By the Committee on Banking and Insurance; and Senator Brandes

	597-03441-13 2013324c1
1	A bill to be entitled
2	An act relating to the Florida Insurance Guaranty
3	Association; reordering and amending s. 631.57, F.S.;
4	revising the duties of the association; authorizing
5	the association to collect regular assessments
6	directly from policyholders; authorizing the
7	association to collect emergency assessments from
8	insurers under certain circumstances; making technical
9	and grammatical corrections; providing an effective
10	date.
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12	Be It Enacted by the Legislature of the State of Florida:
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14	Section 1. Subsection (2) of section 631.57, Florida
15	Statutes, is amended, and subsection (3) of that section is
16	reordered and amended, to read:
17	631.57 Powers and duties of the association
18	(2) The association may:
19	(a) Employ or retain such persons as are necessary to
20	handle claims and perform other duties of the association;
21	(b) Borrow funds necessary to effect the purposes of this
22	part in accord with the plan of operation, including borrowing
23	necessary to ensure that its cash flow needs are timely met to
24	pay covered claims when regular and emergency assessments are
25	levied on policyholders under subsection (3);
26	(c) Sue or be sued, provided that service of process <u>is</u>
27	shall be made upon the person registered with the department as
28	agent for the receipt of service of process; and
29	(d) Negotiate and become a party to such contracts as are

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597-03441-13 2013324c1 30 necessary to carry out the purpose of this part. Additionally, 31 The association may also enter into such contracts with a 32 municipality, a county, or a legal entity created pursuant to s. 33 163.01(7)(g) as are necessary in order for the municipality, 34 county, or legal entity to issue bonds under s. 631.695. In 35 connection with the issuance of any such bonds and the entering 36 into of any such necessary contracts, the association may agree 37 to such terms and conditions as the association deems necessary 38 and proper. 39 (3) (a) To the extent necessary to secure the funds for the

40 respective accounts paying for the payment of covered claims, to 41 pay the reasonable costs to administer such accounts the same, 42 and to the extent necessary to secure the funds for the account 43 specified in s. 631.55(2)(b) or to retire indebtedness, 44 including, without limitation, the principal, redemption 45 premium, if any, and interest on, and related costs of issuance of, bonds issued under s. 631.695 and the funding of any 46 47 reserves and other payments required under the bond resolution 48 or trust indenture pursuant to which such bonds have been 49 issued, the office, upon certification of the board of 50 directors, shall levy regular assessments in the proportion that 51 each insurer's net direct written premiums in this state in the 52 classes protected by the account bears to the total of the said 53 net direct written premiums received in this state by all such 54 insurers for the preceding calendar year for the kinds of 55 insurance included within such account. Regular assessments 56 shall be remitted to and administered by the board of directors 57 in the manner specified by the approved plan. Each insurer so 58 assessed has shall have at least 30 days' written notice as to

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597-03441-13 2013324c1 59 the date the assessment is due and payable. Every assessment 60 shall be made as a uniform percentage applicable to the net direct written premiums of each insurer in the kinds of 61 62 insurance included within the account in which the assessment is 63 made. The regular assessments levied against an any insurer may 64 shall not exceed in any one year exceed more than 2 percent of 65 that insurer's net direct written premiums in this state for the 66 kinds of insurance included within such account during the calendar year next preceding the date of such assessments. The 67 68 Legislature finds and declares that regular assessments paid by 69 an insurer or insurer group as a result of a levy by the office 70 constitute advances of funds from the insurer to the 71 association. An insurer may fully recoup regular assessments 72 levied against prior year premiums by applying a separate 73 recoupment factor to the premium of policies of the same kind or 74 line as were considered by the office in determining the 75 assessment liability of the insurer or insurer group. 76 (b) In lieu of collecting the regular assessment under 77 paragraph (a) from insurers, the association may collect all or 78 part of the assessment directly from policyholders. If the 79 association elects to collect the assessment directly from 80 policyholders, the office shall issue an order specifying the 81 date the board requires the insurers to begin collecting the 82 assessment, which must be at least 90 days after the date the office levies the assessment. The order must specify a uniform 83 84 percentage determined by the board, and verified by the office, 85 of the direct written premium for all lines of business in the applicable accounts. The assessment certified in any one 86 calendar year may not exceed 2 percent of the premium. The 87

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88	insurers shall collect such assessments without being affected
89	by any credit, limitation, exemption, or deferment. Assessments
90	collected under this paragraph shall be transferred regularly to
91	the association as set forth in the order levying the
92	assessment.
93	<u>(e) (b)</u> If sufficient funds from <u>regular and emergency</u> such
94	assessments, together with funds previously raised, are not
95	available in any one year in the respective account to make all
96	the payments or reimbursements then owing to insurers, <u>insureds,</u>
97	or claimants, the funds available shall be prorated and the
98	unpaid portion shall be paid as soon thereafter as funds become
99	available.
100	(c) The Legislature finds and declares that all assessments
101	paid by an insurer or insurer group as a result of a levy by the
102	office, including assessments levied pursuant to paragraph (a)
103	and emergency assessments, constitute advances of funds from the
104	insurer to the association. An insurer may fully recoup such
105	advances by applying a separate recoupment factor to the premium
106	of policies of the same kind or line as were considered by the
107	office in determining the assessment liability of the insurer or
108	insurer group.
109	<u>(f)</u> (d)No State funds <u>may not</u> of any kind shall be allocated

109 (f)(d) State funds <u>may not</u> of any kind shall be allocate 110 or paid to <u>the</u> said association or any of its accounts.

111 (c) (e) 1.a. In addition to regular assessments otherwise 112 authorized <u>under</u> in paragraph (a), and to the extent necessary 113 to secure the funds for the account specified in s. 631.55(2)(b) 114 for the direct payment of covered claims of insurers rendered 115 insolvent by the effects of a hurricane and to pay the 116 reasonable costs to administer such claims, or to retire

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597-03441-13 2013324c1 117 indebtedness, including, without limitation, the principal, redemption premium, if any, and interest on, and related costs 118 119 of issuance of, bonds issued under s. 631.695 and the funding of 120 any reserves and other payments required under the bond 121 resolution or trust indenture pursuant to which such bonds have 122 been issued, the office, upon certification of the board of 123 directors, shall levy emergency assessments directly upon 124 policyholders, which shall be collected by insurers holding a 125 certificate of authority. Pursuant to such levy, the office 126 shall issue an order specifying the date the board requires the 127 insurers to begin collecting the assessment, which must be at 128 least 90 days after the date the office levies the assessment. 129 The order must specify a uniform percentage determined by the 130 board, and verified by the office, of the direct written premium 131 for all lines of business in the applicable accounts. The 132 assessment certified in any one calendar year collected may not 133 exceed 2 percent of the premium. The insurers shall collect such 134 assessments without being affected by any credit, limitation, 135 exemption, or deferment. Assessments collected by insurers under 136 this paragraph shall be transferred regularly to the association 137 as set forth in the order levying the assessment. 138 1. If, after consultation with its financial advisor, the 139 board determines that it must immediately begin paying the 140 covered claims of one or more insolvent insurers and financing is not reasonably available, it may certify the emergency 141 142 assessment on insurers in the same manner as set forth in 143 paragraph (a), except that an emergency assessment may be paid 144 by the insurer in a single payment or, at the option of the 145 association, in 12 monthly installments with the first

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597-03441-13 2013324c1 146 installment being due and payable at the end of the month after 147 the emergency assessment is levied and subsequent installments being due by the end of each succeeding month. The emergency 148 149 assessments payable under this paragraph by any insurer shall not exceed in any single year more than 2 percent of that 150 insurer's direct written premiums, net of refunds, in this state 151 152 during the preceding calendar year for the kinds of insurance within the account specified in s. 631.55(2)(b). 153

154 2.b. Any Emergency assessments authorized under this 155 paragraph shall be levied by the office only upon insurers 156 referred to in sub-subparagraph a., upon certification as to the 157 need for such assessments by the board of directors. If In the 158 event the board of directors participates in the issuance of 159 bonds in accordance with s. 631.695, emergency assessments shall 160 be levied in each year that bonds issued under s. 631.695 and 161 secured by such emergency assessments are outstanding τ in such 162 amounts up to such 2 percent 2-percent limit as required in order to provide for the full and timely payment of the 163 164 principal of, redemption premium, if any, and interest on, and 165 related costs of issuance of, such bonds. The emergency 166 assessments provided for in this paragraph are assigned and 167 pledged to the municipality, county, or legal entity issuing bonds under s. 631.695 for the benefit of the holders of such 168 169 bonds, in order to enable such municipality, county, or legal entity to provide for the payment of the principal of, 170 171 redemption premium, if any, and interest on such bonds, the cost 172 of issuance of such bonds, and the funding of any reserves and 173 other payments required under the bond resolution or trust 174 indenture pursuant to which such bonds have been issued, without

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597-03441-13 2013324c1 175 the necessity for of any further action by the association, the 176 office, or any other party. If To the extent bonds are issued 177 under s. 631.695 and the association secures determines to 178 secure such bonds by a pledge of revenues received from the 179 emergency assessments, such bonds, upon such pledge of revenues, 180 shall be secured by and payable from the proceeds of such 181 emergency assessments, and the proceeds of emergency assessments 182 levied under this paragraph shall be remitted directly to and 183 administered by the trustee or custodian appointed for the 184 payment of such bonds. 185 c. Emergency assessments under this paragraph may be payable in a single payment or, at the option of the 186

187 association, may be payable in 12 monthly installments with the 188 first installment being due and payable at the end of the month 189 after an emergency assessment is levied and subsequent 190 installments being due not later than the end of each succeeding 191 month.

192 <u>3.d.</u> If emergency assessments are imposed, the report 193 required by s. 631.695(7) <u>must shall</u> include an analysis of the 194 revenues generated from the emergency assessments imposed under 195 this paragraph.

196 <u>4.e.</u> If emergency assessments are imposed, the references 197 in sub-subparagraph (1) (a) 3.b. and s. 631.695(2) and (7) to 198 <u>regular</u> assessments levied under paragraph (a) <u>must</u> shall 199 include emergency assessments imposed under this paragraph.

200 <u>5.2.</u> If the board of directors participates in the issuance 201 of bonds in accordance with s. 631.695, an <u>emergency</u> annual 202 assessment under this paragraph <u>must</u> shall continue while the 203 bonds issued with respect to which the assessment was imposed

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597-03441-13 2013324c1 204 are outstanding, including any bonds the proceeds of which were 205 used to refund bonds issued pursuant to s. 631.695, unless 206 adequate provision has been made for the payment of the bonds in 207 the documents authorizing the issuance of such bonds. 208 6.3. Emergency assessments under this paragraph are not 209 premium and are not subject to the premium tax, to any fees, or 210 to any commissions. An insurer is liable for all emergency 211 assessments that the insurer collects and shall treat the 212 failure of an insured to pay an emergency assessment as a

failure of an insured to pay an emergency assessment as a failure to pay the premium. An insurer is not liable for uncollectible emergency assessments.

215 (d) (f) The recoupment factor applied to policies in 216 accordance with paragraph (a) or subparagraph (c)1. paragraph 217 (c) shall be selected by the insurer or insurer group so as to 218 provide for the probable recoupment of both assessments levied 219 pursuant to paragraph (a) and emergency assessments over a 220 period of 12 months, unless the insurer or insurer group, at its 221 option, elects to recoup the assessment over a longer period. 222 The recoupment factor applies shall apply to all policies of the 223 same kind or line as were considered by the office in 224 determining the assessment liability of the insurer or insurer 225 group issued or renewed during a 12-month period.

1. If the insurer or insurer group does not collect the full amount of the assessment during one 12-month period, the insurer or insurer group may apply recalculated recoupment factors to policies issued or renewed during one or more succeeding 12-month periods.

231 <u>2.</u> If, at the end of a 12-month period, the insurer or
232 insurer group has collected from the combined kinds or lines of

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597-03441-13 2013324c1 233 policies subject to assessment more than the total amount of the 234 assessment paid by the insurer or insurer group, the excess 235 amount shall be disbursed as follows: 236 a.1. If the excess amount does not exceed 15 percent of the 237 total assessment paid by the insurer or insurer group, the 238 excess amount shall be remitted to the association within 60 239 days after the end of the 12-month period in which the excess 240 recoupment charges were collected. b.2. If the excess amount exceeds 15 percent of the total 241 242 assessment paid by the insurer or insurer group, the excess 243 amount shall be returned to the insurer's or insurer group's 244 current policyholders by refunds or premium credits. The 245 association shall use any remitted excess recoupment amounts to 246 reduce future assessments. 247 3.(g) Amounts recouped pursuant to this paragraph 248 subsection for assessments levied under paragraph (a) due to 249 insolvencies on or after July 1, 2010, are considered premium 250 solely for premium tax purposes and are not subject to fees or 251 commissions. However, insurers shall treat the failure of an 252 insured to pay a recoupment charge as a failure to pay the 253 premium. 254 4.(h) At least 15 days before applying the recoupment 255 factor to any policies, the insurer or insurer group shall file 256 with the office a statement for informational purposes only 257 setting forth the amount of the recoupment factor and an 258 explanation of how the recoupment factor will be applied. Such 259 statement must shall include documentation of the assessment 260 paid by the insurer or insurer group and the arithmetic

261 calculations supporting the recoupment factor. The insurer or

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262	insurer group may use the recoupment factor at any time after
263	the expiration of the 15-day period. The insurer or insurer
264	group need submit only one informational statement for all lines
265	of business using the same recoupment factor.
266	5. (i) <u>Within</u> No later than 90 days after the insurer or
267	insurer group has completed the recoupment process, the insurer
268	or insurer group shall file with the office, for information
269	purposes only, a final accounting report documenting the
270	recoupment. The report <u>must</u> shall provide the amounts of
271	assessments paid by the insurer or insurer group, the amounts
272	and percentages recouped by year from each affected line of
273	business, and the direct written premium subject to recoupment
274	by year. The insurer or insurer group need submit only one
275	report for all lines of business using the same recoupment
276	factor.
277	Section 2. This act shall take effect July 1, 2013, and

278 shall apply to any assessment certified and levied after that 279 date regardless of when the insolvency or insolvencies occurred.

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