MARTIN O'MALLEY Governor

ANTHONY G. BROWN Lt. Governor



RALPH S. TYLER Commissioner

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## **BULLETIN 08-23**

Date: October 3, 2008

To: All Authorized Insurers

Re: Insurance Fraud – Required Disclosure Statements

Effective October 1, 2008, all applications for insurance and all claims forms (defined as any document supplied by an insurer to a claimant that a claimant is required to complete and submit in support of a claim for benefits), regardless of the form of transmission, shall contain the following statement or a substantially similar statement:

"Any person who knowingly and willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly and willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison."

The lack of the statement required above does not constitute a defense in any legal proceeding.

This requirement does not apply to reinsurance applications or claim forms, the uniform claims form for reimbursement of hospital services, or the uniform claims form for reimbursement of health care practitioners services adopted by the Commissioner under §15-1003 of the Insurance Article.

All insurers subject to the provisions of §27-805 of the Insurance Article shall comply with this requirement on or before April 1, 2009.

Questions about this bulletin may be directed to the Insurance Fraud Division at 410-468-3904.

Signature on file with original

Carolyn H. Henneman Associate Commissioner Insurance Fraud Division Maryland Insurance Administration