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DEPARTMENT OF INSURANCE
Frankfort, Kentucky

BULLETIN 2026-05

INSURANCE LEGISLATION ADOPTED BY THE 2026 KENTUCKY GENERAL ASSEMBLY (REGULAR SESSION)

THIS BULLETIN IS FOR INFORMATION PURPOSES ONLY. IT DOES NOT AMEND OR INTERPRET PROVISIONS OF THE KENTUCKY REVISED STATUTES OR THE KENTUCKY ADMINISTRATIVE REGULATIONS. THE COMPLETE AND ACCURATE TEXT OF THE LAW CAN BE SECURED WHEN THE 2026 ACTS OF THE KENTUCKY GENERAL ASSEMBLY ARE PUBLISHED IN THE SUMMER OF 2026. UNLESS OTHERWISE NOTED, THE EFFECTIVE DATE OF LEGISLATION IS JULY 15, 2026. THE BULLETIN IS NOT A COMPREHENSIVE REVIEW OF EACH ACT, BUT RATHER, SUMMARIZES THE MAIN PROVISIONS OF EACH ACT THAT RELATE TO THE DEPARTMENT OF INSURANCE'S JURISDICTION.

(Bills as enacted are available on the LRC website available at: (26RS Legislative Record)

House Bill 3- An Act Relating to Reimbursements for Pharmacist Services (Acts Ch. 99).

KRS 304.12-237 requires a health insurance plan to reimburse a pharmacist for a service that is within the pharmacist's scope of practice at a rate no less than the rate the plan would reimburse a physician, advanced practice registered nurse, or a physician assistant. This Act requires the Kentucky Medicaid program to comply with KRS 304.12-237. This requirement applies to traditional Medicaid services, Medicaid services covered by a Medicaid managed care organization, and the Kentucky Children's Health Insurance Plan.

This Act is effective July 15, 2026

Contact: *Health and Life and Managed Care Division*
(502) 564-6088

House Bill 58- An Act Relating to Privacy Protections (Acts Ch. 71).

This Act creates new provisions under KRS Chapter 189. These new provisions create guidelines for the use of automated license plate readers (ALPR). Generally, the Act makes it unlawful for an individual, entity, partnership, corporation, association, or agencies of the Commonwealth of Kentucky to use an ALPR. Nevertheless, the Act creates certain exceptions to this general rule.

For example, an ALPR may be used by a public agency for the purposes of law enforcement. Data captured by an ALPR shall not be shared, sold, or accessed for any purpose, except under certain circumstances. Instances of such circumstances include sharing the data with the following: law enforcement for purposes of a criminal investigation; the National Insurance Crime Bureau for the investigation of insurance fraud; and an insurance carrier or its agents solely for the purpose of investigating insurance fraud, assisting in vehicle recovery, and preventing insurance fraud.

Please note, notification of potential use of ALPR data is not required for vehicle owners who have entered into an insurance contract or submitted an insurance application prior to January 1, 2027. However, individuals applying for insurance on or after January 1, 2027 must be notified of ALPR's potential use.

This Act is effective on July 15, 2026.

Contact: *Insurance Fraud Investigation Division*
(502) 564-1461

House Bill 144- An Act Relating to Motor Vehicle Titles (Acts Ch. 100).

This Act amends provisions of KRS Chapter 186A regarding a motor vehicle or trailer that has been destroyed beyond repair. KRS 186A.295 requires the owner of such a motor vehicle or trailer to surrender the certificate of title to the county clerk.

Pursuant to the Act, when determining if the vehicle or trailer is destroyed beyond repair, the calculation of the cost of repair shall only include labor and parts for actual damage to the suspension, motor, transmission, frame or unibody, and designated structural components. Specifically excluded from this calculation is cosmetic damage. The Act also makes it clear that this calculation does not exempt an insurer from having to pay the cost of parts and labor for cosmetic repairs to a motor vehicle or trailer that affect the vehicle's appearance.

This Act is effective on July 15, 2026.

Contact: *Consumer Protection Division*
(502) 564-6034

House Bill 164- An Act Relating to Coverage for Hearing Aids and Related Services (Acts Ch. 26).

This Act amends KRS 304.17A-132 related to the requirements for hearing aid coverage. KRS 304.17A-132 mandates that health benefit plans provide coverage for the full cost of one hearing aid per ear up to a maximum amount. HB 164 raises this maximum amount of coverage from $1,400.00 to $2,500.00.

The Act also enacts a network adequacy requirement for health benefit plans. If the health benefit plan utilizes a network to provide hearing aids and related services, then the plan must ensure that the network is reasonably adequate and accessible. This reasonably adequate and accessible network shall, at a minimum, offer an adequate number of accessible audiologists.

This Act is effective January 1, 2027.

Contact: *Health and Life and Managed Care Division*
(502) 564-6088

House Bill 169- An Act Relating to Coverage for Feeding or Eating Disorders (Acts Ch. 101).

This Act requires health plans to provide coverage for the diagnosis and treatment of feeding and eating disorders. Health plans are defined to include any health benefit plan and any student health insurance offered by a Kentucky-licensed insurer under a written contract with a university or college whose students it proposes to insure.

When providing this coverage, an insurer is prohibited from solely denying or limiting the coverage based on body mass index, ideal body weight, or any other standard requiring an achieved weight. When considering the medical necessity or the appropriate level of care, an insurer may consider the following: eating behaviors; the need for supervised meals and support interventions; laboratory results of heart rate, renal or cardiovascular activity, and blood pressure; the recovery environment; and co-occurring disorders.

Pursuant to the requirements of KRS 304.17A-099, the Department has evaluated HB 169 in comparison with Kentucky's essential health benefit benchmark (EHB-Benchmark) plan to determine if this Act triggers cost defrayal. The Department has completed its evaluation. Pursuant to this analysis, the Department has concluded that HB 169 does trigger cost defrayal.

The coverage mandated by this Act is effective on January 1, 2027. However, because it triggers cost defrayal, it cannot be implemented, pursuant to KRS 304.17A-099(2).

Contact: *Health and Life Insurance and Managed Care Division*
(502) 564-6088

House Bill 176- An Act Relating to Prior Authorization. (Acts Ch. 102).

This Act requires an insurer that issues a health benefit plan to offer a program under which a participating provider may qualify for an exemption from any prior authorization requirements for a particular service. The insurer shall not require a covered person or participating provider to obtain prior authorization for a service if when the health care service is provided the provider meets the program requirements for an exemption.

The above-identified program shall: 1) provide the prior authorization exemption for a period established by the insurer that is based on a previous evaluation period whereby the provider met program terms and conditions; 2) not condition participation in the program upon a provider exceeding a 93% approval rate for prior authorization requests submitted during the evaluation period; 3) require the insurer to annually evaluate whether a provider qualifies for a prior authorization exemption for a particular service; 4) require the insurer to notify each participating provider within thirty (30) days after conducting an annual evaluation of whether or not the provider meets the exemption requirements; and 5) require the insurer to make available to a provider during the contracting process the requirements of the program.

The program may, among other thing: 1) offer a prior authorization exemption for any prescription drug; 2) offer a prior authorization to a provider group that includes all providers practicing within the group; 3) condition a provider's participation in the program on the provider entering into a value-based care agreement; 4) require the provider to have been a participating provider for a certain period of time; 5) require the provider comply with interoperability standards and enter into an electronic health record access agreement; 6) condition a provider's participation in the program based on a utilization requirement for the service; and 7) provide that an insurer may revoke a provider's participation in the program if the provider has engaged in fraud or if the provider's utilization of the service exceeds an established maximum utilization rate.

If a provider meets the program standards the insurer shall send a notice to the provider confirming the provider's eligibility for the program. The insurer shall also provide a list of each health care service for which the provider meets the exemption for prior authorization.

The Act also requires the Department to submit a report to the Interim Joint Committee on Banking and Insurance, no later than September 30 of each year. This report shall include, among other things, the implementation of the Act, the number of insurers offering a prior authorization exemption program, and the number of providers, by provider group, specialty, and county participating in one or more programs.

This Act is effective January 1, 2028.

Contact: *Health and Life and Managed Care Division*
(502) 564-6088

House Bill 184- An Act Relating to Health Savings Account-qualified Insurance Plans (Acts Ch. 27).

This Act creates a new provision of the Kentucky Insurance Code affecting any health savings account-qualified insurance plan. "Health savings account-qualified insurance plan" is defined as, "a high-deductible health plan that covers individuals who may be entitled to receive certain tax benefits under 26 U.S.C. sec. 223, as amended, with respect to contributions made to a health savings account."

The Act states that if the application of a cost-sharing requirement would cause an enrollee's health savings account-qualified insurance plan to no longer qualify as a high-deductible health plan, then the cost-sharing requirement shall not apply until the minimum deductible has been satisfied.

This Act is effective July 15, 2026.

Contact: *Health and Life and Managed Care Division*
(502) 564-6088

House Bill 185- An Act Relating to Employment and Declaring an Emergency (Acts Ch. 72).

This Act creates new sections of KRS Chapter 335B regarding any state government licensing authority. The Act requires a state government licensing authority, that considers a criminal background check as part of its application process, to establish and implement a program to review a potential applicant's criminal background.

If a criminal background check is required to obtain a license from the licensing authority, a potential applicant may submit an application before pursuing any training or specialized education required for the license. The licensing authority shall: 1) request that the individual submit certain information within a reasonable time; 2) afford the individual an opportunity for an in-person, telephone, or video hearing; and 3) evaluate the applicant's testimony and the submitted information to determine if the conviction relates to the license applied for by the applicant.

The information a licensing authority may require of an applicant can include the following: 1) the individual's criminal history, such as the seriousness of the crime, the age when the offense was committed, and the length of time since the offence was committed; 2) any bonding requirements for license sought by the applicant; and 3) any evidence of rehabilitation. The licensing authority shall display on its website its application policy and procedures for individuals with a criminal background. The display shall include the application instructions.

A licensing authority shall formulate its policies and procedures that are necessary to meet the requirements of this Act by January 1, 2027.

This Act was effective on April 10, 2026.

Contact: *Agent Licensing Division*
(502) 564-6004

House Bill 265- An Act Relating to Regulatory Authorizations by the Commissioner of Insurance (Acts Ch. 84).

KRS Chapter 299 sets forth the licensing and regulatory oversight for assessment or cooperative insurers. Previously, there was no designated statutory process to wind down the affairs of an assessment or cooperative insurer should the company choose to cease doing business. This Act amends KRS Chapter 299, creating a statutory process for the winding down of an assessment or cooperative insurer that is ceasing operation.

This Act also amends KRS 304.50-010 to say that on and after July 15, 2027, workers' compensation self-insured groups shall not be authorized by the Department. Any workers' compensation self-insured groups approved by the Department prior to July 15, 2027, may continue to operate in accordance with KRS Chapter 50.

Section 1 of this Act is effective July 15, 2026. Section 2 and 3 of the Act are effective July 15, 2027.

Contact: *Financial Standards and Examinations Division*
(502) 564-6082

House Bill 388- An Act Relating to Prescription Drugs (Acts Ch. 38).

This Act makes one change to KRS 304.17A-165(3)(c) to remove the reference to Schedule III controlled substances containing hydrocodone.

KRS 304.17A-165(3) requires a health benefit plan to provide a program for synchronization of medications when it is agreed among the insured, a provider, and a pharmacist that synchronization of multiple prescriptions for the treatment of a chronic illness is in the best interest of the patient for the management or treatment of a chronic illness, under certain conditions. One of those conditions was that the medication was not a Schedule III controlled substances containing hydrocodone. In amending KRS 304.17A-165(3), this Act allows a program for synchronization of medications when the medication is a Schedule III controlled substances containing hydrocodone, provided the other conditions of KRS 304.17A-165(3) are met.

This Act is effective July 15, 2026.

Contact: *Health and Life and Managed Care Division*
(502) 564-6088

House Bill 527- An Act Relating to Insurance Regulatory Requirements and Declaring an Emergency (Acts Ch. 45).

This Act makes multiple changes to the Kentucky Insurance Code. Included below is a summary of the more significant changes.

Section 5 of the Act amends KRS 304.2-450, permitting the Department to make a one-time grant of $15,000 from the Strengthening Kentucky Homes Program (SKH) to be used to reimburse SKH approved contractors for their Insurance Institute for Business and Home Safety (IBHS) certification. To receive reimbursement, the contractor shall submit, among other things, a request for reimbursement, a receipt from IBHS demonstrating the contractor is a certified roofing contractor, and the cost paid for the certification.

KRS 304.5-080 is amended to include a definition of “inland marine insurance.” This definition adopts the National Association of Insurance Commissioners (NAIC) model definition of “Nationwide Inland Marine” insurance.

The Act repeals and reenacts KRS 304.9-436. Pursuant to the reenacted version of KRS 304.9-436, an authorized insurer shall not do business in Kentucky with a person that is unlicensed in violation of KRS Chapter 304 Subtitle 9.

KRS 304.13-346 requires all insurance companies writing property insurance for single family dwellings in Kentucky to offer an optional rider or endorsement giving the insured the right to receive claims payments for the cost to upgrade the dwelling’s roof to fortified standards of IBHS. This Act amends KRS 304.13-346 clarifying that the required rider or endorsement is only obligated to cover the roof structure of the dwelling.

The Act amends KRS 304.15-365 concerning the standard nonforfeiture law for individual deferred annuities. Pursuant to the amendment, any optional maturity date for an annuity contract shall: 1) not impose a surrender charge that is longer than ten (10) years beyond the agreed upon optional maturity date; and 2) be offered to an annuitant before the annuitant attains seventy (70) years of age.

Finally, the definition of "adverse determination" found in KRS 304.17A-600(1) is amended by the Act. Pursuant to the amendment, the definition of "adverse determination" now has the same meaning as in 29 C.F.R. sec. 2560.503-1.

Section 5 of the Act, which amends KRS 304.2-450, was effective April 7, 2026. All other sections of the Act are effective July 15, 2026.

Contact: Kentucky Department of Insurance
(502) 564-3630

House Bill 568- An Act Relating to Public Protection and Declaring an Emergency. (Acts Ch. 141).

This Act makes several changes to the Kentucky Insurance Code regulating the conduct of public adjusters. One of the most significant changes is that KRS 304.9-430 is amended placing a two-year moratorium on the issuance of new public adjuster licenses. Public Adjusters licensed on the effective date of the Act may renew their license if they continue to meet the licensing requirements and the license shall continue in force until expired, suspended, revoked, or otherwise terminated.

The Act also amends KRS 304.9-433 related to the contract a public adjuster must have approved by the Department. The amendments include: 1) requiring the public adjuster contract to list the physical address, email address, and phone number for the Department; 2) requiring the public adjuster contract to contain a provision that any legal action arising as a result of the contract shall be heard in a Kentucky court; 3) requiring that the insured be given a physical copy of the public adjuster contract; 4) requiring that the insurer be given a physical copy of the public adjuster contract; and 5) increasing the recission period for a public adjuster contract. The insured shall be allowed to rescind a public adjuster contract within five (5) days from the date a physical copy of the contract is provided to the insured. This recission period is raised to ten (10) days if the contract is entered into based on events resulting from a declared emergency.

The Act amends KRS 304.9-4331 to prohibit a public adjuster from being affiliated with a person or business that has a connection to the insurance claim that is the subject of the contract. A public adjuster is prohibited from utilizing a contractor or any other form of business to solicit contracts or obtain signatures on contracts. It also amends the statute to place a 2-year prohibition on public adjusters negotiating with an insurer on behalf of an insured.

The Act amends KRS 304.9-4333 prohibiting a public adjuster from basing his or her fees on insurance settlement proceeds paid to the insurer prior to the execution of the public adjuster contract. KRS 304.9-4333 is further amended to limit the fee a public adjuster can charge. A public adjuster shall only charge an insured up to ten percent (10%) of the insurance proceeds.

This Act was effective on April 13, 2026.

Contact: *Agent Licensing Division*
(502) 564-6004

House Bill 627- An Act Relating to Insurance (Acts Ch. 149).

This Act makes changes to Kentucky's basic and added reparation benefit provisions in KRS Chapter 304 Subtitle 39. The Act amends the definition of "medical expense" found in KRS 304.39-020(5)(a). First, the total available amount for expenses related to funeral, cremation, and burial in the definition is raised from $1,000.00 to $5,000.00. Second, the medical expense paid by a reparation obligor shall not exceed the maximum fee allowed for that expense on the schedule of fees established pursuant to KRS 342.035, the workers' compensation fee schedule.

The Act also amends KRS 304.39-130, raising the limit for basic and added reparation benefits payable for work loss, survivor's economic loss, replacement service loss, and survivor's replacement services loss from $200 to $500 per week.

KRS 304.39-210 is amended, placing certain duties on the person providing a product, service or accommodation that is the subject of a basic or added reparation claim. First, the person shall submit a statement of the charge for the medical expense within one hundred and eighty (180) days of the date the product, service, or accommodation is rendered. Second, a person providing the product, service, or accommodation shall not knowingly collect, attempt to collect, coerce, or attempt to coerce, the payment of any charge for a medical service that exceeds the maximum fee on the schedule of fees established pursuant to KRS 342.035. Finally, a person providing the product, service, or accommodation shall not cause the credit of any basic or added reparation insured to be impaired for the insured's failure to pay the balance of any charge that exceeds the maximum fee on the schedule of fees established pursuant to KRS 342.035.

The Act also makes amendments to the Kentucky Insurance Code related to insurance fraud in KRS Chapter 304 Chapter 47. KRS 304.47-020 is amended, giving the Kentucky Attorney General concurrent jurisdiction, along with County Attorneys and Commonwealth Attorneys, to prosecute insurance fraud complaints. A new section of KRS Chapter 304 Chapter 47 is created requiring the Department to annually publish on its website an insurance fraud report that includes the number of insurance fraud reports made to the Department's Insurance Fraud Investigation Division and the number of insurance fraud cases that were prosecuted, including the outcomes.

This Act is effective on July 15, 2026.

Contact: *Property and Casualty Division*
(502) 564-6046

or

Insurance Fraud Investigation Division
(502) 564-1461

House Bill 676- An Act Relating to Kentucky Statewide Health Data Utility (Acts Ch. 150).

This Act directs the Legislative Research Commission to conduct a study on the development of a statewide Kentucky health data utility. A written report shall be submitted for referral to the Interim Joint Committee on Health Services by December 1, 2026.

The study shall analyze and provide the following: 1) policy options for establishing a statewide health data utility that is the sole network for the sharing and exchange of health information and that aggregates health information received from participants; 2) strategies for the direction and governance of a statewide health data utility by the Legislative Research Commission; and 3) strategies for the development of a statewide health data utility in a timely, efficient, sustainable, and cost-effective manner.

This Act is effective July 15, 2026.

Contact: *Health and Life and Managed Care Division*
(502) 564-6088

House Bill 776- An Act Relating to Health Care Services and Declaring an Emergency (Acts Ch. 131).

This Act amends the requirements for limited health service benefit plans. The Act amends the definition of "covered services" in KRS 304.17C-085(1)(b).

The language of the amendment excludes from the definition of "covered services" for limited health service benefit plans, "services and materials for which reimbursement would be available but for the application of the enrollee's contractual limitation of an annual maximum benefit." The Act also makes void any contractual arrangement that waives any requirement set forth in KRS 304.17C-085.

This Section of the Act is effective July 15, 2026.

Contact: *Health and Life and Managed Care Division*
(502) 564-6088

Senate Bill 97- An Act Relating to Coverage for Prostheses and Orthoses (Acts Ch. 51).

This Act creates a new section of the Kentucky Insurance Code requiring health benefit plans to cover services for protheses and orthoses. The required coverage shall, at a minimum, be equivalent to the coverage for protheses and orthoses for the aged and disabled under the enumerated federal law provisions.

In addition, to the extent not specifically covered under the federal law, the coverage shall include coverage for one, or more, prostheses and orthoses for each of the following: a) completing activities of daily living; b) completing essential job-related activities; c) performing physical activities, including but not limited to running, biking, swimming, and strength training; d) maximizing the insured's whole-body health, including lower and upper arm limb functioning; or e) showering. The coverage shall also include coverage for materials and components for the device, instructions on using the device, and repair of the device.

SB 97 Section 5 requires the Department, within 30 days of effective date of the Act, to notify the federal Department of Health and Human Services (HHS) of the Department's determination of whether the provisions of the Act trigger cost defrayal. Along with this notification, the Department must request HHS to confirm this determination within a year. If HHS does not respond within the one-year timeframe, the Department is to consider the determination confirmed by HHS.

Pursuant to the requirements of KRS 304.17A-099, the Department has evaluated SB 97 in comparison with Kentucky's essential health benefit benchmark (EHB-Benchmark) plan to determine if this Act triggers cost defrayal. The Department has completed its evaluation. Pursuant to this analysis, the Department has concluded that SB 97 does trigger cost defrayal. The Department will be submitting this determination to HHS.

The coverage mandated by this Act is effective on January 1, 2027. However, because it triggers cost defrayal, it cannot be implemented, pursuant to KRS 304.17A-099(2).

Contact: *Health and Life Insurance and Managed Care Division*
(502) 564-6088

Senate Bill 153- An Act Relating to the Prevention of Harmful and Fraudulent Practices (Acts Ch. 54).

This Act amends the Consumer Protection Code enforced by the Kentucky Attorney General and the insurance fraud provisions of KRS Chapter 304 Subtitle 47, enforced by the Department.

The Act amends KRS 367.624 regarding goods or services contracts for the repair, improvement, or construction relating to real estate. The amendment requires a real estate goods or services contract to include a notice that the contract cannot assign or transfer the rights of a property and casualty contract in violation of KRS 304.20-105.

The Act also amends KRS 367.628, which regulates a contractor's actions regarding a real estate goods or services contract. A contractor shall not represent or market himself or herself as a claims specialist, insurance specialist, or as having any affiliation with an insurer or insurer's agent. Additionally, a contractor shall not be financially associated with a public adjuster, appraiser, or any other person investigating or negotiating the settlement of an insurance claim. The contractor is further prohibited from soliciting or providing contracts on behalf of a public adjuster or any other person specializing in the investigation or negotiation of the settlement of an insurance claim.

Finally, the Act amends KRS 304.47-020 with regard to the prosecution of insurance fraud complaints. The amendment provides that the Kentucky Attorney General shall have concurrent jurisdiction, along with County Attorneys and Commonwealth Attorneys, to prosecute insurance fraud complaints.

This Act is effective on July 15, 2026.

Contact: *Insurance Fraud Investigation Division*
(502) 564-1461

Senate Bill 158- An Act Relating to Products that Offer Benefits in Connection with Personal Property (Acts Ch. 16).

This Act creates a new product that will be regulated by the Kentucky Attorney General under the Consumer Protection Act of KRS Chapter 367. The product is a vehicle financial protection product. The product can be in two forms: debt waiver and a vehicle value protection agreement.

A debt waiver is: 1) a contractual agreement whereby a creditor under an auto lease agreement agrees to cancel amounts due under a lease agreement for excessive wear and use of a vehicle; or 2) a contractual agreement whereby a creditor under an auto purchase finance agreement agrees to cancel amounts due under the terms of the loan in the event of a total damage loss or unrecovered theft of a vehicle.

A vehicle protection agreement is an agreement that reduces some or all of the remaining balance owed on an auto finance agreement due to loss, theft, damage, obsolescence, diminished value, or depreciation.

If a product qualifies as a vehicle financial protection agreement, pursuant to the Act, it will be exempt from the requirements of the Kentucky Insurance Code. The product will not fall under the Department's regulatory jurisdiction, but, rather, will fall under the regulatory jurisdiction of the Kentucky Attorney General.

This Act also creates new sections of KRS Chapter 304 Subtitle 19. The new sections create a more defined regulatory framework for credit personal property insurance.

"Credit personal property insurance" is defined as a policy, endorsement, rider, or certificate of insurance offered in connection with a credit transaction covering perils to the personal property purchased through, or used as collateral for, a credit transaction. The following transactions are exempt from the requirements of this Act: 1) transactions involving extensions of credit primarily for business or commercial purposes; 2) insurance that is not classified and filed as credit insurance; 3) insurance written in connection with a credit transaction that is secured by a mortgage or deed of trust; 4) title insurance; 5) non-filing insurance; 6) insurance purchased by a creditor after repossession or similar event; 7) insurance for which no identifiable charge is made to, or collected from, the debtor; 8) blanket vendor single interest; and 9) vehicle financial protection products.

Credit personal property insurance shall cover a substantial risk of loss, or damage to, the collateral pledged or secured in the credit transaction. All policies, contracts, endorsements, riders, enrollment forms, and schedules of premium rates for credit personal property insurance shall be filed with the Commissioner.

If the credit personal property insurance is canceled prior to the maturity date of the underlying indebtedness related to the credit personal property insurance, the insurer shall promptly refund or credit the debtor any unearned premium. The method for calculating the refund will be the method set forth in the policy or certificate. If the policy or certificate does not set forth the method for calculation of the premium refund, the method for calculating the refund shall be the method set forth in the underlying credit transaction.

Sections 1 through 10 of the Act relating to vehicle financial protection products are effective January 1, 2027. All other sections of the Act are effective July 15, 2026.

Contact: *Property and Casualty Division*
(502) 564-6046