2013

1	A bill to be entitled
2	An act relating to the Florida Insurance Guaranty
3	Association; amending s. 631.57, F.S.; revising the
4	duties of the association; authorizing the association
5	to certify regular assessments to be collected by
6	member insurers and collected from policyholders under
7	certain circumstances; authorizing the association to
8	levy emergency assessments to be collected by member
9	insurers and collected from policyholders under
10	certain circumstances; making technical and
11	grammatical corrections; providing for applicability;
12	providing an effective date.
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14	Be It Enacted by the Legislature of the State of Florida:
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16	Section 1. Subsections (2) and (3) of section 631.57 ,
17	Florida Statutes, are amended to read:
18	631.57 Powers and duties of the association
19	(2) The association may:
20	(a) Employ or retain such persons as are necessary to
21	handle claims and perform other duties of the association;
22	(b) Borrow funds necessary to effect the purposes of this
23	part in accord with the plan of operation, including borrowing
24	necessary to ensure that its cash flow needs are timely met to
25	pay covered claims when regular and emergency assessments are
26	levied on policyholders under subsection (3);
27	(c) Sue or be sued, provided that service of process <u>is</u>
28	shall be made upon the person registered with the department as

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29 agent for the receipt of service of process; and

30 Negotiate and become a party to such contracts as are (d) 31 necessary to carry out the purpose of this part. Additionally, The association may also enter into such contracts with a 32 33 municipality, a county, or a legal entity created pursuant to s. 34 163.01(7)(g) as are necessary in order for the municipality, 35 county, or legal entity to issue bonds under s. 631.695. In connection with the issuance of any such bonds and the entering 36 37 into of any such necessary contracts, the association may agree to such terms and conditions as the association deems necessary 38 39 and proper.

40 (3) (a) To the extent necessary to secure the funds for the respective accounts paying for the payment of covered claims, to 41 42 pay the reasonable costs to administer such accounts the same, 43 and to the extent necessary to secure the funds for the account 44 specified in s. 631.55(2)(b) or to retire indebtedness, 45 including, without limitation, the principal, redemption premium, if any, and interest on, and related costs of issuance 46 of, bonds issued under s. 631.695 and the funding of any 47 48 reserves and other payments required under the bond resolution 49 or trust indenture pursuant to which such bonds have been 50 issued, the office, upon certification of the board of 51 directors, shall levy regular assessments in the proportion that 52 each insurer's net direct written premiums in this state in the 53 classes protected by the account bears to the total of the said 54 net direct written premiums received in this state by all such 55 insurers for the preceding calendar year for the kinds of 56 insurance included within such account. Regular assessments

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57 shall be remitted to and administered by the board of directors 58 in the manner specified by the approved plan. Each insurer so 59 assessed has shall have at least 30 days' written notice as to the date the assessment is due and payable. Every assessment 60 61 shall be made as a uniform percentage applicable to the net 62 direct written premiums of each insurer in the kinds of insurance included within the account in which the assessment is 63 64 made. The regular assessments levied against an any insurer may 65 shall not exceed in any one year exceed more than 2 percent of that insurer's net direct written premiums in this state for the 66 kinds of insurance included within such account during the 67 68 calendar year next preceding the date of such assessments. The 69 Legislature finds and declares that regular assessments paid by 70 an insurer or insurer group as a result of a levy by the office 71 constitute advances of funds from the insurer to the 72 association. An insurer may fully recoup regular assessments 73 levied against prior year premiums by applying a separate 74 recoupment factor to the premium of policies of the same kind or 75 line as were considered by the office in determining the 76 assessment liability of the insurer or insurer group. 77 In lieu of collecting the regular assessment under (b) 78 paragraph (a) from insurers, the association may certify all or 79 part of the assessment to be collected by member insurers and

80 <u>collected from policyholders upon issuance or renewal of</u>

81 policies. If the association elects to direct insurers to

82 <u>collect the assessment directly from policyholders, the office</u>

83 <u>shall issue an order specifying the date that the board requires</u>

84 the insurers to begin collecting the assessment, which must be

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85 at least 90 days after the date that the board certifies the 86 assessment. The order must specify a uniform percentage determined by the board, and verified by the office, of the 87 direct written premium for all lines of business in the 88 applicable accounts. The assessment certified in any one 89 90 calendar year may not exceed 2 percent of the premium. The insurers shall collect such assessments without being affected 91 by any credit, limitation, exemption, or deferment. Assessments 92 93 collected under this paragraph shall be transferred regularly to the association as set forth in the order levying the 94 95 assessment. 96 (c) (b) If sufficient funds from regular and emergency such 97 assessments, together with funds previously raised, are not 98 available in any one year in the respective account to make all 99 the payments or reimbursements then owing to insurers, insureds, 100 or claimants, the funds available shall be prorated and the 101 unpaid portion shall be paid as soon thereafter as funds become 102 available. 103 (c) The Legislature finds and declares that all 104 assessments paid by an insurer or insurer group as a result of a 105 levy by the office, including assessments levied pursuant to 106 paragraph (a) and emergency assessments, constitute advances of 107 funds from the insurer to the association. An insurer may fully 108 recoup such advances by applying a separate recoupment factor to 109 the premium of policies of the same kind or line as were

- 110 considered by the office in determining the assessment liability
- 111 of the insurer or insurer group.
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(d) No State funds may not of any kind shall be allocated

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113 or paid to the said association or any of its accounts.

114 (e) 1.a. In addition to regular assessments otherwise 115 authorized under in paragraph (a), and to the extent necessary 116 to secure the funds for the account specified in s. 631.55(2) (b) 117 for the direct payment of covered claims of insurers rendered 118 insolvent by the effects of a hurricane and to pay the reasonable costs to administer such claims, or to retire 119 120 indebtedness, including, without limitation, the principal, 121 redemption premium, if any, and interest on, and related costs 122 of issuance of, bonds issued under s. 631.695 and the funding of 123 any reserves and other payments required under the bond 124 resolution or trust indenture pursuant to which such bonds have 125 been issued, the office, upon certification of the board of 126 directors, shall levy emergency assessments to be collected by 127 member insurers and collected from policyholders upon issuance or renewal of policies upon insurers holding a certificate of 128 129 authority. Pursuant to such levy, the office shall issue an 130 order specifying the date the board requires the insurers to 131 begin collecting the assessment, which must be at least 90 days 132 after the date the office levies the assessment. The order must 133 specify a uniform percentage determined by the board, and 134 verified by the office, of the direct written premium for all 135 lines of business in the applicable accounts. The assessment 136 certified in any one calendar year may not exceed 2 percent of 137 the premium. The insurers shall collect such assessments without 138 being affected by any credit, limitation, exemption, or 139 deferment. Assessments collected by insurers under this 140 paragraph shall be transferred regularly to the association as

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141 set forth in the order levying the assessment.

142 1. If, after consultation with its financial advisor, the 143 board determines that it must immediately begin paying the 144 covered claims of one or more insolvent insurers and financing 145 is not reasonably available, it may certify the emergency 146 assessment on insurers in the same manner as set forth in 147 paragraph (a), except that an emergency assessment may be paid by the insurer in a single payment or, at the option of the 148 149 association, in 12 monthly installments with the first installment being due and payable at the end of the month after 150 151 the emergency assessment is levied and subsequent installments 152 being due by the end of each succeeding month. The emergency 153 assessments payable under this paragraph by any insurer shall 154 not exceed in any single year more than 2 percent of that 155 insurer's direct written premiums, net of refunds, in this state 156 during the preceding calendar year for the kinds of insurance 157 within the account specified in s. 631.55(2)(b).

158 2.b. Any Emergency assessments authorized under this 159 paragraph shall be levied by the office only upon insurers 160 referred to in sub-subparagraph $a_{\cdot,\tau}$ upon certification as to the 161 need for such assessments by the board of directors. If In the 162 event the board of directors participates in the issuance of 163 bonds in accordance with s. 631.695, emergency assessments shall 164 be levied in each year that bonds issued under s. 631.695 and 165 secured by such emergency assessments are outstanding $_{ au}$ in such 166 amounts up to such 2 percent 2-percent limit as required in 167 order to provide for the full and timely payment of the 168 principal of, redemption premium, if any, and interest on, and

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related costs of issuance of, such bonds. The emergency 169 170 assessments provided for in this paragraph are assigned and pledged to the municipality, county, or legal entity issuing 171 172 bonds under s. 631.695 for the benefit of the holders of such 173 bonds, in order to enable such municipality, county, or legal 174 entity to provide for the payment of the principal of, redemption premium, if any, and interest on such bonds, the cost 175 of issuance of such bonds, and the funding of any reserves and 176 177 other payments required under the bond resolution or trust indenture pursuant to which such bonds have been issued, without 178 the necessity for of any further action by the association, the 179 180 office, or any other party. If To the extent bonds are issued 181 under s. 631.695 and the association secures determines to 182 secure such bonds by a pledge of revenues received from the 183 emergency assessments, such bonds, upon such pledge of revenues, 184 shall be secured by and payable from the proceeds of such 185 emergency assessments, and the proceeds of emergency assessments 186 levied under this paragraph shall be remitted directly to and 187 administered by the trustee or custodian appointed for the 188 payment of such bonds.

189 c. Emergency assessments under this paragraph may be 190 payable in a single payment or, at the option of the 191 association, may be payable in 12 monthly installments with the 192 first installment being due and payable at the end of the month 193 after an emergency assessment is levied and subsequent 194 installments being due not later than the end of each succeeding 195 month.

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3.d. If emergency assessments are imposed, the report

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197 required by s. 631.695(7) <u>must shall</u> include an analysis of the 198 revenues generated from the emergency assessments imposed under 199 this paragraph.

200 <u>4.e.</u> If emergency assessments are imposed, the references 201 in sub-subparagraph (1) (a) 3.b. and s. 631.695(2) and (7) to 202 <u>regular</u> assessments levied under paragraph (a) <u>must shall</u> 203 include emergency assessments imposed under this paragraph.

204 5.2. If the board of directors participates in the 205 issuance of bonds in accordance with s. 631.695, an emergency 206 annual assessment under this paragraph must shall continue while 207 the bonds issued with respect to which the assessment was 208 imposed are outstanding, including any bonds the proceeds of 209 which were used to refund bonds issued pursuant to s. 631.695, 210 unless adequate provision has been made for the payment of the 211 bonds in the documents authorizing the issuance of such bonds.

212 <u>6.3.</u> Emergency assessments under this paragraph are not 213 premium and are not subject to the premium tax, to any fees, or 214 to any commissions. An insurer is liable for all emergency 215 assessments that the insurer collects and shall treat the 216 failure of an insured to pay an emergency assessment as a 217 failure to pay the premium. An insurer is not liable for 218 uncollectible emergency assessments.

(f) The recoupment factor applied to policies in accordance with <u>paragraph (a) or subparagraph (e)1.</u> paragraph (c) shall be selected by the insurer or insurer group so as to provide for the probable recoupment of both assessments levied pursuant to paragraph (a) and emergency assessments over a period of 12 months, unless the insurer or insurer group, at its

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option, elects to recoup the assessment over a longer period. The recoupment factor <u>applies</u> shall apply to all policies of the same kind or line as were considered by the office in determining the assessment liability of the insurer or insurer group issued or renewed during a 12-month period.

230 <u>1.</u> If the insurer or insurer group does not collect the 231 full amount of the assessment during one 12-month period, the 232 insurer or insurer group may apply recalculated recoupment 233 factors to policies issued or renewed during one or more 234 succeeding 12-month periods.

235 <u>2.</u> If, at the end of a 12-month period, the insurer or 236 insurer group has collected from the combined kinds or lines of 237 policies subject to assessment more than the total amount of the 238 assessment paid by the insurer or insurer group, the excess 239 amount shall be disbursed as follows:

240 <u>a.l.</u> If the excess amount does not exceed 15 percent of 241 the total assessment paid by the insurer or insurer group, the 242 excess amount shall be remitted to the association within 60 243 days after the end of the 12-month period in which the excess 244 recoupment charges were collected.

<u>b.2.</u> If the excess amount exceeds 15 percent of the total assessment paid by the insurer or insurer group, the excess amount shall be returned to the insurer's or insurer group's current policyholders by refunds or premium credits. The association shall use any remitted excess recoupment amounts to reduce future assessments.

251 <u>3.(g)</u> Amounts recouped pursuant to this <u>paragraph</u>
252 subsection for assessments levied under paragraph (a) due to

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insolvencies on or after July 1, 2010, are considered premium solely for premium tax purposes and are not subject to fees or commissions. However, insurers shall treat the failure of an insured to pay a recoupment charge as a failure to pay the premium.

258 4.(h) At least 15 days before applying the recoupment 259 factor to any policies, the insurer or insurer group shall file with the office a statement for informational purposes only 260 261 setting forth the amount of the recoupment factor and an 262 explanation of how the recoupment factor will be applied. Such 263 statement must shall include documentation of the assessment 264 paid by the insurer or insurer group and the arithmetic 265 calculations supporting the recoupment factor. The insurer or 266 insurer group may use the recoupment factor at any time after 267 the expiration of the 15-day period. The insurer or insurer 268 group need submit only one informational statement for all lines 269 of business using the same recoupment factor.

270 5.(i) Within No later than 90 days after the insurer or 271 insurer group has completed the recoupment process, the insurer 272 or insurer group shall file with the office, for information 273 purposes only, a final accounting report documenting the 274 recoupment. The report must shall provide the amounts of 275 assessments paid by the insurer or insurer group, the amounts 276 and percentages recouped by year from each affected line of 277 business, and the direct written premium subject to recoupment 278 by year. The insurer or insurer group need submit only one 279 report for all lines of business using the same recoupment 280 factor.

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281 Section 2. This act shall take effect July 1, 2013, and 282 applies to any assessment certified and levied after that date 283 regardless of when the insolvency or insolvencies occurred.

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