

**Government of the District of Columbia**  
Department of Insurance, Securities and Banking



William P. White  
Commissioner



**ENFORCEMENT AND CONSUMER PROTECTION BUREAU**  
**ENFORCEMENT AND COMPLIANCE DIVISION**

**TO:** Licensed Insurers in the District of Columbia

**FROM:** Stephen M. Perry, Associate Commissioner  
Enforcement and Consumer Protection Bureau

**SUBJECT:** Notice of Anti-fraud Compliance Updates

*Effective March 27, 2003, Amendments to the D.C. Insurance Anti-fraud Law,  
D.C. Official Code § 22-3225.01 et seq.*

**A. RE: Submission of a CY Annual Anti-fraud Statistical Activity Reporting Form  
NEW – Amendment, D.C. Official Code § 22-3225.12:**

**NOTE: NOT APPLICABLE, IF THE DISTRICT GRANTED AN EXEMPTION**

- (1) **Current Filing Requirements:** The new amendment requires insurers to report annually to DISB's Enforcement and Consumer Protection Bureau (ECPB) a summary of action taken under their anti-fraud plans to prevent and combat fraud for the *District of Columbia Only*.
- (2) **D.C. Revised Form:** The annual report should provide detailed information as prescribed on the reporting form. The District of Columbia has revised its "DC CY Annual Anti-fraud Statistical Reporting Form," along with Instructions.
- (3) **Captured Data - Changed from the District's fiscal year, October 1 to September 30:** Annual reports under this section should cover anti-fraud activities for each calendar year. Captured data should be covering the period from January 1 through December 31 for the *District of Columbia Only*.
- (4) **Filing Deadline - Changed from December 31:** The reports are to be filed **by April 1, 2013, since March 31 falls on a Sunday this year**, and cover the previous calendar year's anti-fraud activities for the *District of Columbia Only*.
- (5) **Submit ONLY One Composite Report, Per NAIC Group:** As the principal company, send one report, which is a compilation of all your subsidiary companies within your same National Association of Insurance Commissioners (NAIC) group, by line of businesses as shown on the reporting form, if applicable. The reporting

form should reflect only the total compilation of statistical numbers under the applicable header column for all Life, Health, P/C, WC, etc. for all your underwriting companies. **That is, if the underwriting company number one has two cases, and underwriting company number two has four cases, please enter the combined number of six under the respective header column.**

**B. RE: Submission of an Anti-fraud Plan, D.C. Official Code § 22-3225.09(a)**

**NOTE: NOT APPLICABLE, IF GRANTED AN EXEMPTION**

This provision requires insurers to report an anti-fraud plan to ECPB only once, not annually, initially. For new insurers, please file, within six (6) months of the effective date of the issuance of the DC Certificate of Authority. However, if there are any significant changes made to your anti-fraud plan, please submit an updated anti-fraud plan to our office.

**C. RE: D.C. Point of Contact Person Form:**

If there are changes made to your compliance or Special Investigation Unit (SIU) point of contact person(s) for the District of Columbia, please complete and submit an updated “D.C. Point of Contact Persons Form” only to our office. The form should contain your company’s compliance reporting representative and your SIU reporting representative responsible for the District of Columbia geographical area, as well as, a local D.C. SIU representative.

**All of the above-mentioned compliance reporting forms (A&C), along with DC CY Annual Anti-fraud Statistical Instructions, may be found on DISB’s website at [disb.dc.gov/RegulatedEntities/Insurance/Insurers/Anti-FraudInformationand Reporting](http://disb.dc.gov/RegulatedEntities/Insurance/Insurers/Anti-FraudInformationandReporting).**

**D. RE: REVISION - Reporting Forms of Suspected Insurance Fraud, D.C. Official Code § 22-3225.08(a)**

This provision requires insurers to report action that constitutes the commission of insurance fraud to the ECPB. Please begin using the newly revised “NAIC Uniform Suspected Insurance Fraud Reporting Form,” when reporting suspicious claims, or as part of your submission package for individual investigation cases. Please submit your referral form directly to [EIB.DISB@dc.gov](mailto:EIB.DISB@dc.gov) or contact on (202) 442- 7109.

This reporting form may be found on DISB’s website by following this link, <http://disb.dc.gov/node/321532>.

**Please address all compliance inquiries or correspondence to the following:**

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