Florida Senate - 2008 (Corrected Copy) (Proposed Committee

FOR CONSIDERATION By the Committee on Banking and Insurance

597-03995A-08

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

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

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

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88 to the TICL insurer; including the level of TICL 89 coverage specified by the board among the factors that 90 must be considered when determining the amount of 91 increase in the claims-paying capacity of the fund; amending s. 215.557, F.S.; conforming provisions to 92 93 changes made by the act; amending s. 215.5586, F.S.; requiring that the director of the division serve on 94 95 the advisory council of the My Safe Florida Home Program; amending s. 215.559, F.S., relating to the 96 97 Hurricane Loss Mitigation Program; conforming a crossreference; amending s. 215.5595, F.S., relating to the 98 99 Insurance Capital Build-up Incentive Program; 100 conforming provisions to changes made by the act; revising the definition of "board" to conform to 101 102 changes made by the act; amending s. 627.0628, F.S.; 103 revising legislative intent; assigning the Florida 104 Commission on Hurricane Loss Projection Methodology to 105 the division; requiring that the director of the fund 106 serve on the commission; requiring that the board of 107 the division annually appoint one of the members of the 108 commission to serve as chair; requiring that the 109 division provide for travel, expenses, and staff 110 support for the commission; indemnifying members and 111 employees of the division from liability for action 112 taken with respect to the commission or its activities; 113 requiring that the division employ certain methods, 114 principles, standards, models, or output ranges when 115 establishing reimbursement premiums for the fund; 116 providing an effective date.

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117 118 Be It Enacted by the Legislature of the State of Florida: 119 Section 1. Section 215.555, Florida Statutes, is amended to 120 121 read: 122 215.555 Florida Hurricane Catastrophe Fund.--123 FINDINGS AND PURPOSE. -- The Legislature finds and (1)124 declares as follows: There is a compelling state interest in maintaining a 125 (a) 126 viable and orderly private sector market for property insurance 127 in this state. To the extent that the private sector is unable to maintain a viable and orderly market for property insurance in 128 129 this state, state actions to maintain such a viable and orderly 130 market are valid and necessary exercises of the police power. 131 (b) As a result of unprecedented levels of catastrophic 132 insured losses in recent years, and especially as a result of 133 Hurricane Andrew, numerous insurers have determined that in order 134 to protect their solvency, it is necessary for them to reduce 135 their exposure to hurricane losses. Also as a result of these 136 events, world reinsurance capacity has significantly contracted, 137 increasing the pressure on insurers to reduce their catastrophic 138 exposures. 139 (c) Mortgages require reliable property insurance, and the 140 unavailability of reliable property insurance would therefore 141 make most real estate transactions impossible. In addition, the 142 public health, safety, and welfare demand that structures damaged 143 or destroyed in a catastrophe be repaired or reconstructed as 144 soon as possible. Therefore, the inability of the private sector

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insurance and reinsurance markets to maintain sufficient capacity

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to enable residents of this state to obtain property insurance coverage in the private sector endangers the economy of the state and endangers the public health, safety, and welfare. Accordingly, state action to correct for this inability of the private sector constitutes a valid and necessary public and governmental purpose.

152 The insolvencies and financial impairments resulting (d) 153 from Hurricane Andrew demonstrate that many property insurers are 154 unable or unwilling to maintain reserves, surplus, and 155 reinsurance sufficient to enable the insurers to pay all claims 156 in full in the event of a catastrophe. State action is therefore 157 necessary to protect the public from an insurer's unwillingness 158 or inability to maintain sufficient reserves, surplus, and 159 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.

165 (f) It is essential to the functioning of a state program 166 to increase insurance capacity that revenues received be exempt 167 from federal taxation. It is therefore the intent of the 168 Legislature that this program be structured as a state trust fund 169 under the direction and control of the Division of the Florida 170 Hurricane Catastrophe Fund within the State Board of 171 Administration and operate exclusively for the purpose of 172 protecting and advancing the state's interest in maintaining 173 insurance capacity in this state.

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Hurricane Andrew, which caused insured and uninsured 174 (q) 175 losses in excess of \$20 billion, will likely not be the last 176 major windstorm to strike Florida. Recognizing that a future wind catastrophe could cause damages in excess of \$60 billion, 177 178 especially if a major urban area or series of urban areas were hit, it is the intent of the Legislature to balance equitably its 179 180 concerns about mitigation of hurricane impact, insurance 181 affordability and availability, and the risk of insurer and joint 182 underwriting association insolvency, as well as assessment and 183 bonding limitations.

184

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

185 "Actuarially indicated" means, with respect to premiums (a) 186 paid by insurers for reimbursement provided by the fund, an 187 amount determined according to principles of actuarial science to 188 be adequate, but not excessive, in the aggregate, to pay current 189 and future obligations and expenses of the fund, including 190 additional amounts if needed to pay debt service on revenue bonds 191 issued under this section and to provide required debt service 192 coverage in excess of the amounts required to pay actual debt 193 service on revenue bonds issued under subsection (7) (6), and 194 determined according to principles of actuarial science to 195 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.

(c) "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

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203 apartment building policy, or any other policy covering a 204 residential structure or its contents issued by any authorized 205 insurer, including a commercial self-insurance fund holding a 206 certificate of authority issued by the Office of Insurance Regulation under s. 624.462, the Citizens Property Insurance 207 Corporation, and any joint underwriting association or similar 208 209 entity created under law. The term "covered policy" includes any 210 collateral protection insurance policy covering personal residences which protects both the borrower's and the lender's 211 212 financial interests, in an amount at least equal to the coverage for the dwelling in place under the lapsed homeowner's policy, if 213 214 such policy can be accurately reported as required in subsection 215 (6) (5). Additionally, covered policies include policies covering the peril of wind removed from the Florida Residential Property 216 217 and Casualty Joint Underwriting Association or from the Citizens 218 Property Insurance Corporation, created under s. 627.351(6), or 219 from the Florida Windstorm Underwriting Association, created 220 under s. 627.351(2), by an authorized insurer under the terms and 221 conditions of an executed assumption agreement between the 222 authorized insurer and such association or Citizens Property 223 Insurance Corporation. Each assumption agreement between the 224 association and such authorized insurer or Citizens Property 225 Insurance Corporation must be approved by the Office of Insurance 226 Regulation before the effective date of the assumption, and the 227 Office of Insurance Regulation must provide written notification 228 to the division board within 15 working days after such approval. "Covered policy" does not include any policy that excludes wind 229 230 coverage or hurricane coverage or any reinsurance agreement and 231 does not include any policy otherwise meeting this definition

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232 which is issued by a surplus lines insurer or a reinsurer. All 233 commercial residential excess policies and all deductible buy-234 back policies that, based on sound actuarial principles, require 235 individual ratemaking shall be excluded by rule if the actuarial 236 soundness of the fund is not jeopardized. For this purpose, the term "excess policy" means a policy that provides insurance 237 238 protection for large commercial property risks and that provides 239 a layer of coverage above a primary layer insured by another 240 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:

251 The division board shall calculate and report to each 1. 252 insurer the retention multiples for that year. For the contract 253 year beginning June 1, 2005, the retention multiple shall be 254 equal to \$4.5 billion divided by the total estimated 255 reimbursement premium for the contract year; for subsequent 256 years, the retention multiple shall be equal to \$4.5 billion, 257 adjusted based upon the reported exposure from the prior contract 258 year to reflect the percentage growth in exposure to the fund for 259 covered policies since 2004, divided by the total estimated 260 reimbursement premium for the contract year. Total reimbursement

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261 premium for purposes of the calculation under this subparagraph 262 shall be estimated using the assumption that all insurers have 263 selected the 90-percent coverage level.

The retention multiple as determined under subparagraph 264 2. 265 1. shall be adjusted to reflect the coverage level elected by the insurer. For insurers electing the 90-percent coverage level, the 266 267 adjusted retention multiple is 100 percent of the amount 268 determined under subparagraph 1. For insurers electing the 75-269 percent coverage level, the retention multiple is 120 percent of 270 the amount determined under subparagraph 1. For insurers electing 271 the 45-percent coverage level, the adjusted retention multiple is 272 200 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.

278 For insurers who experience multiple covered events 4. 279 causing loss during the contract year, beginning June 1, 2005, 280 each insurer's full retention shall be applied to each of the 281 covered events causing the two largest losses for that insurer. 282 For each other covered event resulting in losses, the insurer's 283 retention shall be reduced to one-third of the full retention. 284 The reimbursement contract shall provide for the reimbursement of 285 losses for each covered event based on the full retention with 286 adjustments made to reflect the reduced retentions after January 287 1 of the contract year provided the insurer reports its losses as 288 specified in the reimbursement contract.

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289 (f) "Workers' compensation" includes both workers' 290 compensation and excess workers' compensation insurance.

(g) "Bond" means any bond, debenture, note, or other
 evidence 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 revenue bonds necessary to maintain in effect any such liquidity 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.

303 (j) "Local government" means a unit of general purpose 304 local 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 <u>(6)</u> (5) or from emergency assessments under paragraph <u>(7)(b)</u> (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 board's</u> 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

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317	is able to raise through the issuance of revenue bonds under
318	subsection (7) (6).
319	(n) "Corporation" means the Florida Hurricane Catastrophe
320	Fund Finance Corporation created in paragraph <u>(7)(d)</u> (6)(d) .
321	(o) "Division" means the Division of the Florida Hurricane
322	Catastrophe Fund.
323	(p) "Director" means the chief administrator of the
324	division, who shall act on behalf of the division as authorized
325	by the board.
326	(q) "FHCF" or "fund" means the Florida Hurricane
327	Catastrophe Fund.
328	(r) "Board" means the governing board of the division,
329	which shall be composed of the Governor and the Cabinet. The
330	Governor shall serve as chair of the board, the Attorney General
331	shall serve as secretary of the board, and the Chief Financial
332	Officer shall serve as treasurer of the board.
333	(3) DIVISION OF THE FLORIDA HURRICANE CATASTROPHE FUND
334	CREATEDThere is created a division of the State Board of
335	Administration known as the Division of the Florida Hurricane
336	Catastrophe Fund, which shall administer the Florida Hurricane
337	Catastrophe Fund. For purposes of this section, the board of the
338	division shall consist of the Governor and the Cabinet.
339	(4)-(3) FLORIDA HURRICANE CATASTROPHE FUND CREATEDThere
340	is created the Florida Hurricane Catastrophe Fund <u>within</u> to be
341	administered by the State Board of Administration. Moneys in the
342	fund may not be expended, loaned, or appropriated except to pay
343	obligations of the fund arising out of reimbursement contracts
344	entered into under subsection (5) (4), payment of debt service on
345	revenue bonds issued under subsection (7) (6), costs of the

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mitigation program under subsection (8) (7), costs of procuring 346 347 reinsurance, and costs of administration of the fund. The State 348 Board of Administration board shall invest the moneys in the fund 349 pursuant to ss. 215.44-215.52. Except as otherwise provided in 350 this section, earnings from all investments shall be retained in 351 the fund. The board shall appoint a director who shall be 352 responsible for the administration of the fund. The appointment 353 of the director of the Division of the Florida Hurricane 354 Catastrophe Fund shall be subject to the approval by a majority 355 vote of the board. The division board may employ or contract with 356 such staff and professionals as the division board deems 357 necessary for the administration of the fund. The board may adopt 358 such rules as are reasonable and necessary to implement this 359 section and shall specify interest due on any delinquent 360 remittances, which interest may not exceed the fund's rate of 361 return plus 5 percent. Such rules must conform to the 362 Legislature's specific intent in establishing the fund as 363 expressed in subsection (1), must enhance the fund's potential 364 ability to respond to claims for covered events, must contain 365 general provisions so that the rules can be applied with 366 reasonable flexibility so as to accommodate insurers in 367 situations of an unusual nature or where undue hardship may 368 result, except that such flexibility may not in any way impair, 369 override, supersede, or constrain the public purpose of the fund, 370 and must be consistent with sound insurance practices. The board 371 may, by rule, provide for the exemption from subsections (5) (4)and (6) (5) of insurers writing covered policies with less than 372 373 \$10 million in aggregate exposure for covered policies if the 374 exemption does not affect the actuarial soundness of the fund.

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375 The division shall have the power to sue and be sued in the name 376 of the division.

377

(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.

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

389 2. The insurer must elect one of the percentage coverage 390 levels specified in this paragraph and may, upon renewal of a 391 reimbursement contract, elect a lower percentage coverage level 392 if no revenue bonds issued under subsection (7) $\frac{(6)}{(6)}$ after a covered event are outstanding, or elect a higher percentage 393 394 coverage level, regardless of whether or not revenue bonds are 395 outstanding. All members of an insurer group must elect the same 396 percentage coverage level. Any joint underwriting association, 397 risk apportionment plan, or other entity created under s. 627.351 398 must elect the 90-percent coverage level.

399 3. The contract shall provide that reimbursement amounts 400 shall not be reduced by reinsurance paid or payable to the 401 insurer from other sources.

402 4. Notwithstanding any other provision contained in this403 section, the board shall make available to insurers that

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purchased coverage provided by this subparagraph in 2006, 404 405 insurers qualifying as limited apportionment companies under s. 406 627.351(6)(c), and insurers that were approved to participate in 407 2006 or that are approved in 2007 for the Insurance Capital 408 Build-Up Incentive Program pursuant to s. 215.5595, a contract or 409 contract addendum that provides an additional amount of 410 reimbursement coverage of up to \$10 million. The premium to be 411 charged for this additional reimbursement coverage shall be 50 412 percent of the additional reimbursement coverage provided, which 413 shall include one prepaid reinstatement. The minimum retention level that an eligible participating insurer must retain 414 associated with this additional coverage layer is 30 percent of 415 416 the insurer's surplus as of December 31, 2006. This coverage 417 shall be in addition to all other coverage that may be provided 418 under this section. The coverage provided by the fund under this 419 subparagraph shall be in addition to the claims-paying capacity as defined in subparagraph (c)1., but only with respect to those 420 421 insurers that select the additional coverage option and meet the 422 requirements of this subparagraph. The claims-paying capacity 423 with respect to all other participating insurers and limited 424 apportionment companies that do not select the additional 425 coverage option shall be limited to their reimbursement premium's 426 proportionate share of the actual claims-paying capacity 427 otherwise defined in subparagraph (c)1. and as provided for under 428 the terms of the reimbursement contract. Coverage provided in the 429 reimbursement contract will not be affected by the additional 430 premiums paid by participating insurers exercising the additional 431 coverage option allowed in this subparagraph. This subparagraph 432 expires on May 31, 2008.

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(c)1. The contract shall also provide that the obligation 433 434 of the division board with respect to all contracts covering a 435 particular contract year shall not exceed the actual claimspaying capacity of the fund up to a limit of \$15 billion for that 436 437 contract year adjusted based upon the reported exposure from the prior contract year to reflect the percentage growth in exposure 438 439 to the fund for covered policies since 2003, provided the dollar growth in the limit may not increase in any year by an amount 440 441 greater than the dollar growth of the balance of the fund as of 442 December 31, less any premiums or interest attributable to optional coverage, as defined by rule which occurred over the 443 444 prior calendar year.

445 In May before the start of the upcoming contract year 2. 446 and in October during the contract year, the division board shall 447 publish in the Florida Administrative Weekly a statement of the 448 fund's estimated borrowing capacity and the projected balance of the fund as of December 31. After the end of each calendar year, 449 450 the division board shall notify insurers of the estimated 451 borrowing capacity and the balance of the fund as of December 31 452 to provide insurers with data necessary to assist them in 453 determining their retention and projected payout from the fund 454 for loss reimbursement purposes. In conjunction with the 455 development of the premium formula, as provided for in subsection 456 (6) (5), the division board shall publish factors or multiples 457 that assist insurers in determining their retention and projected 458 payout for the next contract year. For all regulatory and 459 reinsurance purposes, an insurer may calculate its projected 460 payout from the fund as its share of the total fund premium for the current contract year multiplied by the sum of the projected 461

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462 balance of the fund as of December 31 and the estimated borrowing
463 capacity for that contract year as reported under this
464 subparagraph.

465 (d)1. For purposes of determining potential liability and to aid in the sound administration of the fund, the contract 466 467 shall require each insurer to report such insurer's losses from 468 each covered event on an interim basis, as directed by the 469 division board. The contract shall require the insurer to report 470 to the division board no later than December 31 of each year, and 471 quarterly thereafter, its reimbursable losses from covered events 472 for the year. The contract shall require the division board to 473 determine and pay, as soon as practicable after receiving these 474 reports of reimbursable losses, the initial amount of reimbursement due and adjustments to this amount based on later 475 476 loss information. The adjustments to reimbursement amounts shall 477 require the division board to pay, or the insurer to return, 478 amounts reflecting the most recent calculation of losses.

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

(e)1. Except as provided in subparagraphs 2. and 3., the contract shall provide that if an insurer demonstrates to the <u>division board</u> that it is likely to qualify for reimbursement under the contract, and demonstrates to the <u>division board</u> that the immediate receipt of moneys from the <u>division board</u> is likely

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491 to prevent the insurer from becoming insolvent, the <u>division</u> 492 board shall advance the insurer, at market interest rates, the 493 amounts necessary to maintain the solvency of the insurer, up to 494 50 percent of the <u>division's board's</u> estimate of the 495 reimbursement due the insurer. The insurer's reimbursement shall 496 be reduced by an amount equal to the amount of the advance and 497 interest thereon.

2. With respect only to an entity created under s. 627.351, the contract shall also provide that the <u>division</u> board may, upon application by such entity, advance to such entity, at market interest rates, up to 90 percent of the lesser of:

502a. The division's board's estimate of the amount of503reimbursement due to such entity; or

504 The entity's share of the actual reimbursement premium b. 505 paid for that contract year, multiplied by the currently 506 available liquid assets of the fund. In order for the entity to 507 qualify for an advance under this subparagraph, the entity must 508 demonstrate to the division board that the advance is essential 509 to allow the entity to pay claims for a covered event and the 510 division board must determine that the fund's assets are 511 sufficient and are sufficiently liquid to allow the division 512 board to make an advance to the entity and still fulfill the 513 board's reimbursement obligations to other insurers. The entity's 514 final reimbursement for any contract year in which an advance has 515 been made under this subparagraph must be reduced by an amount 516 equal to the amount of the advance and any interest on such 517 advance. In order to determine what amounts, if any, are due the 518 entity, the division board may require the entity to report its

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519 exposure and its losses at any time to determine retention levels 520 and reimbursements payable.

521 The contract shall also provide specifically and solely 3. with respect to any limited apportionment company under s. 522 523 627.351(2)(b)3. that the division board may, upon application by 524 such company, advance to such company the amount of the estimated 525 reimbursement payable to such company as calculated pursuant to 526 paragraph (d), at market interest rates, if the division board 527 determines that the fund's assets are sufficient and are 528 sufficiently liquid to permit the division board to make an 529 advance to such company and at the same time fulfill its 530 reimbursement obligations to the insurers that are participants 531 in the fund. Such company's final reimbursement for any contract 532 year in which an advance pursuant to this subparagraph has been 533 made shall be reduced by an amount equal to the amount of the 534 advance and interest thereon. In order to determine what amounts, 535 if any, are due to such company, the division board may require 536 such company to report its exposure and its losses at such times 537 as may be required to determine retention levels and loss 538 reimbursements payable.

539 (f) In order to ensure that insurers have properly reported 540 the insured values on which the reimbursement premium is based 541 and to ensure that insurers have properly reported the losses for 542 which reimbursements have been made, the division board shall 543 inspect, examine, and verify the records of each insurer's 544 covered policies at such times as the division board deems 545 appropriate and according to standards established by rule for 546 the specific purpose of validating the accuracy of exposures and 547 losses required to be reported under the terms and conditions of

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548 the reimbursement contract. The costs of the examinations shall 549 be borne by the division board. However, in order to remove any 550 incentive for an insurer to delay preparations for an 551 examination, the division board shall be reimbursed by the 552 insurer for any examination expenses incurred in addition to the 553 usual and customary costs of the examination, which additional 554 expenses were incurred as a result of an insurer's failure, 555 despite proper notice, to be prepared for the examination or as a result of an insurer's failure to provide requested information 556 557 while the examination is in progress. If the division board finds 558 any insurer's records or other necessary information to be inadequate or inadequately posted, recorded, or maintained, the 559 560 division board may employ experts to reconstruct, rewrite, 561 record, post, or maintain such records or information, at the 562 expense of the insurer being examined, if such insurer has failed 563 to maintain, complete, or correct such records or deficiencies 564 after the division board has given the insurer notice and a 565 reasonable opportunity to do so. Any information contained in an 566 examination report, which information is described in s. 215.557, 567 is confidential and exempt from the provisions of s. 119.07(1) 568 and s. 24(a), Art. I of the State Constitution, as provided in s. 569 215.557. Nothing in this paragraph expands the exemption in s. 570 215.557.

(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

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576 "net amount of all reimbursement moneys" means that amount which 577 remains after reimbursement for:

578 1. Preliminary or duplicate payments owed to private 579 reinsurers or other inuring reinsurance payments to private 580 reinsurers that satisfy statutory or contractual obligations of 581 the insolvent insurer attributable to covered events to such 582 reinsurers; or

583 2. Funds owed to a bank or other financial institution to 584 cover obligations of the insolvent insurer under a credit 585 agreement that assists the insolvent insurer in paying claims 586 attributable to covered events.

588 The private reinsurers, banks, or other financial institutions 589 shall be reimbursed or otherwise paid prior to payment to the 590 Florida Insurance Guaranty Association, notwithstanding any law 591 to the contrary. The guaranty association shall pay all claims up 592 to the maximum amount permitted by chapter 631; thereafter, any 593 remaining moneys shall be paid pro rata to claims not fully 594 satisfied. This paragraph does not apply to a joint underwriting 595 association, risk apportionment plan, or other entity created 596 under s. 627.351.

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(6) (5) REIMBURSEMENT PREMIUMS.--

598 (a) Each reimbursement contract shall require the insurer
599 to annually pay to the fund an actuarially indicated premium for
600 the reimbursement.

(b) The <u>division</u> State Board of Administration shall select
an independent consultant to develop a formula for determining
the actuarially indicated premium to be paid to the fund. The
formula shall specify, for each zip code or other limited

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605 geographical area, the amount of premium to be paid by an insurer 606 for each \$1,000 of insured value under covered policies in that 607 zip code or other area. In establishing premiums, the division board shall consider the coverage elected under paragraph (5)(b) 608 609 (4) (b) and any factors that tend to enhance the actuarial sophistication of ratemaking for the fund, including deductibles, 610 type of construction, type of coverage provided, relative 611 concentration of risks, and other such factors deemed by the 612 613 division board to be appropriate. The formula may provide for a 614 procedure to determine the premiums to be paid by new insurers that begin writing covered policies after the beginning of a 615 616 contract year, taking into consideration when the insurer starts 617 writing covered policies, the potential exposure of the insurer, the potential exposure of the fund, the administrative costs to 618 619 the insurer and to the fund, and any other factors deemed 620 appropriate by the board. The formula must be approved by 621 unanimous vote of the board. The board may, at any time, revise 622 the formula pursuant to the procedure provided in this paragraph.

623 (c) No later than September 1 of each year, each insurer 624 shall notify the division board of its insured values under 625 covered policies by zip code, as of June 30 of that year. On the 626 basis of these reports, the division board shall calculate the 627 premium due from the insurer, based on the formula adopted under 628 paragraph (b). The insurer shall pay the required annual premium 629 pursuant to a periodic payment plan specified in the contract. 630 The division board shall provide for payment of reimbursement 631 premium in periodic installments and for the adjustment of 632 provisional premium installments collected prior to submission of 633 the exposure report to reflect data in the exposure report. The

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634 <u>division</u> board shall collect interest on late reimbursement
635 premium payments consistent with the assumptions made in
636 developing the premium formula in accordance with paragraph (b).

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

640 If Citizens Property Insurance Corporation assumes or (e) 641 otherwise provides coverage for policies of an insurer placed in liquidation under chapter 631 pursuant to s. 627.351(6), the 642 643 corporation may, pursuant to conditions mutually agreed to between the corporation and the division State Board of 644 645 Administration, obtain coverage for such policies under its 646 contract with the fund or accept an assignment of the liquidated 647 insurer's contract with the fund. If Citizens Property Insurance 648 Corporation elects to cover these policies under the 649 corporation's contract with the division fund, it shall notify 650 the division board of its insured values with respect to such 651 policies within a specified time mutually agreed to between the 652 corporation and the division board, after such assumption or other coverage transaction, and the division fund shall treat 653 654 such policies as having been in effect as of June 30 of that 655 year. In the event of an assignment, the fund shall apply that 656 contract to such policies and treat Citizens Property Insurance 657 Corporation as if the corporation were the liquidated insurer for 658 the remaining term of the contract, and the corporation shall 659 have all rights and duties of the liquidated insurer beginning on 660 the date it provides coverage for such policies, but the 661 corporation is not subject to any preexisting rights, 662 liabilities, or duties of the liquidated insurer. The assignment,

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663 including any unresolved issues between the liquidated insurer 664 and Citizens Property Insurance Corporation under the contract, 665 shall be provided for in the liquidation order or otherwise determined by the court. However, if a covered event occurs 666 667 before the effective date of the assignment, the corporation may 668 not obtain coverage for such policies under its contract with the 669 fund and shall accept an assignment of the liquidated insurer's 670 contract as provided in this paragraph.

671

(7) (6) REVENUE BONDS.--

672

(a) General provisions.--

Upon the occurrence of a hurricane and a determination 673 1. 674 that the moneys in the fund are or will be insufficient to pay 675 reimbursement at the levels promised in the reimbursement 676 contracts, the board may take the necessary steps under paragraph 677 (c) or paragraph (d) for the issuance of revenue bonds for the 678 benefit of the fund. The proceeds of such revenue bonds may be 679 used to make reimbursement payments under reimbursement 680 contracts; to refinance or replace previously existing borrowings or financial arrangements; to pay interest on bonds; to fund 681 682 reserves for the bonds; to pay expenses incident to the issuance 683 or sale of any bond issued under this section, including costs of 684 validating, printing, and delivering the bonds, costs of printing 685 the official statement, costs of publishing notices of sale of 686 the bonds, and related administrative expenses; or for such other 687 purposes related to the financial obligations of the fund as the 688 board may determine. The term of the bonds may not exceed 30 689 years. The board may pledge or authorize the corporation to 690 pledge all or a portion of all revenues under subsection (6) (5)691 and under paragraph (b) to secure such revenue bonds and the

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692 division board may execute such agreements between the division 693 board and the issuer of any revenue bonds and providers of other 694 financing arrangements under paragraph (8) (b) $\frac{(7)}{(b)}$ as the 695 division board deems necessary to evidence, secure, preserve, and protect such pledge. If reimbursement premiums received under 696 697 subsection (6) (5) or earnings on such premiums are used to pay 698 debt service on revenue bonds, such premiums and earnings shall be used only after the use of the moneys derived from assessments 699 700 under paragraph (b). The funds, credit, property, or taxing power of the state or political subdivisions of the state shall not be 701 702 pledged for the payment of such bonds. The division board may 703 also enter into agreements under paragraph (c) or paragraph (d) 704 for the purpose of issuing revenue bonds in the absence of a 705 hurricane upon a determination that such action would maximize 706 the ability of the fund to meet future obligations.

707 The Legislature finds and declares that the issuance of 2. 708 bonds under this subsection is for the public purpose of paying 709 the proceeds of the bonds to insurers, thereby enabling insurers 710 to pay the claims of policyholders to assure that policyholders 711 are able to pay the cost of construction, reconstruction, repair, 712 restoration, and other costs associated with damage to property 713 of policyholders of covered policies after the occurrence of a 714 hurricane.

715

(b) Emergency assessments.--

1. If the board determines that the amount of revenue produced under subsection (6) (5) 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

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shall direct the Office of Insurance Regulation to levy, by 721 722 order, an emergency assessment on direct premiums for all 723 property and casualty lines of business in this state, including 724 property and casualty business of surplus lines insurers regulated under part VIII of chapter 626, but not including any 725 726 workers' compensation premiums or medical malpractice premiums. 727 As used in this subsection, the term "property and casualty 728 business" includes all lines of business identified on Form 2, 729 Exhibit of Premiums and Losses, in the annual statement required of authorized insurers by s. 624.424 and any rule adopted under 730 731 this section, except for those lines identified as accident and 732 health insurance and except for policies written under the 733 National Flood Insurance Program. The assessment shall be 734 specified as a percentage of direct written premium and is 735 subject to annual adjustments by the board in order to meet debt 736 obligations. The same percentage shall apply to all policies in 737 lines of business subject to the assessment issued or renewed 738 during the 12-month period beginning on the effective date of the 739 assessment.

740 2. A premium is not subject to an annual assessment under 741 this paragraph in excess of 6 percent of premium with respect to 742 obligations arising out of losses attributable to any one 743 contract year, and a premium is not subject to an aggregate 744 annual assessment under this paragraph in excess of 10 percent of 745 premium. An annual assessment under this paragraph shall continue 746 as long as the revenue bonds issued with respect to which the 747 assessment was imposed are outstanding, including any bonds the 748 proceeds of which were used to refund the revenue bonds, unless

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adequate provision has been made for the payment of the bondsunder the documents authorizing issuance of the bonds.

751 3. Emergency assessments shall be collected from 752 policyholders. Emergency assessments shall be remitted by 753 insurers as a percentage of direct written premium for the 754 preceding calendar quarter as specified in the order from the 755 Office of Insurance Regulation. The office shall verify the 756 accurate and timely collection and remittance of emergency 757 assessments and shall report the information to the division 758 board in a form and at a time specified by the division board. 759 Each insurer collecting assessments shall provide the information 760 with respect to premiums and collections as may be required by 761 the office to enable the office to monitor and verify compliance 762 with this paragraph.

763 4. With respect to assessments of surplus lines premiums, 764 each surplus lines agent shall collect the assessment at the same 765 time as the agent collects the surplus lines tax required by s. 766 626.932, and the surplus lines agent shall remit the assessment 767 to the Florida Surplus Lines Service Office created by s. 626.921 768 at the same time as the agent remits the surplus lines tax to the 769 Florida Surplus Lines Service Office. The emergency assessment on 770 each insured procuring coverage and filing under s. 626.938 shall 771 be remitted by the insured to the Florida Surplus Lines Service 772 Office at the time the insured pays the surplus lines tax to the Florida Surplus Lines Service Office. The Florida Surplus Lines 773 774 Service Office shall remit the collected assessments to the fund 775 or corporation as provided in the order levied by the Office of 776 Insurance Regulation. The Florida Surplus Lines Service Office 777 shall verify the proper application of such emergency assessments

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778 and shall assist the division board in ensuring the accurate and 779 timely collection and remittance of assessments as required by 780 the board. The Florida Surplus Lines Service Office shall 781 annually calculate the aggregate written premium on property and casualty business, other than workers' compensation and medical 782 783 malpractice, procured through surplus lines agents and insureds 784 procuring coverage and filing under s. 626.938 and shall report 785 the information to the division board in a form and at a time 786 specified by the division board.

787 5. Any assessment authority not used for a particular 788 contract year may be used for a subsequent contract year. If, for 789 a subsequent contract year, the board determines that the amount 790 of revenue produced under subsection (6) (5) is insufficient to 791 fund the obligations, costs, and expenses of the fund and the 792 corporation, including repayment of revenue bonds and that 793 portion of the debt service coverage not met by reimbursement 794 premiums, the board shall direct the Office of Insurance 795 Regulation to levy an emergency assessment up to an amount not 796 exceeding the amount of unused assessment authority from a 797 previous contract year or years, plus an additional 4 percent 798 provided that the assessments in the aggregate do not exceed the 799 limits specified in subparagraph 2.

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

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807 under paragraph (c). On or after the date of the notice and until 808 the date the corporation has no bonds outstanding, the fund shall 809 have no right, title, or interest in or to the assessments, 810 except as provided in the fund's agreement with the corporation.

811 7. Emergency assessments are not premium and are not 812 subject to the premium tax, to the surplus lines tax, to any 813 fees, or to any commissions. An insurer is liable for all 814 assessments that it collects and must treat the failure of an 815 insured to pay an assessment as a failure to pay the premium. An 816 insurer is not liable for uncollectible assessments.

817 8. When an insurer is required to return an unearned 818 premium, it shall also return any collected assessment 819 attributable to the unearned premium. A credit adjustment to the 820 collected assessment may be made by the insurer with regard to 821 future remittances that are payable to the fund or corporation, 822 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.

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835 (c) Revenue bond issuance through counties or 836 municipalities.--

837 If the board elects to enter into agreements with local 1. 838 governments for the issuance of revenue bonds for the benefit of 839 the fund, the division board shall enter into such contracts with 840 one or more local governments, including agreements providing for 841 the pledge of revenues, as are necessary to effect such issuance. 842 The governing body of a county or municipality is authorized to 843 issue bonds as defined in s. 125.013 or s. 166.101 from time to time to fund an assistance program, in conjunction with the 844 Florida Hurricane Catastrophe Fund, for the purposes set forth in 845 846 this section or for the purpose of paying the costs of 847 construction, reconstruction, repair, restoration, and other costs associated with damage to properties of policyholders of 848 849 covered policies due to the occurrence of a hurricane by assuring 850 that policyholders located in this state are able to recover 851 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.

3. The state hereby covenants with holders of bonds issued under this paragraph that the state will not repeal or abrogate the power of the board to direct the Office of Insurance Regulation to levy the assessments and to collect the proceeds of the revenues pledged to the payment of such bonds as long as any such bonds remain outstanding unless adequate provision has been

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864 made for the payment of such bonds pursuant to the documents 865 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.

870 (d) Florida Hurricane Catastrophe Fund Finance871 Corporation.--

872 1. In addition to the findings and declarations in873 subsection (1), the Legislature also finds and declares that:

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.

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The corporation shall operate under a six-member five-893 b. 894 member board of directors consisting of the Governor or a 895 designee, the Chief Financial Officer or a designee, the Attorney 896 General or a designee, the Commissioner of the Department of Agriculture and Consumer Services or a designee, the director of 897 898 the Division of Bond Finance of the State Board of 899 Administration, and the director of the division senior employee 900 of the State Board of Administration responsible for operations 901 of the Florida Hurricane Catastrophe Fund of the State Board of 902 Administration.

903 c. The corporation has all of the powers of corporations 904 under chapter 607 and under chapter 617, subject only to the 905 provisions of this subsection.

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

909 e. The corporation may invest in any of the investments910 authorized under s. 215.47.

911 f. There shall be no liability on the part of, and no cause 912 of action shall arise against, any <u>member of the</u> board <u>of</u> 913 <u>directors</u> members or employees of the corporation for any actions 914 taken by them in the performance of their duties under this 915 paragraph.

916 3.a. In actions under chapter 75 to validate any bonds 917 issued by the corporation, the notice required by s. 75.06 shall 918 be published only in Leon County and in two newspapers of general 919 circulation in the state, and the complaint and order of the 920 court shall be served only on the State Attorney of the Second 921 Judicial Circuit.

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922 The state hereby covenants with holders of bonds of the b. 923 corporation that the state will not repeal or abrogate the power 924 of the board to direct the Office of Insurance Regulation to levy 925 the assessments and to collect the proceeds of the revenues 926 pledged to the payment of such bonds as long as any such bonds 927 remain outstanding unless adequate provision has been made for 928 the payment of such bonds pursuant to the documents authorizing 929 the issuance of such bonds.

930 4. The bonds of the corporation are not a debt of the state 931 or of any political subdivision, and neither the state nor any 932 political subdivision is liable on such bonds. The corporation 933 does not have the power to pledge the credit, the revenues, or 934 the taxing power of the state or of any political subdivision. 935 The credit, revenues, or taxing power of the state or of any 936 political subdivision shall not be deemed to be pledged to the 937 payment of any bonds of the corporation.

938 5.a. The property, revenues, and other assets of the 939 corporation; the transactions and operations of the corporation 940 and the income from such transactions and operations; and all 941 bonds issued under this paragraph and interest on such bonds are 942 exempt from taxation by the state and any political subdivision, 943 including the intangibles tax under chapter 199 and the income 944 tax under chapter 220. This exemption does not apply to any tax 945 imposed by chapter 220 on interest, income, or profits on debt 946 obligations owned by corporations other than the Florida 947 Hurricane Catastrophe Fund Finance Corporation.

b. All bonds of the corporation shall be and constitute
legal investments without limitation for all public bodies of
this state; for all banks, trust companies, savings banks,

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951 savings associations, savings and loan associations, and 952 investment companies; for all administrators, executors, 953 trustees, and other fiduciaries; for all insurance companies and 954 associations and other persons carrying on an insurance business; 955 and for all other persons who are now or may hereafter be 956 authorized to invest in bonds or other obligations of the state 957 and shall be and constitute eligible securities to be deposited as collateral for the security of any state, county, municipal, 958 959 or other public funds. This sub-subparagraph shall be considered 960 as additional and supplemental authority and shall not be limited 961 without specific reference to this sub-subparagraph.

962 6. The corporation and its corporate existence shall 963 continue until terminated by law; however, no such law shall take 964 effect as long as the corporation has bonds outstanding unless 965 adequate provision has been made for the payment of such bonds 966 pursuant to the documents authorizing the issuance of such bonds. 967 Upon termination of the existence of the corporation, all of its 968 rights and properties in excess of its obligations shall pass to 969 and be vested in the state.

970

(e) Protection of bondholders.--

971 1. As long as the corporation has any bonds outstanding, 972 neither the fund nor the corporation shall have the authority to 973 file a voluntary petition under chapter 9 of the federal 974 Bankruptcy Code or such corresponding chapter or sections as may 975 be in effect, from time to time, and neither any public officer 976 nor any organization, entity, or other person shall authorize the fund or the corporation to be or become a debtor under chapter 9 977 978 of the federal Bankruptcy Code or such corresponding chapter or

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979 sections as may be in effect, from time to time, during any such 980 period.

981 2. The state hereby covenants with holders of bonds of the 982 corporation that the state will not limit or alter the denial of 983 authority under this paragraph or the rights under this section 984 vested in the fund or the corporation to fulfill the terms of any 985 agreements made with such bondholders or in any way impair the 986 rights and remedies of such bondholders as long as any such bonds 987 remain outstanding unless adequate provision has been made for 988 the payment of such bonds pursuant to the documents authorizing 989 the issuance of such bonds.

990 3. Notwithstanding any other provision of law, any pledge 991 of or other security interest in revenue, money, accounts, 992 contract rights, general intangibles, or other personal property 993 made or created by the fund or the corporation shall be valid, 994 binding, and perfected from the time such pledge is made or other 995 security interest attaches without any physical delivery of the 996 collateral or further act and the lien of any such pledge or 997 other security interest shall be valid, binding, and perfected 998 against all parties having claims of any kind in tort, contract, 999 or otherwise against the fund or the corporation irrespective of 1000 whether or not such parties have notice of such claims. No 1001 instrument by which such a pledge or security interest is created 1002 nor any financing statement need be recorded or filed.

1003

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

(a) The board may <u>authorize the division's procurement of</u>
 procure reinsurance from reinsurers acceptable to the Office of
 Insurance Regulation for the purpose of maximizing the capacity
 of the fund and may enter into capital market transactions,

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1008 including, but not limited to, industry loss warranties, 1009 catastrophe bonds, side-car arrangements, or financial contracts 1010 permissible for the <u>State Board of Administration's board's</u> usage 1011 under s. 215.47(10) and (11), consistent with prudent management 1012 of the fund.

(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.

1017 (C) Each fiscal year, the Legislature shall appropriate from the investment income of the Florida Hurricane Catastrophe 1018 1019 Fund an amount no less than \$10 million and no more than 35 1020 percent of the investment income based upon the most recent 1021 fiscal year-end audited financial statements for the purpose of 1022 providing funding for local governments, state agencies, public 1023 and private educational institutions, and nonprofit organizations to support programs intended to improve hurricane preparedness, 1024 1025 reduce potential losses in the event of a hurricane, provide research into means to reduce such losses, educate or inform the 1026 1027 public as to means to reduce hurricane losses, assist the public 1028 in determining the appropriateness of particular upgrades to 1029 structures or in the financing of such upgrades, or protect local 1030 infrastructure from potential damage from a hurricane. Moneys 1031 shall first be available for appropriation under this paragraph 1032 in fiscal year 1997-1998. Moneys in excess of the \$10 million 1033 specified in this paragraph shall not be available for 1034 appropriation under this paragraph if the board State Board of 1035 Administration finds that an appropriation of investment income

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1036 from the fund would jeopardize the actuarial soundness of the 1037 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.

(e) In order to assure the equitable operation of the fund, the <u>division</u> board may impose a reasonable fee on an insurer to recover costs involved in reprocessing inaccurate, incomplete, or untimely exposure data submitted by the insurer.

1048 (9) (8) ADVISORY COUNCIL. -- The division State Board of 1049 Administration shall appoint a nine-member advisory council that 1050 consists of an actuary, a meteorologist, an engineer, a 1051 representative of insurers, a representative of insurance agents, 1052 a representative of reinsurers, and three consumers who shall 1053 also be representatives of other affected professions and industries, to provide the division board with information and 1054 1055 advice in connection with its duties under this section. Members 1056 of the advisory council shall serve at the pleasure of the board 1057 and are eligible for per diem and travel expenses under s. 112.061. 1058

1059 (10) (9) APPLICABILITY OF S. 19, ART. III OF THE STATE 1060 CONSTITUTION.--The Legislature finds that the Florida Hurricane 1061 Catastrophe Fund created by this section is a trust fund 1062 established for bond covenants, indentures, or resolutions within 1063 the meaning of s. 19(f)(3), Art. III of the State Constitution.

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1064 <u>(11)(10)</u> VIOLATIONS.--Any violation of this section or of 1065 rules adopted under this section constitutes a violation of the 1066 insurance code.

1067 <u>(12)(11)</u> LEGAL PROCEEDINGS.--The division board is 1068 authorized to take any action necessary to enforce the rules, and 1069 the provisions and requirements of the reimbursement contract, 1070 required by and adopted pursuant to this section.

1071 (13) (12) FEDERAL OR MULTISTATE CATASTROPHIC FUNDS.--Upon 1072 the creation of a federal or multistate catastrophic insurance or 1073 reinsurance program intended to serve purposes similar to the 1074 purposes of the fund created by this section, the division, upon 1075 approval by the board, State Board of Administration shall 1076 promptly make recommendations to the Legislature for coordination with the federal or multistate program, for termination of the 1077 1078 fund, or for such other actions as the board finds appropriate in 1079 the circumstances.

1080 <u>(14) (13)</u> REVERSION OF FUND ASSETS UPON TERMINATION.--The 1081 fund, the division, and the duties of the board under this 1082 section may be terminated only by law. Upon termination of the 1083 fund, all assets of the fund shall revert to the General Revenue 1084 Fund.

1085 <u>(15) (14)</u> SEVERABILITY.--If any provision of this section or 1086 its application to any person or circumstance is held invalid, 1087 the invalidity does not affect other provisions or applications 1088 of the section which can be given effect without the invalid 1089 provision or application, and to this end the provisions of this 1090 section are declared severable.

1091 (16) (15) COLLATERAL PROTECTION INSURANCE.--As used in this 1092 section and ss. 627.311 and 627.351, the term "collateral

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1093 protection insurance" means commercial property insurance of 1094 which a creditor is the primary beneficiary and policyholder and 1095 which protects or covers an interest of the creditor arising out 1096 of a credit transaction secured by real or personal property. 1097 Initiation of such coverage is triggered by the mortgagor's 1098 failure to maintain insurance coverage as required by the 1099 mortgage or other lending document. Collateral protection 1100 insurance is not residential coverage.

1101 <u>(17) (16)</u> TEMPORARY EMERGENCY OPTIONS FOR ADDITIONAL 1102 COVERAGE OPTIONS.--

1103

1104

(a) Findings and intent.--

1. The Legislature finds that:

1105 Because of temporary disruptions in the market for a. 1106 catastrophic reinsurance, many property insurers were unable to 1107 procure reinsurance for the 2006 hurricane season with an attachment point below the insurers' respective Florida Hurricane 1108 Catastrophe Fund attachment points, were unable to procure 1109 sufficient amounts of such reinsurance, or were able to procure 1110 1111 such reinsurance only by incurring substantially higher costs 1112 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.

1117 c. It is likely that the reinsurance market disruptions 1118 will not significantly abate prior to the 2007 hurricane season.

1119 2. It is the intent of the Legislature to create a 1120 temporary emergency program, applicable to the 2007, 2008, and 1121 2009 hurricane seasons, to address these market disruptions and

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1122 enable insurers, at their option, to procure additional coverage 1123 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, the board shall offer for each of such years the optional coverage as provided in this subsection.

1134 (d) Additional definitions.--As used in this subsection,
1135 the term:

1136 1. "TEACO options" means the temporary emergency additional 1137 coverage options created under this subsection.

1138 2. "TEACO insurer" means an insurer that has opted to 1139 obtain coverage under the TEACO options in addition to the 1140 coverage provided to the insurer under its reimbursement 1141 contract.

11423. "TEACO reimbursement premium" means the premium charged1143by the fund for coverage provided under the TEACO options.

1144 4. "TEACO retention" means the amount of losses below which 1145 a TEACO insurer is not entitled to reimbursement from the fund 1146 under the TEACO option selected. A TEACO insurer's retention 1147 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

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1151 shall be calculated by dividing \$3 billion, \$4 billion, or \$5 1152 billion by the total estimated mandatory FHCF reimbursement 1153 premium assuming all insurers selected the 90-percent coverage 1154 level.

1155 b. The TEACO retention multiples as determined under sub-1156 subparagraph a. shall be adjusted to reflect the coverage level 1157 elected by the insurer. For insurers electing the 90-percent coverage level, the adjusted retention multiple is 100 percent of 1158 1159 the amount determined under sub-subparagraph a. For insurers 1160 electing the 75-percent coverage level, the retention multiple is 1161 120 percent of the amount determined under sub-subparagraph a. 1162 For insurers electing the 45-percent coverage level, the adjusted 1163 retention multiple is 200 percent of the amount determined under 1164 sub-subparagraph a.

1165 c. An insurer shall determine its provisional TEACO 1166 retention by multiplying its estimated mandatory FHCF 1167 reimbursement premium by the applicable adjusted TEACO retention 1168 multiple and shall determine its actual TEACO retention by 1169 multiplying its actual mandatory FHCF reimbursement premium by 1170 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).

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1178 5. "TEACO addendum" means an addendum to the reimbursement 1179 contract reflecting the obligations of the fund and TEACO 1180 insurers under the program created by this subsection.

1181 1182 6. "FHCF" means the Florida Hurricane Catastrophe Fund.(e) TEACO addendum.--

1183 1. The TEACO addendum shall provide for reimbursement of 1184 TEACO insurers for covered events occurring during the contract 1185 year, in exchange for the TEACO reimbursement premium paid into 1186 the fund under paragraph (f). Any insurer writing covered 1187 policies has the option of choosing to accept the TEACO addendum 1188 for any of the 3 contract years that the coverage is offered.

1189 2. The TEACO addendum shall contain a promise by the 1190 <u>division</u> board to reimburse the TEACO insurer for 45 percent, 75 1191 percent, or 90 percent of its losses from each covered event in 1192 excess of the insurer's TEACO retention, plus 5 percent of the 1193 reimbursed losses to cover loss adjustment expenses. The 1194 percentage shall be the same as the coverage level selected by 1195 the insurer under paragraph <u>(5)(b)</u> (4)(b).

1196 3. The TEACO addendum shall provide that reimbursement 1197 amounts shall not be reduced by reinsurance paid or payable to 1198 the insurer from other sources.

1199 The TEACO addendum shall also provide that the 4. 1200 obligation of the division board with respect to all TEACO 1201 addenda shall not exceed an amount equal to two times the 1202 difference between the industry retention level calculated under paragraph (2)(e) and the \$3 billion, \$4 billion, or \$5 billion 1203 1204 industry TEACO retention level options actually selected, but in 1205 no event may the division's board's obligation exceed the actual 1206 claims-paying capacity of the fund plus the additional capacity

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1207 created in paragraph (g). If the actual claims-paying capacity 1208 and the additional capacity created under paragraph (g) fall 1209 short of the division's board's obligations under the reimbursement contract, each insurer's share of the fund's 1210 1211 capacity shall be prorated based on the premium an insurer pays 1212 for its mandatory reimbursement coverage and the premium paid for its optional TEACO coverage as each such premium bears to the 1213 1214 total premiums paid to the fund times the available capacity.

1215 5. The priorities, schedule, and method of reimbursements 1216 under the TEACO addendum shall be the same as provided under 1217 subsection (5) (4).

1218 A TEACO insurer's maximum reimbursement for a single 6. 1219 event shall be equal to the product of multiplying its mandatory 1220 FHCF premium by the difference between its FHCF retention 1221 multiple and its TEACO retention multiple under the TEACO option selected and by the coverage selected under paragraph (5) (b) 1222 1223 (4) (b), plus an additional 5 percent for loss adjustment expenses. A TEACO insurer's maximum reimbursement under the TEACO 1224 1225 option selected for a TEACO insurer's two largest events shall be 1226 twice its maximum reimbursement for a single event.

1227

(f) TEACO reimbursement premiums.--

1228 1. Each TEACO insurer shall pay to the fund, in the manner 1229 and at the time provided in the reimbursement contract for 1230 payment of reimbursement premiums, a TEACO reimbursement premium 1231 calculated as specified in this paragraph.

1232 2. The insurer's TEACO reimbursement premium associated 1233 with the \$3 billion retention option shall be equal to 85 percent 1234 of a TEACO insurer's maximum reimbursement for a single event as 1235 calculated under subparagraph (e)6. The TEACO reimbursement

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1236 premium associated with the \$4 billion retention option shall be 1237 equal to 80 percent of a TEACO insurer's maximum reimbursement 1238 for a single event as calculated under subparagraph (e)6. The 1239 TEACO premium associated with the \$5 billion retention option 1240 shall be equal to 75 percent of a TEACO insurer's maximum 1241 reimbursement for a single event as calculated under subparagraph 1242 (e)6.

1243 (q) Effect on claims-paying capacity of the fund. -- For the 1244 contract term commencing June 1, 2007, the contract year 1245 commencing June 1, 2008, and the contract term beginning June 1, 1246 2009, the program created by this subsection shall increase the 1247 claims-paying capacity of the fund as provided in subparagraph 1248 (5) (c)1. (4) (c)1. by an amount equal to two times the difference 1249 between the industry retention level calculated under paragraph 1250 (2) (e) and the \$3 billion industry TEACO retention level 1251 specified in sub-subparagraph (d)4.a. The additional capacity 1252 shall apply only to the additional coverage provided by the TEACO 1253 option and shall not otherwise affect any insurer's reimbursement 1254 from the fund.

- 1255
- 1256

(18) (17) TEMPORARY INCREASE IN COVERAGE LIMIT OPTIONS.--(a) Findings and intent.--

1257

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.

1263 b. The reinsurance market problems were responsible, at 1264 least in part, for substantial premium increases to many

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1265 consumers and increases in the number of policies issued by 1266 Citizens Property Insurance Corporation.

1267 c. It is likely that the reinsurance market disruptions 1268 will not significantly abate prior to the <u>2008</u> 2007 hurricane 1269 season.

1270 2. It is the intent of the Legislature to create options 1271 for insurers to purchase a temporary increased coverage limit 1272 above the statutorily determined limit in subparagraph (4)(c)1., 1273 applicable for the 2007, 2008, and 2009 hurricane seasons, to 1274 address market disruptions and enable insurers, at their option, 1275 to procure additional coverage from the Florida Hurricane 1276 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.

1287 (d) Additional definitions.--As used in this subsection, 1288 the term:

1289

1. "FHCF" means Florida Hurricane Catastrophe Fund.

1290 2. "FHCF reimbursement premium" means the premium paid by 1291 an insurer for its coverage as a mandatory participant in the 1292 FHCF, but does not include additional premiums for optional 1293 coverages.

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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> (4)(c)1. by the aggregate reimbursement premiums paid by all insurers estimated or projected as of calendar year-end.

1299 4. "TICL" means the temporary increase in coverage limit.
1300 5. "TICL options" means the temporary increase in coverage
1301 options created under this subsection.

1302 6. "TICL insurer" means an insurer that has opted to obtain
1303 coverage under the TICL options addendum in addition to the
1304 coverage provided to the insurer under its FHCF reimbursement
1305 contract.

13067. "TICL reimbursement premium" means the premium charged1307by the fund for coverage provided under the TICL option.

1308 8. "TICL coverage multiple" means the coverage multiple 1309 when multiplied by an insurer's <u>FHCF's</u> reimbursement premium that 1310 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:

a. The <u>division</u> board shall calculate and report to each
TICL insurer the TICL coverage multiples based on <u>9</u> 12 options
for increasing the insurer's FHCF coverage limit. Each TICL
coverage multiple shall be calculated by dividing \$1 billion, \$2
billion, \$3 billion, \$4 billion, \$5 billion, \$6 billion, \$7

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1323 billion, \$8 billion, and \$9 billion, \$10 billion, \$11 billion, or 1324 \$12 billion by the total estimated aggregate FHCF reimbursement 1325 premiums for the 2007-2008 contract year, the 2008-2009 contract 1326 year, and the 2009-2010 contract year.

1327 b. The TICL insurer's increased coverage shall be the FHCF 1328 reimbursement premium multiplied by the TICL coverage multiple 1329 for the TICL option selected. In order to determine an insurer's total limit of coverage, an insurer shall add its TICL coverage 1330 1331 multiple to its payout multiple. The total shall represent a 1332 number that, when multiplied by an insurer's FHCF reimbursement premium for a given reimbursement contract year, defines an 1333 1334 insurer's total limit of FHCF reimbursement coverage for that 1335 reimbursement contract year.

1336 10. "TICL options addendum" means an addendum to the 1337 reimbursement contract reflecting the obligations of the fund and 1338 insurers selecting an option to increase an insurer's FHCF 1339 coverage limit.

1340

(e) TICL options addendum.--

1341 1. The TICL options addendum shall provide for reimbursement of TICL insurers for covered events occurring 1342 1343 between June 1, 2007, and May 31, 2008, and between June 1, 2008, 1344 and May 31, 2009, or between June 1, 2009, and May 31, 2010, in 1345 exchange for the TICL reimbursement premium paid into the fund 1346 under paragraph (f). Any insurer writing covered policies has the 1347 option of selecting an increased limit of coverage under the TICL 1348 options addendum and shall select such coverage at the time that it executes the FHCF reimbursement contract. 1349

1350 2. The TICL addendum shall contain a promise by the board1351 to reimburse the TICL insurer for 70 percent of the TICL coverage

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1352 <u>for the TICL option selected for the insurer's</u> 45 percent, 75 1353 <u>percent, or 90 percent of its</u> losses from each covered event in 1354 excess of the insurer's retention, plus 5 percent of the 1355 reimbursed losses to cover loss adjustment expenses. The 1356 <u>percentage shall be the same as the coverage level selected by</u> 1357 <u>the insurer under paragraph (4)(b).</u>

1358 3. The TICL addendum shall provide that reimbursement 1359 amounts shall not be reduced by reinsurance paid or payable to 1360 the insurer from other sources.

1361 4. The priorities, schedule, and method of reimbursements
1362 under the TICL addendum shall be the same as provided under
1363 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).

1369 Effect on claims-paying capacity of the fund. -- For the (q) 1370 contract terms commencing June 1, 2007, June 1, 2008, and June 1, 2009, the program created by this subsection shall increase the 1371 1372 claims-paying capacity of the fund as provided in subparagraph 1373 (5) (c)1. (4) (c)1. by an amount not to exceed \$9 \$12 billion and 1374 shall depend on the TICL coverage options selected and the number 1375 of insurers that select the TICL optional coverage. The 1376 additional capacity shall apply only to the additional coverage 1377 provided under the TICL options and shall not otherwise affect 1378 any insurer's reimbursement from the fund if the insurer chooses 1379 not to select the temporary option to increase its limit of coverage under the FHCF. 1380

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1381 (h) Increasing the claims-paying capacity of the fund. -- For 1382 the contract years commencing June 1, 2007, June 1, 2008, and 1383 June 1, 2009, the board may increase the claims-paying capacity 1384 of the fund as provided in paragraph (g) by an amount not to 1385 exceed \$4 billion in four \$1 billion options and shall depend on 1386 the TICL coverage options selected and the number of insurers 1387 that select the TICL optional coverage. Each insurer's TICL 1388 premium shall be calculated based upon the additional limit of 1389 increased coverage that the insurer selects. Such limit is 1390 determined by multiplying the TICL multiple associated with one 1391 of the four options times the insurer's FHCF reimbursement 1392 premium. The reimbursement premium associated with the additional 1393 coverage provided in this paragraph shall be determined as 1394 specified in subsection (6) (5).

1395Section 2.Section 215.557, Florida Statutes, is amended to1396read:

1397 215.557 Reports of insured values.--The reports of insured 1398 values under covered policies by zip code submitted to the 1399 <u>Division of the Florida Hurricane Catastrophe Fund</u> State Board of 1400 Administration pursuant to s. 215.555, as created by s. 1, ch. 1401 93-409, Laws of Florida, or similar legislation, are confidential 1402 and exempt from the provisions of s. 119.07(1) and s. 24(a), Art. 1403 I of the State Constitution.

1404Section 3. Paragraph (h) of subsection (4) of section1405215.5586, Florida Statutes, is amended to read:

1406 215.5586 My Safe Florida Home Program.--There is 1407 established within the Department of Financial Services the My 1408 Safe Florida Home Program. The department shall provide fiscal 1409 accountability, contract management, and strategic leadership for

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1410 the program, consistent with this section. This section does not 1411 create an entitlement for property owners or obligate the state 1412 in any way to fund the inspection or retrofitting of residential 1413 property in this state. Implementation of this program is subject 1414 to annual legislative appropriations. It is the intent of the 1415 Legislature that the My Safe Florida Home Program provide 1416 inspections for at least 400,000 site-built, single-family, 1417 residential properties and provide grants to at least 35,000 1418 applicants before June 30, 2009. The program shall develop and 1419 implement a comprehensive and coordinated approach for hurricane 1420 damage mitigation that shall include the following:

(4) ADVISORY COUNCIL.--There is created an advisory council to provide advice and assistance to the department regarding administration of the program. The advisory council shall consist of:

1425(h) The director senior officer of the Division of the1426Florida Hurricane Catastrophe Fund.

1428 Members appointed under paragraphs (a)-(d) shall serve at the 1429 pleasure of the Financial Services Commission. Members appointed 1430 under paragraphs (e) and (f) shall serve at the pleasure of the 1431 appointing officer. All other members shall serve voting ex 1432 officio. Members of the advisory council shall serve without 1433 compensation but may receive reimbursement as provided in s. 1434 112.061 for per diem and travel expenses incurred in the 1435 performance of their official duties.

1436Section 4.Subsection (1) of section 215.559, Florida1437Statutes, is amended to read:

1438

1427

215.559 Hurricane Loss Mitigation Program.--

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1447

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(1) There is created a Hurricane Loss Mitigation Program.
The Legislature shall annually appropriate \$10 million of the
moneys authorized for appropriation under <u>s. 215.555(8)</u> s.
215.555(7)(c) from the Florida Hurricane Catastrophe Fund to the
Department of Community Affairs for the purposes set forth in
this section.

1445Section 5. Subsection (2) and paragraph (a) of subsection1446(3) of section 215.5595, Florida Statutes, are amended to read:

215.5595 Insurance Capital Build-Up Incentive Program.--

1448 (2) The purpose of this section is to provide surplus notes
1449 to new or existing authorized residential property insurers under
1450 the Insurance Capital Build-Up Incentive Program administered by
1451 the Division of the Florida Hurricane Catastrophe Fund of the
1452 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.

1460 The insurer must contribute an amount of new capital to (b) 1461 its surplus which is at least equal to the amount of the surplus 1462 note and must apply to the board by July 1, 2006. If an insurer 1463 applies after July 1, 2006, but before June 1, 2007, the amount 1464 of the surplus note is limited to one-half of the new capital 1465 that the insurer contributes to its surplus, except that an 1466 insurer writing only manufactured housing policies is eligible to 1467 receive a surplus note of up to \$7 million. For purposes of this

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1468 section, new capital must be in the form of cash or cash 1469 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).

1477 (d) The insurer must commit to meeting a minimum writing 1478 ratio of net written premium to surplus of at least 2:1 for the 1479 term of the surplus note, which shall be determined by the Office 1480 of Insurance Regulation and certified quarterly to the board. For this purpose, the term "net written premium" means net written 1481 1482 premium for residential property insurance in Florida, including the peril of wind, and "surplus" refers to the entire surplus of 1483 the insurer. If the required ratio is not maintained during the 1484 1485 term of the surplus note, the board may increase the interest 1486 rate, accelerate the repayment of interest and principal, or shorten the term of the surplus note, subject to approval by the 1487 1488 Commissioner of Insurance of payments by the insurer of principal 1489 and interest as provided in paragraph (f).

(e) If the requirements of this section are met, the board may approve an application by an insurer for a surplus note, unless the board determines that the financial condition of the insurer and its business plan for writing residential property insurance in Florida places an unreasonably high level of financial risk to the state of nonpayment in full of the interest and principal. The board shall consult with the Office of

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1497 Insurance Regulation and may contract with independent financial1498 and insurance consultants in making this determination.

1499 The surplus note must be repayable to the state with a (f) 1500 term of 20 years. The surplus note shall accrue interest on the 1501 unpaid principal balance at a rate equivalent to the 10-year U.S. 1502 Treasury Bond rate, require the payment only of interest during 1503 the first 3 years, and include such other terms as approved by 1504 the board. Payment of principal or interest by the insurer on the 1505 surplus note must be approved by the Commissioner of Insurance, 1506 who shall approve such payment unless the commissioner determines 1507 that such payment will substantially impair the financial 1508 condition of the insurer. If such a determination is made, the 1509 commissioner shall approve such payment that will not substantially impair the financial condition of the insurer. 1510

1511 The total amount of funds available for the program is (q) 1512 limited to the amount appropriated by the Legislature for this 1513 purpose. If the amount of surplus notes requested by insurers 1514 exceeds the amount of funds available, the board may prioritize insurers that are eligible and approved, with priority for 1515 funding given to insurers writing only manufactured housing 1516 1517 policies, regardless of the date of application, based on the 1518 financial strength of the insurer, the viability of its proposed 1519 business plan for writing additional residential property 1520 insurance in the state, and the effect on competition in the 1521 residential property insurance market. Between insurers writing 1522 residential property insurance covering manufactured housing, 1523 priority shall be given to the insurer writing the highest 1524 percentage of its policies covering manufactured housing.

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(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.

1533 (j) As used in this section, "an insurer writing only 1534 manufactured housing policies" includes:

1535 1. A Florida domiciled insurer that begins writing personal 1536 lines residential manufactured housing policies in Florida after 1537 March 1, 2007, and that removes a minimum of 50,000 policies from 1538 Citizens Property Insurance Corporation without accepting a 1539 bonus, provided at least 25 percent of its policies cover 1540 manufactured housing. Such an insurer may count any funds above the minimum capital and surplus requirement that were contributed 1541 1542 into the insurer after March 1, 2007, as new capital under this 1543 section.

15442. A Florida domiciled insurer that writes at least 401545percent of its policies covering manufactured housing in Florida.

1546

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

1547(a) "Board" means the Division of the Florida Hurricane1548Catastrophe 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:

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1553 627.0628 Florida Commission on Hurricane Loss Projection 1554 Methodology; public records exemption; public meetings 1555 exemption.--

1556

(1) LEGISLATIVE FINDINGS AND INTENT.--

1557 It is the intent of the Legislature to create the (C) 1558 Florida Commission on Hurricane Loss Projection Methodology as a 1559 panel of experts to provide the most actuarially sophisticated 1560 guidelines and standards for projection of hurricane losses 1561 possible, given the current state of actuarial science. It is the 1562 further intent of the Legislature that such standards and 1563 guidelines must be used by the Division of the Florida Hurricane 1564 Catastrophe Fund of the State Board of Administration in 1565 developing reimbursement premium rates for the Florida Hurricane 1566 Catastrophe Fund, and, subject to paragraph (3)(c), may be used 1567 by insurers in rate filings under s. 627.062 unless the way in 1568 which such standards and guidelines were applied by the insurer 1569 was erroneous, as shown by a preponderance of the evidence.

1570

(2) COMMISSION CREATED.--

1571 There is created the Florida Commission on Hurricane (a) 1572 Loss Projection Methodology, which is assigned to the Division of 1573 the Florida Hurricane Catastrophe Fund of the State Board of 1574 Administration. For the purposes of this section, the term 1575 "commission" means the Florida Commission on Hurricane Loss 1576 Projection Methodology. The commission shall be administratively 1577 housed within the State Board of Administration, but it shall 1578 independently exercise the powers and duties specified in this 1579 section.

1580 (b) The commission shall consist of the following 11
1581 members:

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1582 1. The insurance consumer advocate. 1583 2. The director of the Division of the Florida Hurricane 1584 Catastrophe Fund senior employee of the State Board of Administration responsible for operations of the Florida 1585 1586 Hurricane Catastrophe Fund. 1587 3. The Executive Director of the Citizens Property 1588 Insurance Corporation. 1589 4. The Director of the Division of Emergency Management of 1590 the Department of Community Affairs. 1591 5. The actuary member of the Florida Hurricane Catastrophe 1592 Fund Advisory Council. 1593 6. An employee of the office who is an actuary responsible 1594 for property insurance rate filings and who is appointed by the director of the office. 1595 1596 Five members appointed by the Chief Financial Officer, 7. 1597 as follows: 1598 a. An actuary who is employed full time by a property and casualty insurer which was responsible for at least 1 percent of 1599 1600 the aggregate statewide direct written premium for homeowner's 1601 insurance in the calendar year preceding the member's appointment 1602 to the commission. 1603 b. An expert in insurance finance who is a full-time member 1604 of the faculty of the State University System and who has a 1605 background in actuarial science. 1606 An expert in statistics who is a full-time member of the с. 1607 faculty of the State University System and who has a background in insurance. 1608 1609 An expert in computer system design who is a full-time d. member of the faculty of the State University System. 1610

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1611 An expert in meteorology who is a full-time member of e. 1612 the faculty of the State University System and who specializes in 1613 hurricanes.

The board of the Division of the Florida Hurricane 1614 (d) 1615 Catastrophe Fund of the State Board of Administration shall 1616 annually appoint one of the members of the commission to serve as 1617 chair.

1618 (f) The Division of the Florida Hurricane Catastrophe Fund 1619 of the State Board of Administration shall, as a cost of 1620 administration of the Florida Hurricane Catastrophe Fund, provide 1621 for travel, expenses, and staff support for the commission.

1622 There shall be no liability on the part of, and no (q) 1623 cause of action of any nature shall arise against, any member of 1624 the commission, any member of the State Board of Administration, 1625 or any employee of the Division of the Florida Hurricane 1626 Catastrophe Fund of the State Board of Administration for any 1627 action taken in the performance of their duties under this 1628 section. In addition, the commission may, in writing, waive any 1629 potential cause of action for negligence of a consultant, 1630 contractor, or contract employee engaged to assist the 1631 commission.

1632

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

1633 In establishing reimbursement premiums for the Florida (b) 1634 Hurricane Catastrophe Fund, the Division of the Florida Hurricane 1635 Catastrophe Fund State Board of Administration must, to the 1636 extent feasible, employ actuarial methods, principles, standards, 1637 models, or output ranges found by the commission to be accurate 1638 or reliable.

1639

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

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