

In response to the deepening coronavirus disease 2019 (COVID-19), commonly known as the “coronavirus,” more simply as COVID-19, crisis, insurance regulators are rapidly imposing special constraints and requirements on insurance companies. The following summary highlights the most recent regulatory actions and guidance affecting the insurance industry. The situation is constantly evolving. Click [New Regulatory Directives Stafford Act State Of Emergency](#) or [New Regulatory Directives](#) for previous summaries.

Insurance regulators have issued an unprecedented number of bulletins, advisories and orders that directly impact the day-to-day operations of insurance companies at a time when the operations of most insurance companies are already strained by stay-at-home orders and other public measures to slow the spread of the coronavirus.

While the regulatory directives vary in nature and mandates, there are three types of regulatory actions that are common across a large number of states. The first affects the ability of insurance companies to cancel, non-renew or lapse policies for non-payment of premium, loans or other consideration. The second relaxes various policy and regulatory requirements for health insurance benefits. In the third category, regulators have provided procedural guidance on various filings and producer licensing matters.

## Moratoriums on Policy Termination

As noted in our prior publication alert, regulators anticipate many insureds will not be able to make premium or policy loan payments on time because of the physical or economic impacts of the COVID-19 pandemic and government orders. A growing number of state regulators have requested insurers to accommodate policyholder requests to extend the time for payment and to not cancel or non-renew policies during the crisis, with most setting a 60-day period for accommodation. Only Iowa has asked insurers to consider waiving health insurance premiums. Some of these directives are framed as a direct order. Since March 23, the states of Indiana, Massachusetts, Missouri, Tennessee and Wisconsin have issued Bulletins or Directives requesting that insurers work with consumers on premium extensions or deferrals. The states of Arkansas, Delaware, Mississippi and Washington issued mandates on non-renewals, and guidance issued in South Carolina and Texas should probably be construed as mandates.

In an unusual action, the Governor of Delaware issued an order on March 25, 2020, stating, “[N]o insurer, may, without a court order, lapse, terminate or cause to be forfeited a covered insurance policy because a covered policyholder does not pay a premium or interest or indebtedness on a premium under the policy that is due during the pending of the declared state of emergency.” A “covered policyholder” under the order is any person or entity that was laid off or fired or was required to close or significantly reduce its business.

Insurers are asking whether they must comply with directives that fall short of a direct order. Is compliance voluntary? Given the changes that must be made to a company’s procedures and automated systems, the question is reasonable, but there are risks in not complying with formal requests and suggestions. To the extent that a company’s system will allow the insurer to accommodate consumer requests for an extension of time to pay premium, insurers should do so. Regulators will likely follow up with data calls on these issues later in 2020, so insurers should consider how they would like to report their non-renewal practices during this crisis.

## Federal CARES Act and Insurance Companies

The federal CARES Act, otherwise referred to as Phase 3 of the federal economic stimulus package in response to the COVID-19 (the Act) includes several sections that impact all insurance companies. For health insurance companies, the Act further clarifies coverage issues related to mitigation and prevention of COVID-19. For life insurance companies, the Act impacts issuers of group annuities and other qualified retirement plans. Amendments to the Fair Credit Reporting Act (FCRA) will impact all insurers.

**Life Insurance and Annuities.** Section 2202 of the Act provides individuals with expanded opportunities to make withdrawals or take loans of up to US\$100,000 from their qualified retirement plan or annuity (collectively, the Qualified Plan), as long as the withdrawal or loan (a Distribution) is a “Coronavirus-related Distribution.” The Act accomplishes this by effectively creating a new exemption to IRC Section 72(t) and provides that all Plan contracts are to be treated as amended by the terms of the Act. The Act defines a “Coronavirus-related Distribution” as a distribution to an individual between January 1, 2020, and December 31, 2020, by an individual (a)(i) who has been diagnosed with COVID-19 or SARS or (ii) whose spouse or dependent has been diagnosed with COVID-19 or SARS, or (b) who experienced adverse financial consequences due to being laid off, furloughed or who experienced a work reduction due to a COVID-19- or SARS- related closure or work reduction or childcare facility closure. An employer is permitted to accept the employee’s certification that the withdrawal or loan was a “Coronavirus-related Distribution.” The Act provides that the 10% penalty on early withdrawals found in IRC Section 72(t) does not apply to Coronavirus-Related Distributions, and it also allows for a delay of one year before loan repayment starts.

**Health Insurance.** The Act clarifies how Plans reimburse healthcare providers for diagnostic testing and rapid treatment. Sections 3202 of the Act defines how all forms of health insurance, including individual, small and large group commercial and self-funded plans (collectively, the Plans), are required to reimburse for diagnostic testing. The Act provides that, if there is a contract between the Plan and the provider, the reimbursement is at the rate set forth in such contract. If there is no contract between the Plan and the provider, then the reimbursement rate must be the provider's "cash price" or a price that the Act requires be posted on the provider's website. Alternatively, the Plan and the provider may negotiate an alternative independent reimbursement rate.

Section 3202 requires Plans to cover evidence-based COVID-19 preventative services and immunizations. The CARES Act provides that Plans can rely on guidance from the US Preventative Services Task Force for treatment coverage and the Advisory Committee on Immunization Practices of the Center for Disease Control and Prevention for guidance on immunizations.

**Fair Credit Reporting Act.** Section 4201 of the CARES Act amends the Fair Credit Reporting Act (FCRA) to require creditors, including insurance companies that provide consumers with payment term accommodations, to report such accommodations as current, rather than as a delinquency.

## Property and Casualty Coverage

The Wisconsin Commissioner directed insurers who write automobile insurance to provide coverage for restaurant delivery services, despite exclusions for delivery services. Insurers must also notify commercial liability policyholders, such as restaurants, of the availability of hired and non-owned vehicle coverage.

## Health Insurance

Health insurers have been instructed to relax many requirements, particular with respect to telemedicine and telehealth, cost-sharing, prescriptions, prior authorizations and provider network issues. As with all of the regulatory directives and guidance, there is no uniformity, and companies should check the guidance issued in each state in which they do business. Since our last alert, the states of Delaware, Kentucky, Louisiana and Nebraska have issued guidance for health insurance companies.

As we have seen in natural disasters, insurers have been asked or instructed to provide 90-day refills or permit early refills. Florida and Louisiana have mandated rather than suggested such measures.

Louisiana has also mandated the waiver of co-payments, coinsurance and deductibles for screening and testing for COVID-19, and has mandated the waiver of pre-authorizations. Other states are encourage the implementation of such waivers.

## Company Filings

In the past week, the states of Missouri and Wisconsin issued guidance regarding filings, deemers and approvals. Missouri relaxed annual statement filing deadlines and certain filing requirements, such as requirements for wet signatures and original hard copies, and now will accept electronic filings and documents. Wisconsin has prospectively approved emergency bylaw amendments to permit board meetings to be conducted by electronic means.

Wisconsin also indicated that no filings will be "deemed" approved. In fact, any filings that are subject to a deemer provision, such as extraordinary dividend requests, have been "disapproved." Presumably, this guidance would apply to other corporate filings as well as product filings.

Recognizing the challenge of being face to face with a notary, New Mexico indicated that a declaration under penalty would suffice in lieu of an affidavit, at least for upcoming filing about excepted benefits. However, most states have not addressed such issues, and companies that have filings due should check with the respective regulator to determine whether requirements that are inconsistent with stay-at-home orders and other protective government orders may be relaxed.

## Producers

Because the two major testing centers are closed until at least mid-April, some regulators have extended the period during which applicants may sit for license examinations. In the past week, the states of Alabama, Delaware, Indiana, Louisiana, Nebraska, Virginia and Texas have provided agents and producers with additional time to renew licenses, although the extensions are not necessarily automatic and must be requested in some states. There are some modifications for continuing education, such as a waiver of the proctor requirement for online continuing education courses. Producers should check with the respective state as the relaxations vary from state to state.

## Department of Insurance Operations

Most if not all insurance departments have closed their offices, and staff are working remotely. Some have warned that there may be delays in providing services.

**The following is a summary of actions taken by individual states since March 23, 2020.**

## All Lines of Business

### Premiums and Cancellations/Non-renewals

**Arkansas.** The Commissioner imposed a 60-day moratorium on cancellations and non-renewals for non-payment of premiums, beginning March 11, 2020. The moratorium applies only to individuals who are diagnosed with or test positive for COVID-19, and insurers are permitted to ask for evidence of the diagnosis. However, it is not an automatic. Policyholders must request an extension. The moratorium applies to premiums not paid during the 60-day period, and premiums are not waived.<sup>1</sup>

**Delaware.** By order of the Governor, no insurer may (without a court order) lapse, terminate or cause to be forfeited any insurance policy because a "covered policyholder" does not pay a premium or interest or indebtedness during the State of Emergency. A "covered policyholder" is an individual or business entity who was laid off or fired from employment or was required to close or significantly reduce its business as a result of the COVID-19 state of emergency.<sup>2</sup>

**Indiana.** Insurers are requested to institute a moratorium on cancellations and non-renewals of all policies for non-payment during the period March 19, 2020, to May 18, 2020. Premiums are not waived.<sup>3</sup>

**Massachusetts.** Insurers are advised to explore all possible ways to relax premium due dates, extend grace periods, waive fees, allow payment plans and to cancel or non-renew policies only after exhausting other efforts to work with policyholders.<sup>4</sup>

**Mississippi.** Beginning March 14, 2020, no insurance policy may be cancelled or non-renewed for non-payment of premium. Premiums are not waived and insurers are instructed to work with impacted policyholders. During the moratorium, policies may be terminated for reasons other than non-payment of premium.<sup>5</sup>

**Missouri.** Insurers should not cancel, non-renew, or terminate coverage for nonpayment while bulletin 20-05 is in effect. Insurers are not required to waive premiums. For health coverage, insurers are encouraged to extend a 60-day grace period for health insurance policies that were in effect on March 13, 2020. Claims during grace periods should be covered. For insurers that offer a 60-day grace period, the department grants a safe harbor from the provisions of section 376.434.2 [liability during grace period]; however, insurers must notify the department about their plans.<sup>6</sup>

**Tennessee.** Insurers are directed to explore ways to eliminate late fees, insufficient funds fees and installment fees, and find ways to "delay" cancellations or non-renewals for nonpayment of premiums.<sup>7</sup>

**South Carolina.** Insurers are expected to extend premium payment deadlines and provide additional time before cancellations or non-renewals become effective.<sup>8</sup>

**Washington.** During the period March 25, 2020, to May 9, 2020, insurers shall not cancel a policy for non-payment of premium unless directed by the insured. Insurers are ordered to provide grace periods for premium payments and to waive otherwise applicable charges and fees associate with nonpayment, including late fees and reinstatement fees.<sup>9</sup>

**Texas.** The Texas Department of Insurance (TDI) expects carriers to use grace periods for premium payments, temporarily suspend premium payments, offer payment plans or take other actions to allow continuing insurance coverage. TDI will work with carriers to minimize any regulatory effects to provide such relief and stated that the term "suspension" does not mean forgiveness of premiums.

**Wisconsin.** The offering of non-cancellation periods, deferred premium payments, premium holidays and acceleration or waiver of underwriting requirements is encouraged and will not be considered unfair inducements when offered to insureds incurring economic hardship during the public health emergency.<sup>10</sup>

### Claims

**New Jersey.** Insurers are asked to extend timeframes to complete property and automobile inspections and for medical exams.<sup>11</sup>

**South Carolina.** Insurers are expected to provide extensions of proof of loss deadlines.<sup>12</sup>

**Texas.** The time for payment of claims is extended by 15 days.<sup>13</sup>

**Washington.** Claim handling requirements are expressly not relaxed.<sup>14</sup>

### Company Filings

**Indiana.** The Indiana Department announced it will implement a 60-day grace period related to renewals and cancellations for all licensees, certificate holders and registrants. The grace period also applies to premium tax and surplus lines filings and to producer continuing education requirements. Late fees will be waived.<sup>15</sup>

**Missouri.** For domestic insurers, certain filing requirements are relaxed or modified. Annual statement supplemental filings due April 1, 2020, will be considered officially filed with the department when filed with the NAIC. For 2020, any requirement to send signed hard copies of annual statement supplemental filings are optional. Filings that are normally filed by mail should be filed electronically with electronic signatures while the bulletin is in effect (May 15 unless extended). Insurers should use read receipts and the date of the read receipt will be considered the official filed date. If a document requires notarization, it should be submitted electronically as a PDF.

**Wisconsin.** No filings will be "deemed" approved during the public health emergency. Rather, all filings that are deemed approved if the OCI does not act, are "hereby disapproved." This includes extraordinary dividend requests and, presumably, all other corporate as well as product filings. Onsite examination work will not be conducted.<sup>16</sup>

### Corporate

**Wisconsin.** Temporary amendments to bylaws to adopt statutory provisions allowing more flexibility regarding annual shareholder or policyholder meetings, as well as remote meetings of the board of directors, are deemed approved for the duration of the Governor's declaration of a public health emergency. The department may be flexible if meetings are cancelled, rescheduled, or not held in person if necessary by "exigent circumstances outside of the insurer's control."<sup>17</sup>

## Property & Casualty

### Automobile Insurance

**Ohio.** Because insureds will be unable to renew their driver's license during the state of emergency due to the closure of deputy registrar offices, insurers may not cancel, non-renew or refuse to issue automobile insurance, and may not deny a claim, solely because the driver's license of the named insured or other covered family member expired since the state of emergency was declared (March 9, 2020). The bulletin will remain in effect for 30 days after the expiration of the Governor's state of emergency.

**Wisconsin.** Insurers are ordered to provide coverage under personal automobile policies for food delivery services. This is to accommodate restaurant employees who normally do not provide delivery services. The order applies to all personal auto policies in effect on or after March 17, 2020, and applies to all claims arising from an occurrence on or after March 23, 2020. It does not apply to drivers for transportation network companies or who otherwise have coverage for deliveries, and the coverage does not stack with any other coverage.<sup>18</sup>

### Commercial General Liability

**Wisconsin.** Also to accommodate restaurants that did not previously offer delivery, insurers that provide commercial liability coverage are required to notify insured restaurants that hired and non-owned coverage is available, either as a rider or a stand-alone policy. The order applies to all commercial general liability policies in effect on or after March 17, 2020.<sup>19</sup>

### Commercial Auditable Policies

**Mississippi.** The Commissioner strongly encourages insurers to allow, upon request, mid-term audits, self-audits or other adjustments to rating basis to reduce associated premium and more accurately reflect annual exposure projections. The department expressed concern about auditable exposure bases such as payroll, sales, enrollment, attendance, occupancy rates and square footage. There is no waiver of an insurer's rights or responsibilities to perform a final audit at policy expiration.<sup>20</sup>

### Medical Professional Liability

**Indiana.** In accordance with the Governor's direction, the Insurance Commissioner suspended the requirement that medical providers hold an Indiana license in order to participate in the state's Patient Compensation Fund (PCF) and ordered other adjustments during the pendency of the Governor's Executive Order 20-05. Out-of-state providers are eligible for the credits and rate reductions provided for by Indiana regulations. Insurance carriers will file certificates of insurance (online) for out-of-state providers but must first notify PCF staff by email. The 30-day deadline for payment of surcharges is extended to 90 days. Part-time status will be honored for providers who work more than their part-time hours in response to the COVID-19 pandemic. Retired physicians will need to qualify in the normal course but penalties will be waived for late payment of surcharges.

## Health

### Coverage Generally

**Massachusetts.** Insurers should explain grace periods, whether the company is willing to allow employers to pay for employees' health coverage during lay-offs and furloughs, and should have personnel ready to explain COBRA or other coverage rights to laid-off employees. Insurers need to be flexible in enrollment and renewal processes and to work with employers on a case-by-case basis. The department's expectations apply to self-insured groups and insurers acting as administrators for non-insured plans.<sup>21</sup>

### Excepted Benefits

**New Mexico.** Insurers are ordered to provide a detailed, prescribed notice to every person insured under policies that provides "excepted benefits." The notice describes potential limitations on coverage for diagnosis and treatment of COVID-19 related conditions. Notices must be mailed or emailed by March 27, 2020. Insurers must provide verification of compliance to the superintendent via email no later than March 27, 2020. In addition, insurers are to inform agents and employees to provide similar notice to prospective purchasers of such plans or policies. The department withdrew the requirement that the verification be in the form of an affidavit and will accept a declaration under penalty of perjury.<sup>22</sup>

### Cost-sharing

**Indiana.** Insurers are required to cover testing and treatment for COVID-19 and to waive cost-sharing amounts, including deductibles, copayments and coinsurance, for such testing or treatment, regardless of where services are provided. Cost-sharing shall be waived for the use of telemedicine related to the testing, screening and treatment of COVID-19.<sup>23</sup>

**Louisiana.** All health insurance issuers are required to waive all cost-sharing, including co-payments, coinsurance and deductibles for screen and testing for COVID-19. This applies to all providers; including for services provided by telehealth or telemedicine, as well as to any immunizations that may be available. Insurers are to inform contracted providers.<sup>24</sup>

### Telehealth and Telemedicine

**Delaware.** The Commissioner reminded insurers about the Governor's Updated Emergency Declaration, including that patients do not have to present in person for services or be in the state at the time services are provided. Out-of-state providers may provide telemedicine services to Delaware residents if licensed in another jurisdiction, and the regulator expects such providers to be fully reimbursed in accordance with the law. This directive applies to all telehealth and telemedicine services and is not limited to COVID-19.<sup>25</sup>

**Kentucky.** On March 18, 2020, the Commissioner waived the requirements of KRS 304.17A-005(47)(c) to allow the "good faith provision of telehealth using non-public facing audio or video communication products." To further reduce personal contacts, insurers cannot require a patient have a prior relationship with a provider in order to have services delivered through telehealth so long as the provider determines the services are medically appropriate.<sup>26</sup>

**Maine.** The use of “audio-only telephone” is now permitted and parity in coverage is required for this method of delivery of healthcare services. Rate of payment to in-network providers who deliver services by telehealth, including audio-only, shall not be lower than for services delivered in person.<sup>27</sup>

**Louisiana.** Insurers shall waive limitations on the use of audio-only telephonic consultations in providing telemedicine services, including the use of personal devices to the extent permitted under guidance issued by HHS Office for Civil Rights. Coverage limitations and requirements that provider and patient have prior relationship shall be waived.<sup>28</sup>

**Nebraska.** Healthcare providers are not required to obtain a patient’s signature on a written statement prior to providing telehealth services, and claims shall not be denied due to the lack of such written statement. The department relied upon a statutory exception for emergencies and the exception will apply while the Governor’s declared state of emergency is in effect.<sup>29</sup>

**North Dakota.** Insurers are required to provide covered services via telehealth visits, including by telephone, FaceTime or Skype, and offer e-visits and virtual check-ins in accordance with guidance issued by CMS.<sup>30</sup>

**South Carolina.** Insurers are expected to increase access to medical care via telehealth.<sup>31</sup>

**Washington.** The Governor of the state of Washington issued an order requiring provider payment parity when medical services are provided by telemedicine, and prohibiting the denial of telemedicine claims because of any provision in a provider contract.<sup>32</sup>

## Pre-authorization

**Delaware.** Insurers are encouraged to waive pre-authorization requirements for lab testing and treatment of confirmed or suspected COVID-19.<sup>33</sup>

**Indiana.** Pre-authorizations for COVID-19 testing and treatment must be waived.<sup>34</sup>

**Louisiana.** Prior authorizations are to be waived for screening and testing for COVID-19.<sup>35</sup>

## Prescriptions

**Arkansas.** The requirement that pharmacy plan beneficiaries sign for pharmacy services is suspended for 60 days beginning March 11, 2020. This applies to all health insurance plans, including limited-duration plans.<sup>36</sup>

**Florida.** Insurers are reminded that early refills are permitted when the Governor issues an Executive Order declaring a State of Emergency. Time restrictions on refills shall be waived.

**Louisiana.** Pre-certification and step-therapy procedures are suspended. Insurers shall permit early refills (not applicable to drugs with high likelihood of abuse, such as opioids). This emergency rule was effective 12:01 a.m. March 17, 2020, and is in effect until April 9, 2020.<sup>37</sup>

**South Carolina.** Insurers are expected to relax times for early refills and to relax formulary limitations to ensure access to drugs.<sup>38</sup>

## Catastrophic Plans

**Delaware.** Following guidance from the Centers for Medicare and Medicaid Services and to avoid disincentives to seek diagnosis and treatment, the Delaware Department will not take enforcement action against insurers that amend catastrophic plans to provide coverage for services associated with COVID-19.<sup>39</sup>

## Claims

**Maine.** During the state of insurance emergency, health insurers may not refuse to pay claims submitted by providers who are credentialed within a healthcare organization but who may not be credentialed at the location where services were provided.<sup>40</sup>

## Geographic Accessibility

**Louisiana.** For persons insured as of 12:01 a.m. on March 23, 2020, and for insurers in full compliance with the emergency rule, geographic accessibility requirements are waived, subject to adequate access, for services related to the testing or treatment of COVID-19.<sup>41</sup>

## Appeals of Final Internal Adverse Benefit Determination

**New Jersey.** Such appeals are now required to be submitted by email to [ihcap@dobi.nj.gov](mailto:ihcap@dobi.nj.gov) (not by mail or fax). The US\$25 fee is suspended for the duration of the State of Emergency. A modified External Appeal Application is attached to the bulletin.<sup>42</sup>

## Producers

### General

**Alabama.** Many requirements are being waived or relaxed. Certificates of Completion expiring in March or April will be extended 60 days. Notarization requirement for Pre-licensing Providers are waived when primary contact is working from home; exam proctor requirement for self-study continuing education is waived through April 2020.<sup>43</sup>

**Delaware.** The Commissioner directed producers to “take all necessary actions” to ensure their ability to service claims and provide other essential services to insureds.

### Licensing and Examinations

**Indiana.** Producers will have 90 days from the date testing sites reopen to take a licensing examination if the producer’s exam documentation expired between March 16, 2020, and the date of re-opening of testing sites.<sup>44</sup>

**Louisiana.** Due to the closure of testing centers, an emergency regulation allows for the issuance of temporary licenses to persons who completed pre-licensing education within the past 12 months and who would otherwise be eligible to sit for a licensing examination.<sup>45</sup>

**Nebraska.** Producers may request a 90-day extension to renew licenses that expired in March or April.<sup>46</sup>

**Virginia.** Testing centers in Virginia were closed March 17, and will remain closed until at least April 16. The Virginia Bureau of Insurance extended the time to submit required information from 30 to 90 days, and warned that application processing may be delayed.<sup>47</sup>

**Texas.** Pursuant to the Governor's disaster declaration, the Texas Department is relaxing various licensing requirements. For licenses that expired on or before February 29, 2020, the renewal period is extended to May 32, 2020. For licenses that expire between March 31 and April 30, 2020, late fees and pre-licensing education fines are waived if license is renewed by May 31, 2020. Various requirements pertaining to temporary licenses are relaxed.<sup>48</sup>

## Premium Finance Companies

**New York.** Certain regulatory requirements are relaxed for premium finance companies. Offices may be relocated or closed without prior notice (notice is still required); oversight of licensed persons working from home is required; all filings (e.g., certification of compliance with cybersecurity requirements, but not notices of cybersecurity events) are extended for 45 days; licensed individuals may work from home but may not conduct business in person with members of the public there (Note, the Order does not apply to insurance companies or producers).<sup>49</sup>

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For additional information, our [Coronavirus Resource Hub](#) provides guidance on key legal issues for businesses to consider, together with some practical steps for businesses to take.

## Endnotes

- 1 Arkansas Department of Insurance Bulletin 6-2020 (republished March 24, 2020).
- 2 Sixth Modification of the Declaration of a State of Emergency for the State of Delaware Due to a Public Health Threat (March 24, 2020).
- 3 Indiana Bulletin 252 (March 26, 2020).
- 4 Massachusetts Bulletin 2020-05 (March 23, 2020).
- 5 Mississippi Bulletin 2020-3 (March 24, 2020).
- 6 Missouri Insurance Bulletin 20-05 (March 21, 2020).
- 7 Tennessee Bulletin 20-03 (March 23, 2020).
- 8 South Carolina Bulletin No. 2020-02 (March 25, 2020).
- 9 Washington Office of the Insurance Commissioner Emergency Order No. 20-03 (March 25, 2020).
- 10 Wisconsin Notice (March 20, 2020).
- 11 New Jersey Bulletin No. 20-04 (March 19, 2020).
- 12 South Carolina Bulletin No. 2020-02 (March 25, 2020).
- 13 Texas Commissioner's Bulletin No. B-0007-20 (March 23, 2020).
- 14 Washington Advisory Notice (March 25, 2020).
- 15 Indiana Bulletin 252 (March 26, 2020).
- 16 South Carolina Bulletin No. 2020-02 (March 25, 2020).
- 17 Wisconsin Bulletin (March 15, 2020).
- 18 Wisconsin Office of the Commissioner, March 23, 2020.
- 19 Wisconsin Office of the Commissioner, March 23, 2020.
- 20 Mississippi Bulletin 2020-2 (March 23, 2020).
- 21 Massachusetts Bulletin 2020-05 (March 23, 2020).
- 22 New Mexico Amended Notice and Order (March 17, 2020); Supplemental Order.
- 23 Indiana Bulletin 252 (March 26, 2020).
- 24 Louisiana Dept. of Insurance Emergency Rule 36.
- 25 Delaware Bulletin No. 32 (March 20, 2020).
- 26 Kentucky Notice March 18, 2020.
- 27 Maine Emergency Response Order (March 20, 2020).
- 28 Louisiana Dept. of Insurance Emergency Rule 37.
- 29 Nebraska Notice (March 23, 2020).
- 30 North Dakota Bulletin 2020-2 (March 23, 2020).
- 31 South Carolina Bulletin No. 2020-02 (March 25, 2020).
- 32 Proclamation by the Governor Amending Proclamation 20-05 (No. 20-29, March 25, 2020).
- 33 Delaware Bulletin No. 32 (March 20, 2020).
- 34 Indiana Bulletin 252 (March 26, 2020).
- 35 Louisiana Dept. of Insurance Emergency Rule 36.
- 36 Arkansas Bulletin No. 10-2020 (March 24, 2020).
- 37 Louisiana Dept. of Insurance Emergency Rule 36.
- 38 South Carolina Bulletin No. 2020-02 (March 25, 2020).
- 39 Delaware Bulletin No. 32 (March 20, 2020).
- 40 Maine Insurance Emergency Response Order (March 19, 2020).
- 41 Louisiana Dept. of Insurance Emergency Rule 37.

- 42 New Jersey Bulletin No. 20-08 (March 24, 2020).
- 43 Alabama Bulletin No. 2020-03 (March 25, 2020).
- 44 Indiana Dept. of Insurance Notice (website).
- 45 Louisiana Dept. of Insurance Declaration of Emergency, Emergency Rule 38.
- 46 Nebraska Notice (March 23, 2020).
- 47 <https://www.scc.virginia.gov/boi/fyi.aspx>.
- 48 Texas Commissioner's Bulletin No. B-0008-20 (March 24, 2020).
- 49 New York Department of Financial Services Order (March 12, 2020).