| ADOPTED | (Y/N) |
|-----------------------|-------|
| ADOPTED AS AMENDED | (Y/N) |
| ADOPTED W/O OBJECTION | (Y/N) |
| FAILED TO ADOPT | (Y/N) |
| WITHDRAWN | (Y/N) |
| OTHER | |

Committee/Subcommittee hearing bill: Insurance & Banking Subcommittee

Representative Gregory offered the following:

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Amendment (with title amendment)

Remove lines 1597-1779 and insert:

- 3. If a policyholder receives a take-out offer from an authorized insurer, the risk is no longer eligible for coverage with the corporation unless the premium for coverage from the authorized insurer is more than the following percent greater than the renewal premium for comparable coverage from the corporation:
 - (I) Five percent for policies effective on or after January 1, 2023.
 - (II) Ten percent for policies effective on or after January 1, 2024.

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- (III) Fifteen percent for policies effective on or after January 1, 2025.
- (IV) Twenty percent for policies effective on or after January 1, 2026 and in all subsequent years.
- <u>43</u>. The corporation must provide written notice to the policyholder and the agent of record regarding all insurers requesting to take out the policy, which and regarding the policyholder's option to accept a take-out offer or to reject all take-out offers and to remain with the corporation. The notice must be in a format prescribed by the corporation and include, for each take-out offer:
 - a. The amount of the estimated premium;
 - b. A description of the coverage; and
- c. A comparison of the estimated premium and coverage offered by the insurer to the estimated premium and coverage provided by the corporation.
- Section 3. Section 627.3517, Florida Statutes, is amended to read:
- 627.3517 Consumer choice.—No provision of s. 627.351, s. 627.3511, or s. 627.3515 shall be construed to impair the right of any insurance risk apportionment plan policyholder, upon receipt of any keep-out keepout or take-out offer, to retain his or her current agent, so long as that agent is duly licensed and appointed by the insurance risk apportionment plan or otherwise

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authorized to place business with the insurance risk apportionment plan. This right may shall not be canceled, suspended, impeded, abridged, or otherwise compromised by any rule, plan of operation, or depopulation plan, whether through keep-out keepout, take-out, midterm assumption, or any other means, of any insurance risk apportionment plan or depopulation plan, including, but not limited to, those described in s. 627.351, s. 627.3511, or s. 627.3515. The commission shall adopt any rules necessary to cause any insurance risk apportionment plan or market assistance plan under such sections to demonstrate that the operations of the plan do not interfere with, promote, or allow interference with the rights created under this section. If the policyholder's current agent is unable or unwilling to be appointed with the insurer making the take-out or keep-out keepout offer, the policyholder is shall not be disqualified from participation in the appropriate insurance risk apportionment plan because of an offer of coverage in the voluntary market. An offer of full property insurance coverage by the insurer currently insuring either the ex-wind or wind-only coverage on the policy to which the offer applies is shall not be considered a take-out or keep-out keepout offer. Any rule, plan of operation, or plan of depopulation, through keep-out keepout, take-out, midterm assumption, or any other means, of any property insurance risk apportionment plan under s. 627.351(2) or (6) is subject to ss.

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66 627.351(2)(b) and (6)(c) and 627.3511(4).

Section 4. Section 627.3518, Florida Statutes, is amended to read:

- 627.3518 Citizens Property Insurance Corporation policyholder eligibility clearinghouse program.—The purpose of this section is to provide a framework for the corporation to implement a clearinghouse program by January 1, 2014.
 - (1) As used in this section, the term:
- (a) "Corporation" means Citizens Property Insurance Corporation.
- (b) "Exclusive agent" means any licensed insurance agent that has, by contract, agreed to act exclusively for one company or group of affiliated insurance companies and is disallowed by the provisions of that contract to directly write for any other unaffiliated insurer absent express consent from the company or group of affiliated insurance companies.
- (c) "Independent agent" means any licensed insurance agent
 not described in paragraph (b).
- (d) "Program" means the clearinghouse created under this section.
- (2) In order to confirm eligibility with the corporation and to enhance access of new applicants for coverage and existing policyholders of the corporation to offers of coverage from authorized insurers, the corporation shall establish a program for personal residential risks in order to facilitate

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the diversion of ineligible applicants and existing policyholders from the corporation into the voluntary insurance market. The corporation shall also develop appropriate procedures for facilitating the diversion of ineligible applicants and existing policyholders for commercial residential coverage into the private insurance market and shall report such procedures to the President of the Senate and the Speaker of the House of Representatives by January 1, 2014.

- (3) The corporation board shall establish the clearinghouse program as an organizational unit within the corporation. The program shall have all the rights and responsibilities in carrying out its duties as a licensed general lines agent, but may not be required to employ or engage a licensed general lines agent or to maintain an insurance agency license to carry out its activities in the solicitation and placement of insurance coverage. In establishing the program, the corporation may:
- (a) Require all new applications, and all policies due for renewal, to be submitted for coverage to the program in order to facilitate obtaining an offer of coverage from an authorized insurer before binding or renewing coverage by the corporation.
- (b) Employ or otherwise contract with individuals or other entities for appropriate administrative or professional services to effectuate the plan within the corporation in accordance with the applicable purchasing requirements under s. 627.351.

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- (c) Enter into contracts with any authorized insurer to participate in the program and accept an appointment by such insurer.
- (d) Provide funds to operate the program. Insurers and agents participating in the program are not required to pay a fee to offset or partially offset the cost of the program or use the program for renewal of policies initially written through the clearinghouse.
- (e) Develop an enhanced application that includes information to assist private insurers in determining whether to make an offer of coverage through the program.
- (f) For personal lines residential risks, require, before approving all new applications for coverage by the corporation, that every application be subject to a period of 2 business days when any insurer participating in the program may select the application for coverage. The insurer may issue a binder on any policy selected for coverage for a period of at least 30 days but not more than 60 days.
- (4) Any authorized insurer may participate in the program; however, participation is not mandatory for any insurer.

 Insurers making offers of coverage to new applicants or renewal policyholders through the program:
- (a) May not be required to individually appoint any agent whose customer is underwritten and bound through the program.

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Notwithstanding s. 626.112, insurers are not required to appoint any agent on a policy underwritten through the program for as long as that policy remains with the insurer. Insurers may, at their election, appoint any agent whose customer is initially underwritten and bound through the program. In the event an insurer accepts a policy from an agent who is not appointed pursuant to this paragraph, and thereafter elects to accept a policy from such agent, the provisions of s. 626.112 requiring appointment apply to the agent.

- (b) Must enter into a limited agency agreement with each agent that is not appointed in accordance with paragraph (a) and whose customer is underwritten and bound through the program.
- (c) Must enter into its standard agency agreement with each agent whose customer is underwritten and bound through the program when that agent has been appointed by the insurer pursuant to s. 626.112.
 - (d) Must comply with s. 627.4133(2).
- (e) May participate through their single-designated managing general agent or broker; however, the provisions of paragraph (6)(a) regarding ownership, control, and use of the expirations continue to apply.
- (f) Must pay to the producing agent a commission equal to that paid by the corporation or the usual and customary commission paid by the insurer for that line of business, whichever is greater.

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| (5) Notwithstanding s. 627.3517, any applicant for new |
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| coverage from the corporation is not eligible for coverage from |
| the corporation if provided an offer of coverage from an |
| authorized insurer through the program at a premium that is at |
| or below the eligibility threshold established in s. |
| 627.351(6)(c)5.a. Whenever an offer of coverage for a personal |
| lines risk is received for a policyholder of the corporation at |
| renewal from an authorized insurer through the program, if the |
| offer is equal to or less than the corporation's renewal premium |
| for comparable coverage, the risk is not eligible for coverage |
| with the corporation $\underline{\text{if the offer is at or below the eligibility}}$ |
| <u>threshold</u> specified in s. $627.351(6)(c)5.a$. In the event <u>that</u> an |
| offer of coverage for a new applicant is received from an |
| authorized insurer through the program, and the premium offered |
| exceeds the eligibility threshold $\underline{\text{specified}}$ contained in s. |
| 627.351(6)(c)5.a., the applicant or insured may elect to accept |
| such coverage, or may elect to accept or continue coverage with |
| the corporation. In the event $\underline{\text{that}}$ an offer of coverage for a |
| personal lines risk is received from an authorized insurer at |
| renewal through the program, and the premium offered is $\underline{\text{at or}}$ |
| below the eligibility threshold specified in s. |
| 627.351(6)(c)5.a. more than the corporation's renewal premium |
| for comparable coverage, the insured is not eligible to may |
| elect to accept such coverage, or may elect to accept or |
| continue coverage with the corporation. Section |

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627.351(6)(c)5.a.(I) does not apply to an offer of coverage from an authorized insurer obtained through the program. An applicant for coverage from the corporation who was declared ineligible for coverage at renewal by the corporation in the previous 36 months due to an offer of coverage pursuant to this subsection shall be considered a renewal under this section if the corporation determines that the authorized insurer making the offer of coverage pursuant to this subsection continues to insure the applicant and increased the rate on the policy in excess of the increase allowed for the corporation under s. 627.351(6)(n)5.

TITLE AMENDMENT

Remove lines 39-47 and insert:

record status; making technical changes; revising eligibility

for the corporation when insurers request to take out a policy;

revising the notice that must be provided by the corporation

when insurers request to take out a policy; amending s.

627.3517, F.S.; making technical changes; amending s. 627.3518,

F.S.; deleting obsolete provisions relating to the purpose of

the corporation's clearinghouse program and reporting

requirements; revising procedures for determining eligibility of

a risk for coverage with the corporation; revising renewal

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COMMITTEE/SUBCOMMITTEE AMENDMENT

Bill No. HB 1307 (2022)

Amendment No. 3

| 215 | status | after | insurers | request | to | take | out | a | policy; | providing | an |
|-----|-----------|-------|----------|---------|----|------|-----|---|---------|-----------|----|
| 216 | effective | | | | | | | | | | |

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