By Senator Hukill

	8-00282C-13 2013468
1	A bill to be entitled
2	An act relating to commercial insurance rates and
3	forms; amending s. 627.062, F.S.; exempting medical
4	malpractice insurance that covers certain providers
5	and practitioners from specified rate filing
6	requirements; amending s. 627.410, F.S.; conforming
7	provisions to changes made by the act; creating s.
8	627.4102, F.S.; providing for an informational filing
9	of certain forms that are exempt from the Office of
10	Insurance Regulation's approval process; requiring an
11	informational filing to include a notarized
12	certification from the insurer and providing a
13	statement that must be included in the certification;
14	authorizing the office to impose sanctions for false
15	certifications; requiring a Notice of Change in Policy
16	Terms form to be filed with a changed renewal policy;
17	providing an effective date.
18	
19	Be It Enacted by the Legislature of the State of Florida:
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21	Section 1. Paragraph (d) of subsection (3) and paragraph
22	(e) of subsection (7) of section 627.062, Florida Statutes, are
23	amended to read:
24	627.062 Rate standards
25	(3)
26	(d)1. The following categories or kinds of insurance and
27	types of commercial lines risks are not subject to paragraph
28	(2)(a) or paragraph (2)(f):
29	a. Excess or umbrella.

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30	b. Surety and fidelity.
31	c. Boiler and machinery and leakage and fire extinguishing
32	equipment.
33	d. Errors and omissions.
34	e. Directors and officers, employment practices, fiduciary
35	liability, and management liability.
36	f. Intellectual property and patent infringement liability.
37	g. Advertising injury and Internet liability insurance.
38	h. Property risks rated under a highly protected risks
39	rating plan.
40	i. General liability.
41	j. Nonresidential property, except for collateral
42	protection insurance as defined in s. 624.6085.
43	k. Nonresidential multiperil.
44	l. Excess property.
45	m. Burglary and theft.
46	n. Medical malpractice for a facility that is not a
47	hospital, nursing home, or assisted living facility.
48	o. Medical malpractice for a health care practitioner that
49	is not a dentist, physician, or surgeon.
50	<u>p.</u> n. Any other commercial lines categories or kinds of
51	insurance or types of commercial lines risks that the office
52	determines should not be subject to paragraph (2)(a) or
53	paragraph (2)(f) because of the existence of a competitive
54	market for such insurance, similarity of such insurance to other
55	categories or kinds of insurance not subject to paragraph (2)(a)
56	or paragraph (2)(f), or to improve the general operational
57	efficiency of the office.
58	2. Insurers or rating organizations shall establish and use

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8-00282C-13 2013468 59 rates, rating schedules, or rating manuals to allow the insurer 60 a reasonable rate of return on insurance and risks described in subparagraph 1. which are written in this state. 61 62 3. An insurer shall must notify the office of any changes 63 to rates for insurance and risks described in subparagraph 1. 64 within 30 days after the effective date of the change. The 65 notice must include the name of the insurer, the type or kind of 66 insurance subject to rate change, total premium written during the immediately preceding year by the insurer for the type or 67 68 kind of insurance subject to the rate change, and the average statewide percentage change in rates. Underwriting files, 69 70 premiums, losses, and expense statistics with regard to such 71 insurance and risks written by an insurer must be maintained by 72 the insurer and subject to examination by the office. Upon 73 examination, the office, in accordance with generally accepted 74 and reasonable actuarial techniques, shall consider the rate 75 factors in paragraphs (2)(b), (c), and (d) and the standards in 76 paragraph (2)(e) to determine if the rate is excessive, 77 inadequate, or unfairly discriminatory. 78 4. A rating organization shall must notify the office of

79 any changes to loss cost for insurance and risks described in 80 subparagraph 1. within 30 days after the effective date of the 81 change. The notice must include the name of the rating 82 organization, the type or kind of insurance subject to a loss 83 cost change, loss costs during the immediately preceding year 84 for the type or kind of insurance subject to the loss cost 85 change, and the average statewide percentage change in loss 86 cost. Actuarial data with regard to changes to loss cost for 87 risks not subject to paragraph (2)(a) or paragraph (2)(f) must

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88	be maintained by the rating organization for 2 years after the
89	effective date of the change and are subject to examination by
90	the office. The office may require the rating organization to
91	incur the costs associated with an examination. Upon
92	examination, the office, in accordance with generally accepted
93	and reasonable actuarial techniques, shall consider the rate
94	factors in paragraphs (2)(b)-(d) and the standards in paragraph
95	(2)(e) to determine if the rate is excessive, inadequate, or
96	unfairly discriminatory.
97	(7) The provisions of this subsection apply only to rates
98	for medical malpractice insurance and control to the extent of
99	any conflict with other provisions of this section.
100	(e) For medical malpractice rates subject to paragraph
101	(2)(e), the each medical malpractice insurer shall must make a
102	rate filing under this section, sworn to by at least two
103	executive officers of the insurer, at least once each calendar
104	year.
105	Section 2. Subsection (1) of section 627.410, Florida
106	Statutes, is amended to read:
107	627.410 Filing, approval of forms
108	(1) <u>A</u> No basic insurance policy or annuity contract form,
109	or application form where written application is required and is
110	to be made a part of the policy or contract, <del>or</del> group
111	certificates issued under a master contract delivered in this
112	state, or printed rider or endorsement form or form of renewal
113	certificate, <u>may not</u> <del>shall</del> be delivered or issued for delivery
114	in this state, unless the form has been filed with the office by
115	or <u>on</u> <del>in</del> behalf of the insurer <u>that</u> <del>which</del> proposes to use such
116	form and has been approved by the office, or filed pursuant to

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

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117	s. 627.4102. This provision does not apply to surety bonds or to
118	policies, riders, endorsements, or forms of unique character
119	which are designed for and used with <del>relation to</del> insurance <u>on</u>
120	upon a particular subject, <del>(</del> other than as to health insurance <del>)</del> ,
121	or which relate to the manner of <u>distributing</u> <del>distribution of</del>
122	benefits or to the reservation of rights and benefits under life
123	or health insurance policies and <del>are</del> used at the request of the
124	individual policyholder, contract holder, or certificateholder.
125	For As to group insurance policies effectuated and delivered
126	outside this state but covering persons resident in this state,
127	the group certificates to be delivered or issued for delivery in
128	this state shall be filed with the office for information
129	purposes only.
130	Section 3. Section 627.4102, Florida Statutes, is created
131	to read:
132	627.4102 Informational filing of forms
133	(1) Property and casualty forms, except workers'
134	compensation forms, are exempt from the approval process
135	required under s. 627.410, if:
136	(a) The form has been electronically submitted to the
137	office in an informational filing made through I-File, 30 days
138	before the delivery or issuance for delivery of the form within
139	this state; and
140	(b) At the time the informational filing is made, a
141	notarized certification is attached to the filing which
142	certifies that each form within the filing is in compliance with
143	all applicable state laws and rules. The certification must be
144	on the insurer's letterhead and signed and dated by the
145	insurer's president, chief executive officer, or general

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146	counsel, or an employee of the insurer responsible for the
147	filing on behalf of the insurer. The certification must
148	expressly acknowledge that if the representations contained in
149	the certification are found to be false, the insurer is subject
150	to appropriate regulatory action. The certification must contain
151	substantively the following statement: "I[name], as
152	[title] of[insurer name], do hereby certify that
153	this form filing has been thoroughly and diligently reviewed by
154	me and by all appropriate company personnel, as well as company
155	consultants, if applicable, and certify that each form contained
156	within the filing is in compliance with all applicable Florida
157	laws and rules. Should this certification later be deemed false,
158	I acknowledge that[insurer name] is subject to all
159	appropriate regulatory action by the Office of Insurance
160	Regulation."
161	(2) If the filing contains a certification that does not
162	meet the requirements of this section, the form filing, at the
163	discretion of the office, shall be subject to prior review and
164	approval pursuant to s. 627.410, and the period for review and
165	approval established under s. 627.410(2) begins to run on the
166	date the office notifies the insurer of the discovery of the
167	inadequate certification. The office may pursue regulatory
168	action against an insurer that submits a false certification.
169	(3) A Notice of Change in Policy Terms form required under
170	s. 627.43141(2) shall be filed as a part of the informational
171	filing for a renewal policy that contains a change. If a renewal
172	policy that was certified requires such form, the insurer must
173	provide a copy of the form to the named insured's agent before
174	or upon providing the form to the named insured.

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175	(4) This section does not preclude an insurer from electing
176	to file any form for approval under s. 627.410 which would
177	otherwise be exempt under this section.
178	Section 4. This act shall take effect upon becoming a law.

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