Bill No. HB 143 (2014)

Amendment No. sal

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	COMMITTEE/SUBCOMMITTEE ACTION
	ADOPTED (Y/N)
	ADOPTED AS AMENDED (Y/N)
	ADOPTED W/O OBJECTION (Y/N)
	FAILED TO ADOPT (Y/N)
	WITHDRAWN (Y/N)
	OTHER
1	Committee/Subcommittee hearing bill: Insurance & Banking
2	Subcommittee
3	Representative Broxson offered the following:
4	
5	Substitute Amendment for Amendment (031061) by
6	Representative Raburn (with title amendment)
7	Remove everything after the enacting clause and insert:
8	Section 1. Subsections (2) and (3) of section 631.57,
9	Florida Statutes, are amended to read:
10	631.57 Powers and duties of the association
11	(2) The association may:
12	(a) Employ or retain such persons as are necessary to
13	handle claims and perform other duties of the association;
14	(b) Borrow funds necessary to effect the purposes of this
15	part in accord with the plan of operation, including borrowing
16	funds necessary to ensure that its cash flow needs are timely
17	met to pay covered claims when regular and emergency assessments
	849573 - h0143-strike sal.docx
	Published On: 1/14/2014 6:41:34 PM

Page 1 of 12

Bill No. HB 143 (2014)

Amendment No. sal

18 are levied on policyholders under subsection (3);

(c) Sue or be sued, provided that service of process <u>is</u> shall be made upon the person registered with the department as agent for the receipt of service of process; and

22 Negotiate and become a party to such contracts as are (d) 23 necessary to carry out the purpose of this part. The 24 Additionally, the association may also enter into such contracts 25 with a municipality, a county, or a legal entity created pursuant to s. 163.01(7)(g) as are necessary in order for the 26 27 municipality, county, or legal entity to issue bonds under s. 28 631.695. In connection with the issuance of any such bonds and 29 the entering into of any such necessary contracts, the 30 association may agree to such terms and conditions as the association deems necessary and proper. 31

32 To the extent necessary to secure the funds for (3) (a) the respective accounts paying for the payment of covered 33 34 claims, to pay the reasonable costs to administer such accounts 35 the same, and to the extent necessary to secure the funds for 36 the account specified in s. 631.55(2) (b) or to retire 37 indebtedness, including, without limitation, the principal, redemption premium, if any, and interest on, and related costs 38 of issuance of, bonds issued under s. 631.695 and the funding of 39 any reserves and other payments required under the bond 40 41 resolution or trust indenture pursuant to which such bonds have 42 been issued, the office, upon certification of the board of 43 directors, shall levy regular assessments in the proportion that

849573 - h0143-strike sal.docx

Published On: 1/14/2014 6:41:34 PM

Page 2 of 12

Amendment No. sal

Bill No. HB 143 (2014)

44 each insurer's net direct written premiums in this state in the 45 classes protected by the account bears to the total of the said net direct written premiums received in this state by all such 46 insurers for the preceding calendar year for the kinds of 47 insurance included within such account. Regular assessments 48 49 Assessments shall be remitted to and administered by the board 50 of directors in the manner specified by the approved plan. Each 51 insurer so assessed has shall have at least 30 days' written 52 notice as to the date the assessment is due and payable. Every 53 assessment shall be made as a uniform percentage applicable to the net direct written premiums of each insurer in the kinds of 54 55 insurance included within the account in which the assessment is 56 made. The regular assessments levied against an any insurer may 57 shall not exceed in any one year exceed more than 2 percent of 58 that insurer's net direct written premiums in this state for the kinds of insurance included within such account during the 59 60 calendar year next preceding the date of such assessments. The 61 Legislature finds and declares that regular assessments paid by 62 an insurer or insurer group as a result of a levy by the office constitute advances of funds from the insurer to the 63 64 association. An insurer may fully recoup regular assessments 65 levied against prior year premiums by applying a separate 66 recoupment factor to the premium of policies of the same kind or 67 line as were considered by the office in determining the 68 assessment liability of the insurer or insurer group.

849573 - h0143-strike sal.docx Published On: 1/14/2014 6:41:34 PM

Page 3 of 12

Bill No. HB 143 (2014)

Amendment No. sal

69	(b) In lieu of collecting the regular assessment under
70	paragraph (a) from insurers, the association may collect all or
71	part of the assessment directly from policyholders. If the
72	association elects to collect the assessment directly from
73	policyholders, the office shall, upon certification of the board
74	of directors, issue an order specifying the date the board
75	requires the insurers to begin collecting the assessment, which
76	must be at least 90 days after the date the office levies the
77	assessment. The order must specify a uniform percentage
78	determined by the board, and verified by the office, of the
79	direct written premium for all lines of business in the
80	applicable accounts. The assessment certified in any one
81	calendar year may not exceed 2 percent of the premium. The
82	insurers shall collect such assessments for a uniform period of
83	12 months as specified in the order. The insurers shall collect
84	such assessments without being affected by any credit,
85	limitation, exemption, or deferment. Assessments collected under
86	this paragraph shall be transferred regularly to the association
87	as set forth in the order levying the assessment.
88	(c) (b) If sufficient funds from regular and emergency such

assessments, together with funds from regular and emergency such assessments, together with funds previously raised, are not available in any one year in the respective account to make all the payments or reimbursements then owing to insurers, <u>insureds</u>, <u>or claimants</u>, the funds available shall be prorated and the unpaid portion shall be paid as soon thereafter as funds become available.

849573 - h0143-strike sal.docx Published On: 1/14/2014 6:41:34 PM

Page 4 of 12

Bill No. HB 143

(2014)

Amendment No. sal

95 (c) The Legislature finds and declares that all 96 assessments paid by an insurer or insurer group as a result of a 97 levy by the office, including assessments levied pursuant to 98 paragraph (a) and emergency assessments, constitute advances of 99 funds from the insurer to the association. An insurer may fully 100 recoup such advances by applying a separate recoupment factor to 101 the premium of policies of the same kind or line as were 102 considered by the office in determining the assessment liability 103 of the insurer or insurer group.

(d) <u>State No state</u> funds <u>may not</u> of any kind shall be allocated or paid to <u>the</u> said association or any of its accounts.

107 (e) 1.a. In addition to regular assessments otherwise 108 authorized in paragraphs paragraph (a) and (b) and to the extent 109 necessary to secure the funds for the account specified in s. 110 631.55(2)(b) for the direct payment of covered claims of 111 insurers rendered insolvent by the effects of a hurricane and to 112 pay the reasonable costs to administer such claims, or to retire 113 indebtedness, including, without limitation, the principal, 114 redemption premium, if any, and interest on, and related costs of issuance of, bonds issued under s. 631.695 and the funding of 115 any reserves and other payments required under the bond 116 117 resolution or trust indenture pursuant to which such bonds have 118 been issued, the office, upon certification of the board of 119 directors, shall levy emergency assessments upon insurers holding a certificate of authority. The emergency assessments 120

849573 - h0143-strike sal.docx

Published On: 1/14/2014 6:41:34 PM

Page 5 of 12

Bill No. HB 143 (2014)

Amendment No.	). sal
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121 payable under this paragraph by any insurer shall not exceed in 122 any single year more than 2 percent of that insurer's direct 123 written premiums, net of refunds, in this state during the 124 preceding calendar year for the kinds of insurance within the 125 account specified in s. 631.55(2)(b). The Legislature finds and 126 declares that emergency assessments paid by an insurer or 127 insurer group as a result of a levy by the office constitute 128 advances of funds from the insurer to the association. An 129 insurer may fully recoup emergency assessments levied against 130 prior year premiums by applying a separate recoupment factor to 131 the premium of policies of the same kind or line as were 132 considered by the office in determining the assessment liability 133 of the insurer or insurer group.

134 1. In lieu of collecting the emergency assessment under 135 paragraph (e) from insurers, the association may collect all or 136 part of the assessment directly from policyholders. If the 137 association elects to collect the assessment directly from 138 policyholders, the office shall issue an order specifying the 139 date the board requires the insurers to begin collecting the 140 assessment, which must be at least 90 days after the date the 141 office levies the assessment. The order must specify a uniform 142 percentage determined by the board, and verified by the office, 143 of the direct written premium for all lines of business in the 144 applicable accounts. The assessment certified in any one calendar year may not exceed 2 percent of the premium. The 145 146 insurers shall collect such assessments without being affected

849573 - h0143-strike sal.docx

Published On: 1/14/2014 6:41:34 PM

Page 6 of 12

Bill No. HB 143 (2014)

Amendment No. sal

147 by any credit, limitation, exemption, or deferment. Assessments 148 collected under this paragraph shall be transferred regularly to 149 the association as set forth in the order levying the

150 assessment.

151 2.b. Emergency Any emergency assessments authorized under 152 this paragraph shall be levied by the office only upon insurers 153 referred to in sub-subparagraph a., upon certification as to the 154 need for such assessments by the board of directors. If In the event the board of directors participates in the issuance of 155 156 bonds in accordance with s. 631.695, emergency assessments shall 157 be levied in each year that bonds issued under s. 631.695 and 158 secured by such emergency assessments are outstanding, in such 159 amounts up to such 2-percent limit as required in order to 160 provide for the full and timely payment of the principal of, 161 redemption premium, if any, and interest on, and related costs of issuance of, such bonds. The emergency assessments provided 162 163 for in this paragraph are assigned and pledged to the municipality, county, or legal entity issuing bonds under s. 164 631.695 for the benefit of the holders of such bonds, in order 165 166 to enable such municipality, county, or legal entity to provide 167 for the payment of the principal of, redemption premium, if any, and interest on such bonds, the cost of issuance of such bonds, 168 169 and the funding of any reserves and other payments required 170 under the bond resolution or trust indenture pursuant to which 171 such bonds have been issued, without the necessity of any further action by the association, the office, or any other 172

849573 - h0143-strike sal.docx

Published On: 1/14/2014 6:41:34 PM

Page 7 of 12

Bill No. HB 143

(2014)

Amendment No. sal

173 party. If To the extent bonds are issued under s. 631.695 and 174 the association secures determines to secure such bonds by a 175 pledge of revenues received from the emergency assessments, such 176 bonds, upon such pledge of revenues, shall be secured by and payable from the proceeds of such emergency assessments, and the 177 178 proceeds of emergency assessments levied under this paragraph shall be remitted directly to and administered by the trustee or 179 180 custodian appointed for the payment of such bonds.

c. Emergency assessments <u>levied upon insurers</u> under this paragraph may be payable in a single payment or, at the option of the association, may be payable in 12 monthly installments with the first installment being due and payable at the end of the month after an emergency assessment is levied and subsequent installments being due not later than the end of each succeeding month.

188 <u>3.d.</u> If emergency assessments are imposed, the report 189 required <u>under</u> by s. 631.695(7) <u>must</u> shall include an analysis 190 of the revenues generated from the emergency assessments imposed 191 under this paragraph.

192 <u>4.e.</u> If emergency assessments are imposed, the references 193 in sub-subparagraph (1) (a) 3.b. and s. 631.695(2) and (7) to 194 <u>regular</u> assessments levied under paragraph (a) <u>must shall</u> 195 include emergency assessments imposed under this paragraph.

196 <u>5.2.</u> If the board of directors participates in the 197 issuance of bonds in accordance with s. 631.695, an <u>emergency</u> 198 annual assessment under this paragraph must shall continue while

849573 - h0143-strike sal.docx

Published On: 1/14/2014 6:41:34 PM

Page 8 of 12

Bill No. HB 143 (2014)

Amendment No. sal

the bonds issued with respect to which the assessment was imposed are outstanding, including any bonds the proceeds of which were used to refund bonds issued pursuant to s. 631.695, unless adequate provision has been made for the payment of the bonds in the documents authorizing the issuance of such bonds.

204 <u>(f)</u><sup>3.</sup> Assessments Emergency assessments under this
205 <u>subsection</u> paragraph are not premium and are not subject to the
206 premium tax, to any fees, or to any commissions. An insurer is
207 liable for all emergency assessments that the insurer collects
208 and shall treat the failure of an insured to pay an emergency
209 assessment as a failure to pay the premium. An insurer is not
210 liable for uncollectible emergency assessments.

211 (g) The provisions of this paragraph shall only apply if 212 the board levies assessments on insurers, but shall not apply if 213 the board levies assessments on policyholders.

214 1.(f) The recoupment factor applied to policies in 215 accordance with paragraph (a) or (e) (c) shall be selected by 216 the insurer or insurer group so as to provide for the probable 217 recoupment of both assessments levied pursuant to paragraph (a) 218 and emergency assessments over a period of 12 months, unless the 219 insurer or insurer group, at its option, elects to recoup the 220 assessment over a longer period. The recoupment factor shall 221 apply to all policies of the same kind or line as were 222 considered by the office in determining the assessment liability 223 of the insurer or insurer group issued or renewed during a 12-224 month period.

849573 - h0143-strike sal.docx Published On: 1/14/2014 6:41:34 PM

Page 9 of 12

Bill No. HB 143 (2014)

Amendment No. sal

225 <u>2.</u> If the insurer or insurer group does not collect the 226 full amount of the assessment during one 12-month period, the 227 insurer or insurer group may apply recalculated recoupment 228 factors to policies issued or renewed during one or more 229 succeeding 12-month periods.

230 <u>3.</u> If, at the end of a 12-month period, the insurer or 231 insurer group has collected from the combined kinds or lines of 232 policies subject to assessment more than the total amount of the 233 assessment paid by the insurer or insurer group, the excess 234 amount shall be disbursed as follows:

235 <u>a.l.</u> If the excess amount does not exceed 15 percent of 236 the total assessment paid by the insurer or insurer group, the 237 excess amount shall be remitted to the association within 60 238 days after the end of the 12-month period in which the excess 239 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.

246 (g) Amounts recouped pursuant to this subsection for 247 assessments levied under paragraph (a) due to insolvencies on or 248 after July 1, 2010, are considered premium solely for premium 249 tax purposes and are not subject to fees or commissions.

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4. Insurers However, insurers shall treat the failure of an

849573 - h0143-strike sal.docx

Published On: 1/14/2014 6:41:34 PM

Page 10 of 12

Bill No. HB 143 (2014)

Amendment No. sal

251 insured to pay a recoupment charge as a failure to pay the 252 premium.

253 5.(h) At least 15 days before applying the recoupment 254 factor to any policies, the insurer or insurer group shall file 255 with the office a statement for informational purposes only 256 setting forth the amount of the recoupment factor and an 257 explanation of how the recoupment factor will be applied. Such 258 statement shall include documentation of the assessment paid by 259 the insurer or insurer group and the arithmetic calculations 260 supporting the recoupment factor. The insurer or insurer group 261 may use the recoupment factor at any time after the expiration 262 of the 15-day period. The insurer or insurer group need submit 263 only one informational statement for all lines of business using 264 the same recoupment factor.

265 6. (i) No later than 90 days after the insurer or insurer group has completed the recoupment process, the insurer or 266 267 insurer group shall file with the office, for information purposes only, a final accounting report documenting the 268 recoupment. The report shall provide the amounts of assessments 269 270 paid by the insurer or insurer group, the amounts and 271 percentages recouped by year from each affected line of 272 business, and the direct written premium subject to recoupment 273 by year. The insurer or insurer group need submit only one 274 report for all lines of business using the same recoupment 275 factor.

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Section 2. This act shall take effect July 1, 2014.

849573 - h0143-strike sal.docx

Published On: 1/14/2014 6:41:34 PM

Page 11 of 12

Bill No. HB 143 (2014)

	Amendment No. sal
277	
278	
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281	TITLE AMENDMENT
282	Remove everything before the enacting clause and insert:
283	A bill to be entitled
284	An act relating to the Florida Insurance Guaranty Association;
285	amending s. 631.57, F.S.; revising the duties of the
286	association; authorizing the association to certify regular
287	assessments to be collected by member insurers and collected
288	from policyholders under certain circumstances; authorizing the
289	association to levy emergency assessments to be collected by
290	member insurers and collected from policyholders under certain
291	circumstances; clarifying that assessments are not considered
292	premium tax purposes; making technical and grammatical
293	corrections; providing for applicability; providing an effective
294	date.
	 849573 - h0143-strike sal.docx
	Published On: 1/14/2014 6:41:34 PM
	Page 12 of 12