# Florida Senate - 2008

**By** the Committees on Banking and Insurance; Banking and Insurance

597-05721-08

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1	A bill to be entitled
2	An act relating to the Florida Hurricane Catastrophe Fund;
3	amending s. 215.555, F.S.; creating the Division of the
4	Florida Hurricane Catastrophe Fund as a division of the
5	State Board of Administration; providing for a board of
6	the division; revising legislative findings; revising the
7	definition of "retention," "covered policy," and
8	"estimated claims-paying capacity" to account for the
9	creation of the division; defining the terms "division,"
10	"director," "FHCF," "fund," and "board"; clarifying
11	provisions requiring the State Board of Administration to
12	invest certain funds; requiring that the board of the
13	division appoint a director; providing duties of the
14	director; providing that the appointment of a director is
15	subject to the approval of the board by a majority vote;
16	authorizing the division to employ or contract with such
17	staff as the division deems necessary to administer the
18	fund; requiring that the division enter into a contract
19	with each insurer writing covered policies in this state
20	to provide to the insurer reimbursement as prescribed by
21	state law; requiring that such contracts contain certain
22	elements or provisions and provide the division with
23	certain obligations; requiring that the division publish
24	certain information in the Florida Administrative Weekly
25	at specified times; authorizing the payment of
26	advancements of reimbursements or reimbursement premiums
27	to certain entities under certain conditions; requiring
28	that the division inspect, examine, and verify the records
29	of each insurer's covered policies at such times as the

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30 division deems appropriate and according to standards 31 established by rule for the specific purpose of validating 32 the accuracy of exposures and losses required to be reported under the terms and conditions of the 33 34 reimbursement contract; providing for the payments of 35 expenses associated with such inspection, examination, or 36 verification; providing for the reimbursement of the 37 division for such expenses by an insurer under certain 38 circumstances; authorizing the division to take certain 39 action if it finds any insurer's records or other 40 necessary information to be inadequate or inadequately 41 posted, recorded, or maintained; requiring that the 42 division select an independent consultant to develop a 43 formula for determining the actuarially indicated premium 44 to be paid to the fund; requiring that the division 45 consider certain factors when establishing a reimbursement premium; providing for the calculation of such premium by 46 the division; providing for the payment of reimbursement 47 48 premium; providing for the collection of interest on 49 certain late reimbursement premium payments; providing 50 responsibilities of the division if Citizens Property 51 Insurance Corporation assumes or otherwise provides 52 coverage for policies of an insurer placed in liquidation; 53 authorizing the division to execute agreements regarding 54 revenue bonds or other financing arrangements for the 55 purpose of evidencing, securing, preserving, or protecting 56 a pledge of revenue by the corporation; requiring that the 57 Florida Surplus Lines Service Office assist the division 58 in ensuring the accurate and timely collection and

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59 remittance of assessments of surplus lines premiums; 60 requiring that the office report certain information to the division at a time and in a manner prescribed by the 61 division; providing for the issuance of revenue bonds 62 63 through counties or municipalities; revising the 64 membership of the Florida Hurricane Catastrophe Fund 65 Finance Corporation; providing that there is no liability 66 on the part of any member of the board of directors or 67 employees of the corporation for any actions taken by them 68 in the performance of their duties; providing additional 69 powers and duties of the board of the division and the 70 division; requiring that the board of the division appoint 71 an advisory council; providing for membership of the 72 council; providing duties of the council; authorizing the 73 division to take any action necessary to enforce certain 74 rules and provisions of a reimbursement contract; 75 requiring that the division make certain recommendations 76 to the Legislature upon the creation of a federal or 77 multistate catastrophic insurance or reinsurance program 78 intended to serve purposes similar to the purposes of the 79 fund; providing for the reversion of fund assets upon 80 termination of the fund; providing for optional coverages 81 of the fund; revising the temporary increases in coverage 82 limits (TICL); requiring that a TICL addendum contain a 83 promise by the division to make certain reimbursements to 84 the TICL insurer; including the level of TICL coverage 85 specified by the board among the factors that must be 86 considered when determining the amount of increase in the 87 claims-paying capacity of the fund; amending s. 215.557,

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88 F.S.; conforming provisions to changes made by the act; 89 amending s. 215.5586, F.S.; requiring that the director of 90 the division serve on the advisory council of the My Safe Florida Home Program; amending s. 215.559, F.S., relating 91 92 to the Hurricane Loss Mitigation Program; conforming a 93 cross-reference; amending s. 215.5595, F.S., relating to the Insurance Capital Build-up Incentive Program; 94 95 conforming provisions to changes made by the act; revising 96 the definition of "board" to conform to changes made by 97 the act; amending s. 627.0628, F.S.; revising legislative 98 intent; assigning the Florida Commission on Hurricane Loss 99 Projection Methodology to the division; requiring that the 100 director of the fund serve on the commission; requiring 101 that the board of the division annually appoint one of the 102 members of the commission to serve as chair; requiring 103 that the division provide for travel, expenses, and staff 104 support for the commission; indemnifying members and 105 employees of the division from liability for action taken 106 with respect to the commission or its activities; 107 requiring that the division employ certain methods, 108 principles, standards, models, or output ranges when 109 establishing reimbursement premiums for the fund; 110 providing an effective date. 111 112 Be It Enacted by the Legislature of the State of Florida: 113 114 Section 1. Section 215.555, Florida Statutes, is amended to 115 read: 116 215.555 Florida Hurricane Catastrophe Fund.--

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117 (1) FINDINGS AND PURPOSE.--The Legislature finds and 118 declares as follows:

(a) There is a compelling state interest in maintaining a viable and orderly private sector market for property insurance in this state. To the extent that the private sector is unable to maintain a viable and orderly market for property insurance in this state, state actions to maintain such a viable and orderly market are valid and necessary exercises of the police power.

(b) As a result of unprecedented levels of catastrophic 125 126 insured losses in recent years, and especially as a result of 127 Hurricane Andrew, numerous insurers have determined that in order to protect their solvency, it is necessary for them to reduce 128 129 their exposure to hurricane losses. Also as a result of these 130 events, world reinsurance capacity has significantly contracted, 131 increasing the pressure on insurers to reduce their catastrophic 132 exposures.

133 Mortgages require reliable property insurance, and the (C) 134 unavailability of reliable property insurance would therefore 135 make most real estate transactions impossible. In addition, the 136 public health, safety, and welfare demand that structures damaged 137 or destroyed in a catastrophe be repaired or reconstructed as 138 soon as possible. Therefore, the inability of the private sector 139 insurance and reinsurance markets to maintain sufficient capacity 140 to enable residents of this state to obtain property insurance 141 coverage in the private sector endangers the economy of the state 142 and endangers the public health, safety, and welfare. 143 Accordingly, state action to correct for this inability of the 144 private sector constitutes a valid and necessary public and governmental purpose. 145

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146 The insolvencies and financial impairments resulting (d) 147 from Hurricane Andrew demonstrate that many property insurers are 148 unable or unwilling to maintain reserves, surplus, and 149 reinsurance sufficient to enable the insurers to pay all claims 150 in full in the event of a catastrophe. State action is therefore 151 necessary to protect the public from an insurer's unwillingness 152 or inability to maintain sufficient reserves, surplus, and 153 reinsurance.

(e) A state program to provide a stable and ongoing source
of reimbursement to insurers for a portion of their catastrophic
hurricane losses will create additional insurance capacity
sufficient to ameliorate the current dangers to the state's
economy and to the public health, safety, and welfare.

159 It is essential to the functioning of a state program (f) 160 to increase insurance capacity that revenues received be exempt 161 from federal taxation. It is therefore the intent of the 162 Legislature that this program be structured as a state trust fund 163 under the direction and control of the Division of the Florida 164 Hurricane Catastrophe Fund within the State Board of 165 Administration and operate exclusively for the purpose of 166 protecting and advancing the state's interest in maintaining 167 insurance capacity in this state.

(g) Hurricane Andrew, which caused insured and uninsured losses in excess of \$20 billion, will likely not be the last major windstorm to strike Florida. Recognizing that a future wind catastrophe could cause damages in excess of \$60 billion, especially if a major urban area or series of urban areas were hit, it is the intent of the Legislature to balance equitably its concerns about mitigation of hurricane impact, insurance

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175 affordability and availability, and the risk of insurer and joint 176 underwriting association insolvency, as well as assessment and 177 bonding limitations.

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(2) DEFINITIONS.--As used in this section:

"Actuarially indicated" means, with respect to premiums 179 (a) 180 paid by insurers for reimbursement provided by the fund, an 181 amount determined according to principles of actuarial science to 182 be adequate, but not excessive, in the aggregate, to pay current and future obligations and expenses of the fund, including 183 184 additional amounts if needed to pay debt service on revenue bonds issued under this section and to provide required debt service 185 186 coverage in excess of the amounts required to pay actual debt 187 service on revenue bonds issued under subsection (7) (6), and determined according to principles of actuarial science to 188 189 reflect each insurer's relative exposure to hurricane losses.

(b) "Covered event" means any one storm declared to be a
hurricane by the National Hurricane Center, which storm causes
insured losses in this state.

193 "Covered policy" means any insurance policy covering (C) residential property in this state, including, but not limited 194 195 to, any homeowner's, mobile home owner's, farm owner's, 196 condominium association, condominium unit owner's, tenant's, or 197 apartment building policy, or any other policy covering a 198 residential structure or its contents issued by any authorized 199 insurer, including a commercial self-insurance fund holding a certificate of authority issued by the Office of Insurance 200 201 Regulation under s. 624.462, the Citizens Property Insurance 202 Corporation, and any joint underwriting association or similar 203 entity created under law. The term "covered policy" includes any

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collateral protection insurance policy covering personal 204 205 residences which protects both the borrower's and the lender's 206 financial interests, in an amount at least equal to the coverage for the dwelling in place under the lapsed homeowner's policy, if 207 208 such policy can be accurately reported as required in subsection (6) (5). Additionally, covered policies include policies covering 209 the peril of wind removed from the Florida Residential Property 210 211 and Casualty Joint Underwriting Association or from the Citizens 212 Property Insurance Corporation, created under s. 627.351(6), or 213 from the Florida Windstorm Underwriting Association, created under s. 627.351(2), by an authorized insurer under the terms and 214 215 conditions of an executed assumption agreement between the 216 authorized insurer and such association or Citizens Property 217 Insurance Corporation. Each assumption agreement between the 218 association and such authorized insurer or Citizens Property 219 Insurance Corporation must be approved by the Office of Insurance 220 Regulation before the effective date of the assumption, and the 221 Office of Insurance Regulation must provide written notification 222 to the division board within 15 working days after such approval. 223 "Covered policy" does not include any policy that excludes wind 224 coverage or hurricane coverage or any reinsurance agreement and 225 does not include any policy otherwise meeting this definition 226 which is issued by a surplus lines insurer or a reinsurer. All 227 commercial residential excess policies and all deductible buy-228 back policies that, based on sound actuarial principles, require 229 individual ratemaking shall be excluded by rule if the actuarial 230 soundness of the fund is not jeopardized. For this purpose, the 231 term "excess policy" means a policy that provides insurance 232 protection for large commercial property risks and that provides

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233 a layer of coverage above a primary layer insured by another 234 insurer.

(d) "Losses" means direct incurred losses under covered policies, which shall include losses for additional living expenses not to exceed 40 percent of the insured value of a residential structure or its contents and shall exclude loss adjustment expenses. "Losses" does not include losses for fair rental value, loss of rent or rental income, or business interruption losses.

(e) "Retention" means the amount of losses below which an insurer is not entitled to reimbursement from the fund. An insurer's retention shall be calculated as follows:

245 The division <del>board</del> shall calculate and report to each 1. 246 insurer the retention multiples for that year. For the contract 247 year beginning June 1, 2005, the retention multiple shall be 248 equal to \$4.5 billion divided by the total estimated 249 reimbursement premium for the contract year; for subsequent 250 years, the retention multiple shall be equal to \$4.5 billion, 251 adjusted based upon the reported exposure from the prior contract 252 year to reflect the percentage growth in exposure to the fund for covered policies since 2004, divided by the total estimated 253 254 reimbursement premium for the contract year. Total reimbursement 255 premium for purposes of the calculation under this subparagraph 256 shall be estimated using the assumption that all insurers have 257 selected the 90-percent coverage level.

258 2. The retention multiple as determined under subparagraph 259 1. shall be adjusted to reflect the coverage level elected by the 260 insurer. For insurers electing the 90-percent coverage level, the 261 adjusted retention multiple is 100 percent of the amount

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determined under subparagraph 1. For insurers electing the 75percent coverage level, the retention multiple is 120 percent of the amount determined under subparagraph 1. For insurers electing the 45-percent coverage level, the adjusted retention multiple is 266 200 percent of the amount determined under subparagraph 1.

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

272 4. For insurers who experience multiple covered events 273 causing loss during the contract year, beginning June 1, 2005, 274 each insurer's full retention shall be applied to each of the 275 covered events causing the two largest losses for that insurer. 276 For each other covered event resulting in losses, the insurer's 277 retention shall be reduced to one-third of the full retention. 278 The reimbursement contract shall provide for the reimbursement of 279 losses for each covered event based on the full retention with 280 adjustments made to reflect the reduced retentions after January 281 1 of the contract year provided the insurer reports its losses as 282 specified in the reimbursement contract.

(f) "Workers' compensation" includes both workers' compensation and excess workers' compensation insurance.

(g) "Bond" means any bond, debenture, note, or otherevidence of financial indebtedness issued under this section.

(h) "Debt service" means the amount required in any fiscal
year to pay the principal of, redemption premium, if any, and
interest on revenue bonds and any amounts required by the terms
of documents authorizing, securing, or providing liquidity for

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291 revenue bonds necessary to maintain in effect any such liquidity 292 or security arrangements.

(i) "Debt service coverage" means the amount, if any, required by the documents under which revenue bonds are issued, which amount is to be received in any fiscal year in excess of the amount required to pay debt service for such fiscal year.

(j) "Local government" means a unit of general purposelocal government as defined in s. 218.31(2).

(k) "Pledged revenues" means all or any portion of revenues to be derived from reimbursement premiums under subsection (6) (5) or from emergency assessments under paragraph (7) (b) (6) (b), as determined by the board.

(1) "Estimated claims-paying capacity" means the sum of the projected year-end balance of the fund as of December 31 of a contract year, plus any reinsurance purchased by the fund, plus the <u>division's</u> board's estimate of the board's borrowing capacity.

(m) "Actual claims-paying capacity" means the sum of the balance of the fund as of December 31 of a contract year, plus any reinsurance purchased by the fund, plus the amount the board is able to raise through the issuance of revenue bonds under subsection (7) (6).

313 (n) "Corporation" means the Florida Hurricane Catastrophe 314 Fund Finance Corporation created in paragraph (7) (d) (6) (d).

315 (0) "Division" means the Division of the Florida Hurricane 316 Catastrophe Fund.

317 <u>(p) "Director" means the chief administrator of the</u> 318 division, who shall act on behalf of the division as authorized 319 by the board.

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320 (q) "FHCF" or "fund" means the Florida Hurricane 321 Catastrophe Fund. 322 (r) "Board" means the governing board of the division, 323 which shall be composed of the Governor and the Cabinet. The 324 Governor shall serve as chair of the board, the Attorney General 325 shall serve as secretary of the board, and the Chief Financial 326 Officer shall serve as treasurer of the board. 327 (3) DIVISION OF THE FLORIDA HURRICANE CATASTROPHE FUND 328 CREATED.--There is created a division of the State Board of 329 Administration known as the Division of the Florida Hurricane 330 Catastrophe Fund, which shall administer the Florida Hurricane 331 Catastrophe Fund. For purposes of this section, the board of the 332 division shall consist of the Governor and the Cabinet. 333 (4) (3) FLORIDA HURRICANE CATASTROPHE FUND CREATED. -- There 334 is created the Florida Hurricane Catastrophe Fund within to be 335 administered by the State Board of Administration. Moneys in the 336 fund may not be expended, loaned, or appropriated except to pay 337 obligations of the fund arising out of reimbursement contracts entered into under subsection (5) (4), payment of debt service on 338 339 revenue bonds issued under subsection (7) (6), costs of the 340 mitigation program under subsection (8) (7), costs of procuring 341 reinsurance, and costs of administration of the fund. The State 342 Board of Administration board shall invest the moneys in the fund 343 pursuant to ss. 215.44-215.52. Except as otherwise provided in 344 this section, earnings from all investments shall be retained in 345 the fund. The board shall appoint a director who shall be 346 responsible for the administration of the fund. The appointment of the director of the Division of the Florida Hurricane 347 Catastrophe Fund shall be subject to the approval by a majority 348

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349 vote of the board. The division board may employ or contract with 350 such staff and professionals as the division board deems 351 necessary for the administration of the fund. The board may adopt 352 such rules as are reasonable and necessary to implement this 353 section and shall specify interest due on any delinquent 354 remittances, which interest may not exceed the fund's rate of 355 return plus 5 percent. Such rules must conform to the 356 Legislature's specific intent in establishing the fund as 357 expressed in subsection (1), must enhance the fund's potential 358 ability to respond to claims for covered events, must contain 359 general provisions so that the rules can be applied with 360 reasonable flexibility so as to accommodate insurers in 361 situations of an unusual nature or where undue hardship may 362 result, except that such flexibility may not in any way impair, 363 override, supersede, or constrain the public purpose of the fund, 364 and must be consistent with sound insurance practices. The board 365 may, by rule, provide for the exemption from subsections (5) (4)366 and (6) (5) of insurers writing covered policies with less than 367 \$10 million in aggregate exposure for covered policies if the 368 exemption does not affect the actuarial soundness of the fund. 369 The division shall have the power to sue and be sued in the name 370 of the division.

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(5) (4) REIMBURSEMENT CONTRACTS.--

(a) The <u>division</u> board shall enter into a contract with each insurer writing covered policies in this state to provide to the insurer the reimbursement described in paragraphs (b) and (d), in exchange for the reimbursement premium paid into the fund under subsection (6) (5). As a condition of doing business in this state, each such insurer shall enter into such a contract.

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378 (b)1. The contract shall contain a promise by the <u>division</u> 379 board to reimburse the insurer for 45 percent, 75 percent, or 90 380 percent of its losses from each covered event in excess of the 381 insurer's retention, plus 5 percent of the reimbursed losses to 382 cover loss adjustment expenses.

383 2. The insurer must elect one of the percentage coverage 384 levels specified in this paragraph and may, upon renewal of a 385 reimbursement contract, elect a lower percentage coverage level 386 if no revenue bonds issued under subsection (7) (6) after a 387 covered event are outstanding, or elect a higher percentage coverage level, regardless of whether or not revenue bonds are 388 389 outstanding. All members of an insurer group must elect the same 390 percentage coverage level. Any joint underwriting association, 391 risk apportionment plan, or other entity created under s. 627.351 392 must elect the 90-percent coverage level.

393 3. The contract shall provide that reimbursement amounts 394 shall not be reduced by reinsurance paid or payable to the 395 insurer from other sources.

396 4. Notwithstanding any other provision contained in this 397 section, the board shall make available to insurers that 398 purchased coverage provided by this subparagraph in 2006, 399 insurers qualifying as limited apportionment companies under s. 400 627.351(6)(c), and insurers that were approved to participate in 401 2006 or that are approved in 2007 for the Insurance Capital 402 Build-Up Incentive Program pursuant to s. 215.5595, a contract or 403 contract addendum that provides an additional amount of 404 reimbursement coverage of up to \$10 million. The premium to be 405 charged for this additional reimbursement coverage shall be 50 406 percent of the additional reimbursement coverage provided, which

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shall include one prepaid reinstatement. The minimum retention 407 408 level that an eligible participating insurer must retain 409 associated with this additional coverage layer is 30 percent of 410 the insurer's surplus as of December 31, 2006. This coverage 411 shall be in addition to all other coverage that may be provided 412 under this section. The coverage provided by the fund under this 413 subparagraph shall be in addition to the claims-paying capacity as defined in subparagraph (c)1., but only with respect to those 414 415 insurers that select the additional coverage option and meet the 416 requirements of this subparagraph. The claims-paying capacity 417 with respect to all other participating insurers and limited 418 apportionment companies that do not select the additional 419 coverage option shall be limited to their reimbursement premium's 420 proportionate share of the actual claims-paying capacity 421 otherwise defined in subparagraph (c)1. and as provided for under 422 the terms of the reimbursement contract. Coverage provided in the 423 reimbursement contract will not be affected by the additional 424 premiums paid by participating insurers exercising the additional 425 coverage option allowed in this subparagraph. This subparagraph 426 expires on May 31, 2008.

427 (c)1. The contract shall also provide that the obligation 428 of the division board with respect to all contracts covering a 429 particular contract year shall not exceed the actual claims-430 paying capacity of the fund up to a limit of \$15 billion for that 431 contract year adjusted based upon the reported exposure from the 432 prior contract year to reflect the percentage growth in exposure 433 to the fund for covered policies since 2003, provided the dollar 434 growth in the limit may not increase in any year by an amount 435 greater than the dollar growth of the balance of the fund as of

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436 December 31, less any premiums or interest attributable to 437 optional coverage, as defined by rule which occurred over the 438 prior calendar year.

439 In May before the start of the upcoming contract year 2. 440 and in October during the contract year, the division board shall 441 publish in the Florida Administrative Weekly a statement of the 442 fund's estimated borrowing capacity and the projected balance of 443 the fund as of December 31. After the end of each calendar year, 444 the division board shall notify insurers of the estimated 445 borrowing capacity and the balance of the fund as of December 31 446 to provide insurers with data necessary to assist them in 447 determining their retention and projected payout from the fund 448 for loss reimbursement purposes. In conjunction with the 449 development of the premium formula, as provided for in subsection 450 (6) (5), the division board shall publish factors or multiples 451 that assist insurers in determining their retention and projected 452 payout for the next contract year. For all regulatory and 453 reinsurance purposes, an insurer may calculate its projected 454 payout from the fund as its share of the total fund premium for 455 the current contract year multiplied by the sum of the projected 456 balance of the fund as of December 31 and the estimated borrowing 457 capacity for that contract year as reported under this 458 subparagraph.

(d)1. For purposes of determining potential liability and to aid in the sound administration of the fund, the contract shall require each insurer to report such insurer's losses from each covered event on an interim basis, as directed by the <u>division board</u>. The contract shall require the insurer to report to the division <del>board</del> no later than December 31 of each year, and

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465 quarterly thereafter, its reimbursable losses from covered events 466 for the year. The contract shall require the division board to 467 determine and pay, as soon as practicable after receiving these reports of reimbursable losses, the initial amount of 468 469 reimbursement due and adjustments to this amount based on later 470 loss information. The adjustments to reimbursement amounts shall 471 require the division board to pay, or the insurer to return, 472 amounts reflecting the most recent calculation of losses.

473 2. In determining reimbursements pursuant to this 474 subsection, the contract shall provide that the <u>division</u> board 475 shall pay to each insurer such insurer's projected payout, which 476 is the amount of reimbursement it is owed, up to an amount equal 477 to the insurer's share of the actual premium paid for that 478 contract year, multiplied by the actual claims-paying capacity 479 available for that contract year.

480 Except as provided in subparagraphs 2. and 3., the (e)1. 481 contract shall provide that if an insurer demonstrates to the 482 division board that it is likely to qualify for reimbursement under the contract, and demonstrates to the division board that 483 484 the immediate receipt of moneys from the division board is likely 485 to prevent the insurer from becoming insolvent, the division 486 board shall advance the insurer, at market interest rates, the 487 amounts necessary to maintain the solvency of the insurer, up to 488 50 percent of the division's board's estimate of the 489 reimbursement due the insurer. The insurer's reimbursement shall 490 be reduced by an amount equal to the amount of the advance and interest thereon. 491

492 2. With respect only to an entity created under s. 627.351,
493 the contract shall also provide that the <u>division</u> board may, upon

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494 application by such entity, advance to such entity, at market 495 interest rates, up to 90 percent of the lesser of:

496 a. The <u>division's</u> board's estimate of the amount of 497 reimbursement due to such entity; or

498 b. The entity's share of the actual reimbursement premium 499 paid for that contract year, multiplied by the currently 500 available liquid assets of the fund. In order for the entity to 501 qualify for an advance under this subparagraph, the entity must 502 demonstrate to the division board that the advance is essential 503 to allow the entity to pay claims for a covered event and the 504 division board must determine that the fund's assets are 505 sufficient and are sufficiently liquid to allow the division 506 board to make an advance to the entity and still fulfill the 507 board's reimbursement obligations to other insurers. The entity's 508 final reimbursement for any contract year in which an advance has 509 been made under this subparagraph must be reduced by an amount 510 equal to the amount of the advance and any interest on such 511 advance. In order to determine what amounts, if any, are due the 512 entity, the division board may require the entity to report its 513 exposure and its losses at any time to determine retention levels 514 and reimbursements payable.

515 3. The contract shall also provide specifically and solely 516 with respect to any limited apportionment company under s. 517 627.351(2)(b)3. that the division board may, upon application by 518 such company, advance to such company the amount of the estimated 519 reimbursement payable to such company as calculated pursuant to 520 paragraph (d), at market interest rates, if the division board determines that the fund's assets are sufficient and are 521 522 sufficiently liquid to permit the division board to make an

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523 advance to such company and at the same time fulfill its 524 reimbursement obligations to the insurers that are participants 525 in the fund. Such company's final reimbursement for any contract 526 year in which an advance pursuant to this subparagraph has been 527 made shall be reduced by an amount equal to the amount of the 528 advance and interest thereon. In order to determine what amounts, 529 if any, are due to such company, the division board may require 530 such company to report its exposure and its losses at such times 531 as may be required to determine retention levels and loss 532 reimbursements payable.

533 (f) In order to ensure that insurers have properly reported 534 the insured values on which the reimbursement premium is based 535 and to ensure that insurers have properly reported the losses for 536 which reimbursements have been made, the division board shall 537 inspect, examine, and verify the records of each insurer's 538 covered policies at such times as the division board deems 539 appropriate and according to standards established by rule for 540 the specific purpose of validating the accuracy of exposures and 541 losses required to be reported under the terms and conditions of the reimbursement contract. The costs of the examinations shall 542 543 be borne by the division <del>board</del>. However, in order to remove any 544 incentive for an insurer to delay preparations for an 545 examination, the division board shall be reimbursed by the 546 insurer for any examination expenses incurred in addition to the 547 usual and customary costs of the examination, which additional 548 expenses were incurred as a result of an insurer's failure, 549 despite proper notice, to be prepared for the examination or as a 550 result of an insurer's failure to provide requested information 551 while the examination is in progress. If the division board finds

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552 any insurer's records or other necessary information to be 553 inadequate or inadequately posted, recorded, or maintained, the 554 division board may employ experts to reconstruct, rewrite, 555 record, post, or maintain such records or information, at the 556 expense of the insurer being examined, if such insurer has failed 557 to maintain, complete, or correct such records or deficiencies 558 after the division board has given the insurer notice and a 559 reasonable opportunity to do so. Any information contained in an 560 examination report, which information is described in s. 215.557, 561 is confidential and exempt from the provisions of s. 119.07(1) 562 and s. 24(a), Art. I of the State Constitution, as provided in s. 215.557. Nothing in this paragraph expands the exemption in s. 563 564 215.557.

(g) The contract shall provide that in the event of the insolvency of an insurer, the fund shall pay directly to the Florida Insurance Guaranty Association for the benefit of Florida policyholders of the insurer the net amount of all reimbursement moneys owed to the insurer. As used in this paragraph, the term "net amount of all reimbursement moneys" means that amount which remains after reimbursement for:

1. Preliminary or duplicate payments owed to private reinsurers or other inuring reinsurance payments to private reinsurers that satisfy statutory or contractual obligations of the insolvent insurer attributable to covered events to such reinsurers; or

577 2. Funds owed to a bank or other financial institution to 578 cover obligations of the insolvent insurer under a credit 579 agreement that assists the insolvent insurer in paying claims 580 attributable to covered events.

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582 The private reinsurers, banks, or other financial institutions 583 shall be reimbursed or otherwise paid prior to payment to the Florida Insurance Guaranty Association, notwithstanding any law 584 585 to the contrary. The guaranty association shall pay all claims up 586 to the maximum amount permitted by chapter 631; thereafter, any 587 remaining moneys shall be paid pro rata to claims not fully 588 satisfied. This paragraph does not apply to a joint underwriting 589 association, risk apportionment plan, or other entity created 590 under s. 627.351.

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(6) (5) REIMBURSEMENT PREMIUMS.--

592 (a) Each reimbursement contract shall require the insurer
593 to annually pay to the fund an actuarially indicated premium for
594 the reimbursement.

595 The division State Board of Administration shall select (b) 596 an independent consultant to develop a formula for determining 597 the actuarially indicated premium to be paid to the fund. The 598 formula shall specify, for each zip code or other limited 599 geographical area, the amount of premium to be paid by an insurer 600 for each \$1,000 of insured value under covered policies in that 601 zip code or other area. In establishing premiums, the division 602 board shall consider the coverage elected under paragraph (5) (b) 603 (4) (b) and any factors that tend to enhance the actuarial 604 sophistication of ratemaking for the fund, including deductibles, 605 type of construction, type of coverage provided, relative concentration of risks, and other such factors deemed by the 606 607 division board to be appropriate. The formula may provide for a 608 procedure to determine the premiums to be paid by new insurers 609 that begin writing covered policies after the beginning of a

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610 contract year, taking into consideration when the insurer starts 611 writing covered policies, the potential exposure of the insurer, 612 the potential exposure of the fund, the administrative costs to 613 the insurer and to the fund, and any other factors deemed 614 appropriate by the board. The formula must be approved by 615 unanimous vote of the board. The board may, at any time, revise 616 the formula pursuant to the procedure provided in this paragraph.

617 (c) No later than September 1 of each year, each insurer 618 shall notify the division board of its insured values under 619 covered policies by zip code, as of June 30 of that year. On the 620 basis of these reports, the division board shall calculate the 621 premium due from the insurer, based on the formula adopted under 622 paragraph (b). The insurer shall pay the required annual premium 623 pursuant to a periodic payment plan specified in the contract. 624 The division board shall provide for payment of reimbursement 625 premium in periodic installments and for the adjustment of 626 provisional premium installments collected prior to submission of 627 the exposure report to reflect data in the exposure report. The 628 division board shall collect interest on late reimbursement 629 premium payments consistent with the assumptions made in 630 developing the premium formula in accordance with paragraph (b).

631 (d) All premiums paid to the fund under reimbursement
632 contracts shall be treated as premium for approved reinsurance
633 for all accounting and regulatory purposes.

(e) If Citizens Property Insurance Corporation assumes or
otherwise provides coverage for policies of an insurer placed in
liquidation under chapter 631 pursuant to s. 627.351(6), the
corporation may, pursuant to conditions mutually agreed to
between the corporation and the <u>division</u> State Board of

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Administration, obtain coverage for such policies under its 639 640 contract with the fund or accept an assignment of the liquidated 641 insurer's contract with the fund. If Citizens Property Insurance Corporation elects to cover these policies under the 642 643 corporation's contract with the division fund, it shall notify 644 the division board of its insured values with respect to such 645 policies within a specified time mutually agreed to between the corporation and the division <del>board</del>, after such assumption or 646 647 other coverage transaction, and the division fund shall treat 648 such policies as having been in effect as of June 30 of that year. In the event of an assignment, the fund shall apply that 649 650 contract to such policies and treat Citizens Property Insurance 651 Corporation as if the corporation were the liquidated insurer for 652 the remaining term of the contract, and the corporation shall 653 have all rights and duties of the liquidated insurer beginning on 654 the date it provides coverage for such policies, but the 655 corporation is not subject to any preexisting rights, 656 liabilities, or duties of the liquidated insurer. The assignment, 657 including any unresolved issues between the liquidated insurer 658 and Citizens Property Insurance Corporation under the contract, 659 shall be provided for in the liquidation order or otherwise 660 determined by the court. However, if a covered event occurs 661 before the effective date of the assignment, the corporation may 662 not obtain coverage for such policies under its contract with the 663 fund and shall accept an assignment of the liquidated insurer's 664 contract as provided in this paragraph.

665 666 (7)<del>(6)</del> REVENUE BONDS.--

(a) General provisions.--

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Upon the occurrence of a hurricane and a determination 667 1. 668 that the moneys in the fund are or will be insufficient to pay 669 reimbursement at the levels promised in the reimbursement 670 contracts, the board may take the necessary steps under paragraph 671 (c) or paragraph (d) for the issuance of revenue bonds for the 672 benefit of the fund. The proceeds of such revenue bonds may be 673 used to make reimbursement payments under reimbursement 674 contracts; to refinance or replace previously existing borrowings 675 or financial arrangements; to pay interest on bonds; to fund 676 reserves for the bonds; to pay expenses incident to the issuance 677 or sale of any bond issued under this section, including costs of 678 validating, printing, and delivering the bonds, costs of printing 679 the official statement, costs of publishing notices of sale of 680 the bonds, and related administrative expenses; or for such other 681 purposes related to the financial obligations of the fund as the 682 board may determine. The term of the bonds may not exceed 30 683 years. The board may pledge or authorize the corporation to 684 pledge all or a portion of all revenues under subsection (6) (5)685 and under paragraph (b) to secure such revenue bonds and the 686 division board may execute such agreements between the division 687 board and the issuer of any revenue bonds and providers of other 688 financing arrangements under paragraph (8) (b)  $\frac{(7)}{(b)}$  as the 689 division board deems necessary to evidence, secure, preserve, and 690 protect such pledge. If reimbursement premiums received under 691 subsection (6) (5) or earnings on such premiums are used to pay debt service on revenue bonds, such premiums and earnings shall 692 693 be used only after the use of the moneys derived from assessments 694 under paragraph (b). The funds, credit, property, or taxing power 695 of the state or political subdivisions of the state shall not be

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696 pledged for the payment of such bonds. The <u>division</u> board may 697 also enter into agreements under paragraph (c) or paragraph (d) 698 for the purpose of issuing revenue bonds in the absence of a 699 hurricane upon a determination that such action would maximize 700 the ability of the fund to meet future obligations.

701 The Legislature finds and declares that the issuance of 2. 702 bonds under this subsection is for the public purpose of paying 703 the proceeds of the bonds to insurers, thereby enabling insurers 704 to pay the claims of policyholders to assure that policyholders 705 are able to pay the cost of construction, reconstruction, repair, 706 restoration, and other costs associated with damage to property 707 of policyholders of covered policies after the occurrence of a 708 hurricane.

709

(b) Emergency assessments. --

710 1. If the board determines that the amount of revenue 711 produced under subsection (6) (5) is insufficient to fund the 712 obligations, costs, and expenses of the fund and the corporation, 713 including repayment of revenue bonds and that portion of the debt 714 service coverage not met by reimbursement premiums, the board 715 shall direct the Office of Insurance Regulation to levy, by 716 order, an emergency assessment on direct premiums for all 717 property and casualty lines of business in this state, including property and casualty business of surplus lines insurers 718 719 regulated under part VIII of chapter 626, but not including any 720 workers' compensation premiums or medical malpractice premiums. As used in this subsection, the term "property and casualty 721 722 business" includes all lines of business identified on Form 2, 723 Exhibit of Premiums and Losses, in the annual statement required 724 of authorized insurers by s. 624.424 and any rule adopted under

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725 this section, except for those lines identified as accident and 726 health insurance and except for policies written under the 727 National Flood Insurance Program. The assessment shall be 728 specified as a percentage of direct written premium and is 729 subject to annual adjustments by the board in order to meet debt 730 obligations. The same percentage shall apply to all policies in 731 lines of business subject to the assessment issued or renewed 732 during the 12-month period beginning on the effective date of the 733 assessment.

734 2. A premium is not subject to an annual assessment under 735 this paragraph in excess of 6 percent of premium with respect to 736 obligations arising out of losses attributable to any one 737 contract year, and a premium is not subject to an aggregate 738 annual assessment under this paragraph in excess of 10 percent of 739 premium. An annual assessment under this paragraph shall continue 740 as long as the revenue bonds issued with respect to which the 741 assessment was imposed are outstanding, including any bonds the 742 proceeds of which were used to refund the revenue bonds, unless 743 adequate provision has been made for the payment of the bonds 744 under the documents authorizing issuance of the bonds.

745 3. Emergency assessments shall be collected from 746 policyholders. Emergency assessments shall be remitted by 747 insurers as a percentage of direct written premium for the 748 preceding calendar quarter as specified in the order from the 749 Office of Insurance Regulation. The office shall verify the 750 accurate and timely collection and remittance of emergency 751 assessments and shall report the information to the division 752 board in a form and at a time specified by the division board. 753 Each insurer collecting assessments shall provide the information

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with respect to premiums and collections as may be required by the office to enable the office to monitor and verify compliance with this paragraph.

757 With respect to assessments of surplus lines premiums, 4. 758 each surplus lines agent shall collect the assessment at the same 759 time as the agent collects the surplus lines tax required by s. 760 626.932, and the surplus lines agent shall remit the assessment 761 to the Florida Surplus Lines Service Office created by s. 626.921 at the same time as the agent remits the surplus lines tax to the 762 Florida Surplus Lines Service Office. The emergency assessment on 763 764 each insured procuring coverage and filing under s. 626.938 shall 765 be remitted by the insured to the Florida Surplus Lines Service 766 Office at the time the insured pays the surplus lines tax to the 767 Florida Surplus Lines Service Office. The Florida Surplus Lines 768 Service Office shall remit the collected assessments to the fund 769 or corporation as provided in the order levied by the Office of 770 Insurance Regulation. The Florida Surplus Lines Service Office 771 shall verify the proper application of such emergency assessments 772 and shall assist the division board in ensuring the accurate and 773 timely collection and remittance of assessments as required by 774 the board. The Florida Surplus Lines Service Office shall 775 annually calculate the aggregate written premium on property and 776 casualty business, other than workers' compensation and medical 777 malpractice, procured through surplus lines agents and insureds procuring coverage and filing under s. 626.938 and shall report 778 779 the information to the division board in a form and at a time 780 specified by the division board.

7815. Any assessment authority not used for a particular782contract year may be used for a subsequent contract year. If, for

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783 a subsequent contract year, the board determines that the amount 784 of revenue produced under subsection (6) (5) is insufficient to 785 fund the obligations, costs, and expenses of the fund and the 786 corporation, including repayment of revenue bonds and that 787 portion of the debt service coverage not met by reimbursement 788 premiums, the board shall direct the Office of Insurance 789 Regulation to levy an emergency assessment up to an amount not 790 exceeding the amount of unused assessment authority from a 791 previous contract year or years, plus an additional 4 percent 792 provided that the assessments in the aggregate do not exceed the 793 limits specified in subparagraph 2.

794 6. The assessments otherwise payable to the corporation 795 under this paragraph shall be paid to the fund unless and until 796 the Office of Insurance Regulation and the Florida Surplus Lines 797 Service Office have received from the corporation and the fund a 798 notice, which shall be conclusive and upon which they may rely 799 without further inquiry, that the corporation has issued bonds 800 and the fund has no agreements in effect with local governments 801 under paragraph (c). On or after the date of the notice and until 802 the date the corporation has no bonds outstanding, the fund shall 803 have no right, title, or interest in or to the assessments, 804 except as provided in the fund's agreement with the corporation.

805 7. Emergency assessments are not premium and are not 806 subject to the premium tax, to the surplus lines tax, to any 807 fees, or to any commissions. An insurer is liable for all 808 assessments that it collects and must treat the failure of an 809 insured to pay an assessment as a failure to pay the premium. An 810 insurer is not liable for uncollectible assessments.

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811 8. When an insurer is required to return an unearned 812 premium, it shall also return any collected assessment 813 attributable to the unearned premium. A credit adjustment to the 814 collected assessment may be made by the insurer with regard to 815 future remittances that are payable to the fund or corporation, 816 but the insurer is not entitled to a refund.

9. When a surplus lines insured or an insured who has procured coverage and filed under s. 626.938 is entitled to the return of an unearned premium, the Florida Surplus Lines Service Office shall provide a credit or refund to the agent or such insured for the collected assessment attributable to the unearned premium prior to remitting the emergency assessment collected to the fund or corporation.

10. The exemption of medical malpractice insurance premiums from emergency assessments under this paragraph is repealed May 31, 2010, and medical malpractice insurance premiums shall be subject to emergency assessments attributable to loss events occurring in the contract years commencing on June 1, 2010.

829 (c) Revenue bond issuance through counties or830 municipalities.--

8.31 1. If the board elects to enter into agreements with local 832 governments for the issuance of revenue bonds for the benefit of 833 the fund, the division board shall enter into such contracts with 834 one or more local governments, including agreements providing for 835 the pledge of revenues, as are necessary to effect such issuance. 836 The governing body of a county or municipality is authorized to issue bonds as defined in s. 125.013 or s. 166.101 from time to 837 838 time to fund an assistance program, in conjunction with the 839 Florida Hurricane Catastrophe Fund, for the purposes set forth in

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this section or for the purpose of paying the costs of construction, reconstruction, repair, restoration, and other costs associated with damage to properties of policyholders of covered policies due to the occurrence of a hurricane by assuring that policyholders located in this state are able to recover claims under property insurance policies after a covered event.

2. In order to avoid needless and indiscriminate proliferation, duplication, and fragmentation of such assistance programs, any local government may provide for the payment of fund reimbursements, regardless of whether or not the losses for which reimbursement is made occurred within or outside of the territorial jurisdiction of the local government.

852 The state hereby covenants with holders of bonds issued 3. 853 under this paragraph that the state will not repeal or abrogate 854 the power of the board to direct the Office of Insurance 855 Regulation to levy the assessments and to collect the proceeds of 856 the revenues pledged to the payment of such bonds as long as any 857 such bonds remain outstanding unless adequate provision has been 858 made for the payment of such bonds pursuant to the documents 859 authorizing the issuance of such bonds.

4. There shall be no liability on the part of, and no cause of action shall arise against any members or employees of the governing body of a local government for any actions taken by them in the performance of their duties under this paragraph.

864 (d) Florida Hurricane Catastrophe Fund Finance865 Corporation.--

866 1. In addition to the findings and declarations in867 subsection (1), the Legislature also finds and declares that:

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a. The public benefits corporation created under this
paragraph will provide a mechanism necessary for the costeffective and efficient issuance of bonds. This mechanism will
eliminate unnecessary costs in the bond issuance process, thereby
increasing the amounts available to pay reimbursement for losses
to property sustained as a result of hurricane damage.

b. The purpose of such bonds is to fund reimbursements through the Florida Hurricane Catastrophe Fund to pay for the costs of construction, reconstruction, repair, restoration, and other costs associated with damage to properties of policyholders of covered policies due to the occurrence of a hurricane.

c. The efficacy of the financing mechanism will be enhanced by the corporation's ownership of the assessments, by the insulation of the assessments from possible bankruptcy proceedings, and by covenants of the state with the corporation's bondholders.

2.a. There is created a public benefits corporation, which
is an instrumentality of the state, to be known as the Florida
Hurricane Catastrophe Fund Finance Corporation.

887 The corporation shall operate under a six-member fiveb. 888 member board of directors consisting of the Governor or a 889 designee, the Chief Financial Officer or a designee, the Attorney 890 General or a designee, the Commissioner of the Department of 891 Agriculture and Consumer Services or a designee, the director of 892 the Division of Bond Finance of the State Board of 893 Administration, and the director of the division senior employee 894 of the State Board of Administration responsible for operations 895 of the Florida Hurricane Catastrophe Fund of the State Board of 896 Administration.

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c. The corporation has all of the powers of corporations
under chapter 607 and under chapter 617, subject only to the
provisions of this subsection.

900 d. The corporation may issue bonds and engage in such other
901 financial transactions as are necessary to provide sufficient
902 funds to achieve the purposes of this section.

903 e. The corporation may invest in any of the investments904 authorized under s. 215.47.

905 f. There shall be no liability on the part of, and no cause 906 of action shall arise against, any <u>member of the</u> board <u>of</u> 907 <u>directors</u> members or employees of the corporation for any actions 908 taken by them in the performance of their duties under this 909 paragraph.

910 3.a. In actions under chapter 75 to validate any bonds 911 issued by the corporation, the notice required by s. 75.06 shall 912 be published only in Leon County and in two newspapers of general 913 circulation in the state, and the complaint and order of the 914 court shall be served only on the State Attorney of the Second 915 Judicial Circuit.

916 The state hereby covenants with holders of bonds of the b. 917 corporation that the state will not repeal or abrogate the power 918 of the board to direct the Office of Insurance Regulation to levy 919 the assessments and to collect the proceeds of the revenues 920 pledged to the payment of such bonds as long as any such bonds 921 remain outstanding unless adequate provision has been made for 922 the payment of such bonds pursuant to the documents authorizing 923 the issuance of such bonds.

924 4. The bonds of the corporation are not a debt of the state925 or of any political subdivision, and neither the state nor any

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926 political subdivision is liable on such bonds. The corporation 927 does not have the power to pledge the credit, the revenues, or 928 the taxing power of the state or of any political subdivision. 929 The credit, revenues, or taxing power of the state or of any 930 political subdivision shall not be deemed to be pledged to the 931 payment of any bonds of the corporation.

932 5.a. The property, revenues, and other assets of the 933 corporation; the transactions and operations of the corporation 934 and the income from such transactions and operations; and all 935 bonds issued under this paragraph and interest on such bonds are 936 exempt from taxation by the state and any political subdivision, 937 including the intangibles tax under chapter 199 and the income 938 tax under chapter 220. This exemption does not apply to any tax 939 imposed by chapter 220 on interest, income, or profits on debt 940 obligations owned by corporations other than the Florida 941 Hurricane Catastrophe Fund Finance Corporation.

942 All bonds of the corporation shall be and constitute b. 943 legal investments without limitation for all public bodies of 944 this state; for all banks, trust companies, savings banks, 945 savings associations, savings and loan associations, and 946 investment companies; for all administrators, executors, 947 trustees, and other fiduciaries; for all insurance companies and 948 associations and other persons carrying on an insurance business; 949 and for all other persons who are now or may hereafter be 950 authorized to invest in bonds or other obligations of the state 951 and shall be and constitute eligible securities to be deposited 952 as collateral for the security of any state, county, municipal, 953 or other public funds. This sub-subparagraph shall be considered

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954 as additional and supplemental authority and shall not be limited 955 without specific reference to this sub-subparagraph.

956 The corporation and its corporate existence shall 6. 957 continue until terminated by law; however, no such law shall take 958 effect as long as the corporation has bonds outstanding unless 959 adequate provision has been made for the payment of such bonds 960 pursuant to the documents authorizing the issuance of such bonds. 961 Upon termination of the existence of the corporation, all of its 962 rights and properties in excess of its obligations shall pass to 963 and be vested in the state.

964

(e) Protection of bondholders.--

965 1. As long as the corporation has any bonds outstanding, 966 neither the fund nor the corporation shall have the authority to 967 file a voluntary petition under chapter 9 of the federal 968 Bankruptcy Code or such corresponding chapter or sections as may 969 be in effect, from time to time, and neither any public officer 970 nor any organization, entity, or other person shall authorize the 971 fund or the corporation to be or become a debtor under chapter 9 972 of the federal Bankruptcy Code or such corresponding chapter or 973 sections as may be in effect, from time to time, during any such 974 period.

975 2. The state hereby covenants with holders of bonds of the 976 corporation that the state will not limit or alter the denial of 977 authority under this paragraph or the rights under this section 978 vested in the fund or the corporation to fulfill the terms of any 979 agreements made with such bondholders or in any way impair the 980 rights and remedies of such bondholders as long as any such bonds 981 remain outstanding unless adequate provision has been made for

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982 the payment of such bonds pursuant to the documents authorizing 983 the issuance of such bonds.

984 Notwithstanding any other provision of law, any pledge 3. 985 of or other security interest in revenue, money, accounts, contract rights, general intangibles, or other personal property 986 987 made or created by the fund or the corporation shall be valid, 988 binding, and perfected from the time such pledge is made or other 989 security interest attaches without any physical delivery of the 990 collateral or further act and the lien of any such pledge or 991 other security interest shall be valid, binding, and perfected 992 against all parties having claims of any kind in tort, contract, 993 or otherwise against the fund or the corporation irrespective of 994 whether or not such parties have notice of such claims. No 995 instrument by which such a pledge or security interest is created 996 nor any financing statement need be recorded or filed.

997

(8) (7) ADDITIONAL POWERS AND DUTIES.--

998 The board may authorize the division's procurement of (a) 999 procure reinsurance from reinsurers acceptable to the Office of 1000 Insurance Regulation for the purpose of maximizing the capacity of the fund and may enter into capital market transactions, 1001 1002 including, but not limited to, industry loss warranties, 1003 catastrophe bonds, side-car arrangements, or financial contracts 1004 permissible for the State Board of Administration's board's usage 1005 under s. 215.47(10) and (11), consistent with prudent management of the fund. 1006

(b) In addition to borrowing under subsection (7) (6), the board may also <u>authorize the division to</u> borrow from, or enter into other financing arrangements with, any market sources at prevailing interest rates.

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1011 (C) Each fiscal year, the Legislature shall appropriate 1012 from the investment income of the Florida Hurricane Catastrophe 1013 Fund an amount no less than \$10 million and no more than 35 1014 percent of the investment income based upon the most recent 1015 fiscal year-end audited financial statements for the purpose of 1016 providing funding for local governments, state agencies, public and private educational institutions, and nonprofit organizations 1017 1018 to support programs intended to improve hurricane preparedness, 1019 reduce potential losses in the event of a hurricane, provide 1020 research into means to reduce such losses, educate or inform the 1021 public as to means to reduce hurricane losses, assist the public 1022 in determining the appropriateness of particular upgrades to 1023 structures or in the financing of such upgrades, or protect local 1024 infrastructure from potential damage from a hurricane. Moneys 1025 shall first be available for appropriation under this paragraph 1026 in fiscal year 1997-1998. Moneys in excess of the \$10 million 1027 specified in this paragraph shall not be available for 1028 appropriation under this paragraph if the board State Board of 1029 Administration finds that an appropriation of investment income 1030 from the fund would jeopardize the actuarial soundness of the 1031 fund.

(d) The <u>division</u> board may allow insurers to comply with reporting requirements and reporting format requirements by using alternative methods of reporting if the proper administration of the fund is not thereby impaired and if the alternative methods produce data which is consistent with the purposes of this section.

1038 (e) In order to assure the equitable operation of the fund, 1039 the <u>division</u> board may impose a reasonable fee on an insurer to

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1040 recover costs involved in reprocessing inaccurate, incomplete, or 1041 untimely exposure data submitted by the insurer.

1042 (9) (8) ADVISORY COUNCIL. -- The division State Board of 1043 Administration shall appoint a nine-member advisory council that 1044 consists of an actuary, a meteorologist, an engineer, a 1045 representative of insurers, a representative of insurance agents, 1046 a representative of reinsurers, and three consumers who shall 1047 also be representatives of other affected professions and 1048 industries, to provide the division board with information and 1049 advice in connection with its duties under this section. Members 1050 of the advisory council shall serve at the pleasure of the board 1051 and are eligible for per diem and travel expenses under s. 1052 112.061.

1053 <u>(10) (9)</u> APPLICABILITY OF S. 19, ART. III OF THE STATE 1054 CONSTITUTION.--The Legislature finds that the Florida Hurricane 1055 Catastrophe Fund created by this section is a trust fund 1056 established for bond covenants, indentures, or resolutions within 1057 the meaning of s. 19(f)(3), Art. III of the State Constitution.

1058 <u>(11) (10)</u> VIOLATIONS.--Any violation of this section or of 1059 rules adopted under this section constitutes a violation of the 1060 insurance code.

1061 <u>(12)(11)</u> LEGAL PROCEEDINGS.--The division board is 1062 authorized to take any action necessary to enforce the rules, and 1063 the provisions and requirements of the reimbursement contract, 1064 required by and adopted pursuant to this section.

1065 <u>(13) (12)</u> FEDERAL OR MULTISTATE CATASTROPHIC FUNDS.--Upon 1066 the creation of a federal or multistate catastrophic insurance or 1067 reinsurance program intended to serve purposes similar to the 1068 purposes of the fund created by this section, the division, upon

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1069 <u>approval by the board, State Board of Administration</u> shall 1070 promptly make recommendations to the Legislature for coordination 1071 with the federal or multistate program, for termination of the 1072 fund, or for such other actions as the board finds appropriate in 1073 the circumstances.

1074 <u>(14) (13)</u> REVERSION OF FUND ASSETS UPON TERMINATION.--The 1075 fund, the division, and the duties of the board under this 1076 section may be terminated only by law. Upon termination of the 1077 fund, all assets of the fund shall revert to the General Revenue 1078 Fund.

1079 <u>(15) (14)</u> SEVERABILITY.--If any provision of this section or 1080 its application to any person or circumstance is held invalid, 1081 the invalidity does not affect other provisions or applications 1082 of the section which can be given effect without the invalid 1083 provision or application, and to this end the provisions of this 1084 section are declared severable.

1085 (16) (15) COLLATERAL PROTECTION INSURANCE. -- As used in this 1086 section and ss. 627.311 and 627.351, the term "collateral 1087 protection insurance" means commercial property insurance of 1088 which a creditor is the primary beneficiary and policyholder and 1089 which protects or covers an interest of the creditor arising out 1090 of a credit transaction secured by real or personal property. 1091 Initiation of such coverage is triggered by the mortgagor's 1092 failure to maintain insurance coverage as required by the 1093 mortgage or other lending document. Collateral protection 1094 insurance is not residential coverage.

1095 <u>(17) (16)</u> TEMPORARY EMERGENCY OPTIONS FOR ADDITIONAL 1096 COVERAGE OPTIONS.--

1097

(a) Findings and intent.--

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1098 1099 1. The Legislature finds that:

1099 a. Because of temporary disruptions in the market for 1100 catastrophic reinsurance, many property insurers were unable to procure reinsurance for the 2006 hurricane season with an 1101 1102 attachment point below the insurers' respective Florida Hurricane 1103 Catastrophe Fund attachment points, were unable to procure 1104 sufficient amounts of such reinsurance, or were able to procure 1105 such reinsurance only by incurring substantially higher costs 1106 than in prior years.

b. The reinsurance market problems were responsible, at least in part, for substantial premium increases to many consumers and increases in the number of policies issued by the Citizens Property Insurance Corporation.

1111 c. It is likely that the reinsurance market disruptions 1112 will not significantly abate prior to the 2007 hurricane season.

1113 2. It is the intent of the Legislature to create a 1114 temporary emergency program, applicable to the 2007, 2008, and 1115 2009 hurricane seasons, to address these market disruptions and 1116 enable insurers, at their option, to procure additional coverage 1117 from the Florida Hurricane Catastrophe Fund.

(b) Applicability of other provisions of this section.--All provisions of this section and the rules adopted under this section apply to the program created by this subsection unless specifically superseded by this subsection.

(c) Optional coverage.--For the contract year commencing June 1, 2007, and ending May 31, 2008, the contract year commencing June 1, 2008, and ending May 31, 2009, and the contract year commencing June 1, 2009, and ending May 31, 2010,

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597-05721-08 20082156c1 1126 the board shall offer for each of such years the optional 1127 coverage as provided in this subsection. 1128 (d) Additional definitions. -- As used in this subsection, 1129 the term: "TEACO options" means the temporary emergency additional 1130 1. 1131 coverage options created under this subsection. "TEACO insurer" means an insurer that has opted to 1132 2. 1133 obtain coverage under the TEACO options in addition to the 1134 coverage provided to the insurer under its reimbursement 1135 contract. "TEACO reimbursement premium" means the premium charged 1136 3. by the fund for coverage provided under the TEACO options. 1137 11.38 4. "TEACO retention" means the amount of losses below which

1139 a TEACO insurer is not entitled to reimbursement from the fund 1140 under the TEACO option selected. A TEACO insurer's retention 1141 options shall be calculated as follows:

a. The <u>division</u> board shall calculate and report to each TEACO insurer the TEACO retention multiples. There shall be three TEACO retention multiples for defining coverage. Each multiple shall be calculated by dividing \$3 billion, \$4 billion, or \$5 billion by the total estimated mandatory FHCF reimbursement premium assuming all insurers selected the 90-percent coverage level.

b. The TEACO retention multiples as determined under subsubparagraph a. shall be adjusted to reflect the coverage level elected by the insurer. For insurers electing the 90-percent coverage level, the adjusted retention multiple is 100 percent of the amount determined under sub-subparagraph a. For insurers electing the 75-percent coverage level, the retention multiple is

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1155 120 percent of the amount determined under sub-subparagraph a.
1156 For insurers electing the 45-percent coverage level, the adjusted
1157 retention multiple is 200 percent of the amount determined under
1158 sub-subparagraph a.

1159 c. An insurer shall determine its provisional TEACO 1160 retention by multiplying its estimated mandatory FHCF 1161 reimbursement premium by the applicable adjusted TEACO retention 1162 multiple and shall determine its actual TEACO retention by 1163 multiplying its actual mandatory FHCF reimbursement premium by 1164 the applicable adjusted TEACO retention multiple.

d. For TEACO insurers who experience multiple covered events causing loss during the contract year, the insurer's full TEACO retention shall be applied to each of the covered events causing the two largest losses for that insurer. For other covered events resulting in losses, the TEACO option does not apply and the insurer's retention shall be one-third of the full retention as calculated under paragraph (2) (e).

1172 5. "TEACO addendum" means an addendum to the reimbursement 1173 contract reflecting the obligations of the fund and TEACO 1174 insurers under the program created by this subsection.

1175 1176 6. "FHCF" means the Florida Hurricane Catastrophe Fund.

(e) TEACO addendum.--

1177 1. The TEACO addendum shall provide for reimbursement of 1178 TEACO insurers for covered events occurring during the contract 1179 year, in exchange for the TEACO reimbursement premium paid into 1180 the fund under paragraph (f). Any insurer writing covered 1181 policies has the option of choosing to accept the TEACO addendum 1182 for any of the 3 contract years that the coverage is offered.

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1183 2. The TEACO addendum shall contain a promise by the 1184 <u>division</u> board to reimburse the TEACO insurer for 45 percent, 75 1185 percent, or 90 percent of its losses from each covered event in 1186 excess of the insurer's TEACO retention, plus 5 percent of the 1187 reimbursed losses to cover loss adjustment expenses. The 1188 percentage shall be the same as the coverage level selected by 1189 the insurer under paragraph <u>(5)(b)</u> <del>(4)(b)</del>.

1190 3. The TEACO addendum shall provide that reimbursement 1191 amounts shall not be reduced by reinsurance paid or payable to 1192 the insurer from other sources.

1193 4. The TEACO addendum shall also provide that the 1194 obligation of the division board with respect to all TEACO 1195 addenda shall not exceed an amount equal to two times the 1196 difference between the industry retention level calculated under 1197 paragraph (2)(e) and the \$3 billion, \$4 billion, or \$5 billion 1198 industry TEACO retention level options actually selected, but in no event may the division's board's obligation exceed the actual 1199 1200 claims-paying capacity of the fund plus the additional capacity 1201 created in paragraph (g). If the actual claims-paying capacity 1202 and the additional capacity created under paragraph (g) fall 1203 short of the division's board's obligations under the 1204 reimbursement contract, each insurer's share of the fund's 1205 capacity shall be prorated based on the premium an insurer pays 1206 for its mandatory reimbursement coverage and the premium paid for 1207 its optional TEACO coverage as each such premium bears to the 1208 total premiums paid to the fund times the available capacity.

1209 5. The priorities, schedule, and method of reimbursements 1210 under the TEACO addendum shall be the same as provided under 1211 subsection (5) (4).

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A TEACO insurer's maximum reimbursement for a single 1212 6. 1213 event shall be equal to the product of multiplying its mandatory 1214 FHCF premium by the difference between its FHCF retention 1215 multiple and its TEACO retention multiple under the TEACO option 1216 selected and by the coverage selected under paragraph (5) (b) 1217 (4) (b), plus an additional 5 percent for loss adjustment 1218 expenses. A TEACO insurer's maximum reimbursement under the TEACO 1219 option selected for a TEACO insurer's two largest events shall be 1220 twice its maximum reimbursement for a single event.

1221

(f) TEACO reimbursement premiums.--

1222 1. Each TEACO insurer shall pay to the fund, in the manner 1223 and at the time provided in the reimbursement contract for 1224 payment of reimbursement premiums, a TEACO reimbursement premium 1225 calculated as specified in this paragraph.

1226 2. The insurer's TEACO reimbursement premium associated 1227 with the \$3 billion retention option shall be equal to 85 percent 1228 of a TEACO insurer's maximum reimbursement for a single event as 1229 calculated under subparagraph (e)6. The TEACO reimbursement 1230 premium associated with the \$4 billion retention option shall be 1231 equal to 80 percent of a TEACO insurer's maximum reimbursement 1232 for a single event as calculated under subparagraph (e)6. The 1233 TEACO premium associated with the \$5 billion retention option 1234 shall be equal to 75 percent of a TEACO insurer's maximum 1235 reimbursement for a single event as calculated under subparagraph (e)6. 1236

(g) Effect on claims-paying capacity of the fund.--For the contract term commencing June 1, 2007, the contract year commencing June 1, 2008, and the contract term beginning June 1, 2009, the program created by this subsection shall increase the

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claims-paying capacity of the fund as provided in subparagraph 1241 1242 (5) (c)1. (4) (c)1. by an amount equal to two times the difference 1243 between the industry retention level calculated under paragraph 1244 (2) (e) and the \$3 billion industry TEACO retention level specified in sub-subparagraph (d)4.a. The additional capacity 1245 1246 shall apply only to the additional coverage provided by the TEACO 1247 option and shall not otherwise affect any insurer's reimbursement 1248 from the fund.

1249

1250

(18) (17) TEMPORARY INCREASE IN COVERAGE LIMIT OPTIONS.--

(a) Findings and intent.--

1251

1. The Legislature finds that:

a. Because of temporary disruptions in the market for
catastrophic reinsurance, many property insurers were unable to
procure sufficient amounts of reinsurance for the 2006 hurricane
season or were able to procure such reinsurance only by incurring
substantially higher costs than in prior years.

b. The reinsurance market problems were responsible, at least in part, for substantial premium increases to many consumers and increases in the number of policies issued by Citizens Property Insurance Corporation.

1261 c. It is likely that the reinsurance market disruptions 1262 will not significantly abate prior to the <u>2008</u> <del>2007</del> hurricane 1263 season.

1264 2. It is the intent of the Legislature to create options 1265 for insurers to purchase a temporary increased coverage limit 1266 above the statutorily determined limit in subparagraph (4)(c)1., 1267 applicable for the 2007, 2008, and 2009 hurricane seasons, to 1268 address market disruptions and enable insurers, at their option,

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1269 to procure additional coverage from the Florida Hurricane 1270 Catastrophe Fund.

(b) Applicability of other provisions of this section.--All provisions of this section and the rules adopted under this section apply to the coverage created by this subsection unless specifically superseded by provisions in this subsection.

(c) Optional coverage.--For the contract year commencing June 1, 2007, and ending May 31, 2008, the contract year commencing June 1, 2008, and ending May 31, 2009, and the contract year commencing June 1, 2009, and ending May 31, 2010, the board shall offer, for each of such years, the optional coverage as provided in this subsection.

1281 (d) Additional definitions.--As used in this subsection, 1282 the term:

1283

1. "FHCF" means Florida Hurricane Catastrophe Fund.

1284 2. "FHCF reimbursement premium" means the premium paid by 1285 an insurer for its coverage as a mandatory participant in the 1286 FHCF, but does not include additional premiums for optional 1287 coverages.

3. "Payout multiple" means the number or multiple created by dividing the statutorily defined claims-paying capacity as determined in subparagraph <u>(5)(c)1.</u> <del>(4)(c)1</del>. by the aggregate reimbursement premiums paid by all insurers estimated or projected as of calendar year-end.

1293

4. "TICL" means the temporary increase in coverage limit.

1294 5. "TICL options" means the temporary increase in coverage 1295 options created under this subsection.

1296 6. "TICL insurer" means an insurer that has opted to obtain 1297 coverage under the TICL options addendum in addition to the

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1298 coverage provided to the insurer under its FHCF reimbursement 1299 contract.

1300 7. "TICL reimbursement premium" means the premium charged1301 by the fund for coverage provided under the TICL option.

1302 8. "TICL coverage multiple" means the coverage multiple
1303 when multiplied by an insurer's <u>FHCF's</u> reimbursement premium that
1304 defines the temporary increase in coverage limit.

9. "TICL coverage" means the coverage for an insurer's losses above the insurer's statutorily determined claims-paying capacity based on the claims-paying limit in subparagraph
(5)(c)1. (4)(c)1., which an insurer selects as its temporary increase in coverage from the fund under the TICL options selected. A TICL insurer's increased coverage limit options shall be calculated as follows:

1312 The division board shall calculate and report to each a. 1313 TICL insurer the TICL coverage multiples based on 9 12 options for increasing the insurer's FHCF coverage limit. Each TICL 1314 coverage multiple shall be calculated by dividing \$1 billion, \$2 1315 billion, \$3 billion, \$4 billion, \$5 billion, \$6 billion, \$7 1316 billion, \$8 billion, and \$9 billion, <del>\$10 billion, \$11 billion, or</del> 1317 1318 \$12 billion by the total estimated aggregate FHCF reimbursement 1319 premiums for the 2007-2008 contract year, the 2008-2009 contract 1320 year  $\tau$  and the 2009-2010 contract year.

b. The TICL insurer's increased coverage shall be the FHCF reimbursement premium multiplied by the TICL coverage multiple for the TICL option selected. In order to determine an insurer's total limit of coverage, an insurer shall add its TICL coverage multiple to its payout multiple. The total shall represent a number that, when multiplied by an insurer's FHCF reimbursement

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1327 premium for a given reimbursement contract year, defines an 1328 insurer's total limit of FHCF reimbursement coverage for that 1329 reimbursement contract year.

1330 10. "TICL options addendum" means an addendum to the 1331 reimbursement contract reflecting the obligations of the fund and 1332 insurers selecting an option to increase an insurer's FHCF 1333 coverage limit.

1334

(e) TICL options addendum. --

1335 The TICL options addendum shall provide for 1. 1336 reimbursement of TICL insurers for covered events occurring between June 1, 2007, and May 31, 2008, and between June 1, 2008, 1337 1338 and May 31, 2009, or between June 1, 2009, and May 31, 2010, in 1339 exchange for the TICL reimbursement premium paid into the fund 1340 under paragraph (f). Any insurer writing covered policies has the 1341 option of selecting an increased limit of coverage under the TICL 1342 options addendum and shall select such coverage at the time that it executes the FHCF reimbursement contract. 1343

1344 The TICL addendum shall contain a promise by the board 2. 1345 to reimburse the TICL insurer for 70 percent of the insurer's 45 percent, 75 percent, or 90 percent of its losses from each 1346 1347 covered event in excess of the insurer's mandatory coverage, 1348 including retention, plus 5 percent of the reimbursed losses to 1349 cover loss adjustment expenses from each covered event. The 1350 percentage shall be the same as the coverage level selected by 1351 the insurer under paragraph (4) (b).

1352 3. The TICL addendum shall provide that reimbursement 1353 amounts shall not be reduced by reinsurance paid or payable to 1354 the insurer from other sources.

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1355 4. The priorities, schedule, and method of reimbursements
1356 under the TICL addendum shall be the same as provided under
1357 subsection (5) (4).

(f) TICL reimbursement premiums.--Each TICL insurer shall pay to the fund, in the manner and at the time provided in the reimbursement contract for payment of reimbursement premiums, a TICL reimbursement premium determined as specified in subsection (5).

1363 (g) Effect on claims-paying capacity of the fund. -- For the 1364 contract terms commencing June 1, 2007, June 1, 2008, and June 1, 1365 2009, the program created by this subsection shall increase the 1366 claims-paying capacity of the fund as provided in subparagraph 1367 (5)(c)1. (4)(c)1. by an amount not to exceed \$9 \$12 billion and 1368 shall depend on the TICL coverage options selected and the number 1369 of insurers that select the TICL optional coverage. The 1370 additional capacity shall apply only to the additional coverage 1371 provided under the TICL options and shall not otherwise affect 1372 any insurer's reimbursement from the fund if the insurer chooses 1373 not to select the temporary option to increase its limit of 1374 coverage under the FHCF.

1375 (h) Increasing the claims-paying capacity of the fund. -- For 1376 the contract years commencing June 1, 2007, June 1, 2008, and 1377 June 1, 2009, the board may increase the claims-paying capacity 1378 of the fund as provided in paragraph (g) by an amount not to 1379 exceed \$4 billion in four \$1 billion options and shall depend on 1380 the TICL coverage options selected and the number of insurers 1381 that select the TICL optional coverage. Each insurer's TICL 1382 premium shall be calculated based upon the additional limit of 1383 increased coverage that the insurer selects. Such limit is

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determined by multiplying the TICL multiple associated with one of the four options times the insurer's FHCF reimbursement premium. The reimbursement premium associated with the additional coverage provided in this paragraph shall be determined as specified in subsection (6) (5).

1389 Section 2. Section 215.557, Florida Statutes, is amended to 1390 read:

1391 215.557 Reports of insured values.--The reports of insured 1392 values under covered policies by zip code submitted to the 1393 <u>Division of the Florida Hurricane Catastrophe Fund</u> State Board of 1394 Administration pursuant to s. 215.555, as created by s. 1, ch. 1395 93-409, Laws of Florida, or similar legislation, are confidential 1396 and exempt from the provisions of s. 119.07(1) and s. 24(a), Art. 1397 I of the State Constitution.

1398Section 3. Paragraph (h) of subsection (4) of section1399215.5586, Florida Statutes, is amended to read:

1400 215.5586 My Safe Florida Home Program. -- There is 1401 established within the Department of Financial Services the My 1402 Safe Florida Home Program. The department shall provide fiscal accountability, contract management, and strategic leadership for 1403 1404 the program, consistent with this section. This section does not 1405 create an entitlement for property owners or obligate the state 1406 in any way to fund the inspection or retrofitting of residential 1407 property in this state. Implementation of this program is subject 1408 to annual legislative appropriations. It is the intent of the 1409 Legislature that the My Safe Florida Home Program provide 1410 inspections for at least 400,000 site-built, single-family, 1411 residential properties and provide grants to at least 35,000 applicants before June 30, 2009. The program shall develop and 1412

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1413
      implement a comprehensive and coordinated approach for hurricane
1414
      damage mitigation that shall include the following:
1415
            (4) ADVISORY COUNCIL. -- There is created an advisory council
1416
      to provide advice and assistance to the department regarding
1417
      administration of the program. The advisory council shall consist
1418
      of:
                The director senior officer of the Division of the
1419
            (h)
1420
      Florida Hurricane Catastrophe Fund.
1421
1422
      Members appointed under paragraphs (a)-(d) shall serve at the
1423
      pleasure of the Financial Services Commission. Members appointed
1424
      under paragraphs (e) and (f) shall serve at the pleasure of the
1425
      appointing officer. All other members shall serve voting ex
1426
      officio. Members of the advisory council shall serve without
      compensation but may receive reimbursement as provided in s.
1427
1428
      112.061 for per diem and travel expenses incurred in the
1429
      performance of their official duties.
1430
           Section 4. Subsection (1) of section 215.559, Florida
1431
      Statutes, is amended to read:
1432
           215.559 Hurricane Loss Mitigation Program .--
1433
            (1)
                There is created a Hurricane Loss Mitigation Program.
1434
      The Legislature shall annually appropriate $10 million of the
1435
      moneys authorized for appropriation under s. 215.555(8) s.
1436
      215.555(7)(c) from the Florida Hurricane Catastrophe Fund to the
1437
      Department of Community Affairs for the purposes set forth in
1438
      this section.
1439
           Section 5.
                       Subsection (2) and paragraph (a) of subsection
1440
      (3) of section 215.5595, Florida Statutes, are amended to read:
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1441

215.5595 Insurance Capital Build-Up Incentive Program.--

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(2) The purpose of this section is to provide surplus notes
to new or existing authorized residential property insurers under
the Insurance Capital Build-Up Incentive Program administered by
the <u>Division of the Florida Hurricane Catastrophe Fund of the</u>
State Board of Administration, under the following conditions:

(a) The amount of the surplus note for any insurer or insurer group, other than an insurer writing only manufactured housing policies, may not exceed \$25 million or 20 percent of the total amount of funds available under the program, whichever is greater. The amount of the surplus note for any insurer or insurer group writing residential property insurance covering only manufactured housing may not exceed \$7 million.

1454 The insurer must contribute an amount of new capital to (b) 1455 its surplus which is at least equal to the amount of the surplus 1456 note and must apply to the board by July 1, 2006. If an insurer 1457 applies after July 1, 2006, but before June 1, 2007, the amount of the surplus note is limited to one-half of the new capital 1458 1459 that the insurer contributes to its surplus, except that an insurer writing only manufactured housing policies is eligible to 1460 receive a surplus note of up to \$7 million. For purposes of this 1461 1462 section, new capital must be in the form of cash or cash 1463 equivalents as specified in s. 625.012(1).

(c) The insurer's surplus, new capital, and the surplus note must total at least \$50 million, except for insurers writing residential property insurance covering only manufactured housing. The insurer's surplus, new capital, and the surplus note must total at least \$14 million for insurers writing only residential property insurance covering manufactured housing policies as provided in paragraph (a).

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1471 (d) The insurer must commit to meeting a minimum writing 1472 ratio of net written premium to surplus of at least 2:1 for the 1473 term of the surplus note, which shall be determined by the Office of Insurance Regulation and certified quarterly to the board. For 1474 1475 this purpose, the term "net written premium" means net written 1476 premium for residential property insurance in Florida, including the peril of wind, and "surplus" refers to the entire surplus of 1477 1478 the insurer. If the required ratio is not maintained during the 1479 term of the surplus note, the board may increase the interest 1480 rate, accelerate the repayment of interest and principal, or shorten the term of the surplus note, subject to approval by the 1481 1482 Commissioner of Insurance of payments by the insurer of principal 1483 and interest as provided in paragraph (f).

1484 (e) If the requirements of this section are met, the board 1485 may approve an application by an insurer for a surplus note, 1486 unless the board determines that the financial condition of the insurer and its business plan for writing residential property 1487 1488 insurance in Florida places an unreasonably high level of 1489 financial risk to the state of nonpayment in full of the interest and principal. The board shall consult with the Office of 1490 1491 Insurance Regulation and may contract with independent financial 1492 and insurance consultants in making this determination.

(f) The surplus note must be repayable to the state with a term of 20 years. The surplus note shall accrue interest on the unpaid principal balance at a rate equivalent to the 10-year U.S. Treasury Bond rate, require the payment only of interest during the first 3 years, and include such other terms as approved by the board. Payment of principal or interest by the insurer on the surplus note must be approved by the Commissioner of Insurance,

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who shall approve such payment unless the commissioner determines that such payment will substantially impair the financial condition of the insurer. If such a determination is made, the commissioner shall approve such payment that will not substantially impair the financial condition of the insurer.

1505 (q) The total amount of funds available for the program is 1506 limited to the amount appropriated by the Legislature for this 1507 purpose. If the amount of surplus notes requested by insurers 1508 exceeds the amount of funds available, the board may prioritize 1509 insurers that are eligible and approved, with priority for 1510 funding given to insurers writing only manufactured housing 1511 policies, regardless of the date of application, based on the 1512 financial strength of the insurer, the viability of its proposed 1513 business plan for writing additional residential property 1514 insurance in the state, and the effect on competition in the 1515 residential property insurance market. Between insurers writing 1516 residential property insurance covering manufactured housing, 1517 priority shall be given to the insurer writing the highest 1518 percentage of its policies covering manufactured housing.

(h) The board may allocate portions of the funds available for the program and establish dates for insurers to apply for surplus notes from such allocation which are earlier than the dates established in paragraph (b).

(i) Notwithstanding paragraph (d), a newly formed manufactured housing insurer that is eligible for a surplus note under this section shall meet the premium to surplus ratio provisions of s. 624.4095.

1527 (j) As used in this section, "an insurer writing only 1528 manufactured housing policies" includes:

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1529 1. A Florida domiciled insurer that begins writing personal 1530 lines residential manufactured housing policies in Florida after 1531 March 1, 2007, and that removes a minimum of 50,000 policies from 1532 Citizens Property Insurance Corporation without accepting a 1533 bonus, provided at least 25 percent of its policies cover 1534 manufactured housing. Such an insurer may count any funds above 1535 the minimum capital and surplus requirement that were contributed 1536 into the insurer after March 1, 2007, as new capital under this 1537 section.

15382. A Florida domiciled insurer that writes at least 401539percent of its policies covering manufactured housing in Florida.

1540

(3) As used in this section, the term:

1541(a) "Board" means the Division of the Florida Hurricane1542Catastrophe Fund of theState Board of Administration.

Section 6. Paragraph (c) of subsection (1), paragraphs (a), (b), (d), (f), and (g) of subsection (2), and paragraph (b) of subsection (3) of section 627.0628, Florida Statutes, are amended to read:

1547 627.0628 Florida Commission on Hurricane Loss Projection 1548 Methodology; public records exemption; public meetings 1549 exemption.--

1550

(1) LEGISLATIVE FINDINGS AND INTENT.--

(c) It is the intent of the Legislature to create the Florida Commission on Hurricane Loss Projection Methodology as a panel of experts to provide the most actuarially sophisticated guidelines and standards for projection of hurricane losses possible, given the current state of actuarial science. It is the further intent of the Legislature that such standards and guidelines must be used by the <u>Division of the Florida Hurricane</u>

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1558 <u>Catastrophe Fund of the</u> State Board of Administration in 1559 developing reimbursement premium rates for the Florida Hurricane 1560 Catastrophe Fund, and, subject to paragraph (3)(c), may be used 1561 by insurers in rate filings under s. 627.062 unless the way in 1562 which such standards and guidelines were applied by the insurer 1563 was erroneous, as shown by a preponderance of the evidence.

1564

(2) COMMISSION CREATED.--

1565 There is created the Florida Commission on Hurricane (a) 1566 Loss Projection Methodology, which is assigned to the Division of 1567 the Florida Hurricane Catastrophe Fund of the State Board of 1568 Administration. For the purposes of this section, the term 1569 "commission" means the Florida Commission on Hurricane Loss 1570 Projection Methodology. The commission shall be administratively 1571 housed within the State Board of Administration, but it shall 1572 independently exercise the powers and duties specified in this 1573 section.

1574 (b) The commission shall consist of the following 11 1575 members:

1576

1. The insurance consumer advocate.

1577 2. The <u>director of the Division of the Florida Hurricane</u>
 1578 <u>Catastrophe Fund</u> senior employee of the State Board of
 1579 Administration responsible for operations of the Florida
 1580 <u>Hurricane Catastrophe Fund</u>.

15813. The Executive Director of the Citizens Property1582Insurance Corporation.

15834. The Director of the Division of Emergency Management of1584the Department of Community Affairs.

1585 5. The actuary member of the Florida Hurricane Catastrophe 1586 Fund Advisory Council.

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1587 6. An employee of the office who is an actuary responsible1588 for property insurance rate filings and who is appointed by the1589 director of the office.

1590 7. Five members appointed by the Chief Financial Officer,1591 as follows:

a. An actuary who is employed full time by a property and casualty insurer which was responsible for at least 1 percent of the aggregate statewide direct written premium for homeowner's insurance in the calendar year preceding the member's appointment to the commission.

b. An expert in insurance finance who is a full-time member
of the faculty of the State University System and who has a
background in actuarial science.

1600 c. An expert in statistics who is a full-time member of the 1601 faculty of the State University System and who has a background 1602 in insurance.

1603 d. An expert in computer system design who is a full-time1604 member of the faculty of the State University System.

1605 e. An expert in meteorology who is a full-time member of 1606 the faculty of the State University System and who specializes in 1607 hurricanes.

(d) The <u>board of the Division of the Florida Hurricane</u>
(d) The <u>board of the Division of the Florida Hurricane</u>
(e) <u>Catastrophe Fund of the</u> State Board of Administration shall
annually appoint one of the members of the commission to serve as
(f) chair.

(f) The <u>Division of the Florida Hurricane Catastrophe Fund</u>
of the State Board of Administration shall, as a cost of
administration of the Florida Hurricane Catastrophe Fund, provide
for travel, expenses, and staff support for the commission.

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1616 (q) There shall be no liability on the part of, and no 1617 cause of action of any nature shall arise against, any member of 1618 the commission, any member of the State Board of Administration, or any employee of the Division of the Florida Hurricane 1619 1620 Catastrophe Fund of the State Board of Administration for any 1621 action taken in the performance of their duties under this 1622 section. In addition, the commission may, in writing, waive any 1623 potential cause of action for negligence of a consultant, 1624 contractor, or contract employee engaged to assist the 1625 commission.

1626

(3) ADOPTION AND EFFECT OF STANDARDS AND GUIDELINES.--

(b) In establishing reimbursement premiums for the Florida
Hurricane Catastrophe Fund, the <u>Division of the Florida Hurricane</u>
<u>Catastrophe Fund</u> State Board of Administration must, to the
extent feasible, employ actuarial methods, principles, standards,
models, or output ranges found by the commission to be accurate
or reliable.

1633

Section 7. This act shall take effect June 1, 2008.