorized to enter into agreements with or obtain documentation from any insurer registered under section 60D.19, any affiliate of the insurer, and other state, federal, and international regulatory agencies for members of the internationally active insurance group, that provide the basis for or otherwise clarify a regulatory official's role as groupwide supervisor.
- (h) A registered insurer subject to this section shall be liable for and shall pay the reasonable expenses of the commissioner's participation in the administration of this section, including the engagement of attorneys, actuaries, and any other professionals and all reasonable travel expenses.
 - Sec. 17. Minnesota Statutes 2024, section 60D.22, subdivision 1, is amended to read:
- Subdivision 1. **Classification protection and use of information by commissioner.** (a)

 Documents, materials, or other information in the possession or control of the department

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that are obtained by or disclosed to the commissioner or any other person in the course of an examination or investigation made pursuant to section 60D.21 and all information reported pursuant to sections 60D.17, except as provided in section 60D.17, subdivision 1, paragraph (e); 60D.18; 60D.19; and 60D.20; and 60D.217, are classified as confidential or protected nonpublic or both, are not subject to subpoena, and are not subject to discovery or admissible in evidence in a private civil action. However, the commissioner may use the documents, materials, or other information in the furtherance of any regulatory or legal action brought as a part of the commissioner's official duties. The commissioner shall not otherwise make the documents, materials, or other information public without the prior written consent of the insurer to which it pertains unless the commissioner, after giving the insurer and its affiliates who would be affected by this action notice and opportunity to be heard, determines that the interest of policyholders, shareholders, or the public will be is served by the publication of it, in which event the commissioner may publish all or any part in the manner the commissioner deems appropriate.

- (b) For purposes of the information reported and provided to the department pursuant to section 60D.19, subdivision 11b, the commissioner must maintain the confidentiality of the group capital calculation and group capital ratio produced within the calculation and any group capital information received from an insurance holding company supervised by the Federal Reserve Board or any United States groupwide supervisor.
- (c) For purposes of the information reported and provided to the department pursuant to section 60D.19, subdivision 11c, the commissioner must maintain the confidentiality of the liquidity stress test results and supporting disclosures and any liquidity stress test information received from an insurance holding company supervised by the Federal Reserve Board and non-United States groupwide supervisors.
 - Sec. 18. Minnesota Statutes 2024, section 60D.22, subdivision 3, is amended to read:
- Subd. 3. **Sharing of information.** In order to assist in the performance of the commissioner's duties, the commissioner:
 - (1) may share documents, materials, or other information, including the confidential, protected nonpublic, and privileged documents, materials, or information subject to this section, including proprietary and trade secret documents and materials, with: (i) other state, federal, and international regulatory agencies, with; (ii) the NAIC and its affiliates and subsidiaries;; (iii) any third-party consultants designated by the commissioner; and with (iv) state, federal, and international law enforcement authorities, including members of any supervisory college described in section 60D.215, provided that the recipient agrees in

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writing to maintain the confidentiality and privileged status of the document, material, or other information, and has verified in writing the legal authority to maintain confidentiality;

- (2) notwithstanding clause (1), may only share confidential, protected nonpublic, and privileged documents, materials, or information reported pursuant to section 60D.19, subdivision 11a, with commissioners of states having statutes or regulations substantially similar to subdivision 1 and who have agreed in writing not to disclose this information;
- (3) may receive documents, materials, or information, including otherwise confidential and privileged documents, materials, or information from the NAIC and its the NAIC's affiliates and subsidiaries and from regulatory and law enforcement officials of other foreign or domestic jurisdictions, and shall maintain as confidential, protected nonpublic, or privileged any document, material, or information received with notice or the understanding that it is confidential or privileged under the laws of the jurisdiction that is the source of the document, material, or information; and
- (4) shall enter into written agreements with the NAIC and a third-party consultant designated by the commissioner governing sharing and use of information provided pursuant to sections 60D.15 to 60D.29 consistent with this clause that shall:
- (i) specify procedures and protocols regarding the confidentiality and security of information shared with the NAIC and its affiliates and subsidiaries or a third-party consultant designated by the commissioner pursuant to sections 60D.15 to 60D.29, including procedures and protocols for sharing by the NAIC with other state, federal, or international regulators. The agreement must provide that the recipient agrees in writing to maintain the confidentiality and privileged status of the documents, materials, or other information, and has verified in writing the legal authority to maintain confidentiality;
- (ii) specify that ownership of information shared with the NAIC and its affiliates and subsidiaries or a third-party consultant pursuant to sections 60D.15 to 60D.29 remains with the commissioner and the NAIC's or a third-party consultant's, as designated by the commissioner, use of the information is subject to the direction of the commissioner;
- (iii) excluding documents, material, or information reported pursuant to section 60D.19, subdivision 11c, prohibit the NAIC or a third-party consultant designated by the commissioner from storing the information shared pursuant to sections 60D.15 to 60D.29 in a permanent database after the underlying analysis is completed;
- (iii) (iv) require prompt notice to be given to an insurer whose confidential or protected nonpublic information in the possession of the NAIC or a third-party consultant designated by the commissioner pursuant to sections 60D.15 to 60D.29 is subject to a request or

subpoena to the NAIC or a third-party consultant designated by the commissioner for

61.2	disclosure or production; and
61.3	(iv) (v) require the NAIC and its affiliates and subsidiaries or a third-party consultant
61.4	designated by the commissioner to consent to intervention by an insurer in any judicial or
61.5	administrative action in which the NAIC and its affiliates and subsidiaries or a third-party
61.6	consultant designated by the commissioner may be required to disclose confidential or
61.7	protected nonpublic information about the insurer shared with the NAIC and its affiliates
61.8	and subsidiaries or a third-party consultant designated by the commissioner pursuant to
61.9	sections 60D.15 to 60D.29-; and
61.10	(vi) for documents, material, or information reported pursuant to section 60D.19,
61.11	subdivision 11c, in the case of an agreement involving a third-party consultant, provide for
61.12	notification of the identity of the consultant to the applicable insurers.
61.13	Sec. 19. Minnesota Statutes 2024, section 60D.22, subdivision 6, is amended to read:
61.14	Subd. 6. Classification protection and use by others. Documents, materials, or other
61.15	information in the possession or control of the NAIC or a third-party consultant designated
61.16	by the commissioner pursuant to sections 60D.15 to 60D.29 are confidential, protected
61.17	nonpublic, or privileged, are not subject to subpoena, and are not subject to discovery or
61.18	admissible in evidence in a private civil action.
61.19	Sec. 20. Minnesota Statutes 2024, section 60D.22, is amended by adding a subdivision to
61.20	read:
61.21	Subd. 7. Certain disclosures or publication prohibited. (a) The group capital calculation
61.22	and resulting group capital ratio required under section 60D.19, subdivision 11b, and the
61.23	liquidity stress test along with the liquidity stress test's results and supporting disclosures
61.24	required under section 60D.19, subdivision 11c, are regulatory tools to assess group risks
61.25	and capital adequacy and group liquidity risks, respectively, and are not intended as a means
61.26	to rank insurers or insurance holding company systems generally.
61.27	(b) Except as otherwise required under sections 60D.09 to 60D.29, making, publishing
61.28	disseminating, circulating, or placing before the public, or causing directly or indirectly to
61.29	be made, published, disseminated, circulated, or placed before the public in a newspaper,
61.30	magazine, or other publication, or in the form of a notice, circular, pamphlet, letter, or poster
61.31	or over any radio, television station, or any electronic means of communication available
61.32	to the public, or in any other way as an advertisement, announcement, or statement containing
61.33	a representation or statement with regard to the group capital calculation, group capital ratio

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the liquidity stress test results, or supporting disclosures for the liquidity stress test of any insurer or any insurer group, or of any component derived in the calculation by any insurer, broker, or other person engaged in any manner in the insurance business is misleading and is prohibited.

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(c) Notwithstanding paragraph (b), an insurer may publish an announcement in a written publication if any materially false statement with respect to the group capital calculation, resulting group capital ratio, an inappropriate comparison of any amount to an insurer's or insurance group's group capital calculation or resulting group capital ratio, liquidity stress test result, supporting disclosures for the liquidity stress test, or an inappropriate comparison of any amount to an insurer's or insurance group's liquidity stress test result or supporting disclosures is published in any written publication and the insurer is able to demonstrate to the commissioner with substantial proof the statement's falsity or inappropriateness. The sole purpose of an announcement under this paragraph must be to rebut the materially false statement.

Sec. 21. Minnesota Statutes 2024, section 60D.24, subdivision 2, is amended to read:

Subd. 2. Voting of securities; when prohibited. No security that is the subject of any agreement or arrangement regarding acquisition, or that is acquired or to be acquired, in contravention of the provisions of this chapter or of any rule or order issued by the commissioner may be voted at any shareholder's meeting, or may be counted for quorum purposes, and any action of shareholders requiring the affirmative vote of a percentage of shares may be taken as though the securities were not issued and outstanding. No action taken at the meeting shall be invalidated by the voting of the securities, unless the action would materially affect control of the insurer or unless the courts of this state have so ordered. If an insurer or the commissioner has reason to believe that any security of the insurer has been or is about to be acquired in contravention of the provisions of this chapter or of any rule or order issued by the commissioner, the insurer or the commissioner may apply to the district court for the county in which the insurer has its principal place of business to enjoin any offer, request, invitation, agreement, or acquisition made in contravention of section 60D.16 60D.17 or any rule or order issued by the commissioner to enjoin the voting of any security so acquired, to void any vote of the security already cast at any meeting of shareholders and for other equitable relief as the nature of the case and the interest of the insurer's policyholders or the public requires.

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Sec. 22. Minnesota Statutes 2024, section 60D.25, is amended to read:

60D.25 RECEIVERSHIP.

Whenever it appears to the commissioner that any person has committed a violation of this chapter that so impairs the financial condition of a domestic insurer as to threaten insolvency or make the further transaction of business by it hazardous to its policyholders, creditors, shareholders, or the public, then the commissioner may proceed as provided in chapter 60B to take possessions of the property of the domestic insurer and to conduct the business of that the domestic insurer.

ARTICLE 6

MINNESOTA BUSINESS CORPORATIONS ACT

Section 1. Minnesota Statutes 2024, section 302A.011, subdivision 41, is amended to read:

- Subd. 41. **Beneficial owner; beneficial ownership.** (a) "Beneficial owner," when used with respect to shares or other securities, includes, but is not limited to, any person who, directly or indirectly through any written or oral agreement, arrangement, relationship, understanding, or otherwise, has or shares the power to vote, or direct the voting of, the shares or securities or has or shares the power to dispose of, or direct the disposition of, the shares or securities, except that:
- (1) a person shall not be deemed the beneficial owner of shares or securities tendered pursuant to a tender or exchange offer made by the person or any of the person's affiliates or associates until the tendered shares or securities are accepted for purchase or exchange; and
- (2) a person shall not be deemed the beneficial owner of shares or securities with respect to which the person has the power to vote or direct the voting arising solely from a revocable proxy given in response to a proxy solicitation required to be made and made in accordance with the applicable rules and regulations under the Securities Exchange Act of 1934 and is not then reportable under that act on a Schedule 13D or comparable report, or, if the corporation is not subject to the rules and regulations under the Securities Exchange Act of 1934, would have been required to be made and would not have been reportable if the corporation had been subject to the rules and regulations.
- (b) "Beneficial ownership" includes, but is not limited to, the right to acquire shares or securities through the exercise of options, warrants, or rights, or the conversion of convertible securities, or otherwise. The shares or securities subject to the options, warrants, rights, or

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conversion privileges held by a person shall be deemed to be outstanding for the purpose of computing the percentage of outstanding shares or securities of the class or series owned by the person, but shall not be deemed to be outstanding for the purpose of computing the percentage of the class or series owned by any other person. A person shall be is deemed the beneficial owner of shares and securities beneficially owned by: (1) any relative or spouse of the person or any relative of the spouse, residing in the home of the person; (2) any trust or estate in which the person (i) owns ten percent or more of the total beneficial interest of the trust or estate, or (ii) serves as trustee or executor or in a similar fiduciary capacity; for the trust or estate; (3) any organization in which the person owns ten percent or more of the equity; and (4) any affiliate of the person.

- (c) When two or more persons act or agree to act as a partnership, limited partnership, syndicate, or other group for the purposes of acquiring, owning, or voting shares or other securities of a corporation, all members of the partnership, syndicate, or other group are deemed to constitute a "person" and to have acquired beneficial ownership, as of the date they first so act or agree to act together, of all shares or securities of the corporation beneficially owned by the person.
- Sec. 2. Minnesota Statutes 2024, section 302A.011, is amended by adding a subdivision to read:
- Subd. 72. **Defective corporate act.** "Defective corporate act" means an overissue, an election or appointment of directors that is void or voidable due to a failure of authorization, or an act or transaction purportedly taken by or on behalf of the corporation that is and, at the time the act or transaction was purportedly taken, would have been within the corporation's power under section 302A.101 but is void or voidable due to a failure of authorization.
- Sec. 3. Minnesota Statutes 2024, section 302A.011, is amended by adding a subdivision to read:
 - Subd. 73. Emergency. "Emergency" means a situation during which it is impracticable for the corporation to conduct the corporation's affairs in accordance with this chapter, the articles, the bylaws, or as specified in a notice for the meeting previously given as a result of a catastrophic event or condition, including but not limited to an act of nature, an epidemic or pandemic, a technological failure or malfunction, a terrorist incident or an act of war, a cyber attack, a civil disturbance, or a governmental authority's emergency declaration.

65.1	Sec. 4. Minnesota Statutes 2024, section 302A.011, is amended by adding a subdivision
65.2	to read:
65.3	Subd. 74. Failure of authorization. "Failure of authorization" means the failure: (1) to
65.4	authorize or effect an act or transaction in compliance with (i) this chapter, (ii) the articles
65.5	or bylaws, (iii) any plan or agreement to which the corporation is a party, or (iv) the
65.6	disclosure set forth in any proxy or consent solicitation statement, if and to the extent the
65.7	failure renders the act or transaction void or voidable; or (2) of the board or an officer to
65.8	authorize or approve an act or transaction taken by or on behalf of the corporation that
65.9	requires board or officer approval for the act or transaction's due authorization.
65.10 65.11	Sec. 5. Minnesota Statutes 2024, section 302A.011, is amended by adding a subdivision to read:
65.12	Subd. 75. Overissue. "Overissue" means the purported issuance of: (1) shares of a class
65.13	or series in excess of the number of shares of the class or series the corporation has the
65.14	power under the articles to issue under section 302A.401, subdivision 1, at the time of the
65.15	issuance; or (2) shares of any class or series that are not then authorized for issuance by the
65.16	articles.
65.17 65.18	Sec. 6. Minnesota Statutes 2024, section 302A.011, is amended by adding a subdivision to read:
65.19	Subd. 76. Putative shares. "Putative shares" means shares, including shares issued upon
65.20	exercise of rights to purchase, in each case, that were created or issued pursuant to a defective
65.21	corporate act, that: (1) but for a failure of authorization, would constitute valid shares; or
65.22	(2) the board is unable to determine are valid shares.
65.23	Sec. 7. Minnesota Statutes 2024, section 302A.011, is amended by adding a subdivision
65.24	to read:
65.25	Subd. 77. Time of defective corporate act. "Time of defective corporate act" means
65.26	the date and time at which the defective corporate act was purportedly taken.
65.27 65.28	Sec. 8. Minnesota Statutes 2024, section 302A.011, is amended by adding a subdivision to read:
65.29	Subd. 78. Validation effective time. "Validation effective time," with respect to a
65.30	defective corporate act ratified under section 302A.166 or 302A.167, means the latest of:

66.1	(1) the time when a defective corporate act submitted to shareholders for approval under
66.2	section 302A.166, subdivision 4, is approved by shareholders or, if no vote of the
66.3	shareholders is required to approve the ratification of the defective corporate act, immediately
66.4	following the time when the board adopts the resolutions required under section 302A.166,
66.5	subdivision 2 or 3;
66.6	(2) if no certificate of validation must be filed under section 302A.166, subdivision 6,
66.7	the time, if any, specified by the board of directors in the resolutions adopted under section
66.8	302A.166, subdivision 2 or 3, provided the time specified by the board of directors does
66.9	not precede the time when the resolutions are adopted; or
66.10	(3) the time when any certificate of validation filed under section 302A.166, subdivision
66.11	6, is filed with the secretary of state.
66.12	Sec. 9. Minnesota Statutes 2024, section 302A.011, is amended by adding a subdivision
66.13	to read:
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66.14	Subd. 79. Valid shares. "Valid shares" means shares that have been duly authorized
66.15	and validly issued as required under this chapter.
66.16	Sec. 10. Minnesota Statutes 2024, section 302A.111, subdivision 2, is amended to read:
66.17	Subd. 2. Statutory provisions that may be modified only in articles or in a
66.18	shareholder control agreement. The following provisions govern a corporation unless
66.19	modified in the articles or in a shareholder control agreement under section 302A.457:
66.20	(a) a corporation has general business purposes (section 302A.101);
66.21	(b) a corporation has perpetual existence and certain powers (section 302A.161);
66.22	(c) the power to adopt, amend, or repeal the bylaws is vested in the board (section
66.23	302A.181);
66.24	(d) a corporation must allow cumulative voting for directors (section 302A.215,
66.25	subdivision 2);
66.26	(e) the affirmative vote of a majority of directors present is required for an action of the
66.27	board (section 302A.237);
66.28	(f) a written action by the board taken without a meeting must be signed by all directors
66.29	(section 302A.239);
66.30	(g) the board may authorize the issuance of securities and rights to purchase securities
66.31	(section 302A.401, subdivision 1);

- (h) all shares are common shares entitled to vote and are of one class and one series (section 302A.401, subdivision 2, clauses (a) and (b));
- 67.3 (i) all shares have equal rights and preferences in all matters not otherwise provided for 67.4 by the board (section 302A.401, subdivision 2, clause (b));
- 67.5 (j) the par value of shares is fixed at one cent per share for certain purposes and may be 67.6 fixed by the board for certain other purposes (section 302A.401, subdivision 2, clause (c));
- (k) the board or the shareholders may issue shares for any consideration or for no consideration to effectuate share dividends, divisions, or combinations, and determine the value of nonmonetary consideration (section 302A.405, subdivision 1);
- (l) shares of a class or series must not be issued to holders of shares of another class or series to effectuate share dividends, divisions, or combinations, unless authorized by a majority of the voting power of the shares of the same class or series as the shares to be issued (section 302A.405, subdivision 1);
- (m) a corporation may issue rights to purchase securities whose terms, provisions, and conditions are fixed by the board (section 302A.409);
- (n) a shareholder has certain preemptive rights, unless otherwise provided by the board (section 302A.413);
- (o) the affirmative vote of the holders of a majority of the voting power of the shares present and entitled to vote at a duly held meeting is required for an action of the shareholders, except where this chapter requires the affirmative vote of a plurality of the votes cast (section 302A.215, subdivision 1) or a majority of the voting power of all shares entitled to vote (section 302A.437, subdivision 1);
- (p) shares of a corporation acquired by the corporation may be reissued (section 302A.553, subdivision 1);
- (q) each share has one vote unless otherwise provided in the terms of the share (section 302A.445, subdivision 3);
- (r) a corporation may issue shares for a consideration less than the par value, if any, of the shares (section 302A.405, subdivision 2);
- (s) the board may effect share dividends, divisions, and combinations under certain circumstances without shareholder approval (section 302A.402);
- (t) a written action of shareholders must be signed by all shareholders (section 302A.441);

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68.1	(u) specified amendments of the articles create dissenters' rights (section 302A.471,
68.2	subdivision 1, clause (a)); and
68.3	(v) shareholders are entitled to vote as a class or series upon proposed amendments to
68.4	the articles in specified circumstances (section 302A.137):; and
68.5	(w) the corporation's business and affairs must be managed by or under the board's
68.6	direction (section 302A.201).
68.7	Sec. 11. Minnesota Statutes 2024, section 302A.161, is amended by adding a subdivision
68.8	to read:
68.9	Subd. 23a. Emergency powers. (a) During an emergency, unless emergency bylaws
68.10	provide otherwise:
68.11	(1) notice of a meeting of the board must be given only to the directors that are practicable
68.12	to reach and may, if ordinary notice is impracticable or inadvisable due to the emergency,
68.13	be given in any practicable manner; and
68.14	(2) the officers designated on a list approved by the board of directors before the
68.15	emergency, in the priority order and subject to conditions as may be provided in the board
68.16	resolution approving the list, must, to the extent required to provide a quorum at any meeting
68.17	of the board, be deemed directors for the meeting.
68.18	(b) During an emergency that makes it impracticable to convene a meeting of shareholders
68.19	in accordance with this chapter, the articles, the bylaws, or as specified in a notice for the
68.20	meeting previously given, unless emergency bylaws provide otherwise, the board may
68.21	postpone a meeting of shareholders for which notice has been given or authorize shareholders
68.22	to participate in a meeting by any means of remote communication that conforms with
68.23	section 302A.436. The corporation must give notice to shareholders, by the means and with
68.24	shorter advance notice as are reasonable in the circumstances, of a postponement, including
68.25	any new date, time, or place, and describe any means of remote communication to be used.
68.26	The notice to shareholders by a publicly held corporation may be given solely by means of
68.27	a document publicly filed by the corporation with the Securities and Exchange Commission
68.28	pursuant to the rules and regulations under the Securities Exchange Act of 1934, United
68.29	States Code, title 15, section 78a, et seq.
68.30	(c) A corporate action taken in good faith under this subdivision during an emergency
68.31	to further the business and affairs of the corporation binds the corporation.

Sec. 12. [302A.166] DEFECTIVE CORPORATE ACTS AND SHARES;

RATIFICATION.

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Subdivision 1. Effect of ratification or validation. Subject to subdivision 7, a defective corporate act or putative share is not void or voidable solely as a result of a failure of authorization if the defective corporate act or putative share is ratified under this section or validated by a court in a proceeding brought under section 302A.167.

- Subd. 2. Board approval; generally. (a) In order to ratify one or more defective corporate acts under this section other than ratifying an election of the first board under subdivision 3, the board must adopt resolutions stating:
- (1) the defective corporate act or acts to be ratified; 69.10
- (2) the date of each defective corporate act or acts; 69.11
- (3) if the defective corporate act or acts involved the issuance of putative shares, the 69.12 number and type of putative shares issued and the date or dates upon which the putative 69.13 shares were purported to have been issued; 69.14
- (4) the nature of the failure of authorization in respect of each defective corporate act 69.15 to be ratified; and 69.16
- (5) that the board approves ratification of the defective corporate act or acts. 69.17
- (b) The resolutions also may provide that, at any time before the validation effective 69.18 time in respect of a defective corporate act set forth in the resolutions, notwithstanding the 69.19 approval of the ratification of the defective corporate act by shareholders, the board may 69.20 abandon the ratification of the defective corporate act without further action of the shareholders.
 - (c) The quorum and voting requirements that apply to the board's ratification of any defective corporate act must be the quorum and voting requirements applicable to the type of defective corporate act proposed to be ratified at the time the board adopts the resolutions ratifying the defective corporate act. If the articles or bylaws, any plan or agreement to which the corporation was a party, or any provision of this chapter, in each case as in effect as of the time of the defective corporate act, require a larger number or portion of directors or of specified directors for a quorum to be present or to approve the defective corporate act, the larger number or portion of the directors or the specified directors must be required for a quorum to be present or to adopt the resolutions to ratify the defective corporate act, as applicable; except that the presence or approval of a director elected, appointed, or nominated by holders of any class or series of which no shares are outstanding at the time

70.1	the board adopts the resolutions ratifying the defective corporate act, or by any person that
70.2	is no longer a shareholder at the time the board adopts the resolutions ratifying the defective
70.3	corporate act, is not required.
70.4	Subd. 3. Board approval; election of first board. To ratify a defective corporate act
70.5	in respect of the election of the first board under section 302A.201, subdivision 1, a majority
70.6	of the persons who, at the time the resolutions required by this subdivision are adopted, are
70.7	exercising the powers of directors under claim and color of an election or appointment as
70.8	such may adopt resolutions stating:
70.9	(1) the name of the person or persons who first took action in the name of the corporation
70.10	as the first board;
70.11	(2) the earlier of the date on which the persons first took the action or were purported
70.12	to have been elected as the first board; and
70.13	(3) that the ratification of the election of the person or persons as the first board is
70.14	approved.
70.15	Subd. 4. Shareholder approval; when required. A defective corporate act ratified
70.16	under subdivision 2 must be submitted to shareholders for approval under subdivision 5,
70.17	<u>unless:</u>
70.18	(1)(i) no other provision of this chapter, and no provision of the articles or bylaws, or
70.19	of any plan or agreement to which the corporation is a party, requires shareholder approva
70.20	of the defective corporate act to be ratified, either at the time of the defective corporate ac
70.21	or at the time the board adopts the resolutions ratifying the defective corporate act under
70.22	subdivision 2, and (ii) the defective corporate act did not result from a failure to comply
70.23	with section 302A.673; or
70.24	(2) as of the adoption of the resolutions of the board under subdivision 2, there are no
70.25	valid shares outstanding and entitled to vote thereon, regardless of whether there then exist
70.26	any putative shares.
70.27	Subd. 5. Shareholder approval; process. (a) If the ratification of a defective corporate
70.28	act must be submitted to shareholders for approval under subdivision 4, notice of the meeting
70.29	must be given in the manner set forth in section 302A.435 to each holder of valid shares
70.30	and putative shares, whether voting or nonvoting.
70.31	(b) The notice under this subdivision must be given as follows:
70.32	(1) in the case of a defective corporate act that did not involve the establishment of a
70.33	record date for notice of or voting at any meeting of shareholders, for written action of

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shareholders in lieu of a meeting, or for any other purpose, to the shareholders of valid
shares and putative shares, whether voting or nonvoting, as of the time of the defective
corporate act, other than holders whose identities or addresses cannot be determined from
the corporation's records; or

- (2) in the case of a defective corporate act that involved the establishment of a record date for notice of or voting at any meeting of shareholders, for written action of shareholders in lieu of a meeting, or for any other purpose, to the shareholders of valid shares and putative shares, whether voting or nonvoting, as of the record date for notice of or voting at the meeting, the record date for written action, or the record date for the other action, as the case may be, other than holders whose identities or addresses cannot be determined from the corporation's records.
- (c) The notice must contain a copy of the resolutions adopted by the board under subdivision 2 or the information required by subdivision 2, paragraph (a), clauses (1) to (5). The notice must include a statement that any claim that the defective corporate act or putative shares ratified under this section is void or voidable due to the failure of authorization, or that a court should declare in the court's discretion that a ratification in accordance with this section is not effective or is effective only on certain conditions, must be brought within 120 days from the applicable validation effective time.
- (d) At the meeting, the quorum and voting requirements that apply to ratification of the defective corporate act must be the same quorum and voting requirements that apply to the type of defective corporate act proposed to be ratified at the time of the approval of the ratification, except that:
- (1) if the articles or bylaws, a plan or agreement to which the corporation was a party, or a provision under this chapter in effect as of the time of the defective corporate act requires a larger number or portion of shares or of any class or series thereof or of specified shareholders for a quorum to be present or to approve the defective corporate act, the presence or approval of the larger number or portion of stock or of the class or series thereof or of the specified shareholders must be required for a quorum to be present or to approve the ratification of the defective corporate act, as applicable; except that the presence or approval of shares of any class or series of which no shares are outstanding at the time of the approval of the ratification, or of any person that is no longer a shareholder at the time of the approval of the ratification, is not required; and
- (2) the approval by shareholders of the ratification of a director's election requires the affirmative vote of a plurality of shares present at the meeting and entitled to vote on the

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election of the director in the manner set forth in section 302A.215, except that, if the articles
or bylaws then in effect or in effect at the time of the defective election require or required
a larger number or portion of shares or of any class or series thereof or of specified
shareholders to elect the director, the affirmative vote of the larger number or portion of
shares or of any class or series thereof or of the specified shareholders must be required to
ratify the election of the director; except that the presence or approval of shares of any class
or series of which no shares are outstanding at the time of the approval of the ratification,
or of any person that is no longer a shareholder at the time of the approval of the ratification,
is not required.
(e) Putative shares, measured as of the adoption by the board of resolutions under
subdivision 2 and without giving effect to any ratification that becomes effective after the
adoption, are neither entitled to vote nor counted for quorum purposes in a vote to ratify a
defective corporate act.
Subd. 6. Certificate of validation. (a) If a defective corporate act ratified under this
section requires under any other section of this chapter a certificate to be filed with the
secretary of state, and either (1) the certificate requires any change to give effect to the
defective corporate act in accordance with this section, including a change to the date and
time of the effectiveness of the certificate, or (2) a certificate was not previously filed with
respect to the defective corporate act, the corporation must file with the secretary of state
a certificate of validation with respect to the defective corporate act in lieu of filing the
certificate otherwise required by this chapter.
(b) A separate certificate of validation is required for each defective corporate act that

- (b) A separate certificate of validation is required for each defective corporate act that requires the filing of a certificate of validation under this section, except that (1) two or more defective corporate acts may be included in a single certificate of validation if the corporation filed with the secretary of state, or to comply with this chapter would have filed with the secretary of state, a single certificate under another provision of this chapter to effect the acts, and (2) two or more overissues of shares, or of any class or series of shares, may be included in a single certificate of validation; provided that the increase in the number of authorized shares, or of each class or series, set forth in the certificate of validation is effective on the date of the first overissue.
- 72.31 (c) The certificate of validation must set forth:
 - (1) that the corporation has ratified one or more defective corporate acts that would have required filing with the secretary of state of a certificate under this chapter;

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73.1	(2) that each defective corporate act has been ratified in accordance with this section;
73.2	<u>and</u>
73.3	(3) the following information:
73.4	(i) if a certificate was previously filed with the secretary of state under this chapter with
73.5	respect to the defective corporate act and the certificate requires any change to give effect
73.6	to the defective corporate act in accordance with this section, including a change to the date
73.7	and time of the effectiveness of the certificate, the certificate of validation must set forth:
73.8	(A) the name, title, and filing date of the certificate previously filed and any certificate
73.9	of correction to the certificate previously filed;
73.10	(B) a statement that a certificate containing all of the information that must be included
73.11	under the applicable section or sections of this chapter to give effect to the defective corporate
73.12	act is attached as an exhibit to the certificate of validation; and
73.13	(C) the date and time that the certificate is deemed effective pursuant to this section; or
73.14	(ii) if a certificate was not previously filed with the secretary of state under this chapter
73.15	in respect of the defective corporate act and the defective corporate act ratified pursuant to
73.16	this section would have required under any other section of this chapter the filing with the
73.17	secretary of state of a certificate, the certificate of validation shall set forth:
73.18	(A) a statement that a certificate containing all of the information required to be included
73.19	under the applicable section or sections of this chapter to give effect to the defective corporate
73.20	act is attached as an exhibit to the certificate of validation; and
73.21	(B) the date and time that the certificate shall be deemed to have become effective
73.22	pursuant to this section.
73.23	(d) A certificate attached to a certificate of validation need not be separately executed
73.24	and acknowledged and need not include a statement required by another section under this
73.25	chapter that the instrument has been approved and adopted in accordance with the provisions
73.26	of the other section under this chapter.
73.27	Subd. 7. Retroactive effect. From and after the validation effective time, unless otherwise
73.28	determined in an action brought pursuant to section 302A.167, subject to subdivision 5,
73.29	paragraph (e):
73.30	(1) each defective corporate act ratified in accordance with this section is no longer
73.31	deemed void or voidable as a result of the failure of authorization described in the resolutions

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adopted under subdivision 2, effective retroactively from the time of the defective corporate act; and

(2) each share or fraction of a share of putative shares issued or purportedly issued pursuant to the defective corporate act is no longer deemed void or voidable, and is deemed to be an identical outstanding share or fraction of an outstanding share as of the time the share or fraction of a share was purportedly issued.

Subd. 8. Postratification notice. (a) Except as provided under paragraph (b), with respect to each defective corporate act ratified by the board under subdivision 2 or subdivision 3, prompt notice of the ratification must be given to all shareholders of valid shares and putative shares, whether voting or nonvoting, as of the date the board adopts the resolutions approving the defective corporate act, or as of a date within 60 days after the date of adoption, as established by the board. The notice must be sent to the address of the holder as the address appears or most recently appeared, as appropriate, on the corporation's records. The notice must be given to the shareholders of valid shares and putative shares, whether voting or nonvoting, as of the time of the defective corporate act, other than holders whose identities or addresses cannot be determined from the records of the corporation. The notice must contain a copy of the resolutions adopted under subdivision 2 or the information specified under subdivision 2, paragraph (a), clauses (1) to (5), or subdivision 3, clauses (1) to (3), as applicable, and a statement that any claim that the defective corporate act or putative shares ratified under this section is void or voidable due to the failure of authorization, or that a court should declare in the court's discretion that a ratification in accordance with this section is not effective or is effective only on certain conditions, must be brought within 120 days from the latter of the validation effective time or the time at which the notice required by this subdivision is given.

(b) Notice is not required if notice of the ratification of the defective corporate act is given in accordance with subdivision 5 and, in the case of a corporation that has a class of shares listed on a national securities exchange, the notice required by this subdivision and subdivision 5 may be deemed given if disclosed in a document publicly filed by the corporation with the Securities and Exchange Commission pursuant to section 13, 14, or 15(d) of the Securities Exchange Act of 1934, as amended, United States Code, title 15, section 78a, et seq., and rules and regulations promulgated under the Securities Exchange Act of 1934, as amended, or the corresponding provisions of any subsequent United States securities laws, rules, or regulations.

(c) If a defective corporate act has been approved by shareholders acting pursuant to section 302A.441, the notice required by this subdivision may be included in a notice

5.1	required under section 302A.441, subdivision 3. If the notice is given under section
5.2	302A.441, the notice must be sent to the shareholders entitled to the notice under section
5.3	302A.441, subdivision 3, and to all holders of valid shares and putative shares to whom
5.4	notice is required under this subdivision if the defective corporate act had been approved
5.5	at a meeting and the record date for determining the shareholders entitled to notice of the
5.6	meeting had been the date for determining the shareholders entitled to notice under paragraph
5.7	(a) other than any shareholder who approved the written action in lieu of a meeting under
75.8	section 302A.441 or any holder of putative shares who otherwise consented thereto in
75.9	writing.
75.10	(d) For purposes of this subdivision and subdivision 5 only, notice to holders of putative
5.11	shares, and notice to holders of valid shares and putative shares as of the time of the defective
5.12	corporate act, is treated as notice to holders of valid shares for purposes of sections 302A.435
5.13	and 302A.441.
5.14	Sec. 13. [302A.167] VALIDITY OF DEFECTIVE CORPORATE ACTS AND
5.15	SHARES; PROCEEDINGS.
5.16	Subdivision 1. When permitted. Subject to subdivision 5, upon application by the
5.17	corporation, a successor entity to the corporation, a member of the board, a shareholder or
75.18	beneficial owner of valid shares or putative shares, a shareholder or beneficial owner of
75.19	valid shares or putative shares as of the time of a defective corporate act ratified pursuant
5.20	to section 302A.166, or other person claiming to be substantially and adversely affected by
75.21	a ratification pursuant to section 302A.166, a court may:
5.22	(1) determine the validity and effectiveness of any defective corporate act ratified pursuant
5.23	to section 302A.166;
5.24	(2) determine the validity and effectiveness of the ratification of any defective corporate
5.25	act pursuant to section 302A.166;
5.26	(3) determine the validity and effectiveness of any defective corporate act not ratified
5.27	or not ratified effectively pursuant to section 302A.166;
15.20	(1) determine the validity of any compares act or transaction and any charge or rights to
75.28	(4) determine the validity of any corporate act or transaction and any shares or rights to
5.29	purchase; and
75.30	(5) modify or waive any of the procedures set forth in section 302A.166 to ratify a
75.31	defective corporate act.
5.32	Subd. 2. Remedies. In connection with an action under this section, a court may:

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76.1	(1) declare that a ratification under section 302A.166 is not effective or is only effective
76.2	at a time or upon conditions established by the court;
76.3	(2) validate and declare effective a defective corporate act or putative shares and impose
76.4	conditions upon the court's validation;
76.5	(3) require measures to remedy or avoid harm to a person substantially and adversely
76.6	affected by a ratification under section 302A.166 or from a court order pursuant to this
76.7	section, excluding harm that would have resulted if the defective corporate act had been
76.8	valid when approved or effectuated;
76.9	(4) order the secretary of state to accept an instrument for filing with an effective time
76.10	specified by the court, which may be before or after the time of the order, provided that the
76.11	filing date of the instrument must be determined in accordance with section 302A.011,
76.12	subdivision 11;
76.13	(5) approve a share register for the corporation that includes any shares ratified or
76.14	validated in accordance with this section or section 302A.166;
76.15	(6) declare that putative shares are valid shares or require a corporation to issue and
76.16	deliver valid shares in place of any putative shares;
76.17	(7) order a meeting of holders of valid shares or putative shares and determine the right
76.18	and power of persons claiming to hold valid shares or putative shares to vote at the ordered
76.19	meeting;
76.20	(8) declare that a defective corporate act validated by a court is effective as of the time
76.21	of the defective corporate act or at another time the court may determine;
76.22	(9) declare that putative shares validated by a court shall be deemed to be an identical
76.23	share or fraction of a valid share as of the time originally issued or purportedly issued or at
76.24	such other time as the court may determine; and
76.25	(10) make other orders regarding matters as the court deems proper under the
76.26	circumstances.
76.27	Subd. 3. Service. Service of the application under subdivision 1 upon the registered
76.28	agent of the corporation is deemed to be service upon the corporation, and no other party
76.29	needs to be joined in order for a court to adjudicate the matter. In an action filed by the
76.30	corporation, a court may require notice of the action be provided to other persons specified
76.31	by the court and permit the other persons to intervene in the action.

77.1	Subd. 4. Considerations. In connection with resolving matters pursuant to subdivisions
77.2	1 and 2, a court may consider the following:
77.3	(1) whether the defective corporate act was originally approved or effectuated with the
77.4	good faith belief that the approval or effectuation was in compliance with the provisions of
77.5	this chapter, the articles, or the bylaws;
77.6	(2) whether the corporation and board have treated the defective corporate act as a valid
77.7	act or transaction and whether a person has acted in reliance on the public record that the
77.8	defective corporate act was valid;
77.9	(3) whether any person may be or was harmed by the ratification or validation of the
77.10	defective corporate act, excluding harm that would have resulted if the defective corporate
77.11	act had been valid when approved or effectuated;
77.12	(4) whether any person is harmed by the failure to ratify or validate the defective corporate
77.13	act; and
77.14	(5) any other factors or considerations the court deems just and equitable.
77.15	Subd. 5. Statute of limitations. An action asserting that (1) a defective corporate act or
77.16	putative shares ratified in accordance with section 302A.166 is void or voidable due to a
77.17	failure of authorization identified in the resolution adopted in accordance with section
77.18	302A.166, subdivision 2 or 3, or (2) a court should declare in its discretion that a ratification
77.19	in accordance with section 302A.166 not be effective or be effective only on certain
77.20	conditions, is prohibited from being brought after the expiration of 120 days from the later
77.21	of the validation effective time and the time notice, if any, that is required to be given
77.22	pursuant to section 302A.166, subdivision 8, is given with respect to the ratification; except
77.23	that this subdivision does not apply to an action asserting that a ratification was not
77.24	accomplished in accordance with section 302A.166 or to any person to whom notice of the
77.25	ratification was required to have been given pursuant to 302A.166, subdivision 5 or 8, but
77.26	to whom the notice was not given.
77.27	Sec. 14. Minnesota Statutes 2024, section 302A.181, is amended by adding a subdivision
77.28	to read:
77.29	Subd. 4. Emergency bylaws. (a) Unless the articles provide otherwise, bylaws may
77.30	contain provisions that are effective only during an emergency. The emergency bylaws may
77.31	contain provisions necessary to manage the corporation during the emergency, including:

(1) procedures for calling a meeting of the board;

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- (3) designation of additional or substitute directors; and
- (4) procedures for the board to determine the duration of an emergency. 78.3
- (b) All provisions of the regular bylaws that are not inconsistent with the emergency 78.4 bylaws remain effective during the emergency. 78.5

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- (c) Corporate action taken in good faith in accordance with the emergency bylaws binds 78.6 the corporation. 78.7
- Sec. 15. Minnesota Statutes 2024, section 302A.201, subdivision 1, is amended to read: 78.8
 - Subdivision 1. Board to manage. The business and affairs of a corporation shall be managed by or under the direction of a board, subject to the provisions of subdivision 2 and section 302A.457, and except as may be otherwise provided in the articles. If a provision is made in the articles: (1) the powers and duties conferred or imposed upon the board of directors by this chapter must be exercised or performed to the extent and by the natural persons provided in the articles, (2) the directors have no duties, liabilities, or responsibilities as directors under this chapter with respect to or arising from the exercise or performance of, or from the failure to exercise or perform, the conferred or imposed powers and duties by the other persons, and (3) the other persons have all of the duties, liabilities, and responsibilities of directors under this chapter with respect to and arising from the exercise or performance of, or the failure to exercise or perform, the conferred or imposed powers and duties. The members of the first board may be named in the articles or elected by the incorporators pursuant to section 302A.171 or by the shareholders.
- Sec. 16. Minnesota Statutes 2024, section 302A.237, is amended by adding a subdivision 78.22 to read: 78.23
 - Subd. 3. Agreements and other instruments; authorization. When this chapter requires the board to approve or to take other action with respect to an agreement, instrument, plan, or document, the agreement, instrument, plan, or document may be approved by the board in final form or in substantially final form. If the board acts to approve or take other action with respect to an agreement, instrument, plan, or document that this chapter requires to be filed with the secretary of state or referenced in any certificate filed, the board may, at any time after providing the approval or taking other action and prior to the effectiveness of the filing with the secretary of state, adopt a resolution ratifying the agreement, instrument, plan, or document. The ratification under this subdivision is effective as of the time of the

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original approval or other action by the board and to satisfy any requirement under this
chapter that the board approve or take other action with respect to the agreement, instrument,
plan, or document in a specific manner or sequence.

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Sec. 17. Minnesota Statutes 2024, section 302A.361, is amended to read:

302A.361 STANDARD OF CONDUCT.

- Subdivision 1. Standard; liability. An officer shall discharge the duties of an office in good faith, in a manner the officer reasonably believes to be in the best interests of the corporation, and with the care an ordinarily prudent person in a like position would exercise under similar circumstances. A person who so performs those duties is not liable by reason of being or having been an officer of the corporation. A person exercising the principal functions of an office or to whom some or all of the duties and powers of an office are delegated pursuant to section 302A.351 is deemed an officer for purposes of this section and sections 302A.467 and 302A.521.
- Subd. 2. Liability; elimination or limitation. The articles of a corporation may provide
 that an officer's personal liability to the shareholders for monetary damages for breach,
 during the time the corporation is a publicly held corporation, of fiduciary duty as an officer
 may be eliminated or limited. The articles must not eliminate or limit the liability of an
 officer:
- 79.19 (1) for any breach of the officer's duty of loyalty to the corporation or the corporation's shareholders;
- 79.21 (2) for acts or omissions not in good faith or that involve intentional misconduct or a knowing violation of law;
- 79.23 (3) under section 80A.76;
- 79.24 (4) for any transaction from which the officer derived an improper personal benefit;
- 79.25 (5) in any action by or in the right of the corporation; or
- 79.26 (6) for any act or omission occurring prior to the date when the provision in the articles eliminating or limiting liability becomes effective.
- 79.28 Sec. 18. Minnesota Statutes 2024, section 302A.461, subdivision 4, is amended to read:
- Subd. 4. **Right to inspect.** (a) A shareholder, beneficial owner, or a holder of a voting trust certificate of a corporation that is not a publicly held corporation has an absolute right, upon written demand, to examine and copy, in person or by a legal representative, at any

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reasonable time, and the corporation shall make available within ten days after receipt by an officer of the corporation of the written demand:

- (1) the share register; and
- (2) all documents referred to in subdivision 2.
- (b) A shareholder, beneficial owner, or a holder of a voting trust certificate of a corporation that is not a publicly held corporation has a right, upon written demand, to examine and copy, in person or by a legal representative, other corporate records at any reasonable time only if the shareholder, beneficial owner, or holder of a voting trust certificate demonstrates a proper purpose for the examination.
- (c) A shareholder, beneficial owner, or a holder of a voting trust certificate of a publicly held corporation has, upon written demand stating the purpose and acknowledged or verified in the manner provided in chapter 358, a right at any reasonable time to examine and copy the corporation's share register and other corporate records reasonably related to the stated purpose and described with reasonable particularity in the written demand upon demonstrating the stated purpose to be a proper purpose. The acknowledged or verified demand must be directed to the corporation at its registered office in this state or at its principal place of business.
- (d) For purposes of this section, a "proper purpose" is one reasonably related to the person's interest as a shareholder, beneficial owner, or holder of a voting trust certificate of the corporation.
- (e) If a corporation or an officer or director of the corporation violates this section, a court in Minnesota may, in an action brought by a shareholder, beneficial owner, or a holder of a voting trust certificate of the corporation, specifically enforce this section and award expenses, including attorney fees and disbursements, to the shareholder, beneficial owner, or a holder of a voting trust certificate.
- Sec. 19. Minnesota Statutes 2024, section 302A.471, subdivision 1, is amended to read:
- Subdivision 1. **Actions creating rights.** A shareholder of a corporation may dissent from, and obtain payment for the fair value of the shareholder's shares in the event of, any of the following corporate actions:
 - (a) unless otherwise provided in the articles, an amendment of the articles that materially and adversely affects the rights or preferences of the shares of the dissenting shareholder in that it:

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((1)	alters or abolishes a	preferential	l right	of the	shares;

- (2) creates, alters, or abolishes a right in respect of the redemption of the shares, including a provision respecting a sinking fund for the redemption or repurchase of the shares;
- (3) alters or abolishes a preemptive right of the holder of the shares to acquire shares, securities other than shares, or rights to purchase shares or securities other than shares;
- (4) excludes or limits the right of a shareholder to vote on a matter, or to cumulate votes, except as the right may be excluded or limited through the authorization or issuance of securities of an existing or new class or series with similar or different voting rights; except that an amendment to the articles of an issuing public corporation that provides that section 302A.671 does not apply to a control share acquisition does not give rise to the right to obtain payment under this section; or
 - (5) eliminates the right to obtain payment under this subdivision; or
- (6) pursuant to section 302A.201, subdivision 1, diminishes or abolishes the board's right to manage, or to direct the management of, the corporation's business and affairs;
- (b) a sale, lease, transfer, or other disposition of property and assets of the corporation that requires shareholder approval under section 302A.661, subdivision 2, but not including a disposition in dissolution described in section 302A.725, subdivision 2, or a disposition pursuant to an order of a court, or a disposition for cash on terms requiring that all or substantially all of the net proceeds of disposition be distributed to the shareholders in accordance with their respective interests within one year after the date of disposition;
- (c) a plan of merger, whether under this chapter or under chapter 322C, to which the corporation is a constituent organization, except as provided in subdivision 3, and except for a plan of merger adopted under section 302A.626;
- (d) a plan of exchange, whether under this chapter or under chapter 322C, to which the corporation is a party as the corporation whose shares will be acquired by the acquiring organization, except as provided in subdivision 3;
 - (e) a plan of conversion is adopted by the corporation and becomes effective;
- (f) an amendment of the articles in connection with a combination of a class or series under section 302A.402 that reduces the number of shares of the class or series owned by the shareholder to a fraction of a share if the corporation exercises its right to repurchase the fractional share so created under section 302A.423; or

(g) any other corporate action taken pursuant to a shareholder vote with respect to which 82.1 the articles, the bylaws, or a resolution approved by the board directs that dissenting 82.2 shareholders may obtain payment for their shares. 82.3 Sec. 20. Minnesota Statutes 2024, section 302A.471, subdivision 3, is amended to read: 82.4 Subd. 3. Rights not to apply. (a) Unless the articles, the bylaws, or a resolution approved 82.5 by the board otherwise provide, the right to obtain payment under this section does not 82.6 apply to a shareholder of (1) the surviving corporation in a merger with respect to shares 82.7 of the shareholder that are not entitled to be voted on the merger and are not canceled or 82.8 exchanged in the merger or (2) the corporation whose shares will be acquired by the acquiring 82.9 organization in a plan of exchange with respect to shares of the shareholder that are not 82.10 entitled to be voted on the plan of exchange and are not exchanged in the plan of exchange. 82.11 (b) If a date is fixed according to section 302A.445, subdivision 1, for the determination 82.12 of shareholders entitled to receive notice of and to vote on an action described in subdivision 82.13 1, only shareholders as of the date fixed, and beneficial owners as of the date fixed who 82.14 hold through shareholders, as provided in subdivision 2, may exercise dissenters' rights. 82.15 82.16 (c) Notwithstanding subdivision 1, the right to obtain payment under this section, other than in connection with a plan of merger adopted under section 302A.613, subdivision 4, 82.17 or 302A.621, is limited in accordance with the following provisions: 82.18 (1) The right to obtain payment under this section is not available for the holders of 82.19 shares of any class or series of shares that is listed on the New York Stock Exchange, NYSE 82.20 MKT LLC, the Nasdaq Global Market, the NASDAQ Global Select Market, the Nasdaq 82.21 Capital Market, or any successor to any such market any national securities exchange 82.22 registered with the United States Securities and Exchange Commission under Section 6 of 82.23 the Securities Exchange Act of 1934, United States Code, title 15, section 78a, et seq. 82.24 (2) The applicability of clause (1) is determined as of: 82.25 (i) the record date fixed to determine the shareholders entitled to receive notice of, and 82.26 82.27 to vote at, the meeting of shareholders to act upon the corporate action described in subdivision 1; or 82.28 (ii) the day before the effective date of corporate action described in subdivision 1 if 82.29 there is no meeting of shareholders. 82.30 (3) Clause (1) is not applicable, and the right to obtain payment under this section is 82.31

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available pursuant to subdivision 1, for the holders of any class or series of shares who are

required by the terms of the corporate action described in subdivision 1 to accept for such

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shares anything other than shares, or cash in lieu of fractional shares, of any class or any series of shares of a domestic or foreign corporation, or any other ownership interest of any other organization, that satisfies the standards set forth in clause (1) at the time the corporate action becomes effective.

Sec. 21. Minnesota Statutes 2024, section 302A.611, is amended by adding a subdivision to read:

Subd. 1a. Additional remedies; shareholder representatives. A plan of merger or exchange may provide:

(1) that: (i) a party to the plan that fails to perform the party's obligations under the plan in accordance with the terms and conditions of the plan, or that otherwise fails to comply with the terms and conditions of the plan, in each case required to be performed or complied with prior to the time the merger or exchange becomes effective, or that otherwise fails to consummate, or fails to cause the consummation of, the merger or exchange, whether prior to a specified date, upon satisfaction or, to the extent permitted by law, waiver of all conditions to consummation set forth in the plan or otherwise, is subject, in addition to any other remedies available at law or in equity, to penalties or consequences set forth in the plan of merger or exchange, which may include an obligation to pay to the other party or parties to the plan an amount representing or based on the loss of any premium or other economic entitlement the shareholders or holders of rights to purchase of the other party would be entitled to receive pursuant to the terms of the plan if the merger or exchange were consummated in accordance with the terms of the plan; and (ii) if, pursuant to the terms of the plan of merger or exchange, the corporation is entitled to receive payment from another party to the plan of any amount representing a penalty or consequence, the corporation is entitled to enforce the other party's payment obligation and upon receipt of a payment is entitled to retain the amount of the payment received; or

(2)(i) for the appointment, at or after the time at which the plan of merger or exchange is approved by the shareholders of the corporation in accordance with the requirements of this chapter, of one or more persons, which may include the surviving or resulting organization or any officer, representative, or agent of the surviving or resulting organization, as representative of the shareholders or the holders of rights to purchase of the corporation, including the shareholders and holders whose shares or rights to purchase must be canceled, converted, or exchanged in the merger or exchange and for the delegation to the person or persons of the sole and exclusive authority to take action and bring claims on behalf of the shareholders and the holders pursuant to the plan, including taking actions and bringing

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claims, including by entering into settlements, as the representative determines to enforce the rights of the shareholders and holders under the plan of merger or exchange, on the terms and subject to the conditions set forth in the plan; (ii) that an appointment is irrevocable and binding on all shareholders and holders from and after the approval of the plan of merger or exchange by the requisite vote of shareholders pursuant to this chapter; and (iii) that a provision adopted pursuant to this clause may not be amended after the merger or exchange has become effective or may be amended only with the consent or approval of persons specified in the plan of merger or exchange.

84.9 ARTICLE 7

MISCELLANEOUS COMMERCE PROVISIONS

- Section 1. Minnesota Statutes 2024, section 41A.09, subdivision 2a, is amended to read:
- Subd. 2a. **Definitions.** For the purposes of this section, the terms defined in this subdivision have the meanings given them.
 - (a) "Ethanol" means fermentation ethyl alcohol derived from agricultural products, including potatoes, cereal grains, cheese whey, and sugar beets; forest products; or other renewable resources, including residue and waste generated from the production, processing, and marketing of agricultural products, forest products, and other renewable resources, that:
 - (1) meets all of the specifications in ASTM specification D4806-04a D4806-21a; and
- 84.19 (2) is denatured as specified in Code of Federal Regulations, title 27, parts 20 and 21.
 - (b) "Ethanol plant" means a plant at which ethanol is produced.
- (c) "Commissioner" means the commissioner of agriculture.
 - (d) "Rural economic infrastructure" means the development of activities that will enhance the value of agricultural crop or livestock commodities or by-products or waste from farming operations through new and improved value-added conversion processes and technologies, the development of more timely and efficient infrastructure delivery systems, and the enhancement of marketing opportunities. "Rural economic infrastructure" also means land, buildings, structures, fixtures, and improvements located or to be located in Minnesota and used or operated primarily for the processing or the support of production of marketable products from agricultural commodities or wind energy produced in Minnesota.

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Sec. 2. Minnesota Statutes 2024, section 45.027, subdivision 1, is amended to read:

Subdivision 1. **General powers.** (a) In connection with the duties and responsibilities entrusted to the commissioner, and Laws 1993, chapter 361, section 2, the commissioner of commerce may:

- (1) make public or private investigations within or without this state as the commissioner considers necessary to determine whether any person has violated or is about to violate any law, rule, or order related to the duties and responsibilities entrusted to the commissioner;
- (2) require or permit any person to file a statement in writing, under oath or otherwise as the commissioner determines, as to all the facts and circumstances concerning the matter being investigated;
- (3) hold hearings, upon reasonable notice, in respect to any matter arising out of the duties and responsibilities entrusted to the commissioner;
- (4) conduct investigations and hold hearings for the purpose of compiling information related to the duties and responsibilities entrusted to the commissioner;
- (5) examine the books, accounts, records, and files of every licensee, and of every person who is engaged in any activity regulated; the commissioner or a designated representative shall have free access during normal business hours to the offices and places of business of the person, and to all books, accounts, papers, records, files, safes, and vaults maintained in the place of business;
 - (6) publish information which is contained in any order issued by the commissioner;
- (7) require any person subject to duties and responsibilities entrusted to the commissioner, to report all sales or transactions that are regulated. The reports must be made within ten days after the commissioner has ordered the report. The report is accessible only to the respondent and other governmental agencies unless otherwise ordered by a court of competent jurisdiction; and
- (8) assess a natural person or entity subject to the jurisdiction of the commissioner the necessary expenses of the investigation performed by the department when an investigation is made by order of the commissioner. The cost of the investigation shall be determined by the commissioner and is based on the salary cost of investigators or assistants and at an average rate per day or fraction thereof so as to provide for the total cost of the investigation. All money collected must be deposited into the general fund. A natural person or entity licensed under chapter 60K, 82, or 82B shall not be charged costs of an investigation if the investigation results in no finding of a violation. This clause does not apply to a natural

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person or entity already subject to the assessment provisions of sections 60A.03 and 60A.031-; and

(9) issue data calls.

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- (b) For purposes of this section, "data call" means a written request from the commissioner to two or more natural persons or entities subject to the commissioner's jurisdiction to provide data or other information within a reasonable time period commensurate with the volume and nature of the data required to be collected in the data call for a specific, targeted regulatory oversight purpose. A data call is not market analysis, as defined under section 60A.031, subdivision 4, paragraph (f), and is not subject to section 60A.033.
- Sec. 3. Minnesota Statutes 2024, section 45.027, is amended by adding a subdivision to read:
 - Subd. 1b. **Data calls.** (a) Information provided in response to a data call issued by the commissioner: (1) must be treated as nonpublic data, as defined under section 13.02, subdivision 9; and (2) is not subject to subpoena. If the commissioner performs a data call, the commissioner may make the results available for public inspection in an aggregated format and in such a manner as to not disclose the identity of a specific natural person or entity, including the name of any natural person or entity who responded to the data call. Prior to making the aggregated results of a data call available for public inspection, the commissioner must provide all natural persons and entities that responded to the data call 15 days' notice of the information to be publicly released. Nothing in this subdivision requires the commissioner to publicly release aggregated results from a data call. The results of a data call that requests data for the National Association of Insurance Commissioners' Market Conduct Annual Statement is subject to confidential treatment as provided under section 60A.031, subdivision 4, paragraph (f).
 - (b) The commissioner may grant access to data submitted by insurers in response to a data call issued by the commissioner with other state, federal, and international regulatory agencies; with the National Association of Insurance Commissioners and its affiliates and subsidiaries; and with state, federal, and international law enforcement authorities, provided that the recipient agrees in writing to maintain the data as nonpublic data and has the legal authority to maintain the data as nonpublic data.

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Sec. 4. Minnesota Statutes 2024, section 45.027, subdivision 2, is amended to read:

Subd. 2. **Power to compel production of evidence.** For the purpose of any investigation, hearing, proceeding, or inquiry related to the duties and responsibilities entrusted to the commissioner, the commissioner or a designated representative may <u>issue data calls</u>, administer oaths and affirmations, subpoena witnesses, compel their attendance, take evidence, and require the production of books, papers, correspondence, memoranda, agreements, or other documents or records that the commissioner considers relevant or material to the inquiry.

A subpoena issued pursuant to this subdivision must state that the person to whom the subpoena is directed may not disclose the fact that the subpoena was issued or the fact that the requested records have been given to law enforcement personnel except:

- (1) insofar as the disclosure is necessary to find and disclose the records; or
- 87.13 (2) pursuant to court order.
- Sec. 5. Minnesota Statutes 2024, section 45.24, is amended to read:

45.24 LICENSE TECHNOLOGY FEES.

- (a) The commissioner may establish and maintain an electronic licensing database system for license origination, renewal, and tracking the completion of continuing education requirements by individual licensees who have continuing education requirements, and other related purposes.
- (b) The commissioner shall pay for the cost of operating and maintaining the electronic database system described in paragraph (a) through a technology surcharge imposed upon the fee for license origination and renewal, for individual licenses that require continuing education.
- (c) The surcharge permitted under paragraph (b) shall be up to \$40 for each two-year licensing period, except as otherwise provided in paragraph (f), and shall be payable at the time of license origination and renewal.
- (d) The Commerce Department technology account is hereby created as an account in the special revenue fund.
 - (e) The commissioner shall deposit the surcharge permitted under this section in the account created in paragraph (d), and funds in the account are appropriated to the commissioner in the amounts needed for purposes of this section. The commissioner of management and budget shall transfer an amount determined by the commissioner of

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commerce from the account to the statewide electronic licensing system account under section 16E.22 for the costs of the statewide licensing system attributable to the inclusion of licenses subject to this section.

- (f) The commissioner shall may temporarily reduce or suspend the surcharge as necessary if the balance in the account created in paragraph (d) exceeds \$2,000,000 as of the end of June in any calendar year and shall must annually review the anticipated costs under paragraph (b) to determine the amount to increase or decrease the surcharge as necessary to keep the fund balance at an adequate level but not in excess of \$2,000,000.
- Sec. 6. Minnesota Statutes 2024, section 80A.66, is amended to read:

80A.66 SECTION 411; POSTREGISTRATION REQUIREMENTS.

- (a) **Financial requirements.** Subject to Section 15(h) of the Securities Exchange Act of 1934 (15 U.S.C. Section 78o(h)) or Section 222 of the Investment Advisers Act of 1940 (15 U.S.C. Section 80b-22), a rule adopted or order issued under this chapter may establish minimum financial requirements for broker-dealers registered or required to be registered under this chapter and investment advisers registered or required to be registered under this chapter.
- (b) **Financial reports.** Subject to Section 15(h) of the Securities Exchange Act of 1934 (15 U.S.C. Section 78o(h)) or Section 222(b) of the Investment Advisers Act of 1940 (15 U.S.C. Section 80b-22), a broker-dealer registered or required to be registered under this chapter and an investment adviser registered or required to be registered under this chapter shall file such financial reports as are required by a rule adopted or order issued under this chapter. If the information contained in a record filed under this subsection is or becomes inaccurate or incomplete in a material respect, the registrant shall promptly file a correcting amendment.
- (c) **Record keeping.** Subject to Section 15(h) of the Securities Exchange Act of 1934 (15 U.S.C. Section 78o(h)) or Section 222 of the Investment Advisers Act of 1940 (15 U.S.C. Section 80b-22):
- (1) a broker-dealer registered or required to be registered under this chapter and an investment adviser registered or required to be registered under this chapter shall make and maintain the accounts, correspondence, memoranda, papers, books, and other records required by rule adopted or order issued under this chapter;
- (2) broker-dealer records required to be maintained under paragraph (1) may be maintained in any form of data storage acceptable under Section 17(a) of the Securities

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Ex	change Act of 1934 (15 U.S.C. Section	78q(a)) if they	are readily	accessible to	the
adı	ninistrator; and				

- (3) investment adviser records required to be maintained under paragraph (d)(1) may be maintained in any form of data storage required by rule adopted or order issued under this chapter.
 - (d) Records and reports of private funds.
- (1) **In general.** An investment adviser to a private fund shall maintain such records of, and file with the administrator such reports and amendments thereto, that an exempt reporting adviser is required to file with the Securities and Exchange Commission pursuant to SEC Rule 204-4, Code of Federal Regulations, title 17, section 275.204-4.
- (2) **Treatment of records.** The records and reports of any private fund to which an investment adviser provides investment advice shall be deemed to be the records and reports of the investment adviser.
- (3) **Required information.** The records and reports required to be maintained by an investment adviser, which are subject to inspection by a representative of the administrator at any time, shall include for each private fund advised by the investment adviser, a description of:
- 89.18 (A) the amount of assets under management;
- 89.19 (B) the use of leverage, including off-balance-sheet leverage, as to the assets under management;
- 89.21 (C) counterparty credit risk exposure;
- 89.22 (D) trading and investment positions;
- 89.23 (E) valuation policies and practices of the fund;
- 89.24 (F) types of assets held;
- 89.25 (G) side arrangements or side letters, whereby certain investors in a fund obtain more favorable rights or entitlements than other investors;
- 89.27 (H) trading practices; and
- (I) such other information as the administrator determines is necessary and appropriate in the public interest and for the protection of investors, which may include the establishment of different reporting requirements for different classes of fund advisers, based on the type or size of the private fund being advised.

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- (4) **Filing of records.** A rule or order under this chapter may require each investment adviser to a private fund to file reports containing such information as the administrator deems necessary and appropriate in the public interest and for the protection of investors.
- (e) Audits or inspections. The records of a broker-dealer registered or required to be registered under this chapter and of an investment adviser registered or required to be registered under this chapter, including the records of a private fund described in paragraph (d) and the records of investment advisers to private funds, are subject to such reasonable periodic, special, or other audits or inspections by a representative of the administrator, within or without this state, as the administrator considers necessary or appropriate in the public interest and for the protection of investors. An audit or inspection may be made at any time and without prior notice. The administrator may copy, and remove for audit or inspection copies of, all records the administrator reasonably considers necessary or appropriate to conduct the audit or inspection. The administrator may assess a reasonable charge for conducting an audit or inspection under this subsection.
- (f) Custody and discretionary authority bond or insurance. Subject to Section 15(h) of the Securities Exchange Act of 1934 (15 U.S.C. Section 78o(h)) or Section 222 of the Investment Advisers Act of 1940 (15 U.S.C. Section 80b-22), a rule adopted or order issued under this chapter may require a broker-dealer or investment adviser that has custody of or discretionary authority over funds or securities of a customer or client to obtain insurance or post a bond or other satisfactory form of security in an amount of at least \$25,000, but not to exceed \$100,000. The administrator may determine the requirements of the insurance, bond, or other satisfactory form of security. Insurance or a bond or other satisfactory form of security may not be required of a broker-dealer registered under this chapter whose net capital exceeds, or of an investment adviser registered under this chapter whose minimum financial requirements exceed, the amounts required by rule or order under this chapter. The insurance, bond, or other satisfactory form of security must permit an action by a person to enforce any liability on the insurance, bond, or other satisfactory form of security if instituted within the time limitations in section 80A.76(j)(2).
- (g) **Requirements for custody.** Subject to Section 15(h) of the Securities Exchange Act of 1934 (15 U.S.C. Section 78o(h)) or Section 222 of the Investment Advisers Act of 1940 (15 U.S.C. Section 80b-22), an agent may not have custody of funds or securities of a customer except under the supervision of a broker-dealer and an investment adviser representative may not have custody of funds or securities of a client except under the supervision of an investment adviser or a federal covered investment adviser. A rule adopted or order issued under this chapter may prohibit, limit, or impose conditions on a broker-dealer

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regarding custody of funds or securities of a customer and on an investment adviser regarding custody of securities or funds of a client.

- (h) **Investment adviser brochure rule.** With respect to an investment adviser registered or required to be registered under this chapter, a rule adopted or order issued under this chapter may require that information or other record be furnished or disseminated to clients or prospective clients in this state as necessary or appropriate in the public interest and for the protection of investors and advisory clients.
- (i) **Continuing education.** A rule adopted or order issued under this chapter may require an individual registered under section 80A.57 or 80A.58 to participate in a continuing education program approved by the Securities and Exchange Commission and administered by a self-regulatory organization, the North American Securities Administrators Association, or the commissioner.
- 91.13 Sec. 7. Minnesota Statutes 2024, section 80E.12, is amended to read:

80E.12 UNLAWFUL ACTS BY MANUFACTURERS, DISTRIBUTORS, OR FACTORY BRANCHES.

It shall be unlawful for any manufacturer, distributor, or factory branch to require a new motor vehicle dealer to do any of the following:

- (a) order or accept delivery of any new motor vehicle, part or accessory thereof, equipment, or any other commodity not required by law which has not been voluntarily ordered by the new motor vehicle dealer, provided that this paragraph does not modify or supersede reasonable provisions of the franchise requiring the dealer to market a representative line of the new motor vehicles the manufacturer or distributor is publicly advertising;
- (b) order or accept delivery of any new motor vehicle, part or accessory thereof, equipment, or any other commodity not required by law in order for the dealer to obtain delivery of any other motor vehicle ordered by the dealer;
- (c) order or accept delivery of any new motor vehicle with special features, accessories, or equipment not included in the list price of the motor vehicles as publicly advertised by the manufacturer or distributor;
- 91.30 (d) participate monetarily in an advertising campaign or contest, or to purchase any 91.31 promotional materials, showroom, or other display decorations or materials at the expense 91.32 of the new motor vehicle dealer;

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(e) enter into any agreement with the manufacturer or to do any other act prejudicial to the new motor vehicle dealer by threatening to cancel a franchise or any contractual agreement existing between the dealer and the manufacturer. Notice in good faith to any dealer of the dealer's violation of any terms of the franchise agreement shall not constitute a violation of sections 80E.01 to 80E.17;

- (f) change the capital structure of the new motor vehicle dealer or the means by or through which the dealer finances the operation of the dealership; provided, that the new motor vehicle dealer at all times meets any reasonable capital standards agreed to by the dealer; and also provided, that no change in the capital structure shall cause a change in the principal management or have the effect of a sale of the franchise without the consent of the manufacturer or distributor as provided in section 80E.13, paragraph (j);
- (g) prevent or attempt to prevent, by contract or otherwise, any motor vehicle dealer from changing the executive management control of the new motor vehicle dealer unless the franchisor proves that the change of executive management will result in executive management control by a person who is not of good moral character or who does not meet the franchisor's existing reasonable capital standards and, with consideration given to the volume of sales and services of the new motor vehicle dealer, uniformly applied minimum business experience standards in the market area; provided, that where the manufacturer, distributor, or factory branch rejects a proposed change in executive management control, the manufacturer, distributor, or factory branch shall give written notice of its reasons to the dealer;
- (h) refrain from participation in the management of, investment in, or the acquisition of, any other line of new motor vehicle or related products or establishment of another make or line of new motor vehicles in the same dealership facilities as those of the manufacturer; provided, however, that this clause does not apply unless the new motor vehicle dealer maintains a reasonable line of credit for each make or line of new motor vehicle, and that the new motor vehicle dealer remains in substantial compliance with the terms and conditions of the franchise and with any reasonable facilities requirements of the manufacturer and that the acquisition or addition is not unreasonable in light of all existing circumstances; provided further that if a manufacturer determines to deny a dealer's request for a change described in this paragraph, such denial must be in writing, must offer an analysis of the grounds for the denial addressing the criteria contained in this paragraph, and must be delivered to the new motor vehicle dealer within 60 days after the manufacturer receives the completed application or documents customarily used by the manufacturer for dealer actions described in this paragraph. If a denial that meets the requirements of this paragraph

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is not sent within this period, the manufacturer shall be deemed to have given its consent 93.1 to the proposed change. 93.2 For purposes of this section and sections 80E.07, subdivision 1, paragraph (c), and 80E.14, 93.3 subdivision 4, reasonable facilities requirements shall not include a requirement that a dealer 93.4 establish or maintain exclusive facilities for the manufacturer of a line make unless 93.5 determined to be reasonable in light of all existing circumstances or the dealer and the 93.6 manufacturer voluntarily agree to such a requirement and separate and adequate consideration 93.7 was offered and accepted; 93.8 (i) during the course of the agreement, change the location of the new motor vehicle 93.9 dealership or make any substantial alterations to the dealership premises during the course 93.10 of the agreement, when to do so would be unreasonable or if the manufacturer fails to 93.11 provide the dealer 180 days' prior written notice of a required change in location or substantial 93.12 premises alteration; or 93.13 (j) prospectively assent to a release, assignment, novation, waiver, or estoppel whereby 93.14 a dealer relinquishes any rights under sections 80E.01 to 80E.17, or which would relieve 93.15 any person from liability imposed by sections 80E.01 to 80E.17 or to require any controversy 93.16 between a new motor vehicle dealer and a manufacturer, distributor, or factory branch to 93.17 be referred to any person or tribunal other than the duly constituted courts of this state or 93.18 the United States, if the referral would be binding upon the new motor vehicle dealer-; or 93.19 (k) refrain from participation in an auto show described in section 168.27, subdivision 93.20 10a. 93.21 **EFFECTIVE DATE.** This section is effective the day following final enactment. 93.22 Sec. 8. Minnesota Statutes 2024, section 82B.19, subdivision 5, is amended to read: 93.23 Subd. 5. Out-of-state continuing education credit. (a) For purposes of this subdivision, 93.24 the following terms have the meanings given: 93.25 (1) "asynchronous educational offering" has the meaning given in the most recent version 93.26 of the Real Property Appraiser Qualification Criteria, as established by the Appraiser 93.27 Qualifications Board; and 93.28 93.29 (2) "synchronous educational offering" has the meaning given in the most recent version of the Real Property Appraiser Qualification Criteria, as established by the Appraiser 93.30 Qualifications Board, and includes an educational process based on live or real-time 93.31 instruction where there is no geographic separation of instructor and student.

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(b) Notwithstanding section 45.30, subdivisions 1 and 6, a real estate appraiser or course
<u>provider</u> may submit, in a form prescribed by the commissioner, an application for continuing
education credit for a synchronous educational offering that has not been submitted for prior
approval in Minnesota. The commissioner must grant a real estate appraiser continuing
education credit if:

- (1) the application is submitted on or before August 1 of the year in which the real estate appraiser license is due for renewal;
- (2) the synchronous educational offering has been approved for continuing education credit by the regulator of real estate appraisers in at least one other state or United States territory; and
- (3) an application is submitted by the real estate appraiser or course provider to the commissioner within 30 60 days of successful completion of the synchronous educational 94.12 offering. 94.13
 - (c) The application must include a certificate of successful completion from the synchronous educational offering provider. The commissioner must grant a real estate appraiser the same number of continuing education credits for the successful completion of the synchronous educational offering as was approved for the offering by the out-of-state real estate appraiser regulatory authority. The commissioner must grant a real estate appraiser continuing education credit within 60 days of the submission of the completed application for out-of-state continuing education credit.
 - (d) The commissioner may charge a fee to a real estate appraiser, in an amount to be determined by the commissioner, to submit an application under this subdivision.
- (e) This subdivision does not apply to asynchronous educational offerings. 94.23
- Sec. 9. Minnesota Statutes 2024, section 168.27, is amended by adding a subdivision to 94.24 read: 94.25
- Subd. 10a. Participation in auto shows. (a) A new motor vehicle dealer may participate 94.26 in an auto show outside the county where the dealer maintains the dealer's licensed location 94.27 to sell new vehicles without obtaining an additional license if: 94.28
- 94.29 (1) the dealer participates in an auto show that takes place in a county other than the county where the dealer maintains a licensed location not more than four times during any 94.30 calendar year; 94.31

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95.1	(2) the auto show is held at a location in a city of the first class or a city immediately
95.2	adjacent to a city of the first class;
95.3	(3) the auto show is not held at a licensed location of any participating dealer;
95.4	(4) there are ten or more dealers participating in the auto show;
95.5	(5) the auto show is of a duration of no more than 12 consecutive days;
95.6	(6) the auto show is conducted by a trade association exempt from federal taxes under
95.7	United States Code, title 26, section 501(c)(6); and
95.8	(7) the auto show expressly prohibits:
95.9	(i) the sale or lease of vehicles at the show;
95.10	(ii) labeling or marking vehicles as "For Sale" or "Sold";
95.11	(iii) labeling or marking a vehicle with a price other than the manufacturer's retail price
95.12	<u>label;</u>
95.13	(iv) using printed posters, cards, and other printed materials that contain special dealership
95.14	pricing; and
95.15	(v) appraisal of trade-in vehicles and quoting a trade-in price for a particular vehicle.
95.16	(b) The auto show may permit:
95.17	(1) exhibitor staff to distribute business cards, coupons, vehicle promotional materials,
95.18	and factory-approved rebates;
95.19	(2) exhibitor staff to make appointments for potential customers to visit the dealership,
95.20	collect names of customer leads for later contact, and discuss the suggested retail price of
95.21	a vehicle and the availability of particular lines of vehicles; and
95.22	(3) test rides or test drives of new vehicles but only under a program conducted by the
95.23	auto show.
95.24	EFFECTIVE DATE. This section is effective the day following final enactment.
95.25	Sec. 10. Minnesota Statutes 2024, section 239.761, subdivision 3, is amended to read:
95.26	Subd. 3. Gasoline. (a) Gasoline that is not blended with biofuel must not be contaminated
95.27	with water or other impurities and must comply with ASTM specification D4814-11b
95.28	<u>D4814-24a</u> . Gasoline that is not blended with biofuel must also comply with the volatility
95.29	requirements in Code of Federal Regulations, title 40, part 1090.

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- (b) After gasoline is sold, transferred, or otherwise removed from a refinery or terminal, 96.1 a person responsible for the product: 96.2 (1) may blend the gasoline with agriculturally derived ethanol as provided in subdivision 96.3 4; 96.4 96.5 (2) shall not blend the gasoline with any oxygenate other than biofuel; (3) shall not blend the gasoline with other petroleum products that are not gasoline or 96.6 96.7 biofuel; (4) shall not blend the gasoline with products commonly and commercially known as 96.8 casinghead gasoline, absorption gasoline, condensation gasoline, drip gasoline, or natural 96.9 gasoline; and 96.10 (5) may blend the gasoline with a detergent additive, an antiknock additive, or an additive 96.11 designed to replace tetra-ethyl lead, that is registered by the EPA. 96.12 Sec. 11. Minnesota Statutes 2024, section 239.761, subdivision 4, is amended to read: 96.13 Subd. 4. Gasoline blended with ethanol; general. (a) Gasoline may be blended with 96.14 96.15 agriculturally derived, denatured ethanol that complies with the requirements of subdivision 5. 96.16 96.17 (b) A gasoline-ethanol blend must: (1) comply with the volatility requirements in Code of Federal Regulations, title 40, part 96.18 1090; 96.19 (2) comply with ASTM specification D4814-11b D4814-24a, or the gasoline base stock 96.20 from which a gasoline-ethanol blend was produced must comply with ASTM specification 96.21 D4814-11b D4814-24a; and 96.22 (3) not be blended with casinghead gasoline, absorption gasoline, condensation gasoline, 96.23 drip gasoline, or natural gasoline after the gasoline-ethanol blend has been sold, transferred, 96.24 or otherwise removed from a refinery or terminal. 96.25 Sec. 12. Minnesota Statutes 2024, section 239.761, subdivision 5, is amended to read: 96.26
- Subd. 5. **Denatured ethanol.** Denatured ethanol that is to be blended with gasoline must be agriculturally derived and must comply with ASTM specification D4806-11a D4806-21a.

 This includes the requirement that ethanol may be denatured only as specified in Code of Federal Regulations, title 27, parts 20 and 21.

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- Sec. 13. Minnesota Statutes 2024, section 239.761, subdivision 6, is amended to read:
- 97.2 Subd. 6. **Gasoline blended with nonethanol oxygenate.** (a) A person responsible for the product shall comply with the following requirements:
- 97.4 (1) after July 1, 2000, gasoline containing in excess of one-third of one percent, in total, 97.5 of nonethanol oxygenates listed in paragraph (b) must not be sold or offered for sale at any 97.6 time in this state; and
- 97.7 (2) after July 1, 2005, gasoline containing any of the nonethanol oxygenates listed in paragraph (b) must not be sold or offered for sale in this state.
- 97.9 (b) The oxygenates prohibited under paragraph (a) are:
- 97.10 (1) methyl tertiary butyl ether, as defined in section 296A.01, subdivision 34;
- 97.11 (2) ethyl tertiary butyl ether, as defined in section 296A.01, subdivision 18; or
- 97.12 (3) tertiary amyl methyl ether.
- 97.13 (c) Gasoline that is blended with a nonethanol oxygenate must comply with ASTM specification D4814-11b D4814-24a. Nonethanol oxygenates must not be blended into gasoline after the gasoline has been sold, transferred, or otherwise removed from a refinery or terminal.
- 97.17 Sec. 14. Minnesota Statutes 2024, section 239.791, subdivision 11, is amended to read:
- Subd. 11. **Exemption for motor sports racing.** (a) A person responsible for the product may offer for sale, sell, or dispense at a public or private racecourse or a retail gasoline station, gasoline that is not oxygenated in accordance with subdivision 1 if the gasoline is

intended to be used exclusively as a fuel for off-highway motor sports racing events.

- 97.22 (b) No more than one storage tank on the premises of a retail gasoline station may be
 97.23 used for the storage of nonoxygenated motor sports racing gasoline that is offered for sale,
- 97.24 sold, or dispensed at the station. The pump stand at the station must be posted with a
- 97.25 permanent, conspicuously placed notice in full view of consumers stating: "FOR USE IN
- 97.26 OFF-HIGHWAY MOTOR SPORTS ENGINES ONLY."
- 97.27 Sec. 15. Minnesota Statutes 2024, section 296A.01, subdivision 20, is amended to read:
- 97.28 Subd. 20. Ethanol, denatured. "Ethanol, denatured" means ethanol that is to be blended
- 97.29 with gasoline, has been agriculturally derived, and complies with ASTM specification
- 97.30 D4806-11a D4806-21a. This includes the requirement that ethanol may be denatured only
- as specified in Code of Federal Regulations, title 27, parts 20 and 21.

Sec. 16. Minnesota Statutes 2024, section 296A.01, subdivision 23, is amended to read: 98.1 Subd. 23. **Gasoline.** (a) "Gasoline" means: 98.2 (1) all products commonly or commercially known or sold as gasoline regardless of 98.3 their classification or uses, except casinghead gasoline, absorption gasoline, condensation 98.4 98.5 gasoline, drip gasoline, or natural gasoline that under the requirements of section 239.761, subdivision 3, must not be blended with gasoline that has been sold, transferred, or otherwise 98.6 removed from a refinery or terminal; and 98.7 (2) any liquid prepared, advertised, offered for sale or sold for use as, or commonly and 98.8 commercially used as, a fuel in spark-ignition, internal combustion engines, and that when 98.9 tested by the Weights and Measures Division meets the specifications in ASTM specification 98.10 D4814-11b D4814-24a. 98.11 (b) Gasoline that is not blended with ethanol must not be contaminated with water or 98.12 other impurities and must comply with both ASTM specification D4814-11b D4814-24a 98.13 and the volatility requirements in Code of Federal Regulations, title 40, part 1090. 98.14 (c) After gasoline is sold, transferred, or otherwise removed from a refinery or terminal, 98.15 a person responsible for the product: 98.16 (1) may blend the gasoline with agriculturally derived ethanol, as provided in subdivision 98.17 24; 98.18 (2) must not blend the gasoline with any oxygenate other than denatured, agriculturally 98.19 derived ethanol; 98.20 (3) must not blend the gasoline with other petroleum products that are not gasoline or 98.21 denatured, agriculturally derived ethanol; 98.22 (4) must not blend the gasoline with products commonly and commercially known as 98.23 casinghead gasoline, absorption gasoline, condensation gasoline, drip gasoline, or natural 98.24 gasoline; and 98.25 (5) may blend the gasoline with a detergent additive, an antiknock additive, or an additive 98.26

Sec. 17. Minnesota Statutes 2024, section 296A.01, subdivision 24, is amended to read:

designed to replace tetra-ethyl lead, that is registered by the EPA.

Subd. 24. **Gasoline blended with nonethanol oxygenate.** "Gasoline blended with nonethanol oxygenate" means gasoline blended with ETBE, MTBE, or other alcohol or ether, except denatured ethanol, that is approved as an oxygenate by the EPA, and that complies with ASTM specification D4814-11b D4814-24a. Oxygenates, other than denatured

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99.1	ethanol, must not be blended into gasoline after the gasoline has been sold, transferred, or
99.2	otherwise removed from a refinery or terminal.
99.3	Sec. 18. [325F.677] AVAILABILITY OF WATER AT PLACES OF
99.4	ENTERTAINMENT.
99.5	Subdivision 1. Definition. For purposes of this section, "place of entertainment" has the
99.6	meaning given in section 325F.676, subdivision 1, paragraph (h).
99.7	Subd. 2. Available water requirement. When occupancy exceeds 100 attendees and
99.8	when an attendee must have a ticket in order to access the place of entertainment, a place
99.9	of entertainment must provide attendees with access to potable water by:
99.10	(1) providing water at no cost to the attendees;
99.11	(2) allowing attendees to bring factory-sealed bottled water into the place of
99.12	entertainment; or
99.13	(3) allowing attendees to bring an empty water bottle to the place of entertainment and
99.14	providing attendees with access to potable water to fill the bottle. A place of entertainment
99.15	may prohibit certain types and sizes of water bottles in order to protect the safety of others.
99.16	Subd. 3. Exceptions. A museum exhibit gallery or presentation space where beverages
99.17	are prohibited is not required to allow water into the museum exhibit gallery or presentation
99.18	space if water is available at no cost in an accessible location outside of the museum exhibit
99.19	gallery or presentation space.
99.20	Sec. 19. SECURITIES BROKER-DEALER CONDUCT; EXPEDITED
99.21	RULEMAKING.
99.22	The commissioner of commerce must adopt rules amending Minnesota Rules, part
99.23	2876.5021, to reflect that NASD is now referred to as FINRA and to comply with FINRA's
99.24	new securities broker-dealer conduct rules. The commissioner of commerce may use the
99.25	expedited rulemaking process under Minnesota Statutes, section 14.389, to amend Minnesota
99.26	Rules, part 2876.5021, under this section.
99.27	Sec. 20. REPEALER.

325F.07, are repealed.

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Minnesota Statutes 2024, sections 325F.02; 325F.03; 325F.04; 325F.05; 325F.06; and

APPENDIX Article locations for H2403-2

ARTICLE 1	FINANCIAL INSTITUTIONS	Page.Ln 2.2
ARTICLE 2	INSURANCE	Page.Ln 15.1
ARTICLE 3	LIMITED LONG-TERM CARE INSURANCE	Page.Ln 21.3
ARTICLE 4	MEDICARE SUPPLEMENT INSURANCE	Page.Ln 29.7
ARTICLE 5	INSURANCE HOLDING COMPANY SYSTEMS	Page.Ln 41.10
ARTICLE 6	MINNESOTA BUSINESS CORPORATIONS ACT	Page.Ln 63.9
ARTICLE 7	MISCELLANEOUS COMMERCE PROVISIONS	Page.Ln 84.9

APPENDIX

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62A.3099 DEFINITIONS.

Subd. 18b. **Open enrollment period.** "Open enrollment period" means the time period described in Code of Federal Regulations, title 42, section 422.62, paragraph (a), clauses (2) to (4), as amended.

62A.31 MEDICARE SUPPLEMENT BENEFITS; MINIMUM STANDARDS.

Subd. 1w. **Open enrollment.** A medicare supplement policy or certificate must not be sold or issued to an eligible individual outside of the time periods described in subdivision 1u.

65B.10 ELIGIBILITY.

Subd. 3. **Review of insureds.** At least annually, every member shall review every private passenger nonfleet applicant which it insures through the facility and determine whether or not such applicant is acceptable for voluntary insurance at a rate lower than the facility rate. If such applicant is acceptable, the member shall make an offer to insure the applicant under voluntary coverage at such lower rate.

325F.02 MANUFACTURE, STORAGE, OR SALE OF MATCHES.

Subdivision 1. **Safety matches.** No person, association, or corporation shall manufacture, store, offer for sale, sell, or otherwise dispose of, or distribute, white phosphorus, single-dipped, strike-anywhere matches of the type popularly known as "parlor matches", or any type of double-dipped matches, unless the bulb or first dip of such match is composed of a so-called safety or inert composition, nonignitable on an abrasive surface. No person, association, or corporation shall manufacture, store, sell, offer for sale, or otherwise dispose of, or distribute, matches which will ignite in a laboratory oven at a temperature of less than 200 degrees Fahrenheit when subjected in such laboratory oven to a gradually increasing heat and maintained at the before stated continuous temperature for a period of not less than eight hours, or blazer or so-called wind matches, whether of the so-called safety or strike-anywhere type.

- Subd. 2. **Brands and trademarks.** No person, association, or corporation shall offer for sale, sell or otherwise dispose of, or distribute, any matches, unless the package or container in which such matches are packed bears, plainly marked on the outside thereof, the name of the manufacturer and the brand or trademark under which such matches are sold, disposed of, or distributed.
- Subd. 3. **How kept in retail stores.** Not more than one case of each brand of matches of any type or manufacture shall be opened at any one time in any retail store where matches are sold or otherwise disposed of; nor shall loose boxes, or paper-wrapped packages, of matches be kept on shelves or stored in retail stores at a height exceeding five feet from the floor.
- Subd. 4. **Storage in warehouses.** All matches stored in warehouses, excepting manufacturer's warehouse at place of manufacture, which contain automatic sprinkler equipment, must be kept only in properly secured cases, and not piled to a height exceeding ten feet from the floor; nor be stored within a horizontal distance of ten feet from any boiler, furnace, stove, or other like heating apparatus, nor within a horizontal distance of 25 feet from any explosive material kept or stored on the same floor.
- Subd. 5. **Boxes, how made.** All matches shall be packed in boxes or suitable packages, containing not more than 700 matches in any one box or package; provided, that when more than 300 matches are packed in any one box or package, the matches shall be arranged in two nearly equal portions, the heads of the matches in the two portions shall be placed in opposite directions; and all boxes containing 350 or more matches shall have placed over the matches a center holding or protecting strip, made of chipboard, not less than 1-1/4 inches wide, which shall be flanged down to hold the matches in position when the box is nested into the shuck or withdrawn from it.
- Subd. 6. Containers or cases; number of boxes or packages; how marked. All match boxes or packages shall be packed in strong shipping containers or cases; maximum number of match boxes or packages contained in any one shipping container or case shall not exceed the following number:

Number of boxes	Numerical number of matches per box
1/2 gross	700
1 gross	500
2 gross	400

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3 gross	300
5 gross	200
12 gross	100
20 gross	Over 50 and under 100
25 gross	Under 50

No shipping container or case constructed of fiberboard, corrugated fiberboard, or wood, nailed or wire-bound, containing matches, shall have a weight, including its contents, exceeding 75 pounds; and no lock-cornered wood case containing matches shall have a weight, including its contents, exceeding 85 pounds; nor shall any other article or commodity be packed with matches in any container or case; and all shipping containers or cases containing strike-anywhere matches shall have plainly marked on the outside thereof the words "strike-anywhere matches," and all shipping containers or cases containing "strike on box" matches shall have plainly marked on the outside thereof the words "strike on box matches."

Subd. 7. **Violations; penalties.** Any person, association, or corporation violating any of the provisions of this section shall be fined, for the first offense, not less than \$5 nor more than \$25 and for each subsequent violation, not less than \$25.

325F.03 FLAME RESISTANT PUBLIC ASSEMBLY TENTS.

No person, firm or corporation shall establish, maintain or operate any circus, side show, carnival, tent show, theater, skating rink, dance hall, or a similar exhibition, production, engagement or offering or other place of assemblage in or under which 15 or more persons may gather for any lawful purpose in any tent, awning or other fabric enclosure unless such tent, awning or other fabric enclosure, and all auxiliary tents, curtains, drops, awnings and all decorative materials, are made from a nonflammable material or are treated and maintained in a flame resistant condition. This section does not apply to tents designed or manufactured for camping, backpacking, mountaineering, or children's play; tents used to conduct committal services on the grounds of a cemetery; nor to tents, awnings or other fabric enclosures erected and used within a sound stage, or other similar structural enclosure which is equipped with an overhead automatic sprinkler system.

325F.04 FLAME RESISTANT TENTS.

No person, firm, or corporation may sell or offer for sale or manufacture for sale in this state any tent subject to section 325F.03 unless all fabrics or pliable materials in the tent are durably flame resistant. Tents subject to section 325F.03 shall be conspicuously labeled as being durably flame resistant.

325F.05 RULES.

The commissioner of public safety shall act so as to have effective rules concerning standards for durably flame resistant materials and for labeling requirements under sections 325F.03 and 325F.04. In order to comply with sections 325F.03 and 325F.04, all materials and labels must comply with the rules adopted by the commissioner. The commissioner has general rulemaking power to otherwise implement sections 325F.03 to 325F.07.

325F.06 CIVIL PENALTIES.

Any firm or corporation who violates sections 325F.03 to 325F.05 shall be strictly liable for any damage which occurs to any person as a result of such violation. In addition, any seller shall refund the full purchase price of any item sold in violation of section 325F.04 upon return of the item by the buyer.

325F.07 CRIMINAL PENALTY.

Any person, firm or corporation which violates sections 325F.03 to 325F.05 is guilty of a misdemeanor.

APPENDIX Repealed Minnesota Session Laws: H2403-2

Laws 2023, chapter 57, article 2, section 66

Sec. 66. REPEALER.

Minnesota Statutes 2022, section 62A.31, subdivisions 1b and 1i, are repealed.

EFFECTIVE DATE. This section is effective August 1, 2025, and applies to policies offered, issued, or renewed on or after that date.