A bill to be entitled 1 2 An act relating to insurer rehabilitation and 3 liquidation; amending s. 626.9541, F.S.; 4 correcting a cross reference; amending s. 5 631.001, F.S.; providing construction and purposes; providing a short title; amending s. 6 7 631.011, F.S.; providing additional definitions; creating s. 631.025, F.S.; 8 specifying application to certain persons and 9 entities; amending s. 631.041, F.S.; limiting 10 11 application of certain time restrictions; 12 correcting a cross reference; creating s. 13 631.113, F.S.; providing for tolling certain 14 time limitations in certain actions; amending 15 s. 631.141, F.S.; vesting the Department of 16 Insurance with certain rights as receiver; amending s. 631.154, F.S.; including certain 17 costs and expenses of the department in costs 18 19 and expenses entitled to be recovered by the receiver under certain circumstances; creating 20 s. 631.156, F.S.; providing for investigations 21 2.2 by the department preliminary or incidental to 23 receivership proceedings; providing department 24 powers; authorizing the department to provide certain information in such investigations; 25 26 granting the department certain discretionary 27 powers; creating s. 631.157, F.S.; imposing 28 liability on certain persons or entities for 29 certain actions; specifying amounts of damages; 30 providing construction; providing costs and expenses entitled to be recovered by the 31

1 receiver under certain circumstances; providing 2 a time certain for bringing certain actions; 3 amending s. 631.193, F.S.; providing an additional limitation upon the operation of a 4 5 release; creating s. 631.3995, F.S.; providing procedures and requirements for closing an 6 7 estate; providing for deposit of certain assets 8 into the Closed Estate Fund Trust Account; 9 providing for uses of such account; providing 10 for reopening certain proceedings; amending s. 11 631.54, F.S.; revising a definition; amending s. 631.57, F.S.; specifying additional criteria 12 13 for absence of certain obligations or liabilities of the Florida Insurance Guaranty 14 Association; amending s. 631.60, F.S.; limiting 15 16 certain causes of action against the association; specifying absence of creation of 17 18 additional rights against the association; creating s. 817.2341, F.S.; providing criminal 19 20 penalties for certain activities; providing an effective date. 21

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Be It Enacted by the Legislature of the State of Florida:

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Section 1. Paragraph (w) of subsection (1) of section 626.9541, Florida Statutes, is amended to read:

626.9541 Unfair methods of competition and unfair or 28 deceptive acts or practices defined .--

(1) UNFAIR METHODS OF COMPETITION AND UNFAIR OR DECEPTIVE ACTS. -- The following are defined as unfair methods 31 of competition and unfair or deceptive acts or practices:

- (w) Soliciting or accepting new or renewal insurance risks by insolvent or impaired insurer prohibited; penalty.--
- 1. Whether or not delinquency proceedings as to the insurer have been or are to be initiated, but while such insolvency or impairment exists, no director or officer of an insurer, except with the written permission of the Department of Insurance, shall authorize or permit the insurer to solicit or accept new or renewal insurance risks in this state after such director or officer knew, or reasonably should have known, that the insurer was insolvent or impaired. "Impaired" includes impairment for capital or surplus, as defined in s. 631.011(12)(9) and (13)(10).
- 2. Any such director or officer, upon conviction of a violation of this paragraph, is guilty of a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.
- Section 2. Section 631.001, Florida Statutes, is amended to read:

(Substantial rewording of section.

See s. 631.001, F.S., for present text.)

631.001 Construction; purposes.--

- (1) The underlying purposes and policies of the provisions of this part, which are integral elements of the regulation of the business of insurance and are of vital public interest and concern, are to:
- (a) Protect the interests of insureds, claimants, creditors, and the public.
- (b) Provide a comprehensive scheme for the receivership of insurers.
- (c) Establish this state as a reciprocal state in those states which, in substance and effect, enact the

National Association of Insurance Commissioners Rehabilitation and Liquidation Model Act or the Uniform Insurers Liquidation Act.

- (d) Make more efficient the administration of insurer receiverships on an interstate and international basis.
- (e) Provide prompt corrective measures for any potentially dangerous condition in an insurer.
- (f) Implement improved methods for rehabilitating insurers, which methods involve the cooperation and management expertise of the insurance industry.
- (g) Enhance the efficiency and economy of liquidation through clarification and specification of the law to minimize legal uncertainty and litigation.
- (h) Lessen the problems of interstate rehabilitation and liquidation of an entity subject to the provisions of this part by facilitating cooperation between states in the liquidation process and by extension of the scope of personal jurisdiction over debtors of the insurer outside this state.
- (i) Establish a system which equitably apportions any unavoidable loss.
- (j) Maximize recovery of assets for the benefit of the insurer and its policyholders, creditors, and estate.
- (2) This part shall be liberally construed to effect the purposes stated in subsection (1) and shall specifically authorize the department in its capacity as administrator, conservator, rehabilitator, receiver, liquidator, or similar capacity to pursue any actions for damages or other recoveries on behalf of the insurer and its policyholders, creditors, and estate.
- 30 (3) This part may be cited as the "Insurers Rehabilitation and Liquidation Act."

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Section 3. Section 631.011, Florida Statutes, is amended to read:

631.011 Definitions.--For the purpose of this part, the term:

- "Affiliate" means any entity which exercises control over or is controlled by the insurer, directly or indirectly through:
 - (a) Equity ownership of voting securities;
 - (b) Common managerial control; or
- (c) Collusive participation by the management of the insurer and affiliate in the management of the insurer or the affiliate.
- (2) "Ancillary state" means, any state other than a domiciliary state.
- "Assets," as used in this $\underline{\text{section}}$ $\underline{\text{subsections}}$ 16 $\frac{(8)-(10)}{(10)}$, means only allowed assets as defined in chapter 625.
 - "Bona fide holder for value" means a holder who, while not possessing information that would lead a reasonable person in the holder's position to believe that the insurer is financially impaired, and while unaware of the imminence or pendency of any receivership proceeding against the insurer, has, in the exercise of reasonable business judgment, exchanged his or her own funds, assets, or property for funds, assets, or property of the insurer having an equivalent market value.
 - (5) "Court" refers to the circuit court in which the receivership proceeding is pending.
- (6)(5) "Delinquency proceeding" means any proceeding commenced against an insurer pursuant to this chapter for the purpose of liquidating, rehabilitating, reorganizing, or 31 conserving such insurer.

(7)(6) "Domiciliary state" means the state in which an insurer is incorporated or organized or, in the case of an insurer incorporated or organized in a foreign country, the state in which such insurer, having become authorized to do business in such state, has, at the commencement of a delinquency proceeding, the largest amount of its assets held in trust and assets held on deposit for the benefit of its policyholders or policyholders and creditors in the United States; and any such insurer is deemed to be domiciled in such state.

(8) "Fair consideration" means that consideration which is given for property or assets of an insurer when, in exchange for the property or assets and in good faith, property is conveyed, services are rendered, or an enforceable obligation not invalidated by the receivership proceedings is created, having a value to the insurer of not less than the value of the property or assets given in exchange.

(9)(7) "Foreign country" means territory not in any state.

(10)(8) "General assets" means all property, real, personal, or otherwise, not specifically mortgaged, pledged, deposited, or otherwise encumbered for the security or benefit of specified persons or a limited class or classes of persons, and as to such specifically encumbered property the term includes all such property or its proceeds in excess of the amount necessary to discharge the sum or sums secured thereby. Assets held in trust and assets held on deposit for the security or benefit of all policyholders or all policyholders and creditors in the United States shall be deemed general assets.

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(11) "Good faith," as applied to a transferee or transferor under this part, means honesty in fact and intention and includes the exercise of reasonable business judgment, together with the absence of information that would lead a reasonable person in the same position to know that the insurer is financially impaired or insolvent and together with the absence of knowledge regarding the imminence or pendency of any receivership proceeding against the insurer.

(12) (9) "Impairment of capital" means that the minimum surplus required to be maintained in s. 624.408 has been dissipated and the insurer is not possessed of assets at least equal to all its liabilities together with its total issued and outstanding capital stock, if a stock insurer, or the minimum surplus or net trust fund required by s. 624.407, if a mutual, reciprocal, or business trust insurer.

(13)(10) "Impairment of surplus" means that the surplus of a stock insurer, the additional surplus of a mutual or reciprocal insurer, or the additional net trust fund of a business trust insurer does not comply with the requirements of s. 624.408.

 $(14)\frac{(11)}{(11)}$ "Insolvency" means that all the assets of the insurer, if made immediately available, would not be sufficient to discharge all its liabilities or that the insurer is unable to pay its debts as they become due in the usual course of business. When the context of any provision of this code so indicates, insolvency also includes and is defined as "impairment of surplus," as defined in subsection (13) (9), and "impairment of capital," as defined in subsection $(12) \frac{(8)}{(8)}$.

(15)(12) "Insurer," in addition to persons so defined 31 under s. 624.03, also includes persons purporting to be

insurers or organizing, or holding themselves out as

organizing, in this state for the purpose of becoming insurers and all insurers who have insureds resident in this state. (16)(13) "Liabilities," as used in subsections(12) and $(14)\frac{(8)-(10)}{}$, means all liabilities, including those specifically required in s. 625.041. (17)(14) "Person" includes natural persons, corporations, partnerships, trusts, estates, and sole proprietorships. (18) "Property," with respect to an insolvent entity, includes all right, title, and interest of the insolvent entity whether legal or equitable, tangible or intangible, or choate or inchoate and includes choses in action, contract rights, and any other interest recognized under the laws of this state. When an order of conservation, rehabilitation, or liquidation is entered, the term also includes entitlements that existed prior to the entry of the order and those that may arise by operation of the provisions of this chapter or other provisions of law allowing the department to avoid prior transfers or assert other rights in its capacity as receiver. The term also includes all records and data, however stored, including, but not limited to, claims and claim files,

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privileged or confidential documents of an insolvent insurer

application files, litigation files, premium records, rate

administrator, management company, accountant, attorney,

affiliate, or other person. The term does not include

control of a managing general agent, third-party

generated by a third party.

books, underwriting manuals, personnel records, or financial

records, or similar records within the possession, custody, or

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(19)(15) "Receiver" means a receiver, liquidator, rehabilitator, or conservator, as the context may require.

(20)(16) "Reciprocal state" means any state other than this state in which in substance and effect the provisions of the Insurers Rehabilitation and Liquidation Act are in force, including the provisions requiring that the commissioner of insurance or equivalent insurance supervisory official be the receiver of a delinquent insurer.

(21) (17) "Secured claim" means any claim secured by mortgage, trust deed, pledge, deposit as security, escrow, or otherwise but does not include a special deposit claim, a claim against general assets, or a claim based on mere possession. The term also includes a claim which more than 4 months before the commencement of a delinquency proceeding in the state of the insurer's domicile has become a lien upon specific assets by reason of judicial process.

(22)(18) "Special deposit claim" means any claim secured by a deposit made pursuant to statute for the security or benefit of a limited class or classes of persons, but not including any general assets.

(23)(19) "State" is as defined in s. 624.08. Section 4. Section 631.025, Florida Statutes, is created to read:

631.025 Persons and entities subject to this part. -- The receivership proceedings authorized by this part may be initiated against, and the receivership court may exercise jurisdiction over, any person who is an insurer and against any person whose inclusion is necessary for the purposes of this part whether or not said person would otherwise be an insurer, including, but not limited to, the 31 | following:

- (1) A person who is transacting, or has transacted, insurance business in or from this state, and against whom claims arising from that business may exist now or in the future.
- (2) A person who purports to transact an insurance business in this state, and any person or entity who acts as an insurer, transacts insurance, or otherwise engages in insurance activities in or from this state, with or without a certificate of authority or proper authority from the department.
- $\underline{\mbox{(3)}}$ An insurer who has insureds resident in this state.
- (4) All other persons organized or in the process of organizing with the intent to transact an insurance business in this state.
- (5) Current and former agents and brokers of the insurer; policyholders, excess insurers, and reinsurers of the insurer; current and former officers, directors, managers, trustees, organizers, promoters, and persons in control of the insurer; any third-party administrator; and any person who maintains information for an insurer.
- (6) Any corporation that directly or indirectly owns

 10 percent or more of the stock of a Florida domestic insurer.
- (7) Any other person or entity that is made subject to the provisions of this part.

Section 5. Paragraph (d) of subsection (1) of section 631.041, Florida Statutes, is amended, and subsection (6) is added to said section, to read:

631.041 Automatic stay; relief from stay; injunctions.--

- (1) An application or petition under s. 631.031 operates as a matter of law as an automatic stay applicable to all persons and entities, other than the receiver, which shall be permanent and survive the entry of an order of conservation, rehabilitation, or liquidation, and which shall prohibit:
- (d) Any act to create, perfect, or enforce a lien against property of the insurer, except that a secured claim as defined in s. 631.011(21)(17)may proceed under s. 631.191 after the order of liquidation is entered;
- (6) No statute of limitations or defense of laches shall run with respect to any action by or against an insurer between the filing of a petition for conservation, rehabilitation, or liquidation against an insurer and the order granting or denying that petition. If the petition is denied, any action against the insurer that might have been commenced when the petition was filed may be commenced for at least 60 days after the order denying such relief.

Section 6. Section 631.113, Florida Statutes, is created to read:

631.113 Extension of time.--

(1) The running of any unexpired statute of limitations as to any claims brought by the administrator, conservator, rehabilitator, receiver, or liquidator, or an official or agency exercising powers pursuant to this chapter seeking damages or other recoveries on behalf of an insurer, its policyholders, its creditors, or its estate, shall be tolled for a period of 4 years from the entry of an order placing the administrator, conservator, rehabilitator, receiver, liquidator, or similar official or agency over the insurer, provided, if the delinquency proceedings brought

pursuant to this chapter against the insurer terminate in less than 4 years, such tolling shall cease at the time when the proceedings are finally concluded, including all appeals therefrom. Further, the right of action does not accrue and the limitations period for any such action does not run during the time when the insurer is controlled by parties acting contrary to the company's interests or when the facts giving rise to such claim are fraudulently concealed from regulatory authorities or from any members of company management. The provisions of chapter 95 shall be construed so as to be consistent with the provisions of this section. The receiver may institute any action or proceeding on behalf of the estate of the insurer while any statute of limitation is tolled pursuant to this section. The tolling shall be in addition to any other applicable tolling provision.

(2) For actions not covered by subsection (1), if any unexpired time period is fixed, by any agreement or in any proceeding, for doing any act for the benefit of the estate, the receiver shall have 180 days, or such longer period as the receivership court may allow for good cause shown, from the entry of the order of rehabilitation or liquidation to perform the act.

Section 7. Subsections (6) through (9) of section 631.141, Florida Statutes, are renumbered as subsections (7) through (10), respectively, and a new subsection (6) is added to said section to read:

631.141 Conduct of delinquency proceeding; domestic and alien insurers.--

(6) The department as receiver is vested with and may assert all rights belonging to policyholders, creditors, and the estate as well as all rights of the entity or entities in

receivership, except to the extent that an individual claim is personal and unique to that claimant and recovery thereon could not inure to the benefit of the estate or to other claimants.

Section 8. Paragraph (d) of subsection (6) of section 631.154, Florida Statutes, is amended to read:

631.154 Funds or other property in the possession of third person.--

- (6) Should the receiver be successful in establishing its claim or any part thereof, the receiver shall be entitled to recover judgment for the following:
- (d) All costs, investigative and other expenses, which include the department's in-house staff and staff attorney's expenses, costs, and salaries, expended in necessary to the recovery of the property or funds, and reasonable attorney's fees.

Section 9. Section 631.156, Florida Statutes, is created to read:

631.156 Investigation by the department.--

(1) Preliminary or incidental to a petition for receivership proceedings, the department may, and if appointed receiver shall, undertake a full investigation to determine the causes and reasons for the insolvency, the discovery and location of assets to be recovered, the recovery of such assets, whether the filing of false statements with the department contributed to the insolvency, and, in conjunction with the department's Division of Insurance Fraud or any other appropriate agency of state or federal government, whether any law of this state, any other state, or the Federal Government relating to the solvency of the insurer has been violated. In the furtherance of such investigation, the department may:

- (a) Examine and review any and all documents that are reasonably calculated to disclose or lead to the disclosure of the causes and reasons for the insolvency, the discovery and location of assets to be recovered, the recovery of such assets, the truth or falsity of statements filed with the department, and whether any law of this state, any other state, or the Federal Government has been violated.
- (b) Take statements or depositions under oath of any person whose testimony is reasonably calculated to disclose or lead to the disclosure of the causes and reasons for the insolvency, the discovery of and location of assets to be recovered, the recovery of such assets, the truth or falsity of statements filed with the department, and whether any law of this state, any other state, or the Federal Government has been violated.
- (c) Request the court having jurisdiction over the receivership proceedings to issue any necessary subpoenas.
- (d) Examine and review the books, records, and documents of any affiliate, controlling person, officer, director, manager, trustee, agent, adjuster, employee, or independent contractor of any insurer or affiliate and any other person who possesses any executive authority over, or who exercises or has exercised any control over, any segment of the affairs of the insurer or affiliate, to the extent such examination is reasonably calculated to disclose or lead to the disclosure of the causes and reasons for the insolvency, the discovery and location of assets to be recovered, the recovery of such assets, the truth or falsity of statements filed with the department, and whether any law of this state, any other state, or the Federal Government has been violated.

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- In its capacity as receiver, the department may provide documents, books and records, other investigative products, work product, and analysis, including copies of any or all of the foregoing items, to the Division of Insurance Fraud or any other appropriate agency of state or federal government. The sharing of information, investigative products, or analysis shall not waive any work product or other privilege that would otherwise apply under common law, chapter 119, or any other law.
- (3) The department, as the court's receiver, is granted the discretion to determine what books, records, documents, or testimony would be reasonably calculated to 13 disclose or lead to the disclosure of the causes and reasons for the insolvency, the discovery and location of assets to be recovered, the recovery of the assets, the truth or falsity of statements filed with the department, and whether any law of this state or of the United States has been violated, subject to the court's power to review such determination or appoint a general master to review such determination. A party asserting that any documents requested by the department under this section are not subject to review, or that any particular testimony may not be obtained, shall present such contention by written motion to the receivership court within 10 days after receipt of the request and shall be fully responsible 24 for the loss of any evidence which occurs after the department first informs said party of its request therefor. The court shall, as expeditiously as possible, determine whether the department has abused its discretion in seeking such evidence or testimony, with the objecting party having the burden of proof. A party who fails to produce the requested evidence or testimony without filing a proper timely objection, or who

having unsuccessfully asserted such objection fails thereafter to furnish the evidence or testimony, within the time provided by the court or the department, shall be subject to the contempt powers of the court, in addition to any other applicable penalties which may be provided in the Florida Insurance Code or other law.

Section 10. Section 631.157, Florida Statutes, is created to read:

631.157 Civil action by the receiver.--

- (1) Any person who is engaged in the business of insurance or who acts as or is an officer, director, agent, or employee of any person engaged in the business of insurance, or is involved, other than as an insured or beneficiary under a policy of insurance, in a transaction relating to the conduct of affairs of such a business, and who willfully embezzles, abstracts, purloins, converts, or misappropriates any asset or property, including, but not limited to, moneys, funds, premiums, credits, or other property of an insurer, shall be liable to the department as receiver for the use and benefit of an insolvent insurer's estate, creditors, and policyholders, as follows:
- (a) If such embezzlement, abstraction, purloining, conversion, or misappropriation did not jeopardize the safety and soundness of an insurer and was not a significant cause of such insurer's being placed in conservation, rehabilitation, or liquidation, such person shall be liable only for the full amount of any asset embezzled, abstracted, purloined, or misappropriated, plus prejudgment interest provided by law.
- (b) If such embezzlement, abstraction, purloining, conversion, or misappropriation jeopardized the safety and soundness of an insurer or was a significant cause of such

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insurer's being placed in conservation, rehabilitation, or liquidation, such person shall be liable for triple the full amount of any asset embezzled, abstracted, purloined, converted, or misappropriated, plus prejudgment interest provided by law on the original amount.

- (2) Any person who is engaged in the business of insurance or who acts as or is an officer, director, agent, or employee of any person engaged in the business of insurance, or is involved, other than as an insured or beneficiary under a policy of insurance, in a transaction relating to the conduct of affairs of such a business, and who, while having actual knowledge or such constructive knowledge as should have been obtained through reasonable inquiry by a person in such position, knew of the falsity thereof, misreports, or makes any false entry of material fact in any book, report, or statement of an insurer with intent to deceive such insurer, including any officer, employee, or agent of such insurer, the department, or any agent or examiner appointed by the department to examine the affairs of such person or of the insurer, concerning the financial condition or solvency of such business, shall be liable to the department as receiver for the use and benefit of an insolvent insurer's estate, creditors, and policyholders, as follows:
- (a) If such misreporting did not jeopardize the safety and soundness of an insurer and was not a significant cause of such insurer's being placed in conservation, rehabilitation, or liquidation, such person shall be liable only for the full amount of any asset misreported.
- (b) If such misreporting jeopardized the safety and soundness of an insurer or was a significant cause of such insurer's being placed in conservation, rehabilitation, or

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liquidation, such person shall be liable for triple the full amount of any asset misreported.

- (3) If the asset or property which has been misreported, embezzled, abstracted, purloined, converted, or misappropriated was reported to the department as being available to the insurer as an admitted asset and such asset is unavailable to the receiver for payment of the obligations of the insurer at the time when a receivership proceeding is instituted, the misreporting, embezzlement, abstraction, purloining, conversion, or misappropriation shall be presumed to have jeopardized the safety and soundness of the insurer and to have been a significant cause of such insurer's being placed in conservation, rehabilitation, or liquidation, with the burden of proof on the defendants to show otherwise.
- (4) If the receiver is successful in establishing a claim under this section, the receiver shall be entitled to recover all of its costs, investigative and other expenses, which shall include the department's in-house staff and staff attorney's expenses, costs, and salaries, expended in the prosecution of the action, and reasonable attorney's fees. The receiver shall be exempt from the provisions of s. 57.111.
- (5) An action under this section may be brought at any time before the expiration of 4 years after the entry of the initial order of rehabilitation or liquidation under this part but shall be filed before the time the receivership proceeding is closed or dismissed.

Section 11. Section 631.193, Florida Statutes, is amended to read:

631.193 Releases. -- The filing of a claim constitutes a release of the insured from liability to the claimant to the 31 extent of the coverage or policy limits provided by the

insolvent insurer. The release is conditioned upon the cooperation of the insured with the receiver and the Florida Insurance Guaranty Association and any other guaranty association in defense of the claim. This release does not operate to discharge the Florida Insurance Guaranty Association or any other guaranty association from any of its responsibilities and duties set out in this chapter, nor does it operate to impose any liability on any such guaranty association which would not have existed absent the filing of a claim in the receivership.

Section 12. Section 631.3995, Florida Statutes, is created to read:

631.3995 Closing of estate; Closed Estate Fund Trust Account.--

- (1) When all assets justifying the expense of collection and distribution have been marshaled and distributed under this part, the department shall petition the court to terminate the liquidation proceedings and to close the estate. The court may grant such other relief as may be appropriate, including, but not limited to, a full discharge of all liability and responsibility of the liquidator, the reservation of assets for administrative expenses incurred in the closing of the estate, and any other actions the department feels necessary or appropriate for closing the estate.
- (2) Any remaining reserved assets that are provided for in subsection (1) and that may not be practicably or economically distributed to claimants shall be deposited into a segregated account to be known as the Closed Estate Fund Trust Account, if created by law. The department may use moneys held in the account for paying the administrative

expenses of companies subject to this part that lack sufficient assets to allow the department to perform its duties and obligations under this part. An annual audit of the Closed Estate Fund Trust Account shall be performed regardless of its balance.

(3) The department may petition the court to reopen the proceedings for good cause shown, including the marshaling of additional assets, and the court may enter such other orders as may be deemed appropriate.

Section 13. Subsection (3) of section 631.54, Florida Statutes, is amended to read:

631.54 Definitions.--As used in this part:

(3) "Covered claim" means an unpaid claim, including one of unearned premiums, which arises out of, and is within the coverage, and not in excess of, the applicable limits of an insurance policy to which this part applies, issued by an insurer, if such insurer becomes an insolvent insurer after October 1, 1970, and the claimant or insured is a resident of this state at the time of the insured event or the property from which the claim arises is permanently located in this state. "Covered claim" shall not include any amount due any reinsurer, insurer, insurance pool, or underwriting association, as subrogation, contribution, indemnification, recoveries or otherwise. Member insurers shall have no right of subrogation against the insured of any insolvent member.

Section 14. Subsection (1) of section 631.57, Florida Statutes, is amended to read:

- 631.57 Powers and duties of the association.--
- (1) The association shall:
- 30 (a)1. Be obligated to the extent of the covered claims 31 existing:

- Prior to adjudication of insolvency and arising a. within 30 days after the determination of insolvency;
- Before the policy expiration date if less than 30 days after the determination; or
- Before the insured replaces the policy or causes its cancellation, if she or he does so within 30 days of the determination.
- The obligation under subparagraph 1. shall include only that amount of each covered claim which is in excess of \$100 and is less than \$300,000, except with respect to policies covering condominium associations or homeowners' associations, which associations have a responsibility to provide insurance coverage on residential units within the association, the obligation shall include that amount of each covered property insurance claim which is less than \$100,000 multiplied by the number of condominium units or other residential units; however, as to homeowners' associations, this subparagraph applies only to claims for damage or loss to residential units and structures attached to residential units.
- In no event shall the association be obligated to a policyholder or claimant in an amount in excess of the obligation of the insolvent insurer under the policy from which the claim arises or under circumstances in which the insolvent insurer could not have been compelled to pay the claim.

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The foregoing notwithstanding, the association shall have no obligation to pay covered claims to be paid from the proceeds of bonds issued under s. 166.111(2). However, the association 31 | shall cause assessments to be made under paragraph (3)(e) for

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such covered claims, and such assessments shall be assigned and pledged under paragraph (3)(e) to or on behalf of the issuer of such bonds for the benefit of the holders of such The association shall administer any such covered claims and present valid covered claims for payment in accordance with the provisions of the assistance program in connection with which such bonds have been issued.

(b) Be deemed the insurer to the extent of its obligation on the covered claims, and, to such extent, shall have all rights, duties, defenses, and obligations of the insolvent insurer as if the insurer had not become insolvent. In no event shall the association be liable for any penalties or interest or any amount in excess of the limits set forth in paragraph (a) and the other limitations on liability also set forth in this chapter.

Section 15. Subsection (1) of section 631.60, Florida Statutes, is amended to read:

631.60 Effect of paid claims. --

(1) Any person recovering under this part shall be deemed to have assigned her or his rights under the policy to the association to the extent of the person's recovery from the association, regardless of whether such recovery is received directly from the association or through payments made from the proceeds of bonds issued under s. 166.111(2). Every insured or claimant seeking the protection of this part shall cooperate with the association to the same extent as such person would have been required to cooperate with the insolvent insurer. The association shall have no cause of action against the insured of the insolvent insurer for any sums it has paid out except such causes of action as the 31 insolvent insurer would have had if such sums had been paid by the insolvent insurer. In the case of an insolvent insurer operating on a plan with assessment liability, payments of claims of the association shall not operate to reduce the liability of insureds to the receiver, liquidator, or statutory successor for unpaid assessments. Under no circumstances shall any person have any cause of action against the association which that person would not have had against the insolvent insurer, nor shall this chapter be construed as creating any additional rights against the insolvent insurer.

Section 16. Section 817.2341, Florida Statutes, is created to read:

817.2341 Crimes by or affecting persons engaged in the administration of any insurer or entity organized pursuant to chapter 624 or chapter 641.--

(1)(a) Any person who makes a false entry of a material fact in any book, report, or statement relating to a transaction of an insurer or entity organized pursuant to chapter 624 or chapter 641, intending thereby to deceive any person about the financial condition or solvency of such insurer or entity, commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

(b) If such false entry of a material fact is made with the intent to deceive any person as to the impairment of capital, as defined in s. 631.011(12), of such insurer or entity or is the significant cause of such insurer or entity being placed in conservation, rehabilitation, or liquidation by a court, the offense is a felony of the first degree,

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    punishable as provided in s. 775.082, s. 775.083, or s.
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    775.084.
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          (2)(a) Any person who knowingly makes a material false
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    statement or report to the department or any agent of the
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    department, or who knowingly and materially overvalues any
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    property in any document or report prepared to be presented to
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    the department or any agent of the department, commits a
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    felony of the third degree, punishable as provided in s.
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    775.082, s. 775.083, or s. 775.084.
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          (b) If such material false statement or report or such
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    material overvaluation is made with the intent to deceive any
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    person as to the impairment of capital, as defined in s.
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    631.011(12), of an insurer or entity organized pursuant to
    chapter 624 or chapter 641, or is the significant cause of
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    such insurer or entity being placed in conservation,
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    rehabilitation, or liquidation by a court, the offense is a
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    felony of the first degree, punishable as provided in s.
    775.082, <u>s. 775.083</u>, or <u>s. 775.084</u>.
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           Section 17. This act shall take effect July 1, 2002.
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HOUSE SUMMARY

Creates the "Insurers Rehabilitation and Liquidation Act." Specifies application of receivership proceedings to specified persons and entities. Provides for tolling time limitations in conservation, liquidation, rehabilitation, or receivership actions. Vests the Department of Insurance with rights as receiver in receivership proceedings. Includes the department's in-house staff and staff attorney's expenses, costs, and salaries in costs and expenses entitled to be recovered by a receiver who is successful in establishing a claim. Provides for investigations by the department preliminary or incidental to receivership proceedings, authorizes the department to provide information in such investigations, and grants the department discretionary powers in determining information necessary to such investigations. Imposes liability on persons or entities engaged in insurance business for willfully embezzling, abstracting, purloining, converting, or misappropriating assets or property and specifies amounts of damages. Provides an additional limitation on the operation of a release. Provides procedures and requirements for closing an estate, provides for depositing estate assets into the Closed Estate Fund Trust Account, and provides for uses of such account. Revises obligations and liabilities of the Florida Insurance Guaranty Association and limits causes of action and creation of additional rights against the association. Provides criminal penalties for making false entries of a material fact in books, reports, or statements relating to insurer transactions or knowingly making a material false statement or report to the Department of Insurance or knowingly and materially overvaluing property in a document or report provided to the department. See bill for details.