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2	An act relating to insurance; amending s.
3	627.021, F.S.; providing that the provisions of
4	ch. 627, F.S., do not apply to commercial
5	inland marine insurance; amending ss. 627.0651,
6	627.410, F.S.; making conforming changes to
7	requirements for filing underwriting rules and
8	forms; amending s. 627.311, F.S.; revising the
9	composition of the workers' compensation joint
10	underwriting plan; prohibiting insurers from
11	providing workers' compensation to certain
12	employers; amending ss. 627.7013 and 627.7014,
13	F.S.; providing findings relating to the
14	moratorium on hurricane-related cancellations
15	and nonrenewals of personal lines residential
16	policies and condominium association policies,
17	respectively; deleting provisions relating to
18	accelerated exposure reduction plans; providing
19	circumstances under which the sections are
20	inoperative; delaying the future repeal date of
21	the sections; amending s. 627.7295, F.S.,
22	relating to minimum down payments for motor
23	vehicle insurance; amending s. 627.351, F.S.;
24	prohibiting further geographical expansion of
25	Florida Windstorm Underwriting Association
26	eligibility; creating s. 626.9543, F.S.;
27	providing a short title; providing legislative
28	intent and purpose; requiring the Department of
29	Insurance to provide certain assistance to
30	Holocaust victims; providing requirements for
31	insurers relating to insurance claims from
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1 beneficiaries, descendants, or heirs of 2 Holocaust victims; limiting certain statutes of 3 limitation under certain circumstances; 4 requiring insurers to report certain 5 information to the department; requiring the 6 department to report to the Legislature; 7 providing penalties; providing requirements for bringing certain causes of action; providing 8 9 severability; providing an effective date. 10 11 Be It Enacted by the Legislature of the State of Florida: 12 13 Section 1. Subsection (2) of section 627.021, Florida Statutes, is amended to read: 14 627.021 Scope of this part.--15 16 (2) This chapter does not apply to: 17 (a) Reinsurance, except joint reinsurance as provided in s. 627.311. 18 19 (b) Insurance against loss of or damage to aircraft, 20 their hulls, accessories, or equipment, or against liability, other than workers' compensation and employer's liability, 21 arising out of the ownership, maintenance, or use of aircraft. 22 23 (c) Insurance of vessels or craft, their cargoes, marine builders' risks, marine protection and indemnity, or 24 other risks commonly insured under marine, as distinguished 25 26 from inland marine, insurance policies. 27 (d) Commercial inland marine insurance. 28 (e)(d) Surplus lines insurance placed under the provisions of ss. 626.913-626.937. 29 Section 2. Subsection (13) of section 627.0651, 30 Florida Statutes, is amended to read: 31 2 CODING: Words stricken are deletions; words underlined are additions.

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627.0651 Making and use of rates for motor vehicle 1 2 insurance.--3 (13)(a) Underwriting rules not contained in rating 4 manuals shall be filed for private passenger automobile insurance and homeowners' insurance. 5 6 (b) The submission of rates, rating schedules, and 7 rating manuals to the department by a licensed rating 8 organization of which an insurer is a member or subscriber 9 will be sufficient compliance with this subsection for any insurer maintaining membership or subscribership in such 10 organization, to the extent that the insurer uses the rates, 11 12 rating schedules, and rating manuals of such organization. 13 All such information shall be available for public inspection, 14 upon receipt by the department, during usual business hours. 15 (c) The filing requirements of this subsection do not apply to commercial inland marine risks. 16 17 Section 3. Subsection (4) of section 627.311, Florida 18 Statutes, is amended to read: 19 627.311 Joint underwriters and joint reinsurers.--20 (4)(a) Effective upon this act becoming a law, the department shall, after consultation with insurers, approve a 21 22 joint underwriting plan of insurers which shall operate as a 23 nonprofit entity. For the purposes of this subsection, the term "insurer" includes group self-insurance funds authorized 24 by s. 624.4621, commercial self-insurance funds authorized by 25 26 s. 624.462, assessable mutual insurers authorized under s. 628.6011, and insurers licensed to write workers' compensation 27 and employer's liability insurance in this state. The purpose 28 29 of the plan is to provide workers' compensation and employer's liability insurance to applicants who are required by law to 30 maintain workers' compensation and employer's liability 31 3

insurance and who are in good faith entitled to but who are 1 unable to purchase such insurance through the voluntary 2 market. The joint underwriting plan shall issue policies 3 4 beginning January 1, 1994. The plan must have actuarially 5 sound rates that assure that the plan is self-supporting. 6 (b) The operation of the plan is subject to the 7 supervision of a 13-member board of governors. The board of governors shall be comprised of: 8 9 1. Five of the 20 domestic insurers, as defined in s. 624.06(1), having the largest voluntary direct premiums 10 written in this state for workers' compensation and employer's 11 12 liability insurance, which shall be elected by those 20 13 domestic insurers; 14 2. Five of the 20 foreign insurers as defined in s. 15 624.06(2) having the largest voluntary direct premiums written in this state for workers' compensation and employer's 16 17 liability insurance, which shall be elected by those 20 foreign insurers; 18 19 3. One person, who shall serve as the chair, appointed 20 by the Insurance Commissioner; 21 4. One person appointed by the largest property and casualty insurance agents' association in this state; and 22 23 5. The consumer advocate appointed under s. 627.0613 or the consumer advocate's designee. 5 domestic insurers, 1 of 24 whom shall be the assessable mutual insurer or other domestic 25 26 insurer which has the largest voluntary written premium for 27 workers' compensation and employer's liability insurance as of December 31, 1993, 1 of whom shall be the commercial 28 29 self-insurance fund which has the largest voluntary written premium for workers' compensation and employer's liability 30 insurance, as of December 31, 1993, and 3 of whom shall be the 31 4

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3 of the 5 group self-insurers' funds, authorized by s. 1 440.57, which have the largest voluntary written premium for 2 workers' compensation and employer's liability insurance, as 3 4 of December 31, 1993; and 5 of the 20 foreign insurers which 5 are defined in s. 624.06(2) with the largest voluntary written premium in this state for workers' compensation and employer's 6 7 liability insurance, for the latest year for which data are available, as selected by those 20 foreign insurers. If the 8 9 assessable mutual insurer or the commercial self-insurance fund, described in this paragraph, decline to serve on, or 10 resign from, the board of governors, such position on the 11 12 board of governors shall be filled by appointment by a committee comprised of the 10 assessable mutual insurers, 13 14 commercial self-insurance funds, and group self-insurers' funds, authorized by s. 440.57, which have the largest 15 voluntary written premium for workers' compensation and 16 17 employer's liability insurance, as of December 31, 1993. 18 19 Each board member shall serve 4-year terms and may serve 20 consecutive terms.No board member shall be an insurer which provides service to the plan or which has an affiliate which 21 provides services to the plan or which is serviced by a 22 23 service company or third-party administrator which provides services to the plan or which has an affiliate which provides 24 services to the plan. The board of governors shall have a 25 26 chair, who shall be named by the Insurance Commissioner. The board of governors shall include one representative appointed 27 by the largest property and casualty insurance agents' 28 29 association in this state. The consumer advocate appointed 30 under s. 627.0613 shall be a member of the board of governors. 31 5

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The minutes, audits, and procedures of the board of governors
 are subject to chapter 119.

3 (c)(b) The operation of the plan shall be governed by
4 a plan of operation that is prepared at the direction of the
5 board of governors. The plan of operation may be changed at
6 any time by the board of governors or upon request of the
7 department. The plan of operation and all changes thereto are
8 subject to the approval of the department. The plan of
9 operation shall:

1. Authorize the board to engage in the activities
 necessary to implement this subsection, including, but not
 limited to, borrowing money.

Develop criteria for eligibility for coverage by 13 2. 14 the plan, including, but not limited to, documented rejection 15 by at least two insurers which reasonably assures that 16 insureds covered under the plan are unable to acquire coverage 17 in the voluntary market. Any insured may voluntarily elect to accept coverage from an insurer for a premium equal to or 18 19 greater than the plan premium if the insurer writing the coverage adheres to the provisions of s. 627.171. 20

3. Require notice from the agent to the insured at the time of the application for coverage that the application is for coverage with the plan and that coverage may be available through an insurer, group self-insurers' fund, commercial self-insurance fund, or assessable mutual insurer through another agent at a lower cost.

4. Establish programs to encourage insurers to provide
coverage to applicants of the plan in the voluntary market and
to insureds of the plan, including, but not limited to:

a. Establishing procedures for an insurer to use innotifying the plan of the insurer's desire to provide coverage

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to applicants to the plan or existing insureds of the plan and
 in describing the types of risks in which the insurer is
 interested. The description of the desired risks must be on a
 form developed by the plan.

b. Developing forms and procedures that provide an
insurer with the information necessary to determine whether
the insurer wants to write particular applicants to the plan
or insureds of the plan.

9 c. Developing procedures for notice to the plan and 10 the applicant to the plan or insured of the plan that an 11 insurer will insure the applicant or the insured of the plan, 12 and notice of the cost of the coverage offered; and developing 13 procedures for the selection of an insuring entity by the 14 applicant or insured of the plan.

d. Provide for a market-assistance plan to assist in the placement of employers. All applications for coverage in the plan received 45 days before the effective date for coverage shall be processed through the market-assistance plan. A market-assistance plan specifically designed to serve the needs of small good policyholders as defined by the board must be finalized by January 1, 1994.

5. Provide for policy and claims services to the
insureds of the plan of the nature and quality provided for
insureds in the voluntary market.

25 6. Provide for the review of applications for coverage
26 with the plan for reasonableness and accuracy, using any
27 available historic information regarding the insured.

7. Provide for procedures for auditing insureds of the
plan which are based on reasonable business judgment and are
designed to maximize the likelihood that the plan will collect
the appropriate premiums.

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Authorize the plan to terminate the coverage of and 1 8. 2 refuse future coverage for any insured that submits a 3 fraudulent application to the plan or provides fraudulent or 4 grossly erroneous records to the plan or to any service 5 provider of the plan in conjunction with the activities of the 6 plan. 7 9. Establish service standards for agents who submit 8 business to the plan. 9 10. Establish criteria and procedures to prohibit any agent who does not adhere to the established service standards 10 from placing business with the plan or receiving, directly or 11 12 indirectly, any commissions for business placed with the plan. Provide for the establishment of reasonable safety 13 11. 14 programs for all insureds in the plan. At the direction of the 15 board, the Division of Safety shall provide inspection to insureds and applicants for coverage in the plan identified as 16 17 high-risk insureds by the board or its designee. 18 Authorize the plan to terminate the coverage of 12. 19 and refuse future coverage to any insured who fails to pay premiums or surcharges when due; who, at the time of 20 application, is delinquent in payments of workers' 21 22 compensation or employer's liability insurance premiums or 23 surcharges owed to an insurer, group self-insurers' fund, commercial self-insurance fund, or assessable mutual insurer 24 licensed to write such coverage in this state; or who refuses 25 26 to substantially comply with any safety programs recommended 27 by the plan. 13. Authorize the board of governors to provide the 28 29 services required by the plan through staff employed by the plan, through reasonably compensated service providers who 30 contract with the plan to provide services as specified by the 31 8

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board of governors, or through a combination of employees and
 service providers.

14. Provide for service standards for service
providers, methods of determining adherence to those service
standards, incentives and disincentives for service, and
procedures for terminating contracts for service providers
that fail to adhere to service standards.

8 15. Provide procedures for selecting service providers 9 and standards for qualification as a service provider that 10 reasonably assure that any service provider selected will 11 continue to operate as an ongoing concern and is capable of 12 providing the specified services in the manner required.

13 16. Provide for reasonable accounting and14 data-reporting practices.

15 17. Provide for annual review of costs associated with 16 the administration and servicing of the policies issued by the 17 plan to determine alternatives by which costs can be reduced.

18 18. Authorize the acquisition of such excess insurance19 or reinsurance as is consistent with the purposes of the plan.

20 19. Provide for an annual report to the department on
21 a date specified by the department and containing such
22 information as the department reasonably requires.

23 20. Establish multiple rating plans for various classifications of risk which reflect risk of loss, hazard 24 grade, actual losses, size of premium, and compliance with 25 26 loss control. At least one of such plans must be a preferred-rating plan to accommodate small-premium 27 policyholders with good experience as defined in 28 29 sub-subparagraph 22.a. 21. Establish agent commission schedules. 30

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22. Establish three subplans as follows:

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Subplan "A" must include those insureds whose 1 a. 2 annual premium does not exceed \$2,500 and who have neither 3 incurred any lost-time claims nor incurred medical-only claims exceeding 50 percent of their premium for the immediate 2 4 5 years.

6 b. Subplan "B" must include insureds that are 7 employers identified by the board of governors as high-risk employers due solely to the nature of the operations being 8 9 performed by those insureds and for whom no market exists in the voluntary market, and whose experience modifications are 10 less than 1.00. 11

12 c. Subplan "C" must include all other insureds within 13 the plan.

14 (d) (d) (c) The plan must be funded through actuarially 15 sound premiums charged to insureds of the plan. The plan may 16 issue assessable policies only to those insureds in subplan 17 "C." Those assessable policies must be clearly identified as assessable by containing, in contrasting color and in not less 18 19 than 10-point type, the following statements: "This is an assessable policy. If the plan is unable to pay its 20 obligations, policyholders will be required to contribute on a 21 22 pro rata earned premium basis the money necessary to meet any 23 assessment levied." The plan may issue assessable policies with differing terms and conditions to different groups within 24 the plan when a reasonable basis exists for the 25 differentiation. The plan may offer rating, dividend plans, 26 27 and other plans to encourage loss prevention programs. (e)(d) The plan shall establish and use its rates and 28 29 rating plans, and the plan may establish and use changes in 30

rating plans at any time, but no more frequently than two

times per any rating class for any calendar year. By December 31

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1, 1993, and December 1 of each year thereafter, the board 1 shall establish and use actuarially sound rates for use by the 2 3 plan to assure that the plan is self-funding while those rates 4 are in effect. Such rates and rating plans must be filed with 5 the department within 30 calendar days after their effective dates, and shall be considered a "use and file" filing. Any 6 7 disapproval by the department must have an effective date that is at least 60 days from the date of disapproval of the rates 8 9 and rating plan and must have prospective effect only. The 10 plan may not be subject to any order by the department to return to policyholders any portion of the rates disapproved 11 12 by the department. The department may not disapprove any rates 13 or rating plans unless it demonstrates that such rates and 14 rating plans are excessive, inadequate, or unfairly 15 discriminatory.

(f)<del>(e)</del> No later than June 1 of each year, the plan 16 17 shall obtain an independent actuarial certification of the results of the operations of the plan for prior years, and 18 19 shall furnish a copy of the certification to the department. If, after the effective date of the plan, the projected 20 ultimate incurred losses and expenses and dividends for prior 21 years exceed collected premiums, accrued net investment 22 23 income, and prior assessments for prior years, the certification is subject to review and approval by the 24 department before it becomes final. 25

26 (g)(f) Whenever a deficit exists, the plan shall, 27 within 90 days, provide the department with a program to 28 eliminate the deficit within a reasonable time. The deficit 29 may be funded both through increased premiums charged to 30 insureds of the plan for subsequent years and through 31

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assessments on insureds in the plan if the plan uses
 assessable policies.

3 (h)(g) Any premium or assessments collected by the 4 plan in excess of the amount necessary to fund projected 5 ultimate incurred losses and expenses of the plan and not paid 6 to insureds of the plan in conjunction with loss prevention or 7 dividend programs shall be retained by the plan for future 8 use.

9 <u>(i)(h)</u> The decisions of the board of governors do not 10 constitute final agency action and are not subject to chapter 11 120.

12 (j)(i) Policies for insureds shall be issued by the 13 plan.

14 <u>(k)(j)</u> The plan created under this subsection is 15 liable only for payment for losses arising under policies 16 issued by the plan with dates of accidents occurring on or 17 after January 1, 1994.

18 <u>(1)(k)</u> Plan losses are the sole and exclusive 19 responsibility of the plan, and payment for such losses must 20 be funded in accordance with this subsection and must not 21 come, directly or indirectly, from insurers or any guaranty 22 association for such insurers.

23 (m)(1) Each joint underwriting plan or association 24 created under this section is not a state agency, board, or 25 commission. However, for the purposes of s. 199.183(1) only, 26 the joint underwriting plan is a political subdivision of the 27 state and is exempt from the corporate income tax.

28 (n)(m) Each joint underwriting plan or association may 29 elect to pay premium taxes on the premiums received on its 30 behalf or may elect to have the member insurers to whom the 31 premiums are allocated pay the premium taxes if the member

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insurer had written the policy. The joint underwriting plan or 1 association shall notify the member insurers and the 2 Department of Revenue by January 15 of each year of its 3 4 election for the same year. As used in this paragraph, the 5 term "premiums received" means the consideration for insurance, by whatever name called, but does not include any б 7 policy assessment or surcharge received by the joint underwriting association as a result of apportioning losses or 8 9 deficits of the association pursuant to this section. 10 (o)(n) Effective midnight, December 31, 1993, the Florida Workers' Compensation Insurance Plan, administered by 11 12 the National Council on Compensation Insurance, shall 13 terminate, except with respect to workers' compensation 14 policies issued pursuant to such Florida Workers' Compensation 15 Insurance Plan with inception dates on or before December 31, 1993. 16 17 (p) (o) Neither the plan nor any member of the board of

17 (p)(0) Neither the plan hor any member of the board of 18 governors is liable for monetary damages to any person for any 19 statement, vote, decision, or failure to act, regarding the 20 management or policies of the plan, unless:

The member breached or failed to perform her or his
 duties as a member; and

23 2. The member's breach of, or failure to perform,24 duties constitutes:

a. A violation of the criminal law, unless the member
had reasonable cause to believe her or his conduct was
unlawful. A judgment or other final adjudication against a
member in any criminal proceeding for violation of the
criminal law estops that member from contesting the fact that
her or his breach, or failure to perform, constitutes a
violation of the criminal law; but does not estop the member

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from establishing that she or he had reasonable cause to 1 believe that her or his conduct was lawful or had no 2 3 reasonable cause to believe that her or his conduct was unlawful; 4 5 b. A transaction from which the member derived an 6 improper personal benefit, either directly or indirectly; or 7 Recklessness or any act or omission that was c. 8 committed in bad faith or with malicious purpose or in a 9 manner exhibiting wanton and willful disregard of human 10 rights, safety, or property. For purposes of this sub-subparagraph, the term "recklessness" means the acting, or 11 12 omission to act, in conscious disregard of a risk: 13 (I) Known, or so obvious that it should have been 14 known, to the member; and (II) Known to the member, or so obvious that it should 15 have been known, to be so great as to make it highly probable 16 that harm would follow from such act or omission. 17 18 (q) (p) The provisions of this subsection shall be 19 reviewed by the Legislature before July 1, 1996. 20 (r) No insurer shall provide workers' compensation and employer's liability insurance to any person who is delinquent 21 in the payment of premiums, assessments, penalties, or 22 23 surcharges owed to the plan. Section 4. Subsection (1) of section 627.410, Florida 24 Statutes, is amended to read: 25 26 627.410 Filing, approval of forms.--27 (1) No basic insurance policy or annuity contract form, or application form where written application is 28 29 required and is to be made a part of the policy or contract, or group certificates issued under a master contract delivered 30 in this state, or printed rider or endorsement form or form of 31 14

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renewal certificate, shall be delivered or issued for delivery 1 in this state, unless the form has been filed with the 2 department at its offices in Tallahassee by or in behalf of 3 4 the insurer which proposes to use such form and has been 5 approved by the department. This provision does not apply to surety bonds or to specially rated inland marine risks, nor to 6 7 policies, riders, endorsements, or forms of unique character which are designed for and used with relation to insurance 8 9 upon a particular subject (other than as to health insurance), or which relate to the manner of distribution of benefits or 10 to the reservation of rights and benefits under life or health 11 12 insurance policies and are used at the request of the 13 individual policyholder, contract holder, or 14 certificateholder. As to group insurance policies effectuated 15 and delivered outside this state but covering persons resident in this state, the group certificates to be delivered or 16 17 issued for delivery in this state shall be filed with the department for information purposes only. 18 19 Section 5. Paragraph (c) is added to subsection (1) of section 627.7013, Florida Statutes, and subsection (2) of said 20 section is amended, to read: 21 22 627.7013 Orderly markets for personal lines 23 residential property insurance. --FINDINGS AND PURPOSE. --24 (1)The Legislature finds that personal lines 25 (a) 26 residential property insurers, as a condition of doing 27 business in this state, have a responsibility to contribute to an orderly market for personal lines residential property 28 29 insurance and that there is a compelling state interest in maintaining an orderly market for personal lines residential 30 property insurance. The Legislature further finds that 31 15

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Hurricane Andrew, which caused over \$15 billion of insured 1 losses in South Florida, has reinforced the need of consumers 2 3 to have reliable homeowner's insurance coverage; however, the 4 enormous monetary impact to insurers of Hurricane Andrew 5 claims has prompted insurers to propose substantial 6 cancellation or nonrenewal of their homeowner's insurance 7 policyholders. The Legislature further finds that the massive 8 cancellations and nonrenewals announced, proposed, or 9 contemplated by certain insurers constitute a significant 10 danger to the public health, safety, and welfare, and destabilize the insurance market. In furtherance of the 11 12 overwhelming public necessity for an orderly market for 13 property insurance, the Legislature, in chapter 93-401, Laws 14 of Florida, imposed, for a limited time, a moratorium on 15 cancellation or nonrenewal of personal lines residential 16 property insurance policies. The Legislature further finds 17 that upon expiration of the moratorium, additional actions are required to maintain an orderly market for personal lines 18 19 residential property insurance in this state. The purposes of this section are to provide for a phaseout of the moratorium 20 and to require advance planning and approval for programs of 21 22 exposure reduction.

(b) The Legislature finds, as of the beginning of the1996 Regular Session of the Legislature, that:

The conditions described in paragraph (a) remain
 applicable to the property insurance market in this state in
 1996 and are likely to remain applicable for several years
 thereafter.

29 2. The Residential Property and Casualty Joint
 30 Underwriting Association, a residual market mechanism created
 31 to alleviate temporary unavailability of property insurance

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1 coverage, remains the primary or exclusive source of new
2 property insurance coverage in significant portions of the
3 state.
4 3. Recent enactments intended to restore a
5 competitive, private sector property insurance market,
6 including creation and enhancement of the Florida Hurricane

7 Catastrophe Fund, incentives for depopulation of the Residential Property and Casualty Joint Underwriting 8 9 Association, incentives for hurricane loss mitigation and prevention, creation of the Florida Commission on Hurricane 10 Loss Projection Methodology, and revisions of laws relating to 11 12 rates and coverages, are beginning to have their intended effects; however, the market instability that persists could 13 14 frustrate these efforts to restore the market.

The moratorium completion provided in this section 15 4. is the least intrusive method for maintaining an orderly 16 17 market, insofar as it applies only to hurricane-related cancellations and nonrenewals of personal lines residential 18 19 policies that were in force on the effective date, and insofar 20 as it allows an insurer annually to nonrenew up to 5 percent of the total number of such policies as of the effective date. 21 The Legislature finds, as of January 1, 1998, 22 (C)

23 that: 24 The conditions described in paragraphs (a) and (b) 1. remain applicable to the property insurance market in this 25 26 state in 1998 and are likely to remain applicable for several 27 years thereafter. 2. The general instability of the market is reflected 28 29 by the following facts: a. In spite of depopulation efforts under which 30 approximately 600,000 policies have been transferred from the 31

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Residential Property and Casualty Joint Underwriting 1 2 Association to the voluntary market, the joint underwriting 3 association, with approximately 500,000 policies in force, 4 remains the primary or exclusive source of new property 5 insurance coverage in significant portions of the state. 6 b. The Florida Windstorm Underwriting Association is 7 growing rapidly, with more than 400,000 policies in force, 8 approximately half of which were initially issued in 1997. 3. A further extension of the operation of this 9 section until June 1, 2001, will provide an opportunity for 10 the market to stabilize and for continuation of residual 11 12 market depopulation efforts. (2) MORATORIUM COMPLETION. --13 14 (a) As used in this subsection, the term "total number of policies" means the number of an insurer's policies of a 15 16 specified type that were in force on June 1, 1996, or the date 17 on which this section became law, whichever was later. 18 (b) The following restrictions apply only to 19 cancellation or nonrenewal of personal lines residential property insurance policies that were in force on June 1, 20 1996, or the date on which this section became law, whichever 21 22 was later. 23 1. In any 12-month period, an insurer may not cancel or nonrenew more than 5 percent of such insurer's total number 24 of homeowner's policies, 5 percent of such insurer's total 25 26 number of mobile home owner's policies, or 5 percent of such 27 insurer's total number of personal lines residential policies of all types and classes in the state for the purpose of 28 29 reducing the insurer's exposure to hurricane claims and may not, with respect to any county, cancel or nonrenew more than 30 10 percent of its total number of homeowner's policies, 10 31 18

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percent of its total number of mobile home owner's policies, 1 or 10 percent of its total number of personal lines 2 3 residential policies of all types and classes in the county 4 for the purpose of reducing the insurer's exposure to 5 hurricane claims. This subparagraph does not prohibit any cancellations or nonrenewals of such policies for any other б 7 lawful reason unrelated to the risk of loss from hurricane 8 exposure.

9 If, for any 12-month period, an insurer proposes 2.a. 10 to cancel or nonrenew personal lines residential policies to an extent not authorized by subparagraph 1. for the purpose of 11 12 reducing exposure to hurricane claims, the insurer must file a 13 phaseout plan with the department at least 90 days prior to 14 the effective date of the plan. In the plan, the insurer must 15 demonstrate to the department that the insurer is protecting 16 market stability and the interests of its policyholders. The 17 plan may not be implemented unless it is approved by the department. In developing the plan, the insurer must consider 18 19 policyholder longevity, the use of voluntary incentives to accomplish the reduction, and geographic distribution. The 20 insurer must demonstrate that under the plan the insurer will 21 22 not cancel or nonrenew more policies in the 12-month period 23 than the largest number of similar policies the insurer canceled or nonrenewed for any reason in any 12-month period 24 between August 24, 1989, and August 24, 1992. 25 26 b. If the insurer considers the number of

27 cancellations and nonrenewals under sub-subparagraph a. to be 28 insufficient, the insurer may apply for approval of additional 29 cancellations or nonrenewals on the basis of an unreasonable 30 risk of insolvency. In evaluating a request under this 31 sub-subparagraph, the department shall consider and shall

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require the insurer to provide information relevant to: the 1 2 insurer's size, market concentration, and general financial 3 condition; the portion of the insurer's business in this state 4 represented by personal lines residential property insurance; the reasonableness of assumptions with respect to size, 5 frequency, severity, and path of hurricanes; the reinsurance 6 7 available to the insurer and potential recoveries from the Florida Hurricane Catastrophe Fund; and the extent to which 8 9 the insurer's assets have been voluntarily transferred by dividend or otherwise from the insurer to its stockholders, 10 parent companies, or affiliated companies since June 1, 1996, 11 12 or the date on which this section became law, whichever was later. In the implementation of exposure reductions under this 13 14 sub-subparagraph, the department and the insurer shall 15 consider such factors as policyholder longevity, the use of 16 voluntary incentives to accomplish the exposure reduction, and 17 geographic distribution.

18 c. A policy shall not be counted as having been 19 canceled or nonrenewed for purposes of this subsection if any 20 of the following apply:

21 The policy was canceled or nonrenewed for an (I) 22 underwriting reason unrelated to the risk of loss from 23 hurricane exposure, nonpayment of premium, or any other lawful reason that is unrelated to the risk of loss from hurricane 24 exposure. The department shall consider the reason specified 25 26 in the notice of cancellation or nonrenewal to be the reason 27 for the cancellation or nonrenewal unless the department finds by a preponderance of the evidence that the stated reason was 28 29 not the insurer's actual reason for the cancellation or 30 nonrenewal.

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(II) The cancellation or nonrenewal was initiated by 1 2 the insured. 3 (III) The insurer has offered the policyholder 4 replacement or alternative coverage at approved rates, which 5 coverage meets the requirements of the secondary mortgage 6 market. 7 In addition to any other cancellations or d. 8 nonrenewals subject to the limitations in this subsection, a 9 policy shall be considered as having been canceled or nonrenewed for purposes of this subsection if: 10 (I) The insurer implements a rate increase under the 11 12 use-and-file provisions of s. 627.062(2)(a)2., which rate increase exceeds 150 percent of the increase ultimately 13 14 approved by the department, and, while the rate filing was 15 pending, the policyholder voluntarily canceled or nonrenewed the policy and obtained replacement coverage from another 16 17 insurer, including the Residential Property and Casualty Joint 18 Underwriting Association; or 19 (II) The insurer reduces the commission to an agent by 20 more than 25 percent and the agent thereafter places the risk with another insurer, including the Residential Property and 21 22 Casualty Joint Underwriting Association, or the Florida 23 Windstorm Underwriting Association, or the Coastal Zone 24 Insurance Plan. The department must approve or disapprove an 25 e. 26 application for a waiver within 90 days after the department 27 receives the application for waiver. In addition to the cancellations or nonrenewals 28 3. 29 authorized under this section, an insurer may cancel or nonrenew policies to the extent authorized by an exemption 30 from or waiver of either the moratorium created by chapter 31 21 CODING: Words stricken are deletions; words underlined are additions.

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1 93-401, Laws of Florida, or the moratorium phaseout under 2 former s. 627.7013(2).

3 4. Notwithstanding any provisions of this section to 4 the contrary, this section does not apply to any insurer that, 5 prior to August 24, 1992, filed notice of such insurer's 6 intent to discontinue writing insurance in this state under s. 7 624.430, and for which a finding has been made by the department, the Division of Administrative Hearings of the 8 9 Department of Management Services, or a court that such notice satisfied all requirements of s. 624.430. Nothing in this 10 section shall be construed to authorize an insurer to withdraw 11 12 from any line of property insurance business for the purpose of reducing exposure to risk of hurricane loss if such 13 14 withdrawal commenced at any time that the moratorium under chapter 93-401, Laws of Florida, or the moratorium phaseout 15 under this section is in effect. 16

5. The following actions by an insurer do not
constitute cancellations or nonrenewals for purposes of this
subsection:

a. The transfer of a risk from one admitted insurer to
another admitted insurer, unless the terms of the new or
replacement policy place the policyholder in default of a
mortgage obligation.

b. An increase in the hurricane deductible applicable
to the policy, unless the new deductible places the
policyholder in default of a mortgage obligation or the
deductible exceeds the limits specified in s. 627.701.

c. Any other lawful change in coverage that does not
place the policyholder in default of a mortgage obligation.
d. A cancellation or nonrenewal that is part of the
same action as the removal of a policy including windstorm or

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hurricane coverage from the Residential Property and Casualty
 Joint Underwriting Association.

6. In order to assure fair and effective enforcement 3 4 of this subsection, each insurer shall, no later than October 5 1, 1996, report to the department the policy number of each policy subject to this subsection, arranged by county. The 6 7 report shall include the policy number for each personal lines residential policy that was in force on June 1, 1996, or the 8 9 date this section became law, whichever was later. Beginning October 1, 1996, each insurer shall also report, on a monthly 10 basis, all cancellations and nonrenewals of policies included 11 12 in such policy list and the reasons for the cancellations and 13 nonrenewals.

14 7. An insurer that has an overconcentration of wind 15 risk in areas eligible for coverage under the Florida Windstorm Underwriting Association may submit to the 16 17 department for approval an accelerated exposure reduction plan. The plan, if approved, shall allow the insurer to 18 19 nonrenew additional policies for reasons of reducing hurricane loss, beyond the amounts authorized elsewhere in this 20 paragraph, subject to the following conditions: 21 22 a. All additional nonrenewals under this subparagraph 23 shall consist of nonrenewals of only the windstorm portion of a policy, and shall be allowed only if the Florida Windstorm 24 25 Underwriting Association provides windstorm coverage to 26 replace the nonrenewed windstorm coverage. b. At the conclusion of the accelerated exposure 27 reduction plan, which shall be no later than 12 months after 28 29 the date of the first nonrenewal under such plan, the insurer 30 is prohibited from any further nonrenewals for purposes of 31

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reducing hurricane loss until the expiration of this 1 2 subsection. 3 c. The total number of nonrenewals statewide for purposes of reduction of hurricane loss, under this 4 5 subparagraph taken together with the other provisions of this paragraph, shall not exceed the total number of nonrenewals б 7 that would have been allowed statewide under subparagraph 1. between June 1, 1996, and the expiration of this subsection. 8 9 d. Notwithstanding the provisions of s. 627.4133, the insurer must give the policyholder 45 days' advance notice of 10 the nonrenewal of windstorm coverage under this subparagraph 11 12 and the availability of such coverage through the Florida Windstorm Underwriting Association. 13 14 e. The first nonrenewal under an accelerated exposure 15 reduction program under this subparagraph may not take effect earlier than February 1, 1997. 16 f. In reviewing the proposed accelerated exposure 17 reduction plan, the department shall consider: 18 19 (I) The degree to which the exposure reduction plan is 20 necessary to address the insurer's overconcentration. 21 (II) Prior levels of participation in writing voluntary wind coverage in areas eligible for coverage through 22 the Florida Windstorm Underwriting Association. 23 (III) The availability of wind coverage in the 24 voluntary market for the subject risks. 25 26 (IV) The capacity of the Florida Windstorm 27 Underwriting Association to absorb the risks proposed to be covered by the association. 28 29 (c) The department may adopt rules to implement this 30 subsection. 31 24

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This section shall cease to operate at such time 1 (d) 2 as the department determines that the insured value of all 3 residential properties insured by the Florida Windstorm Underwriting Association and all properties insured by the 4 5 Residential Property and Casualty Joint Underwriting 6 Association under policies providing wind coverage, combined, 7 has remained below \$25 billion for 3 consecutive months, based 8 on exposure data reported to the department by the 9 associations. 10 (e)(d) This subsection is repealed on June 1, 2001 <del>1999</del>. 11 12 Section 6. Section 627.7014, Florida Statutes, is 13 amended to read: 14 627.7014 Orderly markets for condominium association 15 residential property insurance. --(1) FINDINGS AND PURPOSE. --16 17 (a) The Legislature finds: 1. That residential property insurers providing 18 19 condominium association coverage, as a condition of doing business in this state, have a responsibility to contribute to 20 an orderly market for condominium association residential 21 22 property insurance and that there is a compelling state interest in maintaining an orderly market for condominium 23 association residential property insurance. 24 2. That Hurricane Andrew, which caused over \$15 25 26 billion of insured losses in South Florida, has reinforced the need of consumers to have reliable condominium association 27 insurance coverage; however, even more than 3 years after 28 29 Hurricane Andrew, the hurricane's enormous monetary impact is causing insurers to propose substantial cancellation or 30 31 25

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nonrenewal of their condominium association insurance
 policyholders.

3 3. That the massive cancellations and nonrenewals
4 announced, proposed, or contemplated by certain insurers
5 constitute a significant danger to the public health, safety,
6 and welfare and destabilize the insurance market.

7 4. That the Residential Property and Casualty Joint
8 Underwriting Association, a residual market mechanism created
9 to alleviate temporary unavailability of property insurance
10 coverage, remains the primary or exclusive source of new
11 property insurance in significant portions of the state.

12 5. That recent enactments intended to restore a competitive, private sector property insurance market, 13 14 including creation and enhancement of the Florida Hurricane 15 Catastrophe Fund, incentives for depopulation of the Residential Property and Casualty Joint Underwriting 16 17 Association, incentives for hurricane loss mitigation and prevention, creation of the Florida Commission on Hurricane 18 19 Loss Projection Methodology, and revisions of laws relating to rates and coverages, are beginning to have their intended 20 effects; however, the market remains unstable. 21

22 6. That the moratorium created by this section is the 23 least intrusive method for maintaining an orderly market for condominium association insurance, insofar as it applies only 24 to hurricane-related cancellations and nonrenewals of personal 25 lines residential policies that were in force on the effective 26 date of this section, and insofar as it allows an insurer 27 annually to nonrenew up to 5 percent of the total number of 28 29 such policies as of the effective date of this section. The Legislature finds, as of January 1, 1998, 30 (b) that: 31

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1. The conditions described in paragraph (a) remain 1 2 applicable to the commercial residential property insurance 3 market in this state in 1998 and are likely to remain applicable for several years thereafter. 4 5 The general instability of the market is reflected 2. 6 by the recent rapid growth of the Florida Windstorm 7 Underwriting Association, which had more than 9,500 commercial 8 residential policies in force as of December 31, 1997, 9 representing a 58 percent increase over the number of commercial residential policies in force on December 31, 1996. 10 3. An extension of the operation of this section until 11 12 June 1, 2001, will provide an opportunity for the market to stabilize and for continuation of residual market depopulation 13 14 efforts. (c) (b) The purposes of this section are to provide for 15 16 a temporary moratorium on hurricane-related cancellations and 17 nonrenewals of condominium association coverage and to require 18 advance planning and approval for programs of condominium 19 association exposure reduction. (2) MORATORIUM.--20 (a) As used in this subsection, the term "total number 21 of policies" means the number of an insurer's condominium 22 association policies providing windstorm or hurricane coverage 23 that were in force on the effective date of this section. The 24 following restrictions apply to the cancellation or nonrenewal 25 26 of condominium association residential property insurance policies that were in force on the effective date of this 27 28 section: 29 In any 12-month period, an insurer may not cancel 1. or nonrenew more than 5 percent of its total number of 30 condominium association policies in the state for the purpose 31 27 CODING: Words stricken are deletions; words underlined are additions.

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of reducing the insurer's exposure to hurricane claims and may 1 not, with respect to any county, cancel or nonrenew more than 2 3 10 percent of its total number of condominium association 4 policies in the county for the purpose of reducing the 5 insurer's exposure to hurricane claims. This subparagraph does not prohibit any cancellations or nonrenewals of such policies 6 7 for any other lawful reason unrelated to the risk of loss from 8 hurricane exposure.

9 2.a. If, for any 12-month period, an insurer proposes to cancel or nonrenew condominium association policies to an 10 extent not authorized by subparagraph 1. for the purpose of 11 12 reducing exposure to hurricane claims, the insurer must file a 13 phaseout plan with the department at least 90 days prior to 14 the effective date of the plan. In the plan, the insurer must 15 demonstrate to the department that the insurer is protecting 16 market stability and the interests of its policyholders. The 17 plan may not be implemented unless it is approved by the department. In developing the plan, the insurer must consider 18 19 policyholder longevity, the use of voluntary incentives to accomplish the reduction, and geographic distribution. The 20 insurer must demonstrate that under the plan the insurer will 21 22 not cancel or nonrenew more policies in the 12-month period 23 than the largest number of similar policies the insurer canceled or nonrenewed for any reason in any 12-month period 24 between August 24, 1989, and August 24, 1992. 25

b. If the insurer considers the number of
cancellations and nonrenewals under sub-subparagraph a. to be
insufficient, the insurer may apply for approval of additional
cancellations or nonrenewals on the basis of an unreasonable
risk of insolvency. In evaluating a request under this
sub-subparagraph, the department shall consider, and shall

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require the insurer to provide information relevant to: the 1 2 insurer's size, market concentration, and general financial 3 condition; the portion of the insurer's business in this state 4 represented by condominium association residential property 5 insurance; the reasonableness of assumptions with respect to size, frequency, severity, and path of hurricanes; and the 6 7 reinsurance available to the insurer and potential recoveries 8 from the Florida Hurricane Catastrophe Fund. In the 9 implementation of exposure reductions under this 10 sub-subparagraph, the department and the insurer shall consider such factors as policyholder longevity, the use of 11 12 voluntary incentives to accomplish the exposure reduction, and geographic distribution. 13 14 c. A policy shall not be counted as having been 15 canceled or nonrenewed for purposes of this subsection if any 16 of the following apply: 17 (I) The policy was canceled or nonrenewed for an underwriting reason unrelated to the risk of loss from 18 19 hurricane exposure, nonpayment of premium, or any other lawful reason that is unrelated to the risk of loss from hurricane 20 exposure. The department shall consider the reason specified 21 in the notice of cancellation or nonrenewal to be the reason 22 23 for the cancellation or nonrenewal unless the department finds by a preponderance of the evidence that the stated reason was 24 not the insurer's actual reason for the cancellation or 25 26 nonrenewal. 27 (II) The cancellation or nonrenewal was initiated by 28 the insured. 29 (III) The insurer has offered the policyholder 30 replacement or alternative coverage at approved rates. 31 29 CODING: Words stricken are deletions; words underlined are additions.

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(IV) The risk is transferred from one admitted insurer
 to another admitted insurer, unless the terms of the new or
 replacement policy place the policyholder in default of a
 mortgage obligation.

5 (V) The hurricane deductible applicable to the policy 6 is increased unless the new deductible exceeds statutory 7 limits or places the policyholder in default of a mortgage 8 obligation.

9 (VI) Any other lawful change in coverage that does not 10 place the policyholder in default of a mortgage obligation is 11 made.

12 d. In addition to any other cancellations or 13 nonrenewals subject to the limitations in this subsection, a 14 policy shall be considered as having been canceled or 15 nonrenewed for purposes of this subsection if:

16 (I) The insurer implements a rate increase under the 17 use-and-file provisions of s. 627.062(2)(a)2., which rate 18 increase exceeds 150 percent of the increase ultimately 19 approved by the department, and, while the rate filing was pending, the policyholder voluntarily canceled or nonrenewed 20 the policy and obtained replacement coverage from another 21 22 insurer, including the Residential Property and Casualty Joint 23 Underwriting Association; or

(II) The insurer reduces the commission to an agent by
more than 25 percent and the agent thereafter places the risk
with another insurer, including the Residential Property and
Casualty Joint Underwriting Association.

e. The department must approve or disapprove an
application for a waiver within 90 days after the department
receives the application for waiver.

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Notwithstanding any provisions of this section to 1 3. 2 the contrary, this section does not apply to any insurer that, 3 prior to August 24, 1992, filed notice of such insurer's 4 intent to discontinue writing insurance in this state under s. 5 624.430, and for which a finding has been made by the department, the Division of Administrative Hearings of the 6 7 Department of Management Services, or a court that such notice 8 satisfied all requirements of s. 624.430. This section also 9 does not apply to any insurer that: a. Collects at least 75 percent of its Florida 10 premiums from policies that include hurricane coverage 11 12 provided to condominium associations in coastal counties. b. Collects at least 80 percent of its Florida 13 14 premiums from policies that include hurricane coverage 15 provided to condominium associations in Broward, Dade, and 16 Palm Beach Counties. 17 c. Has, annually since 1992: 18 (I) Increased its aggregate Florida premium volume 19 from policies that include hurricane coverage provided to condominium associations in coastal counties. 20 21 (II) Increased its aggregate Florida premium volume 22 from policies that include hurricane coverage provided to 23 condominium associations in Broward, Dade, and Palm Beach 24 Counties. 25 (III) Increased its aggregate Florida exposure from 26 policies that include hurricane coverage provided to condominium associations in coastal counties. 27 (IV) Increased its aggregate Florida exposure from 28 29 policies that include hurricane coverage provided to condominium associations in Broward, Dade, and Palm Beach 30 31 Counties. 31

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d. Has surplus as to policyholders of no more than 1 2 \$200 million as reflected in its annual statement for 1995. In order to assure fair and effective enforcement 3 4. of this subsection, each insurer shall, no later than October 4 5 1, 1996, report to the department the policy number of each policy subject to this subsection, arranged by county. The 6 7 report shall include the policy number for each condominium 8 association policy that was in force on the effective date of 9 this section. Beginning October 1, 1996, each insurer shall also report, on a monthly basis, all cancellations and 10 nonrenewals of policies included in such policy list and the 11 reasons for the cancellations and nonrenewals. 12 5. An insurer that has an overconcentration of wind 13 14 risk in areas eligible for coverage under the Florida Windstorm Underwriting Association may submit to the 15 department for approval an accelerated exposure reduction 16 17 plan. The plan, if approved, shall allow the insurer to 18 nonrenew additional policies for reasons of reducing hurricane 19 loss, beyond the amounts authorized elsewhere in this paragraph, subject to the following conditions: 20 21 a. All additional nonrenewals under this subparagraph 22 shall consist of nonrenewals of only the windstorm portion of a policy, and shall be allowed only if the Florida Windstorm 23 Underwriting Association provides windstorm coverage to 24 replace the nonrenewed windstorm coverage. 25 26 b. At the conclusion of the accelerated exposure reduction plan, which shall be no later than 12 months after 27 28 the date of the first nonrenewal under such plan, the insurer 29 is prohibited from any further nonrenewals for purposes of reducing hurricane loss until the expiration of this 30 subsection. 31 32

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1	<del>c. The total number of nonrenewals statewide for</del>								
2	purposes of reduction of hurricane loss, under this								
3	subparagraph taken together with the other provisions of this								
4	paragraph, shall not exceed the total number of nonrenewals								
5	that would have been allowed statewide under subparagraph 1.								
6	between June 1, 1996, and the expiration of this subsection.								
7	d. Notwithstanding the provisions of s. 627.4133, the								
8	insurer must give the policyholder 45 days' advance notice of								
9	the nonrenewal of windstorm coverage under this subparagraph								
10	and the availability of such coverage through the Florida								
11									
12	-								
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14	earlier than February 1, 1997.								
15	f. In reviewing the proposed accelerated exposure								
16	reduction plan, the department shall consider:								
17	(I) The degree to which the exposure reduction plan is								
18	necessary to address the insurer's overconcentration.								
19	(II) Prior levels of participation in writing								
20	voluntary wind coverage in areas eligible for coverage through								
21	the Florida Windstorm Underwriting Association.								
22	(III) The availability of wind coverage in the								
23	voluntary market for the subject risks.								
24	(IV) The capacity of the Florida Windstorm								
25	Underwriting Association to absorb the risks proposed to be								
26	<del>covered by the association.</del>								
27	(b) The department may adopt rules to implement this								
28	subsection.								
29	(c) This section shall cease to operate at such time								
30	as the department determines that the insured value of all								
31	residential properties insured by the Florida Windstorm								
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Underwriting Association and all properties insured by the 1 Residential Property and Casualty Joint Underwriting 2 3 Association under policies providing wind coverage, combined, 4 has remained below \$25 billion for 3 consecutive months, based 5 on exposure data reported to the department by the 6 associations. 7 (d) (d) (c) This subsection is repealed on June 1, 2001 8 <del>1999</del>. 9 Section 7. Subsection (7) of section 627.7295, Florida 10 Statutes, is amended to read: 627.7295 Motor vehicle insurance contracts.--11 12 (7) A policy of private passenger motor vehicle insurance or a binder for such a policy may be initially 13 14 issued in this state only if the insurer or agent has 15 collected from the insured an amount equal to 2 months' premium. An insurer, agent, or premium finance company may 16 17 not directly or indirectly take any action resulting in the insured having paid from the insured's own funds an amount 18 19 less than the 2 months' premium required by this subsection. This subsection applies without regard to whether the premium 20 is financed by a premium finance company or is paid pursuant 21 22 to a periodic payment plan of an insurer or an insurance 23 agent. This subsection does not apply if an insured or member of the insured's family is renewing or replacing a policy or a 24 binder for such policy written by the same insurer or a member 25 26 of the same insurer group. This subsection does not apply to 27 an insurer that issues private passenger motor vehicle coverage primarily to active duty or former military personnel 28 29 or their dependents. This subsection does not apply if the policy is paid pursuant to a payroll deduction plan or an 30 automatic electronic funds transfer payment plan. This 31

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ENROLLED 1998 Legislature CS for SB 1108, 1st Engrossed subsection and subsection (4) do not apply if an insured has 1 had a policy in effect for at least 6 months, the insured's 2 agent is terminated by the insurer that issued the policy, and 3 4 the insured obtains coverage on the policy's renewal date with 5 a new company through the terminated agent. Section 8. Paragraph (e) of subsection (2) of section б 7 627.351, Florida Statutes, is amended to read: 627.351 Insurance risk apportionment plans.--8 9 (2) WINDSTORM INSURANCE RISK APPORTIONMENT. --(e) Notwithstanding the provisions of subparagraph 10 (c)2. or paragraph (d), eligibility shall not be extended to 11 12 any area that was not eligible on March 1, 1997, except that 13 the department may act with respect to any petition on which a 14 hearing was held prior to May 9, 1997 the effective date of 15 this act. This paragraph is repealed on October 1, 1998. 16 Section 9. Section 626.9543, Florida Statutes, is 17 created to read: 18 626.9543 Holocaust victims.--19 (1) SHORT TITLE.--This section may be cited as the "Holocaust Victims Insurance Act." 20 (2) INTENT; PURPOSE. -- It is the Legislature's intent

21 that the potential and actual insurance claims of Holocaust 22 23 victims and their heirs and beneficiaries be expeditiously identified and properly paid and that Holocaust victims and 24 their families receive appropriate assistance in the filing 25 26 and payment of their rightful claims. 27 (3) DEFINITIONS.--For the purpose of this section: "Department" means the Department of Insurance. (a) 28 29 "Holocaust victim" means any person who lost his (b) or her life or property as a result of discriminatory laws, 30 31 policies, or actions targeted against discrete groups of

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persons between 1920 and 1945, inclusive, in Nazi Germany, 1 2 areas occupied by Nazi German, or countries allied with Nazi 3 Germany. (C) 4 "Insurance policy" means, but is not limited to, life insurance, property insurance, or education policies. 5 6 "Legal relationship" means any parent, subsidiary, (d) 7 or affiliated company with an insurer doing business in this 8 state. 9 (e) "Proceeds" means the face or other payout value of 10 policies and annuities plus reasonable interest to date of payments without diminution for wartime or immediate postwar 11 12 currency devaluation. 13 (4) ASSISTANCE TO HOLOCAUST VICTIMS.--The department 14 shall establish a toll-free telephone number, available in 15 appropriate languages, to assist any person seeking to recover proceeds from an insurance policy issued to a Holocaust 16 17 victim. 18 (5) PROOF OF A CLAIM. -- Any insurer doing business in 19 this state, in receipt of a claim from a Holocaust victim or 20 from a beneficiary, descendent or heir of a Holocaust victim, 21 shall: 22 (a) Diligently and expeditiously investigate all such 23 claims. 24 (b) Allow such claimants to meet a reasonable, not 25 unduly restrictive, standard of proof to substantiate a claim, pursuant to standards established by the department. 26 27 (c) Permit claims irrespective of any statute of limitations or notice requirements imposed by any insurance 28 29 policy issued, provided the claim is submitted within 10 years 30 after effective date of this section. 31 36

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(6) STATUTE OF LIMITATIONS. -- Notwithstanding any law 1 2 or agreement among the parties to an insurance policy to the 3 contrary, any action brought by Holocaust victims or by a 4 beneficiary, heir, or descendent of a Holocaust victim seeking proceeds of an insurance policy issued or in effect between 5 6 1920 and 1945, inclusive, shall not be dismissed for failure 7 to comply with the applicable statute of limitations or laches 8 provided the action is commenced within 10 years after the 9 effective date of this section. (7) REPORTS FROM INSURERS.--Any insurer doing business 10 in this state shall have an affirmative duty to ascertain to 11 12 the extent possible and report to the department within 90 13 days after the effective date of this section and annually thereafter all efforts made and results of such efforts to 14 15 ascertain: (a) Any legal relationship with an international 16 17 insurer that issued an insurance policy to a Holocaust victim between 1920 and 1945, inclusive. 18 19 (b) The number and total value of such policies. 20 (c) Any claim filed by a Holocaust victim, his or her 21 beneficiary, heir, or descendent that has been paid, denied 22 payment, or is pending. 23 (d) Attempts made by the insurer to locate the beneficiaries of any such policies for which no claim of 24 benefits has been made. 25 26 (e) An explanation of any denial or pending payment of 27 a claim to a Holocaust victim, his or her beneficiary, heir, 28 or descendent. 29 (8) REPORTS TO THE LEGISLATURE. -- The department shall report to the Legislature one year after the effective date of 30 this section and annually thereafter: 31 37

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The number of insurers doing business in this 1 (a) 2 state which have a legal relationship with an international 3 insurer that could have issued a policy to a Holocaust victim 4 between 1920 and 1945, inclusive. 5 (b) A list of all claims paid, denied, or pending to a 6 Holocaust victim, his or her beneficiary, heir, or descendent. 7 (c) A summary of the length of time for the processing 8 and disposition of a claim by the insurer. 9 (9) PENALTIES.--In addition to any other penalty provided under this chapter, any insurer or person who 10 violates the provisions of this section is subject to an 11 12 administrative penalty of \$1,000 per day for each day such 13 violation continues. 14 (10) PRIVATE RIGHT OF ACTION. -- An action to recover 15 damages caused by a violation of this section must be commenced within 5 years after the cause of action has 16 17 accrued. Any person who shall sustain damages by the reason of a violation of this section shall recover threefold the 18 19 actual damages sustained thereby, as well as costs not 20 exceeding \$50,000, and reasonable attorneys' fees. At or before the commencement of any civil action by a party, notice 21 thereof shall be served upon the department. 22 23 (11) RULES.--The department, by rule, shall provide for the implementation of the provisions of this section by 24 establishing procedures and related forms for facilitating, 25 26 monitoring, and verifying compliance with this section and for the establishment for a restitution program for Holocaust 27 victims, survivors, and their heirs and beneficiaries. 28 29 (12) SEVERABILITY.--If any provision of this section or the application thereof to any person or circumstance is 30 held invalid, the invalidity shall not affect other provisions 31 38

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1	or applica	ations o	f the	e secti	on wh	ich ca	an be given	effe	ect		
2	or applications of the section which can be given effect without the invalid provision or application, and to this end										
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