

1-1 By: Taylor of Galveston S.B. No. 1628  
 1-2 (In the Senate - Filed March 12, 2015; March 23, 2015, read  
 1-3 first time and referred to Committee on Business and Commerce;  
 1-4 April 20, 2015, reported adversely, with favorable Committee  
 1-5 Substitute by the following vote: Yeas 6, Nays 3; April 20, 2015,  
 1-6 sent to printer.)

1-7 COMMITTEE VOTE

	Yea	Nay	Absent	PNV
1-8				
1-9	X			
1-10	X			
1-11		X		
1-12	X			
1-13	X			
1-14	X			
1-15	X			
1-16		X		
1-17		X		

1-18 COMMITTEE SUBSTITUTE FOR S.B. No. 1628 By: Taylor of Galveston

1-19 A BILL TO BE ENTITLED  
 1-20 AN ACT

1-21 relating to insurance claims and certain prohibited acts and  
 1-22 practices in or in relation to the business of insurance; amending  
 1-23 provisions that are or may be subject to a criminal penalty.

1-24 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-25 SECTION 1. Section 541.060, Insurance Code, is amended by  
 1-26 adding Subsection (c) to read as follows:

1-27 (c) A bona fide dispute as to whether an insurer is liable  
 1-28 for a claim made under an insurance policy does not constitute an  
 1-29 unfair settlement practice under this section.

1-30 SECTION 2. Section 541.151, Insurance Code, is amended to  
 1-31 read as follows:

1-32 Sec. 541.151. PRIVATE ACTION FOR ACTUAL DAMAGES AUTHORIZED.

1-33 (a) Except as provided by Section 541.1511, a [A] person who  
 1-34 sustains actual damages may bring an action against another person  
 1-35 for those damages caused by the other person engaging in an act or  
 1-36 practice:

1-37 (1) defined by Subchapter B to be an unfair method of  
 1-38 competition or an unfair or deceptive act or practice in the  
 1-39 business of insurance; or

1-40 (2) specifically enumerated in Section 17.46(b),  
 1-41 Business & Commerce Code, as an unlawful deceptive trade practice  
 1-42 if the person bringing the action shows that the person relied on  
 1-43 the act or practice to the person's detriment.

1-44 (b) For purposes of this subchapter, "actual damages" means  
 1-45 an injury independent of the harm resulting from the insurer's  
 1-46 denial of policy benefits. The policy benefits wrongfully  
 1-47 withheld, as well as any attorney's fees or costs incurred to  
 1-48 recover those policy benefits, do not constitute "actual damages"  
 1-49 for purposes of this subchapter.

1-50 SECTION 3. Subchapter D, Chapter 541, Insurance Code, is  
 1-51 amended by adding Section 541.1511 to read as follows:

1-52 Sec. 541.1511. ACTION RELATING TO CLAIM FOR PROPERTY  
 1-53 DAMAGE: INSURER ELECTION FOR LEGAL RESPONSIBILITY FOR ACTIONS OF  
 1-54 AGENTS AND EMPLOYEES. (a) This section applies only to an action  
 1-55 brought by an insured relating to or arising from a claim made under  
 1-56 an insurance policy for damage to or loss of real property or  
 1-57 tangible personal property alleged to be covered by the policy.

1-58 (b) An insured seeking damages in an action to which this  
 1-59 section applies may not file or maintain an action under this  
 1-60 subchapter against an employee, agent, representative, or adjuster

2-1 issuing policies, handling claims, or performing other acts on  
2-2 behalf of an insurer, and any such action shall be immediately  
2-3 dismissed, if:

2-4 (1) the employee, agent, representative, or adjuster  
2-5 was not named in a notice given under Section 541.1541; or

2-6 (2) not later than the 30th day after the date the  
2-7 notice given under Section 541.1541 is received, the insurer agrees  
2-8 in writing to be liable for any act or omission of the employee,  
2-9 agent, representative, or adjuster related to or arising out of the  
2-10 insured's claim.

2-11 SECTION 4. The heading to Section 541.152, Insurance Code,  
2-12 is amended to read as follows:

2-13 Sec. 541.152. ACTUAL DAMAGES, ATTORNEY'S FEES, AND OTHER  
2-14 RELIEF.

2-15 SECTION 5. The heading to Section 541.154, Insurance Code,  
2-16 is amended to read as follows:

2-17 Sec. 541.154. PRIOR NOTICE OF ACTION OTHER THAN ACTION  
2-18 RELATING TO CLAIM FOR PROPERTY DAMAGE.

2-19 SECTION 6. Section 541.154(a), Insurance Code, is amended  
2-20 to read as follows:

2-21 (a) Except as provided by Section 541.1541, a [A] person  
2-22 seeking damages in an action against another person under this  
2-23 subchapter must provide written notice to the other person not  
2-24 later than the 61st day before the date the action is filed.

2-25 SECTION 7. Subchapter D, Chapter 541, Insurance Code, is  
2-26 amended by adding Section 541.1541 to read as follows:

2-27 Sec. 541.1541. PRIOR NOTICE OF ACTION RELATING TO CLAIM FOR  
2-28 PROPERTY DAMAGE. (a) This section applies only to an action  
2-29 brought by an insured relating to or arising from a claim made under  
2-30 an insurance policy for damage to or loss of real property or  
2-31 tangible personal property alleged to be covered by the policy.

2-32 (b) An insured seeking damages in an action to which this  
2-33 section applies must provide written notice complying with this  
2-34 section to all potential defendants not later than the 61st day  
2-35 before the date the action is filed.

2-36 (c) If the amount sought by the insured in the action  
2-37 involves a claim for damage items previously submitted to an  
2-38 insurer, the notice must contain a statement signed by the insured:

2-39 (1) stating the specific damage items and the amount  
2-40 alleged to be owed by the insurer under the insurance contract;

2-41 (2) the amount of the actual damages, other damages,  
2-42 interest, and expenses, specifically stated for each item, that the  
2-43 insured alleges are owed by the insurer;

2-44 (3) the amount of attorney's fees the insured  
2-45 reasonably has incurred as of the date the notice is given in  
2-46 asserting the claim against the insurer;

2-47 (4) a stated amount that includes the amounts  
2-48 described by Subdivisions (1) through (3) that the insured will  
2-49 accept in full and final satisfaction of the claim; and

2-50 (5) the name of every person to whom notice is given  
2-51 under this section and a brief description of each person's  
2-52 relationship to the insured's claim.

2-53 (d) If the amount sought by the insured in the action  
2-54 involves a claim for damage items not previously submitted to the  
2-55 insurer, the notice must contain, in addition to the items listed in  
2-56 Subsection (c):

2-57 (1) a statement of the reason the damage items were not  
2-58 previously submitted to the insurer;

2-59 (2) copies of reports, estimates, photographs, and  
2-60 other items reasonably supporting the insured's additional damage  
2-61 items; and

2-62 (3) a statement that the insured will cooperate in  
2-63 allowing the insurer to inspect the insured property for purposes  
2-64 of investigating the additional damage items.

2-65 (e) Notice required by this section must be sent to the  
2-66 insurer by certified mail, return receipt requested.

2-67 (f) Notice under this section is not required if giving  
2-68 notice is impracticable because the action:

2-69 (1) must be filed to prevent the statute of

3-1 limitations from expiring; or

3-2 (2) is asserted as a counterclaim.

3-3 SECTION 8. Section 541.155, Insurance Code, is amended to  
3-4 read as follows:

3-5 Sec. 541.155. ABATEMENT; DISMISSAL. (a) A person against  
3-6 whom an action under this subchapter is pending who does not receive  
3-7 [~~the~~] notice as required by Section 541.154 or 541.1541(c) may file  
3-8 a plea in abatement not later than the 30th day after the date the  
3-9 person files an original answer in the court in which the action is  
3-10 pending.

3-11 (b) The court shall abate the action if, after a hearing,  
3-12 the court finds that the person is entitled to an abatement because  
3-13 the claimant did not provide [~~the~~] notice as required by Section  
3-14 541.154 or 541.1541(c).

3-15 (c) An action is automatically abated without a court order  
3-16 beginning on the 11th day after the date a plea in abatement is  
3-17 filed if the plea:

3-18 (1) is verified and alleges that the person against  
3-19 whom the action is pending did not receive [~~the~~] notice as required  
3-20 by Section 541.154 or 541.1541(c); and

3-21 (2) is not controverted by an affidavit filed by the  
3-22 claimant before the 11th day after the date the plea in abatement is  
3-23 filed.

3-24 (d) An abatement under this section continues until the 60th  
3-25 day after the date notice is provided in compliance with Section  
3-26 541.154 or 541.1541(c).

3-27 (d-1) A person against whom an action under this subchapter  
3-28 is pending who does not receive notice as required by Section  
3-29 541.1541(d) may file a motion to dismiss not later than the 30th day  
3-30 after the date the person files an original answer in the court in  
3-31 which the action is pending.

3-32 (d-2) The court shall grant the motion under Subsection  
3-33 (d-1) if, after a hearing, the court finds that the person is  
3-34 entitled to dismissal because the claimant did not provide notice  
3-35 as required by Section 541.1541(d). A dismissal ordered under this  
3-36 section is without prejudice to the rights of the parties in a  
3-37 subsequent action.

3-38 (e) Subsections (d-1) and (d-2) do [~~This section does~~] not  
3-39 apply if Section 541.154(c) or 541.1541(f) applies. If Section  
3-40 541.154(c) or 541.1541(f) applies, the action may not be dismissed  
3-41 but shall be abated in accordance with Subsections (b), (c), and  
3-42 (d).

3-43 SECTION 9. Subchapter B, Chapter 542, Insurance Code, is  
3-44 amended by adding Section 542.0595 to read as follows:

3-45 Sec. 542.0595. PRIOR NOTICE OF ACTION RELATING TO CLAIM FOR  
3-46 PROPERTY DAMAGE; ABATEMENT OR DISMISSAL. (a) An insured may not  
3-47 bring suit under Section 542.060 in connection with a claim made  
3-48 under an insurance policy for damage to or loss of real property or  
3-49 tangible personal property unless the insured has provided written  
3-50 notice to the insurer with respect to the claim in accordance with  
3-51 Section 541.1541.

3-52 (b) A suit under Section 542.060 for which notice is  
3-53 required by this section is subject to abatement or dismissal to the  
3-54 same extent and in the same manner provided by Section 541.155 for  
3-55 an action under Subchapter D, Chapter 541.

3-56 SECTION 10. Section 542.060, Insurance Code, is amended to  
3-57 read as follows:

3-58 Sec. 542.060. LIABILITY FOR VIOLATION OF SUBCHAPTER.  
3-59 (a) If an insurer that is liable for a claim under an insurance  
3-60 policy knowingly fails to act [~~is not~~] in compliance with this  
3-61 subchapter, the insurer is liable to pay the holder of the policy or  
3-62 the beneficiary making the claim under the policy, in addition to  
3-63 the amount of the claim, interest on the unpaid amount of the claim  
3-64 at the rate of 18 percent a year as damages, together with  
3-65 reasonable attorney's fees.

3-66 (a-1) For purposes of Subsection (a), "knowingly" means  
3-67 that the insurer was actually aware at the time of the act or event  
3-68 that it was failing to comply with this subchapter. There is no  
3-69 liability under this section for a claim with respect to which there

4-1 is a bona fide dispute as to whether the insurer is liable.  
4-2 (b) If a suit is filed, interest and [the] attorney's fees  
4-3 payable under this section shall be taxed as part of the costs in  
4-4 the case.

4-5 (c) The liability for interest and attorney's fees provided  
4-6 by this section is the exclusive remedy for a violation of this  
4-7 subchapter. This section is not intended to affect a right or  
4-8 remedy provided by Chapter 541 or any other law outside this  
4-9 subchapter.

4-10 SECTION 11. Subchapter B, Chapter 542, Insurance Code, is  
4-11 amended by adding Section 542.0601 to read as follows:

4-12 Sec. 542.0601. LIABILITY WITH RESPECT TO CERTAIN CLAIMS.  
4-13 An insurer is not liable under Section 542.060 with respect to:

4-14 (1) a claim received by the insurer if it is determined  
4-15 through arbitration, litigation, or another dispute resolution  
4-16 process that the claim:

- 4-17 (A) is not covered under the insurance policy;
- 4-18 (B) was properly rejected;
- 4-19 (C) is invalid; or
- 4-20 (D) otherwise should not be paid by the insurer;

4-21 or

4-22 (2) a claim with respect to which an appraisal  
4-23 process:

4-24 (A) is invoked under the terms of the policy:  
4-25 (i) by the insurer or insured before the  
4-26 commencement of litigation;

4-27 (ii) by the defendant within 60 days after  
4-28 receiving notice of the commencement of litigation; or

4-29 (iii) by the plaintiff after the  
4-30 commencement of litigation; and

4-31 (B) results in a valid, signed award the amount  
4-32 of which is paid by the insurer not later than the 15th day after the  
4-33 date the insurer receives the award, consistent with the coverage,  
4-34 conditions, and limits provided by the policy, minus any prior  
4-35 payments and any applicable deductible amount.

4-36 SECTION 12. Subtitle A, Title 10, Insurance Code, is  
4-37 amended by adding Chapter 1808 to read as follows:

4-38 CHAPTER 1808. CLAIMS FOR PROPERTY DAMAGE

4-39 Sec. 1808.001. DEFINITION. In this chapter, "claim for  
4-40 property damage" means a request for payment under an insurance  
4-41 policy for damage to or loss of real property or tangible personal  
4-42 property alleged to be covered by the policy.

4-43 Sec. 1808.002. APPLICABILITY OF CHAPTER. This chapter  
4-44 applies to any claim under or related to an insurance policy that  
4-45 provides insurance coverage against damage to or loss of real  
4-46 property or tangible personal property, including a policy issued  
4-47 by an insurance company, reciprocal or interinsurance exchange,  
4-48 mutual insurance company, capital stock insurance company, county  
4-49 mutual insurance company, farm mutual insurance company, Lloyd's  
4-50 plan, or other legal entity authorized to write property insurance  
4-51 in this state or an eligible surplus lines insurer.

4-52 Sec. 1808.003. CLAIM FILING PERIOD. (a) A claimant must  
4-53 give an insurer prompt written notice of a claim for property damage  
4-54 after property covered under the policy is damaged or lost, but in  
4-55 no event later than the second anniversary of the date on which the  
4-56 damage to or loss of property that is the basis of the claim occurs.

4-57 (b) Failure to provide notice of a claim for property damage  
4-58 by the second anniversary of the date on which the damage to or loss  
4-59 of property that is the basis of the claim occurs is an absolute bar  
4-60 to recovery on the claim.

4-61 (c) Nothing in this section precludes an insurer from  
4-62 raising any defense available under the terms of its policy  
4-63 relating to prompt notice or that is otherwise available under the  
4-64 law.

4-65 SECTION 13. Section 4102.051(a), Insurance Code, is amended  
4-66 to read as follows:

4-67 (a) A person may not act as a public insurance adjuster in  
4-68 this state or hold himself or herself out to be a public insurance  
4-69 adjuster in this state unless the person holds a license or

5-1 certificate issued by the commissioner under Section 4102.053 or [7]  
5-2 4102.054 [~~or 4102.069~~].

5-3 SECTION 14. Section 4102.066(a), Insurance Code, is amended  
5-4 to read as follows:

5-5 (a) The commissioner shall collect in advance the following  
5-6 nonrefundable fees:

5-7 (1) for a public insurance adjuster license, an  
5-8 application fee in an amount to be determined by rule by the  
5-9 commissioner;

5-10 (2) for a nonresident public insurance adjuster  
5-11 license, an application fee in an amount to be determined by rule by  
5-12 the commissioner; and

5-13 (3) for each public insurance adjuster examination, a  
5-14 fee in an amount to be determined by rule by the commissioner [~~and~~  
5-15 [~~(4) for a public insurance adjuster trainee~~  
5-16 ~~certificate under Section 4102.069, a registration fee in an amount~~  
5-17 ~~to be determined by rule by the commissioner~~].

5-18 SECTION 15. Section 4102.103, Insurance Code, is amended by  
5-19 adding Subsection (d) to read as follows:

5-20 (d) A license holder may not enter into a contract with an  
5-21 insured and collect a commission as provided by Section 4102.104  
5-22 without the intent to actually perform the services customarily  
5-23 provided by a licensed public insurance adjuster for the insured.

5-24 SECTION 16. Section 4102.104(d), Insurance Code, is amended  
5-25 to read as follows:

5-26 (d) A public insurance adjuster may not accept any payment  
5-27 that violates the provisions of this section [~~Subsection (c)~~].

5-28 SECTION 17. Section 4102.158, Insurance Code, is amended by  
5-29 amending Subsection (a) and adding Subsections (d), (e), and (f) to  
5-30 read as follows:

5-31 (a) A license holder may not:

5-32 (1) participate directly or indirectly in the  
5-33 reconstruction, repair, or restoration of damaged property that is  
5-34 the subject of a claim adjusted by the license holder; or

5-35 (2) engage in any other activities that may reasonably  
5-36 be construed as presenting a conflict of interest, including  
5-37 soliciting or accepting any remuneration from, [~~or~~] having a  
5-38 financial interest in, or deriving any direct or indirect financial  
5-39 benefit from, any salvage firm, repair firm, construction firm, or  
5-40 other firm that obtains business in connection with any claim the  
5-41 license holder has a contract or agreement to adjust.

5-42 (d) A license holder may not directly or indirectly solicit,  
5-43 as described by Chapter 38, Penal Code, employment for an attorney  
5-44 or enter into a contract with an insured for the primary purpose of  
5-45 referring an insured to an attorney and without the intent to  
5-46 actually perform the services customarily provided by a licensed  
5-47 public insurance adjuster. This section may not be construed to  
5-48 prohibit a license holder from recommending a particular attorney  
5-49 to an insured.

5-50 (e) A license holder may not act on behalf of an attorney in  
5-51 having an insured sign an attorney representation agreement.

5-52 (f) A license holder must become familiar with and at all  
5-53 times act in conformance with the criminal barratry statute set  
5-54 forth in Section 38.12, Penal Code.

5-55 SECTION 18. Section 4102.160, Insurance Code, is amended to  
5-56 read as follows:

5-57 Sec. 4102.160. CERTAIN PAYMENTS PROHIBITED. A license  
5-58 holder may not:

5-59 (1) advance money to any potential client or insured;  
5-60 or

5-61 (2) pay, allow, or give, or offer to pay, allow, or  
5-62 give, directly or indirectly, to a person who is not a licensed  
5-63 public insurance adjuster a fee, commission, or other valuable  
5-64 consideration for the referral of an insured to the public  
5-65 insurance adjuster for purposes of [~~based on~~] the insured entering  
5-66 into a contract with that public insurance adjuster or for any other  
5-67 purpose [~~or~~

5-68 [~~(3) otherwise offer to pay a fee, commission, or~~  
5-69 ~~other valuable consideration exceeding \$100 to a person not~~

6-1 ~~licensed as a public insurance adjuster for referring an insured to~~  
6-2 ~~the license holder].~~

6-3 SECTION 19. Subchapter D, Chapter 4102, Insurance Code, is  
6-4 amended by adding Section 4102.164 to read as follows:

6-5 Sec. 4102.164. ACCEPTANCE OF REFERRAL PAYMENTS PROHIBITED.

6-6 (a) A licensed public insurance adjuster may not accept a fee,  
6-7 commission, or other valuable consideration of any nature,  
6-8 regardless of form or amount, in exchange for the referral by a  
6-9 licensed public insurance adjuster of an insured to any third-party  
6-10 individual or firm, including but not limited to an attorney,  
6-11 appraiser, umpire, construction company, contractor, or salvage  
6-12 company.

6-13 (b) The commissioner shall adopt rules necessary to  
6-14 implement and enforce this section.

6-15 SECTION 20. The heading to Section 27.02, Business &  
6-16 Commerce Code, is amended to read as follows:

6-17 Sec. 27.02. CERTAIN OFFERS MADE AND INFORMATION PROVIDED IN  
6-18 CONNECTION WITH INSURANCE CLAIMS [FOR EXCESSIVE CHARGES].

6-19 SECTION 21. Sections 27.02(a) and (b), Business & Commerce  
6-20 Code, are amended to read as follows:

6-21 (a) A person who sells goods or services, including a  
6-22 contractor, appraiser, estimator, or insurance restoration  
6-23 contractor, commits an offense if, in connection with a claim for  
6-24 property loss or damage under a property or casualty insurance  
6-25 policy:

6-26 (1) the person advertises or promises to [provide the  
6-27 good or service and to] pay, waive, absorb, rebate, subsidize,  
6-28 credit, or otherwise cover for any reason[+]

6-29 [~~(A)~~] all or part of any applicable insurance  
6-30 deductible or other uninsured amount owed by an insured under the  
6-31 terms of the policy; [or

6-32 [~~(B)~~ a rebate in an amount equal to all or part of  
6-33 any applicable insurance deductible;]

6-34 (2) [the good or service is paid for by the consumer  
6-35 from proceeds of a property or casualty insurance policy; and

6-36 [~~(3)~~] the person knowingly provides or causes to be  
6-37 provided to an insurer any estimate or other statement as to the  
6-38 cost of repair for the good or service to be provided that has been  
6-39 increased, inflated, or otherwise manipulated [charges an amount  
6-40 for the good or service that exceeds the usual and customary charge  
6-41 by the person for the good or service] by an amount equal to or  
6-42 greater than all or part of the applicable insurance deductible or  
6-43 other uninsured amount owed by an insured under the policy; or

6-44 (3) the person knowingly provides or causes to be  
6-45 provided to an insurer any false information within any estimate,  
6-46 bid, proposal, or other statement as to the scope of damage or cost  
6-47 of repair for the good or service to be provided [paid by the person  
6-48 to an insurer on behalf of an insured or remitted to an insured by  
6-49 the person as a rebate].

6-50 (b) A person who is insured under a property or casualty  
6-51 insurance policy commits an offense if the person:

6-52 (1) knowingly submits a claim under the policy based  
6-53 on conduct [charges that are] in violation of Subsection (a) [of  
6-54 this section]; or

6-55 (2) knowingly allows a claim in violation of  
6-56 Subsection (a) [of this section] to be submitted, unless the person  
6-57 promptly notifies the insurer of the conduct in violation of  
6-58 Subsection (a) [excessive charges].

6-59 SECTION 22. Section 4102.069, Insurance Code, is repealed.

6-60 SECTION 23. Chapter 541, Insurance Code, as amended by this  
6-61 Act, applies only to conduct that occurs on or after the effective  
6-62 date of this Act. Conduct that occurs before the effective date of  
6-63 this Act is governed by the law as it existed immediately before the  
6-64 effective date of this Act, and that law is continued in effect for  
6-65 that purpose.

6-66 SECTION 24. Subchapter B, Chapter 542, Insurance Code, as  
6-67 amended by this Act, applies only to a claim for which notice of  
6-68 claim is provided to an insurer on or after the effective date of  
6-69 this Act. A claim for which notice of claim is provided to an

7-1 insurer before the effective date of this Act is governed by the law  
7-2 as it existed immediately before the effective date of this Act, and  
7-3 that law is continued in effect for that purpose.

7-4 SECTION 25. Chapter 1808, Insurance Code, as added by this  
7-5 Act, applies only to a claim under an insurance policy delivered,  
7-6 issued for delivery, or renewed on or after January 1, 2016. A  
7-7 claim under a policy delivered, issued for delivery, or renewed  
7-8 before January 1, 2016, is governed by the law as it existed  
7-9 immediately before the effective date of this Act, and that law is  
7-10 continued in effect for that purpose.

7-11 SECTION 26. The repeal by this Act of Section 4102.069,  
7-12 Insurance Code, does not affect the authority of a person to act  
7-13 under a temporary certificate issued by the Texas Department of  
7-14 Insurance under that section before the effective date of this Act.

7-15 SECTION 27. Sections 4102.103(d) and 4102.158(d),  
7-16 Insurance Code, as added by this Act, apply only to a contract  
7-17 entered into or solicitation made on or after the effective date of  
7-18 this Act.

7-19 SECTION 28. (a) Except as provided by this section,  
7-20 Section 4102.104, Insurance Code, as amended by this Act, applies  
7-21 only to payment for a service performed on or after the effective  
7-22 date of this Act.

7-23 (b) Payment for a service performed before the effective  
7-24 date of this Act or performed after the effective date of this Act  
7-25 under a contract entered into before the effective date of this Act  
7-26 is governed by the law as it existed immediately before the  
7-27 effective date of this Act, and that law is continued in effect for  
7-28 that purpose.

7-29 SECTION 29. Section 4102.160, Insurance Code, as amended by  
7-30 this Act, and Section 4102.164, Insurance Code, as added by this  
7-31 Act, apply only to a referral made on or after the effective date of  
7-32 this Act. A referral made before the effective date of this Act is  
7-33 governed by the law as it existed immediately before the effective  
7-34 date of this Act, and that law is continued in effect for that  
7-35 purpose.

7-36 SECTION 30. The changes in law made by this Act apply only  
7-37 to an offense committed on or after the effective date of this Act.  
7-38 An offense committed before the effective date of this Act is  
7-39 governed by the law in effect when the offense was committed, and  
7-40 the former law is continued in effect for that purpose. For  
7-41 purposes of this section, an offense was committed before the  
7-42 effective date of this Act if any element of the offense occurred  
7-43 before that date.

7-44 SECTION 31. This Act takes effect September 1, 2015.

7-45 \* \* \* \* \*