

(B) THE TOTAL AMOUNT OF THE FRAUD PREVENTION FEE COLLECTED BY THE COMMISSIONER SHALL BE DEPOSITED IN THE INSURANCE FRAUD DIVISION FUND FOR THE SOLE PURPOSE OF FUNDING THE ACTIVITIES OF THE INSURANCE FRAUD DIVISION.

6-203.

THE FRAUD PREVENTION FEE SHALL BE:

(1) FOR EACH INSURER OR OTHER ENTITY AUTHORIZED TO OPERATE IN THE STATE UNDER THIS ARTICLE:

(I) IN 1995, \$750; AND

(II) IN 1996, AND THEREAFTER, \$1,000; AND

(2) \$10 FOR EACH AGENT LICENSED BY THE COMMISSIONER.

6-204.

THE COMMISSIONER MAY ADOPT REGULATIONS TO IMPLEMENT ANY PROVISION OF THIS SUBTITLE.

SECTION 11. AND BE IT FURTHER ENACTED, That the Executive Director of the Maryland Automobile Insurance Fund (the "Fund"), in consultation with the Insurance Commissioner shall:

(1) Identify and compile a list of each insured of the Fund whose policy of insurance with the Fund expires between July 1, 1995 and June 30, 1996 (the "Study Period") and who, at the time of expiration, is entitled to insurance under Article 48A, § 243P(a) of the Code, as enacted by Section 5 of this Act (the "Study Group");

(2) Identify and compile a list of each insured in the Study Group who renews a policy of insurance with the Fund during the Study Period;

(3) As to each insured in the Study Group who renews a policy of insurance with the Fund during the Study Period, determine, through a survey, interview, or other appropriate means, as determined by the Executive Director of the Fund: (a) what, if any efforts the insured made to obtain insurance in the private market; (b) the results of those efforts; and (c) the reasons why the insured decided to renew a policy with the Fund; and

(4) Prepare and submit a written report to the Governor and, subject to the provisions of § 2-1312 of the State Government Article, the General Assembly on or before January 1, 1997, which shall include: (a) the total number of insureds in the Study Group; (b) the total number of insureds in the Study Group who renewed their policy of insurance with the Fund during the Study Period; (c) a demographic profile of the insureds in the territories in which they reside; (d) a discussion and analysis of the results of any surveys or interviews of such insureds including a discussion of what, if any, efforts these insureds made to obtain insurance in the private market and the results of those efforts, and the reasons why these insureds decided to renew their policies with the Fund; and (e) any other information that the Insurance Commissioner finds to be pertinent to the question of why individuals who are eligible to obtain insurance in the private market elect to maintain policies with the Fund.