By Senator Fasano

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A bill to be entitled An act relating to title insurance; creating s. 626.84202, F.S.; authorizing a title insurance agent or agency to make reasonable charges for certain services; prohibiting such charges from being part of the premium or rate charged by the title insurer for the issuance of the title insurance form, policy, commitment, or contract issued in connection therewith; requiring that the agent or agency annually file certain information with the Department of Financial Services; requiring that the department publish certain information; defining the term "predatory pricing"; prohibiting the practice of predatory pricing with respect to certain services; amending s. 626.9541, F.S.; authorizing the rebate or abatement of an attorney's fee for certain professional services if such rebate or abatement does not violate state law; amending s. 627.7711, F.S.; expanding the definition of the term "premium" to include certain endorsements, commitments, or other contracts, as well as a formula by which the premium is calculated; creating s. 627.7712, F.S.; authorizing a title insurer to make reasonable charges for certain services; prohibiting such charges from being part of the rate charged by the title insurer for the issuance of the title insurance form, policy, commitment, or contract issued in connection therewith; requiring that the agent or agency annually file certain information with the department; requiring that the department publish certain information; authorizing the department

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and the Office of Insurance Regulation to jointly publish certain information; prohibiting the practice of predatory pricing as defined by state law with respect to certain services; amending s. 627.780, F.S.; prohibiting a person from knowingly quoting, charging, accepting, collecting, or receiving premium for title insurance other than the premium approved by the office; amending s. 627.782, F.S.; providing for the approval of rates by the office; requiring that each title insurer make an annual filing with the office on or before a specified deadline demonstrating that a rate is actuarially sound; providing that rates for the required filing do not include certain charges; providing methods by which an insurer may satisfy filing requirements; requiring that the office review filings and issue a notice of intent to approve or a notice of intent to disapprove within a specified period following the date on which the office receives such filing; providing that such notice constitutes agency action; providing that requests for additional information do not toll the notice period during any proceedings or judicial review involving the filing; requiring that a rate be deemed approved under certain circumstances; requiring that the office review each filing to determine whether the filing is excessive, inadequate, or unfairly discriminatory; requiring that the office consider certain factors when making such determination; providing standards upon which a finding that a rate is excessive, inadequate, or unfairly

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discriminatory may be based; authorizing the office to require an insurer to provide, at the insurer's expense, any additional information necessary to evaluate the condition of the company and the reasonableness of the filing; authorizing the office to review certain information at any time; providing procedures for instances in which the office finds that a rate might be excessive, inadequate, or unfairly discriminatory; providing that an insurer must prove by a preponderance of the evidence that a rate is not excessive, inadequate, or unfairly discriminatory; authorizing the office to disapprove certain rate increase without fulfilling notice requirements; requiring that the chief executive officer and chief actuary of a title insurer certify certain information when submitting a rate filing; providing that it is a violation of state law to knowingly make a false certification of such information; providing penalties; providing that the failure to provide such certificate results in a filing being disapproved without prejudice; authorizing an insurer to refile such a disapproved filing; authorizing an insurer to apply for an extension of the period for submission of a rate filing under certain circumstances; authorizing the office to exempt an insurer from filing rates or rate certifications under certain circumstances; authorizing the office to take certain actions if an insurer fails to meet filing requirements or untimely submits a filing; deleting a requirement that the commission

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adopt rules specifying the percentage of premium required to be retained by the title insurer; authorizing the Financial Services Commission to adopt rules; repealing s. 627.783, F.S., relating to title insurance rate deviation; providing an effective date.

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

Section 1. Section 626.84202, Florida Statutes, is created to read:

## 626.84202 Charges for services.--

- (1) A title insurance agent or agency may make a reasonable charge for primary title services, title searches, or closing services contracted for or performed. Any charges issued pursuant to this section may not be a part of the premium or rate charged by the title insurer for the issuance of the title insurance form, policy, commitment, or contract issued in connection therewith. The agent or agency must annually file with the department the amount of each such charge together with related information on a form adopted by the department. The department shall publicize the information collected from agents or agencies pursuant to this section on its website or otherwise in a manner sufficient to apprise the title insurance-buying public of costs for such services.
- (2) Charges for services or components of services set
  forth in subsection (1) must not constitute predatory pricing.
  For the purposes of this section, "predatory pricing" means
  charges associated with services as described in subsection (1)
  which are set below cost or which sacrifice present revenues for

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the purpose of driving out or reducing competition in the title insurance market for such services or related components with the intent to recoup revenue losses through subsequently higher prices or greater business volume.

- Section 2. Paragraph (h) of subsection (1) of section 626.9541, Florida Statutes, is amended to read:
- 626.9541 Unfair methods of competition and unfair or deceptive acts or practices defined.--
- (1) UNFAIR METHODS OF COMPETITION AND UNFAIR OR DECEPTIVE ACTS.—The following are defined as unfair methods of competition and unfair or deceptive acts or practices:
  - (h) Unlawful rebates.--
- 1. Except as otherwise expressly provided by law, or in an applicable filing with the office, knowingly:
- a. Permitting, or offering to make, or making, any contract or agreement as to such contract other than as plainly expressed in the insurance contract issued thereon;
- b. Paying, allowing, or giving, or offering to pay, allow, or give, directly or indirectly, as inducement to such insurance contract, any unlawful rebate of premiums payable on the contract, any special favor or advantage in the dividends or other benefits thereon, or any valuable consideration or inducement whatever not specified in the contract;
- c. Giving, selling, or purchasing, or offering to give, sell, or purchase, as inducement to such insurance contract or in connection therewith, any stocks, bonds, or other securities of any insurance company or other corporation, association, or partnership, or any dividends or profits accrued thereon, or

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anything of value whatsoever not specified in the insurance contract.

- 2. Nothing in paragraph (g) or subparagraph 1. of this paragraph shall be construed as including within the definition of discrimination or unlawful rebates:
- a. In the case of any contract of life insurance or life annuity, paying bonuses to all policyholders or otherwise abating their premiums in whole or in part out of surplus accumulated from nonparticipating insurance; provided that any such bonuses or abatement of premiums is fair and equitable to all policyholders and for the best interests of the company and its policyholders.
- b. In the case of life insurance policies issued on the industrial debit plan, making allowance to policyholders who have continuously for a specified period made premium payments directly to an office of the insurer in an amount which fairly represents the saving in collection expenses.
- c. Readjustment of the rate of premium for a group insurance policy based on the loss or expense thereunder, at the end of the first or any subsequent policy year of insurance thereunder, which may be made retroactive only for such policy year.
- d. Issuance of life insurance policies or annuity contracts at rates less than the usual rates of premiums for such policies or contracts, as group insurance or employee insurance as defined in this code.
- e. Issuing life or disability insurance policies on a salary savings, bank draft, preauthorized check, payroll

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deduction, or other similar plan at a reduced rate reasonably related to the savings made by the use of such plan.

- 3.a. No title insurer, or any member, employee, attorney, agent, or agency thereof, shall pay, allow, or give, or offer to pay, allow, or give, directly or indirectly, as inducement to title insurance, or after such insurance has been effected, any rebate or abatement of the premium or any other charge or fee, or provide any special favor or advantage, or any monetary consideration or inducement whatever.
- b. Nothing in this subparagraph shall be construed as prohibiting the payment of fees to attorneys at law duly licensed to practice law in the courts of this state, for professional services, or as prohibiting the payment of earned portions of the premium to duly appointed agents or agencies who actually perform services for the title insurer. Nothing in this subparagraph shall be construed as prohibiting a rebate or abatement of an attorney's fee charged for professional services, or that portion of the premium that is not required to be retained by the insurer pursuant to s. 627.782(1), or any other agent or agency charge or fee to the person responsible for paying the premium, charge, or fee if the agent or agency rebate or abatement does not violate the provisions of s. 626.84202.
- c. No insured named in a policy, or any other person directly or indirectly connected with the transaction involving the issuance of such policy, including, but not limited to, any mortgage broker, real estate broker, builder, or attorney, any employee, agent, agency, or representative thereof, or any other person whatsoever, shall knowingly receive or accept, directly or indirectly, any rebate or abatement of any portion of the title

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insurance premium or of any other charge or fee or any monetary consideration or inducement whatsoever, except as set forth in sub-subparagraph b.; provided, in no event shall any portion of the attorney's fee, any portion of the premium that is not required to be retained by the insurer pursuant to s. 627.782(1), any agent charge or fee, or any other monetary consideration or inducement be paid directly or indirectly for the referral of title insurance business.

Section 3. Subsection (2) of section 627.7711, Florida Statutes, is amended to read:

627.7711 Definitions.--As used in this part, the term:

"Premium" means the charge, as specified by rule of the commission, that is made by a title insurer for a title insurance policy, endorsement, commitment, or other contract for, including the charge for performance of primary title services by a title insurer or title insurance agent or agency, and incurring the risks incident to the such policy, endorsement, commitment, or other contract under the several classifications of title insurance contracts and forms, and upon which charge a premium tax is paid under s. 624.509. As used in this part or in any other law, with respect to title insurance, the word "premium" may include a reasonable sales commission but may does not include a commission or any reimbursement for primary title services, a title search, or closing services, or a component thereof performed by a title insurer, title insurance agent, or title insurance agency. Premium shall be calculated by multiplying the approved rate by the amount of the title insurance limits provided, divided by 1,000.

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Section 4. Section 627.7712, Florida Statutes, is created to read:

## 627.7712 Charges for services.--

- (1) A title insurer may make a reasonable charge for primary title services, title searches, or closing services contracted for or performed. Any charges issued pursuant to this section may not be a part of the premium or rate charged by the title insurer for the issuance of the title insurance form, policy, commitment, or contract issued in connection therewith. The agent or agency must annually file with the department the amount of each such charge, together with related information on a form adopted by the department. The department shall publicize the information collected from agents or agencies pursuant to this section on its website or otherwise in a manner sufficient to apprise the title-insurance-buying public of costs for such services. The office and the department may jointly publicize information collected pursuant to s. 626.84202 for the purposes of facilitating the distribution of such information to the public.
- (2) Charges for services or components of services set forth in subsection (1) must not constitute predatory pricing. For purposes of this section, "predatory pricing" has the same meaning as in s. 626.84202(2).
- Section 5. Subsection (1) of section 627.780, Florida Statutes, is amended to read:
  - 627.780 Illegal dealings in premium. --
- (1) A person may not knowingly quote, charge, accept, collect, or receive a premium for title insurance other than the

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premium approved by the office adopted by the commission, except as provided in s. 626.9541(1)(h)3.b.

Section 6. Section 627.782, Florida Statutes, is amended to read:

627.782 Approval Adoption of rates.--

- (1) Each title insurer shall make an annual filing with the Office of Insurance Regulation no later than 12 months after the date on which the title insurer submitted its previous filing which demonstrates that the rate is actuarially sound. Rates for the required filing do not include the charges for primary services, title searches, or closing services as defined in s. 627.7711.
- (a) The filing requirements of this section must be satisfied by one of the following methods:
- 1. A rate filing prepared by an actuary which contains documentation demonstrating that the proposed rates are not excessive, inadequate, or unfairly discriminatory pursuant to the applicable rating laws or rules of the commission.
- 2. If no rate change is proposed, a filing consisting of a certification by an actuary that the existing rate level produces rates that are actuarially sound and not inadequate.
- notice of intent to approve or a notice of intent to disapprove within 90 days after the date on which it receives the filing.

  The notice of intent to approve and the notice of intent to disapprove constitute agency action for purposes of chapter 120.

  Requests for supporting information, requests for mathematical or mechanical corrections, or notification to the insurer by the office of its preliminary findings do not toll the 90-day period

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during any such proceedings or subsequent judicial review. The rate shall be deemed approved if the office does not issue a notice of intent to approve or a notice of intent to disapprove within 90 days after the date on which it receives the filing.

- (c) Upon receiving a rate filing, the office shall review the rate filing to determine if the rate is excessive, inadequate, or unfairly discriminatory. In making such determination, the office shall, in accordance with generally accepted and reasonable actuarial principles and techniques, consider the following factors:
- 1. Each title insurer's loss experience and prospective loss experience under closing protection letters and policy liabilities.
- 2. A reasonable margin for profit and contingencies, including contingent liability under s. 627.7865, sufficient to allow title insurers to earn a rate of return on their capital which will attract and retain adequate capital investment in the title insurance business.
- 3. Past expenses and prospective expenses for the administration and handling of risks.
  - 4. Liability for defalcation.
- $\underline{\text{5.}}$  The degree of competition among insurers for the risk insured.
- 6. Investment income reasonably expected by the insurer, consistent with the insurer's investment practices, from investable premiums anticipated in the filing, plus any other expected income from currently invested assets representing the amount expected on unearned premium reserves and loss reserves. The commission may adopt rules using reasonable techniques of

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actuarial science and economics to specify the manner in which insurers must calculate investment income attributable to such classes of insurance written in this state and the manner in which such investment income must be used in the calculation of insurance rates. The manner of calculation shall contemplate allowances for an underwriting profit factor and investment income that produce a reasonable rate of return. However, investment income from invested surplus may not be considered.

- 7. The reasonableness of the judgment reflected in the filing.
- 8. Dividends, savings, or unabsorbed premium deposits allowed or returned to Florida policyholders, members, or subscribers.
  - 9. The adequacy of loss reserves.
  - 10. The cost of reinsurance.
- 11. Trend factors, including trends in actual losses per insured unit for the insurer making the filing.
- 12. Other relevant factors that affect the frequency or severity of claims or upon expenses.
- (d) After consideration of the rate factors provided in paragraph (a), a rate may be found by the office to be excessive, inadequate, or unfairly discriminatory based upon the following standards:
- 1. Rates shall be deemed excessive if they are likely to produce a profit from Florida business which is unreasonably high in relation to the risk involved in the class of business or if expenses are unreasonably high in relation to services rendered.
- 2. Rates shall be deemed excessive if, among other things, the rate structure established by a stock insurance company

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provides for the replenishment of surpluses from premiums and the replenishment is necessitated by investment losses.

- 3. Rates shall be deemed inadequate if the rates and the investment income attributable to such rates are clearly insufficient to sustain projected losses and expenses in the class of business to which they apply.
- 4. A rate shall be deemed inadequate as to the premium charged to a risk or group of risks if discounts or credits that exceed a reasonable reflection of expense savings and reasonably expected loss experience from the risk or group of risks are allowed.
- 5. A rate shall be deemed unfairly discriminatory as to a risk or group of risks if the application of premium discounts, credits, or surcharges among such risks does not bear a reasonable relationship to the expected loss and expense experience among the various risks.
- (e) When reviewing a rate filing, the office may require the insurer to provide at the insurer's expense any information necessary to evaluate the condition of the company and the reasonableness of the filing according to the provisions of this section.
- (f) The office may at any time review a rate, rating schedule, rating manual, rate change, the pertinent records of the insurer, or market conditions. If the office finds on a preliminary basis that a rate might be excessive, inadequate, or unfairly discriminatory, the office shall initiate proceedings to disapprove the rate and shall notify the insurer. Upon being notified, the insurer shall, within 60 days after the date on which it receives such notice, file with the office all

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information that, in the belief of the insurer, proves the reasonableness, adequacy, and fairness of the rate or rate change. The office shall issue a notice of intent to approve or a notice of intent to disapprove pursuant to the procedures of subsection (3) within 90 days after the date on which it receives the insurer's initial response. In such instances and in any administrative proceeding relating to the legality of the rate, the insurer or rating organization has the burden of proof to show by a preponderance of the evidence that the rate is not excessive, inadequate, or unfairly discriminatory. After the office notifies an insurer that a rate may be excessive, inadequate, or unfairly discriminatory, unless the office withdraws the notification, the insurer may not alter the rate except to conform with the office's notice until 120 days after the date the notification was provided or 180 days after the date of the implementation of the rate, whichever is earlier. The office may, subject to chapter 120, disapprove without the required 60-day notification, any rate increase filed by an insurer within the prohibited time period or during the time that the legality of the increased rate is being contested.

- (g) When submitting a rate filing, the chief executive officer or the chief financial officer of the title insurer and the chief actuary of the title insurer must certify the following information on a form approved by the commission, under oath and subject to penalty of perjury:
- 1. The signing officer and actuary have reviewed the rate filing;
- 2. Based on the knowledge of the signing officer and actuary, the rate filing does not contain any untrue statement of

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a material fact or omit a material fact necessary to make the statements not misleading, in light of the circumstances under which such statements were made;

- 3. Based on the knowledge of the signing officer and actuary, the information and other factors described in this section, including, but not limited to, investment income, present the basis of the rate filing in all material respects for the periods presented in the filing; and
- 4. Based on the knowledge of the signing officer and actuary, the rate filing reflects all premium savings that are reasonably expected to result from legislative enactments and are in accordance with generally accepted and reasonable actuarial techniques.

A signing officer or actuary who knowingly makes a false certification under this subsection commits a violation of s. 626.9541(1)(e) and is subject to penalties as prescribed in s. 626.9521. Failure to provide such certification by the officer and actuary shall result in the rate filing being disapproved without prejudice. Under such circumstances, the insurer or rating organization may refile its rate filing with the required certification. As used in this subsection, the term "actuary" means an individual who is a member of the Society of Actuaries or the American Academy of Actuaries.

(h) If, at the time a filing is required under this section, an insurer is in the process of completing a rate review, the insurer may apply to the office for an extension of up to an additional 30 days to make the filing. The request for an extension must be received by the office no later than the

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date on which the filing is due.

(i) After receiving a request to be exempted from the provisions of this section before the filing is due, the office may, due to insignificant numbers of policies in force or insignificant premium volume, exempt a company from filing rates or rate certifications as required by this section.

- (j) If an insurer fails to meet the filing requirements of this subsection and does not submit the filing within 60 days after the date on which the filing is due, the office may, in addition to any other penalty authorized by law, order the insurer to discontinue the issuance of policies for which the required filing was not made until such time that the office determines that the required filing has been submitted properly. Subject to the rating provisions of this code, the commission must adopt a rule specifying the premium to be charged in this state by title insurers for the respective types of title insurance contracts and, for policies issued through agents or agencies, the percentage of such premium required to be retained by the title insurer which shall not be less than 30 percent. However, in a transaction subject to the Real Estate Settlement Procedures Act of 1974, 12 U.S.C. ss. 2601 et seq., as amended, no portion of the premium attributable to providing a primary title service shall be paid to or retained by any person who does not actually perform or is not liable for the performance of such service.
- (2) In adopting premium rates, the commission must give due consideration to the following:

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(a) The title insurers' loss experience and prospective loss experience under closing protection letters and policy liabilities.

- (b) A reasonable margin for underwriting profit and contingencies, including contingent liability under s. 627.7865, sufficient to allow title insurers, agents, and agencies to earn a rate of return on their capital that will attract and retain adequate capital investment in the title insurance business and maintain an efficient title insurance delivery system.
- (c) Past expenses and prospective expenses for administration and handling of risks.
  - (d) Liability for defalcation.
  - (e) Other relevant factors.
- (3) Rates may be grouped by classification or schedule and may differ as to class of risk assumed.
- (4) Rates may not be excessive, inadequate, or unfairly discriminatory.
- $\underline{(2)}$  (5) The approved rate premium applies to each \$100 of insurance issued to an insured.
- (3) (6) The <u>approved rate applies</u> <del>premium rates apply</del> throughout this state.
- (7) The commission shall, in accordance with the standards provided in subsection (2), review the premium as needed, but not less frequently than once every 3 years, and shall, based upon the review required by this subsection, revise the premium if the results of the review so warrant.
- (4) (8) The commission may, by rule, require licensees under this part to annually submit statistical information, including loss and expense data, as the office department determines to be

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necessary to analyze premium rates, retention rates, and the condition of the title insurance industry.

- (5) The commission may establish procedures for the required filings by rule.
- Section 7. Section 627.783, Florida Statutes, is repealed.

  Section 8. This act shall take effect January 1, 2009, and
  applies to title insurance forms, contracts, commitments, or
  policies issued or used on or after that date.