

[(h)] (I) Wages, salaries or commission for services performed for the decedent within ninety days prior to decedent's death.

[(i)] (J) Old age assistance claims under § 77 of Article 88A.

[(j)] (K) All other claims.

No preference shall be given in the payment of any claim over any other claim of the same class, nor shall a claim due and payable be entitled to a preference over claims not yet due.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect July 1, 1973.

Approved May 21, 1973.

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#### CHAPTER 418

(Senate Bill 606)

AN ACT to repeal and re-enact, with amendments, Section 55(2) of Article 48A of the Annotated Code of Maryland (1972 Replacement Volume), title "Insurance Code," subtitle "3. Insurers; Authorization and General Requirements," to remove the requirement of proof of a general scheme or plot before an insurer can be penalized for compelling claimants to accept less than the amount due them or to bring suit to collect the full amount due and to add unreasonable delays in making claim payment as a basis for a penalty.

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That Section 55(2) of Article 48A of the Annotated Code of Maryland (1972 Replacement Volume), title "Insurance Code," subtitle "3. Insurers; Authorization and General Requirements," be and it is hereby repealed and re-enacted, with amendments, to read as follows:

55.

(2) The Commissioner may refuse to issue or after a hearing refuse to renew, or may revoke or suspend an insurer's certificate of authority, in addition to other grounds therefor in this article, if the insurer:

(i) Violates any provision of this article other than those as to which refusal, suspension or revocation is mandatory.

(ii) Knowingly fails to comply with any lawful rule, regulation or order of the Commissioner.

(iii) Is found by the Commissioner to be in unsound condition or in such condition as to render its further transaction of insurance business hazardous to its policyholders or to the public.

(iii-a) Is engaged in the writing and issuing of policies in any jurisdiction in which it operates upon a premium basis which is found by the Commissioner to be insufficient, insecure or impracticable so as to endanger the solvency of the insurer.