

drawings, engineer reports, contractor reports, statements, photographs, video recordings, or any other documents or communications unless the record that the insurance company prepared or used during its adjustment of the policyholder's claim is legally privileged. An insurance company may keep confidential adjuster notes, logs, and any other documents or communications prepared in conjunction with a fraud investigation.

15. File a complaint against any insurance company, producer or adjuster with the Department of Insurance, and have that complaint investigated by the department.
16. Receive a readable and complete property insurance policy, and request a duplicate or replacement policy as needed.

Contact the Office of Consumer Advocacy & Diversity

Call **800-259-5300** or **225-219-4775**.

Visit our website: **www.lds.la.gov**

Email your questions: **consumeradvocacy@lds.la.gov**

Other consumer contacts for the Department of Insurance

Consumer Services.....	225-342-5900
<i>(i.e. insurance questions and complaints)</i>	
Senior Health Insurance Information Program.....	225-342-5301
Fraud.....	225-342-4956

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Louisiana Department of Insurance

Office of Consumer Advocacy & Diversity



What can we do for you?

Tim Temple
Commissioner of Insurance

What is the Office of Consumer Advocacy & Diversity?

The primary purpose of the Office of Consumer Advocacy & Diversity is to educate and assist consumers with insurance questions and to ensure their rights are upheld according to the Policyholder Bill of Rights.

Consumer Advocacy & Diversity staff frequently participate in events and speaking engagements to provide insurance resources and explain the services available to consumers through the Department of Insurance.

The office also reports violations of rules, regulations or laws to the appropriate official, division or office of the department, which may take further action as deemed appropriate.

Policyholder Bill of Rights

Policyholders Shall Have the Right to...

1. Competitive pricing practices and marketing methods that enable them to determine the best value among comparable coverage in accordance with the law.
2. Insurance advertising that is not false and other selling approaches that provide accurate and balanced information on the benefits and limitations of a policy in accordance with the law.
3. An insurance company that is financially stable.
4. Be treated fairly and be free from unfair or deceptive acts or practices in accordance with the law.
5. Receive service from competent, honest insurance agents who will answer their questions promptly.
6. Receive the appropriate disclosure form as an insert in the front of the insurance policy that complies with the law.
7. Balanced and positive regulation by the Department of Insurance.
8. Check the license status of an insurance company, producer or adjuster.
9. Receive written notice of cancellation or nonrenewal at least 30 days prior to the effective date of the cancellation or nonrenewal, unless the cancellation or nonrenewal is for nonpayment of premium; and shall have the right to protection from improper cancellation or nonrenewal in accordance with the law.
10. Receive the reason for any cancellation or nonrenewal of coverage in writing.
11. Cancel their policy and receive a refund of any unearned premium. If a policy was funded by a premium finance company, the unearned premium will be returned to the premium finance company to pay toward the policyholder's financing loan.
12. A written notification detailing any change in policy provisions at renewal.
13. Receive payment of the amount of any property damage claim, or a portion of the claim due, or a written offer to settle any property damage claim within 30 days after receipt of satisfactory proof of loss in accordance with the law. If a claim is denied, policyholders shall have the right to receive a written explanation as to the reason for denial, in whole or in part, of any claim made under their policy of insurance.
14. Relative to first-party property damage claims, policyholders shall have the right to request and receive from the insurance company any portion of the claim file, including but not limited to any written reports, estimates, bids, plans, measurements,