By Senator Davis

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A bill to be entitled An act relating to examinations and investigations of property insurers; amending s. 624.316, F.S.; providing requirements for examinations of property insurers by the Office of Insurance Regulation; increasing the frequency of examinations of property insurers; providing criteria for a risk-based methodology for scheduling examinations for property insurers; requiring the office to make publicly available certain data; amending s. 624.3161, F.S.; requiring the office to order property insurers to file with the office claims-handling practices and procedures under certain circumstances; requiring the office to conduct additional market conduct examinations of certain residential property insurers; revising requirements for such examinations; requiring the office to make publicly available certain findings and information; amending s. 624.318, F.S.; requiring certain entities to make certain documents and information freely available to the Department of Financial Services, the office, and their examiners for examinations and investigations of property insurers; authorizing the department, the office, and their examiners to electronically scan certain documents; amending s. 624.319, F.S.; requiring that examination reports of property insurers contain certain information; requiring the office to make publicly available certain examination reports, investigation reports, and work papers on property

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insurers; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. Paragraph (a) of subsection (1), paragraph (a) of subsection (2), and paragraph (b) of subsection (3) of section 624.316, Florida Statutes, are amended, and subsection (5) is added to that section, to read:

624.316 Examination of insurers.-

- (1) (a) The office shall examine the affairs, transactions, accounts, records, and assets of each authorized insurer and of the attorney in fact of a reciprocal insurer as to its transactions affecting the insurer as often as it deems advisable, except as provided in this section. The examination may include examination of the affairs, transactions, accounts, and records relating directly or indirectly to the insurer and of the assets of the insurer's managing general agents and controlling or controlled persons person, as defined in s. 625.012. For property insurers, the examination must also include examination of:
- 1. The affairs, transactions, accounts, and records relating directly or indirectly to the insurer, the insurer's holding company, and the insurer's affiliate;
- 2. The assets, executive compensations, and ownership dividends of the officers, directors, managing general agents, and controlling persons, controlled persons, and controlling or controlled persons, as those terms are defined in s.

  625.012(5)(b), of the insurer, the insurer's holding company, and the insurer's affiliate;

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3. The contractual agreements between the officers, directors, agents, and persons described in subparagraph 2. and the insurer, insurer's holding company, and insurer's affiliate; and

 $\underline{\text{4. The contractual agreements between the insurer's vendors}}$  and the insurer.

The examination shall be pursuant to a written order of the office. Such order shall expire upon receipt by the office of the written report of the examination.

- (2) (a) Except as provided in paragraph (f), the office may examine each insurer as often as may be warranted for the protection of the policyholders and in the public interest, but must, at a minimum, examine:
- 1. High-risk insurers at least once every 3 years <u>and high-risk property insurers at least once every year</u>.
- 2. Average- and low-risk insurers at least once every 5 years and average- and low-risk property insurers at least once every 3 years.

The examination shall cover the number of fiscal years since the last examination of the insurer, except for examinations of low-risk insurers, in which case the examination need only cover at least the preceding 5 fiscal years, and shall be commenced within 12 months after the end of the most recent fiscal year being covered by the examination. The examination may cover any period of the insurer's operations since the last previous examination. The examination may include examination of events subsequent to the end of the most recent fiscal year and the

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events of any prior period that affect the present financial condition of the insurer.

- (3) The office shall create, and the commission shall adopt by rule, a risk-based selection methodology for scheduling examinations of insurers subject to this section. Except as otherwise specified in subsection (2), this requirement does not restrict the authority of the office to conduct examinations under this section as often as it deems advisable. Such methodology must include all of the following:
  - (b) Consideration of:
- 1. The level of capitalization and identification of unfavorable trends;
- 2. Negative trends in profitability or cash flow from operations;
- 3. National Association of Insurance Commissioners
  Insurance Regulatory Information System ratio results;
- 4. Risk-based capital and risk-based capital trend test results;
  - 5. The structure and complexity of the insurer;
  - 6. Changes in the insurer's officers or board of directors;
- 7. Changes in the insurer's business strategy or operations;
- 8. Findings and recommendations from an examination made pursuant to this section or s. 624.3161;
- 9. Current or pending regulatory actions by the office or the department;
- 10. Information obtained from other regulatory agencies or independent organization ratings and reports; and
  - 11. The impact of an insurer's insolvency on policyholders

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of the insurer and the public generally; and

- 12. With respect to property insurers:
- a.(I) The assets, executive compensations, and ownership dividends of the officers, directors, managing general agents, and controlling persons, controlled persons, and controlling or controlled persons, as those terms are defined in s.

  625.012(5)(b), of the insurer, the insurer's holding company, and the insurer's affiliate;
- (II) The contractual agreements between the officers, directors, agents, and persons described in sub-sub-subparagraph (I) and the insurer, insurer's holding company, and affiliate; and
- (III) The contractual agreements between the insurer's vendors and the insurer;
- b. The policyholders' complaints against the insurer and the reasons for which the complaints were confirmed or closed; and
- c. The fraud investigations and findings, if any, on the insurer and the insurer's officers, board of directors, managing general agents, controlling or controlled persons, and vendors.
- (5) Except as otherwise provided in the Florida Insurance Code, the office shall make publicly available, with respect to each property insurer, the examination data obtained pursuant to paragraph (1)(c).
- Section 2. Subsections (6) and (7) of section 624.3161, Florida Statutes, are amended, and subsection (10) is added to that section, to read:
  - 624.3161 Market conduct examinations.-
  - (6) Based on the findings of a market conduct examination

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that an insurer has exhibited a pattern or practice of willful violations of an unfair insurance trade practice related to claims handling which caused harm to policyholders, as prohibited by s. 626.9541(1)(i), the office may order an insurer, and shall order a property insurer, pursuant to chapter 120 to file its claims-handling practices and procedures related to that line of insurance with the office for review and inspection, to be held by the office for the following 36-month period. Such claims-handling practices and procedures are public records and are not trade secrets or otherwise exempt from the provisions of s. 119.07(1). As used in this section, "claimshandling practices and procedures" are any policies, guidelines, rules, protocols, standard operating procedures, instructions, or directives that govern or guide how and the manner in which an insured's claims for benefits under any policy will be processed.

- (7) Notwithstanding subsection (1), any authorized insurer transacting residential property insurance business in this state:
- (a) <u>Must</u> <u>May</u> be subject to an additional market conduct examination after a hurricane if, at any time more than 90 days after the end of the hurricane, the insurer is among the top 20 percent of insurers based upon a calculation of the ratio of hurricane-related property insurance claims filed to the number of property insurance policies in force;
- (b) Must be subject to a market conduct examination after a hurricane if, at any time more than 90 days after the end of the hurricane, the insurer:
  - 1. Is among the top 20 percent of insurers based upon a

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calculation of the ratio of hurricane claim-related consumer complaints made about that insurer to the department to the insurer's total number of hurricane-related claims;

- 2. Is among the top 20 percent of insurers based upon a calculation of the ratio of hurricane claims closed without payment to the insurer's total number of hurricane claims on policies providing wind or windstorm coverage;
- 3. Has made significant payments to its <u>officer; director;</u> managing general agent; controlling person, controlled person, <u>or controlling or controlled person as those terms are defined</u> in s. 625.012(5)(b); or vendor since the hurricane; or
- 4. Is identified by the office as necessitating a market conduct exam for any other reason.

All relevant criteria under this section and s. 624.316 shall be applied to the market conduct examination under this subsection. Such an examination must be initiated within 18 months after the landfall of a hurricane that results in an executive order or a state of emergency issued by the Governor. The requirements of this subsection do not limit the authority of the office to conduct at any time a market conduct examination of a property insurer in the aftermath of a hurricane. This subsection does not require the office to conduct multiple market conduct examinations of the same insurer when multiple hurricanes make landfall in this state in a single calendar year. An examination of an insurer under this subsection must also include an examination of its officer; director; managing general agent; and controlling person, controlled person, and controlling or controlled person, as those terms are defined in s.

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625.012(5)(b), as if it were the insurer.

- (10) Except as otherwise provided in the Florida Insurance Code, with respect to each property insurer, the office shall make publicly available:
- (a) The findings of the market conduct examination, including the results of the National Association of Insurance Commissioners Market Conduct Annual Statement; and
- (b) Detailed information on the policyholders' complaints against the insurer received by the office or the insurer and the reasons for which the claims were confirmed or closed.
- Section 3. Subsection (2) and paragraph (a) of subsection (7) of section 624.318, Florida Statutes, are amended to read:
- 624.318 Conduct of examination or investigation; access to records; correction of accounts; appraisals.—
- (2) (a) Every person being examined or investigated, and its officers, attorneys, employees, agents, and representatives, shall make freely available to the department or office or its examiners or investigators the accounts, records, documents, files, information, assets, and matters in their possession or control relating to the subject of the examination or investigation.
- (b) In addition to paragraph (a), with respect to a property insurer:
- 1. Every insurer being examined or investigated and its vendors; and
- 2. The officers, directors, managing general agents, and controlling persons, controlled persons, and controlling or controlled persons, as those terms are defined in s.
  625.012(5)(b), of the insurer, the insurer's holding company,

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and the insurer's affiliate,

shall make freely available to the department or office or the examiners the accounts; records; documents; files; information, including, but not limited to, information on executive compensations, ownership dividends, and contractual arrangements; assets; and matters, as applicable, in their possession or control relating to the subject of the examination or investigation.

- (c) An agent who provides other products or services or maintains customer information not related to insurance must maintain records relating to insurance products and transactions separately if necessary to give the department or office access to such records. If records relating to the insurance transactions are maintained by an agent on premises owned or operated by a third party, the agent and the third party must provide access to the records by the department or office.
- (7) (a) The department or office or its examiners or investigators may electronically scan accounts, records, documents, files, and information, relating to the subject of the examination or investigation, in the possession or control of the person being examined or investigated. With respect to a property owner, the department or office or its examiners or investigators may also electronically scan documents relating to:
- 1. The assets, executive compensations, and ownership dividends of the officers, directors, managing general agents, and controlling persons, controlled persons, and controlling or controlled persons, as those terms are defined in s.

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625.012(5)(b), of the insurer, insurer's holding company, and insurer's affiliate;

- 2. The contractual agreements between the officers, directors, agents, and persons described in subparagraph 1. and the insurer, the insurer's holding company, and the insurer's affiliate; and
- 3. The contractual agreements between the insurer's vendors and the insurer.

Section 4. Present subsection (6) of section 624.319, Florida Statutes, is redesignated as subsection (7), a new subsection (6) is added to that section, and subsection (1) is amended, to read:

624.319 Examination and investigation reports.-

- (1) (a) The department or office or its examiner shall make a full and true written report of each examination. The examination report <u>must shall</u> contain <del>only</del> information obtained from examination of the records, accounts, files, and documents of or relative to the insurer examined or from testimony of individuals under oath, together with relevant conclusions and recommendations of the examiner based thereon. <u>With respect to a property insurer</u>, the examination report must also contain information relating to:
- 1. The assets, executive compensations, and ownership dividends of the officers, directors, managing general agents, and controlling persons, controlled persons, and controlling or controlled persons, as those terms are defined in s.

  625.012(5)(b), of the insurer, insurer's holding company, and insurer's affiliate;
  - 2. The contractual agreements between the officers,

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directors, agents, and persons described in paragraph (a) and the insurer, the insurer's holding company, and the insurer's affiliate; and

- $\underline{\mbox{3. The contractual agreements between the insurer's vendors}}$  and the insurer.
- (b) The department or office must furnish a copy of the examination report to the insurer examined at least 30 days before filing the examination report in its office. If such insurer so requests in writing within such 30-day period, the department or office must grant a hearing with respect to the examination report and may not file the examination report until after the hearing and after such modifications have been made therein as the department or office deems proper.
- (6) Except as otherwise provided in the Florida Insurance Code, the office shall make publicly available:
  - (a) The examination reports that have been filed;
- (b) The investigation reports after the investigation is completed or ceases to be active, except for any portion of the report which remains confidential and exempt from s. 119.07(1) and s. 24(a), Art. I of the State Constitution under subparagraph (3)(a)3.; and
- (c) Work papers after the examination is filed or the investigation is completed or ceases to be active.
  - Section 5. This act shall take effect July 1, 2024.