By Senator Storms

	10-00508B-09 20091524
1	A bill to be entitled
2	An act relating to insurance; amending s. 626.9541,
3	F.S.; prohibiting any insurer charging premiums for
4	motor vehicle insurance from using a rate, rating
5	schedule, rating manual, or an underwriting rule that
6	is not contained in a rating manual and is determined
7	in whole or in part on the basis of certain
8	characteristics of an insured; including the refusal
9	to insure or continue to insure any individual or risk
10	because of educational level, trade, business,
11	occupation, profession, credit report, credit score,
12	or certain forms of lawful employment among the list
13	of activities constituting unfair methods of
14	competition and unfair or deceptive acts; amending s.
15	626.9741, F.S.; prohibiting the use by insurers of
16	credit reports and credit scores in making rating
17	determinations; defining the terms "credit report" and
18	"credit score"; deleting provisions limiting and
19	regulating the use of credit score by insurers when
20	making rating determinations; deleting the definition
21	of "adverse decision" and "tier"; deleting provisions
22	authorizing the Financial Services Commission to adopt
23	rules; providing an effective date.
24	
25	Be It Enacted by the Legislature of the State of Florida:
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27	Section 1. Paragraphs (o) and (x) of subsection (1) of
28	section 626.9541, Florida Statutes, are amended to read:
29	626.9541 Unfair methods of competition and unfair or

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 30
 deceptive acts or practices defined.

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

34 (o) Illegal dealings in premiums; excess or reduced charges
35 for insurance.-

36 1. Knowingly collecting any sum as a premium or charge for 37 insurance, which is not then provided, or is not in due course 38 to be provided, subject to acceptance of the risk by the 39 insurer, by an insurance policy issued by an insurer as 40 permitted by this code.

41 2. Knowingly collecting as a premium or charge for 42 insurance any sum in excess of or less than the premium or 43 charge applicable to such insurance, in accordance with the 44 applicable classifications and rates as filed with and approved 45 by the office, and as specified in the policy; or, in cases when 46 classifications, premiums, or rates are not required by this 47 code to be so filed and approved, premiums and charges collected from a Florida resident in excess of or less than those 48 specified in the policy and as fixed by the insurer. This 49 50 provision shall not be deemed to prohibit the charging and 51 collection, by surplus lines agents licensed under part VIII of 52 this chapter, of the amount of applicable state and federal taxes, or fees as authorized by s. 626.916(4), in addition to 53 the premium required by the insurer or the charging and 54 55 collection, by licensed agents, of the exact amount of any 56 discount or other such fee charged by a credit card facility in 57 connection with the use of a credit card, as authorized by 58 subparagraph (q)3., in addition to the premium required by the

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10-00508B-0920091524_59insurer. This subparagraph shall not be construed to prohibit60collection of a premium for a universal life or a variable or61indeterminate value insurance policy made in accordance with the62terms of the contract.

3.a. Imposing or requesting an additional premium for a 63 64 policy of motor vehicle liability, personal injury protection, 65 medical payment, or collision insurance or any combination 66 thereof or refusing to renew the policy solely because the 67 insured was involved in a motor vehicle accident unless the insurer's file contains information from which the insurer in 68 69 good faith determines that the insured was substantially at 70 fault in the accident.

71 b. An insurer which imposes and collects such a surcharge 72 or which refuses to renew such policy shall, in conjunction with 73 the notice of premium due or notice of nonrenewal, notify the 74 named insured that he or she is entitled to reimbursement of 75 such amount or renewal of the policy under the conditions listed 76 below and will subsequently reimburse him or her or renew the 77 policy, if the named insured demonstrates that the operator 78 involved in the accident was:

79

(I) Lawfully parked;

80 (II) Reimbursed by, or on behalf of, a person responsible81 for the accident or has a judgment against such person;

82 (III) Struck in the rear by another vehicle headed in the 83 same direction and was not convicted of a moving traffic 84 violation in connection with the accident;

85 (IV) Hit by a "hit-and-run" driver, if the accident was 86 reported to the proper authorities within 24 hours after 87 discovering the accident;

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116 period.

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88	(V) Not convicted of a moving traffic violation in
89	connection with the accident, but the operator of the other
90	automobile involved in such accident was convicted of a moving
91	traffic violation;
92	(VI) Finally adjudicated not to be liable by a court of
93	competent jurisdiction;
94	(VII) In receipt of a traffic citation which was dismissed
95	or nolle prossed; or
96	(VIII) Not at fault as evidenced by a written statement
97	from the insured establishing facts demonstrating lack of fault
98	which are not rebutted by information in the insurer's file from
99	which the insurer in good faith determines that the insured was
100	substantially at fault.
101	c. In addition to the other provisions of this
102	subparagraph, an insurer may not fail to renew a policy if the
103	insured has had only one accident in which he or she was at
104	fault within the current 3-year period. However, an insurer may
105	nonrenew a policy for reasons other than accidents in accordance
106	with s. 627.728. This subparagraph does not prohibit nonrenewal
107	of a policy under which the insured has had three or more
108	accidents, regardless of fault, during the most recent 3-year
109	period.
110	4. Imposing or requesting an additional premium for, or
111	refusing to renew, a policy for motor vehicle insurance solely
112	because the insured committed a noncriminal traffic infraction
113	as described in s. 318.14 unless the infraction is:
114	a. A second infraction committed within an 18-month period,
115	or a third or subsequent infraction committed within a 36-month

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CODING: Words stricken are deletions; words underlined are additions.

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b. A violation of s. 316.183, when such violation is a result of exceeding the lawful speed limit by more than 15 miles per hour.

5. Upon the request of the insured, the insurer and licensed agent shall supply to the insured the complete proof of fault or other criteria which justifies the additional charge or cancellation.

6. No insurer shall impose or request an additional premium for motor vehicle insurance, cancel or refuse to issue a policy, or refuse to renew a policy because the insured or the applicant is a handicapped or physically disabled person, so long as such handicap or physical disability does not substantially impair such person's mechanically assisted driving ability.

130 7. No insurer may cancel or otherwise terminate any 131 insurance contract or coverage, or require execution of a 132 consent to rate endorsement, during the stated policy term for 133 the purpose of offering to issue, or issuing, a similar or 134 identical contract or coverage to the same insured with the same 135 exposure at a higher premium rate or continuing an existing 136 contract or coverage with the same exposure at an increased 137 premium.

138 8. No insurer may issue a nonrenewal notice on any 139 insurance contract or coverage, or require execution of a 140 consent to rate endorsement, for the purpose of offering to 141 issue, or issuing, a similar or identical contract or coverage 142 to the same insured at a higher premium rate or continuing an 143 existing contract or coverage at an increased premium without 144 meeting any applicable notice requirements.

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9. No insurer shall, with respect to premiums charged for

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146	motor vehicle insurance, unfairly discriminate solely on the
147	basis of age, sex, marital status, or scholastic achievement.
148	10. No insurer shall, with respect to premiums charged for
149	motor vehicle insurance, use any rate, rating schedule, rating
150	manual, or underwriting rule that is not contained in a rating
151	manual and that is determined in whole or in part on the basis
152	of any of the following as they relate to an insured:
153	a. Educational level.
154	b. Trade, business, occupation, profession, or any lawful
155	form of employment that does not directly involve the use of one
156	or more vehicles specifically insured or identified in the
157	insurance policy.
158	c. Credit report or credit score as defined in s. 626.9741.
159	11.10. Imposing or requesting an additional premium for
160	motor vehicle comprehensive or uninsured motorist coverage
161	solely because the insured was involved in a motor vehicle
162	accident or was convicted of a moving traffic violation.
163	12.11. No insurer shall cancel or issue a nonrenewal notice
164	on any insurance policy or contract without complying with any
165	applicable cancellation or nonrenewal provision required under
166	the Florida Insurance Code.
167	13.12. No insurer shall impose or request an additional
168	premium, cancel a policy, or issue a nonrenewal notice on any
169	insurance policy or contract because of any traffic infraction
170	when adjudication has been withheld and no points have been
171	assessed pursuant to s. 318.14(9) and (10). However, this
172	subparagraph does not apply to traffic infractions involving
173	accidents in which the insurer has incurred a loss due to the
174	fault of the insured.

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175	(x) Refusal to insureIn addition to other provisions of
176	this code, the refusal to insure, or continue to insure, any
177	individual or risk because of the individual's educational
178	level, trade, business, occupation, profession, any form of
179	lawful employment, or credit report or credit score as defined
180	in s. 626.9741, or solely because of:
181	1. Race, color, creed, marital status, <u>gender</u> sex , or
182	national origin;
183	2. The residence, age, or lawful occupation of the
184	individual or the location of the risk, unless there is a
185	reasonable relationship between the residence, age, or lawful
186	occupation of the individual or the location of the risk and the
187	coverage issued or to be issued;
188	3. The insured's or applicant's failure to agree to place
189	collateral business with any insurer, unless the coverage
190	applied for would provide liability coverage which is excess
191	over that provided in policies maintained on property or motor
192	vehicles;
193	4. The insured's or applicant's failure to purchase
194	noninsurance services or commodities, including automobile
195	services as defined in s. 624.124;
196	5. The fact that the insured or applicant is a public
197	official; or
198	6. The fact that the insured or applicant had been
199	previously refused insurance coverage by any insurer, when such
200	refusal to insure or continue to insure for this reason occurs
201	with such frequency as to indicate a general business practice.
202	Section 2. Section 626.9741, Florida Statutes, is amended
203	to read:

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204	626.9741 Use of credit reports and credit scores by
205	insurersAn insurer may not use credit reports or credit scores
206	in making rating determinations. For purposes of this section,
207	the term:
208	(1) The purpose of this section is to regulate and limit
209	the use of credit reports and credit scores by insurers for
210	underwriting and rating purposes. This section applies only to
211	personal lines motor vehicle insurance and personal lines
212	residential insurance, which includes homeowners, mobile home
213	owners' dwelling, tenants, condominium unit owners, cooperative
214	unit owners, and similar types of insurance.
215	(2) As used in this section, the term:
216	(a) "Adverse decision" means a decision to refuse to issue
217	or renew a policy of insurance; to issue a policy with
218	exclusions or restrictions; to increase the rates or premium
219	charged for a policy of insurance; to place an insured or
220	applicant in a rating tier that does not have the lowest
221	available rates for which that insured or applicant is otherwise
222	eligible; or to place an applicant or insured with a company
223	operating under common management, control, or ownership which
224	does not offer the lowest rates available, within the affiliate
225	group of insurance companies, for which that insured or
226	applicant is otherwise eligible.
227	(1)(b) "Credit report" means any written, oral, or other
228	communication of any information by a consumer reporting agency,
229	as defined in the federal Fair Credit Reporting Act, 15 U.S.C.
230	ss. 1681 et seq., bearing on a consumer's credit worthiness,
231	credit standing, or credit capacity, which is used or expected
232	to be used or collected as a factor to establish a person's

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10-00508B-09 20091524 233 eligibility for credit or insurance, or any other purpose 234 authorized pursuant to the applicable provision of such federal 235 act. A credit score alone, as calculated by a credit reporting 236 agency or by or for the insurer, may not be considered a credit 237 report. (2) (c) "Credit score" means a score, grade, or value that 238 239 is derived by using any or all data from a credit report in any 240 type of model, method, or program, whether electronically, in an algorithm, computer software or program, or any other process, 241 for the purpose of grading or ranking credit report data. 242 243 (d) "Tier" means a category within a single insurer into 244 which insureds with substantially similar risk, exposure, or 245 expense factors are placed for purposes of determining rate or 246 premium. 247 (3) An insurer must inform an applicant or insured, in the 248 same medium as the application is taken, that a credit report or 249 score is being requested for underwriting or rating purposes. An 250 insurer that makes an adverse decision based, in whole or in 251 part, upon a credit report must provide at no charge, a copy of 252 the credit report to the applicant or insured or provide the 253 applicant or insured with the name, address, and telephone 254 number of the consumer reporting agency from which the insured 255 or applicant may obtain the credit report. The insurer must 256 provide notification to the consumer explaining the reasons for 257 the adverse decision. The reasons must be provided in 258 sufficiently clear and specific language so that a person can 259 identify the basis for the insurer's adverse decision. Such 260 notification shall include a description of the four primary 261 reasons, or such fewer number as existed, which were the primary

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262	 influences of the adverse decision. The use of generalized terms
263	such as "poor credit history," "poor credit rating," or "poor
264	insurance score" does not meet the explanation requirements of
265	this subsection. A credit score may not be used in underwriting
266	or rating insurance unless the scoring process produces
267	information in sufficient detail to permit compliance with the
268	requirements of this subsection. It shall not be deemed an
269	adverse decision if, due to the insured's credit report or
270	credit score, the insured continues to receive a less favorable
271	rate or placement in a less favorable tier or company at the
272	time of renewal except for renewals or reunderwriting required
273	by this section.
274	(4) (a) An insurer may not request a credit report or score
275	based upon the race, color, religion, marital status, age,
276	gender, income, national origin, or place of residence of the
277	applicant or insured.
278	(b) An insurer may not make an adverse decision solely
279	because of information contained in a credit report or score
280	without consideration of any other underwriting or rating
281	factor.
282	(c) An insurer may not make an adverse decision or use a
283	credit score that could lead to such a decision if based, in
284	whole or in part, on:
285	1. The absence of, or an insufficient, credit history, in
286	which instance the insurer shall:
287	a. Treat the consumer as otherwise approved by the Office
288	of Insurance Regulation if the insurer presents information that
289	such an absence or inability is related to the risk for the
290	insurer;

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291	b. Treat the consumer as if the applicant or insured had
292	neutral credit information, as defined by the insurer;
293	c. Exclude the use of credit information as a factor and
294	use only other underwriting criteria;
295	2. Collection accounts with a medical industry code, if so
296	identified on the consumer's credit report;
297	3. Place of residence; or
298	4. Any other circumstance that the Financial Services
299	Commission determines, by rule, lacks sufficient statistical
300	correlation and actuarial justification as a predictor of
301	insurance risk.
302	(d) An insurer may use the number of credit inquiries
303	requested or made regarding the applicant or insured except for:
304	1. Credit inquiries not initiated by the consumer or
305	inquiries requested by the consumer for his or her own credit
306	information.
307	2. Inquiries relating to insurance coverage, if so
308	identified on a consumer's credit report.
309	3. Collection accounts with a medical industry code, if so
310	identified on the consumer's credit report.
311	4. Multiple lender inquiries, if coded by the consumer
312	reporting agency on the consumer's credit report as being from
313	the home mortgage industry and made within 30 days of one
314	another, unless only one inquiry is considered.
315	5. Multiple lender inquiries, if coded by the consumer
316	reporting agency on the consumer's credit report as being from
317	the automobile lending industry and made within 30 days of one
318	another, unless only one inquiry is considered.
319	(c) An insurer must, upon the request of an applicant or

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10-00508B-09 20091524 320 insured, provide a means of appeal for an applicant or insured 321 whose credit report or credit score is unduly influenced by a 322 dissolution of marriage, the death of a spouse, or temporary 323 loss of employment. The insurer must complete its review within 324 10 business days after the request by the applicant or insured 325 and receipt of reasonable documentation requested by the 326 insurer, and, if the insurer determines that the credit report 327 or credit score was unduly influenced by any of such factors, 328 the insurer shall treat the applicant or insured as if the applicant or insured had neutral credit information or shall 329 330 exclude the credit information, as defined by the insurer, 331 whichever is more favorable to the applicant or insured. An 332 insurer shall not be considered out of compliance with its 333 underwriting rules or rates or forms filed with the Office of 334 Insurance Regulation or out of compliance with any other state 335 law or rule as a result of granting any exceptions pursuant to 336 this subsection. 337 (5) A rate filing that uses credit reports or credit scores must comply with the requirements of s. 627.062 or s. 627.0651 338

339 to ensure that rates are not excessive, inadequate, or unfairly 340 discriminatory.

341 (6) An insurer that requests or uses credit reports and 342 credit scoring in its underwriting and rating methods shall 343 maintain and adhere to established written procedures that 344 reflect the restrictions set forth in the federal Fair Credit 345 Reporting Act, this section, and all rules related thereto.

346 (7) (a) An insurer shall establish procedures to review the 347 credit history of an insured who was adversely affected by the 348 use of the insured's credit history at the initial rating of the

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349	policy, or at a subsequent renewal thereof. This review must be
350	performed at a minimum of once every 2 years or at the request
351	of the insured, whichever is sooner, and the insurer shall
352	adjust the premium of the insured to reflect any improvement in
353	the credit history. The procedures must provide that, with
354	respect to existing policyholders, the review of a credit report
355	will not be used by the insurer to cancel, refuse to renew, or
356	require a change in the method of payment or payment plan.
357	(b) However, as an alternative to the requirements of
358	paragraph (a), an insurer that used a credit report or credit
359	score for an insured upon inception of a policy, who will not
360	use a credit report or score for reunderwriting, shall
361	reevaluate the insured within the first 3 years after inception,
362	based on other allowable underwriting or rating factors,
363	excluding credit information if the insurer does not increase
364	the rates or premium charged to the insured based on the
365	exclusion of credit reports or credit scores.
366	(8) The commission may adopt rules to administer this
367	section. The rules may include, but need not be limited to:
368	(a) Information that must be included in filings to
369	demonstrate compliance with subsection (3).
370	(b) Statistical detail that insurers using credit reports
371	or scores under subsection (5) must retain and report annually
372	to the Office of Insurance Regulation.
373	(c) Standards that ensure that rates or premiums associated
374	with the use of a credit report or score are not unfairly
375	discriminatory, based upon race, color, religion, marital
376	status, age, gender, income, national origin, or place of
377	residence.

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378	(d) Standards for review of models, methods, programs, or
379	any other process by which to grade or rank credit report data
380	and which may produce credit scores in order to ensure that the
381	insurer demonstrates that such grading, ranking, or scoring is
382	valid in predicting insurance risk of an applicant or insured.
383	Section 3. This act shall take effect July 1, 2009.