

LEGISLATIVE ACTION

Senate House

Floor: 8/AD/3R 05/01/2013 01:49 PM

Senator Simmons moved the following:

Senate Amendment (with directory and title amendments)

Between lines 1186 and 1187 insert:

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- (d)1. The following categories or kinds of insurance and types of commercial lines risks are not subject to paragraph (2) (a) or paragraph (2) (f):
 - a. Excess or umbrella.
 - b. Surety and fidelity.
- c. Boiler and machinery and leakage and fire extinguishing equipment.
 - d. Errors and omissions.



- e. Directors and officers, employment practices, fiduciary liability, and management liability.
 - f. Intellectual property and patent infringement liability.
 - q. Advertising injury and Internet liability insurance.
 - h. Property risks rated under a highly protected risks rating plan.
 - i. General liability.

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- j. Nonresidential property, except for collateral protection insurance as defined in s. 624.6085.
 - k. Nonresidential multiperil.
 - 1. Excess property.
 - m. Burglary and theft.
- n. Medical malpractice for a facility that is not a hospital licensed under chapter 395, a nursing home licensed under part II of chapter 400, or an assisted living facility licensed under part I of chapter 429.
- o. Medical malpractice for a health care practitioner who is not a dentist licensed under chapter 466, a physician licensed under chapter 458, an osteopathic physician licensed under chapter 459, a chiropractic physician licensed under chapter 460, a podiatric physician licensed under chapter 461, a pharmacist licensed under chapter 465, or a pharmacy technician registered under chapter 465.
- p.n. Any other commercial lines categories or kinds of insurance or types of commercial lines risks that the office determines should not be subject to paragraph (2)(a) or paragraph (2)(f) because of the existence of a competitive market for such insurance, similarity of such insurance to other categories or kinds of insurance not subject to paragraph (2)(a)

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or paragraph (2)(f), or to improve the general operational efficiency of the office.

- 2. Insurers or rating organizations shall establish and use rates, rating schedules, or rating manuals to allow the insurer a reasonable rate of return on insurance and risks described in subparagraph 1. which are written in this state.
- 3. An insurer shall must notify the office of any changes to rates for insurance and risks described in subparagraph 1. within 30 days after the effective date of the change. The notice must include the name of the insurer, the type or kind of insurance subject to rate change, total premium written during the immediately preceding year by the insurer for the type or kind of insurance subject to the rate change, and the average statewide percentage change in rates. Actuarial data Underwriting files, premiums, losses, and expense statistics with regard to rates for such insurance and risks written by an insurer must be maintained by the insurer for 3 years after the effective date of changes to those rates and are subject to examination by the office. The office may require the insurer to incur the costs associated with an examination. Upon examination, the office, in accordance with generally accepted and reasonable actuarial techniques, shall consider the rate factors in paragraphs (2)(b), (c), and (d) and the standards in paragraph (2)(e) to determine if the rate is excessive, inadequate, or unfairly discriminatory.
- 4. A rating organization shall must notify the office of any changes to loss cost for insurance and risks described in subparagraph 1. within 30 days after the effective date of the change. The notice must include the name of the rating



organization, the type or kind of insurance subject to a loss cost change, loss costs during the immediately preceding year for the type or kind of insurance subject to the loss cost change, and the average statewide percentage change in loss cost. Actuarial data with regard to changes to loss cost for risks not subject to paragraph (2)(a) or paragraph (2)(f) must be maintained by the rating organization for 2 years after the effective date of the change and are subject to examination by the office. The office may require the rating organization to incur the costs associated with an examination. Upon examination, the office, in accordance with generally accepted and reasonable actuarial techniques, shall consider the rate factors in paragraphs (2)(b)-(d) and the standards in paragraph (2) (e) to determine if the rate is excessive, inadequate, or unfairly discriminatory.

Section 27. If SB 468 or similar legislation is adopted in the same legislative session and becomes law, effective July 2, 2013, paragraph (d) of subsection (3) of section 627.062, Florida Statutes, as amended by SB 468 or similar legislation, is amended to read:

627.062 Rate standards.-

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- (d)1. The following categories or kinds of insurance and types of commercial lines risks are not subject to paragraph (2)(a) or paragraph (2)(f):
 - a. Excess or umbrella.
 - b. Surety and fidelity.
- c. Boiler and machinery and leakage and fire extinguishing equipment.



101 d. Errors and omissions.

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- e. Directors and officers, employment practices, fiduciary liability, and management liability.
 - f. Intellectual property and patent infringement liability.
 - g. Advertising injury and Internet liability insurance.
- h. Property risks rated under a highly protected risks rating plan.
 - i. General liability.
- j. Nonresidential property, except for collateral protection insurance as defined in s. 624.6085.
 - k. Nonresidential multiperil.
 - 1. Excess property.
 - m. Burglary and theft.
- n. Medical malpractice for a facility that is not a hospital licensed under chapter 395, a nursing home licensed under part II of chapter 400, or an assisted living facility licensed under part I of chapter 429.
- o. Medical malpractice for a health care practitioner who is not a dentist licensed under chapter 466, a physician licensed under chapter 458, an osteopathic physician licensed under chapter 459, a chiropractic physician licensed under chapter 460, a podiatric physician licensed under chapter 461, a pharmacist licensed under chapter 465, or a pharmacy technician registered under chapter 465.
- p. Any other commercial lines categories or kinds of insurance or types of commercial lines risks that the office determines should not be subject to paragraph (2)(a) or paragraph (2)(f) because of the existence of a competitive market for such insurance, similarity of such insurance to other

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categories or kinds of insurance not subject to paragraph (2)(a) or paragraph (2)(f), or to improve the general operational efficiency of the office.

- 2. Insurers or rating organizations shall establish and use rates, rating schedules, or rating manuals to allow the insurer a reasonable rate of return on insurance and risks described in subparagraph 1. which are written in this state.
- 3. An insurer shall notify the office of any changes to rates for insurance and risks described in subparagraph 1. within 30 days after the effective date of the change. The notice must include the name of the insurer, the type or kind of insurance subject to rate change, total premium written during the immediately preceding year by the insurer for the type or kind of insurance subject to the rate change, and the average statewide percentage change in rates. Actuarial data with regard to rates for such risks must be maintained by the insurer for 3 2 years after the effective date of changes to those rates and are subject to examination by the office. The office may require the insurer to incur the costs associated with an examination. Upon examination, the office, in accordance with generally accepted and reasonable actuarial techniques, shall consider the rate factors in paragraphs (2)(b), (c), and (d) and the standards in paragraph (2)(e) to determine if the rate is excessive, inadequate, or unfairly discriminatory.
- 4. A rating organization shall notify the office of any changes to loss cost for insurance and risks described in subparagraph 1. within 30 days after the effective date of the change. The notice must include the name of the rating organization, the type or kind of insurance subject to a loss



cost change, loss costs during the immediately preceding year for the type or kind of insurance subject to the loss cost change, and the average statewide percentage change in loss cost. Actuarial data with regard to changes to loss cost for risks not subject to paragraph (2)(a) or paragraph (2)(f) must be maintained by the rating organization for 2 years after the effective date of the change and are subject to examination by the office. The office may require the rating organization to incur the costs associated with an examination. Upon examination, the office, in accordance with generally accepted and reasonable actuarial techniques, shall consider the rate factors in paragraphs (2)(b)-(d) and the standards in paragraph (2) (e) to determine if the rate is excessive, inadequate, or unfairly discriminatory.

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===== D I R E C T O R Y C L A U S E A M E N D M E N T ====== And the directory clause is amended as follows:

Delete lines 1135 - 1136

177 and insert:

> Section 26. Paragraph (b) of subsection (2) and paragraph (d) of subsection (3) of section 627.062, Florida Statutes, are amended to read:

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======= T I T L E A M E N D M E N T ========= And the title is amended as follows:

Delete line 105

185 and insert:

> or unfairly discriminatory; revising provisions relating to requirements for maintaining and examining



188 actuarial data with regard to rate changes; amending 189 s. 627.0628,