



UNIVERSALLY APPLICABLE BULLETIN NO. 11

TO: ALL INTERESTED PARTIES AND ANYONE ENGAGED IN ANY ASPECT OF THE BUSINESS OF INSURANCE IN DELAWARE

RE: SUMMARY OF INSURANCE LAWS ENACTED IN 2025

DATED: November 6, 2025

The purpose of this Bulletin is to summarize laws enacted following the 2025 Session of the 153rd Delaware General Assembly. It is for informational purposes only and is not intended to be an exhaustive list or a detailed analysis. This Bulletin does not constitute legal advice. Entities should consult with their legal counsel to ensure compliance with all newly enacted statutory requirements. All regulated entities should refer to the [Chapter Laws of Delaware](#) for the 2025 Session for the complete text of these recently enacted laws, and are advised that additional Acts passed by the General Assembly and not listed on the summary may also affect their business operations in Delaware.

2025 LEGISLATIVE SESSION SUMMARY

I. GENERAL BILLS

HOUSE BILL 18

Relating to Licensing Fees and Department of Insurance Funding (*Effective May 7, 2025*)

Refer to: Domestic & Foreign Bulletin [No. 152](#) & Producer/Adjuster Bulletin [No. 37](#)

- Retention of Licensing Fees: The Department shall retain 15% of licensing fees for insurance professionals in the Regulatory Revolving Fund pursuant to 18 *Del. C.* § 305.
- Licensing Fee Increase: Fees for insurance professionals will increase by \$25 under 18 *Del. C.* § 701 to support regulatory operations.
- Centralization of Licensing Fees: Consolidation of licensing fees under 18 *Del. C.* § 701 for clarity and efficiency.

Questions may be emailed to compliance@delaware.gov.

HOUSE SUBSTITUTE 1 FOR HOUSE BILL 139

Relating to Line-of-Duty Hearings (*Effective July 30, 2025*)

- Amends 18 *Del. C.* § 6605 to grant standing to the State Insurance Coverage Office (ICO), which administers claims under the State Self-Insurance Fund under Title 18,

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Chapter 65, to contest participate in claims filed against the Line-of-Duty Death Benefit Fund (Title 18, Chapter 66).

- Eliminates the requirement that the Insurance Commissioner hold a hearing for uncontested claims.

The Department intends to promulgate a new regulation to implement procedural standards and hearing requirements under 18 *Del. C.* § 6605, as amended.

Questions may be emailed to doi-legal@delaware.gov.

HOUSE BILL 7

Relating to Taxes (*Effective April 14, 2025*)

- Amends 18 *Del. C.* § 702 to resolve an internal inconsistency in the Insurance Code regarding captive insurance companies and surplus lines brokers' premium tax payments. Surplus lines brokers and captive insurance companies will continue adhering to their established practice of paying premium taxes as outlined in 18 *Del. C.* §§ 1917 and 6914, respectively.

Questions may be emailed to doi_tax@delaware.gov.

HOUSE BILL 74

Relating to Insurance Examinations (*Effective August 25, 2025*)

- Amends 18 *Del. C.* § 321 to clarify that documents or information submitted to the Insurance Commissioner during an examination or investigation do not lose their privileged or confidential status as a result of the disclosure to the Insurance Commissioner, whether or not the information is redacted.

Questions may be emailed to doi-legal@delaware.gov.

HOUSE SUBSTITUTE 1 FOR HOUSE BILL 55

Relating to Prohibited Discrimination on the Basis of Military Status (*Effective July 23, 2025*)

Refer to: Domestic & Foreign Bulletin No. 161

- This Act is intended to supplement protections under federal law for members of the military, their families, and veterans by adding “military status” as a protected class for purposes of the State’s public accommodations, housing, insurance, education, and employment laws. *See* 18 *Del. C.* § 2304.
- Clarifies exceptions for differential treatment permitted under state or federal law or government contracts.

Questions may be emailed to compliance@delaware.gov.

II. LIFE AND HEALTH

SENATE BILL 12 WITH SENATE AMENDMENT 1

Relating to the Delaware Pre Authorization Act of 2025 (*Effective August 25, 2025*)

Refer to: Domestic & Foreign Bulletin No. 163

- Amends Chapters 33 and 35 of Title 18, and Chapter 52 of Title 29, establishing

uniform standards for pre-authorization of healthcare services to improve transparency, timeliness, and consistency in utilization review practices.

- Applies to all health insurance policies, contracts, or certificates issued, renewed, modified, altered, amended or reissued in Delaware after December 31, 2026.

Questions may be emailed to compliance@delaware.gov.

SENATE BILL 71

Relating to Medicare Supplement Policies (*Effective January 1, 2026*)

- Amends Title 18, Chapter 34, to create a special enrollment period for individuals already enrolled in a Medicare supplement policy or certificate.
- Allows eligible enrollees to cancel their existing policy and purchase another Medicare supplement policy or certificate with the same or lesser benefits.
- Establishes an enrollment window that begins 30 days before an eligible individual's birthday and remains open for at least 30 days after.
- Requires carriers to notify enrollees at least 30 days before the start of the open enrollment period and inform them of any policy modifications.
- Prohibits carriers from denying coverage or adjusting rates based on medical history during the special enrollment period.
- Permits individuals enrolled in a Medicare Advantage plan to cancel their plan during the annual Medicare open enrollment periods and apply for a Medicare supplement policy.
- For individuals transitioning from Medicare Advantage to a Medicare supplement policy:
 - Prohibits denial of applications for Medicare supplement policies.
 - Allows carriers to apply individual rating and pre-existing condition limitations to new policyholders switching from Medicare Advantage.

Questions may be emailed to compliance@delaware.gov.

HOUSE SUBSTITUTE 1 FOR HOUSE BILL 212

Relating to Overpayment Recovery and Audit (*Effective September 03, 2025*)

- Amends Title 18 of the Delaware Code, specifically Chapters 27, 33, and 33A, to revise overpayment recovery timelines and audit standards for health carriers and health plans.
- Reduces the overpayment recovery window from 24 months to 12 months after the original claim payment.
- Defines recovery initiation as the point when a carrier **first identifies a payment error** through an audit report or similar communication to the provider.
- Updates fraud exemption criteria to require documented evidence of fraud, abuse, or intentional misconduct (based on physical review of claims data or statements) rather than a reasonable belief.
- Aligns clawback rules for healthcare providers with those already applied to pharmacies, ensuring consistency across provider types.
- Enhances pharmacy audit protections by requiring written notice from pharmacy benefits managers (PBMs) or audit entities before initiating audits.
- Limits PBM misuse of investigative audits by requiring definitive proof (e.g., via

physical review of claims data or investigation) before applying audit-related exclusions.

Questions may be emailed to compliance@delaware.gov.

HOUSE BILL 209

Relating to Health Care and the Patient Protection and Affordable Care Act (*Effective July 21, 2025*)

- Updates Delaware law to align with federal regulations under the Patient Protection and Affordable Care Act as of January 1, 2025, including provisions related to nondiscrimination ([Section 1557](#)), essential health benefits, special enrollment periods, and telehealth, by updating a statutory cross-reference.

Questions may be emailed to compliance@delaware.gov

HOUSE BILL 56

Relating to Coverage for Removal of Excess Skin and Subcutaneous Tissue (*Effective July 21, 2025*)

- Amends Title 18, Chapters 33 and 35 to require coverage for the removal of excess skin and subcutaneous tissue, including panniculectomies, when deemed medically necessary, as defined in § 3371(8) for individual health insurance plans and § 3581(8) for group and blanket health insurance plans.
- Requires equivalent coverage under the State employee health insurance plan and State Medicaid plans.
- Applies to all policies, contracts, or certificates issued, renewed, modified, altered, amended, or reissued after December 31, 2026.

Questions may be emailed to compliance@delaware.gov.

HOUSE BILL 140

Relating to End of Life Options (The Ron Silverio/Heather Block End of Life Options Law) (*Effective January 1, 2026, or upon promulgation of final regulations, whichever is earlier*)

- Amends Title 16 by creating new Chapter 25C, which permits terminally ill adult Delaware residents, with a prognosis of six months or less, to voluntarily request and self-administer life-ending medication in a humane and dignified manner under strict safeguards.
- Requires dual confirmation of diagnosis, decision-making capacity, and voluntariness by both an attending and consulting physician or advanced practice registered nurse.
- Mandates informed consent, including disclosure of all end-of-life care options.
- Requires psychiatric evaluation if decision-making capacity is in question. An individual determined not to have decision-making capacity is not qualified under this Act.
- Establishes procedural safeguards, including witnessed written request, two waiting periods, and rescission rights.
- Protects patient rights by prohibiting coercion and ensuring insurance coverage cannot be denied or altered based on this option.
- The Act in no way restricts life carriers from imposing typical waiting periods for benefits upon policy purchases.

- Allows provider and institutional refusal to participate without penalty.
- Clarifies legal status, asserting that actions under this law do not constitute elder abuse, suicide, assisted suicide, homicide, or euthanasia.
- Provides immunity for those acting in good faith and in accordance with accepted standards.
- Requires DHSS oversight, including data collection, compliance review, and annual public reporting.
- Authorizes regulatory support from the Department of State and Office of Controlled Substances.

Questions may be emailed to compliance@delaware.gov.

III. INFORMATIONAL PURPOSES ONLY

SENATE CONCURRENT RESOLUTION 111

Establishing an Automobile Insurance Reform Task Force for the development of consumer cost-saving legislation, regulations, and policies (*First meeting to be held no later than 09/01/2025*)

- Establishes the Automobile Insurance Reform Task Force to examine and address the rising costs of automobile insurance in both the private passenger and commercial markets, explore cost-saving reforms, and recommend solutions to improve affordability and market stability.
- Task Force written recommendations are to be submitted to the General Assembly and the Insurance Commissioner by January 30, 2026.

HOUSE SUBSTITUTE 1 FOR HOUSE BILL 128

Relating to the Family and Medical Leave Insurance Program (*Effective July 30, 2025*)

- Amends 19 *Del. C.* § 3716 to clarify that an employer satisfying its Paid Family Medical Leave obligations through a private plan is not required to submit claim documentation to the Department of Labor (DOL), except in cases of an appeal, complaint, audit, or specific inquiry from the DOL.
- Stipulates that employers that use the state plan to fulfill their obligations under Title 19, Chapter 37 must provide all mandatory lines of coverage required by the chapter through the state plan.
- Specifies that private plan employers with fewer than 25 employees, who are otherwise exempt due to company size, and who voluntarily elect to provide coverage under Title 19, Chapter 37, will be subject to all provisions contained within Chapter 37.
- Requires the DOL to accept applications for approval of an employer's use of a private plan on a rolling basis, with effective dates of January 1, April 1, July 1, or October 1.

HOUSE SUBSTITUTE 1 FOR HOUSE BILL 147

Relating to the Uniform Real Property Transfer on Death Act (*Effective December 4, 2025*)

- Establishes a statutory framework allowing Delaware property owners to transfer real estate upon death without probate through a Transfer on Death (TOD) deed.
- Allows owners to name beneficiaries who automatically receive the property upon the owner's death without probate or court involvement.
- Preserves owner control during life. TOD deeds are fully revocable and do not affect ownership until death.
- Clarifies estate administration. Allows executors to access personal property located on TOD- transferred real estate to safeguard estate assets.
- Aligns with national standards by adopting provisions authored by the Uniform Law Commission.

SENATE BILL 145 WITH SENATE AMENDMENT 1

Relating to Workers' Compensation Payments (*Effective June 30, 2025*)

- Modernizes Title 19, Chapter 23 of the Delaware Code to align with current administrative practices and strengthen funding for workplace inspection and safety functions.
- Permits direct deposit for workers' compensation payments, streamlining benefit delivery through updated disbursement methods.
- Establishes a clear funding mechanism by requiring insurance carriers to remit assessments that fully finance safety inspection activities. The reimbursement rate for these functions is increased from 66.6% to 100%, with annual budget caps providing fiscal oversight and predictability.

SENATE BILL 164 WITH SENATE AMENDMENT 1

Relating to Workers' Compensation (*Effective January 31, 2026*)

- Increases reimbursement rates for evaluation and management (E&M) medical services under Title 19 of the Delaware Code by providing a one-time 3% increase in aggregate reimbursement for E&M-coded medical services in workers' compensation cases.
- Supports provider participation by improving compensation for physicians treating workers' compensation patients.

HOUSE BILL 205 WITH HOUSE AMENDMENTS 1 AND 2

Relating to Healthcare Services (*Effective July 21, 2025*)

This Act protects Delaware healthcare providers who offer lawful services in the state, even if those services are restricted or penalized elsewhere. Specifically, it:

- Clarifies that physicians, physician assistants, and nurses are not engaging in unprofessional conduct under Delaware law when providing lawful care, regardless of how that care is viewed in other states.
- Restricts disclosure of patient communications and records in civil proceedings without patient consent, with limited exceptions.
- Shields providers from civil or criminal liability arising in other states for care that is legal in Delaware.

- Establishes a cause of action for individuals penalized in another state for providing or receiving healthcare services that are lawful in Delaware, unless the conduct occurred entirely outside the state.
- Prohibits carriers from taking adverse action against providers for delivering lawful care in Delaware.
- Bars state and local agencies from cooperating with out-of-state or federal investigations into healthcare services that are legal under Delaware law.

Note: Domestic surplus lines carriers must comply with HB 205 pursuant to 18 *Del. C.* § 1932, which requires them to adhere to all provisions of the Delaware Code applicable to Delaware-domiciled carriers, unless specifically exempted. HB 205 does not provide such an exemption.

HOUSE BILL 192

Relating to Special Funds (*Effective July 1, 2025*)

- Amends 18 *Del. C.* § 708, expanding eligibility for special fund pension disbursements for police officers, firefighters, and surviving spouses, raising the pension level an individual is permitted to receive and still be eligible for a distribution from the special fund from \$35,000 or less to \$55,000 or less.

IV. PREVIOUSLY ENACTED LEGISLATION

Applies to all policies, contracts, or certificates issued, renewed, modified, altered, amended, or issued after December 31, 2025

HOUSE SUBSTITUTE 2 FOR HOUSE BILL 110

Relating to Insurance Coverage for Termination of Pregnancy

- Amends [Title 31](#) to require all health benefit plans delivered or issued under the Medicaid program to cover services related to the termination of pregnancy.
- Amends [Title 18](#) to:
 - Add the definition of “religious employer”.
 - Require both individual and group health carriers to cover services related to the termination of pregnancy with identical cost-sharing prohibitions, and coverage shall not be subject to any deductible, coinsurance, copayment, or any other cost-sharing requirement and shall apply to the full scope of services permissible under the law.
- Amends [Title 29](#) to require coverage for services related to the termination of pregnancy under the state employee health plan, and coverage shall not be subject to any deductible, coinsurance, copayment, or any other cost-sharing requirement and shall apply to the full scope of services permissible under the law.
- Caps the benefit at \$750 per year per covered individual for Medicaid; and for private insurance it allows the benefit to be limited to \$750 per covered individual per year.
- Carriers shall simultaneously comply with 45 CFR § 156.280 relating to segregation of funds for abortion services.

- Delaware will permit sequestered funds to be reintegrated into reserves consistent with practices for other unspent premiums.

Questions may be emailed to compliance@delaware.gov.

HOUSE BILL 274

Relating to Insurance Coverage of Allergen Introduction Dietary Supplements for Infants

- Amends [Chapter 33](#) and [Chapter 35](#) of Title 18, Chapter 52 of Title 29, and Chapter 5 of Title 31, mandating that all health benefit plans subject to regulation under Delaware law, including Medicaid and the State employee health benefit plan, provide coverage, at no cost when prescribed to infants, of at least 1 early peanut allergen introduction dietary supplement and at least 1 early egg allergen introduction dietary supplement.
- Applies to all policies, contracts, or certificates issued, renewed, modified, altered, amended, or issued after December 31, 2025.

Questions may be emailed to compliance@delaware.gov.

HOUSE BILL 364

Relating to Cancer Coverage

- Amends [Chapter 33](#) and [Chapter 35](#) of Title 18 to require insurance companies to cover any FDA approved drug prescribed to treat the side effects of metastatic cancer treatment.
- Prohibits insurance companies from step therapy practices mandating that patients first fail to respond to a different drug or prove a history of failure of such drug.

Questions may be emailed to compliance@delaware.gov.

HOUSE BILL 362

Relating to Coverage for Doula Services

- Amends [Chapter 33](#) and [Chapter 35](#) of Title 18 to add coverage for doula services, defining doula services as support and assistance during labor and childbirth, prenatal and postpartum support and education, breastfeeding assistance and lactation support, parenting education, and support for a birthing person following loss of pregnancy.
- Requires coverage for doula services when provided by a doula certified by the Delaware Certification Board, including at least three prenatal visits each up to 90 minutes, three postpartum visits each up to 90 minutes, attendance through labor and birth, and additional postpartum visits recommended by a Title 24 licensed clinician.

Questions may be emailed to compliance@delaware.gov.

The Department expects all required filings to incorporate the new mandates outlined above, as applicable, and requests that carriers notify consumers of the availability of the new coverage types accordingly.

Additionally, based on the above summaries, carriers are required to review current forms, rates, advertisements, and rules to determine if new and/or revised filings are required and to timely

submit such filings in SERFF for the Department's review and approval. Questions regarding SERFF filings should be emailed to rate@delaware.gov.

Copies of Delaware [Insurance Regulations](#), [Insurance Bulletins](#), and [Delaware Insurance Laws](#) are accessible through these links or by visiting the Department's website at www.insurance.delaware.gov. Copies of [Senate](#) and [House](#) bills are accessible through these links or by visiting the Delaware General Assembly website at www.legis.delaware.gov.

This Bulletin shall be effective immediately and shall remain in effect unless withdrawn or superseded by subsequent law, regulation or bulletin.



Trinidad Navarro
Delaware Insurance Commissioner

NOTE: This Bulletin is intended solely for informational purposes. It is not intended to set forth legal rights, duties, or privileges, nor is it intended to provide legal advice. Readers should consult applicable statutes and rules and contact the Delaware Department of Insurance if additional information is needed.