2-428-00

A bill to be entitled 1 2 An act relating to insurance; amending s. 3 284.33, F.S.; authorizing the Department of 4 Insurance to directly purchase annuities 5 through a structured settlement insurance 6 services consultant; providing procedures and 7 requirements; amending s. 625.121, F.S.; deleting a reference to deficiency reserves for 8 9 certain term life insurance policies; amending 10 s. 626.99, F.S.; revising a reference to a more current edition of a cited buyer's guide; 11 12 creating s. 627.4785, F.S.; authorizing the Department of Insurance to adopt a certain 13 valuation of life insurance policies model 14 regulation; amending s. 627.6487, F.S.; 15 clarifying that creditable coverage must have 16 17 been in effect in this state; providing an effective date. 18 19 20 Be It Enacted by the Legislature of the State of Florida: 21 22 Section 1. Subsection (1) of section 284.33, Florida 23 Statutes, is amended to read: 24 284.33 Purchase of insurance, reinsurance, and 25 services.--(1) The Department of Insurance is authorized to 26 27 provide insurance, specific excess insurance, and aggregate 28 excess insurance through the Department of Management Services, pursuant to the provisions of part I of chapter 287, 29 30 as necessary to provide insurance coverages authorized by this

31 part, consistent with market availability. However, the

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Department of Insurance may directly purchase annuities by
   using a structured settlement insurance consulting firm
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    selected by the department to assist in the settlement of
    claims being handled by the Division of Risk Management. The
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    selection of the structured settlement insurance services
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    consultant shall be made by using competitive sealed
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    proposals. The consulting firm shall act as an agent of record
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    for the department in procuring the best annuity products
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    available to facilitate structured settlement of claims,
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    considering price, insurer financial strength, and the best
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    interests of the state risk management program. Purchase of
    annuities by the department using a structured settlement
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    method is excepted from competitive sealed bidding or proposal
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    requirements. The Department of Insurance is further
    authorized to purchase such risk management services,
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    including, but not limited to, risk and claims control; safety
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   management; and legal, investigative, and adjustment services,
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    as may be required and pay claims. The department may contract
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   with a service organization for such services and advance
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   money to such service organization for deposit in a special
    checking account for paying claims made against the state
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    under the provisions of this part. The special checking
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    account shall be maintained in this state in a bank or savings
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    association organized under the laws of this state or of the
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    United States. The department may replenish such account as
    often as necessary upon the presentation by the service
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    organization of documentation for payments of claims equal to
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    the amount of the requested reimbursement.
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           Section 2. Subsection (11) of section 625.121, Florida
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    Statutes, is amended to read:
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           625.121 Standard Valuation Law; life insurance. --
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(11) DEFICIENCY RESERVE. -- If in any contract year the gross premium charged by any life insurer on any policy or contract is less than the valuation net premium for the policy or contract calculated by the method used in calculating the reserve thereon but using the minimum valuation standards of mortality and rate of interest, there shall be maintained on such policy or contract a deficiency reserve in addition to the reserve defined by subsections (7) and (12). such policy or contract, the deficiency reserve shall be the present value, according to the minimum valuation standards of mortality and rate of interest, of the differences between all such valuation net premiums and the corresponding premiums charged for such policy or contract during the remainder of the premium-paying period. As regards renewable term life insurance, the policy reserve and foregoing deficiency reserve shall be calculated using the current term period only. For any category of policies, contracts, or benefits specified in subsections (5) and (6), issued on or after the operative date of s. 627.476 (the Standard Nonforfeiture Law for Life Insurance), the aggregate deficiency reserves may be reduced by the amount, if any, by which the aggregate reserves actually calculated in accordance with subsection (9) exceed the minimum aggregate reserves prescribed by subsection (8). The minimum valuation standards of mortality and rate of interest referred to in this subsection are those standards stated in subsections (5) and (6). However, for any life insurance policy which is issued on or after January 1, 1985, for which the gross premium in the first policy year exceeds that of the second year and for which no comparable additional benefit is provided in the first year for such excess, and which provides an endowment benefit, a cash surrender value,

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or a combination thereof in an amount greater than such excess premium, the foregoing provisions of this subsection shall be applied as if the method actually used in calculating the reserve for such policy were the method described in subsection (7), the provisions of subparagraph (7)(a)2. being ignored. The amount of the deficiency reserve, if any, at each policy anniversary of such a policy shall be the excess, if any, of the amount determined by the foregoing provisions of this subsection plus the reserve calculated by the method described in subsection (7), the provisions of subparagraph (7)(a)2. being ignored, over the reserve actually calculated by the method described in subsection (7), the provisions of subparagraph (7)(a)2. being taken into account.

Section 3. Subsection (6) of section 626.99, Florida Statutes, is amended to read:

626.99 Life insurance solicitation.--

(6) ADOPTION OF BUYER'S GUIDE; REQUIREMENTS.--Any insurer soliciting life insurance in this state on or after October 1, 1980, shall adopt and use a buyer's guide, and the adoption and use by an insurer of the buyer's guide adopted October 1, 1996, May 4, 1976, by the National Association of Insurance Commissioners in the NAIC Life Insurance Solicitation Model Regulation shall be in compliance with the requirements of this section.

Section 4. Section 627.4785, Florida Statutes, is created to read:

627.4785 Valuation of life insurance policies.--The department may adopt by rule the valuation of life insurance policies model regulation as approved by the National Association of Insurance Commissioners in March 1999,

 including tables of select mortality factors, and may make the regulation effective January 1, 2000.

Section 5. Subsection (3) of section 627.6487, Florida Statutes, is amended to read:

- 627.6487 Guaranteed availability of individual health insurance coverage to eligible individuals.--
- (3) For the purposes of this section, the term "eligible individual" means an individual:
- (a)1. For whom, as of the date on which the individual seeks coverage under this section, the aggregate of the periods of creditable coverage, as defined in s. 627.6561(5) and (6), is 18 or more months; and
- 2.a. Whose most recent prior creditable coverage was provided in this state under a group health plan, governmental plan, or church plan in effect in this state, or health insurance coverage issued in this state and offered in connection with any such plan; or
- b. Whose most recent prior creditable coverage was under an individual plan issued <u>in this state</u> by a health insurer or health maintenance organization, which coverage is terminated due to the insurer or health maintenance organization becoming insolvent or discontinuing the offering of all individual coverage in the State <u>of Florida</u>, or due to the insured no longer living in the service area <u>in the State of Florida</u> of the insurer or health maintenance organization that provides coverage through a network plan <u>in the State of Florida</u>;
  - (b) Who is not eliqible for coverage under:
- 1. A group health plan, as defined in s. 2791 of the Public Health Service Act;

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- A conversion policy or contract issued by an authorized insurer or health maintenance organization under s. 627.6675 or s. 641.3921, respectively, offered to an individual who is no longer eligible for coverage under either an insured or self-insured employer plan; 3. Part A or part B of Title XVIII of the Social Security Act; or 4. A state plan under Title XIX of such act, or any successor program, and does not have other health insurance coverage; (c) With respect to whom the most recent coverage within the coverage period described in paragraph (a) was not terminated based on a factor described in s. 627.6571(2)(a) or (b), relating to nonpayment of premiums or fraud, unless such nonpayment of premiums or fraud was due to acts of an employer or person other than the individual;
  - (d) Who, having been offered the option of continuation coverage under a COBRA continuation provision or under s. 627.6692, elected such coverage; and
  - (e) Who, if the individual elected such continuation provision, has exhausted such continuation coverage under such provision or program.
  - Section 6. This act shall take effect upon becoming a law.

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SENATE SUMMARY Authorizes the Department of Insurance to purchase annuities directly by using a structured settlement insurance consulting firm to assist in the settlement of claims handled by the Division of Risk Management. Provides procedures and requirements. Deletes a requirement that, for renewable term life insurance, the policy reserve and deficiency reserve must be calculated by using the current term period only. Updates the buyer's guide edition adopted by the National Association of Insurance Commissioners in the Life Insurance Solicitation Model Regulation. Authorizes the department to adopt the valuation of life insurance policies model regulation approved by the National Association of Insurance Commissioners in March 1999, and to make it effective January 1, 2000. Clarifies that for purposes of guaranteed availability of individual health insurance coverage to eligible individuals, the term "eligible individual" means an individual whose most recent prior creditable coverage was provided and in effect in this state. claims handled by the Division of Risk Management. state.