

INSURANCE DATA PROTECTION ACT

NOVEMBER 21, 2024.—Ordered to be printed

Mr. MCHENRY, from the Committee on Financial Services,
submitted the following

R E P O R T

together with

MINORITY VIEWS

[To accompany H.R. 5535]

[Including cost estimate of the Congressional Budget Office]

The Committee on Financial Services, to whom was referred the bill (H.R. 5535) to prohibit the Federal Insurance Office of the Department of the Treasury and other financial regulators from collecting data directly from an insurance company, having considered the same, reports favorably thereon with an amendment and recommends that the bill as amended do pass.

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The amendment is as follows:

Strike all after the enacting clause and insert the following:

SECTION 1. SHORT TITLE.

This Act may be cited as the “Insurance Data Protection Act”.

SEC. 2. REPEAL OF SUBPOENA AND ENFORCEMENT AUTHORITY.

Subsection (e) of section 313 of title 31, United States Code, is amended by striking paragraph (6).

SEC. 3. CONFIDENTIALITY BY FEDERAL INSURANCE OFFICE.

Section 313(e) of title 31, United States Code, is amended in paragraph (5)—

(1) in subparagraph (A), by inserting after “Office” the following: “and the sharing of any nonpublicly available data with or by the Office among other Federal agencies, the State insurance regulators and their collective agents, or any other entities”;

(2) in subparagraph (C)(ii), by inserting “any privilege referred to in subparagraph (A) and” after “including”; and

(3) in subparagraph (D), by inserting “including the exceptions thereunder,” after “United States Code,”.

SEC. 4. LIMITATION ON SUBPOENAS BY THE OFFICE OF FINANCIAL RESEARCH.

Section 153(f)(1) of the Dodd-Frank Wall Street Reform and Consumer Protection Act is amended by inserting after “financial company,” the following: “other than an insurance company (as defined under section 201(a)(13)),”.

SEC. 5. CONFIDENTIALITY BY FINANCIAL REGULATORS.

(a) IN GENERAL.—Title I of the Financial Stability Act of 2010 (12 U.S.C. 5343(f)(1)) is amended by inserting at the end the following:

“Subtitle D—Treatment of Data Collected From Insurance Companies

“SEC. 181. TREATMENT OF DATA COLLECTED FROM INSURANCE COMPANIES BY FINANCIAL REGULATORS.

“(a) ADVANCE COORDINATION.—Before collecting any data or information from a nonbank financial company that is an insurance company pursuant to this title or title II, a financial regulator shall coordinate with each relevant Federal agency and State insurance regulator and any publicly available sources to determine if the information to be collected is available from, and may be obtained in a timely manner by, such Federal agency or State insurance regulator, individually or collectively, other regulatory agency, or publicly available sources. If the financial regulator determines that such data or information is available, and may be obtained in a timely manner, from such an agency, regulator, regulatory agency, or source, the financial regulator shall obtain the data or information from such agency, regulator, regulatory agency, or source. If the financial regulator determines that such data or information is not so available, the financial regulator may collect such data or information from an insurance company only if the financial regulator complies with the requirements of subchapter I of chapter 35 of title 44, United States Code (relating to Federal information policy; commonly known as the Paperwork Reduction Act), in collecting such data or information. Notwithstanding any other provision of law, each such relevant Federal agency and State insurance regulator or other Federal or State regulatory agency is authorized to provide to the financial regulator such data or information.

“(b) CONFIDENTIALITY.—

“(1) RETENTION OF PRIVILEGE.—The sharing by a nonbank financial company that is an insurance company of any nonpublicly available data and information with a financial regulator under this title or title II shall not constitute a waiver of, or otherwise affect, any privilege arising under Federal or State law (including the rules of any Federal or State court) to which the data or information is otherwise subject.

“(2) CONTINUED APPLICATION OF PRIOR CONFIDENTIALITY AGREEMENTS.—Any requirement under Federal or State law to the extent otherwise applicable, or any requirement pursuant to a written agreement in effect between the original source of any nonpublicly available data or information and the source of such data or information to the financial regulator, regarding the privacy or confidentiality of any data or information in the possession of the source to a financial regulator, shall continue to apply to such data or information after the data or

information has been provided pursuant to this section to the financial regulator.

“(3) INFORMATION-SHARING AGREEMENT.—Any data or information obtained by a financial regulator may be made available to State insurance regulators, individually or collectively, through an information-sharing agreement that—

“(A) shall comply with applicable Federal law; and

“(B) shall not constitute a waiver of, or otherwise affect, any privilege under Federal or State law (including any privilege described in paragraph (1) and the rules of any Federal or State court) to which the data or information is otherwise subject.

“(4) AGENCY DISCLOSURE REQUIREMENTS.—Section 552 of title 5, United States Code, including the exceptions thereunder, shall apply to any data or information submitted to a financial regulator, by a nonbank financial company that is an insurance company pursuant to this title or title II, as required under this section.

“(c) DEFINITIONS.—For purposes of this section:

“(1) FINANCIAL REGULATOR.—The term ‘financial regulator’ means the Commission, the Commodity Futures Trading Commission, the Council, the Federal banking agencies, and the Office of Financial Research.

“(2) INSURANCE COMPANY.—The term ‘insurance company’ has the meaning given such term under section 201(a)(13).”

(b) TECHNICAL AMENDMENT.—The table of contents for the Dodd-Frank Wall Street Reform and Consumer Protection Act is amended by inserting after the item relating to section 176 the following:

“Subtitle D—Treatment of Data Collected From Uninsurance Companies

“Sec. 181. Treatment of data collected from insurance companies by financial regulators.”.

PURPOSE AND SUMMARY

Introduced on September 18, 2023, by Representative Scott Fitzgerald, H.R. 5535, the *Insurance Data Protection Act*, would eliminate the ability of the Treasury Department’s Federal Insurance Office (FIO) and Office of Financial Research (OFR) to compel the production of data from an insurer or any affiliate of an insurer via subpoena. The bill also requires FIO and other financial regulators to protect the confidentiality of any non-publicly available data collected from insurance companies. H.R. 5535 also requires financial regulators to coordinate with state insurance regulators in advance when seeking to obtain such information.

BACKGROUND AND NEED FOR LEGISLATION

For 150 years, state insurance regulators and respective state laws have regulated insurance companies. Under the Dodd-Frank Act, FIO was intended to monitor the insurance industry in a non-regulatory capacity. However, over the years, it has morphed into an aggressive quasi-federal insurance regulator that advances policy goals. Most recently, FIO has sought to use its statutory subpoena authority to collect massive amounts of data from insurance companies to assess their “climate-related financial risk.” Notwithstanding FIO’s lack of statutory authority to collect vast amounts of data, FIO failed to: (1) consider the burden of collecting such vast amounts of data on the industry, and (2) coordinate with state regulators as required under the Dodd-Frank Act. In March FIO backed off its threatened use of subpoena power to collect climate-related financial risk data in favor of partnering with the National Association of Insurance Commissioners (NAIC) to collect data through existing channels. However, without reform, FIO will retain the ability to subpoena any additional information from companies that the NAIC does not already collect.

To rein in FIO, Rep. Fitzgerald introduced H.R. 5355, which eliminates FIO’s subpoena authority and further limits how it, and other federal financial regulators, can collect and handle data from insurance companies and their affiliates. H.R. 5355 is supported by the National Association of Mutual Insurance Companies (NAMIC), American Property & Casualty Insurance Association (APCIA), Association for Independent Agents (Big I), and National Association of Professional Insurance Agents (PIA).

RELATED HEARING

Pursuant to clause 3(c)(6) of rule XIII, the following hearing was used to develop H.R. 5535: The Subcommittee on Housing and Insurance of the Committee on Financial Services held a hearing on November 2, 2023, titled “Factors Influencing the High Cost of Insurance for Consumers.”

COMMITTEE CONSIDERATION

The Committee on Financial Services met in open session on April 17, 2024, and ordered H.R. 5535 to be reported favorably to the House as amended by a recorded vote of 28 ayes to 22 nays (Record vote no. FC–126), a quorum being present. Before the question was called to order the bill favorably reported, the Committee adopted an amendment in the nature of a substitute offered by Mr. Fitzgerald by voice vote.

COMMITTEE VOTES

Clause 3(b) of rule XIII of the Rules of the House of Representatives requires the Committee to list the record votes on the order to report legislation and amendments thereto. H.R. 5535 was ordered reported favorably to the House as amended by a recorded vote of 28 ayes to 22 nays (Record vote no. FC–126), a quorum being present.

An amendment offered by Ms. Beatty, no. 1, was not agreed to by a recorded vote of 21 ayes to 28 nays (Record vote no. FC–125), a quorum being present.

Record vote no. FC- 126

Representative	Yea	Nay	Present	Representative	Yea	Nay	Present
Mr. McHenry	X	—	—	Ms. Waters	—	X	—
Mr. Hill	X	—	—	Mrs. Velázquez	—	—	—
Mr. Lucas	X	—	—	Mr. Sherman	—	X	—
Mr. Sessions	X	—	—	Mr. Meeks	—	X	—
Mr. Posey	X	—	—	Mr. Scott	—	X	—
Mr. Luetkenmeyer	—	—	—	Mr. Lynch	—	X	—
Mr. Huizenga	X	—	—	Mr. Green	—	X	—
Mrs. Wagner	X	—	—	Mr. Cleaver	—	X	—
Mr. Barr	X	—	—	Mr. Himes	—	X	—
Mr. Williams (TX)	X	—	—	Mr. Foster	—	X	—
Mr. Emmer	X	—	—	Mrs. Beatty	—	X	—
Mr. Loudermilk	X	—	—	Mr. Vargas	—	X	—
Mr. Mooney	X	—	—	Mr. Gottheimer	—	X	—
Mr. Davidson	X	—	—	Mr. Gonzalez	—	X	—
Mr. Rose	X	—	—	Mr. Casten	—	X	—
Mr. Steil	X	—	—	Ms. Pressley	—	X	—
Mr. Timmons	X	—	—	Mr. Horsford	—	X	—
Mr. Norman	X	—	—	Ms. Tlaib	—	X	—
Mr. Meuser	X	—	—	Mr. Torres	—	X	—
Mr. Fitzgerald	X	—	—	Ms. Garcia	—	X	—
Mr. Garbarino	X	—	—	Ms. Williams (GA)	—	X	—
Mrs. Kim	X	—	—	Mr. Nickel	—	X	—
Mr. Donalds	X	—	—	Ms. Petersen	—	X	—
Mr. Flood	X	—	—				
Mr. Lawler	X	—	—				
Mr. Nunn	X	—	—				
Ms. De La Cruz	X	—	—				
Mrs. Houchin	X	—	—				
Mr. Ogles	X	—	—				

Record vote no. FC- 125

Representative	Yea	Nay	Present	Representative	Yea	Nay	Present
Mr. McHenry	—	X	—	Ms. Waters	X	—	—
Mr. Hill	—	X	—	Mrs. Velázquez	—	—	—
Mr. Lucas	—	X	—	Mr. Sherman	X	—	—
Mr. Sessions	—	X	—	Mr. Meeks	X	—	—
Mr. Posey	—	X	—	Mr. Scott	X	—	—
Mr. Luetkenmeyer	—	—	—	Mr. Lynch	—	—	—
Mr. Huizenga	—	X	—	Mr. Green	X	—	—
Mrs. Wagner	—	X	—	Mr. Cleaver	X	—	—
Mr. Barr	—	X	—	Mr. Himes	X	—	—
Mr. Williams (TX)	—	X	—	Mr. Foster	X	—	—
Mr. Emmer	—	X	—	Mrs. Beatty	X	—	—
Mr. Loudermilk	—	X	—	Mr. Vargas	X	—	—
Mr. Mooney	—	X	—	Mr. Gottheimer	X	—	—
Mr. Davidson	—	X	—	Mr. Gonzalez	X	—	—
Mr. Rose	—	X	—	Mr. Casten	X	—	—
Mr. Steil	—	X	—	Ms. Pressley	X	—	—
Mr. Timmons	—	X	—	Mr. Horsford	X	—	—
Mr. Norman	—	X	—	Ms. Tlaib	X	—	—
Mr. Meuser	—	X	—	Mr. Torres	X	—	—
Mr. Fitzgerald	—	X	—	Ms. Garcia	X	—	—
Mr. Garbarino	—	X	—	Ms. Williams (GA)	X	—	—
Mrs. Kim	—	X	—	Mr. Nickel	X	—	—
Mr. Donalds	—	X	—	Ms. Pettensen	X	—	—
Mr. Flood	—	X	—				
Mr. Lawler	—	X	—				
Mr. Nunn	—	X	—				
Ms. De La Cruz	—	X	—				
Mrs. Houchin	—	X	—				
Mr. Ogles	—	X	—				

COMMITTEE OVERSIGHT FINDINGS

Pursuant to clause 3(c)(1) of rule XIII of the Rules of the House of Representatives, the findings and recommendations of the Committee, based on oversight activities under clause 2(b)(1) of rule X of the Rules of the House of Representatives, are incorporated in the descriptive portions of this report.

PERFORMANCE GOALS AND OBJECTIVES

Pursuant to clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, the goal of H.R. 5535 is to eliminate the ability of the Treasury Department's Federal Insurance Office (FIO) and Office of Financial Research (OFR) to compel the production of data from an insurer or any affiliate of an insurer via subpoena.

CONGRESSIONAL BUDGET OFFICE ESTIMATES

Pursuant to clause 3(c)(3) of rule XIII of the Rules of the House of Representatives, the following is the cost estimate provided by the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974:

H.R. 5535, Insurance Data Protection Act			
As ordered reported by the House Committee on Financial Services on April 17, 2024			
By Fiscal Year, Millions of Dollars	2024	2024-2029	2024-2034
Direct Spending (Outlays)	*	*	*
Revenues	*	*	*
Increase or Decrease (-) in the Deficit	*	*	*
Spending Subject to Appropriation (Outlays)	*	*	not estimated
Increases <i>net direct spending</i> in any of the four consecutive 10-year periods beginning in 2035?	*	Statutory pay-as-you-go procedures apply? Yes	
		Mandate Effects	
Increases <i>on-budget deficits</i> in any of the four consecutive 10-year periods beginning in 2035?	*	Contains intergovernmental mandate?	No
		Contains private-sector mandate?	Yes, Under Threshold
* = between -\$500,000 and \$500,000.			

H.R. 5535 would eliminate the authority of the Department of the Treasury's Federal Insurance Office (FIO) and Office of Financial Research (OFR) to subpoena insurance companies for data or information. The bill also would require federal financial regulators to coordinate with relevant federal and state regulators and consult publicly available databases prior to collecting data or information from an insurance company. Federal financial regulators under the bill include the Commodity Futures Trading Commission (CFTC), Federal Deposit Insurance Corporation (FDIC), Federal Reserve, Financial Stability Oversight Council (FSOC), National Credit Union Administration (NCUA), Office of the Comptroller of the Currency (OCC), OFR, and Securities and Exchange Commission (SEC).

CBO estimates that any changes in direct spending, revenues, or spending subject to appropriation from administrative costs that

would result from implementing H.R. 5535 would be insignificant. Some of the affected agencies rarely, if ever, collect data from insurance companies. For those that do, CBO expects that many of them already consult with federal and state regulators and seek out publicly available data prior to collecting information directly.

The operating costs for the FDIC, FSOC, NCUA, OCC, and OFR are classified in the budget as direct spending. Both the NCUA and OCC collect fees from financial institutions to offset their operating costs; those fees are recorded as offsetting receipts, that is, as reductions in direct spending.

The FSOC and OFR are funded through the Financial Research Fund and collect fees to offset their operating costs. Those fees are treated as revenues. Costs incurred by the Federal Reserve reduce remittances to the Treasury, which are recorded as revenues.

The operating costs of the CFTC, FIO, and SEC are subject to appropriation. The SEC is authorized under current law to collect fees each year to offset its annual appropriation. Assuming appropriation action consistent with that authority, CBO estimates that the cost to the SEC to implement H.R. 5535 would be roughly offset by fees.

If federal financial regulators increase annual fees to offset the costs of implementing the bill, H.R. 5535 would increase the costs of an existing private-sector mandate on entities required to pay those fees. CBO estimates that the incremental cost of the mandate would be small and would fall well below the annual threshold established in the Unfunded Mandates Reform Act (UMRA) for private-sector mandates (\$200 million in 2024, adjusted annually for inflation).

The bill contains no intergovernmental mandates as defined in UMRA.

The CBO staff contacts for this estimate are David Hughes (for federal costs) and Rachel Austin (for mandates). The estimate was reviewed by H. Samuel Papenfuss, Deputy Director of Budget Analysis.

PHILLIP L. SWAGEL,
Director, Congressional Budget Office.

NEW BUDGET AUTHORITY, ENTITLEMENT AUTHORITY, AND TAX EXPENDITURES

Pursuant to clause 3(c)(2) of rule XIII of the Rules of the House of Representatives, the Committee adopts as its own the estimate of new budget authority, entitlement authority, or tax expenditures or revenues contained in the cost estimate prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1973.

FEDERAL MANDATES STATEMENT

Pursuant to section 423 of the Unfunded Mandates Reform Act, the Committee adopts as its own the estimate of the Federal mandates prepared by the Director of the Congressional Budget Office.

ADVISORY COMMITTEE STATEMENT

No advisory committees within the meaning of section 5(b) of the Federal Advisory Committee Act were created by this legislation.

APPLICABILITY TO LEGISLATIVE BRANCH

The Committee finds that the legislation does not relate to the terms and conditions of employment or access to public services or accommodations within the meaning of section 102(b)(3) of the Congressional Accountability Act.

EARMARK IDENTIFICATION

With respect to clause 9 of rule XXI of the Rules of the House of Representatives, the Committee has carefully reviewed the provisions of the bill and states that the provisions of the bill do not contain any congressional earmarks, limited tax benefits, or limited tariff benefits within the meaning of the rule.

DUPLICATION OF FEDERAL PROGRAMS

Pursuant to clause 3(c)(5) of rule XIII of the Rules of the House of Representatives, the Committee states that no provision of the bill establishes or reauthorizes a program of the Federal Government known to be duplicative of another Federal program, including any program that was included in a report to Congress pursuant to section 21 of the Public Law 111-139 or the most recent Catalog of Federal Domestic Assistance.

SECTION-BY-SECTION ANALYSIS OF THE LEGISLATION

Section 1: Sets the short title of the bill as the “Insurance Data Protection Act.”

Section 2: Repeals the authority of FIO to compel the production of the data or information by subpoena.

Section 3: Clarifies that the sharing of any non-publicly available data supplied to FIO does not constitute a waiver of legal privilege to which the furnisher of that data is entitled to under federal or state law.

Section 4: Excludes insurance companies from the authority of OFR to compel the production of the data by subpoena.

Section 5: Requires that federal financial regulators must first coordinate with each relevant federal agency and state insurance regulator and any publicly available sources regarding the collection of data or information from an insurance company before attempting to collect such data or information directly from an insurance company. If such data is not available, the bill requires federal financial regulators to follow the rules of the Paperwork Reduction Act in collecting such data or information. Establishes that any in data or information collected retains any applicable legal privilege, remains subject to any existing privacy or confidentiality protections, must follow the terms of any information-sharing agreement established, and is subject to the agency disclosure requirements of Section 552 of Title 5 of the United States Code.

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italics,

and existing law in which no change is proposed is shown in roman):

TITLE 31, UNITED STATES CODE

* * * * *

SUBTITLE I—GENERAL

* * * * *

CHAPTER 3—DEPARTMENT OF THE TREASURY

* * * * *

SUBCHAPTER I—ORGANIZATION

* * * * *

§ 313. Federal Insurance Office

(a) **ESTABLISHMENT.**—There is established within the Department of the Treasury the Federal Insurance Office.

(b) **LEADERSHIP.**—The Office shall be headed by a Director, who shall be appointed by the Secretary of the Treasury. The position of Director shall be a career reserved position in the Senior Executive Service, as that position is defined under section 3132 of title 5, United States Code.

(c) **FUNCTIONS.**—

(1) **AUTHORITY PURSUANT TO DIRECTION OF SECRETARY.**—The Office, pursuant to the direction of the Secretary, shall have the authority—

(A) to monitor all aspects of the insurance industry, including identifying issues or gaps in the regulation of insurers that could contribute to a systemic crisis in the insurance industry or the United States financial system;

(B) to monitor the extent to which traditionally underserved communities and consumers, minorities (as such term is defined in section 1204(c) of the Financial Institutions Reform, Recovery, and Enforcement Act of 1989 (12 U.S.C. 1811 note)), and low- and moderate-income persons have access to affordable insurance products regarding all lines of insurance, except health insurance;

(C) to recommend to the Financial Stability Oversight Council that it designate an insurer, including the affiliates of such insurer, as an entity subject to regulation as a nonbank financial company supervised by the Board of Governors pursuant to title I of the Dodd-Frank Wall Street Reform and Consumer Protection Act;

(D) to assist the Secretary in administering the Terrorism Insurance Program established in the Department of the Treasury under the Terrorism Risk Insurance Act of 2002 (15 U.S.C. 6701 note);

(E) to coordinate Federal efforts and develop Federal policy on prudential aspects of international insurance matters, including representing the United States, as appropriate, in the International Association of Insurance Su-

pervisors (or a successor entity) and assisting the Secretary in negotiating covered agreements (as such term is defined in subsection (r));

(F) to determine, in accordance with subsection (f), whether State insurance measures are preempted by covered agreements;

(G) to consult with the States (including State insurance regulators) regarding insurance matters of national importance and prudential insurance matters of international importance; and

(H) to perform such other related duties and authorities as may be assigned to the Office by the Secretary.

(2) **ADVISORY FUNCTIONS.**—The Office shall advise the Secretary on major domestic and prudential international insurance policy issues.

(3) **ADVISORY CAPACITY ON COUNCIL.**—The Director shall serve in an advisory capacity on the Financial Stability Oversight Council established under the Financial Stability Act of 2010.

(d) **SCOPE.**—The authority of the Office shall extend to all lines of insurance except—

(1) health insurance, as determined by the Secretary in coordination with the Secretary of Health and Human Services based on section 2791 of the Public Health Service Act (42 U.S.C. 300gg–91);

(2) long-term care insurance, except long-term care insurance that is included with life or annuity insurance components, as determined by the Secretary in coordination with the Secretary of Health and Human Services, and in the case of long-term care insurance that is included with such components, the Secretary shall coordinate with the Secretary of Health and Human Services in performing the functions of the Office; and

(3) crop insurance, as established by the Federal Crop Insurance Act (7 U.S.C. 1501 et seq.).

(e) **GATHERING OF INFORMATION.**—

(1) **IN GENERAL.**—In carrying out the functions required under subsection (c), the Office may—

(A) receive and collect data and information on and from the insurance industry and insurers;

(B) enter into information-sharing agreements;

(C) analyze and disseminate data and information; and

(D) issue reports regarding all lines of insurance except health insurance.

(2) **COLLECTION OF INFORMATION FROM INSURERS AND AFFILIATES.**—

(A) **IN GENERAL.**—Except as provided in paragraph (3), the Office may require an insurer, or any affiliate of an insurer, to submit such data or information as the Office may reasonably require in carrying out the functions described under subsection (c).

(B) **RULE OF CONSTRUCTION.**—Notwithstanding any other provision of this section, for purposes of subparagraph (A), the term “insurer” means any entity that writes insurance or reinsures risks and issues contracts or policies in 1 or more States.

(3) EXCEPTION FOR SMALL INSURERS.—Paragraph (2) shall not apply with respect to any insurer or affiliate thereof that meets a minimum size threshold that the Office may establish, whether by order or rule.

(4) ADVANCE COORDINATION.—Before collecting any data or information under paragraph (2) from an insurer, or affiliate of an insurer, the Office shall coordinate with each relevant Federal agency and State insurance regulator (or other relevant Federal or State regulatory agency, if any, in the case of an affiliate of an insurer) and any publicly available sources to determine if the information to be collected is available from, and may be obtained in a timely manner by, such Federal agency or State insurance regulator, individually or collectively, other regulatory agency, or publicly available sources. If the Director determines that such data or information is available, and may be obtained in a timely manner, from such an agency, regulator, regulatory agency, or source, the Director shall obtain the data or information from such agency, regulator, regulatory agency, or source. If the Director determines that such data or information is not so available, the Director may collect such data or information from an insurer (or affiliate) only if the Director complies with the requirements of subchapter I of chapter 35 of title 44, United States Code (relating to Federal information policy; commonly known as the Paperwork Reduction Act), in collecting such data or information. Notwithstanding any other provision of law, each such relevant Federal agency and State insurance regulator or other Federal or State regulatory agency is authorized to provide to the Office such data or information.

(5) CONFIDENTIALITY.—

(A) RETENTION OF PRIVILEGE.—The submission of any nonpublicly available data and information to the Office *and the sharing of any nonpublicly available data with or by the Office among other Federal agencies, the State insurance regulators and their collective agents, or any other entities* under this subsection shall not constitute a waiver of, or otherwise affect, any privilege arising under Federal or State law (including the rules of any Federal or State court) to which the data or information is otherwise subject.

(B) CONTINUED APPLICATION OF PRIOR CONFIDENTIALITY AGREEMENTS.—Any requirement under Federal or State law to the extent otherwise applicable, or any requirement pursuant to a written agreement in effect between the original source of any nonpublicly available data or information and the source of such data or information to the Office, regarding the privacy or confidentiality of any data or information in the possession of the source to the Office, shall continue to apply to such data or information after the data or information has been provided pursuant to this subsection to the Office.

(C) INFORMATION-SHARING AGREEMENT.—Any data or information obtained by the Office may be made available to State insurance regulators, individually or collectively, through an information-sharing agreement that—

- (i) shall comply with applicable Federal law; and
- (ii) shall not constitute a waiver of, or otherwise affect, any privilege under Federal or State law (including *any privilege referred to in subparagraph (A) and the rules of any Federal or State court*) to which the data or information is otherwise subject.

(D) AGENCY DISCLOSURE REQUIREMENTS.—Section 552 of title 5, United States Code, *including the exceptions thereunder*, shall apply to any data or information submitted to the Office by an insurer or an affiliate of an insurer.

[(6) SUBPOENAS AND ENFORCEMENT.—The Director shall have the power to require by subpoena the production of the data or information requested under paragraph (2), but only upon a written finding by the Director that such data or information is required to carry out the functions described under subsection (c) and that the Office has coordinated with such regulator or agency as required under paragraph (4). Subpoenas shall bear the signature of the Director and shall be served by any person or class of persons designated by the Director for that purpose. In the case of contumacy or failure to obey a subpoena, the subpoena shall be enforceable by order of any appropriate district court of the United States. Any failure to obey the order of the court may be punished by the court as a contempt of court.]

(f) PREEMPTION OF STATE INSURANCE MEASURES.—

(1) STANDARD.—A State insurance measure shall be preempted pursuant to this section or section 314 if, and only to the extent that the Director determines, in accordance with this subsection, that the measure—

(A) results in less favorable treatment of a non-United States insurer domiciled in a foreign jurisdiction that is subject to a covered agreement than a United States insurer domiciled, licensed, or otherwise admitted in that State; and

(B) is inconsistent with a covered agreement.

(2) DETERMINATION.—

(A) NOTICE OF POTENTIAL INCONSISTENCY.—Before making any determination under paragraph (1), the Director shall—

(i) notify and consult with the appropriate State regarding any potential inconsistency or preemption;

(ii) notify and consult with the United States Trade Representative regarding any potential inconsistency or preemption;

(iii) cause to be published in the Federal Register notice of the issue regarding the potential inconsistency or preemption, including a description of each State insurance measure at issue and any applicable covered agreement;

(iv) provide interested parties a reasonable opportunity to submit written comments to the Office; and

(v) consider any comments received.

(B) SCOPE OF REVIEW.—For purposes of this subsection, any determination of the Director regarding State insurance measures, and any preemption under paragraph (1)

as a result of such determination, shall be limited to the subject matter contained within the covered agreement involved and shall achieve a level of protection for insurance or reinsurance consumers that is substantially equivalent to the level of protection achieved under State insurance or reinsurance regulation.

(C) NOTICE OF DETERMINATION OF INCONSISTENCY.—Upon making any determination under paragraph (1), the Director shall—

(i) notify the appropriate State of the determination and the extent of the inconsistency;

(ii) establish a reasonable period of time, which shall not be less than 30 days, before the determination shall become effective; and

(iii) notify the Committees on Financial Services and Ways and Means of the House of Representatives and the Committees on Banking, Housing, and Urban Affairs and Finance of the Senate.

(3) NOTICE OF EFFECTIVENESS.—Upon the conclusion of the period referred to in paragraph (2)(C)(ii), if the basis for such determination still exists, the determination shall become effective and the Director shall—

(A) cause to be published a notice in the Federal Register that the preemption has become effective, as well as the effective date; and

(B) notify the appropriate State.

(4) LIMITATION.—No State may enforce a State insurance measure to the extent that such measure has been preempted under this subsection.

(g) APPLICABILITY OF ADMINISTRATIVE PROCEDURES ACT.—Determinations of inconsistency made pursuant to subsection (f)(2) shall be subject to the applicable provisions of subchapter II of chapter 5 of title 5, United States Code (relating to administrative procedure), and chapter 7 of such title (relating to judicial review), except that in any action for judicial review of a determination of inconsistency, the court shall determine the matter de novo.

(h) REGULATIONS, POLICIES, AND PROCEDURES.—The Secretary may issue orders, regulations, policies, and procedures to implement this section.

(i) CONSULTATION.—The Director shall consult with State insurance regulators, individually or collectively, to the extent the Director determines appropriate, in carrying out the functions of the Office.

(j) SAVINGS PROVISIONS.—Nothing in this section shall—

(1) preempt—

(A) any State insurance measure that governs any insurer's rates, premiums, underwriting, or sales practices;

(B) any State coverage requirements for insurance;

(C) the application of the antitrust laws of any State to the business of insurance; or

(D) any State insurance measure governing the capital or solvency of an insurer, except to the extent that such State insurance measure results in less favorable treatment of a non-United State insurer than a United States insurer;

(2) be construed to alter, amend, or limit any provision of the Consumer Financial Protection Agency Act of 2010; or

(3) affect the preemption of any State insurance measure otherwise inconsistent with and preempted by Federal law.

(k) RETENTION OF EXISTING STATE REGULATORY AUTHORITY.—Nothing in this section or section 314 shall be construed to establish or provide the Office or the Department of the Treasury with general supervisory or regulatory authority over the business of insurance.

(l) RETENTION OF AUTHORITY OF FEDERAL FINANCIAL REGULATORY AGENCIES.—Nothing in this section or section 314 shall be construed to limit the authority of any Federal financial regulatory agency, including the authority to develop and coordinate policy, negotiate, and enter into agreements with foreign governments, authorities, regulators, and multinational regulatory committees and to preempt State measures to affect uniformity with international regulatory agreements.

(m) RETENTION OF AUTHORITY OF UNITED STATES TRADE REPRESENTATIVE.—Nothing in this section or section 314 shall be construed to affect the authority of the Office of the United States Trade Representative pursuant to section 141 of the Trade Act of 1974 (19 U.S.C. 2171) or any other provision of law, including authority over the development and coordination of United States international trade policy and the administration of the United States trade agreements program.

(n) ANNUAL REPORTS TO CONGRESS.—

(1) SECTION 313(F) REPORTS.—Beginning September 30, 2011, the Director shall submit a report on or before September 30 of each calendar year to the President and to the Committees on Financial Services and Ways and Means of the House of Representatives and the Committees on Banking, Housing, and Urban Affairs and Finance of the Senate on any actions taken by the Office pursuant to subsection (f) (regarding preemption of inconsistent State insurance measures).

(2) INSURANCE INDUSTRY.—Beginning September 30, 2011, the Director shall submit a report on or before September 30 of each calendar year to the President and to the Committee on Financial Services of the House of Representatives and the Committee on Banking, Housing, and Urban Affairs of the Senate on the insurance industry and any other information as deemed relevant by the Director or requested by such Committees.

(o) REPORTS ON U.S. AND GLOBAL REINSURANCE MARKET.—The Director shall submit to the Committee on Financial Services of the House of Representatives and the Committee on Banking, Housing, and Urban Affairs of the Senate—

(1) a report received not later than September 30, 2012, describing the breadth and scope of the global reinsurance market and the critical role such market plays in supporting insurance in the United States; and

(2) a report received not later than January 1, 2013, and updated not later than January 1, 2015, describing the impact of part II of the Nonadmitted and Reinsurance Reform Act of 2010 on the ability of State regulators to access reinsurance information for regulated companies in their jurisdictions.

(p) STUDY AND REPORT ON REGULATION OF INSURANCE.—

(1) IN GENERAL.—Not later than 18 months after the date of enactment of this section, the Director shall conduct a study and submit a report to Congress on how to modernize and improve the system of insurance regulation in the United States.

(2) CONSIDERATIONS.—The study and report required under paragraph (1) shall be based on and guided by the following considerations:

(A) Systemic risk regulation with respect to insurance.

(B) Capital standards and the relationship between capital allocation and liabilities, including standards relating to liquidity and duration risk.

(C) Consumer protection for insurance products and practices, including gaps in State regulation.

(D) The degree of national uniformity of State insurance regulation.

(E) The regulation of insurance companies and affiliates on a consolidated basis.

(F) International coordination of insurance regulation.

(3) ADDITIONAL FACTORS.—The study and report required under paragraph (1) shall also examine the following factors:

(A) The costs and benefits of potential Federal regulation of insurance across various lines of insurance (except health insurance).

(B) The feasibility of regulating only certain lines of insurance at the Federal level, while leaving other lines of insurance to be regulated at the State level.

(C) The ability of any potential Federal regulation or Federal regulators to eliminate or minimize regulatory arbitrage.

(D) The impact that developments in the regulation of insurance in foreign jurisdictions might have on the potential Federal regulation of insurance.

(E) The ability of any potential Federal regulation or Federal regulator to provide robust consumer protection for policyholders.

(F) The potential consequences of subjecting insurance companies to a Federal resolution authority, including the effects of any Federal resolution authority—

(i) on the operation of State insurance guaranty fund systems, including the loss of guaranty fund coverage if an insurance company is subject to a Federal resolution authority;

(ii) on policyholder protection, including the loss of the priority status of policyholder claims over other unsecured general creditor claims;

(iii) in the case of life insurance companies, on the loss of the special status of separate account assets and separate account liabilities; and

(iv) on the international competitiveness of insurance companies.

(G) Such other factors as the Director determines necessary or appropriate, consistent with the principles set forth in paragraph (2).

(4) REQUIRED RECOMMENDATIONS.—The study and report required under paragraph (1) shall also contain any legislative, administrative, or regulatory recommendations, as the Director determines appropriate, to carry out or effectuate the findings set forth in such report.

(5) CONSULTATION.—With respect to the study and report required under paragraph (1), the Director shall consult with the State insurance regulators, consumer organizations, representatives of the insurance industry and policyholders, and other organizations and experts, as appropriate.

(q) USE OF EXISTING RESOURCES.—To carry out this section, the Office may employ personnel, facilities, and any other resource of the Department of the Treasury available to the Secretary and the Secretary shall dedicate specific personnel to the Office.

(r) DEFINITIONS.—In this section and section 314, the following definitions shall apply:

(1) AFFILIATE.—The term “affiliate” means, with respect to an insurer, any person who controls, is controlled by, or is under common control with the insurer.

(2) COVERED AGREEMENT.—The term “covered agreement” means a written bilateral or multilateral agreement regarding prudential measures with respect to the business of insurance or reinsurance that—

(A) is entered into between the United States and one or more foreign governments, authorities, or regulatory entities; and

(B) relates to the recognition of prudential measures with respect to the business of insurance or reinsurance that achieves a level of protection for insurance or reinsurance consumers that is substantially equivalent to the level of protection achieved under State insurance or reinsurance regulation.

(3) INSURER.—The term “insurer” means any person engaged in the business of insurance, including reinsurance.

(4) FEDERAL FINANCIAL REGULATORY AGENCY.—The term “Federal financial regulatory agency” means the Department of the Treasury, the Board of Governors of the Federal Reserve System, the Office of the Comptroller of the Currency, the Office of Thrift Supervision, the Securities and Exchange Commission, the Commodity Futures Trading Commission, the Federal Deposit Insurance Corporation, the Federal Housing Finance Agency, or the National Credit Union Administration.

(5) NON-UNITED STATES INSURER.—The term “non-United States insurer” means an insurer that is organized under the laws of a jurisdiction other than a State, but does not include any United States branch of such an insurer.

(6) OFFICE.—The term “Office” means the Federal Insurance Office established by this section.

(7) STATE INSURANCE MEASURE.—The term “State insurance measure” means any State law, regulation, administrative ruling, bulletin, guideline, or practice relating to or affecting prudential measures applicable to insurance or reinsurance.

(8) STATE INSURANCE REGULATOR.—The term “State insurance regulator” means any State regulatory authority responsible for the supervision of insurers.

(9) **SUBSTANTIALLY EQUIVALENT TO THE LEVEL OF PROTECTION ACHIEVED.**—The term “substantially equivalent to the level of protection achieved” means the prudential measures of a foreign government, authority, or regulatory entity achieve a similar outcome in consumer protection as the outcome achieved under State insurance or reinsurance regulation.

(10) **UNITED STATES INSURER.**—The term “United States insurer” means—

(A) an insurer that is organized under the laws of a State; or

(B) a United States branch of a non-United States insurer.

(s) **AUTHORIZATION OF APPROPRIATIONS.**—There are authorized to be appropriated for the Office for each fiscal year such sums as may be necessary.

* * * * *

DODD-FRANK WALL STREET REFORM AND CONSUMER PROTECTION ACT

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) **SHORT TITLE.**—This Act may be cited as the “Dodd-Frank Wall Street Reform and Consumer Protection Act”.

(b) **TABLE OF CONTENTS.**—The table of contents for this Act is as follows:

Sec. 1. Short title; table of contents.

* * * * *

TITLE I—FINANCIAL STABILITY

* * * * *

Subtitle D—Treatment of Data Collected from Insurance Companies

Sec. 181. *Treatment of data collected from insurance companies by financial regulators.*

* * * * *

TITLE I—FINANCIAL STABILITY

SEC. 101. SHORT TITLE.

This title may be cited as the “Financial Stability Act of 2010”.

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Subtitle B—Office of Financial Research

* * * * *

SEC. 153. PURPOSE AND DUTIES OF THE OFFICE.

(a) **PURPOSE AND DUTIES.**—The purpose of the Office is to support the Council in fulfilling the purposes and duties of the Council, as set forth in subtitle A, and to support member agencies, by—

(1) collecting data on behalf of the Council, and providing such data to the Council and member agencies;

(2) standardizing the types and formats of data reported and collected;

(3) performing applied research and essential long-term research;

(4) developing tools for risk measurement and monitoring;

(5) performing other related services;

(6) making the results of the activities of the Office available to financial regulatory agencies; and

(7) assisting such member agencies in determining the types and formats of data authorized by this Act to be collected by such member agencies.

(b) ADMINISTRATIVE AUTHORITY.—The Office may—

(1) share data and information, including software developed by the Office, with the Council, member agencies, and the Bureau of Economic Analysis, which shared data, information, and software—

(A) shall be maintained with at least the same level of security as is used by the Office; and

(B) may not be shared with any individual or entity without the permission of the Council;

(2) sponsor and conduct research projects; and

(3) assist, on a reimbursable basis, with financial analyses undertaken at the request of other Federal agencies that are not member agencies.

(c) RULEMAKING AUTHORITY.—

(1) SCOPE.—The Office, in consultation with the Chairperson, shall issue rules, regulations, and orders only to the extent necessary to carry out the purposes and duties described in paragraphs (1), (2), and (7) of subsection (a).

(2) STANDARDIZATION.—Member agencies, in consultation with the Office, shall implement regulations promulgated by the Office under paragraph (1) to standardize the types and formats of data reported and collected on behalf of the Council, as described in subsection (a)(2). If a member agency fails to implement such regulations prior to the expiration of the 3-year period following the date of publication of final regulations, the Office, in consultation with the Chairperson, may implement such regulations with respect to the financial entities under the jurisdiction of the member agency. This paragraph shall not supersede or interfere with the independent authority of a member agency under other law to collect data, in such format and manner as the member agency requires.

(d) TESTIMONY.—

(1) IN GENERAL.—The Director of the Office shall report to and testify before the Committee on Banking, Housing, and Urban Affairs of the Senate and the Committee on Financial Services of the House of Representatives annually on the activities of the Office, including the work of the Data Center and the Research and Analysis Center, and the assessment of the Office of significant financial market developments and potential emerging threats to the financial stability of the United States.

(2) NO PRIOR REVIEW.—No officer or agency of the United States shall have any authority to require the Director to submit the testimony required under paragraph (1) or other con-

gressional testimony to any officer or agency of the United States for approval, comment, or review prior to the submission of such testimony. Any such testimony to Congress shall include a statement that the views expressed therein are those of the Director and do not necessarily represent the views of the President.

(e) **ADDITIONAL REPORTS.**—The Director may provide additional reports to Congress concerning the financial stability of the United States. The Director shall notify the Council of any such additional reports provided to Congress.

(f) **SUBPOENA.**—

(1) **IN GENERAL.**—The Director may require from a financial company, *other than an insurance company (as defined under section 201(a)(13))*, by subpoena, the production of the data requested under subsection (a)(1) and section 154(b)(1), but only upon a written finding by the Director that—

(A) such data is required to carry out the functions described under this subtitle; and

(B) the Office has coordinated with the relevant primary financial regulatory agency, as required under section 154(b)(1)(B)(ii).

(2) **FORMAT.**—Subpoenas under paragraph (1) shall bear the signature of the Director, and shall be served by any person or class of persons designated by the Director for that purpose.

(3) **ENFORCEMENT.**—In the case of contumacy or failure to obey a subpoena, the subpoena shall be enforceable by order of any appropriate district court of the United States. Any failure to obey the order of the court may be punished by the court as a contempt of court.

* * * * *

Subtitle D—Treatment of Data Collected From Insurance Companies

SEC. 181. TREATMENT OF DATA COLLECTED FROM INSURANCE COMPANIES BY FINANCIAL REGULATORS.

(a) **ADVANCE COORDINATION.**—*Before collecting any data or information from a nonbank financial company that is an insurance company pursuant to this title or title II, a financial regulator shall coordinate with each relevant Federal agency and State insurance regulator and any publicly available sources to determine if the information to be collected is available from, and may be obtained in a timely manner by, such Federal agency or State insurance regulator, individually or collectively, other regulatory agency, or publicly available sources. If the financial regulator determines that such data or information is available, and may be obtained in a timely manner, from such an agency, regulator, regulatory agency, or source, the financial regulator shall obtain the data or information from such agency, regulator, regulatory agency, or source. If the financial regulator determines that such data or information is not so available, the financial regulator may collect such data or information from an insurance company only if the financial regulator complies with the requirements of subchapter I of chapter 35 of title 44, United States Code (relating to Federal information policy; com-*

monly known as the Paperwork Reduction Act), in collecting such data or information. Notwithstanding any other provision of law, each such relevant Federal agency and State insurance regulator or other Federal or State regulatory agency is authorized to provide to the financial regulator such data or information.

(b) CONFIDENTIALITY.—

(1) RETENTION OF PRIVILEGE.—The sharing by a nonbank financial company that is an insurance company of any nonpublicly available data and information with a financial regulator under this title or title II shall not constitute a waiver of, or otherwise affect, any privilege arising under Federal or State law (including the rules of any Federal or State court) to which the data or information is otherwise subject.

(2) CONTINUED APPLICATION OF PRIOR CONFIDENTIALITY AGREEMENTS.—Any requirement under Federal or State law to the extent otherwise applicable, or any requirement pursuant to a written agreement in effect between the original source of any nonpublicly available data or information and the source of such data or information to the financial regulator, regarding the privacy or confidentiality of any data or information in the possession of the source to a financial regulator, shall continue to apply to such data or information after the data or information has been provided pursuant to this section to the financial regulator.

(3) INFORMATION-SHARING AGREEMENT.—Any data or information obtained by a financial regulator may be made available to State insurance regulators, individually or collectively, through an information-sharing agreement that—

(A) shall comply with applicable Federal law; and

(B) shall not constitute a waiver of, or otherwise affect, any privilege under Federal or State law (including any privilege described in paragraph (1) and the rules of any Federal or State court) to which the data or information is otherwise subject.

(4) AGENCY DISCLOSURE REQUIREMENTS.—Section 552 of title 5, United States Code, including the exceptions thereunder, shall apply to any data or information submitted to a financial regulator, by a nonbank financial company that is an insurance company pursuant to this title or title II, as required under this section.

(c) DEFINITIONS.—For purposes of this section:

(1) FINANCIAL REGULATOR.—The term “financial regulator” means the Commission, the Commodity Futures Trading Commission, the Council, the Federal banking agencies, and the Office of Financial Research.

(2) INSURANCE COMPANY.—The term “insurance company” has the meaning given such term under section 201(a)(13).

* * * * *

MINORITY VIEWS

H.R. 5535 would eliminate the authority of the Treasury’s Federal Insurance Office (FIO) to subpoena insurance companies and otherwise collect data to conduct oversight of the industry, including as it relates to climate risk. It would also eliminate the authority of Treasury’s Office of Financial Research (OFR) to subpoena insurance companies, and it would add impediments to the ability of the Financial Stability Oversight Council (FSOC), Board of Governors of the Federal Reserve System (Fed), and Federal Deposit Insurance Corporation (FDIC) to collect data relating to any insurance company that may pose a systemic risk as those agencies carry out their financial stability duties under Title I or Title II of the Dodd-Frank Act.

The business of insurance is primarily regulated by the states. FIO was established under Title V of the Dodd-Frank Wall Street Reform and Consumer Protection Act and was given the authority to monitor all aspects of insurance, including the availability and affordability of insurance for traditionally underserved communities and consumers. Notably, AIG, a global insurance company, was able to amass significant financial exposure to mortgage-backed securities and other complex financial products that led to its failure, a resulting financial crisis and ultimately a massive bailout by the Federal Reserve and the Department of the Treasury. FIO now ensures that the federal government is able to monitor the impacts of the insurance industry on the U.S. economy and financial systems, including banking, mortgage lending, the cost of housing, and more.

This bill is just another attack on the Biden administration’s efforts to combat climate change. One of the most recent examples in which FIO is using its data collection authority and may, if needed, leverage its subpoena authority under the FIO Act (31 U.S.C. § 313(e)(6)) is in response to President Biden’s May 20, 2021 Executive Order on Climate-Related Financial Risk (EO 14030).¹ In part, the EO called on FIO to use its statutory authorities to assess the effects of climate change and related risks on the availability and affordability of insurance in the U.S. FIO cited a lack of public data and data available through State regulators and other federal agencies in a timely manner in order to meet FIO’s assessment requirements under the President’s EO and stated that it expects 100% response from the industry.

FIO has never used its subpoena authority, but this is one of the few critical tools that FIO has to collect information necessary for it to do its job. FIO has never used its subpoena authority. As former FIO Director McRaith testified in 2011, the subpoena au-

¹FIO, *Supporting Statement—Information Collection Requirement* OMB Control Number 1505-NEW (Oct. 2023).

thority is to be used only as a last resort.² During the time of markup in the 112th Congress, Moody's Investors Service was cited as having characterized the bill as "limit[ing] financial transparency and the effectiveness of regulatory supervision."³

As part of its monitoring authorities, FIO has the limited ability to issue subpoenas for the purposes of collecting data and information from the industry.⁴ Because FIO does not regulate the insurance industry, and given potential limitations to data sharing between the States and Federal government, FIO's subpoena power can be crucial to the federal government's ability to monitor potential financial risks and weaknesses within the industry that may also affect consumers' financial well-being.

This bill would uniquely limit the federal government's ability to monitor and oversee systemic risks in the insurance industry as compared to other financial institutions, creating blind spots similar to those that led to the bailout of AIG in 2008. H.R. 5535 would eliminate OFR's authority to subpoena insurance companies, while permitting OFR to subpoena any other financial company if need be. Congress established OFR under Title I of Dodd-Frank to support the work of FSOC to monitor and mitigate threats to financial stability. While various types of financial companies can pose various levels of risk to financial stability, the near failure and ensuing bailout of AIG during the 2008 financial crisis highlights the systemic risk that a large, complex insurance company may have.

Additionally, H.R. 5535 would add unique impediments to the ability of FSOC to gather data and designate any insurance company as a systemically important financial institution (SIFI) for heightened supervision and regulation by the Fed. Specifically, if FSOC is unable to collect the data it needs from a State or Federal regulator, FSOC could only collect information through lengthy procedures required under the Paperwork Reduction Act, which would slow down FSOC's designation process for this type of nonbank financial company.

Moreover, the Fed and FDIC would be similarly constrained and required to use the Paperwork Reduction Act process to gather data from the insurance company in conducting oversight of a SIFI insurance company or resolving it through the Orderly Liquidation Authority under Title II of Dodd-Frank.

This bill is opposed by the following groups: Americans for Financial Reform and Public Citizens.

For these reasons, we oppose H.R. 5535.

Sincerely,

MAXINE WATERS,
Ranking Member.
 NYDIA M. VELÁZQUEZ,
 GREGORY W. MEEKS,
 AL GREEN,

²*Id.*; See also House Committee on Financial Services, *Insurance Oversight: Policy Implications for U.S. Consumers, Businesses, and Jobs*, Part 2, 112th Cong. (Oct. 25, 2011) (Serial No. 112-77).

³ALM, *Moody's: Bill Rolling Back FIO Authority Credit-Negative for Industry* (Dec. 19, 2011).

⁴*Note:* Under Dodd-Frank, the FIO director can issue a subpoena only if they make a written determination that (1) the data is necessary to carry out FIO's statutorily enumerated functions and (2) FIO has coordinated with other Federal and State regulators and publicly available sources.

Ranking Member, Subcommittee on Oversight and Investigations.

JIM HIMES,

BRAD SHERMAN,

Ranking Member, Subcommittee on Capital Markets.

STEPHEN F. LYNCH,

EMANUEL CLEAVER II,

BILL FOSTER,

JOYCE BEATTY,

AYANNA PRESSLEY,

SYLVIA R. GARCIA,

SEAN CASTEN,

RASHIDA TLAI,

NIKEMA WILLIAMS,

Members of Congress.

