

CLAIMS DEADLINES ADMINISTERED BY CALIFORNIA DEPARTMENT OF INSURANCE (“DOI”)

Time Deadline	Action Requirement	CCR Title 10
5 Years	Maintain all open or closed files for inspection by the DOI	§ 2695.3(b)(1),(3)
15 Days	Provide written response to any claimant communication that reasonably suggests response is expected (notice of legal action)	§ 2695.5(b)
15 Days	Upon notice of a claim, provide claimant necessary claim forms, instructions and reasonable assistance (except when first notice is a notice of legal action).	§ 2695.5(e)(2)
15 Days	Upon notice of a claim, begin any necessary investigation of the claim.	§ 2695.5(e)(3)
21 Days	Respond in writing to any inquiry from DOI re: any claim	§ 2695.5(a)
90 Days	Adopt and communicate to insurance & claims agents’ appropriate written standards re: prompt claims investigation & processing after effective date of adoption of new regulations or revisions.	§ 2695.6(a)
40 Days	After receipt of Proof of Claim, accept or deny the claim, in whole or in part, clearly documenting both the amounts accepted and denied.	§ 2695.7(b)
40 Days (and every 30 Days thereafter)	Provide written notice re: inability to affirm or deny coverage (continuing notice is required until such determination is made).	§ 2695.7(c)(1)
60 Days (before limit expires)	Provide 3d Party Claimant notice of running of any statute of limitation/private limitation of action (unless represented by counsel).	§ 2695.7(f)
30 Days (before limit expires)	Provide 1st Party/UM Claimant notice of running of any statute of limitation/private limitation of action (unless represented by counsel).	§ 2695.7(f)
30 Days	Tender payment of undisputed amount to 3d Party Claimant after insurer’s affirmation of coverage & liability and, if necessary, 3d Party has provided a properly executed release obligation accepted in the claim (except if policy provides longer waiting period)	§ 2695.7(h)
30 Days	In claims where multiple coverages are involved, tender undisputed payment unless impairment of insured’s interests would result in piecemeal payout (except if policy provides longer waiting period).	§ 2695.7(h)
80 Days	Provide written notice to claimant if more time is needed to determine whether a reasonably suspected false or fraudulent claim should be accepted or denied; such belief by insurer needs to be supported by specific information available for DOI review.	§ 2695.7(k)(1)

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