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I	Amendment No.	
		CHAMBER ACTION
	Senate	House
1	Representatives Ross and R	eagan offered the following:
2	2	
3	Amendment (with title	amendment)
4	Remove everything aft	er the enacting clause and insert:
5	5	
6	5 Section 1. Section 2	15.5595, Florida Statutes, is amended
7	to read:	
8	215.5595 Insurance C	apital Build-Up Incentive Program
9) (1) Upon entering th	e <u>2008</u> 2006 hurricane season, the
10	Legislature finds that:	
11	(a) The losses in th	is state Florida from eight hurricanes
12	2 in 2004 and 2005 have seri	ously strained the resources of both
13	the voluntary insurance ma	rket and the public sector mechanisms
14	of Citizens Property Insur	ance Corporation and the Florida
15	5 Hurricane Catastrophe Fund	- -
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16 (b) Private reinsurance is much less available and at a significantly greater cost to residential property insurers as compared to 1 year ago, particularly for amounts below the insurer's retention or retained losses that must be paid before reimbursement is provided by the Florida Hurricane Catastrophe Fund.

(c) The Office of Insurance Regulation has reported that
 the insolvency of certain insurers may be imminent.

24 (d) Hurricane forecast experts predict that the 2006
25 hurricane season will be an active hurricane season and that the
26 Atlantic and Gulf Coast regions face an active hurricane cycle
27 of 10 to 20 years or longer.

28 (b) (e) Citizens Property Insurance Corporation has over 1.2 million policies in force, has the largest market share of 29 any insurer writing residential property insurer in the state, 30 and faces the threat of a catastrophic loss that The number of 31 32 cancellations or nonrenewals of residential property insurance policies is expected to increase and the number of new 33 residential policies written in the voluntary market are likely 34 35 to decrease, causing increased policy growth and exposure to the state insurer of last resort, Citizens Property Insurance 36 37 Corporation, and threatening to increase the deficit of the corporation, currently estimated to be over \$1.7 billion. This 38 39 deficit must be funded by assessments against insurers and policyholders, unless otherwise funded by the state. The program 40 has a substantial positive effect on the depopulation efforts of 41 Citizens Property Insurance Corporation since companies 42 participating in the program have removed over 199,000 policies 43 439287

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44	from the corporation. Companies participating in the program	
45	have issued a significant number of new policies, thereby	
46	keeping an estimated 480,000 new policies out of the	
47	corporation.	
48	<u>(c)</u> Policyholders are subject to <u>high</u> increased	
49	premiums and assessments that are increasingly making such	
50	coverage unaffordable and that may force policyholders to sell	
51	their homes and even leave the state.	
52	<u>(d)</u> The increased risk to the public sector and private	
53	sector <u>continues to pose</u> poses a serious threat to the economy	
54	of this state, particularly the building and financing of	
55	residential structures, and existing mortgages may be placed in	
56	default.	
57	(h) The losses from 2004 and 2005, combined with the	
58	expectation that the increase in hurricane activity will	
59	continue for the foreseeable future, have caused both insurers	
60	and reinsurers to limit the capital they are willing to commit	
61	to covering the hurricane risk in Florida; attracting new	
62	capital to the Florida market is a critical priority; and	
63	providing a low cost source of capital would enable insurers to	
64	write additional residential property insurance coverage and act	
65	to mitigate premium increases.	
66	<u>(e)</u> (i) Appropriating state funds to be <u>exchanged for</u> used	
67	as surplus notes <u>issued by</u> for residential property insurers,	
68	under conditions requiring the insurer to contribute additional	
69	private sector capital and to write a minimum level of premiums	
70	for residential hurricane coverage, is a valid and important	
71	public purpose.	
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72	Amendment No. (f) Extending the Insurance Capital Build-up Incentive	
73		
74		
75	(2) The purpose of this section is to provide funds in	
76	exchange for surplus notes to be issued by to new or existing	
77	authorized residential property insurers under the Insurance	
78		
79	Board of Administration, under the following conditions:	
80	(a) The amount of state funds provided in exchange for a	
81	the surplus note to for any insurer or insurer group, other than	
82	an insurer writing only manufactured housing policies, may not	
83	exceed \$25 million or 20 percent of the total amount of funds	
84	appropriated for available under the program, whichever is	
85	greater. The amount of the surplus note for any insurer or	
86	insurer group writing residential property insurance covering	
87	only manufactured housing may not exceed \$7 million.	
88	(b) <u>On or after April 1, 2008,</u> the insurer must contribute	
89	an amount of new capital to its surplus which is at least equal	
90	to the amount of the surplus note and must apply to the board by	
91	September 1, 2008 July 1, 2006 . If an insurer applies after	
92	<u>September 1, 2008</u> July 1, 2006 , but before June 1, <u>2009</u> 2007 ,	
93	the amount of the surplus note is limited to one-half of the new	
94	capital that the insurer contributes to its surplus, except that	
95	an insurer writing only manufactured housing policies is	
96	eligible to receive a surplus note of up to \$7 million. For	
97	purposes of this section, new capital must be in the form of	
98	cash or cash equivalents as specified in s. 625.012(1).	

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Amendment No. The insurer's surplus, new capital, and the surplus 99 (C) 100 note must total at least \$50 million, except for insurers 101 writing residential property insurance covering only manufactured housing. The insurer's surplus, new capital, and 102 the surplus note must total at least \$14 million for insurers 103 writing only residential property insurance covering 104 manufactured housing policies as provided in paragraph (a). 105 106 The insurer must commit to increase its writings of (d) residential property insurance, including the peril of wind, and 107 to meet meeting a minimum writing ratio of net written premium 108 to surplus of at least 1:1 for the first calendar year after 109 receiving the state funds or renegotiation of the surplus note, 110 111 1.5:1 for the second calendar year, and 2:1 for the remaining term of the surplus note. Alternatively, the insurer must meet a 112 minimum writing ratio of gross written premium to surplus of at 113 least 3:1 for the first calendar year after receiving the state 114 funds or renegotiation of the surplus note, 4.5:1 for the second 115 calendar year, and 6:1 for the remaining term of the surplus 116 note. The writing ratios, which shall be determined by the 117 118 Office of Insurance Regulation and certified quarterly to the board. For this purpose, the term "premium" "net written 119 120 premium" means net written premium for residential property 121 insurance in this state Florida, including the peril of wind, 122 and "surplus" means the new capital and surplus note refers to the entire surplus of the insurer. An insurer that makes an 123 initial application after July 1, 2008, must also commit to 124 writing at least 15 percent of its net or gross written premium 125 for new policies, not including renewal premiums, for policies 126

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Amendment No. 127 taken out of Citizens Property Insurance Corporation, during each of the first 3 years after receiving the state funds in 128 exchange for the surplus note, which shall be determined by the 129 Office of Insurance Regulation and certified annually to the 130 board. The office may determine that an insurer meets the 131 132 requirement for taking policies out the corporation, by written 133 notice to the board, upon a finding that the insurer made offers of coverage to policyholders of the corporation which would have 134 resulted in meeting this requirement had the policyholders 135 accepted the offer. The insurer must also commit to maintaining 136 a level of surplus and reinsurance sufficient to cover in excess 137 of its 1-in-100 year probable maximum loss, as determined by a 138 hurricane loss model accepted by the Florida Commission on 139 Hurricane Loss Projection Methodology, which shall be determined 140 by the Office of Insurance Regulation and certified annually to 141 the board. If the board determines that the insurer has failed 142 to meet any of the requirements of this paragraph required ratio 143 is not maintained during the term of the surplus note, the board 144 may increase the interest rate, accelerate the repayment of 145 146 interest and principal, or shorten the term of the surplus note, subject to approval by the Commissioner of Insurance of payments 147 148 by the insurer of principal and interest as provided in 149 paragraph (f).

(e) If the requirements of this section are met, the board
may approve an application by an insurer for <u>funds in exchange</u>
<u>for issuance of</u> a surplus note, unless the board determines that
the financial condition of the insurer and its business plan for
writing residential property insurance in Florida places an
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unreasonably high level of financial risk to the state of nonpayment in full of the interest and principal. The board shall consult with the Office of Insurance Regulation and may contract with independent financial and insurance consultants in making this determination.

160 (f) The surplus note must be repayable to the state with a 161 term of 20 years. The surplus note shall accrue interest on the unpaid principal balance at a rate equivalent to the 10-year 162 U.S. Treasury Bond rate, require the payment only of interest 163 during the first 3 years, and include such other terms as 164 approved by the board. The board may charge late fees up to 5 165 166 percent for late payments or other late remittances. Payment of 167 principal, or interest, or late fees by the insurer on the surplus note must be approved by the Commissioner of Insurance, 168 169 who shall approve such payment unless the commissioner determines that such payment will substantially impair the 170 financial condition of the insurer. If such a determination is 171 made, the commissioner shall approve such payment that will not 172 substantially impair the financial condition of the insurer. 173

174 (q) The total amount of funds available for the program is limited to the amount appropriated by the Legislature for this 175 176 purpose. If the amount of surplus notes requested by insurers 177 exceeds the amount of funds available, the board may prioritize 178 insurers that are eligible and approved, with priority for funding given to insurers writing only manufactured housing 179 policies, regardless of the date of application, based on the 180 financial strength of the insurer, the viability of its proposed 181 business plan for writing additional residential property 182 439287 4/29/2008 7:16 AM

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Amendment No. 183 insurance in the state, and the effect on competition in the 184 residential property insurance market. Between insurers writing 185 residential property insurance covering manufactured housing, 186 priority shall be given to the insurer writing the highest 187 percentage of its policies covering manufactured housing.

188 (h) The board may allocate portions of the funds available
189 for the program and establish dates for insurers to apply for
190 surplus notes from such allocation which are earlier than the
191 dates established in paragraph (b).

192 (h) (i) Notwithstanding paragraph (d), a newly formed 193 manufactured housing insurer that is eligible for a surplus note 194 under this section shall meet the premium to surplus ratio 195 provisions of s. 624.4095.

196 <u>(i)(j)</u> As used in this section, "an insurer writing only 197 manufactured housing policies" includes:

A Florida domiciled insurer that begins writing 198 1. personal lines residential manufactured housing policies in 199 Florida after March 1, 2007, and that removes a minimum of 200 50,000 policies from Citizens Property Insurance Corporation 201 202 without accepting a bonus, provided at least 25 percent of its policies cover manufactured housing. Such an insurer may count 203 204 any funds above the minimum capital and surplus requirement that 205 were contributed into the insurer after March 1, 2007, as new capital under this section. 206

207 2. A Florida domiciled insurer that writes at least 40
208 percent of its policies covering manufactured housing in
209 Florida.

210 (3) As used in this section, the term: 439287 4/29/2008 7:16 AM

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"Board" means the State Board of Administration. 211 (a) 212 "Program" means the Insurance Capital Build-Up (b) 213 Incentive Program established by this section. 214 The state funds provided to the insurer in exchange (4)for the A surplus note provided to an insurer pursuant to this 215 216 section are is considered borrowed surplus an asset of the insurer pursuant to s. 628.401 s. 625.012. 217 If an insurer that receives funds in exchange for 218 (5) issuance of a surplus note pursuant to this section is rendered 219 insolvent, the state is a $\frac{1}{2}$ creditor pursuant to s. 220 631.271 for the unpaid principal and interest on the surplus 221 222 note. 223 (6) The board shall adopt rules prescribing the procedures, administration, and criteria for approving the 224 applications of insurers to receive funds in exchange for 225 issuance of surplus notes pursuant to this section, which may be 226 adopted pursuant to the procedures for emergency rules of 227 chapter 120. Otherwise, actions and determinations by the board 228 pursuant to this section are exempt from chapter 120. 229 230 (7)The board shall invest and reinvest the funds appropriated for the program in accordance with s. 215.47 and 231 232 consistent with board policy. 233 (8) Costs and fees incurred by the board in administering this program, including fees for investment services, shall be 234 paid from funds appropriated by the Legislature for this 235 program, but are limited to 1 percent of the amount 236 237 appropriated.

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238	Amendment No. (9) The board shall submit a report to the President of
239	the Senate and the Speaker of the House of Representatives by
240	February 1 of each year as to the results of the program and
241	each insurer's compliance with the terms of its surplus note.
242	(10) The amendments to this section enacted in 2008 do not
243	affect the terms or conditions of the surplus notes that were
244	approved prior to January 1, 2008. However, the board may
245	renegotiate the terms of any surplus note issued by an insurer
246	prior to January 2008 under this program upon the agreement of
247	the insurer and the board and consistent with the requirements
248	of this section as amended in 2008.
249	Section 2. Subsection (6) is added to section 624.3161,
250	Florida Statutes, to read:
251	624.3161 Market conduct examinations
252	(6) Based on the findings of a market conduct examination
253	that an insurer has exhibited a pattern or practice of willful
254	violations of an unfair insurance trade practice related to
255	claims-handling which caused harm to policyholders, as
256	prohibited by s. 626.9541(1)(i), the office, after a proceeding
257	under ss. 120.569 and 120.57(1), may require an insurer to file
258	its claims-handling practices and procedures related to that
259	line of insurance with the office for review and inspection, to
260	be held by the office for the following 36-month period. Such
261	claims-handling practices and procedures are public records and
262	are not trade secrets or otherwise exempt from the provisions of
263	s. 119.07(1). As used in this section, "claims-handling
264	practices and procedures" are any policies, guidelines, rules,
265	protocols, standard operating procedures, instructions, or
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266 <u>directives that govern or guide how and the manner in which an</u> 267 <u>insured's claims for benefits under any policy will be</u> 268 <u>processed.</u> 269 Section 3. Subsections (2) and (3) of section 624.4211,

Florida Statutes, are amended to read:

271 624.4211 Administrative fine in lieu of suspension or272 revocation.--

With respect to any nonwillful violation, such fine 273 (2) may shall not exceed \$5,000 \$2,500 per violation. In no event 274 shall such fine exceed an aggregate amount of \$20,000 \$10,000 275 276 for all nonwillful violations arising out of the same action. If When an insurer discovers a nonwillful violation, the insurer 277 278 shall correct the violation and, if restitution is due, make restitution to all affected persons. Such restitution shall 279 280 include interest at 12 percent per year from either the date of the violation or the date of inception of the affected person's 281 policy, at the insurer's option. The restitution may be a credit 282 against future premiums due provided that the interest 283 accumulates shall accumulate until the premiums are due. If the 284 285 amount of restitution due to any person is \$50 or more and the insurer wishes to credit it against future premiums, it shall 286 287 notify such person that she or he may receive a check instead of 288 a credit. If the credit is on a policy that which is not 289 renewed, the insurer shall pay the restitution to the person to whom it is due. 290

(3) With respect to any knowing and willful violation of a
lawful order or rule of the office or commission or a provision
of this code, the office may impose a fine upon the insurer in
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294	Amendment No. an amount not to exceed \$40,000 \$20,000 for each such violation.
295	In no event shall such fine exceed an aggregate amount of
296	$\frac{200,000}{5100,000}$ for all knowing and willful violations arising
297	out of the same action. In addition to such fines, the such
298	insurer shall make restitution when due in accordance with the
299	provisions of subsection (2).
300	Section 4. Section 624.4213, Florida Statutes, is created
301	to read:
302	624.4213 Trade secret documents
303	(1) If any person who is required to submit documents or
304	other information to the office or department pursuant to the
305	Insurance Code or by rule or order of the office, department, or
306	commission claims that such submission contains a trade secret,
307	such person may file with the office or department a notice of
308	trade secret as provided in this section. Failure to do so
309	constitutes a waiver of any claim by such person that the
310	document or information is a trade secret.
311	(a) Each page of such document or specific portion of a
312	document claimed to be a trade secret must be clearly marked as
313	"trade secret."
314	(b) All material marked as a trade secret must be
315	separated from all non-trade secret material, such as being
316	submitted in a separate envelope clearly marked as "trade
317	secret."
318	(c) In submitting a notice of trade secret to the office
319	or department, the submitting party must include an affidavit
320	certifying under oath to the truth of the following statements
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321 concerning all documents or information that are claimed to be 322 trade secrets: 1. [I consider/My company considers] this information a 323 trade secret that has value and provides an advantage or an 324 opportunity to obtain an advantage over those who do not know or 325 326 use it. 327 2. [I have/My company has] taken measures to prevent the disclosure of the information to anyone other that those who 328 have been selected to have access for limited purposes, and [I 329 intend/my company intends] to continue to take such measures. 330 331 3. The information is not, and has not been, reasonably obtainable without [my/our] consent by other persons by use of 332 333 legitimate means. 4. The information is not publicly available elsewhere. 334 335 (2) If the office or department receives a public-records request for a document or information that is marked and 336 certified as a trade secret, the office or department shall 337 promptly notify the person that certified the document as a 338 trade secret. The notice shall inform such person that he or she 339 340 or his or her company has 30 days following receipt of such notice to file an action in circuit court seeking a 341 342 determination whether the document in question contains trade 343 secrets and an order barring public disclosure of the document. If that person or company files an action within 30 days after 344 receipt of notice of the public-records request, the office or 345 department may not release the documents pending the outcome of 346 the legal action. The failure to file an action within 30 days 347

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348	constitutes a waiver of any claim of confidentiality and the
349	office or department shall release the document as requested.
350	(3) The office or department may disclose a trade secret,
351	together with the claim that it is a trade secret, to an officer
352	or employee of another governmental agency whose use of the
353	trade secret is within the scope of his or her employment.
354	Section 5. Section 624.4305, Florida Statutes, is created
355	to read:
356	624.4305 Nonrenewal of residential property insurance
357	policiesAny insurer planning to nonrenew more than 10,000
358	residential property insurance policies in this state within a
359	12-month period shall give notice in writing to the Office of
360	Insurance Regulation for informational purposes 90 days before
361	the issuance of any notices of nonrenewal. The notice provided
362	to the office must set forth the insurer's reasons for such
363	action, the effective dates of nonrenewal, and any arrangements
364	made for other insurers to offer coverage to affected
365	policyholders.
366	Section 6. Subsection (2) of section 626.9521, Florida
367	Statutes, is amended to read:
368	626.9521 Unfair methods of competition and unfair or
369	deceptive acts or practices prohibited; penalties
370	(2) Any person who violates any provision of this part
371	shall be subject to a fine in an amount not greater than $\frac{55,000}{100}$
372	\$2,500 for each nonwillful violation and not greater than
373	<u>\$40,000</u> \$20,000 for each willful violation. Fines under this
374	subsection imposed against an insurer may not exceed an
375	aggregate amount of $\frac{20,000}{10,000}$ for all nonwillful
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Amendment No. 376 violations arising out of the same action or an aggregate amount 377 of \$200,000 \$100,000 for all willful violations arising out of 378 the same action. The fines authorized by this subsection may be imposed in addition to any other applicable penalty. 379 Section 7. Section 627.0612, Florida Statutes, is amended 380 381 to read: 627.0612 Administrative proceedings in rating 382 383 determinations. --In any proceeding to determine whether rates, rating 384 (1) plans, or other matters governed by this part comply with the 385 386 law, the appellate court shall set aside a final order of the office if the office has violated s. 120.57(1)(k) by 387 388 substituting its findings of fact for findings of an administrative law judge which were supported by competent 389 substantial evidence. 390 In an administrative hearing to determine whether an 391 (2) insurer's rates, rating schedules, rating manuals, premium 392 credits, discount schedules, surcharge schedules, or changes 393 thereto, for property insurance comply with the law, in addition 394 395 to any other findings of fact, findings on the following matters shall be considered findings of fact: 396 397 Whether a factor or factors used in a rate filing or (a) 398 applied by the office is consistent with standard actuarial 399 techniques or practices or are otherwise based on reasonable actuarial judgment. 400 Whether a factor for underwriting profit and 401 (b) contingencies is reasonable or excessive. 402

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403	Amendment No. (c) Whether the cost of reinsurance is reasonable or
404	excessive.
405	(d) Whether a factor or factors used in a rate filing or
406	applied by the office demonstrate that a rate is excessive,
407	inadequate or unfairly discriminatory.
407	
409	insurer's rates, rating schedules, rating manuals, premium
410	credits, discount schedules, surcharge schedules, or changes
411	thereto, for property insurance comply with the law, an order
412	may be entered that approves, modifies, or rejects the requested
413	change. An order modifying the requested rate change shall
414	recommend such change as is supported by the record in the case.
415	Section 8. Paragraphs (a), (b), and (g) of subsection
416	(2),subsection (6), and paragraph (a) of subsection (9) of
417	section 627.062, Florida Statutes, are amended to read:
418	627.062 Rate standards
419	(2) As to all such classes of insurance:
420	(a) Insurers or rating organizations shall establish and
421	use rates, rating schedules, or rating manuals to allow the
422	insurer a reasonable rate of return on such classes of insurance
423	written in this state. A copy of rates, rating schedules, rating
424	manuals, premium credits or discount schedules, and surcharge
425	schedules, and changes thereto, shall be filed with the office
426	under one of the following procedures except as provided in
427	subparagraph 3.:
428	1. If the filing is made at least 90 days before the
429	proposed effective date and the filing is not implemented during
430	the office's review of the filing and any proceeding and
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431 judicial review, then such filing shall be considered a "file and use" filing. In such case, the office shall finalize its 432 433 review by issuance of a notice of intent to approve or a notice of intent to disapprove within 90 days after receipt of the 434 435 filing. The notice of intent to approve and the notice of intent 436 to disapprove constitute agency action for purposes of the 437 Administrative Procedure Act. Requests for supporting information, requests for mathematical or mechanical 438 corrections, or notification to the insurer by the office of its 439 preliminary findings shall not toll the 90-day period during any 440 such proceedings and subsequent judicial review. The rate shall 441 442 be deemed approved if the office does not issue a notice of 443 intent to approve or a notice of intent to disapprove within 90 days after receipt of the filing. 444

2. If the filing is not made in accordance with the provisions of subparagraph 1., such filing shall be made as soon as practicable, but no later than 30 days after the effective date, and shall be considered a "use and file" filing. An insurer making a "use and file" filing is potentially subject to an order by the office to return to policyholders portions of rates found to be excessive, as provided in paragraph (h).

3. For all filings made or submitted after January 25, 2007, but before December 31, 2008, an insurer seeking a rate that is greater than the rate most recently approved by the office shall make a "file and use" filing. This subparagraph applies to property insurance only. For purposes of this subparagraph, motor vehicle collision and comprehensive coverages are not considered to be property coverages.

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(b) Upon receiving a rate filing, the office shall review
the rate filing to determine if a rate is excessive, inadequate,
or unfairly discriminatory. In making that determination, the
office shall, in accordance with generally accepted and
reasonable actuarial techniques, consider the following factors:

464 1. Past and prospective loss experience within and without465 this state.

466

2. Past and prospective expenses.

467 3. The degree of competition among insurers for the risk468 insured.

469 Investment income reasonably expected by the insurer, 4. 470 consistent with the insurer's investment practices, from 471 investable premiums anticipated in the filing, plus any other expected income from currently invested assets representing the 472 473 amount expected on unearned premium reserves and loss reserves. The commission may adopt rules using utilizing reasonable 474 techniques of actuarial science and economics to specify the 475 manner in which insurers shall calculate investment income 476 attributable to such classes of insurance written in this state 477 478 and the manner in which such investment income shall be used to calculate in the calculation of insurance rates. Such manner 479 480 shall contemplate allowances for an underwriting profit factor 481 and full consideration of investment income which produce a 482 reasonable rate of return; however, investment income from invested surplus may shall not be considered. 483

484 5. The reasonableness of the judgment reflected in the485 filing.

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Amendment No. 486 6. Dividends, savings, or unabsorbed premium deposits 487 allowed or returned to Florida policyholders, members, or subscribers. 488 489 7. The adequacy of loss reserves. The cost of reinsurance. The office shall not 490 8. 491 disapprove a rate as excessive solely due to the insurer having 492 obtained catastrophic reinsurance to cover the insurer's estimated 250-year probable maximum loss or any lower level of 493 494 loss. 9. Trend factors, including trends in actual losses per 495 insured unit for the insurer making the filing. 496 497 10. Conflagration and catastrophe hazards, if applicable. 11. Projected hurricane losses, if applicable, which must 498 be estimated using a model or method found to be acceptable or 499 reliable by the Florida Commission on Hurricane Loss Projection 500 Methodology, and as further provided in s. 627.0628. 501 502 12.11. A reasonable margin for underwriting profit and contingencies. For that portion of the rate covering the risk of 503 hurricanes and other catastrophic losses for which the insurer 504 505 has not purchased reinsurance and has exposed its capital and surplus to such risk, the office must approve a rating factor 506 507 that provides the insurer a reasonable rate of return that is 508 commensurate with such risk. 509 13.12. The cost of medical services, if applicable. 14.13. Other relevant factors which impact upon the 510 frequency or severity of claims or upon expenses. 511 The office may at any time review a rate, rating 512 (q) schedule, rating manual, or rate change; the pertinent records 513 439287 4/29/2008 7:16 AM Page 19 of 97

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514 of the insurer; and market conditions. If the office finds on a 515 preliminary basis that a rate may be excessive, inadequate, or unfairly discriminatory, the office shall initiate proceedings 516 517 to disapprove the rate and shall so notify the insurer. However, 518 the office may not disapprove as excessive any rate for which it 519 has given final approval or which has been deemed approved for a period of 1 year after the effective date of the filing unless 520 521 the office finds that a material misrepresentation or material error was made by the insurer or was contained in the filing. 522 Upon being so notified, the insurer or rating organization 523 shall, within 60 days, file with the office all information 524 which, in the belief of the insurer or organization, proves the 525 526 reasonableness, adequacy, and fairness of the rate or rate change. The office shall issue a notice of intent to approve or 527 a notice of intent to disapprove pursuant to the procedures of 528 paragraph (a) within 90 days after receipt of the insurer's 529 530 initial response. In such instances and in any administrative proceeding relating to the legality of the rate, the insurer or 531 rating organization shall carry the burden of proof by a 532 533 preponderance of the evidence to show that the rate is not excessive, inadequate, or unfairly discriminatory. After the 534 535 office notifies an insurer that a rate may be excessive, 536 inadequate, or unfairly discriminatory, unless the office withdraws the notification, the insurer shall not alter the rate 537 except to conform with the office's notice until the earlier of 538 120 days after the date the notification was provided or 180 539 days after the date of the implementation of the rate. The 540 office may, subject to chapter 120, disapprove without the 60-541 439287 4/29/2008 7:16 AM

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542 day notification any rate increase filed by an insurer within 543 the prohibited time period or during the time that the legality 544 of the increased rate is being contested.

545

546 The provisions of this subsection shall not apply to workers' 547 compensation and employer's liability insurance and to motor 548 vehicle insurance.

549 (6) (a) If an insurer requests an administrative hearing pursuant to s. 120.57 related to a rate filing under this 550 section, the director of the Division of Administrative Hearings 551 552 shall expedite the hearing and assign an administrative law 553 judge who shall commence the hearing within 30 days after the 554 receipt of the formal request and shall enter a recommended order within 30 days after the hearing or within 30 days after 555 receipt of the hearing transcript by the administrative law 556 judge, whichever is later. Each party shall be allowed 10 days 557 in which to submit written exceptions to the recommended order. 558 559 The office shall enter a final order within 30 days after the entry of the recommended order. The provisions of this paragraph 560 561 may be waived upon stipulation of all parties.

(b) Upon entry of a final order, the insurer may request a
expedited appellate review pursuant to the Florida Rules of
Appellate Procedure. It is the intent of the Legislature that
the First District Court of Appeal grant an insurer's request
for an expedited appellate review.

567 <u>(c) (a)</u> After any action with respect to a rate filing that 568 constitutes agency action for purposes of the Administrative 569 Procedure Act, except for a rate filing for medical malpractice, 439287 4/29/2008 7:16 AM

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Amendment No. 570 an insurer may, in lieu of demanding a hearing under s. 120.57, 571 require arbitration of the rate filing. However, the arbitration 572 option provision in this subsection does not apply to a rate filing that is made on or after the effective date of this act 573 until January 1, 2010 2009. Arbitration shall be conducted by a 574 575 board of arbitrators consisting of an arbitrator selected by the 576 office, an arbitrator selected by the insurer, and an arbitrator 577 selected jointly by the other two arbitrators. Each arbitrator must be certified by the American Arbitration Association. A 578 decision is valid only upon the affirmative vote of at least two 579 580 of the arbitrators. No arbitrator may be an employee of any 581 insurance regulator or regulatory body or of any insurer, 582 regardless of whether or not the employing insurer does business in this state. The office and the insurer must treat the 583 decision of the arbitrators as the final approval of a rate 584 filing. Costs of arbitration shall be paid by the insurer. 585

(d) (b) Arbitration under this subsection shall be 586 conducted pursuant to the procedures specified in ss. 682.06-587 682.10. Either party may apply to the circuit court to vacate or 588 589 modify the decision pursuant to s. 682.13 or s. 682.14. The commission shall adopt rules for arbitration under this 590 591 subsection, which rules may not be inconsistent with the 592 arbitration rules of the American Arbitration Association as of 593 January 1, 1996.

594 <u>(e) (c)</u> Upon initiation of the arbitration process, the 595 insurer waives all rights to challenge the action of the office 596 under the Administrative Procedure Act or any other provision of 597 law; however, such rights are restored to the insurer if the 439287 4/29/2008 7:16 AM

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598arbitrators fail to render a decision within 90 days after599initiation of the arbitration process.

(9) (a) Effective March 1, 2007, The chief executive officer or chief financial officer of a property insurer and the chief actuary of a property insurer must certify under oath and subject to the penalty of perjury, on a form approved by the commission, the following information, which must accompany a rate filing:

606 1. The signing officer and actuary have reviewed the rate 607 filing;

Based on the signing officer's and actuary's knowledge,
the rate filing does not contain any untrue statement of a
material fact or omit to state a material fact necessary in
order to make the statements made, in light of the circumstances
under which such statements were made, not misleading;

3. Based on the signing officer's and actuary's knowledge,
the information and other factors described in paragraph (2)(b),
including, but not limited to, investment income, fairly present
in all material respects the basis of the rate filing for the
periods presented in the filing; and

4. Based on the signing officer's and actuary's knowledge,
the rate filing reflects all premium savings that are reasonably
expected to result from legislative enactments and are in
accordance with generally accepted and reasonable actuarial
techniques.

623 Section 9. Paragraph (c) of subsection (1) and paragraph 624 (c) of subsection (3) of section 627.0628, Florida Statutes, are

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625 amended, and paragraph (e) is added to subsection (1) of that 626 section, to read:

627 627.0628 Florida Commission on Hurricane Loss Projection
628 Methodology; public records exemption; public meetings
629 exemption.--

630

(1) LEGISLATIVE FINDINGS AND INTENT.--

631 (C) It is the intent of the Legislature to create the Florida Commission on Hurricane Loss Projection Methodology as a 632 panel of experts to provide the most actuarially sophisticated 633 guidelines and standards for projection of hurricane losses 634 possible, given the current state of actuarial science. It is 635 636 the further intent of the Legislature that such standards and 637 guidelines must be used by the State Board of Administration in developing reimbursement premium rates for the Florida Hurricane 638 Catastrophe Fund, and, subject to paragraph (3)(c), must may be 639 used by insurers in rate filings under s. 627.062 unless the way 640 in which such standards and quidelines were applied by the 641 insurer was erroneous, as shown by a preponderance of the 642 643 evidence.

644 (e) The Legislature finds that the authority to take final 645 agency action with respect to insurance ratemaking is vested in 646 the Office of Insurance Regulation and the Financial Services 647 Commission, and that the processes, standards, and guidelines of the Florida Commission on Hurricane Loss Projection Methodology 648 do not constitute final agency action or statements of general 649 applicability that implement, interpret, or prescribe law or 650 policy; accordingly, chapter 120 does not apply to the 651

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652 processes, standards, and quidelines of the Florida Commission 653 on Hurricane Loss Projection Methodology. ADOPTION AND EFFECT OF STANDARDS AND GUIDELINES .--654 (3) 655 (C) With respect to a rate filing under s. 627.062, an insurer must may employ and may not modify or adjust actuarial 656 657 methods, principles, standards, models, or output ranges found by the commission to be accurate or reliable in determining to 658 659 determine hurricane loss factors for use in a rate filing and in 660 determining probable maximum loss levels for reinsurance costs 661 included in a rate filing under s. 627.062; except as provided 662 in s. 627.062(2)(b)12., the use of any other model is reasonable 663 if the insurer provides justification that establishes by a 664 preponderance of the evidence that such use is reasonable and 665 consistent with actuarial standards of practice. Such findings and factors are admissible and relevant in consideration of a 666 rate filing by the office or in any arbitration or 667 668 administrative or judicial review only if the office and the 669 consumer advocate appointed pursuant to s. 627.0613 have access 670 to all of the assumptions and factors that were used in 671 developing the actuarial methods, principles, standards, models, 672 or output ranges, and are not precluded from disclosing such 673 information in a rate proceeding. In any rate hearing under s. 674 120.57 or in any arbitration proceeding under s. 627.062(6), the 675 hearing officer, judge, or arbitration panel may determine 676 whether the office and the consumer advocate were provided with 677 access to all of the assumptions and factors that were used in developing the actuarial methods, principles, standards, models, 678 or output ranges and to determine their admissibility. 679 439287 4/29/2008 7:16 AM

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680 Section 10. Subsection (1) of section 627.0629, Florida681 Statutes, is amended to read:

682

627.0629 Residential property insurance; rate filings.--

683 (1) (a) It is the intent of the Legislature that insurers 684 must provide savings to consumers who install or implement 685 windstorm damage mitigation techniques, alterations, or 686 solutions to their properties to prevent windstorm losses. A 687 rate filing for residential property insurance must include actuarially reasonable discounts, credits, or other rate 688 differentials, or appropriate reductions in deductibles, for 689 690 properties on which fixtures or construction techniques demonstrated to reduce the amount of loss in a windstorm have 691 692 been installed or implemented. The fixtures or construction techniques shall include, but not be limited to, fixtures or 693 construction techniques which enhance roof strength, roof 694 covering performance, roof-to-wall strength, wall-to-floor-to-695 foundation strength, opening protection, and window, door, and 696 skylight strength. Credits, discounts, or other rate 697 differentials, or appropriate reductions in deductibles, for 698 699 fixtures and construction techniques which meet the minimum 700 requirements of the Florida Building Code must be included in 701 the rate filing. All insurance companies must make a rate filing which includes the credits, discounts, or other rate 702 703 differentials or reductions in deductibles by February 28, 2003. 704 By July 1, 2007, the office shall reevaluate the discounts, credits, other rate differentials, and appropriate reductions in 705 deductibles for fixtures and construction techniques that meet 706 707 the minimum requirements of the Florida Building Code, based 439287 4/29/2008 7:16 AM

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Amendment No. 708 upon actual experience or any other loss relativity studies 709 available to the office. The office shall determine the 710 discounts, credits, other rate differentials, and appropriate 711 reductions in deductibles that reflect the full actuarial value 712 of such revaluation, which may be used by insurers in rate 713 filings.

(b) By February 1, 2011, the Office of Insurance 714 715 Regulation, in consultation with the Department of Financial 716 Services and the Department of Community Affairs, shall develop and make publicly available a proposed method for insurers to 717 718 establish discounts, credits, or other rate differentials for 719 hurricane mitigation measures which directly correlate to the 720 numerical rating assigned to a structure pursuant to the uniform 721 home grading scale adopted by the Financial Services Commission pursuant to s. 215.55865, including any proposed changes to the 722 uniform home grading scale. By October 1, 2011, the commission 723 shall adopt rules requiring insurers to make rate filings for 724 725 residential property insurance which revise insurers' discounts, credits, or other rate differentials for hurricane mitigation 726 727 measures so that such rate differentials correlate directly to the uniform home grading scale. The rules may include such 728 729 changes to the uniform home grading scale as the commission 730 determines are necessary, and may specify the minimum required discounts, credits, or other rate differentials. Such rate 731 differentials must be consistent with generally accepted 732 actuarial principles and wind-loss mitigation studies. The rules 733 shall allow a period of at least 2 years after the effective 734 date of the revised mitigation discounts, credits, or other rate 735 439287 4/29/2008 7:16 AM

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736 differentials for a property owner to obtain an inspection or 737 otherwise qualify for the revised credit, during which time the 738 insurer shall continue to apply the mitigation credit that was 739 applied immediately prior to the effective date of the revised 740 credit.

741 Section 11. Paragraphs (a), (b), (c), (m), (p), (w), (dd), 742 and (ee) of subsection (6) of section 627.351, Florida Statutes, 743 are amended, and a new paragraph (ff) is added to that 744 subsection, to read:

745

627.351 Insurance risk apportionment plans.--

746

(6) CITIZENS PROPERTY INSURANCE CORPORATION. --

It is the public purpose of this subsection to 747 (a)1. 748 ensure the existence of an orderly market for property insurance for Floridians and Florida businesses. The Legislature finds 749 that private insurers are unwilling or unable to provide 750 affordable property insurance coverage in this state to the 751 extent sought and needed. The absence of affordable property 752 insurance threatens the public health, safety, and welfare and 753 likewise threatens the economic health of the state. The state 754 755 therefore has a compelling public interest and a public purpose to assist in assuring that property in the state is insured and 756 that it is insured at affordable rates so as to facilitate the 757 758 remediation, reconstruction, and replacement of damaged or destroyed property in order to reduce or avoid the negative 759 760 effects otherwise resulting to the public health, safety, and welfare, to the economy of the state, and to the revenues of the 761 state and local governments which are needed to provide for the 762 public welfare. It is necessary, therefore, to provide 763 439287

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764 affordable property insurance to applicants who are in good 765 faith entitled to procure insurance through the voluntary market 766 but are unable to do so. The Legislature intends by this 767 subsection that affordable property insurance be provided and that it continue to be provided, as long as necessary, through 768 769 Citizens Property Insurance Corporation, a government entity 770 that is an integral part of the state, and that is not a private 771 insurance company. To that end, Citizens Property Insurance Corporation shall strive to increase the availability of 772 affordable property insurance in this state, while achieving 773 774 efficiencies and economies, and while providing service to 775 policyholders, applicants, and agents which is no less than the 776 quality generally provided in the voluntary market, for the achievement of the foregoing public purposes. Because it is 777 essential for this government entity to have the maximum 778 financial resources to pay claims following a catastrophic 779 hurricane, it is the intent of the Legislature that Citizens 780 Property Insurance Corporation continue to be an integral part 781 of the state and that the income of the corporation be exempt 782 783 from federal income taxation and that interest on the debt obligations issued by the corporation be exempt from federal 784 785 income taxation.

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786 2. The Residential Property and Casualty Joint 787 Underwriting Association originally created by this statute 788 shall be known, as of July 1, 2002, as the Citizens Property 789 Insurance Corporation. The corporation shall provide insurance 790 for residential and commercial property, for applicants who are 791 in good faith entitled, but are unable, to procure insurance 439287 4/29/2008 7:16 AM

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Amendment No. 792 through the voluntary market. The corporation shall operate 793 pursuant to a plan of operation approved by order of the Financial Services Commission. The plan is subject to continuous 794 795 review by the commission. The commission may, by order, withdraw approval of all or part of a plan if the commission determines 796 797 that conditions have changed since approval was granted and that the purposes of the plan require changes in the plan. The 798 799 corporation shall continue to operate pursuant to the plan of 800 operation approved by the Office of Insurance Regulation until October 1, 2006. For the purposes of this subsection, 801 802 residential coverage includes both personal lines residential 803 coverage, which consists of the type of coverage provided by homeowner's, mobile home owner's, dwelling, tenant's, 804 condominium unit owner's, and similar policies, and commercial 805 lines residential coverage, which consists of the type of 806 coverage provided by condominium association, apartment 807 808 building, and similar policies. 3. For the purposes of this subsection, the term 809 810 "homestead property" means: 811 a. Property that has been granted a homestead exemption 812 under chapter 196; 813 b. Property for which the owner has a current, written 814 lease with a renter for a term of at least 7 months and for 815 which the dwelling is insured by the corporation for \$200,000 or 816 less; 817 c. An owner occupied mobile home or manufactured home, as defined in s. 320.01, which is permanently affixed to real 818

819 property, is owned by a Florida resident, and has been granted a
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820 homestead exemption under chapter 196 or, if the owner does not own the real property, the owner certifies that the mobile home 821 822 or manufactured home is his or her principal place of residence; 823 d. Tenant's coverage; e. Commercial lines residential property; or 824 825 f. Any county, district, or municipal hospital; a hospital 826 licensed by any not for profit corporation qualified under s. 827 501(c)(3) of the United States Internal Revenue Code; or a continuing care retirement community that is certified under 828 chapter 651 and that receives an exemption from ad valorem taxes 829 830 under chapter 196.

4. For the purposes of this subsection, the term
"nonhomestead property" means property that is not homestead
property.

3.5. Effective January 1, 2009, a personal lines 834 residential structure that has a dwelling replacement cost of \$2 835 \$1 million or more, or a single condominium unit that has a 836 combined dwelling and content replacement cost of \$2 \$1 million 837 or more is not eligible for coverage by the corporation. Such 838 839 dwellings insured by the corporation on December 31, 2008, may continue to be covered by the corporation until the end of the 840 841 policy term. However, such dwellings that are insured by the 842 corporation and become ineligible for coverage due to the 843 provisions of this subparagraph may reapply and obtain coverage in the high risk account and be considered "nonhomestead 844 845 property" if the property owner provides the corporation with a sworn affidavit from one or more insurance agents, on a form 846 847 provided by the corporation, stating that the agents have made 439287 4/29/2008 7:16 AM

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848 their best efforts to obtain coverage and that the property has 849 been rejected for coverage by at least one authorized insurer 850 and at least three surplus lines insurers. If such conditions are met, the dwelling may be insured by the corporation for up 851 to 3 years, after which time the dwelling is ineligible for 852 853 coverage. The office shall approve the method used by the corporation for valuing the dwelling replacement cost for the 854 855 purposes of this subparagraph. If a policyholder is insured by the corporation prior to being determined to be ineligible 856 pursuant to this subparagraph and such policyholder files a 857 lawsuit challenging the determination, the policyholder may 858 remain insured by the corporation until the conclusion of the 859 860 litigation.

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6. For properties constructed on or after January 1, 2009,
the corporation may not insure any property located within 2,500
feet landward of the coastal construction control line created
pursuant to s. 161.053 unless the property meets the
requirements of the code-plus building standards developed by
the Florida Building Commission.

867 4.7. It is the intent of the Legislature that policyholders, applicants, and agents of the corporation receive 868 869 service and treatment of the highest possible level but never 870 less than that generally provided in the voluntary market. It 871 also is intended that the corporation be held to service standards no less than those applied to insurers in the 872 voluntary market by the office with respect to responsiveness, 873 timeliness, customer courtesy, and overall dealings with 874 policyholders, applicants, or agents of the corporation. 875 439287 4/29/2008 7:16 AM

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876 5.8. Effective January 1, 2009, a personal lines 877 residential structure that is located in the "wind-borne debris region," as defined in s. 1609.2, International Building Code 878 879 (2006), and that has an insured value on the structure of \$750,000 or more is not eligible for coverage by the corporation 880 881 unless the structure has opening protections as required under 882 the Florida Building Code for a newly constructed residential 883 structure in that area. A residential structure shall be deemed to comply with the requirements of this subparagraph if it has 884 shutters or opening protections on all openings and if such 885 886 opening protections complied with the Florida Building Code at the time they were installed. 887

888 (b)1. All insurers authorized to write one or more subject lines of business in this state are subject to assessment by the 889 corporation and, for the purposes of this subsection, are 890 referred to collectively as "assessable insurers." Insurers 891 writing one or more subject lines of business in this state 892 pursuant to part VIII of chapter 626 are not assessable 893 insurers, but insureds who procure one or more subject lines of 894 895 business in this state pursuant to part VIII of chapter 626 are subject to assessment by the corporation and are referred to 896 897 collectively as "assessable insureds." An authorized insurer's 898 assessment liability shall begin on the first day of the 899 calendar year following the year in which the insurer was issued a certificate of authority to transact insurance for subject 900 lines of business in this state and shall terminate 1 year after 901 the end of the first calendar year during which the insurer no 902

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903 longer holds a certificate of authority to transact insurance 904 for subject lines of business in this state.

905

2.a. All revenues, assets, liabilities, losses, and 906 expenses of the corporation shall be divided into three separate accounts as follows: 907

908 (I)A personal lines account for personal residential 909 policies issued by the corporation or issued by the Residential 910 Property and Casualty Joint Underwriting Association and renewed 911 by the corporation that provide comprehensive, multiperil coverage on risks that are not located in areas eligible for 912 coverage in the Florida Windstorm Underwriting Association as 913 914 those areas were defined on January 1, 2002, and for such 915 policies that do not provide coverage for the peril of wind on risks that are located in such areas: 916

A commercial lines account for commercial residential 917 (II)and commercial nonresidential policies issued by the corporation 918 919 or issued by the Residential Property and Casualty Joint Underwriting Association and renewed by the corporation that 920 provide coverage for basic property perils on risks that are not 921 922 located in areas eligible for coverage in the Florida Windstorm Underwriting Association as those areas were defined on January 923 924 1, 2002, and for such policies that do not provide coverage for 925 the peril of wind on risks that are located in such areas; and

926 (III) A high-risk account for personal residential 927 policies and commercial residential and commercial nonresidential property policies issued by the corporation or 928 transferred to the corporation that provide coverage for the 929 peril of wind on risks that are located in areas eligible for 930 439287 4/29/2008 7:16 AM

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931 coverage in the Florida Windstorm Underwriting Association as 932 those areas were defined on January 1, 2002. Subject to the 933 approval of a business plan by the Financial Services Commission and Legislative Budget Commission as provided in this sub sub-934 subparagraph, but no earlier than March 31, 2007, The 935 936 corporation may offer policies that provide multiperil coverage and the corporation shall continue to offer policies that 937 provide coverage only for the peril of wind for risks located in 938 areas eligible for coverage in the high-risk account. In issuing 939 multiperil coverage, the corporation may use its approved policy 940 forms and rates for the personal lines account. An applicant or 941 942 insured who is eliqible to purchase a multiperil policy from the 943 corporation may purchase a multiperil policy from an authorized insurer without prejudice to the applicant's or insured's 944 eligibility to prospectively purchase a policy that provides 945 coverage only for the peril of wind from the corporation. An 946 947 applicant or insured who is eliqible for a corporation policy that provides coverage only for the peril of wind may elect to 948 purchase or retain such policy and also purchase or retain 949 950 coverage excluding wind from an authorized insurer without prejudice to the applicant's or insured's eligibility to 951 952 prospectively purchase a policy that provides multiperil 953 coverage from the corporation. It is the goal of the Legislature 954 that there would be an overall average savings of 10 percent or more for a policyholder who currently has a wind-only policy 955 with the corporation, and an ex-wind policy with a voluntary 956 insurer or the corporation, and who then obtains a multiperil 957 958 policy from the corporation. It is the intent of the Legislature 439287 4/29/2008 7:16 AM

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that the offer of multiperil coverage in the high-risk account 959 960 be made and implemented in a manner that does not adversely 961 affect the tax-exempt status of the corporation or creditworthiness of or security for currently outstanding 962 963 financing obligations or credit facilities of the high-risk 964 account, the personal lines account, or the commercial lines 965 account. By March 1, 2007, the corporation shall prepare and 966 submit for approval by the Financial Services Commission and 967 Legislative Budget Commission a report detailing the corporation's business plan for issuing multiperil coverage in 968 969 the high-risk account. The business plan shall be approved or disapproved within 30 days after receipt, as submitted or 970 971 modified and resubmitted by the corporation. The business plan must include: the impact of such multiperil coverage on the 972 corporation's financial resources, the impact of such multiperil 973 974 coverage on the corporation's tax-exempt status, the manner in 975 which the corporation plans to implement the processing of 976 applications and policy forms for new and existing 977 policyholders, the impact of such multiperil coverage on the 978 corporation's ability to deliver customer service at the high 979 level required by this subsection, the ability of the 980 corporation to process claims, the ability of the corporation to 981 quote and issue policies, the impact of such multiperil coverage 982 on the corporation's agents, the impact of such multiperil coverage on the corporation's existing policyholders, and the 983 impact of such multiperil coverage on rates and premium. The 984 985 high-risk account must also include quota share primary insurance under subparagraph (c)2. The area eligible for 986 439287 4/29/2008 7:16 AM

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987 coverage under the high-risk account also includes the area 988 within Port Canaveral, which is bordered on the south by the 989 City of Cape Canaveral, bordered on the west by the Banana 990 River, and bordered on the north by Federal Government property.

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991 The three separate accounts must be maintained as long b. 992 as financing obligations entered into by the Florida Windstorm 993 Underwriting Association or Residential Property and Casualty 994 Joint Underwriting Association are outstanding, in accordance with the terms of the corresponding financing documents. When 995 the financing obligations are no longer outstanding, in 996 accordance with the terms of the corresponding financing 997 documents, the corporation may use a single account for all 998 999 revenues, assets, liabilities, losses, and expenses of the corporation. Consistent with the requirement of this 1000 subparagraph and prudent investment policies that minimize the 1001 cost of carrying debt, the board shall exercise its best efforts 1002 1003 to retire existing debt or to obtain approval of necessary 1004 parties to amend the terms of existing debt, so as to structure the most efficient plan to consolidate the three separate 1005 1006 accounts into a single account. By February 1, 2007, the board shall submit a report to the Financial Services Commission, the 1007 1008 President of the Senate, and the Speaker of the House of 1009 Representatives which includes an analysis of consolidating the 1010 accounts, the actions the board has taken to minimize the cost of carrying debt, and its recommendations for executing the most 1011 1012 efficient plan.

1013 c. Creditors of the Residential Property and Casualty 1014 Joint Underwriting Association and of the accounts specified in 439287 4/29/2008 7:16 AM

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Amendment No. 1015 sub-sub-subparagraphs a.(I) and (II) may have a claim against, and recourse to, the accounts referred to in sub-sub-1016 1017 subparagraphs a.(I) and (II) and shall have no claim against, or recourse to, the account referred to in sub-subparagraph 1018 a.(III). Creditors of the Florida Windstorm Underwriting 1019 1020 Association shall have a claim against, and recourse to, the account referred to in sub-sub-subparagraph a.(III) and shall 1021 1022 have no claim against, or recourse to, the accounts referred to 1023 in sub-sub-subparagraphs a.(I) and (II).

1024 d. Revenues, assets, liabilities, losses, and expenses not 1025 attributable to particular accounts shall be prorated among the 1026 accounts.

e. The Legislature finds that the revenues of the
corporation are revenues that are necessary to meet the
requirements set forth in documents authorizing the issuance of
bonds under this subsection.

1031 f. No part of the income of the corporation may inure to 1032 the benefit of any private person.

1033

3. With respect to a deficit in an account:

1034 After accounting for the Citizens policyholder a. surcharge imposed under sub-subparagraph i., when the remaining 1035 1036 projected deficit incurred in a particular calendar year is not greater than 6 10 percent of the aggregate statewide direct 1037 1038 written premium for the subject lines of business for the prior calendar year, the entire deficit shall be recovered through 1039 1040 regular assessments of assessable insurers under paragraph (p) and assessable insureds. 1041

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1042

b. After accounting for the Citizens policyholder

1043 surcharge imposed under sub-subparagraph i., when the remaining 1044 projected deficit incurred in a particular calendar year exceeds 6 10 percent of the aggregate statewide direct written premium 1045 for the subject lines of business for the prior calendar year, 1046 1047 the corporation shall levy regular assessments on assessable insurers under paragraph (p) and on assessable insureds in an 1048 amount equal to the greater of 6 10 percent of the deficit or 6 1049 10 percent of the aggregate statewide direct written premium for 1050 the subject lines of business for the prior calendar year. Any 1051 remaining deficit shall be recovered through emergency 1052 1053 assessments under sub-subparagraph d.

1054 c. Each assessable insurer's share of the amount being assessed under sub-subparagraph a. or sub-subparagraph b. shall 1055 1056 be in the proportion that the assessable insurer's direct written premium for the subject lines of business for the year 1057 1058 preceding the assessment bears to the aggregate statewide direct written premium for the subject lines of business for that year. 1059 The assessment percentage applicable to each assessable insured 1060 1061 is the ratio of the amount being assessed under sub-subparagraph a. or sub-subparagraph b. to the aggregate statewide direct 1062 1063 written premium for the subject lines of business for the prior 1064 year. Assessments levied by the corporation on assessable insurers under sub-subparagraphs a. and b. shall be paid as 1065 required by the corporation's plan of operation and paragraph 1066 (p). notwithstanding any other provision of this subsection, the 1067 aggregate amount of a regular assessment for a deficit incurred 1068 in a particular calendar year shall be reduced by the estimated 1069 439287 4/29/2008 7:16 AM

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Amendment No. 1070 amount to be received by the corporation from the Citizens 1071 policyholder surcharge under subparagraph (c)10. and the amount 1072 collected or estimated to be collected from the assessment on Citizens policyholders pursuant to sub subparagraph i. 1073 Assessments levied by the corporation on assessable insureds 1074 1075 under sub-subparagraphs a. and b. shall be collected by the 1076 surplus lines agent at the time the surplus lines agent collects the surplus lines tax required by s. 626.932 and shall be paid 1077 to the Florida Surplus Lines Service Office at the time the 1078 surplus lines agent pays the surplus lines tax to the Florida 1079 1080 Surplus Lines Service Office. Upon receipt of regular 1081 assessments from surplus lines agents, the Florida Surplus Lines 1082 Service Office shall transfer the assessments directly to the corporation as determined by the corporation. 1083

Upon a determination by the board of governors that a 1084 d. deficit in an account exceeds the amount that will be recovered 1085 1086 through regular assessments under sub-subparagraph a. or subsubparagraph b., plus the amount that is expected to be 1087 recovered through surcharges under sub-subparagraph i., as to 1088 1089 the remaining projected deficit the board shall levy, after verification by the office, emergency assessments, for as many 1090 1091 years as necessary to cover the deficits, to be collected by 1092 assessable insurers and the corporation and collected from 1093 assessable insureds upon issuance or renewal of policies for subject lines of business, excluding National Flood Insurance 1094 policies. The amount of the emergency assessment collected in a 1095 particular year shall be a uniform percentage of that year's 1096 direct written premium for subject lines of business and all 1097 439287 4/29/2008 7:16 AM

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1098 accounts of the corporation, excluding National Flood Insurance 1099 Program policy premiums, as annually determined by the board and 1100 verified by the office. The office shall verify the arithmetic calculations involved in the board's determination within 30 1101 days after receipt of the information on which the determination 1102 1103 was based. Notwithstanding any other provision of law, the corporation and each assessable insurer that writes subject 1104 lines of business shall collect emergency assessments from its 1105 policyholders without such obligation being affected by any 1106 credit, limitation, exemption, or deferment. Emergency 1107 assessments levied by the corporation on assessable insureds 1108 shall be collected by the surplus lines agent at the time the 1109 1110 surplus lines agent collects the surplus lines tax required by s. 626.932 and shall be paid to the Florida Surplus Lines 1111 1112 Service Office at the time the surplus lines agent pays the surplus lines tax to the Florida Surplus Lines Service Office. 1113 1114 The emergency assessments so collected shall be transferred 1115 directly to the corporation on a periodic basis as determined by the corporation and shall be held by the corporation solely in 1116 1117 the applicable account. The aggregate amount of emergency assessments levied for an account under this sub-subparagraph in 1118 any calendar year may, at the discretion of the board of 1119 governors, be less than but may not exceed the greater of 10 1120 1121 percent of the amount needed to cover the original deficit, plus interest, fees, commissions, required reserves, and other costs 1122 associated with financing of the original deficit, or 10 percent 1123 of the aggregate statewide direct written premium for subject 1124 1125 lines of business and for all accounts of the corporation for 439287 4/29/2008 7:16 AM

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1126 the prior year, plus interest, fees, commissions, required 1127 reserves, and other costs associated with financing the original 1128 deficit.

The corporation may pledge the proceeds of assessments, 1129 e. 1130 projected recoveries from the Florida Hurricane Catastrophe 1131 Fund, other insurance and reinsurance recoverables, policyholder surcharges and other surcharges, and other funds available to 1132 the corporation as the source of revenue for and to secure bonds 1133 issued under paragraph (p), bonds or other indebtedness issued 1134 under subparagraph (c)3., or lines of credit or other financing 1135 mechanisms issued or created under this subsection, or to retire 1136 any other debt incurred as a result of deficits or events giving 1137 1138 rise to deficits, or in any other way that the board determines will efficiently recover such deficits. The purpose of the lines 1139 1140 of credit or other financing mechanisms is to provide additional resources to assist the corporation in covering claims and 1141 1142 expenses attributable to a catastrophe. As used in this subsection, the term "assessments" includes regular assessments 1143 under sub-subparagraph a., sub-subparagraph b., or subparagraph 1144 1145 (p)1. and emergency assessments under sub-subparagraph d. 1146 Emergency assessments collected under sub-subparagraph d. are 1147 not part of an insurer's rates, are not premium, and are not subject to premium tax, fees, or commissions; however, failure 1148 1149 to pay the emergency assessment shall be treated as failure to pay premium. The emergency assessments under sub-subparagraph d. 1150 shall continue as long as any bonds issued or other indebtedness 1151 incurred with respect to a deficit for which the assessment was 1152 imposed remain outstanding, unless adequate provision has been 1153 439287 4/29/2008 7:16 AM

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1154 made for the payment of such bonds or other indebtedness 1155 pursuant to the documents governing such bonds or other 1156 indebtedness.

f. As used in this subsection for purposes of any deficit 1157 1158 incurred on or after January 25, 2007, the term "subject lines 1159 of business" means insurance written by assessable insurers or procured by assessable insureds for all property and casualty 1160 lines of business in this state, but not including workers' 1161 compensation or medical malpractice. As used in the sub-1162 subparagraph, the term "property and casualty lines of business" 1163 includes all lines of business identified on Form 2, Exhibit of 1164 1165 Premiums and Losses, in the annual statement required of 1166 authorized insurers by s. 624.424 and any rule adopted under this section, except for those lines identified as accident and 1167 health insurance and except for policies written under the 1168 National Flood Insurance Program or the Federal Crop Insurance 1169 1170 Program. For purposes of this sub-subparagraph, the term "workers' compensation" includes both workers' compensation 1171 insurance and excess workers' compensation insurance. 1172

1173 g. The Florida Surplus Lines Service Office shall 1174 determine annually the aggregate statewide written premium in 1175 subject lines of business procured by assessable insureds and 1176 shall report that information to the corporation in a form and 1177 at a time the corporation specifies to ensure that the 1178 corporation can meet the requirements of this subsection and the 1179 corporation's financing obligations.

1180 h. The Florida Surplus Lines Service Office shall verify 1181 the proper application by surplus lines agents of assessment 439287 4/29/2008 7:16 AM

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1182 percentages for regular assessments and emergency assessments 1183 levied under this subparagraph on assessable insureds and shall 1184 assist the corporation in ensuring the accurate, timely 1185 collection and payment of assessments by surplus lines agents as 1186 required by the corporation.

1187 i. If a deficit is incurred in any account in 2008 or thereafter, the board of governors shall levy a Citizens 1188 policyholder surcharge an immediate assessment against the 1189 premium of each nonhomestead property policyholder in all 1190 accounts of the corporation, as a uniform percentage of the 1191 premium of the policy of up to 10 percent of such premium, which 1192 1193 funds shall be used to offset the deficit. If this assessment is 1194 insufficient to eliminate the deficit, the board of governors shall levy an additional assessment against all policyholders of 1195 the corporation for a 12-month period, which shall be collected 1196 at the time of issuance or renewal of a policy, as a uniform 1197 1198 percentage of the premium for the policy of up to 15 10 percent of such premium, which funds shall be used to further offset the 1199 deficit. Citizens policyholder surcharges under this sub-1200 1201 subparagraph are not considered premium and are not subject to commissions, fees, or premium taxes. However, failure to pay 1202 1203 such surcharges shall be treated as failure to pay premium. If the amount of any assessments or surcharges 1204 j. collected from corporation policyholders, assessable insurers or 1205

1206 their policyholders, or assessable insureds exceeds the amount

1207 of the deficits, such excess amounts shall be remitted to and

1208 retained by the corporation in a reserve to be used by the

1209 corporation, as determined by the board of governors and 439287 4/29/2008 7:16 AM

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1210 approved by the office, to pay claims or reduce any past, 1211 present, or future plan-year deficits or to reduce outstanding 1212 debt. The board of governors shall maintain separate accounting records that consolidate data for nonhomestead properties, 1213 including, but not limited to, number of policies, insured 1214 1215 values, premiums written, and losses. The board of governors shall annually report to the office and the Legislature a 1216 summary of such data. 1217

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(c) The plan of operation of the corporation:

1219 1. Must provide for adoption of residential property and 1220 casualty insurance policy forms and commercial residential and 1221 nonresidential property insurance forms, which forms must be 1222 approved by the office prior to use. The corporation shall adopt 1223 the following policy forms:

a. Standard personal lines policy forms that are
comprehensive multiperil policies providing full coverage of a
residential property equivalent to the coverage provided in the
private insurance market under an HO-3, HO-4, or HO-6 policy.

b. Basic personal lines policy forms that are policies
similar to an HO-8 policy or a dwelling fire policy that provide
coverage meeting the requirements of the secondary mortgage
market, but which coverage is more limited than the coverage
under a standard policy.

1233 c. Commercial lines residential and nonresidential policy 1234 forms that are generally similar to the basic perils of full 1235 coverage obtainable for commercial residential structures and 1236 commercial nonresidential structures in the admitted voluntary 1237 market.

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d. Personal lines and commercial lines residential property insurance forms that cover the peril of wind only. The forms are applicable only to residential properties located in areas eligible for coverage under the high-risk account referred to in sub-subparagraph (b)2.a.

e. Commercial lines nonresidential property insurance
forms that cover the peril of wind only. The forms are
applicable only to nonresidential properties located in areas
eligible for coverage under the high-risk account referred to in
sub-subparagraph (b)2.a.

1248 f. The corporation may adopt variations of the policy 1249 forms listed in sub-subparagraphs a.-e. that contain more 1250 restrictive coverage.

1251 2.a. Must provide that the corporation adopt a program in 1252 which the corporation and authorized insurers enter into quota 1253 share primary insurance agreements for hurricane coverage, as 1254 defined in s. 627.4025(2)(a), for eligible risks, and adopt 1255 property insurance forms for eligible risks which cover the 1256 peril of wind only. As used in this subsection, the term:

1257 (I) "Quota share primary insurance" means an arrangement in which the primary hurricane coverage of an eligible risk is 1258 1259 provided in specified percentages by the corporation and an 1260 authorized insurer. The corporation and authorized insurer are 1261 each solely responsible for a specified percentage of hurricane coverage of an eligible risk as set forth in a quota share 1262 1263 primary insurance agreement between the corporation and an authorized insurer and the insurance contract. The 1264

1265 responsibility of the corporation or authorized insurer to pay 439287

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1266 its specified percentage of hurricane losses of an eligible risk, as set forth in the quota share primary insurance 1267 1268 agreement, may not be altered by the inability of the other party to the agreement to pay its specified percentage of 1269 1270 hurricane losses. Eligible risks that are provided hurricane 1271 coverage through a quota share primary insurance arrangement 1272 must be provided policy forms that set forth the obligations of the corporation and authorized insurer under the arrangement, 1273 clearly specify the percentages of quota share primary insurance 1274 provided by the corporation and authorized insurer, and 1275 conspicuously and clearly state that neither the authorized 1276 1277 insurer nor the corporation may be held responsible beyond its 1278 specified percentage of coverage of hurricane losses.

(II) "Eligible risks" means personal lines residential and commercial lines residential risks that meet the underwriting criteria of the corporation and are located in areas that were eligible for coverage by the Florida Windstorm Underwriting Association on January 1, 2002.

b. The corporation may enter into quota share primary
insurance agreements with authorized insurers at corporation
coverage levels of 90 percent and 50 percent.

1287 c. If the corporation determines that additional coverage 1288 levels are necessary to maximize participation in quota share 1289 primary insurance agreements by authorized insurers, the 1290 corporation may establish additional coverage levels. However, 1291 the corporation's quota share primary insurance coverage level 1292 may not exceed 90 percent.

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d. Any quota share primary insurance agreement entered into between an authorized insurer and the corporation must provide for a uniform specified percentage of coverage of hurricane losses, by county or territory as set forth by the corporation board, for all eligible risks of the authorized insurer covered under the quota share primary insurance agreement.

e. Any quota share primary insurance agreement entered into between an authorized insurer and the corporation is subject to review and approval by the office. However, such agreement shall be authorized only as to insurance contracts entered into between an authorized insurer and an insured who is already insured by the corporation for wind coverage.

For all eligible risks covered under guota share 1306 f. 1307 primary insurance agreements, the exposure and coverage levels for both the corporation and authorized insurers shall be 1308 1309 reported by the corporation to the Florida Hurricane Catastrophe Fund. For all policies of eligible risks covered under quota 1310 share primary insurance agreements, the corporation and the 1311 1312 authorized insurer shall maintain complete and accurate records for the purpose of exposure and loss reimbursement audits as 1313 required by Florida Hurricane Catastrophe Fund rules. The 1314 corporation and the authorized insurer shall each maintain 1315 1316 duplicate copies of policy declaration pages and supporting 1317 claims documents.

1318 g. The corporation board shall establish in its plan of 1319 operation standards for quota share agreements which ensure that 1320 there is no discriminatory application among insurers as to the 439287 4/29/2008 7:16 AM

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1321 terms of quota share agreements, pricing of quota share 1322 agreements, incentive provisions if any, and consideration paid 1323 for servicing policies or adjusting claims.

The quota share primary insurance agreement between the h. 1324 corporation and an authorized insurer must set forth the 1325 1326 specific terms under which coverage is provided, including, but not limited to, the sale and servicing of policies issued under 1327 the agreement by the insurance agent of the authorized insurer 1328 producing the business, the reporting of information concerning 1329 eligible risks, the payment of premium to the corporation, and 1330 arrangements for the adjustment and payment of hurricane claims 1331 incurred on eligible risks by the claims adjuster and personnel 1332 1333 of the authorized insurer. Entering into a quota sharing insurance agreement between the corporation and an authorized 1334 1335 insurer shall be voluntary and at the discretion of the authorized insurer. 1336

1337 3. May provide that the corporation may employ or otherwise contract with individuals or other entities to provide 1338 administrative or professional services that may be appropriate 1339 1340 to effectuate the plan. The corporation shall have the power to borrow funds, by issuing bonds or by incurring other 1341 indebtedness, and shall have other powers reasonably necessary 1342 to effectuate the requirements of this subsection, including, 1343 1344 without limitation, the power to issue bonds and incur other indebtedness in order to refinance outstanding bonds or other 1345 indebtedness. The corporation may, but is not required to, seek 1346 judicial validation of its bonds or other indebtedness under 1347 1348 chapter 75. The corporation may issue bonds or incur other 439287 4/29/2008 7:16 AM

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Amendment No. 1349 indebtedness, or have bonds issued on its behalf by a unit of local government pursuant to subparagraph (p)2., in the absence 1350 1351 of a hurricane or other weather-related event, upon a determination by the corporation, subject to approval by the 1352 1353 office, that such action would enable it to efficiently meet the 1354 financial obligations of the corporation and that such financings are reasonably necessary to effectuate the 1355 1356 requirements of this subsection. The corporation is authorized to take all actions needed to facilitate tax-free status for any 1357 such bonds or indebtedness, including formation of trusts or 1358 other affiliated entities. The corporation shall have the 1359 authority to pledge assessments, projected recoveries from the 1360 1361 Florida Hurricane Catastrophe Fund, other reinsurance recoverables, market equalization and other surcharges, and 1362 1363 other funds available to the corporation as security for bonds or other indebtedness. In recognition of s. 10, Art. I of the 1364 1365 State Constitution, prohibiting the impairment of obligations of 1366 contracts, it is the intent of the Legislature that no action be taken whose purpose is to impair any bond indenture or financing 1367 1368 agreement or any revenue source committed by contract to such bond or other indebtedness. 1369

1370 Must require that the corporation operate subject to 4.a. the supervision and approval of a board of governors consisting 1371 1372 of eight individuals who are residents of this state, from different geographical areas of this state. The Governor, the 1373 Chief Financial Officer, the President of the Senate, and the 1374 Speaker of the House of Representatives shall each appoint two 1375 1376 members of the board. At least one of the two members appointed 439287 4/29/2008 7:16 AM

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Amendment No. 1377 by each appointing officer must have demonstrated expertise in insurance. The Chief Financial Officer shall designate one of 1378 1379 the appointees as chair. All board members serve at the pleasure of the appointing officer. All members of the board of governors 1380 are subject to removal at will by the officers who appointed 1381 1382 them. All board members, including the chair, must be appointed to serve for 3-year terms beginning annually on a date 1383 designated by the plan. Any board vacancy shall be filled for 1384 the unexpired term by the appointing officer. The Chief 1385 Financial Officer shall appoint a technical advisory group to 1386 provide information and advice to the board of governors in 1387 connection with the board's duties under this subsection. The 1388 1389 executive director and senior managers of the corporation shall be engaged by the board and serve at the pleasure of the board. 1390 1391 Any executive director appointed on or after July 1, 2006, is subject to confirmation by the Senate. The executive director is 1392 1393 responsible for employing other staff as the corporation may 1394 require, subject to review and concurrence by the board.

The board shall create a Market Accountability Advisory 1395 b. 1396 Committee to assist the corporation in developing awareness of its rates and its customer and agent service levels in 1397 1398 relationship to the voluntary market insurers writing similar 1399 coverage. The members of the advisory committee shall consist of 1400 the following 11 persons, one of whom must be elected chair by the members of the committee: four representatives, one 1401 appointed by the Florida Association of Insurance Agents, one by 1402 the Florida Association of Insurance and Financial Advisors, one 1403 1404 by the Professional Insurance Agents of Florida, and one by the 439287 4/29/2008 7:16 AM

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Amendment No. 1405 Latin American Association of Insurance Agencies; three representatives appointed by the insurers with the three highest 1406 1407 voluntary market share of residential property insurance business in the state; one representative from the Office of 1408 1409 Insurance Regulation; one consumer appointed by the board who is 1410 insured by the corporation at the time of appointment to the committee; one representative appointed by the Florida 1411 Association of Realtors; and one representative appointed by the 1412 Florida Bankers Association. All members must serve for 3-year 1413 terms and may serve for consecutive terms. The committee shall 1414 report to the corporation at each board meeting on insurance 1415 market issues which may include rates and rate competition with 1416 1417 the voluntary market; service, including policy issuance, claims processing, and general responsiveness to policyholders, 1418 1419 applicants, and agents; and matters relating to depopulation.

14205. Must provide a procedure for determining the1421eligibility of a risk for coverage, as follows:

Subject to the provisions of s. 627.3517, with respect 1422 a. to personal lines residential risks, if the risk is offered 1423 1424 coverage from an authorized insurer at the insurer's approved rate under either a standard policy including wind coverage or, 1425 1426 if consistent with the insurer's underwriting rules as filed with the office, a basic policy including wind coverage, for a 1427 1428 new application to the corporation for coverage, the risk is not eligible for any policy issued by the corporation unless the 1429 premium for coverage from the authorized insurer is more than 15 1430 percent greater than the premium for comparable coverage from 1431 1432 the corporation. If the risk is not able to obtain any such 439287 4/29/2008 7:16 AM

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Amendment No. 1433 offer, the risk is eliqible for either a standard policy including wind coverage or a basic policy including wind 1434 1435 coverage issued by the corporation; however, if the risk could not be insured under a standard policy including wind coverage 1436 regardless of market conditions, the risk shall be eligible for 1437 1438 a basic policy including wind coverage unless rejected under subparagraph 9. However, with regard to a policyholder of the 1439 corporation or a policyholder removed from the corporation 1440 through an assumption agreement until the end of the assumption 1441 period, the policyholder remains eligible for coverage from the 1442 corporation regardless of any offer of coverage from an 1443 1444 authorized insurer or surplus lines insurer. The corporation 1445 shall determine the type of policy to be provided on the basis of objective standards specified in the underwriting manual and 1446 based on generally accepted underwriting practices. 1447

(I) If the risk accepts an offer of coverage through the
market assistance plan or an offer of coverage through a
mechanism established by the corporation before a policy is
issued to the risk by the corporation or during the first 30
days of coverage by the corporation, and the producing agent who
submitted the application to the plan or to the corporation is
not currently appointed by the insurer, the insurer shall:

(A) Pay to the producing agent of record of the policy,
for the first year, an amount that is the greater of the
insurer's usual and customary commission for the type of policy
written or a fee equal to the usual and customary commission of
the corporation; or

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(B) Offer to allow the producing agent of record of the
policy to continue servicing the policy for a period of not less
than 1 year and offer to pay the agent the greater of the
insurer's or the corporation's usual and customary commission
for the type of policy written.

1466 If the producing agent is unwilling or unable to accept 1467 appointment, the new insurer shall pay the agent in accordance 1468 with sub-sub-subparagraph (A).

(II) When the corporation enters into a contractual agreement for a take-out plan, the producing agent of record of the corporation policy is entitled to retain any unearned commission on the policy, and the insurer shall:

(A) Pay to the producing agent of record of the
corporation policy, for the first year, an amount that is the
greater of the insurer's usual and customary commission for the
type of policy written or a fee equal to the usual and customary
commission of the corporation; or

(B) Offer to allow the producing agent of record of the
corporation policy to continue servicing the policy for a period
of not less than 1 year and offer to pay the agent the greater
of the insurer's or the corporation's usual and customary
commission for the type of policy written.

1484 If the producing agent is unwilling or unable to accept 1485 appointment, the new insurer shall pay the agent in accordance 1486 with sub-sub-subparagraph (A).

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1487 With respect to commercial lines residential risks, for b. a new application to the corporation for coverage, if the risk 1488 1489 is offered coverage under a policy including wind coverage from an authorized insurer at its approved rate, the risk is not 1490 eligible for any policy issued by the corporation unless the 1491 1492 premium for coverage from the authorized insurer is more than 15 percent greater than the premium for comparable coverage from 1493 the corporation. If the risk is not able to obtain any such 1494 offer, the risk is eligible for a policy including wind coverage 1495 issued by the corporation. However, with regard to a 1496 policyholder of the corporation or a policyholder removed from 1497 1498 the corporation through an assumption agreement until the end of 1499 the assumption period, the policyholder remains eligible for coverage from the corporation regardless of any offer of 1500 coverage from an authorized insurer or surplus lines insurer. 1501

(I) If the risk accepts an offer of coverage through the
market assistance plan or an offer of coverage through a
mechanism established by the corporation before a policy is
issued to the risk by the corporation or during the first 30
days of coverage by the corporation, and the producing agent who
submitted the application to the plan or the corporation is not
currently appointed by the insurer, the insurer shall:

(A) Pay to the producing agent of record of the policy,
for the first year, an amount that is the greater of the
insurer's usual and customary commission for the type of policy
written or a fee equal to the usual and customary commission of
the corporation; or

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(B) Offer to allow the producing agent of record of the
policy to continue servicing the policy for a period of not less
than 1 year and offer to pay the agent the greater of the
insurer's or the corporation's usual and customary commission
for the type of policy written.

1520 If the producing agent is unwilling or unable to accept1521 appointment, the new insurer shall pay the agent in accordance1522 with sub-sub-subparagraph (A).

(II) When the corporation enters into a contractual agreement for a take-out plan, the producing agent of record of the corporation policy is entitled to retain any unearned commission on the policy, and the insurer shall:

(A) Pay to the producing agent of record of the
corporation policy, for the first year, an amount that is the
greater of the insurer's usual and customary commission for the
type of policy written or a fee equal to the usual and customary
commission of the corporation; or

(B) Offer to allow the producing agent of record of the corporation policy to continue servicing the policy for a period of not less than 1 year and offer to pay the agent the greater of the insurer's or the corporation's usual and customary commission for the type of policy written.

1538 If the producing agent is unwilling or unable to accept 1539 appointment, the new insurer shall pay the agent in accordance 1540 with sub-sub-subparagraph (A).

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1541 For purposes of determining comparable coverage under с. 1542 sub-subparagraphs a. and b., the comparison shall be based on 1543 those forms and coverages that are reasonably comparable. The corporation may rely on a determination of comparable coverage 1544 1545 and premium made by the producing agent who submits the 1546 application to the corporation, made in the agent's capacity as 1547 the corporation's agent. A comparison may be made solely of the premium with respect to the main building or structure only on 1548 the following basis: the same coverage A or other building 1549 limits; the same percentage hurricane deductible that applies on 1550 an annual basis or that applies to each hurricane for commercial 1551 1552 residential property; the same percentage of ordinance and law 1553 coverage, if the same limit is offered by both the corporation and the authorized insurer; the same mitigation credits, to the 1554 extent the same types of credits are offered both by the 1555 corporation and the authorized insurer; the same method for loss 1556 1557 payment, such as replacement cost or actual cash value, if the 1558 same method is offered both by the corporation and the authorized insurer in accordance with underwriting rules; and 1559 1560 any other form or coverage that is reasonably comparable as determined by the board. If an application is submitted to the 1561 1562 corporation for wind-only coverage in the high-risk account, the 1563 premium for the corporation's wind-only policy plus the premium 1564 for the ex-wind policy that is offered by an authorized insurer to the applicant shall be compared to the premium for multiperil 1565 coverage offered by an authorized insurer, subject to the 1566 standards for comparison specified in this subparagraph. If the 1567 corporation or the applicant requests from the authorized 1568 439287 4/29/2008 7:16 AM

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1569 insurer a breakdown of the premium of the offer by types of 1570 coverage so that a comparison may be made by the corporation or 1571 its agent and the authorized insurer refuses or is unable to 1572 provide such information, the corporation may treat the offer as 1573 not being an offer of coverage from an authorized insurer at the 1574 insurer's approved rate.

1575 6. Must include rules for classifications of risks and1576 rates therefor.

Must provide that if premium and investment income for 1577 7. 1578 an account attributable to a particular calendar year are in excess of projected losses and expenses for the account 1579 1580 attributable to that year, such excess shall be held in surplus 1581 in the account. Such surplus shall be available to defray deficits in that account as to future years and shall be used 1582 1583 for that purpose prior to assessing assessable insurers and assessable insureds as to any calendar year. 1584

1585 8. Must provide objective criteria and procedures to be 1586 uniformly applied for all applicants in determining whether an 1587 individual risk is so hazardous as to be uninsurable. In making 1588 this determination and in establishing the criteria and 1589 procedures, the following shall be considered:

a. Whether the likelihood of a loss for the individual
risk is substantially higher than for other risks of the same
class; and

1593 b. Whether the uncertainty associated with the individual 1594 risk is such that an appropriate premium cannot be determined. 1595

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1596 The acceptance or rejection of a risk by the corporation shall 1597 be construed as the private placement of insurance, and the 1598 provisions of chapter 120 shall not apply.

9. Must provide that the corporation shall make its best efforts to procure catastrophe reinsurance at reasonable rates, to cover its projected 100-year probable maximum loss as determined by the board of governors.

10. Must provide that in the event of regular deficit 1603 assessments under sub subparagraph (b)3.a. or sub subparagraph 1604 (b)3.b., in the personal lines account, the commercial lines 1605 1606 residential account, or the high-risk account, the corporation 1607 shall levy upon corporation policyholders in its next rate 1608 filing, or by a separate rate filing solely for this purpose, a Citizens policyholder surcharge arising from a regular 1609 1610 assessment in such account in a percentage equal to the total 1611 amount of such regular assessments divided by the aggregate 1612 statewide direct written premium for subject lines of business for the prior calendar year. For purposes of calculating the 1613 Citizens policyholder surcharge to be levied under this 1614 1615 subparagraph, the total amount of the regular assessment to which this surcharge is related shall be determined as set forth 1616 1617 in subparagraph (b)3., without deducting the estimated Citizens policyholder surcharge. Citizens policyholder surcharges under 1618 1619 this subparagraph are not considered premium and are not subject to commissions, fees, or premium taxes; however, failure to pay 1620 1621 a market equalization surcharge shall be treated as failure to 1622 pay premium.

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1623 <u>10.11.</u> The policies issued by the corporation must provide 1624 that, if the corporation or the market assistance plan obtains 1625 an offer from an authorized insurer to cover the risk at its 1626 approved rates, the risk is no longer eligible for renewal 1627 through the corporation, except as otherwise provided in this 1628 subsection.

1629 <u>11.12.</u> Corporation policies and applications must include 1630 a notice that the corporation policy could, under this section, 1631 be replaced with a policy issued by an authorized insurer that 1632 does not provide coverage identical to the coverage provided by 1633 the corporation. The notice shall also specify that acceptance 1634 of corporation coverage creates a conclusive presumption that 1635 the applicant or policyholder is aware of this potential.

12.13. May establish, subject to approval by the office, 1636 1637 different eligibility requirements and operational procedures for any line or type of coverage for any specified county or 1638 area if the board determines that such changes to the 1639 1640 eligibility requirements and operational procedures are justified due to the voluntary market being sufficiently stable 1641 1642 and competitive in such area or for such line or type of coverage and that consumers who, in good faith, are unable to 1643 1644 obtain insurance through the voluntary market through ordinary 1645 methods would continue to have access to coverage from the 1646 corporation. When coverage is sought in connection with a real property transfer, such requirements and procedures shall not 1647 provide for an effective date of coverage later than the date of 1648 the closing of the transfer as established by the transferor, 1649 the transferee, and, if applicable, the lender. 1650 439287

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Amendment No. 1651 13.14. Must provide that, with respect to the high-risk 1652 account, any assessable insurer with a surplus as to 1653 policyholders of \$25 million or less writing 25 percent or more of its total countrywide property insurance premiums in this 1654 state may petition the office, within the first 90 days of each 1655 1656 calendar year, to qualify as a limited apportionment company. A 1657 regular assessment levied by the corporation on a limited apportionment company for a deficit incurred by the corporation 1658 for the high-risk account in 2006 or thereafter may be paid to 1659 the corporation on a monthly basis as the assessments are 1660 collected by the limited apportionment company from its insureds 1661 1662 pursuant to s. 627.3512, but the regular assessment must be paid 1663 in full within 12 months after being levied by the corporation. A limited apportionment company shall collect from its 1664 policyholders any emergency assessment imposed under sub-1665 subparagraph (b)3.d. The plan shall provide that, if the office 1666 1667 determines that any regular assessment will result in an impairment of the surplus of a limited apportionment company, 1668 the office may direct that all or part of such assessment be 1669 1670 deferred as provided in subparagraph (p)4. However, there shall be no limitation or deferment of an emergency assessment to be 1671 1672 collected from policyholders under sub-subparagraph (b)3.d.

1673 <u>14.15.</u> Must provide that the corporation appoint as its 1674 licensed agents only those agents who also hold an appointment 1675 as defined in s. 626.015(3) with an insurer who at the time of 1676 the agent's initial appointment by the corporation is authorized 1677 to write and is actually writing personal lines residential

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1678 property coverage, commercial residential property coverage, or 1679 commercial nonresidential property coverage within the state.

1680 <u>15.16.</u> Must provide, by July 1, 2007, a premium payment 1681 plan option to its policyholders which allows at a minimum for 1682 quarterly and semiannual payment of premiums. A monthly payment 1683 plan may, but is not required to, be offered.

16.17. Must limit coverage on mobile homes or manufactured homes built prior to 1994 to actual cash value of the dwelling rather than replacement costs of the dwelling.

1687 <u>17.18.</u> May provide such limits of coverage as the board
1688 determines, consistent with the requirements of this subsection.

1689 <u>18.19.</u> May require commercial property to meet specified 1690 hurricane mitigation construction features as a condition of 1691 eligibility for coverage.

1692 (m)1. Rates for coverage provided by the corporation shall be actuarially sound and subject to the requirements of s. 1693 1694 627.062, except as otherwise provided in this paragraph. The corporation shall file its recommended rates with the office at 1695 least annually. The corporation shall provide any additional 1696 1697 information regarding the rates which the office requires. The office shall consider the recommendations of the board and issue 1698 1699 a final order establishing the rates for the corporation within 1700 45 days after the recommended rates are filed. The corporation 1701 may not pursue an administrative challenge or judicial review of the final order of the office. 1702

1703 2. In addition to the rates otherwise determined pursuant 1704 to this paragraph, the corporation shall impose and collect an

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amount equal to the premium tax provided for in s. 624.509 to augment the financial resources of the corporation.

1707 3. After the public hurricane loss-projection model under s. 627.06281 has been found to be accurate and reliable by the 1708 Florida Commission on Hurricane Loss Projection Methodology, 1709 1710 that model shall serve as the minimum benchmark for determining 1711 the windstorm portion of the corporation's rates. This subparagraph does not require or allow the corporation to adopt 1712 rates lower than the rates otherwise required or allowed by this 1713 1714 paragraph.

1715 The rate filings for the corporation which were 4. approved by the office and which took effect January 1, 2007, 1716 1717 are rescinded, except for those rates that were lowered. As soon as possible, the corporation shall begin using the lower rates 1718 that were in effect on December 31, 2006, and shall provide 1719 refunds to policyholders who have paid higher rates as a result 1720 1721 of that rate filing. The rates in effect on December 31, 2006, shall remain in effect for the 2007 and 2008 calendar years 1722 except for any rate change that results in a lower rate. The 1723 1724 next rate change that may increase rates shall take effect January 1, 2009, pursuant to a new rate filing recommended by 1725 1726 the corporation and established by the office, subject to the requirements of this paragraph. 1727

17285.a. Beginning on January 15, 2009, and each year1729thereafter, the corporation must make a recommended actuarially1730sound rate filing for each personal and commercial line of1731business it writes, to be effective no earlier than July 1,

1732 2009.

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1733	Amendment No. b. For the 36-month period beginning with the effective
1734	date for each of the rate filings made by the corporation on
1735	January 15, 2009, the rates established by the office for the
1736	corporation for its personal residential multiperil policies,
1737	its commercial residential multiperil policies, and its
1738	commercial nonresidential multiperil policies may not result in
1739	an overall average statewide premium increase of more than 10
1740	percent or an increase for any single policyholder of more than
1741	10 percent, during the first 12-month period, and may not result
1742	in an overall average statewide premium increase of more than 10
1743	percent, or an increase for any single policyholder of more than
1744	10 percent, during each of the two subsequent 12-month periods,
1745	excluding coverage changes and surcharges.
1746	c. For the 36-month period beginning with the effective
1747	date for the rate filings made by the corporation on January 15,
1748	2009, the rates established by the office for the corporation
1749	for its personal residential wind-only policies, its commercial
1750	residential wind-only policies, and its commercial
1751	nonresidential wind-only policies may not result in an overall
1752	average statewide premium increase of more than 10 percent, or
1753	an increase for any single policyholder of more than 10 percent,
1754	during the first 12-month period, and may not result in an
1755	overall average statewide premium increase of more than 10
1756	percent, or an increase for any single policyholder of more than
1757	10 percent, during each of the two subsequent 12-month periods,
1758	excluding coverage changes and surcharges.
1759	(p)1. The corporation shall certify to the office its
1760	needs for annual assessments as to a particular calendar year,
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1761 and for any interim assessments that it deems to be necessary to 1762 sustain operations as to a particular year pending the receipt 1763 of annual assessments. Upon verification, the office shall approve such certification, and the corporation shall levy such 1764 annual or interim assessments. Such assessments shall be 1765 1766 prorated as provided in paragraph (b). The corporation shall take all reasonable and prudent steps necessary to collect the 1767 amount of assessment due from each assessable insurer, 1768 including, if prudent, filing suit to collect such assessment. 1769 1770 If the corporation is unable to collect an assessment from any assessable insurer, the uncollected assessments shall be levied 1771 1772 as an additional assessment against the assessable insurers and 1773 any assessable insurer required to pay an additional assessment as a result of such failure to pay shall have a cause of action 1774 1775 against such nonpaying assessable insurer. Assessments shall be included as an appropriate factor in the making of rates. The 1776 1777 failure of a surplus lines agent to collect and remit any 1778 regular or emergency assessment levied by the corporation is considered to be a violation of s. 626.936 and subjects the 1779 1780 surplus lines agent to the penalties provided in that section.

Amendment No.

The governing body of any unit of local government, any 1781 2. 1782 residents of which are insured by the corporation, may issue 1783 bonds as defined in s. 125.013 or s. 166.101 from time to time 1784 to fund an assistance program, in conjunction with the corporation, for the purpose of defraying deficits of the 1785 corporation. In order to avoid needless and indiscriminate 1786 proliferation, duplication, and fragmentation of such assistance 1787 programs, any unit of local government, any residents of which 1788 439287 4/29/2008 7:16 AM

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1789 are insured by the corporation, may provide for the payment of 1790 losses, regardless of whether or not the losses occurred within 1791 or outside of the territorial jurisdiction of the local government. Revenue bonds under this subparagraph may not be 1792 issued until validated pursuant to chapter 75, unless a state of 1793 1794 emergency is declared by executive order or proclamation of the 1795 Governor pursuant to s. 252.36 making such findings as are necessary to determine that it is in the best interests of, and 1796 necessary for, the protection of the public health, safety, and 1797 general welfare of residents of this state and declaring it an 1798 1799 essential public purpose to permit certain municipalities or 1800 counties to issue such bonds as will permit relief to claimants 1801 and policyholders of the corporation. Any such unit of local government may enter into such contracts with the corporation 1802 1803 and with any other entity created pursuant to this subsection as are necessary to carry out this paragraph. Any bonds issued 1804 1805 under this subparagraph shall be payable from and secured by moneys received by the corporation from emergency assessments 1806 under sub-subparagraph (b)3.d., and assigned and pledged to or 1807 1808 on behalf of the unit of local government for the benefit of the holders of such bonds. The funds, credit, property, and taxing 1809 1810 power of the state or of the unit of local government shall not 1811 be pledged for the payment of such bonds. If any of the bonds 1812 remain unsold 60 days after issuance, the office shall require all insurers subject to assessment to purchase the bonds, which 1813 shall be treated as admitted assets; each insurer shall be 1814 required to purchase that percentage of the unsold portion of 1815 the bond issue that equals the insurer's relative share of 1816 439287 4/29/2008 7:16 AM

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1817 assessment liability under this subsection. An insurer shall not

1818 be required to purchase the bonds to the extent that the office

1819 determines that the purchase would endanger or impair the

1820 solvency of the insurer.

3.a. The corporation shall adopt one or more programs 1821 1822 subject to approval by the office for the reduction of both new and renewal writings in the corporation. Beginning January 1, 1823 2008, any program the corporation adopts for the payment of 1824 bonuses to an insurer for each risk the insurer removes from the 1825 corporation shall comply with s. 627.3511(2) and may not exceed 1826 the amount referenced in s. 627.3511(2) for each risk removed. 1827 The corporation may consider any prudent and not unfairly 1828 1829 discriminatory approach to reducing corporation writings, and may adopt a credit against assessment liability or other 1830 liability that provides an incentive for insurers to take risks 1831 out of the corporation and to keep risks out of the corporation 1832 1833 by maintaining or increasing voluntary writings in counties or 1834 areas in which corporation risks are highly concentrated and a program to provide a formula under which an insurer voluntarily 1835 1836 taking risks out of the corporation by maintaining or increasing voluntary writings will be relieved wholly or partially from 1837 1838 assessments under sub-subparagraphs (b)3.a. and b. However, any 1839 "take-out bonus" or payment to an insurer must be conditioned on 1840 the property being insured for at least 5 years by the insurer, unless canceled or nonrenewed by the policyholder. If the policy 1841 is canceled or nonrenewed by the policyholder before the end of 1842 the 5-year period, the amount of the take-out bonus must be 1843 prorated for the time period the policy was insured. When the 1844 439287 4/29/2008 7:16 AM

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1845 corporation enters into a contractual agreement for a take-out 1846 plan, the producing agent of record of the corporation policy is 1847 entitled to retain any unearned commission on such policy, and 1848 the insurer shall either:

(I) Pay to the producing agent of record of the policy, for the first year, an amount which is the greater of the insurer's usual and customary commission for the type of policy written or a policy fee equal to the usual and customary commission of the corporation; or

(II) Offer to allow the producing agent of record of the policy to continue servicing the policy for a period of not less than 1 year and offer to pay the agent the insurer's usual and customary commission for the type of policy written. If the producing agent is unwilling or unable to accept appointment by the new insurer, the new insurer shall pay the agent in accordance with sub-sub-subparagraph (I).

1861 b. Any credit or exemption from regular assessments adopted under this subparagraph shall last no longer than the 3 1862 years following the cancellation or expiration of the policy by 1863 1864 the corporation. With the approval of the office, the board may extend such credits for an additional year if the insurer 1865 1866 quarantees an additional year of renewability for all policies 1867 removed from the corporation, or for 2 additional years if the 1868 insurer guarantees 2 additional years of renewability for all policies so removed. 1869

1870 c. There shall be no credit, limitation, exemption, or 1871 deferment from emergency assessments to be collected from 1872 policyholders pursuant to sub-subparagraph (b)3.d. 439287 4/29/2008 7:16 AM

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Amendment No. 1873 The plan shall provide for the deferment, in whole or 4. 1874 in part, of the assessment of an assessable insurer, other than 1875 an emergency assessment collected from policyholders pursuant to sub-subparagraph (b)3.d., if the office finds that payment of 1876 1877 the assessment would endanger or impair the solvency of the 1878 insurer. In the event an assessment against an assessable insurer is deferred in whole or in part, the amount by which 1879 1880 such assessment is deferred may be assessed against the other assessable insurers in a manner consistent with the basis for 1881 assessments set forth in paragraph (b). 1882 Effective July 1, 2007, in order to evaluate the costs 1883 5. and benefits of approved take-out plans, if the corporation pays 1884 1885 a bonus or other payment to an insurer for an approved take-out plan, it shall maintain a record of the address or such other 1886 1887 identifying information on the property or risk removed in order to track if and when the property or risk is later insured by 1888 1889 the corporation. 6. Any policy taken out, assumed, or removed from the 1890 corporation is, as of the effective date of the take-out, 1891 1892 assumption, or removal, direct insurance issued by the insurer

and not by the corporation, even if the corporation continues to service the policies. This subparagraph applies to policies of the corporation and not policies taken out, assumed, or removed from any other entity.

1897 (w)1. The following records of the corporation are 1898 confidential and exempt from the provisions of s. 119.07(1) and 1899 s. 24(a), Art. I of the State Constitution:

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Amendment No. 1900 Underwriting files, except that a policyholder or an a. 1901 applicant shall have access to his or her own underwriting 1902 files. Confidential and exempt underwriting file records may also be released to other governmental agencies upon written 1903 request and demonstration of need; such records held by the 1904 1905 receiving agency remain confidential and exempt as provided herein. 1906

1907 Claims files, until termination of all litigation and b. settlement of all claims arising out of the same incident, 1908 although portions of the claims files may remain exempt, as 1909 otherwise provided by law. Confidential and exempt claims file 1910 records may be released to other governmental agencies upon 1911 1912 written request and demonstration of need; such records held by the receiving agency remain confidential and exempt as provided 1913 1914 for herein.

Records obtained or generated by an internal auditor 1915 c. 1916 pursuant to a routine audit, until the audit is completed, or if 1917 the audit is conducted as part of an investigation, until the investigation is closed or ceases to be active. An investigation 1918 1919 is considered "active" while the investigation is being conducted with a reasonable, good faith belief that it could 1920 1921 lead to the filing of administrative, civil, or criminal 1922 proceedings.

1923 d. Matters reasonably encompassed in privileged attorney-1924 client communications.

e. Proprietary information licensed to the corporation
under contract and the contract provides for the confidentiality
of such proprietary information.
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1928 f. All information relating to the medical condition or 1929 medical status of a corporation employee which is not relevant 1930 to the employee's capacity to perform his or her duties, except 1931 as otherwise provided in this paragraph. Information <u>that which</u> 1932 is exempt shall include, but is not limited to, information 1933 relating to workers' compensation, insurance benefits, and 1934 retirement or disability benefits.

1935 Upon an employee's entrance into the employee q. assistance program, a program to assist any employee who has a 1936 behavioral or medical disorder, substance abuse problem, or 1937 emotional difficulty which affects the employee's job 1938 performance, all records relative to that participation shall be 1939 1940 confidential and exempt from the provisions of s. 119.07(1) and s. 24(a), Art. I of the State Constitution, except as otherwise 1941 provided in s. 112.0455(11). 1942

h. Information relating to negotiations for financing,
reinsurance, depopulation, or contractual services, until the
conclusion of the negotiations.

i. Minutes of closed meetings regarding underwriting
files, and minutes of closed meetings regarding an open claims
file until termination of all litigation and settlement of all
claims with regard to that claim, except that information
otherwise confidential or exempt by law <u>shall</u> will be redacted.

1951 <u>2. If</u> When an authorized insurer is considering 1952 underwriting a risk insured by the corporation, relevant 1953 underwriting files and confidential claims files may be released 1954 to the insurer provided the insurer agrees in writing, notarized 1955 and under oath, to maintain the confidentiality of such files. 439287 4/29/2008 7:16 AM

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Amendment No. 1956 If When a file is transferred to an insurer that file is no 1957 longer a public record because it is not held by an agency 1958 subject to the provisions of the public records law. Underwriting files and confidential claims files may also be 1959 released to staff of and the board of governors of the market 1960 1961 assistance plan established pursuant to s. 627.3515, who must 1962 retain the confidentiality of such files, except such files may be released to authorized insurers that are considering assuming 1963 the risks to which the files apply, provided the insurer agrees 1964 in writing, notarized and under oath, to maintain the 1965 confidentiality of such files. Finally, the corporation or the 1966 1967 board or staff of the market assistance plan may make the 1968 following information obtained from underwriting files and confidential claims files available to licensed general lines 1969 insurance agents: name, address, and telephone number of the 1970 residential property owner or insured; location of the risk; 1971 rating information; loss history; and policy type. The receiving 1972 1973 licensed general lines insurance agent must retain the confidentiality of the information received. 1974

1975 3. A policyholder who has filed suit against the 1976 corporation has the right to discover the contents of his or her 1977 own claims file to the same extent that discovery of such 1978 contents would be available from a private insurer in litigation 1979 as provided by the Florida Rules of Civil Procedure, the Florida Evidence Code, and other applicable law. Pursuant to subpoena, a 1980 1981 third party has the right to discover the contents of an insured's or applicant's underwriting or claims file to the same 1982 extent that discovery of such contents would be available from a 1983 439287 4/29/2008 7:16 AM

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Amendment No. 1984 private insurer by subpoena as provided by the Florida Rules of 1985 Civil Procedure, the Florida Evidence Code, and other applicable law, and subject to any confidentiality protections requested by 1986 the corporation and agreed to by the seeking party or ordered by 1987 the court. The corporation may release confidential underwriting 1988 1989 and claims file contents and information as it deems necessary 1990 and appropriate to underwrite or service insurance policies and 1991 claims, subject to any confidentiality protections deemed necessary and appropriate by the corporation. 1992

4.2. Portions of meetings of the corporation are exempt 1993 from the provisions of s. 286.011 and s. 24(b), Art. I of the 1994 State Constitution wherein confidential underwriting files or 1995 1996 confidential open claims files are discussed. All portions of corporation meetings which are closed to the public shall be 1997 recorded by a court reporter. The court reporter shall record 1998 the times of commencement and termination of the meeting, all 1999 discussion and proceedings, the names of all persons present at 2000 any time, and the names of all persons speaking. No portion of 2001 any closed meeting shall be off the record. Subject to the 2002 2003 provisions hereof and s. 119.07(1)(e) - (q), the court reporter's notes of any closed meeting shall be retained by the corporation 2004 2005 for a minimum of 5 years. A copy of the transcript, less any 2006 exempt matters, of any closed meeting wherein claims are discussed shall become public as to individual claims after 2007 settlement of the claim. 2008

2009 (dd)1. For policies subject to nonrenewal as a result of 2010 the risk being no longer eligible for coverage due to being 2011 valued at \$1 million or more, the corporation shall, directly or 439287 4/29/2008 7:16 AM

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2012 through the market assistance plan, make information from 2013 confidential underwriting and claims files of policyholders 2014 available only to licensed general lines agents who register 2015 with the corporation to receive such information according to 2016 the following procedures:

2017 2. By August 1, 2006, the corporation shall provide such 2018 policyholders who are not eligible for renewal the opportunity 2019 to request in writing, within 30 days after the notification is 2020 sent, that information from their confidential underwriting and 2021 claims files not be released to licensed general lines agents 2022 registered pursuant to this paragraph.

2023 3. By August 1, 2006, the corporation shall make available 2024 to licensed general lines agents the registration procedures to be used to obtain confidential information from underwriting and 2025 2026 claims files for such policies not eligible for renewal. As a condition of registration, the corporation shall require the 2027 2028 licensed general lines agent to attest that the agent has the experience and relationships with authorized or surplus lines 2029 2030 carriers to attempt to offer replacement coverage for such 2031 policies.

4. By September 1, 2006, the corporation shall make 2032 2033 available through a secured website to licensed general lines 2034 agents registered pursuant to this paragraph application, 2035 rating, loss history, mitigation, and policy type information 2036 relating to such policies not eligible for renewal and for which the policyholder has not requested the corporation withhold such 2037 information. The registered licensed general lines agent may use 2038 such information to contact and assist the policyholder in 2039 439287

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2040 securing replacement policies, and the agent may disclose to the 2041 policyholder that such information was obtained from the 2042 corporation.

2043 (dd) (ee) The assets of the corporation may be invested and 2044 managed by the State Board of Administration.

2045 (ee) (ff) The office may establish a pilot program to offer optional sinkhole coverage in one or more counties or other 2046 2047 territories of the corporation for the purpose of implementing s. 627.706, as amended by s. 30, chapter 2007-1, Laws of 2048 Florida. Under the pilot program, the corporation is not 2049 2050 required to issue a notice of nonrenewal to exclude sinkhole 2051 coverage upon the renewal of existing policies, but may exclude 2052 such coverage using a notice of coverage change.

2053 (ff) The corporation shall report claims data and 2054 histories to a consumer reporting agency, as defined by the 2055 federal Fair Credit Reporting Act, 15 U.S.C. 1681 et seq., that 2056 maintains a national database of similar data for use in 2057 connection with the underwriting of insurance involving a 2058 consumer.

2059 Section 12. Paragraph (b) of subsection (2) of section 2060 627.4133, Florida Statutes, is amended to read:

2061 627.4133 Notice of cancellation, nonrenewal, or renewal 2062 premium.--

(2) With respect to any personal lines or commercial residential property insurance policy, including, but not limited to, any homeowner's, mobile home owner's, farmowner's, condominium association, condominium unit owner's, apartment

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2067 building, or other policy covering a residential structure or 2068 its contents:

2069 (b) The insurer shall give the named insured written notice of nonrenewal, cancellation, or termination at least 100 2070 2071 days prior to the effective date of the nonrenewal, 2072 cancellation, or termination. However, the insurer shall give at 2073 least 100 days' written notice, or written notice by June 1, whichever is earlier, for any nonrenewal, cancellation, or 2074 termination that would be effective between June 1 and November 2075 30. The notice must include the reason or reasons for the 2076 2077 nonrenewal, cancellation, or termination, except that:

20781. The insurer shall give the named insured written notice2079of nonrenewal, cancellation, or termination at least 180 days2080prior to the effective date of the nonrenewal, cancellation, or2081termination for a named insured whose residential structure has2082been insured by that insurer or an affiliated insurer for at2083least a 5-year period immediately prior to date of the written2084notice.

2085 2.1. When cancellation is for nonpayment of premium, at 2086 least 10 days' written notice of cancellation accompanied by the reason therefor shall be given. As used in this subparagraph, 2087 2088 the term "nonpayment of premium" means failure of the named 2089 insured to discharge when due any of her or his obligations in 2090 connection with the payment of premiums on a policy or any installment of such premium, whether the premium is payable 2091 2092 directly to the insurer or its agent or indirectly under any premium finance plan or extension of credit, or failure to 2093 2094 maintain membership in an organization if such membership is a 439287 4/29/2008 7:16 AM

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Amendment No. 2095 condition precedent to insurance coverage. "Nonpayment of 2096 premium" also means the failure of a financial institution to 2097 honor an insurance applicant's check after delivery to a licensed agent for payment of a premium, even if the agent has 2098 2099 previously delivered or transferred the premium to the insurer. 2100 If a dishonored check represents the initial premium payment, the contract and all contractual obligations shall be void ab 2101 initio unless the nonpayment is cured within the earlier of 5 2102 days after actual notice by certified mail is received by the 2103 2104 applicant or 15 days after notice is sent to the applicant by 2105 certified mail or registered mail, and if the contract is void, 2106 any premium received by the insurer from a third party shall be 2107 refunded to that party in full.

3.2. When such cancellation or termination occurs during 2108 2109 the first 90 days during which the insurance is in force and the insurance is canceled or terminated for reasons other than 2110 2111 nonpayment of premium, at least 20 days' written notice of cancellation or termination accompanied by the reason therefor 2112 shall be given except where there has been a material 2113 2114 misstatement or misrepresentation or failure to comply with the underwriting requirements established by the insurer. 2115

2116 <u>4.3.</u> The requirement for providing written notice of 2117 nonrenewal by June 1 of any nonrenewal that would be effective 2118 between June 1 and November 30 does not apply to the following 2119 situations, but the insurer remains subject to the requirement 2120 to provide such notice at least 100 days prior to the effective 2121 date of nonrenewal:

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2122	a. A policy that is nonrenewed due to a revision in the
2123	coverage for sinkhole losses and catastrophic ground cover
2124	collapse pursuant to s. 627.730, as amended by s. 30, chapter
2125	2007-1, Laws of Florida.
2126	b. A policy that is nonrenewed by Citizens Property
2127	Insurance Corporation, pursuant to s. 627.351(6), for a policy
2128	that has been assumed by an authorized insurer offering
2129	replacement or renewal coverage to the policyholder.
2130	
2131	After the policy has been in effect for 90 days, the policy
2132	shall not be canceled by the insurer except when there has been
2133	a material misstatement, a nonpayment of premium, a failure to
2134	comply with underwriting requirements established by the insurer
2135	within 90 days of the date of effectuation of coverage, or a
2136	substantial change in the risk covered by the policy or when the
2137	cancellation is for all insureds under such policies for a given
2138	class of insureds. This paragraph does not apply to individually
2139	rated risks having a policy term of less than 90 days.
2140	Section 13. Effective January 1, 2011, section 689.262,
2141	Florida Statutes, is created to read:
2142	689.262 Sale of residential property; disclosure of
2143	windstorm mitigation ratingA purchaser of residential
2144	property must be informed of the windstorm mitigation rating of
2145	the structure, based on the uniform home grading scale adopted
2146	pursuant to s. 215.55865. The rating must be included in the
2147	contract for sale or as a separate document attached to the
2148	contract for sale. The Financial Services Commission may adopt
2149	rules, consistent with other state laws, to administer this
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2150	Amendment No. section, including the form of the disclosure and the
2151	requirements for the windstorm mitigation inspection or report
2152	that is required for purposes of determining the rating.
2153	Section 14. (1) By December 15, 2008, Citizens Property
2154	Insurance Corporation shall transfer \$250 million to the General
2155	Revenue Fund if the combined surplus of each account as defined
2156	in s. 627.351(6), Florida Statutes, exceeds \$1 billion. The
2157	board of governors of Citizens Property Insurance Corporation
2158	must make a reasonable estimate of such surplus on or after
2159	December 1, 2008, and no later than December 14, 2008, using
2160	generally accepted actuarial and accounting practices,
2161	recognizing that audited financial statements will not yet be
2162	available.
2163	(2) Beginning July 1, 2009, the board shall make quarterly
2164	transfers of any interest earned prior to the issuance of any
2165	surplus notes, interest paid, and principal repaid to the state
2166	for any surplus notes issued by the program after December 1,
2167	2008, to Citizens Property Insurance Corporation, provided such
2168	surplus notes were funded exclusively by an appropriation to the
2169	program by the Legislature for the 2008-2009 fiscal year. The
2170	corporation shall credit each account as defined in s.
2171	627.351(6) in a pro rata manner for the funds removed from each
2172	account to make the transfer required by subsection (11).
2173	Section 15. <u>Citizens Property Insurance Corporation may</u>
2174	not use any amendments made to s. 215.5595, Florida Statutes, by
2175	this act or any transfer of funds authorized by this act as
2176	justification or cause in seeking any rate or assessment
2177	<u>increase.</u> 439287
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Amendment No.

2178 Section 16. Subsection (3) is added to section 627.06281, 2179 Florida Statutes, to read:

2180 627.06281 Public hurricane loss projection model; 2181 reporting of data by insurers.--

2182 (3) (a) A residential property insurer may have access to 2183 and use the public hurricane loss projection model, including 2184 all assumptions and factors and all detailed loss results, for 2185 the purpose of calculating rate indications in a rate filing and 2186 for analytical purposes, including any analysis or evaluation of 2187 the model required under actuarial standards of practice.

(b) By January 1, 2009, the office shall establish by rule a fee schedule for access to and the use of the model. The fee schedule must be reasonably calculated to cover only the actual costs of providing access to and the use of the model.

2192 Section 17. Section 627.0655, Florida Statutes, is amended 2193 to read:

2194 627.0655 Policyholder loss or expense-related premium 2195 discounts. -- An insurer or person authorized to engage in the business of insurance in this state may include, in the premium 2196 2197 charged an insured for any policy, contract, or certificate of insurance, a discount based on the fact that another policy, 2198 2199 contract, or certificate of any type has been purchased by the 2200 insured from the same insurer or insurer group, the Citizens 2201 Property Insurance Corporation created under s. 627.351(6) if the same insurance agent is servicing both policies, or an 2202 insurer that has removed the policy from the Citizens Property 2203 Insurance Corporation if the same insurance agent is servicing 2204 2205 both policies.

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2206	Amendment No. Section 18. (1) The Citizens Property Insurance
2207	Corporation Mission Review Task Force is created to analyze and
2208	compile available data and to develop a report setting forth the
2209	statutory and operational changes needed to return Citizens
2210	Property Insurance Corporation to its former role as a state-
2211	created, noncompetitive residual market mechanism that provides
2212	property insurance coverage to risks that are otherwise entitled
2213	but unable to obtain such coverage in the private insurance
2214	market. The task force shall submit a report to the Governor,
2215	the President of the Senate, and the Speaker of the House of
2216	Representatives by January 31, 2009. At a minimum, the task
2217	force shall analyze and evaluate relevant and applicable
2218	information and data and develop recommendations concerning:
2219	(a) The nature of Citizens Property Insurance
2220	Corporation's role in providing property insurance coverage only
2221	if such coverage is not available from private insurers.
2222	(b) The ability of the admitted market to offer policies
2223	to those consumers formerly insured through Citizens Property
2223	Insurance Corporation. This consideration shall include, but not
2224	be limited to, the availability of private market reinsurance
2225	and coverage through the Florida Hurricane Catastrophe Fund, the
2220	general adequacy of the admitted market's current rates, and the
2228	capacity of the industry to offer policies to former Citizens
2229	Property Insurance Corporation policyholders within existing
2230	writing ratio limitations.
2231	(c) The appropriate relationship of rates charged by
2232	Citizens Property Insurance Corporation to rates charged by
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0000	Amendment No.
2233	private insurers, with due consideration for the corporation's
2234	role as a noncompetitive residual market mechanism.
2235	(d) The relationships between the exposure of Citizens
2236	Property Insurance Corporation to catastrophic hurricane losses,
2237	the corporation's history of purchasing inadequate or no
2238	reinsurance coverage, and the corporation's lack of adequate
2239	capital to meet its potential claim obligations without
2240	incurring large deficits.
2241	(e) The adverse effects on the people and the economy of
2242	this state of the large, multiyear deficit assessments by
2243	Citizens Property Insurance Corporation that may be levied on
2244	businesses and households in this state, and steps that can be
2245	taken to reduce those effects.
2246	(f) The operational implications of the variation in the
2247	number of policies in force over time in Citizens Property
2248	Insurance Corporation and the merits of outsourcing some or all
2249	of its operational responsibilities.
2250	(g) Changes in the mission and operations of Citizens
2251	Property Insurance Corporation to reduce or eliminate any
2252	adverse effect such mission and operations may be having on the
2253	promotion of sound and economic growth and development of the
2254	coastal areas of this state.
2255	(h) Appropriate and consistent geographic boundaries of
2256	the high-risk account.
2257	(2) The task force shall be composed of 19 members as
2258	follows:
2259	(a) Three members appointed by the Speaker of the House of
2260	Representatives.
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2261	(b) Three members appointed by the President of the
2262	Senate.
2263	(c) Four members appointed by the Governor who are not
2264	employed by or professionally affiliated with an insurance
2265	company or a subsidiary of an insurance company, at least two of
2266	whom must be consumer advocates or members of a consumer
2267	advocacy organization or agency.
2268	(d) Nine members appointed as representatives of private
2269	insurance companies as follows:
2270	1. Two members representing two separate insurance
2271	companies that each provide at least 150,000 homeowner's
2272	insurance policies in this state at the time of the creation of
2273	the task force.
2274	2. Two members representing two separate insurance
2275	companies that each provide fewer than 150,000 homeowner's
2276	insurance policies in this state at the time of the creation of
2277	the task force.
2278	3. Two members representing two separate insurance
2279	companies among the 10 insurance companies writing the greatest
2280	amount of commercial multiperil insurance premium in this state
2281	at the time of the creation of the task force.
2282	4. Three members appointed by the Chief Financial Officer
2283	representing insurance agents in this state.
2284	
2285	Of each pair of members appointed under subparagraphs 1., 2.,
2286	and 3., one shall be appointed by the President of the Senate
2287	and one by the Speaker of the House of Representatives.
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2288	Amendment No. (3) The task force shall conduct research, hold public
2289	meetings, receive testimony, employ consultants and
2290	administrative staff, and undertake other activities determined
2291	by its members to be necessary to complete its responsibilities.
2292	Citizens Property Insurance Corporation shall have appropriate
2293	senior staff attend task force meetings, shall respond to
2294	requests for testimony and data by the task force, shall
2295	otherwise cooperate with the task force, and shall provide
2296	funding for the necessary costs of implementing the provisions
2297	of this section.
2298	(4) A member of the task force may not delegate his or her
2299	attendance or voting power to a designee.
2300	(5) Members of the task force shall serve without
2301	compensation but are entitled to receive reimbursement for
2302	travel and per diem as provided in s. 112.061, Florida Statutes.
2303	(6) The appointments to the task force must be completed
2304	within 30 calendar days after the effective date of this act,
2305	and the task force must hold its initial meeting within 1 month
2306	after appointment of all members. The task force shall expire no
2307	later than 60 calendar days after submission of the report
2308	required in subsection (1).
2309	Section 19. Section 627.0621, Florida Statutes, is created
2310	to read:
2311	627.0621 Transparency in rate regulation
2312	(1) DEFINITIONSAs used in this section, the term:
2313	(a) "Rate Filing" means any original or amended rate
2314	filing required or authorized under s. 627.062, s. 627.0651, or
2315	chapter 2007-1, Laws of Florida.
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2316	Amendment No. (b) "Recommendation" means any proposed, preliminary, or
2317	final recommendation from an office actuary reviewing a rate
2318	filing with respect to the issue of approval or disapproval of
2319	the rate filing or with respect to rate indications that the
2320	office would consider acceptable.
2321	(2) WEBSITE FOR PUBLIC ACCESS TO RATE FILING
2322	INFORMATIONWith respect to any rate filing made on after July
2323	1, 2008, the office shall provide the following information on a
2324	publicly accessible Internet website:
2325	(a) The overall rate change requested by the insurer.
2326	(b) All assumptions made by the office's actuaries.
2327	(c) A statement describing any assumptions or methods that
2328	deviate from the actuarial standards of practice of the Casualty
2329	Actuarial Society or the American Academy of Actuaries,
2330	including an explanation of the nature, rationale, and effect of
2331	the deviation.
2332	(d) All recommendations made by any office actuary who
2333	reviewed the rate filing.
2334	(e) Certification by the office's actuary under oath and
2335	subject to the penalty of perjury that, based on the actuary's
2336	knowledge, his or her recommendations did not contain any untrue
2337	statement of a material fact or omit to state a material fact
2338	necessary to make a recommendation and, in light of the
2339	circumstances under which such recommendation was made, was not
2340	misleading.
2341	(f) The overall rate change approved by the office.
2342	(3) ATTORNEY-CLIENT PRIVILEGE; WORK PRODUCTIn any
2343	administrative or judicial proceeding relating to a rate filing,
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event are outstanding, or elect a higher percentage coverage
level, regardless of whether or not revenue bonds are
outstanding. All members of an insurer group must elect the same
percentage coverage level. Any joint underwriting association,
risk apportionment plan, or other entity created under s.
627.351 must elect the 90-percent coverage level.

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3. The contract shall provide that reimbursement amounts
shall not be reduced by reinsurance paid or payable to the
insurer from other sources.

Notwithstanding any other provision contained in this 2381 4. section, the board shall make available to insurers that 2382 purchased coverage provided by this subparagraph in 2007 2006, 2383 2384 insurers qualifying as limited apportionment companies under s. 627.351(6)(c), and insurers that have been were approved to 2385 2386 participate in 2006 or that are approved in 2007 for the 2387 Insurance Capital Build-Up Incentive Program pursuant to s. 2388 215.5595_{7} a contract or contract addendum that provides an 2389 additional amount of reimbursement coverage of up to \$10 million. The premium to be charged for this additional 2390 2391 reimbursement coverage shall be 50 percent of the additional reimbursement coverage provided, which shall include one prepaid 2392 2393 reinstatement. The minimum retention level that an eligible participating insurer must retain associated with this 2394 2395 additional coverage layer is 30 percent of the insurer's surplus as of December 31, 2007 2006. This coverage shall be in addition 2396 2397 to all other coverage that may be provided under this section. The coverage provided by the fund under this subparagraph shall 2398 be in addition to the claims-paying capacity as defined in 2399 439287 4/29/2008 7:16 AM

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2400 subparagraph (c)1., but only with respect to those insurers that select the additional coverage option and meet the requirements 2401 2402 of this subparagraph. The claims-paying capacity with respect to all other participating insurers and limited apportionment 2403 2404 companies that do not select the additional coverage option 2405 shall be limited to their reimbursement premium's proportionate share of the actual claims-paying capacity otherwise defined in 2406 subparagraph (c)1. and as provided for under the terms of the 2407 reimbursement contract. Coverage provided in the reimbursement 2408 contract shall will not be affected by the additional premiums 2409 paid by participating insurers exercising the additional 2410 2411 coverage option allowed in this subparagraph. This subparagraph 2412 expires on May 31, 2009 2008.

2413 Section 21. Subsections (1) and (2) of section 627.712, 2414 Florida Statutes, are amended to read:

2415627.712Residential windstorm coverage required;2416availability of exclusions for windstorm or contents.--

(1) An insurer issuing a residential property insurance
policy must provide windstorm coverage. Except as provided in
paragraph (2)(c), this section subsection does not apply with
respect to risks that are eligible for wind-only coverage from
Citizens Property Insurance Corporation under s. 627.351(6).

2422 (2) A property insurer must make available, at the option2423 of the policyholder, an exclusion of windstorm coverage.

2424

Amendment No.

(a) The coverage may be excluded only if:

2425 (a)1. When the policyholder is a natural person, the 2426 policyholder personally writes and provides to the insurer the 2427 following statement in his or her own handwriting and signs his 439287 4/29/2008 7:16 AM

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2428 or her name, which must also be signed by every other named 2429 insured on the policy, and dated: "I do not want the insurance 2430 on my (home/mobile home/condominium unit) to pay for damage from 2431 windstorms. I will pay those costs. My insurance will not."

2432 When the policyholder is other than a natural person, 2. 2433 the policyholder provides to the insurer on the policyholder's letterhead the following statement that must be signed by the 2434 policyholder's authorized representative and dated: " (Name of 2435 does not want the insurance on its 2436 entity) (type of to pay for damage from windstorms. 2437 structure) (Name of entity) will be responsible for these costs. (Name of 2438 entity's) insurance will not." 2439

(b) If the structure insured by the policy is subject to a mortgage or lien, the policyholder must provide the insurer with a written statement from the mortgageholder or lienholder indicating that the mortgageholder or lienholder approves the policyholder electing to exclude windstorm coverage or hurricane coverage from his or her or its property insurance policy.

(c) If the residential structure is eligible for wind-only
 coverage from Citizens Property Insurance Corporation, an
 insurer nonrenewing a policy and issuing a replacement policy,
 or issuing a new policy, that does not provide wind coverage
 shall provide a notice to the mortgageholder or lienholder
 indicating the policyholder has elected coverage that does not
 cover wind.

2453 Section 22. Except as otherwise expressly provided in this 2454 act, this act shall take effect July 1, 2008.

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Amendment No. 2456 2457 2458 2459 TITLE AMENDMENT Remove the entire title and insert: 2460 2461 A bill to be entitled An act relating to insurance; amending s. 215.5595, F.S.; 2462 revising legislative findings; providing for an appropriation of 2463 state funds in exchange for surplus notes issued by residential 2464 property insurers under the program; revising the conditions and 2465 2466 requirements for providing funds to insurers under the program; 2467 requiring a commitment by the insurer to meet minimum premium-2468 to-surplus writing ratios for residential property insurance and for taking policies out of Citizens Property Insurance 2469 2470 Corporation; requiring insurers to commit to maintaining certain levels of surplus and reinsurance; authorizing the State Board 2471 2472 of Administration to charge a fee for late payments; providing for payment of costs and fees incurred by the board in 2473 administering the program from funds appropriated to the 2474 2475 program, subject to a specified limit; requiring the board to submit an annual report to the Legislature on the program and 2476 2477 insurer compliance with certain requirements; providing that amendments made by the act do not affect the terms of surplus 2478 2479 notes approved prior to a specified date; authorizing the State Board of Administration and an insurer to renegotiate such terms 2480 consistent with such amendments; amending s. 624.3161, F.S.; 2481 authorizing the Office of Insurance Regulation to require an 2482 2483 insurer to file its claims handling practices and procedures as 439287 4/29/2008 7:16 AM

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2484 a public record based on findings of a market conduct examination; amending s. 624.4211, F.S.; increasing the maximum 2485 2486 amounts of administrative fines that may be imposed upon an insurer by the Office of Insurance Regulation for nonwillful and 2487 willful violations of an order or rule of the office or any 2488 2489 provision of the Florida Insurance Code; creating s. 624.4213, F.S.; specifying requirements for submission of a document or 2490 information to the Office of Insurance Regulation or the 2491 Department of Financial Services in order for a person to claim 2492 that the document is a trade secret; requiring each page or 2493 2494 portion to be labeled as a trade secret and be separated from 2495 non-trade secret material; requiring the submitting party to 2496 include an affidavit certifying certain information about the documents claimed to be trade secrets; requiring the office or 2497 department to notify persons who submit trade secret documents 2498 of any public-records request and the opportunity to file a 2499 2500 court action to bar disclosure; specifying conditions for the office to retain or release such documents; creating s. 2501 624.4305, F.S.; requiring that an insurer planning to nonrenew 2502 2503 more than a specified number of residential property insurance polices notify the Office of Insurance Regulation and obtain 2504 2505 approval for such nonrenewals; specifying procedures for 2506 issuance of such notice; amending s. 626.9521, F.S.; increasing 2507 the maximum fines that may be imposed by the office or department for nonwillful and willful violations of state law 2508 regarding unfair methods of competition and unfair or deceptive 2509 acts or practices related to insurance; amending s. 627.0612, 2510 2511 F.S.; providing criteria for administrative hearings to 439287 4/29/2008 7:16 AM

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2512 determine whether an insurer's property insurance rates, rating 2513 manuals, premium credits, discount schedules, and surcharge 2514 schedules comply with the law; providing for entry of certain orders; amending s. 627.062, F.S.; revising the factors the 2515 office must consider in reviewing a rate filing; prohibiting the 2516 2517 Office of Insurance Regulation from disapproving as excessive a 2518 rate solely because the insurer obtained reinsurance covering a specified probably maximum loss; allowing the office to 2519 disapprove a rate as excessive within 1 year after the rate has 2520 been approved under certain conditions related to nonrenewal of 2521 policies by the insurer; requiring the Division of 2522 2523 Administrative Hearings to expedite a hearing request by an 2524 insurer and for the administrative law judge to commence the hearing within a specified time; authorizing an insurer to 2525 2526 request an expedited appellate review pursuant to the Florida Rules of Appellate Procedure; expressing legislative intent for 2527 2528 an expedited appellate review; revising provisions relating to the submission of a disputed rate filing, other than a rate 2529 filing for medical malpractice insurance, to an arbitration 2530 2531 panel in lieu of an administrative hearing if the rate is filed before a specified date; amending s. 627.0628, F.S.; providing 2532 2533 legislative findings relating to final agency action for 2534 insurance ratemaking; requiring that with respect to rate 2535 filings, insurers must use actuarial methods or models found to be accurate or reliable by the Florida Commission on Hurricane 2536 Loss Projection Methodology; providing for use of other models 2537 under certain circumstances; deleting the requirement for the 2538 2539 Office of Insurance Regulation and the Consumer Advocate to have 439287 4/29/2008 7:16 AM

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2540 access to all assumptions of a hurricane loss model in order for 2541 a model that has been found to be accurate and reliable by the 2542 Florida Commission on Hurricane Loss Projection Methodology to be admissible in a rate proceeding; deleting cross-references to 2543 2544 conform to changes made by the act; amending s. 627.0629, F.S.; 2545 requiring that the Office of Insurance Regulation develop and 2546 make publicly available before a specified deadline a proposed 2547 method for insurers to establish windstorm mitigation premium discounts that correlate to the uniform home rating scale; 2548 requiring that the Financial Services Commission adopt rules 2549 2550 before a specified deadline; requiring insurers to make rate 2551 filings pursuant to such method; authorizing the commission to 2552 make changes by rule to the uniform home grading scale and specify by rule the minimum required discounts, credits, or 2553 other rate differentials; requiring that such rate differentials 2554 be consistent with generally accepted actuarial principles and 2555 2556 wind loss mitigation studies; amending s. 627.351, F.S., 2557 relating to Citizens Property Insurance Corporation; deleting provisions defining the terms "homestead property" and 2558 2559 "nonhomestead property"; increasing threshold replacement costs of certain structures for eligibility for coverage by the 2560 2561 corporation; deleting requirements for certain properties to 2562 meeting building code plus requirements as a condition of 2563 eligibility for coverage by the corporation; deleting outdated provisions requiring the corporation to submit a report for 2564 2565 approval of offering multiperil coverage; revising threshold amounts of deficits incurred in a calendar year on which the 2566 2567 decision to levy assessments and the types of such assessments 439287 4/29/2008 7:16 AM

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2568 are based; revising the formula used to calculate shares of 2569 assessments owed by certain assessable insureds; requiring that 2570 the board of governors make certain determinations before levying emergency assessments; providing the board of governors 2571 2572 with discretion to set the amount of an emergency assessment 2573 within specified limits; requiring the board of governors to 2574 levy a Citizens policyholder surcharge under certain conditions; 2575 increasing the amount of the surcharge; deleting a provision requiring the levy of an immediate assessment against certain 2576 policyholders under such conditions; requiring that funds 2577 2578 collected from the levy of such surcharges be used for certain 2579 purposes; providing that such surcharges are not considered 2580 premium and are not subject to commissions, fees, or premium taxes; requiring that the failure to pay such surcharges be 2581 2582 treated as failure to pay premium; requiring that the amount of any assessment or surcharge which exceeds the amount of deficits 2583 2584 be remitted to and used by the corporation for specified 2585 purposes; deleting provisions requiring that the plan of operation of the corporation provide for the levy of a Citizens 2586 2587 policyholder surcharge if regular deficit assessments are levied as a result of deficits in certain accounts; deleting provisions 2588 2589 related to the calculation, classification, and nonpayment of 2590 such surcharge; requiring that the corporation make an annual 2591 filing for each personal or commercial line of business it writes, beginning on a specified date; limiting the overall 2592 2593 average statewide premium increase and the increase for an individual policyholder to a specified amount for rates 2594 established for certain policies during a specified period; 2595 439287 4/29/2008 7:16 AM

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2596 deleting a provision requiring an insurer to purchase bonds that 2597 remain unsold; deleting provisions requiring the corporation to 2598 make certain confidential underwriting and claims files available to agents to conform to changes made by the act 2599 relating to ineligibility of certain dwellings; clarifying the 2600 2601 right of certain parties to discover underwriting and claims file records; authorizing the corporation to release such 2602 2603 records as it deems necessary; requiring the corporation to report certain information to a consumer reporting agency; 2604 amending s. 627.4133, F.S.; requiring insurers to provide 2605 2606 written notice of certain cancellations, nonrenewals, or 2607 terminations; creating s. 689.262, F.S.; requiring a purchaser 2608 of residential property to be presented with the windstorm mitigation rating of the structure; authorizing the Financial 2609 Services Commission to adopt rules; requiring Citizens Property 2610 Insurance Corporation to transfer funds to the General Revenue 2611 2612 Fund if the losses due to a hurricane do not exceed a specified 2613 amount; requiring the board of governors of Citizens Property Insurance Corporation to make a reasonable estimate of such 2614 2615 losses by a certain date; requiring the board to make quarterly transfers of funds to the corporation under certain 2616 2617 circumstances; requiring the corporation to credit certain accounts for funds removed to make certain transfers; 2618 2619 prohibiting Citizens Property Insurance Corporation from using certain statutory changes or authorized transfers of funds as 2620 2621 justification or cause to seek any rate or assessment increase; amending s. 627.06281, F.S.; providing for residential property 2622 2623 insurers to have access to and use a public hurricane loss 439287 4/29/2008 7:16 AM

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2624 projection model; requiring the office to establish a fee 2625 schedule for such model access and use; amending s. 627.0655, 2626 F.S.; expanding application of policyholder loss or expenserelated premium discounts; creating the Citizens Property 2627 2628 Insurance Corporation Mission Review Task Force; providing 2629 purposes; requiring a report; providing report requirements; providing for appointment of members; providing 2630 responsibilities; specifying service without compensation; 2631 providing for reimbursement of per diem and travel expenses; 2632 providing meeting requirements; requiring the corporation to 2633 2634 assist the task force; providing for the expiration of the task 2635 force; requiring the Chief Financial Officer to provide a report 2636 on the economic impact on the state of certain hurricanes; providing report requirements; creating s. 627.0621, F.S.; 2637 2638 providing requirements for transparency in rate regulation; providing definitions; providing for a website for public access 2639 2640 to rate filing information; providing requirements; providing for application of public meeting requirements; specifying 2641 nonapplication of attorney-client or work-product privileges to 2642 2643 certain communications in certain administrative or judicial proceedings under certain circumstances; specifying criteria; 2644 2645 providing for waiver of such privileges under certain circumstances; amending s. 215.555, F.S.; extending for an 2646 2647 additional year the offer of reimbursement coverage for specified insurers; revising the qualifying criteria for such 2648 insurers; revising provisions to conform; amending s. 627.712, 2649 F.S.; requiring insurers to provide notice to mortgageholders or 2650

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2651 lienholders of certain policies not providing wind coverage for 2652 certain structures; providing effective dates.

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