1	A bill to be entitled
2	An act relating to the Florida Hurricane Catastrophe
3	Fund; amending s. 215.555, F.S.; revising an insurer's
4	retention multiple and the beginning date in which it
5	shall be used; specifying the method by which the
6	retention multiple must be adjusted for certain
7	coverage levels; requiring the fund's rate formula to
8	provide for a rapid cash build-up under specified
9	circumstances; specifying how the rapid cash build-up
10	factor trigger is to be calculated; revising the
11	amount of money the Legislature must appropriate each
12	fiscal year; revising legislative intent; requiring
13	participating insurers to make a one-time rate filing
14	after a specified date; providing parameters and
15	approval mechanism for such rate filing; revising the
16	obligation of the board, with respect to certain
17	contracts, on a specified date; providing an effective
18	date.
19	
20	Be It Enacted by the Legislature of the State of Florida:
21	
22	Section 1. Paragraph (e) of subsection (2), paragraph (b)
23	of subsection (4), paragraph (b) of subsection (5), paragraph
24	(c) of subsection (7), and paragraph (a) of subsection (16) of
25	section 215.555, Florida Statutes, are amended to read:
	Page 1 of 11

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2019

26	215.555 Florida Hurricane Catastrophe Fund
27	(2) DEFINITIONS.—As used in this section:
28	(e) "Retention" means the amount of losses below which an
29	insurer is not entitled to reimbursement from the fund. An
30	insurer's retention shall be calculated as follows:
31	1. The board shall calculate and report to each insurer
32	the retention multiples for that year. For the contract year
33	beginning June 1, 2020 2005 , the retention multiple shall be
34	equal to $\frac{\$3.2}{\$4.5}$ billion divided by the total estimated
35	reimbursement premium for the contract year; for subsequent
36	years, the retention multiple shall be equal to $\frac{\$3.2}{\$4.5}$
37	billion, adjusted based upon the reported exposure for the
38	contract year occurring 2 years before the particular contract
39	year to reflect the percentage growth in exposure to the fund
40	for covered policies since 2004, divided by the total estimated
41	reimbursement premium for the contract year. Total reimbursement
42	premium for purposes of the calculation under this subparagraph
43	shall be estimated using the assumption that all insurers have
44	selected the 90-percent coverage level.
45	2. The retention multiple as determined under subparagraph
46	1. <u>must</u> shall be adjusted to reflect the coverage level elected
47	by the insurer.

48 <u>a.</u> For insurers electing the 90-percent coverage level,
49 the adjusted retention multiple is 100 percent of the amount
50 determined under subparagraph 1.

Page 2 of 11

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51 <u>b.</u> For insurers electing the 75-percent coverage level, 52 the retention multiple is 120 percent of the amount determined 53 under subparagraph 1.

54 <u>c. For insurers electing the 60-percent coverage level,</u> 55 <u>the retention multiple is 150 percent of the amount determined</u> 56 <u>under subparagraph 1.</u>

57 <u>d.</u> For insurers electing the 45-percent coverage level, 58 the adjusted retention multiple is 200 percent of the amount 59 determined under subparagraph 1.

60 <u>e. For insurers electing the 25-percent coverage level,</u>
 61 <u>the retention multiple is 360 percent of the amount determined</u>
 62 under subparagraph 1.

3. An insurer shall determine its provisional retention by
multiplying its provisional reimbursement premium by the
applicable adjusted retention multiple and shall determine its
actual retention by multiplying its actual reimbursement premium
by the applicable adjusted retention multiple.

4. For insurers who experience multiple covered events 68 69 causing loss during the contract year, beginning June 1, 2005, 70 each insurer's full retention shall be applied to each of the 71 covered events causing the two largest losses for that insurer. 72 For each other covered event resulting in losses, the insurer's retention shall be reduced to one-third of the full retention. 73 74 The reimbursement contract shall provide for the reimbursement 75 of losses for each covered event based on the full retention

Page 3 of 11

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76 with adjustments made to reflect the reduced retentions on or 77 after January 1 of the contract year provided the insurer 78 reports its losses as specified in the reimbursement contract. 79

(4) REIMBURSEMENT CONTRACTS.-

80 (b)1. The contract shall contain a promise by the board to reimburse the insurer for 25 percent, 45 percent, 60 percent, 75 81 82 percent, or 90 percent of its losses from each covered event in 83 excess of the insurer's retention, plus 5 percent of the actual 84 reimbursed losses to cover loss adjustment expenses.

85 2. The insurer must elect one of the percentage coverage 86 levels specified in this paragraph and may, upon renewal of a 87 reimbursement contract, elect a lower percentage coverage level 88 if no revenue bonds issued under subsection (6) after a covered 89 event are outstanding, or elect a higher percentage coverage level, regardless of whether or not revenue bonds are 90 outstanding. All members of an insurer group must elect the same 91 92 percentage coverage level. Any joint underwriting association, 93 risk apportionment plan, or other entity created under s. 94 627.351 must elect the 90-percent coverage level.

95 The contract shall provide that reimbursement amounts 3. 96 shall not be reduced by reinsurance paid or payable to the insurer from other sources. 97

98

(5) REIMBURSEMENT PREMIUMS.-

The State Board of Administration shall select an 99 (b) 100 independent consultant to develop a rate formula for determining

Page 4 of 11

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2019

101 the actuarially indicated premium to be paid to the fund. The 102 rate formula must shall specify, for each zip code or other 103 limited geographical area, the amount of premium to be paid by 104 an insurer for each \$1,000 of insured value under covered 105 policies in that zip code or other area. In establishing 106 premiums, the board must shall consider the coverage elected 107 under paragraph (4) (b) and any factors that tend to enhance the 108 actuarial sophistication of ratemaking for the fund, including 109 deductibles, type of construction, type of coverage provided, relative concentration of risks, and other such factors deemed 110 by the board to be appropriate. Effective June 1, 2019, the 111 112 fund's rate formula shall provide for a rapid cash build-up 113 factor of up to 25 percent only when the available cash balance 114 as of December 31 of the previous year is less than the full 115 statutory capacity of the upcoming contract year. For the 116 purpose of calculating the rapid cash build-up factor trigger, 117 the available cash balance may not be reduced by reserves for projected participating insurer's reimbursements. The formula 118 119 must provide for a cash build-up factor. For the 2009-2010 120 contract year, the factor is 5 percent. For the 2010-2011 121 contract year, the factor is 10 percent. For the 2011 -2012122 contract year, the factor is 15 percent. For the 2012-2013 123 contract year, the factor is 20 percent. For the 2013-2014 124 contract year and thereafter, the factor is 25 percent. The rate 125 formula may provide for a procedure to determine the premiums to

Page 5 of 11

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126 be paid by new insurers that begin writing covered policies 127 after the beginning of a contract year, taking into 128 consideration when the insurer starts writing covered policies, 129 the potential exposure of the insurer, the potential exposure of 130 the fund, the administrative costs to the insurer and to the 131 fund, and any other factors deemed appropriate by the board. The 132 formula must be approved by unanimous vote of the board. The 133 board may, at any time, revise the formula pursuant to the 134 procedure provided in this paragraph.

135

(7) ADDITIONAL POWERS AND DUTIES.-

Each fiscal year, the Legislature shall appropriate 136 (C) 137 the greater of \$10 million or the full from the investment 138 income of the Florida Hurricane Catastrophe Fund an amount no 139 less than \$10 million and no more than 35 percent of the 140 investment income based upon the most recent fiscal year-end 141 audited financial statements for the purpose of providing 142 funding for local governments, state agencies, public and 143 private educational institutions, and nonprofit organizations to 144 support programs intended to improve hurricane preparedness, 145 reduce potential losses in the event of a hurricane, provide 146 research into means to reduce such losses, educate or inform the public as to means to reduce hurricane losses, assist the public 147 in determining the appropriateness of particular upgrades to 148 structures or in the financing of such upgrades, or protect 149 150 local infrastructure from potential damage from a hurricane.

Page 6 of 11

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Moneys shall first be available for appropriation under this paragraph in fiscal year 1997-1998. Moneys in excess of the \$10 million specified in this paragraph shall not be available for appropriation under this paragraph if the State Board of Administration finds that an appropriation of investment income from the fund would jeopardize the actuarial soundness of the fund.

158 (16) FACILITATION OF INSURERS' PRIVATE CONTRACT
159 NEGOTIATIONS BEFORE THE START OF THE HURRICANE SEASON.-

(a) In addition to the legislative findings and intentprovided elsewhere in this section, the Legislature finds that:

162 1.a. Because a regular session of the Legislature begins 163 approximately 3 months before the start of a contract year and 164 ends approximately 1 month before the start of a contract year, 165 participants in the fund always face the possibility that 166 legislative actions will change the coverage provided or offered 167 by the fund with only a few days or weeks of advance notice.

b. The timing issues described in sub-subparagraph a. can
create uncertainties and disadvantages for the residential
property insurers that are required to participate in the fund
when such insurers negotiate for the procurement of private
reinsurance or other sources of capital.

c. Providing participating insurers with a greater degree
of certainty regarding the coverage provided or offered by the
fund and more time to negotiate for the procurement of private

Page 7 of 11

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176 reinsurance or other sources of capital will enable the 177 residential property insurance market to operate with greater 178 stability.

179 Increased stability in the residential property d. 180 insurance market serves a primary purpose of the fund and 181 benefits Florida consumers by enabling insurers to operate more 182 economically. In years when reinsurance and capital markets are 183 experiencing a capital shortage, the last-minute rush by 184 insurers only weeks before the start of the hurricane season to 185 procure adequate coverage in order to meet their capital 186 requirements can result in higher costs that are passed on to 187 Florida consumers. However, if more time is available, 188 residential property insurers should experience greater 189 competition for their business with a corresponding beneficial 190 effect for Florida consumers.

2. It is the intent of the Legislature to provide insurers with the terms and conditions of the reimbursement contract well in advance of the insurers' need to finalize their procurement of private reinsurance or other sources of capital, and thereby improve insurers' negotiating position with reinsurers and other sources of capital.

197 3. It is also the intent of the Legislature that the board 198 publish the fund's maximum statutory limit of coverage and the 199 fund's total retention early enough that residential property 200 insurers can have the opportunity to better estimate their

Page 8 of 11

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201	coverage from the fund.
202	4. It is also the intent of the Legislature that
203	participating insurers will be required to make one special rate
204	filing after June 1, 2020, to reflect the rate impact of the
205	increase or decrease in reinsurance costs. This one-time filing
206	will be deemed approved if not acted upon by the Office of
207	Insurance Regulation within 60 days after the rate filing is
208	submitted to the office.
209	Section 2. Effective June 1, 2020, paragraph (c) of
210	subsection (4) of section 215.555, Florida Statutes, is amended
211	to read:
212	215.555 Florida Hurricane Catastrophe Fund
213	(4) REIMBURSEMENT CONTRACTS
214	(c)1. The contract <u>must</u> shall also provide that the
215	obligation of the board with respect to all contracts covering a
215 216	obligation of the board with respect to all contracts covering a particular contract year shall <u>be up to \$7 billion, as</u>
216	particular contract year shall <u>be up to \$7 billion, as</u>
216 217	particular contract year shall <u>be up to \$7 billion, as</u> determined by the aggregate reimbursement coverage selected by
216 217 218	particular contract year shall <u>be up to \$7 billion, as</u> <u>determined by the aggregate reimbursement coverage selected by</u> <u>all participating insurers. Any cash surpluses exceeding the</u>
216 217 218 219	particular contract year shall <u>be up to \$7 billion, as</u> <u>determined by the aggregate reimbursement coverage selected by</u> <u>all participating insurers. Any cash surpluses exceeding the</u> <u>board's obligation up to \$7 billion shall be preserved for</u>
216 217 218 219 220	particular contract year shall <u>be up to \$7 billion, as</u> <u>determined by the aggregate reimbursement coverage selected by</u> <u>all participating insurers. Any cash surpluses exceeding the</u> <u>board's obligation up to \$7 billion shall be preserved for</u> <u>subsequent contract years up to a maximum obligation of \$7</u>
216 217 218 219 220 221	particular contract year shall <u>be up to \$7 billion, as</u> <u>determined by the aggregate reimbursement coverage selected by</u> <u>all participating insurers. Any cash surpluses exceeding the</u> <u>board's obligation up to \$7 billion shall be preserved for</u> <u>subsequent contract years up to a maximum obligation of \$7</u> <u>billion per contract year</u> not exceed the actual claims-paying
216 217 218 219 220 221 222	particular contract year shall <u>be up to \$7 billion, as</u> <u>determined by the aggregate reimbursement coverage selected by</u> <u>all participating insurers. Any cash surpluses exceeding the</u> <u>board's obligation up to \$7 billion shall be preserved for</u> <u>subsequent contract years up to a maximum obligation of \$7</u> <u>billion per contract year</u> not exceed the actual claims-paying <u>capacity of the fund up to a limit of \$17 billion for that</u>
216 217 218 219 220 221 222 223	particular contract year shall <u>be up to \$7 billion, as</u> <u>determined by the aggregate reimbursement coverage selected by</u> <u>all participating insurers. Any cash surpluses exceeding the</u> <u>board's obligation up to \$7 billion shall be preserved for</u> <u>subsequent contract years up to a maximum obligation of \$7</u> <u>billion per contract year</u> not exceed the actual claims-paying <u>capacity of the fund up to a limit of \$17 billion for that</u> <u>contract year, unless the board determines that there is</u>

Page 9 of 11

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226 additional \$17 billion of capacity for subsequent contract 227 years. If the board makes such a determination, the estimated 228 claims-paying capacity for the particular contract year shall be determined by adding to the \$17 billion limit one-half of the 229 230 fund's estimated claims-paying capacity in excess of \$34 231 billion. However, the dollar growth in the limit may not 232 increase in any year by an amount greater than the dollar growth 233 of the balance of the fund as of December 31, less any premiums 234 or interest attributable to optional coverage, as defined by 235 rule which occurred over the prior calendar year.

236 In May and October of the contract year, the board 2. 237 shall publish in the Florida Administrative Register a statement 238 of the fund's estimated borrowing capacity, the fund's estimated 239 claims-paying capacity, and the projected balance of the fund as 240 of December 31. After the end of each calendar year, the board shall notify insurers of the estimated borrowing capacity, 241 242 estimated claims-paying capacity, and the balance of the fund as 243 of December 31 to provide insurers with data necessary to assist 244 them in determining their retention and projected payout from 245 the fund for loss reimbursement purposes. In conjunction with the development of the premium formula, as provided for in 246 subsection (5), the board shall publish factors or multiples 247 that assist insurers in determining their retention and 248 projected payout for the next contract year. For all regulatory 249 250 and reinsurance purposes, an insurer may calculate its projected

Page 10 of 11

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251 payout from the fund as its share of the total fund premium for 252 the current contract year multiplied by the sum of the projected 253 balance of the fund as of December 31 and the estimated 254 borrowing capacity for that contract year as reported under this 255 subparagraph.

256 Section 3. Except as otherwise expressly provided in this 257 act, this act shall take effect upon becoming a law.

Page 11 of 11

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