



194946

LEGISLATIVE ACTION

Senate	.	House
Comm: RCS	.	
03/10/2021	.	
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The Committee on Banking and Insurance (Perry) recommended the following:

Senate Amendment (with title amendment)

Delete lines 133 - 554

and insert:

Section 3. Section 624.46227, Florida Statutes, is created to read:

624.46227 Meeting requirements.—Any association, trust, or pool authorized by state law and created for the purpose of forming a risk management mechanism or providing self-insurance for public entities in this state may establish a quorum and



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11 conduct public business through communication media technology.

12 Section 4. Subsection (3) of section 626.7351, Florida
13 Statutes, is amended to read:

14 626.7351 Qualifications for customer representative's
15 license.—The department shall not grant or issue a license as
16 customer representative to any individual found by it to be
17 untrustworthy or incompetent, or who does not meet each of the
18 following qualifications:

19 (3) Within 4 years preceding the date that the application
20 for license was filed with the department, the applicant has
21 earned the designation of Accredited Advisor in Insurance (AAI),
22 Associate in General Insurance (AINS), or Accredited Customer
23 Service Representative (ACSR) from the Insurance Institute of
24 America; the designation of Certified Insurance Counselor (CIC)
25 from the Society of Certified Insurance Service Counselors; the
26 designation of Certified Professional Service Representative
27 (CPSR) from the National Foundation for CPSR; the designation of
28 Certified Insurance Service Representative (CISR) from the
29 Society of Certified Insurance Service Representatives; the
30 designation of Certified Insurance Representative (CIR) from
31 All-Lines Training; the designation of Insurance Customer
32 Service Representative (ICSR) from Statewide Insurance
33 Associates LLC; the designation of Professional Customer Service
34 Representative (PCSR) from the Professional Career Institute;
35 the designation of Registered Customer Service Representative
36 (RCSR) from a regionally accredited postsecondary institution in
37 the state whose curriculum is approved by the department and
38 includes comprehensive analysis of basic property and casualty
39 lines of insurance and testing which demonstrates mastery of the



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40 subject; or a degree from an accredited institution of higher
41 learning approved by the department when the degree includes a
42 minimum of 9 credit hours of insurance instruction, including
43 specific instruction in the areas of property, casualty, and
44 inland marine insurance. The department shall adopt rules
45 establishing standards for the approval of curriculum.

46 Section 5. Section 626.856, Florida Statutes, is amended to
47 read:

48 626.856 "Company employee adjuster" defined.—A "company
49 employee adjuster" means a person licensed as an all-lines
50 adjuster who is appointed and employed on an insurer's staff of
51 adjusters, by an affiliate, or by a wholly owned subsidiary of
52 the insurer, and who undertakes on behalf of such insurer or
53 other insurers under common control or ownership to ascertain
54 and determine the amount of any claim, loss, or damage payable
55 under a contract of insurance, or undertakes to effect
56 settlement of such claim, loss, or damage.

57 Section 6. Effective upon this act becoming a law,
58 subsections (1), (2), and (4) of section 626.9202, Florida
59 Statutes, are amended, and subsections (7) and (8) are added to
60 that section, to read:

61 626.9202 Loss run statements for all lines of insurance.—

62 (1) As used in this section, the term:

63 (a) "Loss run statement" means a report that contains the
64 policy number, the period of coverage, the number of claims, the
65 paid losses on all claims, and the date of each loss. The term
66 does not include supporting claim file documentation, including,
67 but not limited to, copies of claim files, investigation
68 reports, evaluation statements, insureds' statements, and



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69 documents protected by a common law or statutory privilege. As
70 applied to group health insurance, the term means a report that
71 also contains premiums paid, number of insureds on a monthly
72 basis, and dependent status.

73 (b) "Provide" means to electronically send a document or to
74 allow access through an electronic portal to view or generate a
75 document.

76 (2) Notwithstanding any other law, an insurer shall provide
77 to an insured within 15 calendar days after an individual or
78 entity designated by the insurer receives ~~receipt~~ of the
79 insured's written request, either:

80 (a) A loss run statement; or

81 (b) For personal lines of insurance, information on how to
82 obtain a loss run statement at no charge through a consumer
83 reporting agency. However, this section does not prohibit an
84 insured from requesting a loss run statement after receiving
85 information from a consumer reporting agency, in which case the
86 insurer must then provide such loss run statement within 15
87 calendar days after the individual or entity designated by the
88 insurer receives the insured's subsequent written request.

89 (4) A loss run statement provided pursuant to this section
90 must contain a claims history with the insurer for the preceding
91 3 ½ years or, if the claims history is less than 3 ½ years, a
92 complete claims history with the insurer.

93 (7) This section does not apply to a life insurer as
94 defined in s. 624.602.

95 (8) For group health insurance, only the group policyholder
96 may request and be provided a loss run statement pursuant to
97 this section.



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98 Section 7. Paragraph (b) of subsection (2) of section
99 627.062, Florida Statutes, is amended to read:

100 627.062 Rate standards.—

101 (2) As to all such classes of insurance:

102 (b) Upon receiving a rate filing, the office shall review
103 the filing to determine if a rate is excessive, inadequate, or
104 unfairly discriminatory. In making that determination, the
105 office shall, in accordance with generally accepted and
106 reasonable actuarial techniques, consider the following factors:

107 1. Past and prospective loss experience within and without
108 this state.

109 2. Past and prospective expenses.

110 3. The degree of competition among insurers for the risk
111 insured.

112 4. Investment income reasonably expected by the insurer,
113 consistent with the insurer's investment practices, from
114 investable premiums anticipated in the filing, plus any other
115 expected income from currently invested assets representing the
116 amount expected on unearned premium reserves and loss reserves.
117 The commission may adopt rules using reasonable techniques of
118 actuarial science and economics to specify the manner in which
119 insurers calculate investment income attributable to classes of
120 insurance written in this state and the manner in which
121 investment income is used to calculate insurance rates. Such
122 manner must contemplate allowances for an underwriting profit
123 factor and full consideration of investment income that produces
124 a reasonable rate of return; however, investment income from
125 invested surplus may not be considered.

126 5. The reasonableness of the judgment reflected in the



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127 filing.

128 6. Dividends, savings, or unabsorbed premium deposits
129 allowed or returned to policyholders, members, or subscribers in
130 this state.

131 7. The adequacy of loss reserves.

132 8. The cost of reinsurance. The office may not disapprove a
133 rate as excessive solely due to the insurer having obtained
134 catastrophic reinsurance to cover the insurer's estimated 250-
135 year probable maximum loss or any lower level of loss.

136 9. Trend factors, including trends in actual losses per
137 insured unit for the insurer making the filing.

138 10. Conflagration and catastrophe hazards, if applicable.

139 11. Projected hurricane losses, if applicable, which must
140 be estimated using a model or method found to be acceptable or
141 reliable by the Florida Commission on Hurricane Loss Projection
142 Methodology, and as further provided in s. 627.0628. A
143 residential property insurance rate filing may use a weighted or
144 straight average of two or more such models or methods.

145 12. Projected flood losses for personal residential
146 property insurance, if applicable, which may be estimated using
147 a model or method, or a straight average of model results or
148 output ranges, independently found to be acceptable or reliable
149 by the Florida Commission on Hurricane Loss Projection
150 Methodology and as further provided in s. 627.0628.

151 13. A reasonable margin for underwriting profit and
152 contingencies.

153 14. The cost of medical services, if applicable.

154 15. Other relevant factors that affect the frequency or
155 severity of claims or expenses.



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The provisions of this subsection do not apply to workers' compensation, employer's liability insurance, and motor vehicle insurance.

Section 8. Paragraph (b) of subsection (2) of section 627.0629, Florida Statutes, is amended, and subsection (9) is added to that section, to read:

627.0629 Residential property insurance; rate filings.—

(2)

(b) A rate filing for residential property insurance made more than 150 days after approval by the office of a building code rating factor plan submitted by a statewide rating organization may ~~shall~~ include positive and negative rate factors that reflect the manner in which building code enforcement in a particular jurisdiction addresses risk of wind damage. The rate filing must ~~shall~~ include variations from standard rate factors on an individual basis based on inspection of a particular structure by a licensed home inspector. If an inspection is requested by the insured, the insurer may require the insured to pay the reasonable cost of the inspection. This paragraph applies to structures constructed or renovated after the implementation of this paragraph.

(9) An insurer may file with the office a personal lines residential property insurance rating plan that provides justified premium discounts, credits, or other rate differentials based on windstorm mitigation construction standards developed by an independent, not-for-profit, scientific research organization, if such standards meet the requirements of this section. The insurer may require a



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185 policyholder who elects to construct or retrofit the structure,
186 in whole or in part, for windstorm mitigation purposes to
187 present to the insurer evidence of compliance with the
188 mitigation standards before receiving any premium discount,
189 credit, or rate reduction allowed under the rating plan.

190 Section 9. Subsection (1) of section 627.072, Florida
191 Statutes, is amended to read:

192 627.072 Making and use of rates.—

193 (1) As to workers' compensation and employer's liability
194 insurance, the following factors shall be used in the
195 determination and fixing of rates:

196 (a) The past loss experience and prospective loss
197 experience within and outside this state;

198 (b) The impact resulting from the past loss experience and
199 prospective loss experience for insurers whose data are missing
200 from statewide experience due to insolvency. Prior reported data
201 for such insurers and all other relevant information may be used
202 to assess the impact on rates;

203 (c) ~~(b)~~ The conflagration and catastrophe hazards;

204 (d) ~~(e)~~ A reasonable margin for underwriting profit and
205 contingencies;

206 (e) ~~(d)~~ Dividends, savings, or unabsorbed premium deposits
207 allowed or returned by insurers to their policyholders, members,
208 or subscribers;

209 (f) ~~(e)~~ Investment income on unearned premium reserves and
210 loss reserves;

211 (g) ~~(f)~~ Past expenses and prospective expenses, both those
212 countrywide and those specifically applicable to this state; and

213 (h) ~~(g)~~ All other relevant factors, including judgment



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214 factors, within and outside this state.

215 Section 10. Paragraph (a) of subsection (6) of section
216 627.351, Florida Statutes, is amended to read:

217 627.351 Insurance risk apportionment plans.—

218 (6) CITIZENS PROPERTY INSURANCE CORPORATION.—

219 (a) The public purpose of this subsection is to ensure that
220 there is an orderly market for property insurance for residents
221 and businesses of this state.

222 1. The Legislature finds that private insurers are
223 unwilling or unable to provide affordable property insurance
224 coverage in this state to the extent sought and needed. The
225 absence of affordable property insurance threatens the public
226 health, safety, and welfare and likewise threatens the economic
227 health of the state. The state therefore has a compelling public
228 interest and a public purpose to assist in assuring that
229 property in the state is insured and that it is insured at
230 affordable rates so as to facilitate the remediation,
231 reconstruction, and replacement of damaged or destroyed property
232 in order to reduce or avoid the negative effects otherwise
233 resulting to the public health, safety, and welfare, to the
234 economy of the state, and to the revenues of the state and local
235 governments which are needed to provide for the public welfare.
236 It is necessary, therefore, to provide affordable property
237 insurance to applicants who are in good faith entitled to
238 procure insurance through the voluntary market but are unable to
239 do so. The Legislature intends, therefore, that affordable
240 property insurance be provided and that it continue to be
241 provided, as long as necessary, through Citizens Property
242 Insurance Corporation, a government entity that is an integral



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243 part of the state, and that is not a private insurance company.
244 To that end, the corporation shall strive to increase the
245 availability of affordable property insurance in this state,
246 while achieving efficiencies and economies, and while providing
247 service to policyholders, applicants, and agents which is no
248 less than the quality generally provided in the voluntary
249 market, for the achievement of the foregoing public purposes.
250 Because it is essential for this government entity to have the
251 maximum financial resources to pay claims following a
252 catastrophic hurricane, it is the intent of the Legislature that
253 the corporation continue to be an integral part of the state and
254 that the income of the corporation be exempt from federal income
255 taxation and that interest on the debt obligations issued by the
256 corporation be exempt from federal income taxation.

257 2. The Residential Property and Casualty Joint Underwriting
258 Association originally created by this statute shall be known as
259 the Citizens Property Insurance Corporation. The corporation
260 shall provide insurance for residential and commercial property,
261 for applicants who are entitled, but, in good faith, are unable
262 to procure insurance through the voluntary market. The
263 corporation shall operate pursuant to a plan of operation
264 approved by order of the Financial Services Commission. The plan
265 is subject to continuous review by the commission. The
266 commission may, by order, withdraw approval of all or part of a
267 plan if the commission determines that conditions have changed
268 since approval was granted and that the purposes of the plan
269 require changes in the plan. For the purposes of this
270 subsection, residential coverage includes both personal lines
271 residential coverage, which consists of the type of coverage



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272 provided by homeowner, mobile home owner, dwelling, tenant,
273 condominium unit owner, and similar policies; and commercial
274 lines residential coverage, which consists of the type of
275 coverage provided by condominium association, apartment
276 building, and similar policies.

277 3. With respect to coverage for personal lines residential
278 structures:

279 a. Effective January 1, 2014, a structure that has a
280 dwelling replacement cost of \$1 million or more, or a single
281 condominium unit that has a combined dwelling and contents
282 replacement cost of \$1 million or more, is not eligible for
283 coverage by the corporation. Such dwellings insured by the
284 corporation on December 31, 2013, may continue to be covered by
285 the corporation until the end of the policy term. The office
286 shall approve the method used by the corporation for valuing the
287 dwelling replacement cost for the purposes of this subparagraph.
288 If a policyholder is insured by the corporation before being
289 determined to be ineligible pursuant to this subparagraph and
290 such policyholder files a lawsuit challenging the determination,
291 the policyholder may remain insured by the corporation until the
292 conclusion of the litigation.

293 b. Effective January 1, 2015, a structure that has a
294 dwelling replacement cost of \$900,000 or more, or a single
295 condominium unit that has a combined dwelling and contents
296 replacement cost of \$900,000 or more, is not eligible for
297 coverage by the corporation. Such dwellings insured by the
298 corporation on December 31, 2014, may continue to be covered by
299 the corporation only until the end of the policy term.

300 c. Effective January 1, 2016, a structure that has a



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301 dwelling replacement cost of \$800,000 or more, or a single
302 condominium unit that has a combined dwelling and contents
303 replacement cost of \$800,000 or more, is not eligible for
304 coverage by the corporation. Such dwellings insured by the
305 corporation on December 31, 2015, may continue to be covered by
306 the corporation until the end of the policy term.

307 d. Effective January 1, 2017, a structure that has a
308 dwelling replacement cost of \$700,000 or more, or a single
309 condominium unit that has a combined dwelling and contents
310 replacement cost of \$700,000 or more, is not eligible for
311 coverage by the corporation. Such dwellings insured by the
312 corporation on December 31, 2016, may continue to be covered by
313 the corporation until the end of the policy term.

314
315 The requirements of sub-subparagraphs b.-d. do not apply in
316 counties where the office determines there is not a reasonable
317 degree of competition. In such counties a personal lines
318 residential structure that has a dwelling replacement cost of
319 less than \$1 million, or a single condominium unit that has a
320 combined dwelling and contents replacement cost of less than \$1
321 million, is eligible for coverage by the corporation.

322 4. It is the intent of the Legislature that policyholders,
323 applicants, and agents of the corporation receive service and
324 treatment of the highest possible level but never less than that
325 generally provided in the voluntary market. It is also intended
326 that the corporation be held to service standards no less than
327 those applied to insurers in the voluntary market by the office
328 with respect to responsiveness, timeliness, customer courtesy,
329 and overall dealings with policyholders, applicants, or agents



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330 of the corporation.

331 5.a. Effective January 1, 2009, a personal lines
332 residential structure that is located in the "wind-borne debris
333 region," as defined in s. 1609.2, International Building Code
334 (2006), and that has an insured value on the structure of
335 \$750,000 or more is not eligible for coverage by the corporation
336 unless the structure has opening protections as required under
337 the Florida Building Code for a newly constructed residential
338 structure in that area. A residential structure is deemed to
339 comply with this sub-subparagraph if it has shutters or opening
340 protections on all openings and if such opening protections
341 complied with the Florida Building Code at the time they were
342 installed.

343 b. Any major structure, as defined in s. 161.54(6)(a), that
344 is newly constructed, or rebuilt, repaired, restored, or
345 remodeled to increase the total square footage of finished area
346 by more than 25 percent, pursuant to a permit applied for after
347 July 1, 2015, is not eligible for coverage by the corporation if
348 the structure is seaward of the coastal construction control
349 line established pursuant to s. 161.053 or is within the Coastal
350 Barrier Resources System as designated by 16 U.S.C. ss. 3501-
351 3510.

352 6. With respect to wind-only coverage for commercial lines
353 residential condominiums, ~~effective July 1, 2014,~~ a condominium
354 may shall be deemed ineligible for coverage when if 50 percent
355 or more of the units are rented more than eight times in a
356 calendar year for a rental agreement period of less than 30
357 days.

358 Section 11. Subsection (6) is added to section 627.421,



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359 Florida Statutes, to read:

360 627.421 Delivery of policy.—

361 (6) If a policy is sold in a wholly electronic manner, the
362 insurer may electronically transmit all policy documents and
363 claims communications to the insured or policyholder so long as
364 the insurer provides a disclosure to the insured or policyholder
365 at the time of sale.

366 Section 12. Effective upon this act becoming a law,
367 subsections (1), (2), and (4) of section 627.444, Florida
368 Statutes, are amended, and subsections (7) and (8) are added to
369 that section, to read:

370 627.444 Loss run statements for all lines of insurance.—

371 (1) As used in this section, the term:

372 (a) "Loss run statement" means a report that contains the
373 policy number, the period of coverage, the number of claims, the
374 paid losses on all claims, and the date of each loss. The term
375 does not include supporting claim file documentation, including,
376 but not limited to, copies of claim files, investigation
377 reports, evaluation statements, insureds' statements, and
378 documents protected by a common law or statutory privilege. As
379 applied to group health insurance, the term means a report that
380 also contains premiums paid, number of insureds on a monthly
381 basis, and dependent status.

382 (b) "Provide" means to electronically send a document or to
383 allow access through an electronic portal to view or generate a
384 document.

385 (2) Notwithstanding any other law, an insurer shall provide
386 to an insured within 15 calendar days after an individual or
387 entity designated by the insurer receives ~~receipt~~ of the



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388 insured's written request, either:

389 (a) A loss run statement; or

390 (b) For personal lines of insurance, information on how to
391 obtain a loss run statement at no charge through a consumer
392 reporting agency. However, this section does not prohibit an
393 insured from requesting a loss run statement after receiving
394 information from a consumer reporting agency, in which case the
395 insurer must then provide such loss run statement within 15
396 calendar days after the individual or entity designated by the
397 insurer receives the insured's subsequent written request.

398 (4) A loss run statement provided pursuant to this section
399 must contain a claims history with the insurer for the preceding
400 3 5 years or, if the claims history is less than 3 5 years, a
401 complete claims history with the insurer.

402 (7) This section does not apply to a life insurer as
403 defined in s. 624.602.

404 (8) For group health insurance, only the group policyholder
405 may request and be provided a loss run statement pursuant to
406 this section.

407 Section 13. Section 627.6647, Florida Statutes, is
408 repealed.

409 Section 14. Paragraph (b) of subsection (1) of section
410 627.7011, Florida Statutes, is amended to read:

411 627.7011 Homeowners' policies; offer of replacement cost
412 coverage and law and ordinance coverage.—

413 (1) Prior to issuing a homeowner's insurance policy, the
414 insurer must offer each of the following:

415 (b) A policy or endorsement providing that, subject to
416 other policy provisions, any loss that is repaired or replaced



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417 at any location will be adjusted on the basis of replacement
418 costs to the dwelling not exceeding policy limits, rather than
419 actual cash value, and also including costs necessary to meet
420 applicable laws and ordinances enacted on or before the time of
421 loss which regulate ~~regulating~~ the construction, use, or repair
422 of any property or require ~~requiring~~ the tearing down of any
423 property, including the costs of removing debris. However,
424 additional costs necessary to meet applicable laws and
425 ordinances may be limited to 25 percent or 50 percent of the
426 dwelling limit, as selected by the policyholder, and such
427 coverage applies only to repairs of the damaged portion of the
428 structure unless the total damage to the structure exceeds 50
429 percent of the replacement cost of the structure.

430
431 An insurer is not required to make the offers required by this
432 subsection with respect to the issuance or renewal of a
433 homeowner's policy that contains the provisions specified in
434 paragraph (b) for law and ordinance coverage limited to 25
435 percent of the dwelling limit, except that the insurer must
436 offer the law and ordinance coverage limited to 50 percent of
437 the dwelling limit. This subsection does not prohibit the offer
438 of a guaranteed replacement cost policy.

439 Section 15. Effective upon this act becoming a law, present
440 subsections (4) through (10) of section 627.715, Florida
441 Statutes, are redesignated as subsections (5) through (11),
442 respectively, and a new subsection (4) is added to that section,
443 to read:

444 627.715 Flood insurance.—An authorized insurer may issue an
445 insurance policy, contract, or endorsement providing personal



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446 lines residential coverage for the peril of flood or excess
447 coverage for the peril of flood on any structure or the contents
448 of personal property contained therein, subject to this section.
449 This section does not apply to commercial lines residential or
450 commercial lines nonresidential coverage for the peril of flood.
451 An insurer may issue flood insurance policies, contracts,
452 endorsements, or excess coverage on a standard, preferred,
453 customized, flexible, or supplemental basis.

454 (4) An agent may export a contract or an endorsement
455 providing flood coverage to an eligible surplus lines insurer
456 without making a diligent effort to seek such coverage from
457 three or more authorized insurers under s. 626.916(1)(a).

458 Section 16. Effective upon this act becoming a law,
459 paragraph (b) of subsection (1) and paragraph (a) of subsection
460 (9) of section 627.7152, Florida Statutes, are amended to read:

461 627.7152 Assignment agreements.—

462 (1) As used in this section, the term:

463 (b) "Assignment agreement" means any instrument by which
464 post-loss benefits under a residential property insurance policy
465 or commercial property insurance policy, as that term is defined
466 in s. 627.0625(1), are assigned or transferred, or acquired in
467 any manner, in whole or in part, to or from a person providing
468 services, including, but not limited to, scopes of service, to
469 inspect, protect, repair, restore, or replace property or to
470 mitigate against further damage to the property. The term does
471 not include fees collected by a public adjuster as defined in
472 626.854.

473 (9) (a) An assignee must provide the named insured, insurer,
474 and the assignor, if not the named insured, with a written



475 notice of intent to initiate litigation before filing suit under
476 the policy. Such notice must be served by certified mail, return
477 receipt requested, to the name and mailing address designated by
478 the insurer in the policy forms, or by electronic delivery at
479 the e-mail address designated by the insurer in the policy forms
480 at least 10 business days before filing suit, but may not be
481 served before the insurer has made a determination of coverage
482 under s. 627.70131. The notice must specify the damages in
483 dispute, the amount claimed, and a presuit settlement demand.
484 Concurrent with the notice, and as a precondition to filing
485 suit, the assignee must provide the named insured, insurer, and
486 the assignor, if not the named insured, a detailed written
487 invoice or estimate of services, including itemized information
488 on equipment, materials, and supplies; the number of labor
489 hours; and, in the case of work performed, proof that the work
490 has been performed in accordance with accepted industry
491 standards.

492 Section 17. Section 627.7276, Florida Statutes, is amended
493 to read:

494 627.7276 Notice of limited coverage.—

495 (1) An automobile policy that does not contain coverage for
496 bodily injury and property damage must include a notice ~~be~~
497 ~~clearly stamped or printed to the effect~~ that such coverage is
498 not included in the policy in the following manner:

499

500 "THIS POLICY DOES NOT PROVIDE BODILY INJURY AND
501 PROPERTY DAMAGE LIABILITY INSURANCE OR ANY OTHER
502 COVERAGE FOR WHICH A SPECIFIC PREMIUM CHARGE IS NOT
503 MADE, AND DOES NOT COMPLY WITH ANY FINANCIAL



504 RESPONSIBILITY LAW.”

505

506 (2) This notice legend must accompany ~~appear on~~ the policy
507 declaration page and ~~on the filing back of the policy and be~~
508 ~~printed in a contrasting color from that used on the policy and~~
509 ~~in type and larger than the largest type used in the text at~~
510 least as large as the type and text used on the declarations
511 page thereof, as an overprint or by a rubber stamp impression.

512

513 ===== T I T L E A M E N D M E N T =====

514 And the title is amended as follows:

515 Delete lines 7 - 57

516 and insert:

517 process is valid and binding upon insurers; creating
518 s. 624.46227, F.S.; authorizing an association, trust,
519 or pool created for the purpose of forming or managing
520 a risk management mechanism or providing self-
521 insurance for a public entity to establish a quorum
522 and conduct public business through communication
523 media technology; amending s. 626.7351, F.S.; revising
524 a qualification for licensure as a customer
525 representative; amending s. 626.856, F.S.; revising
526 the definition of the term “company employee
527 adjuster”; amending s. 626.9202, F.S.; revising the
528 definition of the term “loss run statement”;
529 specifying the entities that must receive requests for
530 loss run statements; specifying that insurers must
531 provide loss run statements under certain
532 circumstances; revising the required claims history in



533 loss run statements; providing applicability; limiting
534 loss run statement requests with respect to group
535 health insurance policies to group policyholders;
536 amending s. 627.062, F.S.; revising the factors for
537 determining whether an insurance rate filing is
538 excessive, inadequate, or unfairly discriminatory;
539 amending s. 627.0629, F.S.; authorizing, rather than
540 requiring, rate filings for certain residential
541 property insurance to include certain rate factors;
542 authorizing insurers to file certain insurance rating
543 plans based on certain windstorm mitigation
544 construction standards; authorizing insurers to
545 require policyholders to provide evidence of
546 compliance with mitigation standards under certain
547 conditions; amending s. 627.072, F.S.; providing a
548 ratemaking factor for workers' compensation and
549 employer's liability insurance; amending s. 627.351,
550 F.S.; revising conditions for determining the
551 ineligibility of condominiums for wind-only coverage;
552 amending s. 627.421, F.S.; authorizing insurers to
553 electronically transmit policy documents and claims
554 documents under certain circumstances; amending s.
555 627.444, F.S.; revising the definition of the term
556 "loss run statement"; specifying the entities that
557 must receive requests for loss run statements;
558 specifying that insurers must provide loss run
559 statements under certain circumstances; revising the
560 required claims history in loss run statements;
561 providing applicability; limiting loss run statement



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562 requests with respect to group health insurance
563 policies to group policyholders; repealing s.
564 627.6647, F.S., relating to the release of information
565 required for bid to group health insurance
566 policyholders; amending s. 627.7011, F.S.; revising
567 conditions for inclusion of costs for law and
568 ordinance coverage in loss adjustments under certain
569 homeowners' policies; amending s. 627.715, F.S.;
570 providing an exemption from a diligent effort
571 requirement for agents exporting contracts or
572 endorsements providing flood coverage; amending s.
573 627.7152, F.S.; revising the definition of the term
574 "assignment agreement"; specifying the addresses to
575 which a notice of intent must be served; amending s.
576 627.7276, F.S.; revising notice requirements for motor
577 vehicle policies that do not provide coverage for
578 bodily injury and property damage liability;