



State of Maryland
OFFICE OF THE ATTORNEY GENERAL

ANNUAL REPORT OF THE PEOPLE'S INSURANCE COUNSEL DIVISION

Fiscal Year 2023

I. INTRODUCTION

The People’s Insurance Counsel Division in the Office of the Attorney General (hereinafter referred to as the “Division” or “PICD”) submits this annual report as required by the Maryland General Assembly.¹ On or before the first of January of each year, the Division reports on its activities for the prior fiscal year. This report covers the time period from July 1, 2022, through June 30, 2023.

A. Statutory Basis and Funding

The Division was created in 2005 with the enactment of the Maryland Patients’ Access to Quality Health Care Act of 2004 (hereinafter referred to as “Act”).² The provisions of the Act relating to the Division have been codified in Md. Code Ann., State Government Section 6-301 through 6-308.

Funding of the Division is provided through a People’s Insurance Counsel Fund consisting of funds collected by the Maryland Insurance Commissioner (hereinafter referred to as the “Commissioner”) through an annual assessment from each medical professional liability insurer and homeowners insurer issuing policies in the State. The purpose of the Fund is to pay the costs and expenses of the Division in carrying out its duties.³

B. Statutory Duties

The duties of the Division include evaluation of each medical professional liability insurance and homeowners insurance matter pending before the Commissioner to determine whether the interests of insurance consumers are affected.⁴ The Division has explicit statutory authority to conduct investigations and request the Commissioner to initiate an action or proceeding to protect the interests of insurance consumers (hereinafter referred to as “insurance consumers”, “consumers” and/or “consumer”). The Division is required to review any rate increase of 10% or more filed with the Commissioner by a medical professional liability insurer or homeowner’s insurer. If the Division determines that a rate increase is excessive, inadequate, or unfairly discriminatory, its representative shall appear before the Commissioner at any hearing

¹ Md. Code Ann., State Government § 6-308.

² The Act was introduced as an emergency measure as House Bill 2 in a 2004 Special Session of the Maryland General Assembly convened on December 28, 2004. The Bill passed and was enacted in 2005 over the Governor’s veto with an effective date of January 11, 2005. The Act was amended in 2005, effective March 31, 2005, by another emergency measure, House Bill 836.

³ Md. Code Ann., State Government §§ 6-304 and 6-305. Because the duties of the Division only involve two types of insurance, homeowners insurance and medical professional liability insurance, the insurers who are assessed for the Fund are limited to the insurers issuing those types of policies in Maryland.

⁴ Md. Code Ann., State Government § 6-306(a). The Act defines insurance consumers as those insured under homeowners policies or medical professional liability insurance policies.

on the rate filing. At any time, the Division may conduct investigations and request the Commissioner to initiate an action or proceeding to protect the interests of insurance consumers.⁵

In any appearance before the Commissioner or the courts, the Division has the rights of counsel for a party to the proceeding, including summoning witnesses, cross-examination of witnesses, presenting evidence and argument.⁶ The Division may also take depositions in proceedings before the Commissioner and in proceedings in court, in accordance with applicable law and procedure.

The Division “shall have full access to the Commissioner’s records,” including rate filings, and shall have the benefit of all other information of the Commissioner.⁷ The Division is entitled to the assistance of the Commissioner’s staff provided that the assistance is consistent with the staff’s responsibilities and with the respective interests of the staff and the Division.⁸

The Division may recommend legislation on matters that promote the interests of insurance consumers in Maryland.⁹

In 2011, Counsel was granted access to vendor explanations of catastrophe models but also required to maintain the confidentiality of them.¹⁰

II. DIVISION STAFF AND BUDGET

PICD personnel consists of the People’s Insurance Counsel, an assistant attorney general, an analyst/investigator, whose primary responsibilities include review of homeowners and medical liability insurance filings, and a management associate who primarily provides office support including consumer contact.

Three actuarial firms provided consulting services to the Division by reviewing rates and other documents that are filed by insurers issuing policies in Maryland. The following consultants were selected for their expertise in property and casualty rate filings: Kufera Consulting, Inc., Madison Consulting Group, Inc., and Taylor and Mulder, Inc.

⁵ The Division’s duties are described in Md. Code Ann., State Government § 6-306.

⁶ Md. Code Ann., State Government § 6-307.

⁷ Md. Code Ann., State Government § 6-307(c). The Division’s access to information is only limited by applicable statutes in the Insurance Article and the Maryland Public Information Act, General Provisions Article, §§ 4-101 to 4-601.

⁸ Md. Code Ann., State Government § 6-307 (c)(2).

⁹ Md. Code Ann., State Government § 6-307(d).

¹⁰ 2011, chapter 154 —see Md. Code Ann., Insurance §19-211.

III. DIVISION RESPONSIBILITIES

The Division concentrates its efforts in several areas:¹¹

- Review of consumer complaints filed with the Maryland Insurance Administration (hereinafter “MIA”) relating to homeowners insurance and medical professional liability insurance;
- Response to concerns of consumers who contact the Division;
- Review of rate, rule and form filings in those two lines of insurance;¹²
- Review of proposed legislation and participation in the legislative process, as required, to represent consumer interests;
- Investigation of issues generated by patterns identified in consumer complaints and rate filings;¹³
- Review of “lack of good faith complaints” under Insurance Article Section 27-1001;¹⁴ and
- Outreach to consumers.

A. Review of Consumer Complaints filed with the MIA

After a consumer has initiated a complaint with the MIA regarding the action of an insurance company, the MIA conducts an investigation and issues a determination letter to the complainant and insurer at the completion of its investigation. MIA supplies the letters to the Division on a regular basis, enabling the Division to do timely reviews of all the letters to identify issues that potentially impact a number of consumers and to assess the existence of patterns of insurer conduct contrary to the insurance laws. The complaints primarily relate to the cancellation

¹¹ The Division has interpreted its statutory authority to include the review of any matter before MIA that impacts homeowners and medical professional liability policyholders. This decision derives from the Division’s broad mandate to review “each medical professional liability insurance and homeowners insurance matter pending before the Commissioner.” Md. Code Ann., State Government § 6-306(a). Rate filings are reviewed pursuant to a specific mandate to “review any rate increase of 10 percent or more filed with the Commissioner by a medical professional liability insurer or homeowners insurer.” Md. Code Ann., State Government § 6-306(a).

¹² In this Report, references to “Rate Filings” shall mean all filings made under Insurance Article, Title 11, including new and revised rates, rating rules, policy forms and supplementary rate information.

¹³ Several of these are discussed in greater detail later in the Report.

¹⁴ Md. Code Ann., Ins. Art. § 27-1001, effective October 1, 2007.

or non-renewal of coverage, increase in premiums, modifications of coverage, claim denials or claim settlements.

It has become the practice of the Division to issue its own explanatory letter and printed materials to the majority of individuals who have received MIA determination letters.¹⁵ The Division's letter explains that a staff member is available to discuss a consumer's right to an administrative hearing and explains applicable statutory and regulatory frameworks for hearings. Through calls from consumers who have received the Division's letter, the Division obtains additional information about company practices beyond the information detailed in the determination letters themselves. The Division's review of the determination letters and its conversations with affected consumers has provided an opportunity to understand the broader impact of insurers' procedures and policies in making underwriting and claims decisions.

The Division routinely advises consumers that it does not provide legal representation for individuals in their disputes with insurers. The Division does provide information to assist consumers in filing their requests for hearings and aids consumers in understanding the process for using Maryland's Public Information Act to obtain the relevant MIA files regarding their complaints.

In addition to the initial explanatory letter, the Division, upon being notified by the MIA that a complainant has sought and been granted a hearing, sends a letter offering to assist the complainant in understanding the hearing process. The Division has developed a handout about the process so that complainants may better understand how the hearings are conducted. Additionally, the Division has sample subpoena and discovery forms for complainants' use in summoning witnesses and obtaining additional documents for their hearings. The Division attorneys also review Final Orders issued by the Commissioner after hearings held at the MIA or delegated to hearing officers at the Office of Administrative Hearings.

In FY23, the Division reviewed 661 homeowners insurance complaint determination letters and zero (0) medical professional liability insurance-related complaint determination letters issued by MIA. Of the 661 determination letters, 168 were from prior fiscal years but not previously forwarded by MIA to the Division¹⁶. In FY23, most of those complaints involved either consumer dissatisfaction with the handling or payment of a claim, with the action taken by an insurer to cancel insurance coverage or decline to renew coverage, or premium increases. At the determination letter stage, the MIA found violations of Maryland insurance laws in one (1) of the

¹⁵ Division letters are not sent to all individuals. Among those who do not receive letters are those whose complaints have been resolved in their favor, who have withdrawn their complaints, or who have replaced their coverage resulting in an MIA letter stating that the issue is rendered moot, and no remedy is available.

¹⁶ The Division inquired as to why there appeared to be a difference in the number of MIA determination letters received by PICD and the number indicated in MIA's annual reports. MIA determined that the discrepancy was twofold, (1) the way the MIA and PICD reviewed/reported the processing of the complaints and (2) an inadvertent failure by MIA to provide PICD with some of the MIA determination letters. The letters were primarily complaint matters that had been determined to be resolved or moot by MIA. Further, PICD requested copies of final orders that had not been received. MIA and PICD agreed upon a process that should alleviate the issues identified and result in the timely provision of the MIA determination letters and final orders in the future.

complaints¹⁷. The Division reviewed 53 final orders from administrative hearings on these complaints; the MIA found a violation of Maryland insurance laws in one (1) of these matters¹⁸. The Division learned of two matters where the homeowners filed a Petition for Judicial Review in a Circuit Court for Maryland; both were dismissed.¹⁹ Of the follow-up letters issued by the Division to consumers, 70 contacted the Division to discuss their complaints further.

A review of complaints by consumers complaining about an increase in their premiums determined that two factors were the increased cost of replacement and repair of materials and the implementation of inflationary guard provisions of the homeowners' policy. Additionally, some consumers' claims were denied due to an exclusionary provision concerning wear, tear, and deterioration of the property. Some consumers were either cancelled or non-renewed due to hazards or the condition of their property.

Effective July 1, 2022, MIA has statutory authority to conduct virtual hearings²⁰. PICD has monitored consumer concerns regarding any difficulties with virtual hearings. One consumer noted an interference from background noise. Another consumer contacted PICD about a lack of access to appropriate computer equipment. This matter was resolved. PICD observed during collaborative outreach events that some libraries have computer stations that allow privacy for their patrons and libraries provide some ability to check out computers for use off sight. PICD has had some consumers indicate a lack of ownership or ready access to computers. PICD supports Maryland programs that assist all consumers to participate in virtual hearings.

B. Response to Consumers who Initiate their Complaints with the Division

Periodically, consumers contact the Division to discuss their concerns with their insurance companies that are not related to a complaint filed with MIA. These calls typically concern homeowners' insurance issues similar to those addressed to the MIA in complaints.²¹ Division attorneys advise callers about options that are available for resolution of their complaints, including policy appraisal procedures and use of public adjusters for claims resolution. The

¹⁷ The MIA issued a determination letter in May 2021, but the Division did not receive the letter until October 2022.

¹⁸ The matter originated from an incident in May 2018 and a homeowner's complaint to MIA in March 2019. The final order from the administrative hearing was issued by MIA in June 2021, but not received by the Division until January 2023. MIA in its final order concluded that the Licensee violated the Maryland Insurance Article in its failure to timely pay Complainant damages for his burglary claim and in its cancellation of Complainant's homeowner's insurance policy.

¹⁹ MIA has not routinely advised the Division if there are any pending Petitions for Judicial Review matters where MIA is the agency. MIA and PICD in FY23 agreed upon a process for MIA to provide notification upon MIA's receipt or notification of the filing of a Petition. PICD was not notified or timely notified of either Petitions cited above.

²⁰ See, Md. Code Ann., Ins. § 2-213(b)(2) (2022)

²¹ Consumers calling the Office of the Attorney General are often directed to the Division regarding insurance complaints other than homeowners or medical malpractice. The Division attorneys respond to those calls also, redirecting the consumers to other resources that may be of assistance to them.

attorneys also often refer consumers to the MIA website for further information about resolving claims through the Rapid Response Program, how to file a formal complaint and/or how to file a lack of good faith complaint. Because Division attorneys do not represent individual consumers, the Division has referred callers to the Maryland Courts Self-Help Centers for limited no-cost legal advice in civil matters. PICD also provides consumers with contact information for the Maryland State Bar Association's and county bar associations' Attorney Referral Programs. When appropriate, the Division has exercised its statutory authority to request review by the MIA. The Division responded to 92 consumer calls during the fiscal year.

C. Division Review of Rate Filings

Insurance companies issuing homeowners policies in Maryland are required by Title 11 of the Insurance Article to file with the Commissioner all rates, supplementary rate information, policy forms, endorsements and modifications of any of these documents.²² Homeowners insurance is subject to the competitive ratings laws. Insurers are allowed to use the filed rates without obtaining the prior approval of the Commissioner.²³ All policy forms must be approved by the Commissioner before use in Maryland.

Insurance companies issuing medical professional liability insurance policies in Maryland are required by statute to obtain the approval of the Commissioner before using rates, rules, policy forms and any modifications of such documents.²⁴ These filings may not take effect until 30 working days after filing with the Commissioner.²⁵

The Division reviewed a total of 481 insurance filings for FY23. The Division expressed concern about several filings either directly to the company or to MIA. If the company did not address the Division's concerns, the Division contacted MIA. Accordingly, the Division did not initiate any hearings in FY23 on these filings.

Homeowners Insurance

The Division reviewed 294 new homeowners filings filed with the MIA during the fiscal year. These filings included rate increases and decreases, new rating rules, rule changes, new policy forms, and revisions to policy forms. The Division selects for further review filings in which the insurers are requesting increases or decreases of over ten (10) percent on all or some policyholders, or when significant increases or decreases have been requested in successive years. Typically, the effect of a rate, rule or form change on consumers is not easily ascertained without in-depth analysis of the filing. The three actuarial consulting firms previously mentioned, each under contract with the Division, are referred significant filings that require actuarial review.

²² Md. Code Ann., Ins. Art. § 11-206.

²³ Md. Code Ann., Ins. Art. § 11-307.

²⁴ Md. Code Ann., Ins. Art. § 11-206(a).

²⁵ Md. Code Ann. Ins. Art. § 11-206(g).

As found in prior years, the Division’s consultants determined that multiple filings did not include adequate supporting actuarial data; therefore, the Division’s consultants generated questions on the filed documents and made requests for additional supporting information. The Division, through its staff or consulting actuaries, advised the MIA of inquiries forwarded to the insurers. With few exceptions, the Division consultants received satisfactory responses from the insurers’ actuaries. When necessary, the insurance company after responding to PICD’s actuary consultants’ inquiries, filed additional or corrected information with MIA.

Significant Homeowners Filing Issues

Predictive Modeling

A large number of insurers use non-catastrophe predictive models (known as generalized linear models) in setting their rates. The data used in these models is extensive and difficult to evaluate. In light of insurers’ increased use of these models, staff members engage in continuing education to better understand the issues presented by modelling.

During Fiscal Year 2018, the MIA Associate Commissioner for Property and Casualty notified the Division that it was implementing procedures to disclose proprietary rate-related information (“PRRI”), pursuant to Md. Code Ann., Ins. Art. §11-307(c)(3)(iii), although it was not obligated to do so. Generally, MIA has disclosed PRRI when the Division sees reference to it in the public section of a filing and requests it. The Division has no knowledge of which filings have confidential information unless the public sections available to the Division make reference to it.

Rating Factors

A significant number of companies use ‘age of insured’ and ‘marital status’ as factors in calculating their rates.²⁶ Division actuaries have been analyzing the use of the factors in the filings of multiple companies. PICD actuaries have noted that the generalized linear models currently employed by companies do generate correlations between age of insured and insurance losses. The correlations, however, are not consistent across the industry as one might expect.²⁷ Some companies’ models reveal higher losses for individuals over forty (40) and therefore have rating factors increase with age of insured. Others decrease the factors for individuals of retirement age. PICD continues to survey companies about the actuarial bases for their use of these factors, anticipating that more industry data will assist PICD in the evaluation of the validity of these factors.

²⁶ The marital status factor first came to the Division’s attention in Fiscal Year 2017 when a consumer complaint was made by a widow who realized her homeowners premium increased when her husband died. Maryland Insurance Article 27–501(e–2)(7) now prohibits an insurer from increasing the homeowner’s insurance premium on an insured who becomes a surviving spouse based solely on the insured’s change in marital status (enacted 2019).

²⁷ For example, when it comes to fire risk, there is agreement in the industry that the older a home, a roof, or the greater distance to a fire hydrant, the higher the risk.

The Division has also noticed some other rating factors being used by companies that affect Maryland insurance consumers. The Division has noted some companies are excluding coverage for virtual currency²⁸ and coverage related to cannabis. An insurer has reduced the use of a 9-digit zip code to a 5-digit zip code in a recent rate filing. PICD has noted that some companies are now providing flood endorsements as an option to homeowners' policies in Maryland. After an inquiry from a consumer, PICD began reviewing the exclusion of specific dog breeds from homeowners' policy coverage.

Medical Professional Liability Insurance

There are significantly fewer medical professional liability insurance filings received each year by MIA as compared to homeowners insurance filings. The Division reviewed 69 new filings made by medical professional liability insurers during the fiscal year. The Division's consultants reviewed the medical professional liability filings in the same manner as the homeowners filings; requests for additional documentation were sent to the insurers with copies to MIA actuaries. PICD noted that filing provisions included matters such as a communicable disease exclusions, providing a discount for part-time coverage for professionals who temporarily limited their practice due to the impact of the pandemic, the filing indicated that actuarial estimates for rates were subject to uncertainty from various sources including but not limited to the Covid-19 pandemic or actuarial support for rates were adjusted to account for the impact of the pandemic.

D. 2023 Legislative Session

During the 2023 Legislative Session, the Division conducted an initial review of 20 bills identified on the Maryland General Assembly website as "Insurance – Other than Health" to determine if any bill had a potential impact on homeowners or medical professional liability insurance. Two of the bills identified are detailed here.

HB 98 / SB 403 – Condominiums – Mandatory Insurance Coverage – Alterations. This bill related to the insurance policy that must be held by a condominium association for detached units. The initial bill was amended, and the amended version of the bill passed and became law. The condominium association for detached units is required to have coverage on the common elements and defines common elements for detached units. Further, it requires owners of residential, detached unit to carry homeowners' insurance coverage on the entirety of the unit²⁹.

HB 314 / SB 816 – Motor Vehicle Insurance – Rate Filings – Trade Secrets and Factors Used to Establish Rates. This bill would repeal certain confidentiality protections for proprietary rate-related information and would prohibit an insurer that uses territory as a factor in establishing

²⁸ On July 11, 2022, MIA issued a consumer advisory, See, <https://insurance.maryland.gov/Consumer/Documents/publications/ConsumerAdvisory-HomeownersandCrypto.pdf>

²⁹ In FY24, MIA in a bulletin stated that homeowners' associations may voluntarily provide coverage for the detached units and MIA has been informed that there are councils that intend to provide coverage to the residential, detached units through a policy issued to the council. See, MIA Bulletin 23-15 (issued September 28, 2023).

automobile insurance rates from using more than five territories. PICD monitored the bill because territories are often used as a factor in determining homeowners insurance rates. The bill does not appear to have received a vote in either the House or Senate committee.

E. Division Review of Section 27-1001 Complaints

In 2007, the General Assembly amended the Insurance Article to provide policyholders a procedure for review when they believe their insurer has not acted in good faith. The provisions, codified in Section 27-1001 of the Insurance Article,³⁰ and accompanying regulations,³¹ require a policyholder to file a complaint with the MIA, with supporting documentation, stating the facts underlying the allegation that the insurer failed to act in good faith. This procedure is only available to a policyholder. Injured third parties--*e.g.*, a neighbor with damage to their home—may not file under Section 27-1001.³² MIA issued decisions in 51 consumer-generated complaints of lack of good faith on a homeowners insurance matter under Section 27-1001; the consumer prevailed in none (0) of those decisions in FY22.³³

IV. INVESTIGATIONS

During FY23, the Division investigated 140 matters. PICD investigations may include matters raised in filings, complaints, or consumer calls. Investigations are commenced when the Division identifies an issue in an insurance complaint that potentially affects a broad number of consumers or requires a more in-depth review of a consumer complaint. These investigations are usually prompted by contact from the consumer who filed the complaint, but sometimes arise from consumers who contact the Division before a complaint is filed with the MIA. Additionally, a few investigations are commenced from a pattern or practice noted by the Division following review of numerous determination letters from particular insurance companies.

Investigations are more intensive than many of the Division's other consumer-assistance practices, such as responding to complainants' inquiries about MIA complaint and hearing practices. For example, investigations often require Division personnel to obtain MIA investigative

³⁰ Md. Code Ann., Ins. Art. § 27-1001.

³¹ COMAR 31.08.11.

³² As an alternative to filing under Section 27-1001, consumers may file a regular complaint with MIA alleging that an insurer has failed to act in good faith. The list of unfair claim settlement practices in Section 27-303 was amended in 2007 to add "fail to act in good faith." Like Section 27-1001, an insurer can be found in violation of failing to act in good faith when the consumer who makes the allegation is the policyholder of that insurer (first party claims). An insurer cannot be held in violation of the law for failing to act in good faith if the person who suffered a loss and filed a claim is not the policyholder of the insurer (a third-party claim).

³³ MIA did not routinely advise the Division if there are any pending Section 27-1001 matters before the Commissioner. The Division periodically checked the MIA website for these matters concerning homeowners or medical professional liability insurance. In FY23, the Division met with MIA to discuss this matter and developed a process for the Division to receive notification and copies of the filings and final orders.

files, request additional documents from insurers, conduct interviews and do additional background and legal research in order to fully assess an MIA decision's impact on consumers.

In FY23, PICD investigated 44 allegations raised in determination letters and four (4) prompted by cold calls by consumers directly to the Division. As part of a more in-depth review of a consumer complaint, PICD routinely makes public information act requests (PIA) to MIA to obtain the investigative file of consumer complaint. PIA files often contain a substantial number of documents concerning the issues raised in the complaint. The files routinely contain the consumer's complaints, the company's response (may exclude confidential documents), and MIA's determination and related documents. PICD reviews the files to better understand the issues raised by the consumer and the insurance companies' actions. In addition, as indicated previously, the Division has several continuing projects regarding homeowners insurance practices affecting consumers. Age of insured and marital status rating factors, coverage or exclusions from coverage concerning communicable disease, virtual currency, cannabis and dog breeds, and availability of flood endorsements are some of the continuing projects.

Finally, the Division considers in-depth reviews of rate filings by PICD consulting actuaries to be investigations. In FY23, actuarial consultants reviewed 47 new filings, plus an additional 20 filing investigations from FY22. PICD reviews all filings and when necessary, PICD may contact the insurance company or contact MIA directly, rather than refer the matter to a consulting actuary. PICD investigated an additional 25 rate filings internally in FY23.

The Division conducted extensive investigations into cases involving resolution of claims, non-renewals of policies and policyholder access to policy documents. The Division also monitored several matters in which a homeowner requested an administrative hearing.

The Division conducted extensive investigation into cases involving resolution of claims, non-renewals of policies and cancellation of policies. The Division also monitored several matters in which a homeowner requested an administrative hearing and responded to inquiries by the homeowners concerning the administrative hearing.

As noted previously in this report, PICD actuaries routinely contact companies regarding the insufficiency of the actuarial bases for their filings or apparent errors in calculations. In the vast majority of cases, the companies supply PICD with additional and/or corrected information sufficient for PICD actuaries to do a complete analysis of the filing. Of note, in one filing the insurer had initially proposed an overall base rate increase for its homeowners, condominium, and renters' policies. Subsequently, the insurer revised the filing to request a base rate increase only for HO3 policies (homeowners). The initial proposed 3.0% increase for HO4 (condominium), and 12.0% increase for HO6 (renters) policies was not implemented.

The Division has several long-term investigations as noted above. In particular, the Division continues to monitor filings from insurers who employ 'age of insured' and 'marital status' as rating factors in the determination of premium rates. If needed, one of the Division's consulting actuaries is available to assist the Division in assessing whether these factors generate rates that are unfairly discriminatory in violation of Maryland's insurance laws.

V. CONSUMER ASSISTANCE EFFORTS

The Division has determined that there is a benefit to Maryland consumers for the Division to participate in consumer events as well as developing educational materials posted on its webpage. The Division refined and supplemented its webpages on the OAG website in FY23. PICD has available brochures in English and Spanish. The Covid-19 pandemic greatly reduced the number of available in-person events for consumer outreach. The Division engaged in outreach events in partnership with local libraries. PICD interacted with numerous consumers providing informative brochures, referrals to other state agencies, and when needed provided follow-up information about their concerns. PICD noted that the library systems are a welcoming community center for the counties' diverse residents and library staff were professional and accommodating. PICD provided additional brochures to the libraries for future patrons who have insurance related concerns. PICD is committed to providing outreach throughout the state. The Division is committed to consumer outreach including in person events that will provide information to consumers and provide consumers with an opportunity to provide feedback to the Division.

The Division has continued dialogue with MIA representatives in order to better represent consumer interests. This has resulted in PICD's increased referral of consumers to the Rapid Response Program for claims resolution and to MIA's programming including educational series such as Lunch with MIA. The Division worked collaboratively with a number of other governmental agencies to assist consumers.

VI. FY 2024 ACTIVITIES

The Division closes FY23 with several goals for FY24:

- Continue to monitor insurer filings to ensure thorough review and meaningful feedback to the MIA to protect consumer interests.
- Review and advocate for consumer interests in proposed bills filed in the legislative session, and advocate for the legislation proposed by the Division.
- Continue to examine issues of policy availability for policyholders, including potential barriers.
- Monitor trends and issues facing homeowners insurance and medical professional liability insurance policyholders.
- Engage in consumer outreach to provide educational materials and to obtain feedback from consumers in multiple forums across the state of Maryland.
- Produce additional educational materials and add specific information on topics relating to homeowners insurance to the Division's website.

- Continue to examine factors used by insurers in homeowners' insurance ratemaking and coverage.
- Monitor the impact climate change has on the availability, scope, and coverage of homeowner's insurance for Maryland consumers and provide information to Maryland homeowners insurance consumers.

VII. CONCLUSION

The Division will continue its efforts to advocate on behalf of consumers regarding homeowners insurance and medical professional liability insurance matters pending before the MIA. The Division will continue its review of all insurance filings in those two areas and will evaluate any impact on consumers. As in past years, the Division will represent consumer interests before the House and Senate committees, reviewing insurance bills and supporting legislation that will protect consumer interests. The Division will continue to engage in state-wide consumer outreach.