1 A bill to be entitled 2 An act relating to the Florida Insurance Guaranty 3 Association; amending s. 631.54, F.S.; defining the term "assessment year"; amending s. 631.57, F.S.; 4 5 revising provisions relating to the levy of 6 assessments on insurers by the Florida Insurance 7 Guaranty Association; specifying conditions under 8 which such assessments are paid; revising procedures 9 and timeframes for the levying of the assessments; 10 revising provisions relating to assessments that are 11 premium and not subject to the premium tax; limiting an insurer's liability for uncollectible emergency 12 assessments; deleting the requirement to file a final 13 accounting report documenting the recoupment; revising 14 15 an exemption for assessments; amending s. 631.64, F.S.; requiring charges or recoupments to be displayed 16 17 separately on premium statements to policyholders and prohibiting their inclusion in rates; amending ss. 18 19 627.727 and 631.55, F.S.; conforming cross-references; providing an effective date. 20 21 22 Be It Enacted by the Legislature of the State of Florida: 23 24 Section 1. Subsections (2) through (9) of section 631.54, 25 Florida Statutes, are renumbered as subsections (3) through 26 (10), respectively, and a new subsection (2) is added to that Page 1 of 15

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27 section to read: 28 631.54 Definitions.-As used in this part: "Assessment year" means the 12-month period, which may 29 (2) 30 begin on the first day of any calendar quarter, whether January 31 1, April 1, July 1, or October 1, as specified in an order 32 issued by the office directing insurers to pay an assessment to 33 the association. 34 Section 2. Subsections (3) and (4) of section 631.57, Florida Statutes, are amended to read: 35 631.57 Powers and duties of the association.-36 37 To the extent necessary to secure the funds for the (3)(a) 38 respective accounts for the payment of covered claims, to pay 39 the reasonable costs to administer such accounts the same, and to the extent necessary to secure the funds for the account 40 41 specified in s. 631.55(2)(b) or to retire indebtedness, 42 including, without limitation, the principal, redemption 43 premium, if any, and interest on, and related costs of issuance of, bonds issued under s. 631.695 and the funding of any 44 45 reserves and other payments required under the bond resolution or trust indenture pursuant to which such bonds have been 46 47 issued, the office, upon certification of the board of 48 directors, shall levy assessments, in accordance with subparagraphs (f)1. or 2., initially estimated in the proportion 49 50 that each insurer's net direct written premiums in this state in 51 the classes protected by the account bears to the total of said 52 net direct written premiums received in this state by all such Page 2 of 15

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53 insurers for the preceding calendar year for the kinds of 54 insurance included within such account. Assessments shall be remitted to and administered by the board of directors in the 55 56 manner specified by the approved plan and paragraph (f). Each 57 insurer so assessed shall have at least 30 days' written notice 58 as to the date the initial assessment payment is due and 59 payable. Every assessment shall be made as a uniform percentage 60 applicable to the net direct written premiums of each insurer in the kinds of insurance included within the account in which the 61 62 assessment is made. The assessments levied against any insurer 63 may shall not exceed in any one calendar year more than 2 64 percent of that insurer's net direct written premiums in this state for the kinds of insurance included within such account 65 66 during the calendar year next preceding the date of such 67 assessments.

(b) If sufficient funds from such assessments, together with funds previously raised, are not available in any one year in the respective account to make all the payments or reimbursements then owing to insurers, the funds available shall be prorated and the unpaid portion shall be paid as soon thereafter as funds become available.

(c) The Legislature finds and declares that all assessments paid by an insurer or insurer group as a result of a levy by the office, including assessments levied pursuant to paragraph (a) and emergency assessments <u>levied pursuant to</u> <u>paragraph (e)</u>, constitute advances of funds from the insurer to Page 3 of 15

the association. An insurer may fully recoup such advances by applying <u>the uniform assessment percentage levied by the office</u> <u>to all a separate recoupment factor to the premium of</u> policies of the same kind or line as were considered by the office in determining the assessment liability of the insurer or insurer group as set forth in paragraph (f).

85 1. Assessments levied under subparagraph (f)1. are paid 86 before policy surcharges are collected and result in a receivable for policy surcharges collected in the future. This 87 88 amount, to the extent it is likely that it will be realized, 89 meets the definition of an admissible asset as specified in the National Association of Insurance Commissioners' Statement of 90 Statutory Accounting Principles No. 4. The asset shall be 91 92 established and recorded separately from the liability 93 regardless of whether it is based on a retrospective or 94 prospective premium-based assessment. If an insurer is unable to 95 fully recoup the amount of the assessment because of a reduction 96 in writings or withdrawal from the market, the amount recorded 97 as an asset shall be reduced to the amount reasonably expected 98 to be recouped. 99 2. Assessments levied under subparagraph (f)2. are paid 100 after policy surcharges are collected so that the recognition of 101 assets is based on actual premium written offset by the 102 obligation to the association. 103 No State funds may not of any kind shall be allocated (d) 104 or paid to the said association or any of its accounts.

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105 (e)1.a. In addition to assessments otherwise authorized in 106 paragraph (a), and to the extent necessary to secure the funds 107 for the account specified in s. 631.55(2)(b) for the direct 108 payment of covered claims of insurers rendered insolvent by the 109 effects of a hurricane and to pay the reasonable costs to 110 administer such claims, or to retire indebtedness, including, 111 without limitation, the principal, redemption premium, if any, 112 and interest on, and related costs of issuance of, bonds issued 113 under s. 631.695 and the funding of any reserves and other payments required under the bond resolution or trust indenture 114 pursuant to which such bonds have been issued, the office, upon 115 certification of the board of directors, shall levy emergency 116 assessments upon insurers holding a certificate of authority. 117 118 The emergency assessments levied against payable under this 119 paragraph by any insurer may shall not exceed in any one 120 calendar single year more than 2 percent of that insurer's net 121 direct written premiums, net of refunds, in this state during 122 the preceding calendar year for the kinds of insurance within 123 the account specified in s. 631.55(2)(b).

124 <u>2.b.</u> Any Emergency assessments authorized under this 125 paragraph shall be levied by the office upon insurers <u>in</u> 126 <u>accordance with subparagraph (f)</u> referred to in sub-subparagraph 127 a., upon certification as to the need for such assessments by 128 the board of directors. <u>If In the event</u> the board of directors 129 participates in the issuance of bonds in accordance with s. 130 631.695, emergency assessments shall be levied in each year that Page 5 of 15

131 bonds issued under s. 631.695 and secured by such emergency 132 assessments are outstanding, in such amounts up to such 2-133 percent limit as required in order to provide for the full and 134 timely payment of the principal of, redemption premium, if any, 135 and interest on, and related costs of issuance of, such bonds. 136 The emergency assessments provided for in this paragraph are 137 assigned and pledged to the municipality, county, or legal 138 entity issuing bonds under s. 631.695 for the benefit of the 139 holders of such bonds τ in order to enable such municipality, county, or legal entity to provide for the payment of the 140 141 principal of, redemption premium, if any, and interest on such bonds, the cost of issuance of such bonds, and the funding of 142 any reserves and other payments required under the bond 143 resolution or trust indenture pursuant to which such bonds have 144 145 been issued, without the necessity of any further action by the association, the office, or any other party. If To the extent 146 bonds are issued under s. 631.695 and the association determines 147 148 to secure such bonds by a pledge of revenues received from the 149 emergency assessments, such bonds, upon such pledge of revenues, 150 shall be secured by and payable from the proceeds of such 151 emergency assessments, and the proceeds of emergency assessments 152 levied under this paragraph shall be remitted directly to and 153 administered by the trustee or custodian appointed for such 154 bonds.

155 <u>3.e.</u> Emergency assessments <u>used to defease bonds issued</u> 156 under this <u>part</u> paragraph may be payable in a single payment or, Page 6 of 15

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at the option of the association, may be payable in 12 monthly installments with the first installment being due and payable at the end of the month after an emergency assessment is levied and subsequent installments being due <u>by</u> not later than the end of each succeeding month.

162 <u>4.d.</u> If emergency assessments are imposed, the report 163 required by s. 631.695(7) <u>must shall</u> include an analysis of the 164 revenues generated from the emergency assessments imposed under 165 this paragraph.

166 <u>5.e.</u> If emergency assessments are imposed, the references 167 in sub-subparagraph (1)(a)3.b. and s. 631.695(2) and (7) to 168 assessments levied under paragraph (a) <u>must</u> shall include 169 emergency assessments imposed under this paragraph.

170 6.2. If the board of directors participates in the 171 issuance of bonds in accordance with s. 631.695, an annual 172 assessment under this paragraph shall continue while the bonds 173 issued with respect to which the assessment was imposed are 174 outstanding, including any bonds the proceeds of which were used 175 to refund bonds issued pursuant to s. 631.695, unless adequate 176 provision has been made for the payment of the bonds in the 177 documents authorizing the issuance of such bonds.

178 3. Emergency assessments under this paragraph are not 179 premium and are not subject to the premium tax, to any fees, or 180 to any commissions. An insurer is liable for all emergency 181 assessments that the insurer collects and shall treat the 182 failure of an insured to pay an emergency assessment as a Page 7 of 15

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183 failure to pay the premium. An insurer is not liable for 184 uncollectible emergency assessments. 185 (f) The recoupment factor applied to policies in 186 accordance with paragraph (c) shall be selected by the insurer 187 or insurer group so as to provide for the probable recoupment of 188 both assessments levied pursuant to paragraph (a) and emergency 189 assessments over a period of 12 months, unless the insurer or 190 insurer group, at its option, elects to recoup the assessment 191 over a longer period. The recoupment factor shall apply to all 192 policies of the same kind or line as were considered by the office in determining the assessment liability of the insurer or 193 194 insurer group issued or renewed during a 12-month period. If the 195 insurer or insurer group does not collect the full amount of the 196 assessment during one 12-month period, the insurer or insurer 197 group may apply recalculated recoupment factors to policies 198 issued or renewed during one or more succeeding 12-month 199 periods. If, at the end of a 12-month period, the insurer or 200 insurer group has collected from the combined kinds or lines of 201 policies subject to assessment more than the total amount of the 202 assessment paid by the insurer or insurer group, the excess 203 amount shall be disbursed as follows: 204 1. The association, office, and insurers remitting 205 emergency assessments pursuant to paragraph (a) or paragraph (e) 206 must comply with the following: 207 a. In the order levying an assessment, the office shall 208 specify the actual percentage amount to be collected uniformly Page 8 of 15

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209	from all the policyholders of insurers subject to the assessment
210	and the date on which the assessment year begins, which may not
211	begin before 90 days after the association board certifies such
212	an assessment.
213	b. Insurers shall make an initial payment to the
214	association before the beginning of the assessment year on or
215	before the date specified in the order of the office.
216	c. Insurers that have written insurance in the calendar
217	year before the year in which the assessment is certified by the
218	board shall make an initial payment based on the net direct
219	written premium amount from the previous calendar year as set
220	forth in the insurers annual statement, multiplied by the
221	uniform percentage of premium specified in the order issued by
222	the office. Insurers that have not written insurance in the
223	previous calendar year in any of the lines under the account
224	which are being assessed, but which are writing insurance as of,
225	or after, the date the board certifies the assessment to the
226	office, shall pay an amount based on a good faith estimate of
227	the amount of net direct written premium anticipated to be
228	written in the subject lines of business for the assessment
229	year, multiplied by the uniform percentage of premium specified
230	in the order issued by the office.
231	d. Insurers shall file a reconciliation report with the
232	association within 45 days after the end of the assessment year
233	which indicates the amount of the initial payment to the
234	association before the assessment year, whether such amount was
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235	based on net direct written premium contained in a previous
236	calendar year annual statement or a good faith projection, the
237	amount actually collected during the assessment year, and such
238	other information contained on a form adopted by the association
239	and provided to the insurers in advance. If the insurer
240	collected from policyholders more than the amount initially
241	paid, the insurer shall pay the excess amount to the
242	association. If the insurer collected from policyholders an
243	amount which is less than the amount initially paid to the
244	association, the association shall credit the insurer that
245	amount against future assessments. Such payment reconciliation
246	report, and any payment of excess amounts collected from
247	policyholders, shall be completed and remitted to the
248	association within 90 days after the end of the assessment year.
249	The association shall send a final reconciliation report on all
250	insurers to the office within 120 days after each assessment
251	year.
252	e. Insurers remitting reconciliation reports under this
253	paragraph to the association are subject to s. 626.9541(1)(e).
254	If the excess amount does not exceed 15 percent of the total
255	assessment paid by the insurer or insurer group, the excess
256	amount shall be remitted to the association within 60 days after
257	the end of the 12-month period in which the excess recoupment
258	charges were collected.
259	2. For assessments required under paragraph (a) or
260	paragraph (e), the association may use a monthly installment
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261	method instead of the method described in sub-subparagraphs 1.b.
262	and c. or in combination thereof based on the association's
263	projected cash flow. If the association projects that it has
264	cash on hand for the payment of anticipated claims in the
265	applicable account for at least 6 months, the board may make an
266	estimate of the assessment needed and may recommend to the
267	office the assessment percentage that may be collected as a
268	monthly assessment. The office may, in the order levying the
269	assessment on insurers, specify that the assessment is due and
270	payable monthly as the funds are collected from insureds
271	throughout the assessment year, in which case the assessment
272	shall be a uniform percentage of premium collected during the
273	assessment year and shall be collected from all policyholders
274	with policies in the classes protected by the account. All
275	insurers shall collect the assessment without regard to whether
276	the insurers reported premium in the year preceding the
277	assessment. Insurers are not required to advance funds if the
278	association and the office elect to use the monthly installment
279	option. All funds collected shall be retained by the association
280	for the payment of current or future claims. This subparagraph
281	does not alter the obligation of an insurer to remit assessments
282	levied pursuant to this subsection to the association. If the
283	excess amount exceeds 15 percent of the total assessment paid by
284	the insurer or insurer group, the excess amount shall be
285	returned to the insurer's or insurer group's current
286	policyholders by refunds or premium credits. The association
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287	shall use any remitted excess recoupment amounts to reduce
288	future assessments.
289	(g) Amounts recouped pursuant to this subsection for
290	assessments levied under paragraph (a) due to insolvencies on or
291	after July 1, 2010, are considered premium solely for premium
292	tax purposes and are not subject to fees or commissions.
293	However, Insurers shall treat the failure of an insured to pay a
294	recoupment charge as a failure to pay the premium.
295	(h) Assessments levied under this subsection are levied
296	upon insurers. This subsection does not create a cause of action
297	by a policyholder with respect to the levying of, or a
298	policyholder's duty to pay, such assessments.
299	(i) Assessments levied under this subsection are not
300	premium and are not subject to the premium tax, to any fees, or
301	to any commissions. An insurer is liable for any emergency
302	assessments that the insurer collects and shall treat the
303	failure of an insured to pay an emergency assessment as a
304	failure to pay the premium. An insurer is not liable for
305	uncollectible emergency assessments.
306	(h) At least 15 days before applying the recoupment factor
307	to any policies, the insurer or insurer group shall file with
308	the office a statement for informational purposes only setting
309	forth the amount of the recoupment factor and an explanation of
310	how the recoupment factor will be applied. Such statement shall
311	include documentation of the assessment paid by the insurer or
312	insurer group and the arithmetic calculations supporting the
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313 recoupment factor. The insurer or insurer group may use the 314 recoupment factor at any time after the expiration of the 15-day 315 period. The insurer or insurer group need submit only one 316 informational statement for all lines of business using the same 317 recoupment factor.

318 (i) No later than 90 days after the insurer or insurer 319 group has completed the recoupment process, the insurer or 320 insurer group shall file with the office, for information 321 purposes only, a final accounting report documenting the 322 recoupment. The report shall provide the amounts of assessments 323 paid by the insurer or insurer group, the amounts and 324 percentages recouped by year from each affected line of 325 business, and the direct written premium subject to recoupment 326 by year. The insurer or insurer group need submit only one 327 report for all lines of business using the same recoupment 328 factor.

(4) The <u>office</u> department may exempt <u>or temporarily defer</u> any insurer from any regular or emergency assessment if <u>the</u> office finds that the insurer is impaired or insolvent or if an assessment would result in such insurer's financial statement reflecting an amount of capital or surplus less than the sum of the minimum amount required by any jurisdiction in which the insurer is authorized to transact insurance.

336 Section 3. Section 631.64, Florida Statutes, is amended to 337 read:

338

631.64 Recognition of assessments in rates.-Charges or Page 13 of 15

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339	recoupments shall be separately displayed on premium statements
340	to enable policyholders to determine the amount charged for
341	association assessments but may not be included in rates filed
342	and approved by the office. The rates and premiums charged for
343	insurance policies to which this part applies may include
344	amounts sufficient to recoup a sum equal to the amounts paid to
345	the association by the member insurer less any amounts returned
346	to the member insurer by the association, and such rates shall
347	not be deemed excessive because they contain an amount
348	reasonably calculated to recoup assessments paid by the member
349	insurer.
350	Section 4. Subsection (5) of section 627.727, Florida
351	Statutes, is amended to read:
352	627.727 Motor vehicle insurance; uninsured and
353	underinsured vehicle coverage; insolvent insurer protection
354	(5) Any person having a claim against an insolvent insurer
355	as defined in s. 631.54 (6) under the provisions of this section
356	shall present such claim for payment to the Florida Insurance
357	Guaranty Association only. In the event of a payment to \underline{a} any
358	person in settlement of a claim arising under the provisions of
359	this section, the association is not subrogated or entitled to
360	any recovery against the claimant's insurer. The association,
361	however, has the rights of recovery as set forth in chapter 631
362	in the proceeds recoverable from the assets of the insolvent
363	insurer.
364	Section 5. Subsection (1) of section 631.55, Florida
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365 Statutes, is amended to read:

366

631.55 Creation of the association.-

367 There is created a nonprofit corporation to be known (1)368 as the "Florida Insurance Guaranty Association, Incorporated." 369 All insurers defined as member insurers in s. 631.54(7) shall be 370 members of the association as a condition of their authority to 371 transact insurance in this state, and, further, as a condition 372 of such authority, an insurer must shall agree to reimburse the 373 association for all claim payments the association makes on the 374 said insurer's behalf if such insurer is subsequently rehabilitated. The association shall perform its functions under 375 376 a plan of operation established and approved under s. 631.58 and 377 shall exercise its powers through a board of directors 378 established under s. 631.56. The corporation shall have all 379 those powers granted or permitted nonprofit corporations, as 380 provided in chapter 617.

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Section 6. This act shall take effect July 1, 2015.

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