1	A bill to be entitled
2	An act relating to insurer insolvency; amending s.
3	631.015, F.S.; adding the Insurer Receivership Model
4	Act to a list of acts that extend reciprocity in the
5	treatment of policyholders in receivership if such act
6	is enacted in other states; amending s. 631.021, F.S.;
7	adding the Florida Health Maintenance Organization
8	Consumer Assistance Plan to a list of entities that
9	must be given reasonable written notice by the
10	Department of Financial Services of hearings
11	pertaining to certain insurers; revising the exclusive
12	jurisdiction of the Circuit Court of Leon County, upon
13	issuance of specified orders, of an insurer's assets
14	or property in a delinquency proceeding; providing
15	construction; amending s. 631.031, F.S.; requiring an
16	insurer to file its response and defenses to a certain
17	order within a specified timeframe; requiring that a
18	hearing to determine whether cause exists to appoint
19	the department as receiver must be commenced by a
20	specified time; amending s. 631.041, F.S.; providing
21	an exception for the Office of Insurance Regulation
22	from applicability of a certain application or
23	petition operating as an automatic stay; amending s.
24	631.141, F.S.; authorizing a receiver to assume or
25	reject an insurer's executory contract or unexpired
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26 lease; authorizing the department as domiciliary 27 receiver to pay certain expenses or reject certain 28 contracts; providing that, under certain 29 circumstances, certain persons of an insurer that is 30 under liquidation are permanently discharged and have no further authority over the affairs or assets of the 31 32 insurer; amending s. 631.152, F.S.; conforming a 33 cross-reference; creating s. 631.1521, F.S.; prohibiting certain defenses in actions by and against 34 35 a receiver; authorizing certain defenses in actions by and against a receiver; specifying that a principal 36 37 under a surety bond or surety undertaking, under certain circumstances, is entitled to credit for the 38 39 value of certain property against a reimbursement obligation to the receiver; limiting admissibility of 40 evidence of fraud in the inducement to evidence 41 42 contained in insurer records; creating s. 631.1522, 43 F.S.; prohibiting, in a receiver's proceeding or claim, the assertion of defenses or claims by an 44 affiliate or certain persons of an insurer except 45 under certain circumstances; providing construction; 46 47 amending s. 631.181, F.S.; authorizing a receivership 48 court to allow alternative procedures and requirements for filing proofs of claim or allowing or proving 49 50 claims; providing construction; prohibiting a

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51 receivership court from waiving certain filing 52 requirements; providing conditions in which claims 53 will be late-filed; authorizing a receiver to petition 54 the receivership court to set certain deadlines; 55 requiring a receiver to provide notice of filing a 56 certain petition to certain claimants; amending s. 57 631.191, F.S.; providing definitions; providing 58 applicability; requiring that specified large 59 deductible claims under certain workers' compensation 60 policies must be turned over to the applicable 61 responsible guaranty association for handling; 62 providing for construction relating to payment of deductible claims; authorizing receivers to collect 63 64 reimbursements owed for certain deductible claims; providing requirements for such collections; providing 65 66 for construction relating to such collections; 67 requiring receivers to use collateral, when available, 68 to secure certain obligations; providing that a 69 quaranty association is entitled to collateral for a 70 certain purpose; providing for construction relating 71 to certain distributions; requiring receivers to draw 72 down collateral under certain circumstances; providing a procedure for payment of claims; authorizing the 73 74 return of excess collateral under certain 75 circumstances; providing that a receiver is entitled

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76 to deduct certain expenses from the collateral or 77 deductible reimbursements; providing for construction; 78 amending s. 631.192, F.S.; prohibiting specified 79 claims; amending s. 631.271, F.S.; adding and revising 80 claims to a list that establishes the priority of 81 distribution of claims from an insurer's estate; 82 specifying when interest on claims accrue and the 83 interest rate calculation; amending s. 631.391, F.S.; specifying that certain persons in relation to an 84 85 insurer who must cooperate with the department or 86 office in certain proceedings or investigations 87 include present or former roles; defining the term "person"; amending s. 631.395, F.S.; requiring an 88 89 order of liquidation to authorize the release of 90 certain claims files, records, documents, or claims, 91 rather than only copies of the claims files, records, 92 documents, or claims; amending s. 631.397, F.S.; 93 authorizing the department as receiver to apply to the 94 court for approval of a specified proposal, rather 95 than requiring the department to make such application 96 within a specified timeframe; deleting a specified 97 notice requirement of the department; deleting a 98 provision authorizing the court to take action on the 99 application under certain circumstances; providing an effective date. 100

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101 102 Be It Enacted by the Legislature of the State of Florida: 103 104 Section 1. Section 631.015, Florida Statutes, is amended 105 to read: 106 631.015 Reciprocity; treatment of policyholders.-Reciprocity in the treatment of policyholders in receivership is 107 extended to those states which, in substance and effect, enact 108 the National Association of Insurance Commissioners 109 Rehabilitation and Liquidation Model Act, or the Uniform 110 Insurers Liquidation Act, or the Insurer Receivership Model Act. 111 112 Section 2. Section 631.021, Florida Statutes, is amended 113 to read: 114 631.021 Jurisdiction of delinquency proceeding; venue; 115 change of venue; exclusiveness of remedy; appeal; construction.-The circuit court shall have original jurisdiction of 116 (1)117 any delinquency proceeding under this chapter, and any court 118 with jurisdiction is authorized to make all necessary or proper 119 orders to carry out the purposes of this chapter. Any delinquency proceeding in this chapter is in equity. 120 121 The venue of a delinquency proceeding or summary (2) proceeding against a domestic, foreign, or alien insurer shall 122 be in the Circuit Court of Leon County. 123 124 A delinquency proceeding pursuant to this chapter (3) 125 constitutes the sole and exclusive method of liquidating,

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rehabilitating, reorganizing, or conserving an insurer. A No 126 127 court may not shall entertain a petition for the commencement of 128 such a proceeding unless the petition has been filed in the name 129 of the state on the relation of the department. The Florida 130 Insurance Guaranty Association, Incorporated, the Florida 131 Workers' Compensation Insurance Guaranty Association, 132 Incorporated, the Florida Health Maintenance Organization 133 Consumer Assistance Plan, and the Florida Life and Health 134 Guaranty Association, Incorporated, shall be given reasonable 135 written notice by the department of all hearings that which pertain to an adjudication of insolvency of a member insurer. 136

(4) An appeal shall lie to the District Court of Appeal,
First District, from an order granting or refusing
rehabilitation, liquidation, or conservation and from every
order in a delinquency proceeding having the character of a
final order as to the particular portion of the proceeding
embraced therein.

143 (5) No service of process against the department in its 144 capacity as receiver shall be effective unless served upon a person designated by the receiver and filed with the circuit 145 146 court having jurisdiction over the delinquency proceeding. The 147 designated person shall refuse to accept service if acceptance would violate a stay against legal proceedings involving an 148 insurer that is the subject of delinquency proceedings or would 149 150 violate any orders of the circuit court governing a delinquency

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151 proceeding. The person denied service may petition the circuit 152 court having jurisdiction over the delinquency proceeding for 153 relief from the receiver's refusal to accept service. This 154 subsection shall be strictly construed, and any purported 155 service on the receiver or the department that is not in 156 accordance with this subsection shall be null and void.

The domiciliary court acquiring jurisdiction over 157 (6) 158 persons subject to this chapter may exercise exclusive jurisdiction to the exclusion of all other courts, except as 159 limited by the provisions of this chapter. Upon the issuance of 160 161 an order of conservation, rehabilitation, or liquidation, the Circuit Court of Leon County has shall have exclusive 162 163 jurisdiction over all with respect to assets or property of the 164 any insurer, wherever located, including property located 165 outside the territorial limits of the state subject to such 166 proceedings and claims against said insurer's assets or 167 property.

168 (7) This chapter constitutes this state's insurer
 169 receivership laws, and these laws must be construed as
 170 consistent with each other. If there is a conflict between this
 171 chapter and any other law, this chapter prevails.

172Section 3.Subsections (3) and (4) are added to section173631.031, Florida Statutes, to read:

174 631.031 Initiation and commencement of delinquency175 proceeding.-

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176 (3) An insurer subject to an order to show cause entered 177 pursuant to this chapter must file its written response to the 178 order, together with any defenses it may have to the 179 department's allegations, no later than 20 days after service of 180 the order to show cause, but no less than 15 days before the 181 date of the hearing set by the order to show cause. 182 (4) A hearing held pursuant to this chapter to determine 183 whether cause exists for the department to be appointed receiver 184 must be commenced within 60 days after an order directing an 185 insurer to show cause. Section 4. Subsection (1) of section 631.041, Florida 186 187 Statutes, is amended to read: 631.041 Automatic stay; relief from stay; injunctions.-188 189 An application or petition under s. 631.031 operates (1) 190 as a matter of law as an automatic stay applicable to all 191 persons and entities, other than the receiver and the office, 192 which shall be permanent and survive the entry of an order of conservation, rehabilitation, or liquidation, and which shall 193 194 prohibit: 195 The commencement or continuation of judicial, (a) 196 administrative, or other action or proceeding against the 197 insurer or against its assets or any part thereof; The enforcement of a judgment against the insurer or 198 (b) an affiliate obtained either before or after the commencement of 199 the delinquency proceeding; 200

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201	(c) Any act to obtain possession of property of the
202	insurer;
203	(d) Any act to create, perfect, or enforce a lien against
204	property of the insurer, except that a secured claim as defined
205	in s. 631.011(21) may proceed under s. 631.191 after the order
206	of liquidation is entered;
207	(e) Any act to collect, assess, or recover a claim against
208	the insurer, except claims as provided for under this chapter;
209	and
210	(f) The setoff or offset of any debt owing to the insurer,
211	except offsets as provided in s. 631.281.
212	Section 5. Present subsections (3) through (5) and (6)
213	through (10) of section 631.141, Florida Statutes, are
214	renumbered as subsections (4) through (6) and (8) through (12),
215	respectively, new subsections (3) and (7) are added to that
216	section, and present subsection (8) is amended, to read:
217	631.141 Conduct of delinquency proceeding; domestic and
218	alien insurers
219	(3) The receiver may assume or reject any executory
220	contract or unexpired lease of the insurer.
221	(7) The department as domiciliary receiver may pay any
222	expenses under contracts, leases, employment agreements, or
223	other arrangements entered into by the insurer before
224	receivership as the department deems necessary for the purposes
225	of this chapter. The department is not required to pay any such

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226	expenses that it determines are not necessary and may reject any
227	contract pursuant to subsection (3).
228	(10) (8) The department as domiciliary receiver may take
229	such action as it deems necessary or appropriate to reform and
230	revitalize the insurer. The department shall have all the powers
231	of the directors, officers, and managers, whose authority shall
232	be suspended, except as they are redelegated by the receiver.
233	The receiver shall have full power to direct and manage the
234	affairs of the insurer, to hire and discharge employees, and to
235	deal with the property and business of the insurer. In the event
236	of the liquidation of an insurer domiciled in this state, and
237	notwithstanding any provision of chapter 605, chapter 607,
238	chapter 617, chapter 620, or chapter 621, all officers,
239	directors, and managers of the insurer are permanently
240	discharged and have no further authority of any kind over the
241	affairs or assets of the insurer, except as may be redelegated
242	by the department.
243	Section 6. Subsection (4) of section 631.152, Florida
244	Statutes, is amended to read:
245	631.152 Conduct of delinquency proceeding; foreign
246	insurers
247	(4) <u>Paragraph 631.141(9)(b)</u> Section 631.141(7)(b) applies
248	to ancillary delinquency proceedings opened for the purpose of
249	obtaining records necessary to adjudicate the covered claims of
250	Florida policyholders.

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251 Section 7. Section 631.1521, Florida Statutes, is created 252 to read: 253 631.1521 Actions by and against the receiver.-254 (1) An allegation by the receiver of improper or 255 fraudulent conduct against any person may not be the basis of a 256 defense by a third party to the enforcement of a contractual 257 obligation owed to the insurer. This section does not bar a 258 third party from the right to raise a defense that the conduct 259 was materially and substantially related to the contractual 260 obligation for which enforcement is sought. 261 (2) A prior wrongful or negligent action of any present or 262 former officer, manager, director, trustee, owner, employee, or 263 agent of the insurer may not be asserted as a defense to a claim 264 by the receiver under a theory of estoppel, comparative fault, 265 intervening cause, proximate cause, reliance, mitigation of 266 damages, or otherwise. However, the affirmative defense of fraud 267 in the inducement may be asserted against the receiver in a 268 claim based on a contract; and a principal under a surety bond 269 or a surety undertaking is entitled to credit for the value of 270 any property pledged to secure the reimbursement obligation 271 against any reimbursement obligation to the receiver, to the 272 extent that the receiver has possession or control of the 273 property, or that the insurer or its agents misappropriated such 274 property, which includes, but is not limited to, the comingling 275 of such property. Evidence of fraud in the inducement is

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276	admissible only if it is contained in the records of the
277	insurer.
278	(3) An action or inaction by an insurance regulatory
279	authority may not be asserted as a defense to a claim by the
280	department.
281	Section 8. Section 631.1522, Florida Statutes, is created
282	to read:
283	631.1522 Unrecorded obligations and defenses and claims of
284	affiliates
285	(1) In any proceeding or claim by the receiver, an
286	affiliate, a controlled or controlling person, or a present or
287	former officer, manager, director, trustee, or shareholder of
288	the insurer may not assert any defense unless:
289	(a) Evidence of the defense was recorded in the books and
290	records of the insurer at or about the time the events giving
291	rise to the defense occurred; and
292	(b) If required by statutory accounting practices and
293	procedures, such events were timely reported on the insurer's
294	official financial statements filed with the office.
295	(2) An affiliate, a controlled or controlling person, or a
296	present or former officer, manager, director, trustee, or
297	shareholder of the insurer may not assert any claim unless:
298	(a) The obligations were recorded in the books and records
299	of the insurer at or about the time the obligations were
300	incurred; and

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301	(b) If required by statutory accounting practices and
302	procedures, the obligations were timely reported on the
303	insurer's official financial statements filed with the office.
304	(3) This section does not bar claims based on unrecorded
305	or unreported transactions by the receiver against any
306	affiliate, controlled or controlling person, or present or
307	former officer, manager, director, trustee, or shareholder of
308	the insurer.
309	Section 9. Paragraph (g) is added to subsection (2) of
310	section 631.181, Florida Statutes, subsection (3) is amended,
311	and subsections (4) and (5) are added to that section, to read:
312	631.181 Filing and proof of claim
313	(2)
314	(g) Upon application of the receiver:
315	1. The receivership court may allow alternative procedures
316	and requirements for the filing of proofs of claim or for
317	allowing or proving claims.
318	2. If the receivership court waives the requirements of
319	filing a proof of claim for a person, class, or group of
320	persons, a timely proof of claim by such person, class, or group
321	is deemed to be filed for all purposes. However, the
322	receivership court may not waive guaranty association or
323	coverage determination proof of claim filing requirements, to
324	the extent that the guaranty fund statute or filing requirements
325	are inconsistent with the receivership court's waiver of proof.
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326 After the entry of the order of liquidation against a (3) Florida-domiciled insurer, regardless of any prior notice that 327 328 may have been given to creditors, the receiver shall notify all 329 persons who may have claims against the insurer that they must 330 file such claims with it at a place and within the time 331 specified in the notice, or else such claims will be late-filed 332 forever barred. The Florida receiver need not give such notice 333 in ancillary proceedings if the receiver obtains an order from 334 the court authorizing the receiver to not send out such notices, 335 which order the court shall issue upon satisfactory evidence 336 that the domiciliary receiver will be sending out similar 337 notices and will accept and evaluate claims from Florida residents, that Florida residents may have objections to 338 339 evaluations heard in Florida, and that there are reasonable 340 assurances that Florida policyholders and claimants will be 341 treated fairly and equally as compared to residents of the 342 domicile state. The time specified in the notice shall be as 343 fixed by the court for filing of claims and shall be not less 344 than 6 months after the entry of the order of insolvency. The 345 notice shall be given in such manner and for such reasonable 346 period of time as may be ordered by the court.

347 (4) The receiver may petition the receivership court to
 348 set a date certain before which all contingent or unliquidated
 349 claims are final. In addition to the notice requirements in this
 350 section, the receiver shall give notice of filing the petition

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351 to all claimants with claims that remain contingent or 352 unliquidated under this section. 353 Notwithstanding any other provision of this chapter, (5) 354 the receiver may petition the receivership court to set a date 355 certain after which no further claims may be filed. 356 Section 10. Section 631.191, Florida Statutes, is amended 357 to read: 358 631.191 Special deposit claims; and secured claims; administration of workers' compensation large deductible 359 360 policies and insured collateral.-361 SPECIAL DEPOSIT CLAIMS.-The owners of special deposit (1)362 claims against an insurer against which a liquidation order has 363 been entered in this or any other state shall be given priority 364 against their several special deposits in accordance with the 365 provisions of the statutes governing the creation and 366 maintenance of such deposits. If there is a deficiency in any 367 such deposit so that the claims secured thereby are not fully 368 discharged therefrom, the claimants may share in the general 369 assets, but such sharing shall be deferred until general 370 creditors, and also claimants against other special deposits who have received smaller percentages from their respective special 371 372 deposits, have been paid percentages of their claims equal to the percentage paid from the special deposit. 373 374 (2) SECURED CLAIMS.-The owner of a secured claim against an insurer 375 (a)

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376 against which a liquidation order has been entered in this or 377 any other state may surrender her or his security and file her 378 or his claim as a general creditor, or the claim may be 379 discharged by resort to the security, in which case the 380 deficiency, if any, shall be treated as a claim against the 381 general assets of the insurer on the same basis as claims of 382 unsecured creditors. If the amount of the deficiency has been 383 adjudicated in ancillary proceedings as provided in this chapter, or if it has been adjudicated by a court of competent 384 jurisdiction in a proceeding in which the domiciliary receiver 385 386 has had notice and an opportunity to be heard, such amount shall 387 be conclusive; otherwise the amount shall be determined in the 388 delinquency proceeding in the domiciliary state.

389 (b) The value of any security held by a secured creditor390 shall be determined under supervision of the court by:

391 1. Converting the same into money according to the terms 392 of the agreement pursuant to which the security was delivered to 393 such creditor; or

394 2. If no such agreement exists, the court shall determine 395 the value in the event the creditor and the receiver cannot 396 agree upon same.

397 (3) ADMINISTRATION OF WORKERS' COMPENSATION LARGE
 398 DEDUCTIBLE POLICIES AND INSURED COLLATERAL.—
 399 (a) Definitions.—As used in this subsection, the term:

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1. "Collateral" means cash, a letter of credit, a surety

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401	bond, or any other form of security posted by the insured, or by
402	a captive insurer or reinsurer, to secure the insured's
403	obligation under a large deductible policy to pay deductible
404	claims or to reimburse the insurer for deductible claim
405	payments. Collateral may also secure an insured's obligation to
406	reimburse or pay the insurer as may be required for other
407	secured obligations.
408	2. "Deductible claim" means any claim that is within the
409	deductible under a large deductible policy, including a claim
410	for loss and defense and cost containment expense, unless such
411	expense is excluded by the terms of the policy.
412	3.a. "Large deductible policy" means a combination of one
413	or more workers' compensation policies and endorsements issued
414	to an insured, and contracts or security agreements entered into
415	between an insured and the insurer, in which the insured has
416	agreed with the insurer to:
417	(I) Pay directly the initial portion of any claim under
418	the policy up to a specified dollar amount or the expenses
419	related to any claim; or
420	(II) Reimburse the insurer for its payment of any claim or
421	related expenses under the policy up to the specified dollar
422	amount of the deductible.
423	b. The term also includes policies that contain an
424	aggregate limit on the insured's liability for all deductible
425	claims in addition to a per-claim deductible limit. A policy
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426 must meet the current guidelines for large deductible workers' 427 compensation filings as defined by the office, including the 428 eligibility standards regarding the minimum standard premium and 429 the minimum deductible to be deemed a large deductible policy. 430 с. The term does not include policies, endorsements, or 431 agreements providing that the initial portion of any covered 432 claim must be self-insured and that the insurer has no payment 433 obligation within the self-insured retention. 434 The term does not include policies that provide for d. 435 retrospectively rated premium payments by the insured or 436 reinsurance arrangements or agreements, except to the extent 437 such arrangements or agreements assume, secure, or pay the 438 policyholder's large deductible obligations. 439 "Other secured obligations" means obligations of an 4. 440 insured to an insurer other than those under a large deductible 441 policy, such as those under a reinsurance agreement or other 442 agreement involving retrospective premium obligations, the 443 performance of which is secured by collateral that also secures 444 an insured's obligations under a large deductible policy. 445 (b) Applicability.-446 1. This subsection applies to workers' compensation large 447 deductible policies issued by an insurer that is subject to 448 delinquency proceedings under this chapter. This subsection does 449 not apply to first-party claims, or to covered claims funded by 450 a guaranty association above the deductible unless paragraph (c)

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451 applies. Large deductible policies must be administered in 452 accordance with the terms of the policy, except to the extent 453 such terms conflict with this subsection. 454 This subsection applies to all delinquency proceedings 2. 455 that commence on or after July 1, 2017. 456 (c) Handling of large deductible claims.-Unless otherwise 457 agreed to by the responsible guaranty association, all large 458 deductible claims that are also covered claims as defined by an 459 applicable guaranty association law, including those that may 460 have been funded by an insured before liquidation, must be 461 turned over to the guaranty association for handling. To the 462 extent the insured funds or pays the deductible claim pursuant 463 to an agreement by the guaranty fund or otherwise, the insured's 464 funding or payment of a deductible claim extinguishes the 465 obligations, if any, of the receiver and any guaranty 466 association to pay such claim. A charge may not be made against 467 the receiver or a guaranty association on the basis of an 468 insured's funding or payment of a deductible claim. 469 (d) Deductible claims paid by a guaranty association.-470 1. To the extent a guaranty association pays any 471 deductible claim for which an insurer would have been entitled 472 to reimbursement from an insured, a guaranty association is 473 entitled to the amount of reimbursements received or collateral 474 available, subject to paragraph (g). Reimbursements paid to the 475 guaranty association pursuant to this paragraph may not be

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476	treated as distributions under s. 631.271 or as early access
477	payments under s. 631.397(1).
478	2. To the extent that a guaranty association pays a
479	deductible claim that is not reimbursed from collateral or by
480	insured payments, or the guaranty association incurred expenses
481	in connection with large deductible policies that are not
482	reimbursed under this subsection, the guaranty association is
483	entitled to assert a claim for those amounts in the delinquency
484	proceeding.
485	3. This paragraph does not limit any right of the receiver
486	or a guaranty association which may otherwise exist under
487	applicable law to obtain reimbursement from insureds for claims
488	payments made by the guaranty association under policies of the
489	insurer or for the guaranty association's related expenses.
490	(e) Collections
491	1. The receiver may collect reimbursements owed for
492	deductible claims as provided in this paragraph, and must use
493	reasonable efforts to collect such reimbursements from the
494	insured or the party that is obligated to pay the deductible as
495	specified in the large deductible policy or other agreement. The
496	receiver may bill insureds and others for reimbursement of
497	deductible claims that are:
498	a. Paid by the insurer before the commencement of
499	delinquency proceedings;
500	b. Paid by a guaranty association upon receipt by the
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501	receiver of notice from a guaranty association of reimbursable
502	payments; or
503	c. Paid or allowed by the receiver.
504	2. If the insured or other party does not make payment
505	within the time specified in the large deductible policy, or, if
506	no time is specified, within a reasonable time after the date of
507	billing, the receiver may take reasonable steps to collect any
508	reimbursements owed.
509	3. The insolvency of the insurer or its inability to
510	perform any of its obligations under the large deductible policy
511	may not be a defense to the insured's reimbursement obligation
512	under the large deductible policy.
513	4. An allegation of improper handling or payment of a
514	deductible claim by the receiver or a guaranty association may
515	not be a defense to the insured's reimbursement obligations
516	under the large deductible policy.
517	(f) Collateral
518	1. Subject to this paragraph, the receiver shall use
519	collateral, when available, to secure the insured's obligation
520	to fund or reimburse deductible claims or other secured
521	obligations or payment obligations. A guaranty association is
522	entitled to collateral as provided for in this paragraph to the
523	extent needed to reimburse a guaranty association for the
524	payment of a deductible claim. Any distributions made to a
525	guaranty association pursuant to this paragraph may not be

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526	treated as distributions under s. 631.271 or as early access
527	payments under s. 631.397(1).
528	2. The receiver shall draw down collateral to the extent
529	necessary in the event the insured fails to:
530	a. Perform its funding or payment obligations under any
531	large deductible policy;
532	b. Pay deductible claim reimbursements within the time
533	specified in the large deductible policy, or, if no time is
534	specified, within 60 days after the date of the billing;
535	c. Pay amounts due to the estate for preliquidation
536	obligations;
537	d. Timely fund any other secured obligation; or
538	e. Timely pay expenses.
539	3. Claims that are validly asserted against the collateral
540	must be satisfied in the order in which such claims are received
541	by the receiver. However, if more than one creditor has a valid
542	claim against the same collateral and the available collateral,
543	along with billing collection efforts and to the extent that the
544	collateral is subject to other known secured obligations, are
545	together insufficient to pay each creditor in full, the receiver
546	may prorate payments based on the ratio of the amount of claims
547	each creditor has to the total claims paid by all such
548	creditors.
549	4. Excess collateral may be returned to the insured, as
550	determined by the receiver, after a periodic review of claims

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551 paid, outstanding case reserves, and a factor for claims that 552 were incurred but not reported. 553 (g) Receiver's expenses.-The receiver is entitled to 554 deduct from the collateral or from the deductible reimbursements reasonable and actual expenses incurred in connection with the 555 556 collection of the collateral and deductible reimbursements as 557 provided pursuant to s. 631.271. 558 (h) Construction.-This subsection does not limit or 559 adversely affect any rights or powers a guaranty association may 560 have under applicable state law to obtain reimbursement from 561 certain classes of policyholders for claims payments made by the 562 quaranty association under policies of the insolvent insurer, or 563 for related expenses the guaranty association incurs. 564 Section 11. Subsections (5) is added to section 631.192, 565 Florida Statutes, to read: 566 631.192 Allowance of certain claims.-567 (5) A claim may not be allowed for postjudgment interest 568 accrued after the date the court enters the order of 569 liquidation. 570 Section 12. Paragraphs (a), (b), and (j) of subsection (1) 571 of section 631.271, Florida Statutes, are amended to read: 572 631.271 Priority of claims.-The priority of distribution of claims from the 573 (1)insurer's estate shall be in accordance with the order in which 574 each class of claims is set forth in this subsection. Every 575

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576 claim in each class shall be paid in full or adequate funds 577 shall be retained for such payment before the members of the 578 next class may receive any payment. No subclasses may be 579 established within any class. The order of distribution of 580 claims shall be:

581

(a) Class 1.-

582 1. All of the receiver's costs and expenses of583 administration.

584 2. All of the expenses of a guaranty association or585 foreign guaranty association in handling claims.

586 <u>3. All of the deputy supervisor's costs and expenses of</u> 587 <u>administration incurred as a result of administrative</u> 588 <u>supervision under part VI of chapter 624.</u>

589 (b) Class 2.-All claims under policies for losses 590 incurred, including third-party claims, all claims against the 591 insurer for liability for bodily injury or for injury to or 592 destruction of tangible property which claims are not under 593 policies, and all claims of a guaranty association or foreign 594 guaranty association, and all claims related to a patient's 595 healthcare coverage by physicians, hospitals, and other 596 providers of a health insurer or health maintenance 597 organization. All claims under life insurance and annuity policies, whether for death proceeds, annuity proceeds, or 598 investment values, shall be treated as loss claims. That portion 599 of any loss, indemnification for which is provided by other 600

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benefits or advantages recovered by the claimant, may not be included in this class, other than benefits or advantages recovered or recoverable in discharge of familial obligations of support or by way of succession at death or as proceeds of life insurance, or as gratuities. No payment by an employer to her or his employee may be treated as a gratuity.

607 (j) Class 10.-Interest on allowed claims of Classes 1 608 through 9. The rate of interest payable on an allowed claim must 609 accrue from the date the court enters the order of liquidation 610 until such time as the receivership court approves the 611 distribution. The interest rate must be calculated in accordance 612 with s. 55.03, according to the terms of a plan to pay interest 613 on allowed claims proposed by the liquidator and approved by the 614 receivership court.

615 Section 13. Section 631.391, Florida Statutes, is amended 616 to read:

617

631.391 Cooperation of officers and employees.-

618 Any present or former officer, director, manager, (1)619 trustee, agent, adjuster, employee, or independent contractor of 620 any insurer or affiliate and any other person who possesses any 621 executive authority over, or who exercises any control over, any 622 segment of the affairs of the insurer or affiliate shall fully cooperate with the department and office in any proceeding under 623 624 this chapter or any investigation preliminary or incidental to the proceeding. An order of rehabilitation or liquidation which 625

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626 results in the discharge or suspension of any of the persons 627 listed above does not operate to release such person from the 628 duty to cooperate with the department and office as set out 629 herein. As used in this section, the term "person" includes any 630 person who directly or indirectly exercises control over activities of the insurer through any holding company or other 631 632 affiliate of the insurer. The term To "cooperate" includes, but is not limited to, the following: 633

(a) To reply promptly in writing to any inquiry from thedepartment or office requesting such a reply;

(b) Promptly to make available and deliver to the
department or office any books, accounts, documents, other
records, information, data processing software, or property of
or pertaining to the insurer and in her or his possession,
custody, or control; or

641 (c) Promptly to provide access to all data processing
642 records in hard copy and in electronic form and to data
643 processing facilities and services.

(2) No person shall obstruct or interfere with the
department or office in the conduct of any delinquency
proceeding or any investigation preliminary or incidental
thereto.

(3) This section does not prohibit any person from seeking
legal relief from a court when aggrieved by the petition for
liquidation or other delinquency proceeding or by other orders.

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(4) Any person referred to in subsection (1) who fails to cooperate with the department or office, or any other person who obstructs or interferes with the department or office, in the conduct of any delinquency proceeding or any investigation preliminary or incidental thereto, is guilty of a misdemeanor of the first degree, punishable as provided in s. 775.082 or by fine of not more than \$10,000.

(5) Refusal by any person referred to in subsection (1) to
provide records upon the request of the department or office is
grounds for revocation of any insurance-related license,
including, but not limited to, agent and third-party
administrator licenses.

(6) Any person referred to in subsection (1) who refuses
to cooperate in providing records upon the request of the
department or office is liable for any penalties, fines, or
other costs assessed against the guaranty association or the
receiver that result from the refusal or delay to provide
records.

669 Section 14. Section 631.395, Florida Statutes, is amended 670 to read:

671 631.395 Guaranty fund; orders of court.—Any order of 672 liquidation issued pursuant to s. 631.111 or s. 631.131 <u>must</u> 673 shall authorize and direct the department as receiver to 674 coordinate the operation of the receivership with the operation 675 of any insurance guaranty fund authorized to operate in this

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676 state and may authorize the department to provide data processing services for any appropriate guaranty fund. Such 677 678 authorization must shall include, but not be limited to, release 679 of copies of any of the following: 680 (1)Claims files, records, or documents pertaining to 681 claims on file with the insolvent insurer; and 682 (2)Insurance claims filed with the receiver. 683 Section 15. Subsections (1), (4), and (5) of section 684 631.397, Florida Statutes, are amended to read: 685 631.397 Use of certain marshaled assets.-Within 120 days of a final determination of insolvency 686 (1) 687 of an insurer by a court of competent jurisdiction of this 688 state, The department, as receiver, may shall apply to the court 689 for approval of a proposal to disburse assets out of such 690 insurer's marshaled assets, as such assets become available, to 691 each association entitled thereto or, if there are no assets 692 available for such disbursement, then for approval of such 693 proposal as the receiver deems appropriate. For the purposes of 694 this section, the term "association" includes the Florida 695 Insurance Guaranty Association, Incorporated, the Florida 696 Workers' Compensation Insurance Guaranty Association, and any 697 entity or person performing a function in another state similar to that performed in this state by the Florida Insurance 698 Guaranty Association, Incorporated, or the Florida Workers' 699 700 Compensation Insurance Guaranty Association, provided the

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Florida Insurance Guaranty Association, Incorporated, or the Florida Workers' Compensation Insurance Guaranty Association, is entitled to like payment under the laws of the association's state of domicile in respect to insolvent companies doing business in that state.

706 (4) Notice of such application shall be given by the 707 department to the associations in, and to the commissioners of 708 insurance of, each of the states to which disbursement may be made. Such notice shall be made by certified mail, first-class 709 710 postage prepaid, at least 15 days prior to submission -ofsuch 711 application to the court. Such notice shall be deemed to have 712 been made when deposited in the mail.

713 (5) Action on the application may be taken by the court if 714 notice has been given pursuant to subsection (4) and the 715 department's proposal complies with subsection (2).

716

Section 16. This act shall take effect July 1, 2017.

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