By Senator Lee

	24-00322-14 2014346
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 collect regular and emergency assessments directly
6	from policyholders; clarifying that assessments are
7	not considered premium for premium tax purposes;
8	making technical and grammatical corrections;
9	providing an effective date.
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11	Be It Enacted by the Legislature of the State of Florida:
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13	Section 1. Subsections (2) and (3) of section 631.57,
14	Florida Statutes, are reordered and amended to read:
15	631.57 Powers and duties of the association
16	(2) The association may:
17	(a) Employ or retain such persons as are necessary to
18	handle claims and perform other duties of the association;
19	(b) Borrow funds necessary to effect the purposes of this
20	part in accord with the plan of operation, including borrowing
21	funds necessary to ensure that its cash flow needs are timely
22	met to pay covered claims when regular and emergency assessments
23	are levied on policyholders under subsection (3);
24	(c) Sue or be sued, provided that service of process ${ m is}$
25	shall be made upon the person registered with the department as
26	agent for the receipt of service of process; and
27	(d) Negotiate and become a party to such contracts as are
28	necessary to carry out the purpose of this part. Additionally,
29	The association may <u>also</u> enter into such contracts with a
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30	municipality, a county, or a legal entity created pursuant to s.
31	163.01(7)(g) as are necessary in order for the municipality,
32	county, or legal entity to issue bonds under s. 631.695. In
33	connection with the issuance of any such bonds and the entering
34	into of any such necessary contracts, the association may agree
35	to such terms and conditions as the association deems necessary
36	and proper.
37	(3)(a) To the extent necessary to secure the funds for the
38	respective accounts <u>paying</u> for the payment of covered claims, to
39	pay the reasonable costs to administer <u>such accounts</u> the same ,
40	and to the extent necessary to secure the funds for the account
41	specified in s. 631.55(2)(b) or to retire indebtedness,
42	including, without limitation, the principal, redemption
43	premium, if any, and interest on, and related costs of issuance
44	of, bonds issued under s. 631.695 and the funding of any
45	reserves and other payments required under the bond resolution
46	or trust indenture pursuant to which such bonds have been
47	issued, the office, upon certification of the board of
48	directors, shall levy <u>regular</u> assessments <u>directly upon</u>
49	policyholders, which shall be collected by insurers holding a
50	certificate of authority.
51	1. The office shall issue an order specifying the date that
52	the board requires such insurers to begin collecting the
53	assessment, which must be at least 90 days after the date that
54	the board certifies the assessment.
55	2. The order must specify a uniform percentage of the
56	direct written premium for all lines of business in the
57	applicable accounts, which may not exceed 2 percent of the
58	premium in any one year. Such percentage shall be determined by
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CODING: Words stricken are deletions; words underlined are additions.

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24-00322-14 2014346 59 the board and verified by the office. 60 3. The insurers shall collect such assessments without being affected by any credit, limitation, exemption, or 61 62 deferment. 63 4. Assessments collected by insurers shall be transferred 64 regularly to the association as set forth in the order levying 65 the assessment in the proportion that each insurer's net direct 66 written premiums in this state in the classes protected by the account bears to the total of said net direct written premiums 67 68 received in this state by all such insurers for the preceding 69 calendar year for the kinds of insurance included within such 70 account. Assessments shall be remitted to and administered by 71 the board of directors in the manner specified by the approved 72 plan. Each insurer so assessed shall have at least 30 days' 73 written notice as to the date the assessment is due and payable. 74 Every assessment shall be made as a uniform percentage 75 applicable to the net direct written premiums of each insurer in 76 the kinds of insurance included within the account in which the 77 assessment is made. The assessments levied against any insurer 78 shall not exceed in any one year more than 2 percent of that 79 insurer's net direct written premiums in this state for the 80 kinds of insurance included within such account during the 81 calendar year next preceding the date of such assessments. 82 (f) (b) If sufficient funds from regular and emergency such assessments, together with funds previously raised, are not 83 available in any one year in the respective account to make all 84 85 the payments or reimbursements then owing to insurers, the funds 86 available shall be prorated and the unpaid portion shall be paid 87 as soon thereafter as funds become available.

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

97 <u>(e) (d) No State funds may not of any kind shall</u> be 98 allocated or paid to <u>the</u> said association or any of its 99 accounts.

100 (b) (c) 1.a. In addition to regular assessments otherwise authorized under in paragraph (a), and to the extent necessary 101 102 to secure the funds for the account specified in s. 631.55(2)(b) 103 for the direct payment of covered claims of insurers rendered 104 insolvent by the effects of a hurricane and to pay the 105 reasonable costs to administer such claims, or to retire 106 indebtedness, including, without limitation, the principal, 107 redemption premium, if any, and interest on, and related costs 108 of issuance of, bonds issued under s. 631.695 and the funding of 109 any reserves and other payments required under the bond 110 resolution or trust indenture pursuant to which such bonds have 111 been issued, the office, upon certification of the board of 112 $\frac{directors_{r}}{directors_{r}}$ shall levy emergency assessments directly upon 113 policyholders, which shall be collected by insurers holding a 114 certificate of authority.

115 <u>1. The office shall issue an order specifying the date on</u> 116 which the board will require such insurers to begin collecting

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24-00322-14 2014346 117 the assessment, which must be at least 90 days after the date on 118 which the board certifies the assessment. The order must specify 119 a uniform percentage of the direct written premium for all lines 120 of business in the applicable accounts, which may not exceed 2 121 percent of the premium in any one year. Such percentage shall be 122 determined by the board and verified by the office. The insurers 123 shall collect such assessments without being affected by any credit, limitation, exemption, or deferment. Assessments 124 125 collected shall be transferred regularly to the association as 126 specified in the order levying the assessment The emergency 127 assessments payable under this paragraph by any insurer shall 128 not exceed in any single year more than 2 percent of that 129 insurer's direct written premiums, net of refunds, in this state 130 during the preceding calendar year for the kinds of insurance 131 within the account specified in s. 631.55(2)(b).

132 2.b. Any Emergency assessments authorized under this 133 paragraph shall be levied by the office only upon insurers 134 referred to in sub-subparagraph a., upon certification as to the 135 need for such assessments by the board of directors. If In the 136 event the board of directors participates in the issuance of 137 bonds in accordance with s. 631.695, emergency assessments shall 138 be levied in each year that bonds issued under s. 631.695 and 139 secured by such emergency assessments are outstanding, in such 140 amounts up to such 2-percent limit as required in order to 141 provide for the full and timely payment of the principal of, redemption premium, if any, and interest on, and related costs 142 143 of issuance of, such bonds. The emergency assessments provided 144 for in this paragraph are assigned and pledged to the 145 municipality, county, or legal entity issuing bonds under s.

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24-00322-14 2014346 146 631.695 for the benefit of the holders of such bonds, in order 147 to enable such municipality, county, or legal entity to provide 148 for the payment of the principal of, redemption premium, if any, and interest on such bonds, the cost of issuance of such bonds, 149 150 and the funding of any reserves and other payments required 151 under the bond resolution or trust indenture pursuant to which 152 such bonds have been issued, without the necessity of any 153 further action by the association, the office, or any other 154 party. If To the extent bonds are issued under s. 631.695 and 155 the association secures determines to secure such bonds by a pledge of revenues received from the emergency assessments, such 156 157 bonds, upon such pledge of revenues, shall be secured by and 158 payable from the proceeds of such emergency assessments, and the 159 proceeds of emergency assessments levied under this paragraph shall be remitted directly to and administered by the trustee or 160 161 custodian appointed for the payment of such bonds. 162 c. Emergency assessments under this paragraph may be 163 payable in a single payment or, at the option of the 164 association, may be payable in 12 monthly installments with the 165 first installment being due and payable at the end of the month 166

166 after an emergency assessment is levied and subsequent
167 installments being due not later than the end of each succeeding
168 month.

169 <u>3.d.</u> If emergency assessments are imposed, the report 170 required <u>under by</u> s. 631.695(7) <u>must shall</u> include an analysis 171 of the revenues generated from the emergency assessments imposed 172 under this paragraph.

173 <u>4.e.</u> If emergency assessments are imposed, the references 174 in sub-subparagraph (1)(a)3.b. and s. 631.695(2) and (7) to

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185 <u>(c)</u>^{3.} Emergency Assessments under this subsection paragraph 186 are not premium and are not subject to the premium tax, to any 187 fees, or to any commissions. An insurer is liable for all 188 emergency assessments that the insurer collects and shall treat 189 the failure of an insured to pay an emergency assessment as a 190 failure to pay the premium. An insurer is not liable for 191 uncollectible emergency assessments.

192 (d) (f) The recoupment factor applied to policies in 193 accordance with paragraph (a) or paragraph (b) $\frac{(c)}{(c)}$ shall be 194 selected by the board and verified by the office insurer or 195 insurer group so as to provide for the probable recoupment of 196 both assessments levied pursuant to paragraph (a) and emergency 197 assessments over a period of 12 months, unless the insurer or 198 insurer group, at its option, elects to recoup the assessment 199 over a longer period. The recoupment factor applies shall apply 200 to all policies of the same kind or line as were considered by 201 the office in determining the assessment liability of the 202 insurer or insurer group issued or renewed during a 12-month 203 period.

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          1. If the recoupment factor insurer or insurer group does
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     not collect the full amount needed of the assessment during one
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     12-month period, the board insurer or insurer group may apply
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     recalculated recoupment factors to policies issued or renewed
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     during one or more succeeding 12-month periods.
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          2. If, at the end of a 12-month period, the association
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     insurer or insurer group has collected from the combined kinds
     or lines of policies subject to assessment more than the total
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     amount of the assessment needed, paid by the insurer or insurer
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     group, the excess amount shall be disbursed as follows:
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          1. If the excess amount does not exceed 15 percent of the
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     total assessment paid by the insurer or insurer group, the
     excess amount shall be remitted to the association within 60
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     days after the end of the 12-month period in which the excess
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     recoupment charges were collected.
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          2. If the excess amount exceeds 15 percent of the total
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     assessment paid by the insurer or insurer group, the excess
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     amount shall be returned to the insurer's or insurer group's
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     current policyholders by refunds or premium credits. the
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     association shall use any remitted excess recoupment amounts to
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     reduce future assessments.
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          (g) Amounts recouped pursuant to this subsection for
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     assessments levied under paragraph (a) due to insolvencies on or
     after July 1, 2010, are considered premium solely for premium
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     tax purposes and are not subject to fees or commissions.
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     However, insurers shall treat the failure of an insured to pay a
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     recoupment charge as a failure to pay the premium.
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          (h) At least 15 days before applying the recoupment factor
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     to any policies, the insurer or insurer group shall file with
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24-00322-14 2014346 233 the office a statement for informational purposes only setting 234 forth the amount of the recoupment factor and an explanation of 235 how the recoupment factor will be applied. Such statement shall 236 include documentation of the assessment paid by the insurer or 237 insurer group and the arithmetic calculations supporting the 238 recoupment factor. The insurer or insurer group may use the 239 recoupment factor at any time after the expiration of the 15-day 240 period. The insurer or insurer group need submit only one 241 informational statement for all lines of business using the same 242 recoupment factor. 243 (i) No later than 90 days after the insurer or insurer 244 group has completed the recoupment process, the insurer or 245 insurer group shall file with the office, for information 246 purposes only, a final accounting report documenting the 247 recoupment. The report shall provide the amounts of assessments 248 paid by the insurer or insurer group, the amounts and 249 percentages recouped by year from each affected line of 250 business, and the direct written premium subject to recoupment 251 by year. The insurer or insurer group need submit only one 252 report for all lines of business using the same recoupment 253 factor. 254 Section 2. This act shall take effect July 1, 2014.

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