

Commonwealth of Puerto Rico
OFFICE OF THE COMMISSIONER OF INSURANCE
Guaynabo, Puerto Rico

RULE NO. 47-A

STANDARDS TO REGULATE THE TERM FOR THE RESOLUTION OF THE FIRST
REQUEST BY AN INSURED FOR RECONSIDERATION OF A DETERMINATION ON
A CLAIM

Number: 8386

Date: August 2, 2013

Approved: Hon. David E. Bernier-Rivera
Secretary of State

By: Francisco J. Rodriguez-Bernier
Assistant Secretary of State for Services

Commonwealth of Puerto Rico
OFFICE OF THE COMMISSIONER OF INSURANCE
Guaynabo, Puerto Rico

RULE NO. 47-A

**STANDARDS TO REGULATE THE TERM FOR THE RESOLUTION OF THE FIRST
REQUEST BY AN INSURED FOR RECONSIDERATION OF A DETERMINATION
ON A CLAIM**

TABLE OF CONTENTS

	PAGE
SECTION 1: LEGAL BASIS	1
SECTION 2: SCOPE	1
SECTION 3: PURPOSE	1
SECTION 4: DEFINITIONS	2
SECTION 5: TERM FOR THE RESOLUTION OF THE FIRST REQUEST FOR RECONSIDERATION	2
SECTION 6: INTERPRETATION	3
SECTION 7: SEVERABILITY	3
SECTION 8: EFFECTIVE DATE	3

Commonwealth of Puerto Rico
OFFICE OF THE COMMISSIONER OF INSURANCE
Guaynabo, Puerto Rico

RULE NO. 47-A

**STANDARDS TO REGULATE THE TERM FOR THE RESOLUTION OF THE FIRST
REQUEST BY AN INSURED FOR RECONSIDERATION OF
A DETERMINATION ON A CLAIM**

SECTION 1: LEGAL BASIS

The Office of the Commissioner of Insurance hereby adopts Rule 47A under the powers vested in the Commissioner of Insurance in Section 2.030 of Public Law No. 77, enacted on June 19, 1957, as amended, known as the Puerto Rico Insurance Code, 26 L.P.R.A. sec. 235, and Public Law No. 170, enacted on August 12, 1988, as amended, known as the Uniform Administrative Procedures Act of the Commonwealth of Puerto Rico.

SECTION 2: SCOPE

The provisions of this Rule will not be applicable to reconsiderations of determinations by an insurer or health services organization based on coverage of health insurance, as defined in the Puerto Rico Health Insurance Code, Public Law No. 194-2011, as amended.

SECTION 3: PURPOSE

This Rule is adopted for the purpose of establishing the obligation of all insurers that are authorized to write insurance business in Puerto Rico, to investigate, adjust and resolve any first request for reconsideration of an original determination on a claim, in the most reasonably short period of time within thirty (30) days to be counted from the date the reconsideration request was submitted. Likewise, this Rule defines what will constitute a request for reconsideration for the purposes of this Rule.

SECTION 4: DEFINITIONS

- (1) Commissioner: means the Office of the Commissioner of Insurance del Commonwealth of Puerto Rico.
- (2) Request for Reconsideration: means a request submitted by an insured or third party claimant to an insurer or the insurer's representative, seeking a reevaluation of a determination on a previously filed claim. Said first request for reconsideration shall comply with the following requirements: it must be in writing; it must be submitted by an insured or claimant to the insurer or the insurer's representative; the request must state the relevant facts and issues of the request for reconsideration; and the party must allege the right to receive payment that differs from the payment being offered or the claim for the compensable damage is being resubmitted.

SECTION 5: TERM FOR THE RESOLUTION OF THE FIRST REQUEST FOR RECONSIDERATION

- (1) The investigation, adjustment, and resolution of a request for reconsideration will be carried out in the reasonably shortest period of time within thirty (30) days to be counted from date on which the request was submitted to the insurer or the insurer's representative, provided that the request for reconsideration complies with the requirements provided by the Commissioner.
- (2) When an insurer cannot resolve a first request for reconsideration within the term established in the above paragraph (1), the insurer must maintain in its files the documents that evidence just cause for exceeding such term.
- (3) The Commissioner may at any time order the immediate resolution of a first request for reconsideration, if the commissioner deems that the resolution is being unduly or unjustifiably delayed.
- (4) Nothing provided in this Rule will prevent a claimant from submitting subsequent requests for reconsideration to the insurer regarding determinations

made by the insurer related to the same claim. However, an insurer will not have the obligation to resolve such requests for reconsideration within thirty (30) days, which is the term applicable to all first requests for reconsideration.

(5) No provision of this Rule may be interpreted as a limitation of the insured's or claimant's right to appear before any administrative or judicial forum.

SECTION 6: INTERPRETATION

The provisions of this Rule will be interpreted liberally to ensure timely, fair, cost-efficient, and equitable attention to all first requests for reconsideration of an insurer's determination regarding the claim that was originally filed.

SECTION 7: SEVERABILITY

If any part of this Rule is found to be unconstitutional or illegal by a court of competent jurisdiction, the validity and constitutionality of the remaining provisions will not be affected.

SECTION 8: EFFECTIVE DATE

Las provisions of this Rule will enter into effect thirty (30) days after filing at the Department of State of Puerto Rico, under the provisions of Public Law No. 170, *supra*.

SIGNED

ANGELA WEYNE-ROIG
COMMISSIONER OF INSURANCE

Date of approval: July 29, 2013.

Date of Filing
At the Department of State:

Date of Filing
At the Legislative Library: