By Senator Baker

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A bill to be entitled

An act relating to windstorm insurance coverage; amending s. 215.555, F.S.; providing additional legislative findings; revising certain definitions; providing for application of the Florida Hurricane Catastrophe Fund to costs of the Florida Windstorm Insurance Program; revising certain reimbursement contract board obligation limitations; providing for future expiration of certain limitations; revising legislative findings and declarations relating to revenue bonds; providing for application to coverage of costs of property damage under policies issued under the Florida Windstorm Insurance Program; revising emergency assessment requirement provisions to include application to policies issued under the Florida Windstorm Insurance Program; providing for future expiration of certain provisions; creating the Florida Windstorm Insurance Program within the Florida Hurricane Catastrophe Fund; providing a purpose; providing definitions; providing requirements for coverage, standards, and policy forms under the program; providing limitations; providing for administration of the program by the State Board of Administration; requiring the board to adopt rules; providing an eligibility limitation on certain properties' participation in the program; providing requirements for insurers participating in the program; providing contract requirements; providing for participating insurer compliance audits; specifying powers and duties of the program; providing claims payment requirements; providing for payment of certain insurer's

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costs and expenses; providing for penalties for insurers for certain actions; specifying absence of liability for certain actions; providing for effect of termination of an insurer's participation; specifying ratemaking requirements; authorizing the board to add a rapid cash buildup premium surcharge to rates under certain circumstances; requiring the board to adopt a rate plan; providing requirements for procuring reinsurance; authorizing the board to waive or modify certain reinsurance requirements; requiring an annual report to the Legislature; requiring windstorm coverage under certain insurance policies issued by certain insurers to be subject to certain rate standards requirements; providing transitional requirements; specifying requirements for the board in implementing the program; amending s. 627.351, F.S.; prohibiting the Citizens Property Insurance Corporation from issuing or renewing certain windstorm-only insurance policies after a certain date; providing requirements for transfer of policies of the corporation to the program; providing for transfer of certain proceeds and funds to the Florida Hurricane Catastrophe Fund for certain purposes; amending s. 627.712, F.S.; revising windstorm coverage requirements for insurers; providing an effective dates.

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

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Section 1. Effective June 1, 2009, paragraph (h) is added to subsection (1) of section 215.555, Florida Statutes,

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paragraphs (a), (c), and (e) of subsection (2), subsection (3), paragraph (c) of subsection (4), and paragraphs (a) and (b) of subsection (6) of that section are amended, and subsection (18) is added to that section, to read:

- 215.555 Florida Hurricane Catastrophe Fund. --
- (1) FINDINGS AND PURPOSE. -- The Legislature finds and declares as follows:
- (h)1. The Legislature further finds that, as of January 2008, more than 15 years of efforts to use state regulatory, financial, and insurance mechanisms to ensure availability and affordability of residential property insurance coverage have failed to satisfactorily achieve these goals.
- 2. The continuing lack of available, affordable coverage creates a substantial burden on the state's economy.
- 3. The unsatisfactory performance of a system intended to provide available, affordable coverage for windstorm losses in this state indicates that, in light of this state's unique exposure to windstorm losses, windstorm may be an uninsurable peril in all or parts of this state as the concept of insurability is commonly understood. Therefore, a restructured system of protecting homeowners from windstorm losses is necessary to maintain the viability of the economy of this state.
  - (2) DEFINITIONS. -- As used in this section:
- (a) "Actuarially indicated" means, with respect to premiums paid by insurers for reimbursement provided by the fund <u>under subsection (4)</u> and premiums paid by insureds for windstorm <u>coverage provided under subsection (18)</u>, an amount determined according to principles of actuarial science to be adequate, but not excessive, in the aggregate, to pay current and future

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obligations and expenses of the fund, including additional amounts if needed to pay debt service on revenue bonds issued under this section and to provide required debt service coverage in excess of the amounts required to pay actual debt service on revenue bonds issued under subsection (6), and:

- 1. With respect to premiums paid by insurers for reimbursement under subsection (4), determined according to principles of actuarial science to reflect each insurer's relative exposure to hurricane losses; or
- 2. With respect to premiums paid by insureds for windstorm coverage under subsection (18), determined according to principles of actuarial science to reflect each insured's relative exposure to windstorm losses.
- "Covered policy" means any insurance policy covering residential property in this state, including, but not limited to, any homeowner's, mobile home owner's, farm owner's, condominium association, condominium unit owner's, tenant's, or apartment building policy, or any other policy covering a residential structure or its contents issued by any authorized insurer, including a commercial self-insurance fund holding a certificate of authority issued by the Office of Insurance Regulation under s. 624.462, the Citizens Property Insurance Corporation, and any joint underwriting association or similar entity created under law. The term "covered policy" includes any collateral protection insurance policy covering personal residences which protects both the borrower's and the lender's financial interests, in an amount at least equal to the coverage for the dwelling in place under the lapsed homeowner's policy, if such policy can be accurately reported as required in subsection

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(5). Additionally, covered policies include policies covering the 117 118 peril of wind removed from the Florida Residential Property and 119 Casualty Joint Underwriting Association or from the Citizens Property Insurance Corporation, created under s. 627.351(6), or 120 121 from the Florida Windstorm Underwriting Association, created under s. 627.351(2), by an authorized insurer under the terms and 122 123 conditions of an executed assumption agreement between the 124 authorized insurer and such association or Citizens Property 125 Insurance Corporation. Each assumption agreement between the 126 association and such authorized insurer or Citizens Property 127 Insurance Corporation must be approved by the Office of Insurance 128 Regulation before the effective date of the assumption, and the 129 Office of Insurance Regulation must provide written notification 130 to the board within 15 working days after such approval. "Covered 131 policy" does not include any policy that excludes wind coverage 132 or hurricane coverage or any reinsurance agreement and does not 133 include any policy otherwise meeting this definition which is 134 issued by a surplus lines insurer or a reinsurer. All commercial 135 residential excess policies and all deductible buy-back policies 136 that, based on sound actuarial principles, require individual 137 ratemaking shall be excluded by rule if the actuarial soundness 138 of the fund is not jeopardized. For this purpose, the term "excess policy" means a policy that provides insurance protection 139 140 for large commercial property risks and that provides a layer of 141 coverage above a primary layer insured by another insurer. Effective June 1, 2010, the term "covered policy" does not 142 include any policy providing personal lines residential property 143 144 insurance coverage as defined in subsection (18).

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(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:

- The board shall calculate and report to each insurer the retention multiples for that year. For the contract year beginning June 1, 2005, the retention multiple shall be equal to \$4.5 billion divided by the total estimated reimbursement premium for the contract year; for the contract year beginning June 1, 2006, through the contract year beginning June 1, 2009 subsequent years, the retention multiple shall be equal to \$4.5 billion, adjusted based upon the reported exposure from the prior contract year to reflect the percentage growth in exposure to the fund for covered policies since 2004, divided by the total estimated reimbursement premium for the contract year. For the contract year beginning June 1, 2010, the retention multiple shall be equal to \$1 billion divided by the total estimated reimbursement premium for the contract year; for subsequent years, the retention multiple shall be equal to \$1 billion, adjusted based upon the reported exposure from the prior contract year to reflect the percentage growth in exposure to the fund for covered policies since 2009, divided by the total estimated reimbursement premium for the contract year. Total reimbursement premium for purposes of the calculation under this subparagraph shall be estimated using the assumption that all insurers have selected the 90-percent coverage level.
- 2. The retention multiple as determined under subparagraph 1. 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

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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
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.
- 4. For insurers who experience multiple covered events causing loss during the contract year, beginning June 1, 2005, each insurer's full retention shall be applied to each of the covered events causing the two largest losses for that insurer. For each other covered event resulting in losses, the insurer's retention shall be reduced to one-third of the full retention. The reimbursement contract shall provide for the reimbursement of losses for each covered event based on the full retention with adjustments made to reflect the reduced retentions after January 1 of the contract year provided the insurer reports its losses as specified in the reimbursement contract.
- (3) FLORIDA HURRICANE CATASTROPHE FUND CREATED. -- There is created the Florida Hurricane Catastrophe Fund to be administered by the State Board of Administration. Moneys in the fund may not be expended, loaned, or appropriated except to pay obligations of the fund arising out of reimbursement contracts entered into under subsection (4), payment of debt service on revenue bonds issued under subsection (6), costs of the mitigation program under subsection (7), costs of procuring reinsurance, costs of

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the Florida Windstorm Insurance Program under subsection (18), and costs of administration of the fund. The board shall invest the moneys in the fund pursuant to ss. 215.44-215.52. Except as otherwise provided in this section, earnings from all investments shall be retained in the fund. The board may employ or contract with such staff and professionals as the board deems necessary for the administration of the fund. The board may adopt such rules as are reasonable and necessary to implement this section and shall specify interest due on any delinquent remittances, which interest may not exceed the fund's rate of return plus 5 percent. Such rules must conform to the Legislature's specific intent in establishing the fund as expressed in subsection (1), must enhance the fund's potential ability to respond to claims for covered events, must contain general provisions so that the rules can be applied with reasonable flexibility so as to accommodate insurers in situations of an unusual nature or where undue hardship may result, except that such flexibility may not in any way impair, override, supersede, or constrain the public purpose of the fund, and must be consistent with sound insurance practices. The board may, by rule, provide for the exemption from subsections (4) and (5) of insurers writing covered policies with less than \$10 million in aggregate exposure for covered policies if the exemption does not affect the actuarial soundness of the fund.

## (4) REIMBURSEMENT CONTRACTS.--

(c)  $1.\underline{a.}$  The contract shall also provide that the obligation of the board with respect to all contracts covering a particular contract year shall not exceed the actual claims-paying capacity of the fund up to a limit of \$15 billion for that contract year

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adjusted based upon the reported exposure from the prior contract year to reflect the percentage growth in exposure to the fund for covered policies since 2003, provided the dollar growth in the limit may not increase in any year by an amount greater than the dollar growth of the balance of the fund as of December 31, less any premiums or interest attributable to optional coverage, as defined by rule which occurred over the prior calendar year. This sub-subparagraph expires June 1, 2010.

- b. For the contract year beginning June 1, 2010, and subsequent contract years, the contract shall provide that the obligation of the board with respect to all reimbursement contracts covering a particular contract year shall not exceed \$3 billion for that contract year plus an adjustment based upon the reported exposure from the prior contract year to reflect the percentage growth in exposure of the fund for commercial lines residential policies since 2009.
- 2. In May before the start of the upcoming contract year and in October during the contract year, the board shall publish in the Florida Administrative Weekly a statement of the fund's estimated borrowing capacity and the projected balance of the fund as of December 31. After the end of each calendar year, the board shall notify insurers of the estimated borrowing capacity and the balance of the fund as of December 31 to provide insurers with data necessary to assist them in determining their retention and projected payout from the fund for loss reimbursement purposes. In conjunction with the development of the premium formula, as provided for in subsection (5), the board shall publish factors or multiples that assist insurers in determining their retention and projected payout for the next contract year.

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For all regulatory and reinsurance purposes, an insurer may calculate its projected payout from the fund as its share of the total fund premium for the current contract year multiplied by the sum of the projected balance of the fund as of December 31 and the estimated borrowing capacity for that contract year as reported under this subparagraph.

- (6) REVENUE BONDS. --
- (a) General provisions. --
- Upon the occurrence of a hurricane and a determination that the moneys in the fund are or will be insufficient to pay reimbursement at the levels promised in the reimbursement contracts, the board may take the necessary steps under paragraph (c) or paragraph (d) for the issuance of revenue bonds for the benefit of the fund. The proceeds of such revenue bonds may be used to make reimbursement payments under reimbursement contracts; to refinance or replace previously existing borrowings or financial arrangements; to pay interest on bonds; to fund reserves for the bonds; to pay expenses incident to the issuance or sale of any bond issued under this section, including costs of validating, printing, and delivering the bonds, costs of printing the official statement, costs of publishing notices of sale of the bonds, and related administrative expenses; or for such other purposes related to the financial obligations of the fund as the board may determine. The term of the bonds may not exceed 30 years. The board may pledge or authorize the corporation to pledge all or a portion of all revenues under subsection (5) and under paragraph (b) to secure such revenue bonds and the board may execute such agreements between the board and the issuer of any revenue bonds and providers of other financing arrangements

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under paragraph (7) (b) as the board deems necessary to evidence, secure, preserve, and protect such pledge. If reimbursement premiums received under subsection (5) or earnings on such premiums are used to pay debt service on revenue bonds, such premiums and earnings shall be used only after the use of the moneys derived from assessments under paragraph (b). The funds, credit, property, or taxing power of the state or political subdivisions of the state shall not be pledged for the payment of such bonds. The board may also enter into agreements under paragraph (c) or paragraph (d) for the purpose of issuing revenue bonds in the absence of a hurricane upon a determination that such action would maximize the ability of the fund to meet future obligations.

- 2. The Legislature finds and declares that the issuance of bonds under this subsection is for the public purpose of paying the proceeds of the bonds to insurers as required by the contracts entered into under subsection (4), thereby enabling insurers to pay the claims of policyholders to assure that policyholders are able to pay the cost of construction, reconstruction, repair, and restoration, and other costs associated with damage to property of policyholders of covered policies after the occurrence of a hurricane, and for the public purpose of paying claims of policyholders under subsection (18) to ensure that policyholders are able to pay the costs of construction, reconstruction, repair, and restoration and other costs associated with damage to their property after a hurricane or other windstorm.
  - (b) Emergency assessments. --

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If the board determines that the amount of revenue produced under subsections subsection (5) and (18) is insufficient to fund the obligations, costs, and expenses of the fund and the corporation, including repayment of revenue bonds and that portion of the debt service coverage not met by reimbursement premiums, the board shall direct the Office of Insurance Regulation to levy, by order, an emergency assessment on direct premiums for all property and casualty lines of business in this state, including property and casualty business of surplus lines insurers regulated under part VIII of chapter 626, but not including any workers' compensation premiums or medical malpractice premiums. As used in this subsection, the term "property and casualty business" includes all lines of business identified on Form 2, Exhibit of Premiums and Losses, in the annual statement required of authorized insurers by s. 624.424 and any rule adopted under this section, except for those lines identified as accident and health insurance and except for policies written under the National Flood Insurance Program. The assessment shall be specified as a percentage of direct written premium and is subject to annual adjustments by the board in order to meet debt obligations. The same percentage shall apply to all policies in lines of business subject to the assessment issued or renewed during the 12-month period beginning on the effective date of the assessment. This sub-subparagraph expires June 1, 2010; however, the expiration of this sub-subparagraph does not affect any assessments levied under this subsubparagraph prior to that date.

b. Effective June 1, 2010, if the board determines that the amount of revenue produced under subsections (5) and (18) is

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insufficient to fund the obligations, costs, and expenses of the fund and the corporation, including repayment of revenue bonds and that portion of the debt service coverage not met by reimbursement premiums, the board shall direct the Office of Insurance Regulation to levy, by order, an emergency assessment on direct premiums for all personal lines and commercial lines policies providing property insurance coverage, including policies issued by the Florida Windstorm Insurance Program under subsection (18). The assessment shall be specified as a percentage of direct written premium and is subject to annual adjustments by the board in order to meet debt obligations. The same percentage shall apply to all policies in lines of business subject to the assessment issued or renewed during the 12-month period beginning on the effective date of the assessment. Assessments under this sub-subparagraph do not apply to policies providing personal lines residential property insurance coverage issued by an insurer that is not a participating insurer within the meaning provided in subsection (18).

- 2.<u>a.</u> A premium is not subject to an annual assessment under this paragraph in excess of 6 percent of premium with respect to obligations arising out of losses attributable to any one contract year, and a premium is not subject to an aggregate annual assessment under this paragraph in excess of 10 percent of premium. This sub-subparagraph expires June 1, 2010; however, the expiration of this sub-subparagraph does not affect any assessments levied under this sub-subparagraph prior to that date.
- b. Effective June 1, 2010, the total amount of emergency assessments under this paragraph with respect to any year may not

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exceed 10 percent of the statewide total gross written premium for all insurers for personal lines and commercial lines policies providing property insurance coverage, including policies issued by the Florida Windstorm Insurance Program under subsection (18), for the prior year. However, if the fund deficit with respect to any year exceeds such amount and bonds are issued to defray the deficit, the total amount of emergency assessments with respect to such deficit may not in any year exceed 10 percent of the deficit or such lesser percentage as is sufficient to retire the bonds as determined by the board.

- <u>c.</u> An annual assessment under this paragraph shall continue as long as the revenue bonds issued with respect to which the assessment was imposed are outstanding, including any bonds the proceeds of which were used to refund the revenue bonds, unless adequate provision has been made for the payment of the bonds under the documents authorizing issuance of the bonds.
- 3. Emergency assessments shall be collected from policyholders. Emergency assessments shall be remitted by insurers as a percentage of direct written premium for the preceding calendar quarter as specified in the order from the Office of Insurance Regulation. The office shall verify the accurate and timely collection and remittance of emergency assessments and shall report the information to the board in a form and at a time specified by the board. Each insurer collecting assessments shall provide the information 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.

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- With respect to assessments of surplus lines premiums, each surplus lines agent shall collect the assessment at the same time as the agent collects the surplus lines tax required by s. 626.932, and the surplus lines agent shall remit the assessment 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 Florida Surplus Lines Service Office. The emergency assessment on each insured procuring coverage and filing under s. 626.938 shall be remitted by the insured to the Florida Surplus Lines Service Office at the time the insured pays the surplus lines tax to the Florida Surplus Lines Service Office. The Florida Surplus Lines Service Office shall remit the collected assessments to the fund or corporation as provided in the order levied by the Office of Insurance Regulation. The Florida Surplus Lines Service Office shall verify the proper application of such emergency assessments and shall assist the board in ensuring the accurate and timely collection and remittance of assessments as required by the board. The Florida Surplus Lines Service Office shall annually calculate the aggregate written premium on property and casualty business, other than workers' compensation and medical malpractice, procured through surplus lines agents and insureds procuring coverage and filing under s. 626.938 and shall report the information to the board in a form and at a time specified by the board.
- 5. Any assessment authority not used for a particular contract year may be used for a subsequent contract year. If, for a subsequent contract year, the board determines that the amount of revenue produced under subsection (5) is insufficient to fund the obligations, costs, and expenses of the fund and the

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corporation, including repayment of revenue bonds and that portion of the debt service coverage not met by reimbursement premiums, the board shall direct the Office of Insurance Regulation to levy an emergency assessment up to an amount not exceeding the amount of unused assessment authority from a previous contract year or years, plus an additional 4 percent provided that the assessments in the aggregate do not exceed the limits specified in subparagraph 2. This subparagraph expires June 1, 2010; however, the expiration of this subparagraph does not affect any assessments levied under this subparagraph prior to that date.

- 6. The assessments otherwise payable to the corporation under this paragraph shall be paid to the fund unless and until the Office of Insurance Regulation and the Florida Surplus Lines Service Office have received from the corporation and the fund a notice, which shall be conclusive and upon which they may rely without further inquiry, that the corporation has issued bonds and the fund has no agreements in effect with local governments under paragraph (c). On or after the date of the notice and until the date the corporation has no bonds outstanding, the fund shall have no right, title, or interest in or to the assessments, except as provided in the fund's agreement with the corporation.
- 7. Emergency assessments are not premium and are not subject to the premium tax, to the surplus lines tax, to any fees, or to any commissions. An insurer is liable for all assessments that it collects and must treat the failure of an insured to pay an assessment as a failure to pay the premium. An insurer is not liable for uncollectible assessments.

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8. When an insurer is required to return an unearned premium, it shall also return any collected assessment attributable to the unearned premium. A credit adjustment to the collected assessment may be made by the insurer with regard to future remittances that are payable to the fund or corporation, 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.
  - (18) FLORIDA WINDSTORM INSURANCE PROGRAM. --
- (a) Creation; purpose. -- The Florida Windstorm Insurance
  Program is created within the Florida Hurricane Catastrophe Fund.
  The purpose of the program is to provide personal lines
  residential windstorm insurance coverage for properties
  throughout the state.
- (b) Definitions.--The definitions in subsection (2) apply to the program, except as modified by this paragraph. As used in this subsection:
  - 1. "Board" means the State Board of Administration.

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2. "Participating insurer" means an insurer providing personal lines residential property insurance coverage for nonwindstorm perils that administers windstorm coverage on behalf of the program.

- 3. "Personal lines residential property insurance coverage" consists of the type of coverage provided by homeowner's, mobile home owner's, dwelling, tenant's, condominium unit owner's, cooperative unit owner's, and similar policies. The term "personal lines residential property insurance coverage" does not include the type of coverage provided by condominium association, cooperative association, apartment building, and similar policies, including policies covering the common elements of a homeowners' association.
- 4. "Program" means the Florida Windstorm Insurance Program created under this subsection.
- 5. "Windstorm coverage" means coverage for loss or damage to personal lines residential property caused by wind, wind gusts, hail, rain, tornadoes, cyclones, tropical storms, or hurricanes. The term "windstorm coverage" does not include coverage for loss or damage to residential property caused by flood, storm surge, or rising water.
  - (c) Coverage provided; standards; policy forms. --
- 1. The program shall issue a policy providing windstorm coverage to each personal lines residential risk covered by a participating insurer, except if inconsistent with the underwriting standards adopted under the program. Coverage shall include structure, contents, additional living expenses, emergency debris removal, and temporary repairs after loss.

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2. The board shall adopt by rule standards for the program, including, but not limited to, standards relating to underwriting, mitigation discounts, deductibles, cancellation and nonrenewal, agent compensation, and recordkeeping.

- 3. The board shall adopt by rule policy forms to be used for program policies. Program policies must comply with part X of chapter 627. The board shall also adopt by rule such notices, coverage summaries, and outlines of coverage as are required by law or as the board deems appropriate, including a notice informing an insured of the duties of the program and the duties of the participating insurer.
- 4. The policy for coverage of a structure may not exceed \$2 million. The board shall establish by rule policy limits for coverage of contents, additional living expenses, emergency debris removal, and temporary repairs after loss.
- 5. This subsection does not restrict an insured's ability to exclude windstorm coverage, hurricane coverage, or contents coverage under s. 627.712.
- 6. Any residential property covered by the program that sustains a total loss for windstorm coverage more than three times in any given 10-year period shall no longer be eligible for coverage under the program.
  - (d) Participating insurers. --
- 1. The board shall adopt by rule a form for the contract between the program and a participating insurer specifying the respective rights and duties of the program and the participating insurer. The contract shall be effective for a term of 5 years.
- 2. Any insurer writing personal lines residential property insurance coverage may elect to, and Citizens Property Insurance

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Corporation shall, enter into a contract with the program under which the program agrees to issue a policy providing windstorm coverage to each insured for which the participating insurer provides a policy providing personal lines residential property insurance coverage for other perils, except as provided in subsubparagraph 3.b., and under which the participating insurer agrees to administer the program policy. In the case of a group of two or more insurers under common ownership, all members of the group writing personal lines residential property insurance coverage must make the same election as to participation or nonparticipation in the program.

- 3. The contract shall require the participating insurer to:
- a. Collect premiums for program coverage as established by the program and apply deductibles, discounts, surcharges, credits, and limits as established by the program.
- b. Administer the windstorm coverage under the program policy and provide the program policy to each of its personal lines residential property insureds, except to the extent inconsistent with program underwriting standards or the property owner's option to exclude coverage under s. 627.712(2) or (3).
- c. Comply with program rules and standards relating to program policies, including underwriting, cancellation and nonrenewal, and agent compensation.
- d. Provide application processing, premium processing, claims processing, and adjusting services in accordance with program rules and standards.
- 4. An insurer has a fiduciary duty to the program to fairly adjust claims and allocate losses between windstorm and nonwindstorm perils.

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5. The program shall establish an annual audit process to determine each participating insurer's compliance with the requirements of the contract.

- (e) Program powers and duties. --
- 1. The program shall make claims payments directly to insureds based on the information provided to the program by the participating insurer. The contract between the program and the participating insurer may provide that the participating insurer shall make claims payments to the insured on behalf of the program, but only to the extent the program has advanced funds to the participating insurer for the purpose of paying claims.
- 2. The contract between the program and the participating insurer shall require the program to pay the participating insurer's loss adjustment expense, acquisition cost, litigation costs, and judgments attributable to program policies, except to the extent that the costs or expenses are the result of the participating insurer's breach of the contract or breach of its fiduciary duty.
- 3. If a participating insurer fails to substantially comply with its obligations under the program contract or breaches its fiduciary duty to the program, the program may impose any combination of the following sanctions: suspension of the participating insurer's ability to participate in the program for a period not to exceed 5 years, actual damages plus a penalty of up to 50 percent, or liquidated damages as specified in the program contract.
- 4. There shall be no liability on the part of, and no cause of action of any nature shall arise against, any participating insurer or its agents or employees, the program or its employees,

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or members of the board for any action taken by such persons or entities in the performance of their respective duties or responsibilities under this subsection. Such immunity does not apply to:

- $\underline{\text{a.}}$  Any of the foregoing persons or entities for any willful tort.
- b. The program, a participating insurer, or a participating insurer's producing agents for breach of any written contract or written agreement pertaining to insurance coverage.
- c. The program or the fund with respect to issuance or payment of debt.
- d. Any participating insurer with respect to any action by the program to enforce a participating insurer's obligations to the program under this subsection.
- e. The program in any action for breach of contract or for benefits under a policy issued by the program. In any such action, the program shall be liable to the policyholders and beneficiaries for attorney's fees as provided in s. 627.428.
- 5. The termination of an insurer's participation in the program terminates the program policies the insurer had been administering, and such policies remain in effect until their expiration date unless terminated for some other cause. The insurer shall continue to have a duty to administer such policies unless the program makes other arrangements for the administration of such policies.
  - (f) Ratemaking. --
- 1. The board shall select an independent consultant to recommend to the board a rate plan for program coverage.

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2.a. Program rates must be as close as possible to actuarially indicated rates, taking into account the state's need to restore or maintain affordability of property insurance coverage for property owners and the cost of reinsurance and other risk-transfer mechanisms.

- b. Except as otherwise provided in this paragraph, rates may not be excessive, inadequate, or unfairly discriminatory within the meaning provided in s. 627.062 and must provide the mitigation discounts and other loss-prevention incentives specified in s. 627.0629.
- c. In the aggregate, the rates must generate premium revenue equal to or greater than the statewide average annual insured windstorm loss, based on an average of all models currently determined to meet the standards and guidelines of the Florida Commission on Hurricane Loss Projection Methodology plus expenses.
- d. If the board determines that the cash balance of the fund, net of the proceeds of any pre-event debt instruments, is less than \$1 billion, the board may add to the rates determined under this subparagraph a rapid cash buildup premium surcharge of not more than 25 percent.
- 3. Annually, after a public hearing, the board shall adopt a rate plan pursuant to this paragraph. A rate plan takes effect upon its approval by the unanimous vote of all members of the board or at a later date specified in the rate plan and remains in effect until the effective date of a subsequently adopted rate plan.
- 4. The rate plan recommended to or adopted by the board is not subject to any other regulatory review or approval. The rate

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plan as adopted is final agency action for purposes of chapter

120 and is subject to judicial review in the manner provided in

s. 120.68, except judicial review must be sought in the District

Court of Appeal, First District, regardless of where any party

resides.

- (g) Reinsurance; annual report. --
- 1. The program may procure reinsurance or other financial alternatives at any loss level.
- 2. The program shall annually engage in negotiations to procure reinsurance or other financial alternatives to transfer some or all of the risk of loss in excess of the program's 100-year probable maximum loss.
- 3.a. The program shall annually procure reinsurance or other financial alternatives to transfer at least 50 percent of the risk of loss between the program's 50-year probable maximum loss and the program's 100-year probable maximum loss. The board may structure such reinsurance and other financial alternatives in such layer or layers, and with such percentages of retained liability in a particular layer, as the board deems appropriate.
- b. The program shall annually procure reinsurance or other financial alternatives to transfer at least the first 50 percent of the risk of loss between the program's 100-year probable maximum loss and the program's 250-year probable maximum loss.
- c. The board may, with respect to any year, waive or modify the requirements of this subparagraph only if the board finds, after a public hearing and by a unanimous vote of all members of the board, that transferring risk as required by this subparagraph would not be a cost-effective means of reducing the potential assessment liability of property owners.

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4. The board shall provide an annual report to the President of the Senate and the Speaker of the House of Representatives describing the state of the market for reinsurance and other risk-transfer mechanisms, summarizing negotiations for reinsurance and other financial alternatives to transfer program risk, and explaining the program's actions with regard to reinsurance and other financial alternatives.

- (h) Personal lines residential windstorm coverage issued by nonparticipating insurers. --Windstorm coverage under a personal lines residential property insurance policy issued by an insurer that is not a participating insurer is subject to s. 627.062, except that the rates for such coverage may be disapproved only if they are inadequate or unfairly discriminatory.
- (i) Transition. -- It is the intent of the Legislature that participating insurers continue to provide windstorm coverage to their existing policyholders under policies providing personal lines residential property insurance coverage until the first renewal date on or after June 1, 2009, at which time the windstorm coverage shall be provided under a program policy. For that purpose, a participating insurer remains eligible for coverage under subsection (4) during the contract year beginning June 1, 2009, to the extent the participating insurer has in force policies defined as covered policies under subsection (2). The replacement of windstorm coverage under a participating insurer's policy providing personal lines residential property insurance coverage with windstorm coverage under a program policy does not constitute a cancellation or nonrenewal for purposes of s. 627.4133 or any other purposes under the Insurance Code. With respect to noncommercial residential property insurance policy

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renewals taking effect on or after June 1, 2009, and before June
1, 2010, the notice of renewal premium shall include a notice, in
a form specified by the board, that, as of the policy renewal
date, windstorm coverage will be provided under a program policy
administered by the insurer and coverage for other perils will be
provided under a residential property insurance policy issued by
the insurer.

Section 2. State Board of Administration; implementation of the Florida Windstorm Insurance Program. -- No later than January 1, 2009, the State Board of Administration shall adopt all contract forms, rules, standards, policy forms, mitigation discounts, and rates required to implement the Florida Windstorm Insurance Program created by s. 215.555, Florida Statutes, as amended by this act.

Section 3. Paragraph (gg) is added to subsection (6) of section 627.351, Florida Statutes, to read:

- 627.351 Insurance risk apportionment plans.--
- (6) CITIZENS PROPERTY INSURANCE CORPORATION. --
- (gg) Notwithstanding any provision of this subsection or s. 627.3517:
- 1. On or after June 1, 2009, the corporation may not issue or renew any personal lines residential property insurance policy providing windstorm-only coverage.
- 2.a. In order to facilitate the transfer of policies of the corporation from the corporation to the competitive market and in order to provide a capital contribution to the Florida Windstorm Insurance Program, the corporation shall offer insurers the opportunity to bid on the right to provide nonwindstorm coverage to current policyholders of the corporation, to take effect on

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the policyholder's first renewal date on or after June 1, 2009, or through an assumption agreement effective on or after June 1, 2009.

- b. The corporation shall prepare blocks of business that are balanced as to geographic location and insured value and shall offer the blocks of business at auction beginning no later than October 1, 2008. The insurer that prevails in the auction shall have an exclusive right to enter into an assumption agreement with the corporation under which the participating insurer assumes the nonwindstorm coverage for the remainder of the policy term and the Florida Windstorm Insurance Program assumes the windstorm coverage for the remainder of the policy term. If an assumption occurs, any renewal shall be at the participating insurer's rates as to the nonwindstorm coverage and the Florida Windstorm Insurance Program rates as to the windstorm coverage. Any assumptions under this sub-subparagraph must take effect no later than May 31, 2010.
- c. The provisions of s. 627.3517 do not apply to any offer to replace coverage by the corporation with personal lines residential property insurance coverage provided by a participating insurer as defined in s. 215.555(18), including any assumption under this subparagraph.
- d. The corporation shall transfer all proceeds of the auctions to the Florida Hurricane Catastrophe Fund, which shall treat the proceeds as a capital contribution for the benefit of the Florida Windstorm Insurance Program.
- 3. Effective June 1, 2009, the corporation may not issue or renew a policy providing personal lines residential property insurance coverage if the owner of the property has received an

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offer of coverage from a participating insurer as defined in s. 215.555(18), provided the participating insurer has provided the corporation with notice of the offer of coverage at least 30 days prior to the renewal date or expected issuance date of the corporation's policy.

- 4. No later than December 31, 2010, the corporation shall transfer to the Florida Hurricane Catastrophe Fund an additional capital contribution for the benefit of the Florida Windstorm Insurance Program. The contribution shall consist of the corporation's surplus as to policyholders, multiplied by a ratio:
- <u>a. The numerator of which is the total structural insured</u>

  <u>value as of June 1, 2010, for risks covered by all policies</u>

  issued by the corporation; and
- <u>b.</u> The denominator of which is the total structural insured value as of June 1, 2009, for risks covered by all policies issued by the corporation.
- Section 4. Effective June 1, 2009, subsection (1) of section 627.712, Florida Statutes, is amended to read:
- 627.712 Residential windstorm coverage required; availability of exclusions for windstorm or contents.--
- the date of the first renewal on or after June 1, 2009, an insurer issuing or renewing a residential property insurance policy must provide windstorm coverage as part of the policy issued by the insurer or under a separate policy issued by the Florida Windstorm Insurance Program under s. 215.555 and administered by the insurer. This subsection does not apply with respect to risks that are eligible for wind-only coverage from Citizens Property Insurance Corporation under s. 627.351(6).

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Section 5. Except as otherwise expressly provided in this act, this act shall take effect upon becoming a law.