Bill No. HB 1023 (2022)

Amendment No. 1

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COMMITTEE/SUBCOMMITTEE	ACTION
ADOPTED	(Y/N)
ADOPTED AS AMENDED	(Y/N)
ADOPTED W/O OBJECTION	(Y/N)
FAILED TO ADOPT	(Y/N)
WITHDRAWN	(Y/N)
OTHER	

Committee/Subcommittee hearing bill: Commerce Committee Representative Fabricio offered the following:

Amendment (with title amendment)

Remove lines 71-160 and insert:

to be recouped. If an insurer elects not to recoup advances, the amount recorded as an asset shall be reduced to zero.

2. Assessments levied under subparagraph (f)2. are paid
after policy surcharges are collected so that the recognition of
assets is based on actual premium written offset by the
obligation to the association. <u>If an insurer elects not to</u>
<u>recoup advances, the amount recorded as an asset shall be</u>
reduced to zero.

(f)1. The association, office, and insurers remitting assessments pursuant to paragraph (a) or paragraph (e) must comply with the following:

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17 a. In the order levying an assessment, the office shall 18 specify the actual percentage amount to be <u>advanced to the</u> 19 <u>association and thereafter</u> collected uniformly from all the 20 policyholders of insurers subject to the assessment and the date 21 on which the assessment year begins, which may not begin before 22 90 days after the association board certifies such an 23 assessment.

24 Insurers shall make an initial payment to the b. 25 association before the beginning of the assessment year on or before the date specified in the order of the office. Each 26 insurer shall have at least 30 days' written notice as to the 27 date on which the initial assessment payment is due and payable. 28 29 The association may request that the order issued by the office 30 authorize insurers to remit the advance payments in quarterly 31 installments.

32 с. Insurers that have written insurance in the calendar year before the year in which the assessment is certified by the 33 34 board shall make payments an initial payment based on the direct 35 written premium in this state for the classes protected by the 36 account from the previous calendar year as set forth in the insurer's annual statement, multiplied by the uniform percentage 37 of premium specified in the order issued by the office. Insurers 38 39 that have not written insurance in the previous calendar year in 40 any of the lines under the account which are being assessed, but which are writing insurance as of, or after, the date the board 41 557425 - H1023line71.docx

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42 certifies the assessment to the office, shall pay an amount 43 based on a good faith estimate of the amount of direct written 44 premium anticipated to be written in the subject lines of 45 business for the assessment year, multiplied by the uniform 46 percentage of premium specified in the order issued by the 47 office.

48 d. Insurers shall file one or more a reconciliation 49 reports report with the association which indicate indicates the 50 amount of the initial payment to the association before the 51 assessment year, whether such amount was based on direct written premium contained in a previous calendar year annual statement 52 53 or a good faith projection, the amount actually collected during 54 the assessment year, and such other information contained on a 55 form and schedule adopted by the association and provided to the 56 insurers in advance. If the insurer collected from policyholders 57 more surcharges than the amount initially paid, the insurer 58 shall pay the excess amount to the association. If the insurer 59 collected surcharges from policyholders in an amount that which is less than the amount initially paid to the association, the 60 61 association shall credit the insurer that amount against future 62 assessments. Such payment reconciliation report, and any payment of excess amounts collected from policyholders, shall be 63 64 completed and remitted to the association within 90 days after 65 the end of the assessment year. The association shall send a

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66 final reconciliation report on all insurers to the office within 67 120 days after each assessment year.

e. Insurers remitting reconciliation reports under thisparagraph to the association are subject to s. 626.9541(1)(e).

70 For assessments required under paragraph (a) or 2. 71 paragraph (e), the association may use a quarterly installment 72 method instead of the method described in sub-subparagraphs 1.b. 73 and c. or in combination thereof based on the association's 74 projected cash flow. If the association projects that it has 75 cash on hand for the payment of anticipated claims in the 76 applicable account for at least 6 months, the board may make an 77 estimate of the assessment needed and may recommend to the 78 office the assessment percentage that may be collected as a 79 quarterly assessment. The office may, in the order levying the 80 assessment on insurers, specify that the assessment is due and 81 payable quarterly as the funds are collected from insureds 82 throughout the assessment year, in which case the assessment shall be a uniform percentage of premium collected during the 83 84 assessment year and shall be collected from all policyholders 85 with policies in the classes protected by the account.

All insurers shall pay collect the assessment to the
 association without regard to whether the insurers reported
 premium in the year preceding the assessment.

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89	<u>b.</u> Insurers are not required to advance funds if the
90	association and the office elect to use the quarterly
91	installment option.
92	c. An insurer that elects not to recoup the assessment
93	shall make quarterly payments to the association equal to the
94	amount of premium written in the previous quarter for the
95	classes protected by the account, multiplied by the uniform
96	percentage of premium specified in the order issued by the
97	office.
98	<u>d.</u> All funds <u>paid to the association</u> collected shall be
99	retained by the association for the payment of current or future
100	claims.
101	e. Insurers shall file one or more reconciliation reports
102	with the association which indicate the amount actually
103	collected during the assessment year, and such other information
104	contained on a form and schedule adopted by the association and
105	provided to the insurers in advance.
106	
107	This subparagraph does not alter the obligation of an insurer to
108	remit assessments levied pursuant to this subsection to the
109	association.
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113	TITLE AMENDMENT
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114	Remove lines 9-11 and insert:
115	providing the calculation of insurers' assets under a
116	specified circumstance; prohibiting insurers' assets
117	from being recorded under a specified circumstance;
118	revising provisions relating to payments of
119	assessments and insurers' reconciliation reports to
120	the association; requiring insurers to pay assessments
121	to the association, rather than to collect such
122	assessments; specifying the payments that certain
123	insurers must make to the association; requiring
124	insurers to treat insureds'

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