| 1  | A bill to be entitled                                  |
|----|--|
| 2  | An act relating to Citizens Property Insurance         |
| 3  | Corporation; amending s. 627.021, F.S.; revising       |
| 4  | applicability; amending s. 627.351, F.S.; deleting     |
| 5  | obsolete language; requiring the Office of Insurance   |
| 6  | Regulation to approve the method used by Citizens      |
| 7  | Property Insurance Corporation for valuing the         |
| 8  | dwelling replacement costs; specifying that a          |
| 9  | registered lobbyist may not be a member of the         |
| 10 | corporation's board of governors; specifying           |
| 11 | qualification requirements for certain members of the  |
| 12 | corporation's board of governors at the time of        |
| 13 | appointment and reappointment; revising thresholds for |
| 14 | determining eligibility of a risk for coverage by the  |
| 15 | corporation; providing that policyholders removed from |
| 16 | the corporation through an assumption agreement do not |
| 17 | remain eligible for coverage from the corporation;     |
| 18 | requiring that policies of such policyholders remain   |
| 19 | on the corporation's policy forms for a specified      |
| 20 | time; eliminating costs of reinsurance in rates under  |
| 21 | certain circumstances; making technical changes;       |
| 22 | specifying the qualifications for an appointee as the  |
| 23 | executive director of the corporation; specifying that |
| 24 | only the corporation's transfer of a policy file to an |
| 25 | insurer, rather than the transfer of any file, changes |
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26 the file's public record status; providing thresholds 27 for determining eligibility for coverage by the 28 corporation for policyholders who receive take-out 29 offers from authorized insurers; revising the notice that must be provided by the corporation when insurers 30 request to take out a policy; amending s. 627.3517, 31 32 F.S.; making technical changes; amending s. 627.3518, 33 F.S.; deleting obsolete provisions relating to the 34 purpose of the corporation's clearinghouse program and reporting requirements; revising procedures for 35 36 determining eligibility of a risk for coverage with the corporation; deleting provisions relating to 37 38 renewal status for coverage by the corporation; 39 providing an effective date. 40 41 Be It Enacted by the Legislature of the State of Florida: 42 43 Section 1. Subsection (2) of section 627.021, Florida 44 Statutes, is amended to read: 627.021 Scope of this part.-45 This part does not apply to: 46 (2)47 Reinsurance, except joint reinsurance as provided in (a) 48 s. 627.311. 49 (b) Insurance against loss of or damage to aircraft, their 50 hulls, accessories, or equipment, or against liability, other Page 2 of 54

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51 than workers' compensation and employer's liability, arising out 52 of the ownership, maintenance, or use of aircraft. 53 Insurance of vessels or craft, their cargoes, marine (C) 54 builders' risks, marine protection and indemnity, or other risks 55 commonly insured under marine insurance policies. 56 Commercial inland marine insurance. (d) 57 (e) Except as may be specifically stated to apply, surplus lines insurance placed under the provisions of ss. 626.913-58 59 626.937. Section 2. Paragraphs (a), (c), (d), (n), (x), and (ii) of 60 61 subsection (6) of section 627.351, Florida Statutes, are amended to read: 62 627.351 Insurance risk apportionment plans.-63 64 CITIZENS PROPERTY INSURANCE CORPORATION. -(6) The public purpose of this subsection is to ensure 65 (a) 66 that there is an orderly market for property insurance for residents and businesses of this state. 67 68 1. The Legislature finds that private insurers are 69 unwilling or unable to provide affordable property insurance 70 coverage in this state to the extent sought and needed. The 71 absence of affordable property insurance threatens the public health, safety, and welfare and likewise threatens the economic 72 health of the state. The state therefore has a compelling public 73 74 interest and a public purpose to assist in assuring that property in the state is insured and that it is insured at 75

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76 affordable rates so as to facilitate the remediation, 77 reconstruction, and replacement of damaged or destroyed property 78 in order to reduce or avoid the negative effects otherwise 79 resulting to the public health, safety, and welfare, to the 80 economy of the state, and to the revenues of the state and local governments which are needed to provide for the public welfare. 81 82 It is necessary, therefore, to provide affordable property 83 insurance to applicants who are in good faith entitled to 84 procure insurance through the voluntary market but are unable to do so. The Legislature intends, therefore, that affordable 85 property insurance be provided and that it continue to be 86 provided, as long as necessary, through Citizens Property 87 88 Insurance Corporation, a government entity that is an integral 89 part of the state, and that is not a private insurance company. 90 To that end, the corporation shall strive to increase the 91 availability of affordable property insurance in this state, while achieving efficiencies and economies, and while providing 92 93 service to policyholders, applicants, and agents which is no 94 less than the quality generally provided in the voluntary 95 market, for the achievement of the foregoing public purposes. 96 Because it is essential for this government entity to have the 97 maximum financial resources to pay claims following a 98 catastrophic hurricane, it is the intent of the Legislature that 99 the corporation continue to be an integral part of the state and that the income of the corporation be exempt from federal income 100

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101 taxation and that interest on the debt obligations issued by the 102 corporation be exempt from federal income taxation.

103 2. The Residential Property and Casualty Joint Underwriting Association originally created by this statute 104 105 shall be known as the Citizens Property Insurance Corporation. The corporation shall provide insurance for residential and 106 107 commercial property, for applicants who are entitled, but, in 108 good faith, are unable to procure insurance through the 109 voluntary market. The corporation shall operate pursuant to a plan of operation approved by order of the Financial Services 110 Commission. The plan is subject to continuous review by the 111 commission. The commission may, by order, withdraw approval of 112 all or part of a plan if the commission determines that 113 114 conditions have changed since approval was granted and that the 115 purposes of the plan require changes in the plan. For the 116 purposes of this subsection, residential coverage includes both 117 personal lines residential coverage, which consists of the type 118 of coverage provided by homeowner, mobile home owner, dwelling, tenant, condominium unit owner, and similar policies; and 119 120 commercial lines residential coverage, which consists of the 121 type of coverage provided by condominium association, apartment 122 building, and similar policies.

123 3. With respect to coverage for personal lines residential 124 structures,÷

125

a. Effective January 1, 2014, a structure that has a

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dwelling replacement cost of \$1 million or more, or a single 126 127 condominium unit that has a combined dwelling and contents 128 replacement cost of \$1 million or more, is not eligible for 129 coverage by the corporation. Such dwellings insured by the 130 corporation on December 31, 2013, may continue to be covered by 131 the corporation until the end of the policy term. The office 132 shall approve the method used by the corporation for valuing the 133 dwelling replacement cost for the purposes of this subparagraph. 134 If a policyholder is insured by the corporation before being 135 determined to be ineligible pursuant to this subparagraph and 136 such policyholder files a lawsuit challenging the determination, 137 the policyholder may remain insured by the corporation until the 138 conclusion of the litigation.

139 b. Effective January 1, 2015, a structure that has a 140 dwelling replacement cost of \$900,000 or more, or a single 141 condominium unit that has a combined dwelling and contents 142 replacement cost of \$900,000 or more, is not eligible for 143 coverage by the corporation. Such dwellings insured by the 144 corporation on December 31, 2014, may continue to be covered by 145 the corporation only until the end of the policy term. 146 c. Effective January 1, 2016, a structure that has a 147

147 dwelling replacement cost of \$800,000 or more, or a single 148 condominium unit that has a combined dwelling and contents 149 replacement cost of \$800,000 or more, is not eligible for 150 coverage by the corporation. Such dwellings insured by the

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151 corporation on December 31, 2015, may continue to be covered -bv 152 the corporation until the end of the policy term. 153 d. effective January 1, 2017, a structure that has a dwelling replacement cost of \$700,000 or more, or a single 154 155 condominium unit that has a combined dwelling and contents 156 replacement cost of \$700,000 or more, is not eligible for 157 coverage by the corporation. The office shall approve the method 158 used by the corporation for valuing the dwelling replacement 159 cost Such dwellings insured by the corporation on December 31, 160 2016, may continue to be covered by the corporation until the 161 end of the policy term. The requirements of this subparagraph 162 sub-subparagraphs b.-d. do not apply in counties where the 163 office determines there is not a reasonable degree of 164 competition. In such counties a personal lines residential 165 structure that has a dwelling replacement cost of less than \$1 166 million, or a single condominium unit that has a combined 167 dwelling and contents replacement cost of less than \$1 million, 168 is eligible for coverage by the corporation. 169 4. It is the intent of the Legislature that policyholders,

applicants, and agents of the corporation receive service and treatment of the highest possible level but never less than that generally provided in the voluntary market. It is also intended that the corporation be held to service standards no less than those applied to insurers in the voluntary market by the office with respect to responsiveness, timeliness, customer courtesy,

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176 and overall dealings with policyholders, applicants, or agents 177 of the corporation.

178 5.a. Effective January 1, 2009, a personal lines residential structure that is located in the "wind-borne debris 179 180 region," as defined in s. 1609.2, International Building Code 181 (2006), and that has an insured value on the structure of 182 \$750,000 or more is not eligible for coverage by the corporation unless the structure has opening protections as required under 183 184 the Florida Building Code for a newly constructed residential 185 structure in that area. A residential structure is deemed to 186 comply with this sub-subparagraph if it has shutters or opening protections on all openings and if such opening protections 187 complied with the Florida Building Code at the time they were 188 189 installed.

190 b. Any major structure, as defined in s. 161.54(6)(a), 191 that is newly constructed, or rebuilt, repaired, restored, or 192 remodeled to increase the total square footage of finished area 193 by more than 25 percent, pursuant to a permit applied for after 194 July 1, 2015, is not eligible for coverage by the corporation if 195 the structure is seaward of the coastal construction control line established pursuant to s. 161.053 or is within the Coastal 196 197 Barrier Resources System as designated by 16 U.S.C. ss. 3501-198 3510.

With respect to wind-only coverage for commercial lines
 residential condominiums, effective July 1, 2014, a condominium

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201 shall be deemed ineligible for coverage if 50 percent or more of 202 the units are rented more than eight times in a calendar year 203 for a rental agreement period of less than 30 days.

204

(c) The corporation's plan of operation:

205 1. Must provide for adoption of residential property and 206 casualty insurance policy forms and commercial residential and 207 nonresidential property insurance forms, which must be approved 208 by the office before use. The corporation shall adopt the 209 following policy forms:

a. Standard personal lines policy forms that are
comprehensive multiperil policies providing full coverage of a
residential property equivalent to the coverage provided in the
private insurance market under an HO-3, HO-4, or HO-6 policy.

214 b. Basic personal lines policy forms that are policies 215 similar to an HO-8 policy or a dwelling fire policy that provide 216 coverage meeting the requirements of the secondary mortgage 217 market, but which is more limited than the coverage under a 218 standard policy.

c. Commercial lines residential and nonresidential policy forms that are generally similar to the basic perils of full coverage obtainable for commercial residential structures and commercial nonresidential structures in the admitted voluntary market.

d. Personal lines and commercial lines residentialproperty insurance forms that cover the peril of wind only. The

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forms are applicable only to residential properties located in areas eligible for coverage under the coastal account referred to in sub-subparagraph (b)2.a.

e. Commercial lines nonresidential property insurance forms that cover the peril of wind only. The forms are applicable only to nonresidential properties located in areas eligible for coverage under the coastal account referred to in sub-subparagraph (b)2.a.

f. The corporation may adopt variations of the policy forms listed in sub-subparagraphs a.-e. which contain more restrictive coverage.

g. Effective January 1, 2013, the corporation shall offer a basic personal lines policy similar to an HO-8 policy with dwelling repair based on common construction materials and methods.

241 2. Must provide that the corporation adopt a program in 242 which the corporation and authorized insurers enter into quota 243 share primary insurance agreements for hurricane coverage, as 244 defined in s. 627.4025(2)(a), for eligible risks, and adopt 245 property insurance forms for eligible risks which cover the 246 peril of wind only.

247

a. As used in this subsection, the term:

(I) "Quota share primary insurance" means an arrangement in which the primary hurricane coverage of an eligible risk is provided in specified percentages by the corporation and an

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2.51 authorized insurer. The corporation and authorized insurer are 252 each solely responsible for a specified percentage of hurricane 253 coverage of an eligible risk as set forth in a quota share 254 primary insurance agreement between the corporation and an 255 authorized insurer and the insurance contract. The 256 responsibility of the corporation or authorized insurer to pay 257 its specified percentage of hurricane losses of an eligible 258 risk, as set forth in the agreement, may not be altered by the 259 inability of the other party to pay its specified percentage of 260 losses. Eligible risks that are provided hurricane coverage 261 through a quota share primary insurance arrangement must be provided policy forms that set forth the obligations of the 262 263 corporation and authorized insurer under the arrangement, 264 clearly specify the percentages of quota share primary insurance 265 provided by the corporation and authorized insurer, and 266 conspicuously and clearly state that the authorized insurer and 267 the corporation may not be held responsible beyond their 268 specified percentage of coverage of hurricane losses.

(II) "Eligible risks" means personal lines residential and commercial lines residential risks that meet the underwriting criteria of the corporation and are located in areas that were eligible for coverage by the Florida Windstorm Underwriting Association on January 1, 2002.

274 b. The corporation may enter into quota share primary 275 insurance agreements with authorized insurers at corporation

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276 coverage levels of 90 percent and 50 percent.

c. If the corporation determines that additional coverage levels are necessary to maximize participation in quota share primary insurance agreements by authorized insurers, the corporation may establish additional coverage levels. However, the corporation's quota share primary insurance coverage level may not exceed 90 percent.

d. Any quota share primary insurance agreement entered into between an authorized insurer and the corporation must provide for a uniform specified percentage of coverage of hurricane losses, by county or territory as set forth by the corporation board, for all eligible risks of the authorized insurer covered under the agreement.

e. Any quota share primary insurance agreement entered into between an authorized insurer and the corporation is subject to review and approval by the office. However, such agreement shall be authorized only as to insurance contracts entered into between an authorized insurer and an insured who is already insured by the corporation for wind coverage.

f. For all eligible risks covered under quota share primary insurance agreements, the exposure and coverage levels for both the corporation and authorized insurers shall be reported by the corporation to the Florida Hurricane Catastrophe Fund. For all policies of eligible risks covered under such agreements, the corporation and the authorized insurer must

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301 maintain complete and accurate records for the purpose of 302 exposure and loss reimbursement audits as required by fund 303 rules. The corporation and the authorized insurer shall each 304 maintain duplicate copies of policy declaration pages and 305 supporting claims documents.

306 g. The corporation board shall establish in its plan of 307 operation standards for quota share agreements which ensure that 308 there is no discriminatory application among insurers as to the 309 terms of the agreements, pricing of the agreements, incentive 310 provisions if any, and consideration paid for servicing policies 311 or adjusting claims.

312 The quota share primary insurance agreement between the h. 313 corporation and an authorized insurer must set forth the 314 specific terms under which coverage is provided, including, but 315 not limited to, the sale and servicing of policies issued under 316 the agreement by the insurance agent of the authorized insurer 317 producing the business, the reporting of information concerning 318 eligible risks, the payment of premium to the corporation, and 319 arrangements for the adjustment and payment of hurricane claims 320 incurred on eligible risks by the claims adjuster and personnel 321 of the authorized insurer. Entering into a quota sharing 322 insurance agreement between the corporation and an authorized 323 insurer is voluntary and at the discretion of the authorized 324 insurer.

325

3. May provide that the corporation may employ or

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2022

326 otherwise contract with individuals or other entities to provide 327 administrative or professional services that may be appropriate 328 to effectuate the plan. The corporation may borrow funds by 329 issuing bonds or by incurring other indebtedness, and shall have 330 other powers reasonably necessary to effectuate the requirements 331 of this subsection, including, without limitation, the power to 332 issue bonds and incur other indebtedness in order to refinance outstanding bonds or other indebtedness. The corporation may 333 334 seek judicial validation of its bonds or other indebtedness 335 under chapter 75. The corporation may issue bonds or incur other 336 indebtedness, or have bonds issued on its behalf by a unit of 337 local government pursuant to subparagraph (q)2. in the absence 338 of a hurricane or other weather-related event, upon a 339 determination by the corporation, subject to approval by the 340 office, that such action would enable it to efficiently meet the 341 financial obligations of the corporation and that such financings are reasonably necessary to effectuate the 342 343 requirements of this subsection. The corporation may take all 344 actions needed to facilitate tax-free status for such bonds or 345 indebtedness, including formation of trusts or other affiliated 346 entities. The corporation may pledge assessments, projected 347 recoveries from the Florida Hurricane Catastrophe Fund, other 348 reinsurance recoverables, policyholder surcharges and other 349 surcharges, and other funds available to the corporation as security for bonds or other indebtedness. In recognition of s. 350

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351 10, Art. I of the State Constitution, prohibiting the impairment 352 of obligations of contracts, it is the intent of the Legislature 353 that no action be taken whose purpose is to impair any bond 354 indenture or financing agreement or any revenue source committed 355 by contract to such bond or other indebtedness.

356 4. Must require that the corporation operate subject to 357 the supervision and approval of a board of governors consisting 358 of nine individuals who are residents of this state and who are 359 from different geographical areas of this the state, one of whom 360 is appointed by the Governor and serves solely to advocate on 361 behalf of the consumer. The appointment of a consumer 362 representative by the Governor is deemed to be within the scope 363 of the exemption provided in s. 112.313(7)(b) and is in addition 364 to the appointments authorized under sub-subparagraph a. A 365 registered lobbyist for the executive or legislative branch may 366 not be a member of the board.

367 The Governor, the Chief Financial Officer, the a. 368 President of the Senate, and the Speaker of the House of 369 Representatives shall each appoint two members of the board. At 370 least one of the two members appointed by each appointing 371 officer must have demonstrated expertise in insurance and be 372 deemed to be within the scope of the exemption provided in s. 373 112.313(7)(b) at the time of appointment or reappointment. The 374 Chief Financial Officer shall designate one of the appointees as 375 chair. All board members serve at the pleasure of the appointing

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376 officer. All members of the board are subject to removal at will 377 by the officers who appointed them. All board members, including 378 the chair, must be appointed to serve for 3-year terms beginning 379 annually on a date designated by the plan. However, for the 380 first term beginning on or after July 1, 2009, each appointing 381 officer shall appoint one member of the board for a 2-year term 382 and one member for a 3-year term. A board vacancy shall be filled for the unexpired term by the appointing officer. The 383 384 Chief Financial Officer shall appoint a technical advisory group 385 to provide information and advice to the board in connection with the board's duties under this subsection. The executive 386 387 director and senior managers of the corporation shall be engaged 388 by the board and serve at the pleasure of the board. Any 389 executive director appointed on or after July 1, 2006, is 390 subject to confirmation by the Senate. The executive director is 391 responsible for employing other staff as the corporation may 392 require, subject to review and concurrence by the board.

393 b. The board shall create a Market Accountability Advisory 394 Committee to assist the corporation in developing awareness of 395 its rates and its customer and agent service levels in 396 relationship to the voluntary market insurers writing similar 397 coverage.

(I) The members of the advisory committee consist of the following 11 persons, one of whom must be elected chair by the members of the committee: four representatives, one appointed by

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401 the Florida Association of Insurance Agents, one by the Florida 402 Association of Insurance and Financial Advisors, one by the 403 Professional Insurance Agents of Florida, and one by the Latin 404 American Association of Insurance Agencies; three 405 representatives appointed by the insurers with the three highest 406 voluntary market share of residential property insurance 407 business in this the state; one representative from the Office 408 of Insurance Regulation; one consumer appointed by the board who 409 is insured by the corporation at the time of appointment to the committee; one representative appointed by the Florida 410 411 Association of Realtors; and one representative appointed by the 412 Florida Bankers Association. All members shall be appointed to 3-year terms and may serve for consecutive terms. 413

(II) The committee shall report to the corporation at each board meeting on insurance market issues <u>that</u> which may include rates and rate competition with the voluntary market; service, including policy issuance, claims processing, and general responsiveness to policyholders, applicants, and agents; and matters relating to depopulation.

420 5. Must provide a procedure for determining the421 eligibility of a risk for coverage, as follows:

a. Subject to s. 627.3517, with respect to personal lines
residential risks, if the risk is offered coverage from an
authorized insurer at the insurer's approved rate under a
standard policy including wind coverage or, if consistent with

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the insurer's underwriting rules as filed with the office, a basic policy including wind coverage, for a new application to the corporation for coverage, the risk is not eligible for any policy issued by the corporation unless the premium for coverage from the authorized insurer is more than 20 percent greater than the premium for comparable coverage from the corporation.

432 Whenever an offer of coverage for a personal lines (I) 433 residential risk is received for a policyholder of the 434 corporation at renewal from an authorized insurer, if the offer 435 is equal to or less than the corporation's renewal premium for 436 comparable coverage, the risk is not eligible for coverage with 437 the corporation unless the premium for coverage from the authorized insurer is more than the following percent greater 438 439 than the renewal premium for comparable coverage from the 440 corporation:

# (A) Four percent for policies that renew during 2023. (B) Eight percent for policies that renew during 2024. (C) Twelve percent for policies that renew during 2025. (D) Sixteen percent for polices that renew during 2026. (E) Twenty percent for policies that renew during 2027 and

446 during all subsequent years.

447

If the risk is not able to obtain such <u>offers</u> <del>offer</del>, the risk is eligible for a standard policy including wind coverage or a basic policy including wind coverage issued by the corporation;

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451 however, if the risk could not be insured under a standard 452 policy including wind coverage regardless of market conditions, 453 the risk is eligible for a basic policy including wind coverage 454 unless rejected under subparagraph 8. However, a policyholder 455 removed from the corporation through an assumption agreement 456 remains eligible for coverage from the corporation until the end 457 of the assumption period. The corporation shall determine the 458 type of policy to be provided on the basis of objective 459 standards specified in the underwriting manual and based on 460 generally accepted underwriting practices. A policyholder removed from the corporation through an assumption agreement 461 462 does not remain eligible for coverage from the corporation 463 beyond the end of the policy term. However, any policy removed 464 from the corporation through an assumption agreement remains on 465 the corporation's policy forms through the end of the policy 466 term.

467 (II) (I) If the risk accepts an offer of coverage through 468 the market assistance plan or through a mechanism established by 469 the corporation other than a plan established by s. 627.3518, 470 before a policy is issued to the risk by the corporation or 471 during the first 30 days of coverage by the corporation, and the 472 producing agent who submitted the application to the plan or to the corporation is not currently appointed by the insurer, the 473 474 insurer shall:

475

(A) Pay to the producing agent of record of the policy for

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485

476 the first year, an amount that is the greater of the insurer's 477 usual and customary commission for the type of policy written or 478 a fee equal to the usual and customary commission of the 479 corporation; or

(B) Offer to allow the producing agent of record of the policy to continue servicing the policy for at least 1 year and offer to pay the agent the greater of the insurer's or the corporation's usual and customary commission for the type of policy written.

486 If the producing agent is unwilling or unable to accept 487 appointment, the new insurer shall pay the agent in accordance 488 with sub-sub-subparagraph (A).

(III) (II) If the corporation enters into a contractual agreement for a take-out plan, the producing agent of record of the corporation policy is entitled to retain any unearned commission on the policy, and the insurer shall:

(A) Pay to the producing agent of record, for the first year, an amount that is the greater of the insurer's usual and customary commission for the type of policy written or a fee equal to the usual and customary commission of the corporation; or

(B) Offer to allow the producing agent of record to
continue servicing the policy for at least 1 year and offer to
pay the agent the greater of the insurer's or the corporation's

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501 usual and customary commission for the type of policy written. 502 503 If the producing agent is unwilling or unable to accept 504 appointment, the new insurer shall pay the agent in accordance 505 with sub-sub-sub-subparagraph (A). 506 With respect to commercial lines residential risks, for b. 507 a new application to the corporation for coverage, if the risk 508 is offered coverage under a policy including wind coverage from 509 an authorized insurer at its approved rate, the risk is not 510 eligible for a policy issued by the corporation unless the 511 premium for coverage from the authorized insurer is more than 20 512 15 percent greater than the premium for comparable coverage from 513 the corporation. 514 (I) Whenever an offer of coverage for a commercial lines 515 residential risk is received for a policyholder of the 516 corporation at renewal from an authorized insurer, if the offer 517 is equal to or less than the corporation's renewal premium for 518 comparable coverage, the risk is not eligible for coverage with 519 the corporation unless the premium for coverage from the 520 authorized insurer is more than the following percent greater than the renewal premium for comparable coverage from the 521 522 corporation: 523 (A) Four percent for policies that renew during 2023. 524 (B) Eight percent for policies that renew during 2024. 525 (C) Twelve percent for policies that renew during 2025. Page 21 of 54

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| 526 | (D) Sixteen percent for policies that renew during 2026.                        |
|-----|---|
| 527 | (E) Twenty percent for policies that renew during 2027 and                      |
| 528 | during all subsequent years.  |
| 529 |   |
| 530 | If the risk is not able to obtain any such <u>offers</u> <del>offer</del> , the |
| 531 | risk is eligible for a policy including wind coverage issued by                 |
| 532 | the corporation. However, A policyholder removed from the                       |
| 533 | corporation through an assumption agreement does not remain                     |
| 534 | <del>remains</del> eligible for coverage from the corporation <u>beyond the</u> |
| 535 | end of the policy term until the end of the assumption period.                  |
| 536 | However, any policy removed from the corporation through an                     |
| 537 | assumption agreement remains on the corporation's policy forms                  |
| 538 | through the end of the policy term.   |
| 539 | <u>(II)</u> If the risk accepts an offer of coverage through                    |
| 540 | the market assistance plan or through a mechanism established by                |
| 541 | the corporation other than a plan established by s. 627.3518,                   |
| 542 | before a policy is issued to the risk by the corporation or                     |
| 543 | during the first 30 days of coverage by the corporation, and the                |
| 544 | producing agent who submitted the application to the plan or the                |
| 545 | corporation is not currently appointed by the insurer, the                      |
| 546 | insurer shall:  |
| 547 | (A) Pay to the producing agent of record of the policy,                         |
| 548 | for the first year, an amount that is the greater of the                        |
| 549 | insurer's usual and customary commission for the type of policy                 |
| 550 | written or a fee equal to the usual and customary commission of                 |
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557

551 the corporation; or

(B) Offer to allow the producing agent of record of the policy to continue servicing the policy for at least 1 year and offer to pay the agent the greater of the insurer's or the corporation's usual and customary commission for the type of policy written.

558 If the producing agent is unwilling or unable to accept 559 appointment, the new insurer shall pay the agent in accordance 560 with sub-sub-subparagraph (A).

561 <u>(III)(II)</u> If the corporation enters into a contractual 562 agreement for a take-out plan, the producing agent of record of 563 the corporation policy is entitled to retain any unearned 564 commission on the policy, and the insurer shall:

(A) Pay to the producing agent of record, for the first year, an amount that is the greater of the insurer's usual and customary commission for the type of policy written or a fee equal to the usual and customary commission of the corporation; or

(B) Offer to allow the producing agent of record to continue servicing the policy for at least 1 year and offer to pay the agent the greater of the insurer's or the corporation's usual and customary commission for the type of policy written. If the producing agent is unwilling or unable to accept

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576 appointment, the new insurer shall pay the agent in accordance 577 with sub-sub-subparagraph (A).

578 For purposes of determining comparable coverage under с. sub-subparagraphs a. and b., the comparison must be based on 579 580 those forms and coverages that are reasonably comparable. The 581 corporation may rely on a determination of comparable coverage 582 and premium made by the producing agent who submits the 583 application to the corporation, made in the agent's capacity as 584 the corporation's agent. A comparison may be made solely of the 585 premium with respect to the main building or structure only on 586 the following basis: the same coverage A or other building 587 limits; the same percentage hurricane deductible that applies on 588 an annual basis or that applies to each hurricane for commercial 589 residential property; the same percentage of ordinance and law 590 coverage, if the same limit is offered by both the corporation 591 and the authorized insurer; the same mitigation credits, to the 592 extent the same types of credits are offered both by the 593 corporation and the authorized insurer; the same method for loss 594 payment, such as replacement cost or actual cash value, if the 595 same method is offered both by the corporation and the 596 authorized insurer in accordance with underwriting rules; and 597 any other form or coverage that is reasonably comparable as 598 determined by the board. If an application is submitted to the 599 corporation for wind-only coverage in the coastal account, the premium for the corporation's wind-only policy plus the premium 600

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601 for the ex-wind policy that is offered by an authorized insurer 602 to the applicant must be compared to the premium for multiperil 603 coverage offered by an authorized insurer, subject to the 604 standards for comparison specified in this subparagraph. If the 605 corporation or the applicant requests from the authorized 606 insurer a breakdown of the premium of the offer by types of 607 coverage so that a comparison may be made by the corporation or its agent and the authorized insurer refuses or is unable to 608 609 provide such information, the corporation may treat the offer as not being an offer of coverage from an authorized insurer at the 610 611 insurer's approved rate.

6. Must include rules for classifications of risks and613 rates.

614 7. Must provide that if premium and investment income for 615 an account attributable to a particular calendar year are in 616 excess of projected losses and expenses for the account 617 attributable to that year, such excess shall be held in surplus 618 in the account. Such surplus must be available to defray deficits in that account as to future years and used for that 619 620 purpose before assessing assessable insurers and assessable 621 insureds as to any calendar year.

8. Must provide objective criteria and procedures to be
uniformly applied to all applicants in determining whether an
individual risk is so hazardous as to be uninsurable. In making
this determination and in establishing the criteria and

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626 procedures, the following must be considered: Whether the likelihood of a loss for the individual 627 a. 628 risk is substantially higher than for other risks of the same 629 class; and 630 Whether the uncertainty associated with the individual b. 631 risk is such that an appropriate premium cannot be determined. 632 633 The acceptance or rejection of a risk by the corporation must 634 shall be construed as the private placement of insurance, and 635 the provisions of chapter 120 does do not apply. 636 9. Must provide that the corporation make its best efforts 637 to procure catastrophe reinsurance at reasonable rates, to cover its projected 100-year probable maximum loss as determined by 638 639 the board of governors. If catastrophe reinsurance is not 640 available at reasonable rates, the corporation need not purchase 641 it, but the corporation shall include the costs of reinsurance 642 to cover its projected 100-year probable maximum loss in its 643 rate calculations even if it does not purchase catastrophe 644 reinsurance. 645 The policies issued by the corporation Must provide 10. 646 that if the corporation or the market assistance plan obtains an 647 offer from an authorized insurer to cover the risk at its 648 approved rates, the risk is no longer eligible for renewal 649 through the corporation, except as otherwise provided in this subsection. 650

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11. Corporation policies and applications Must include a notice that the corporation policy could, under this section, be replaced with a policy issued by an authorized insurer which does not provide coverage identical to the coverage provided by the corporation. The notice must also specify that acceptance of corporation coverage creates a conclusive presumption that the applicant or policyholder is aware of this potential.

658 May establish, subject to approval by the office, 12. 659 different eligibility requirements and operational procedures 660 for any line or type of coverage for any specified county or 661 area if the board determines that such changes are justified due 662 to the voluntary market being sufficiently stable and 663 competitive in such area or for such line or type of coverage 664 and that consumers who, in good faith, are unable to obtain 665 insurance through the voluntary market through ordinary methods 666 continue to have access to coverage from the corporation. If 667 coverage is sought in connection with a real property transfer, 668 the requirements and procedures may not provide an effective 669 date of coverage later than the date of the closing of the 670 transfer as established by the transferor, the transferee, and, if applicable, the lender. 671

Must provide that, with respect to the coastal
account, any assessable insurer with a surplus as to
policyholders of \$25 million or less writing 25 percent or more
of its total countrywide property insurance premiums in this

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676 state may petition the office, within the first 90 days of each 677 calendar year, to qualify as a limited apportionment company. A 678 regular assessment levied by the corporation on a limited 679 apportionment company for a deficit incurred by the corporation 680 for the coastal account may be paid to the corporation on a 681 monthly basis as the assessments are collected by the limited 682 apportionment company from its insureds, but a limited 683 apportionment company must begin collecting the regular 684 assessments not later than 90 days after the regular assessments 685 are levied by the corporation, and the regular assessments must be paid in full within 15 months after being levied by the 686 687 corporation. A limited apportionment company shall collect from 688 its policyholders any emergency assessment imposed under sub-689 subparagraph (b)3.d. The plan must provide that, if the office 690 determines that any regular assessment will result in an 691 impairment of the surplus of a limited apportionment company, 692 the office may direct that all or part of such assessment be 693 deferred as provided in subparagraph (q)4. However, an emergency 694 assessment to be collected from policyholders under sub-695 subparagraph (b)3.d. may not be limited or deferred.

696 14. Must provide that the corporation appoint as its 697 licensed agents only those agents who throughout such 698 appointments also hold an appointment as defined in s. 626.015 699 by an insurer who is authorized to write and is actually writing 700 or renewing personal lines residential property coverage,

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701 commercial residential property coverage, or commercial 702 nonresidential property coverage within this the state. 703 15. Must provide a premium payment plan option to its 704 policyholders which, at a minimum, allows for quarterly and 705 semiannual payment of premiums. A monthly payment plan may, but 706 is not required to, be offered. 707 16. Must limit coverage on mobile homes or manufactured 708 homes built before 1994 to actual cash value of the dwelling 709 rather than replacement costs of the dwelling. 710 Must provide coverage for manufactured or mobile home 17. 711 dwellings. Such coverage must also include the following 712 attached structures: 713 Screened enclosures that are aluminum framed or a. 714 screened enclosures that are not covered by the same or 715 substantially the same materials as those of the primary 716 dwelling; 717 b. Carports that are aluminum or carports that are not covered by the same or substantially the same materials as those 718 719 of the primary dwelling; and 720 c. Patios that have a roof covering that is constructed of 721 materials that are not the same or substantially the same 722 materials as those of the primary dwelling. 723 724 The corporation shall make available a policy for mobile homes 725 or manufactured homes for a minimum insured value of at least Page 29 of 54

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726 \$3,000.

727 May provide such limits of coverage as the board 18. 728 determines, consistent with the requirements of this subsection.

May require commercial property to meet specified 729 19. 730 hurricane mitigation construction features as a condition of 731 eligibility for coverage.

732 20. Must provide that new or renewal policies issued by 733 the corporation on or after January 1, 2012, which cover 734 sinkhole loss do not include coverage for any loss to 735 appurtenant structures, driveways, sidewalks, decks, or patios 736 that are directly or indirectly caused by sinkhole activity. The 737 corporation shall exclude such coverage using a notice of 738 coverage change, which may be included with the policy renewal, 739 and not by issuance of a notice of nonrenewal of the excluded 740 coverage upon renewal of the current policy.

741 21. As of January 1, 2012, must require that the agent 742 obtain from an applicant for coverage from the corporation an 743 acknowledgment signed by the applicant, which includes, at a 744 minimum, the following statement:

745 746 747 1. 748

ACKNOWLEDGMENT OF POTENTIAL SURCHARGE AND ASSESSMENT LIABILITY:

AS A POLICYHOLDER OF CITIZENS PROPERTY INSURANCE CORPORATION, I UNDERSTAND THAT IF THE CORPORATION SUSTAINS A DEFICIT AS A RESULT OF HURRICANE LOSSES OR FOR ANY OTHER REASON, 749 750 MY POLICY COULD BE SUBJECT TO SURCHARGES, WHICH WILL BE DUE AND

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751 PAYABLE UPON RENEWAL, CANCELLATION, OR TERMINATION OF THE
752 POLICY, AND THAT THE SURCHARGES COULD BE AS HIGH AS 45 PERCENT
753 OF MY PREMIUM, OR A DIFFERENT AMOUNT AS IMPOSED BY THE FLORIDA
754 LEGISLATURE.

2. I UNDERSTAND THAT I CAN AVOID THE CITIZENS POLICYHOLDER
SURCHARGE, WHICH COULD BE AS HIGH AS 45 PERCENT OF MY PREMIUM,
BY OBTAINING COVERAGE FROM A PRIVATE MARKET INSURER AND THAT TO
BE ELIGIBLE FOR COVERAGE BY CITIZENS, I MUST FIRST TRY TO OBTAIN
PRIVATE MARKET COVERAGE BEFORE APPLYING FOR OR RENEWING COVERAGE
WITH CITIZENS. I UNDERSTAND THAT PRIVATE MARKET INSURANCE RATES
ARE REGULATED AND APPROVED BY THE STATE.

762 3. I UNDERSTAND THAT I MAY BE SUBJECT TO EMERGENCY
763 ASSESSMENTS TO THE SAME EXTENT AS POLICYHOLDERS OF OTHER
764 INSURANCE COMPANIES, OR A DIFFERENT AMOUNT AS IMPOSED BY THE
765 FLORIDA LEGISLATURE.

766 4. I ALSO UNDERSTAND THAT CITIZENS PROPERTY INSURANCE
767 CORPORATION IS NOT SUPPORTED BY THE FULL FAITH AND CREDIT OF THE
768 STATE OF FLORIDA.

769 a. The corporation shall maintain, in electronic format or 770 otherwise, a copy of the applicant's signed acknowledgment and 771 provide a copy of the statement to the policyholder as part of 772 the first renewal after the effective date of this subparagraph.

b. The signed acknowledgment form creates a conclusive presumption that the policyholder understood and accepted his or her potential surcharge and assessment liability as a

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776 policyholder of the corporation.

(d)1. All prospective employees for senior management positions, as defined by the plan of operation, are subject to background checks as a prerequisite for employment. The office shall conduct the background checks pursuant to ss. 624.34, 624.404(3), and 628.261.

782 2. On or before July 1 of each year, employees of the 783 corporation must sign and submit a statement attesting that they 784 do not have a conflict of interest, as defined in part III of 785 chapter 112. As a condition of employment, all prospective 786 employees must sign and submit to the corporation a conflict-of-787 interest statement.

788 The executive director, senior managers, and members of 3. 789 the board of governors are subject to part III of chapter 112, 790 including, but not limited to, the code of ethics and public 791 disclosure and reporting of financial interests, pursuant to s. 792 112.3145. For purposes of applying part III of chapter 112 to 793 activities of the executive director, senior managers, and 794 members of the board of governors, those persons shall be 795 considered public officers or employees and the corporation 796 shall be considered their agency. Notwithstanding s. 797 112.3143(2), a board member may not vote on any measure that would inure to his or her special private gain or loss; that he 798 799 or she knows would inure to the special private gain or loss of any principal by whom he or she is retained or to the parent 800

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2022

801 organization or subsidiary of a corporate principal by which he 802 or she is retained, other than an agency as defined in s. 803 112.312; or that he or she knows would inure to the special 804 private gain or loss of a relative or business associate of the 805 public officer. Before the vote is taken, such member shall 806 publicly state to the assembly the nature of his or her interest 807 in the matter from which he or she is abstaining from voting 808 and, within 15 days after the vote occurs, disclose the nature 809 of his or her interest as a public record in a memorandum filed 810 with the person responsible for recording the minutes of the 811 meeting, who shall incorporate the memorandum in the minutes. 812 Senior managers and board members are also required to file such 813 disclosures with the Commission on Ethics and the Office of 814 Insurance Regulation. The executive director of the corporation 815 or his or her designee shall notify each existing and newly 816 appointed member of the board of governors and senior managers 817 of their duty to comply with the reporting requirements of part 818 III of chapter 112. At least quarterly, the executive director 819 or his or her designee shall submit to the Commission on Ethics 820 a list of names of the senior managers and members of the board 821 of governors who are subject to the public disclosure requirements under s. 112.3145. 822

4. Notwithstanding s. 112.3148, s. 112.3149, or any other provision of law, an employee or board member may not knowingly accept, directly or indirectly, any gift or expenditure from a

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person or entity, or an employee or representative of such person or entity, which has a contractual relationship with the corporation or who is under consideration for a contract. An employee or board member who fails to comply with subparagraph 3. or this subparagraph is subject to penalties provided under ss. 112.317 and 112.3173.

5. Any senior manager of the corporation who is employed on or after January 1, 2007, regardless of the date of hire, who subsequently retires or terminates employment is prohibited from representing another person or entity before the corporation for 2 years after retirement or termination of employment from the corporation.

6. The executive director, members of the board of governors, and senior managers of the corporation are prohibited from having any employment or contractual relationship for 2 years after retirement from or termination of service to the corporation with an insurer that has entered into a take-out bonus agreement with the corporation.

844 7. At the time of appointment, the executive director must 845 have the experience, character, and qualifications sufficient to 846 qualify as a chief executive officer of an insurer in accordance 847 with s. 624.404(3).

(n)1. Rates for coverage provided by the corporation must
be actuarially sound and subject to s. 627.062, except as
otherwise provided in this paragraph. The corporation shall file

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851 its recommended rates with the office at least annually. The 852 corporation shall provide any additional information regarding 853 the rates which the office requires. The office shall consider 854 the recommendations of the board and issue a final order 855 establishing the rates for the corporation within 45 days after 856 the recommended rates are filed. The corporation may not pursue 857 an administrative challenge or judicial review of the final 858 order of the office.

2. In addition to the rates otherwise determined pursuant to this paragraph, the corporation shall impose and collect an amount equal to the premium tax provided in s. 624.509 to augment the financial resources of the corporation.

863 3. If After the public hurricane loss-projection model 864 under s. 627.06281 is has been found to be accurate and reliable 865 by the Florida Commission on Hurricane Loss Projection 866 Methodology, it must the model shall be considered when 867 establishing the windstorm portion of the corporation's rates. 868 The corporation may use the public model results in combination 869 with the results of private models to calculate rates for the 870 windstorm portion of the corporation's rates. This subparagraph 871 does not require or allow the corporation to adopt rates lower 872 than the rates otherwise required or allowed by this paragraph.

4. The corporation must make a recommended actuarially
sound rate filing for each personal and commercial line of
business it writes.

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| 876 | 5. Notwithstanding the board's recommended rates and the                       |
|-----|--|
| 877 | office's final order regarding the corporation's filed rates                   |
| 878 | under subparagraph 1., the corporation shall annually implement                |
| 879 | a rate increase <u>that</u> which, except for sinkhole coverage, does          |
| 880 | not exceed the following for any single policy issued by the                   |
| 881 | corporation, excluding coverage changes and surcharges:                        |
| 882 | a. Eleven percent for 2022.  |
| 883 | b. Twelve percent for 2023.  |
| 884 | c. Thirteen percent for 2024.  |
| 885 | d. Fourteen percent for 2025.  |
| 886 | e. Fifteen percent for 2026 and all subsequent years.                          |
| 887 | 6. The corporation may also implement an increase to                           |
| 888 | reflect the effect on the corporation of the cash buildup factor               |
| 889 | pursuant to s. 215.555(5)(b).  |
| 890 | 7. The corporation's implementation of rates as prescribed                     |
| 891 | in subparagraph 5. <u>must</u> <del>shall</del> cease for any line of business |
| 892 | written by the corporation upon the corporation's implementation               |
| 893 | of actuarially sound rates. Thereafter, the corporation shall                  |
| 894 | annually make a recommended actuarially sound rate filing for                  |
| 895 | each commercial and personal line of business the corporation                  |
| 896 | writes.  |
| 897 | (x)1. The following records of the corporation are                             |
| 898 | confidential and exempt from <del>the provisions of</del> s. 119.07(1) and     |
| 899 | s. 24(a), Art. I of the State Constitution:                                    |
| 900 | a. Underwriting files, except that a policyholder or an                        |
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901 applicant shall have access to his or her own underwriting 902 files. Confidential and exempt underwriting file records may 903 also be released to other governmental agencies upon written 904 request and demonstration of need; such records held by the 905 receiving agency remain confidential and exempt as provided 906 herein.

Claims files, until termination of all litigation and 907 b. settlement of all claims arising out of the same incident, 908 909 although portions of the claims files may remain exempt, as 910 otherwise provided by law. Confidential and exempt claims file records may be released to other governmental agencies upon 911 912 written request and demonstration of need; such records held by 913 the receiving agency remain confidential and exempt as provided 914 herein.

915 Records obtained or generated by an internal auditor с. 916 pursuant to a routine audit, until the audit is completed, or if 917 the audit is conducted as part of an investigation, until the 918 investigation is closed or ceases to be active. An investigation 919 is considered "active" while the investigation is being 920 conducted with a reasonable, good faith belief that it could 921 lead to the filing of administrative, civil, or criminal 922 proceedings.

923 d. Matters reasonably encompassed in privileged attorney-924 client communications.

925

e. Proprietary information licensed to the corporation

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926 under contract and the contract provides for the confidentiality 927 of such proprietary information.

928 f. All information relating to the medical condition or 929 medical status of a corporation employee which is not relevant 930 to the employee's capacity to perform his or her duties, except 931 as otherwise provided in this paragraph. Information that is 932 exempt <u>includes shall include</u>, but is not limited to, 933 information relating to workers' compensation, insurance 934 benefits, and retirement or disability benefits.

935 g. Upon an employee's entrance into the employee 936 assistance program, a program to assist any employee who has a 937 behavioral or medical disorder, substance abuse problem, or 938 emotional difficulty that affects the employee's job 939 performance, all records relative to that participation are 940 shall be confidential and exempt from the provisions of s. 941 119.07(1) and s. 24(a), Art. I of the State Constitution, except 942 as otherwise provided in s. 112.0455(11).

h. Information relating to negotiations for financing,
reinsurance, depopulation, or contractual services, until the
conclusion of the negotiations.

946 i. Minutes of closed meetings regarding underwriting
947 files, and minutes of closed meetings regarding an open claims
948 file until termination of all litigation and settlement of all
949 claims with regard to that claim, except that information
950 otherwise confidential or exempt by law must shall be redacted.

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951 2. If an authorized insurer is considering underwriting a 952 risk insured by the corporation, relevant underwriting files and 953 confidential claims files may be released to the insurer 954 provided that the insurer agrees in writing, notarized and under 955 oath, to maintain the confidentiality of such files. If a policy 956 file is transferred to an insurer, that policy file is no longer 957 a public record because it is not held by an agency subject to 958 the provisions of the public records law. Underwriting files and 959 confidential claims files may also be released to staff and the 960 board of governors of the market assistance plan established 961 pursuant to s. 627.3515, who must retain the confidentiality of 962 such files, except such files may be released to authorized 963 insurers that are considering assuming the risks to which the 964 files apply, provided the insurer agrees in writing, notarized 965 and under oath, to maintain the confidentiality of such files. 966 Finally, the corporation or the board or staff of the market 967 assistance plan may make the following information obtained from 968 underwriting files and confidential claims files available to an 969 entity that has obtained a permit to become an authorized 970 insurer, a reinsurer that may provide reinsurance under s. 971 624.610, a licensed reinsurance broker, a licensed rating 972 organization, a modeling company, or a licensed general lines 973 insurance agent: name, address, and telephone number of the 974 residential property owner or insured; location of the risk; 975 rating information; loss history; and policy type. The receiving

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976 person must retain the confidentiality of the information 977 received and may use the information only for the purposes of 978 developing a take-out plan or a rating plan to be submitted to 979 the office for approval or otherwise analyzing the underwriting 980 of a risk or risks insured by the corporation on behalf of the 981 private insurance market. A licensed general lines insurance 982 agent may not use such information for the direct solicitation 983 of policyholders.

984 3. A policyholder who has filed suit against the 985 corporation has the right to discover the contents of his or her 986 own claims file to the same extent that discovery of such 987 contents would be available from a private insurer in litigation 988 as provided by the Florida Rules of Civil Procedure, the Florida 989 Evidence Code, and other applicable law. Pursuant to subpoena, a 990 third party has the right to discover the contents of an 991 insured's or applicant's underwriting or claims file to the same 992 extent that discovery of such contents would be available from a 993 private insurer by subpoena as provided by the Florida Rules of 994 Civil Procedure, the Florida Evidence Code, and other applicable 995 law, and subject to any confidentiality protections requested by 996 the corporation and agreed to by the seeking party or ordered by 997 the court. The corporation may release confidential underwriting 998 and claims file contents and information as it deems necessary 999 and appropriate to underwrite or service insurance policies and claims, subject to any confidentiality protections deemed 1000

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1001 necessary and appropriate by the corporation.

1002 Portions of meetings of the corporation are exempt from 4. 1003 the provisions of s. 286.011 and s. 24(b), Art. I of the State 1004 Constitution wherein confidential underwriting files or 1005 confidential open claims files are discussed. All portions of 1006 corporation meetings which are closed to the public shall be 1007 recorded by a court reporter. The court reporter shall record 1008 the times of commencement and termination of the meeting, all 1009 discussion and proceedings, the names of all persons present at any time, and the names of all persons speaking. No portion of 1010 1011 any closed meeting shall be off the record. Subject to the provisions hereof and s. 119.07(1)(d)-(f), the court reporter's 1012 1013 notes of any closed meeting shall be retained by the corporation 1014 for a minimum of 5 years. A copy of the transcript, less any exempt matters, of any closed meeting wherein claims are 1015 1016 discussed shall become public as to individual claims after 1017 settlement of the claim.

(ii) The corporation shall revise the programs adopted pursuant to sub-subparagraph (q)3.a. for personal lines residential policies to maximize policyholder options and encourage increased participation by insurers and agents. After January 1, 2017, a policy may not be taken out of the corporation unless the provisions of this paragraph are met.

1024 1. The corporation must publish a periodic schedule of 1025 cycles during which an insurer may identify, and notify the

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2022

| 1026 | corporation of, policies that the insurer is requesting to take  |
|------|--|
| 1027 | out. A request must include a description of the coverage        |
| 1028 | offered and an estimated premium and must be submitted to the    |
| 1029 | corporation in a form and manner prescribed by the corporation.  |
| 1030 | 2. The corporation must maintain and make available to the       |
| 1031 | agent of record a consolidated list of all insurers requesting   |
| 1032 | to take out a policy. The list must include a description of the |
| 1033 | coverage offered and the estimated premium for each take-out     |
| 1034 | request.   |
| 1035 | 3. If a policyholder receives a take-out offer from an           |
| 1036 | authorized insurer, the risk is no longer eligible for coverage  |
| 1037 | with the corporation unless the premium for coverage from the    |
| 1038 | authorized insurer is more than the following percent greater    |
| 1039 | than the renewal premium for comparable coverage from the        |
| 1040 | corporation:   |
| 1041 | a. Four percent for policies effective on or after January       |
| 1042 | <u>1, 2023.</u>  |
| 1043 | b. Eight percent for policies effective on or after              |
| 1044 | January 1, 2024.   |
| 1045 | c. Twelve percent for policies effective on or after             |
| 1046 | January 1, 2025.   |
| 1047 | d. Sixteen percent for policies effective on or after            |
| 1048 | January 1, 2026.   |
| 1049 | e. Twenty percent for policies effective on or after             |
| 1050 | January 1, 2027, and in all subsequent years.                    |
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1051 4.3. The corporation must provide written notice to the 1052 policyholder and the agent of record regarding all insurers 1053 requesting to take out the policy, which and regarding the policyholder's option to accept a take-out offer or to reject 1054 1055 all take-out offers and to remain with the corporation. The 1056 notice must be in a format prescribed by the corporation and 1057 include, for each take-out offer: 1058 The amount of the estimated premium; a. 1059 A description of the coverage; and b. 1060 A comparison of the estimated premium and coverage с. 1061 offered by the insurer to the estimated premium and coverage provided by the corporation. 1062 Section 3. Section 627.3517, Florida Statutes, is amended 1063 1064 to read: 1065 627.3517 Consumer choice.-No provision of s. 627.351, s. 1066 627.3511, or s. 627.3515 shall be construed to impair the right 1067 of any insurance risk apportionment plan policyholder, upon 1068 receipt of any keep-out keepout or take-out offer, to retain his 1069 or her current agent, so long as that agent is duly licensed and 1070 appointed by the insurance risk apportionment plan or otherwise 1071 authorized to place business with the insurance risk apportionment plan. This right may shall not be canceled, 1072 1073 suspended, impeded, abridged, or otherwise compromised by any 1074 rule, plan of operation, or depopulation plan, whether through keep-out keepout, take-out, midterm assumption, or any other 1075

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1076 means, of any insurance risk apportionment plan or depopulation 1077 plan, including, but not limited to, those described in s. 1078 627.351, s. 627.3511, or s. 627.3515. The commission shall adopt 1079 any rules necessary to cause any insurance risk apportionment plan or market assistance plan under such sections to 1080 1081 demonstrate that the operations of the plan do not interfere 1082 with, promote, or allow interference with the rights created 1083 under this section. If the policyholder's current agent is 1084 unable or unwilling to be appointed with the insurer making the 1085 take-out or keep-out keepout offer, the policyholder is shall 1086 not be disqualified from participation in the appropriate insurance risk apportionment plan because of an offer of 1087 1088 coverage in the voluntary market. An offer of full property 1089 insurance coverage by the insurer currently insuring either the ex-wind or wind-only coverage on the policy to which the offer 1090 1091 applies is shall not be considered a take-out or keep-out 1092 keepout offer. Any rule, plan of operation, or plan of 1093 depopulation, through keep-out keepout, take-out, midterm 1094 assumption, or any other means, of any property insurance risk 1095 apportionment plan under s. 627.351(2) or (6) is subject to ss. 1096 627.351(2)(b) and (6)(c) and 627.3511(4).

1097Section 4. Section 627.3518, Florida Statutes, is amended1098to read:

1099627.3518Citizens Property Insurance Corporation1100policyholder eligibility clearinghouse program.The purpose of

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1101 this section is to provide a framework for the corporation to 1102 implement a clearinghouse program by January 1, 2014. 1103 (1)As used in this section, the term: 1104 (a) "Corporation" means Citizens Property Insurance 1105 Corporation. 1106 "Exclusive agent" means any licensed insurance agent (b) 1107 that has, by contract, agreed to act exclusively for one company or group of affiliated insurance companies and is disallowed by 1108 1109 the provisions of that contract to directly write for any other unaffiliated insurer absent express consent from the company or 1110 1111 group of affiliated insurance companies. "Independent agent" means any licensed insurance agent 1112 (C) 1113 not described in paragraph (b). "Program" means the clearinghouse created under this 1114 (d) 1115 section. 1116 (2)In order to confirm eligibility with the corporation and to enhance access of new applicants for coverage and 1117 1118 existing policyholders of the corporation to offers of coverage from authorized insurers, the corporation shall establish a 1119 1120 program for personal residential risks in order to facilitate 1121 the diversion of ineligible applicants and existing 1122 policyholders from the corporation into the voluntary insurance market. The corporation shall also develop appropriate 1123 1124 procedures for facilitating the diversion of ineligible applicants and existing policyholders for commercial residential 1125

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1126 coverage into the private insurance market and shall report such 1127 procedures to the President of the Senate and the Speaker of the 1128 House of Representatives by January 1, 2014.

1129 (3)The corporation board shall establish the clearinghouse program as an organizational unit within the 1130 1131 corporation. The program shall have all the rights and 1132 responsibilities in carrying out its duties as a licensed 1133 general lines agent, but may not be required to employ or engage 1134 a licensed general lines agent or to maintain an insurance agency license to carry out its activities in the solicitation 1135 1136 and placement of insurance coverage. In establishing the 1137 program, the corporation may:

(a) Require all new applications, and all policies due for renewal, to be submitted for coverage to the program in order to facilitate obtaining an offer of coverage from an authorized insurer before binding or renewing coverage by the corporation.

(b) Employ or otherwise contract with individuals or other entities for appropriate administrative or professional services to effectuate the plan within the corporation in accordance with the applicable purchasing requirements under s. 627.351.

(c) Enter into contracts with any authorized insurer to participate in the program and accept an appointment by such insurer.

(d) Provide funds to operate the program. Insurers andagents participating in the program are not required to pay a

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1151 fee to offset or partially offset the cost of the program or use 1152 the program for renewal of policies initially written through 1153 the clearinghouse.

(e) Develop an enhanced application that includes
information to assist private insurers in determining whether to
make an offer of coverage through the program.

(f) For personal lines residential risks, require, before approving all new applications for coverage by the corporation, that every application be subject to a period of 2 business days when any insurer participating in the program may select the application for coverage. The insurer may issue a binder on any policy selected for coverage for a period of at least 30 days but not more than 60 days.

(4) Any authorized insurer may participate in the program; however, participation is not mandatory for any insurer. Insurers making offers of coverage to new applicants or renewal policyholders through the program:

1168 May not be required to individually appoint any agent (a) 1169 whose customer is underwritten and bound through the program. 1170 Notwithstanding s. 626.112, insurers are not required to appoint 1171 any agent on a policy underwritten through the program for as 1172 long as that policy remains with the insurer. Insurers may, at 1173 their election, appoint any agent whose customer is initially 1174 underwritten and bound through the program. In the event an insurer accepts a policy from an agent who is not appointed 1175

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1176 pursuant to this paragraph, and thereafter elects to accept a 1177 policy from such agent, the provisions of s. 626.112 requiring 1178 appointment apply to the agent.

(b) Must enter into a limited agency agreement with each agent that is not appointed in accordance with paragraph (a) and whose customer is underwritten and bound through the program.

(c) Must enter into its standard agency agreement with each agent whose customer is underwritten and bound through the program when that agent has been appointed by the insurer pursuant to s. 626.112.

1186

(d) Must comply with s. 627.4133(2).

(e) May participate through their single-designated managing general agent or broker; however, the provisions of paragraph (6)(a) regarding ownership, control, and use of the expirations continue to apply.

(f) Must pay to the producing agent a commission equal to that paid by the corporation or the usual and customary commission paid by the insurer for that line of business, whichever is greater.

(5) Notwithstanding s. 627.3517, any applicant for new coverage from the corporation is not eligible for coverage from the corporation if provided an offer of coverage from an authorized insurer through the program at a premium that is at or below the eligibility threshold established in s. 627.351(6)(c)5.a. Whenever an offer of coverage for a personal

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| 1201 | lines risk is received for a policyholder of the corporation at           |
|------|---|
| 1202 | renewal from an authorized insurer through the program, <del>if the</del> |
| 1203 | offer is equal to or less than the corporation's renewal premium          |
| 1204 | for comparable coverage, the risk is not eligible for coverage            |
| 1205 | with the corporation <u>if the offer is at or below the eligibility</u>   |
| 1206 | threshold specified in s. 627.351(6)(c)5.a. In the event that an          |
| 1207 | offer of coverage for a new applicant is received from an                 |
| 1208 | authorized insurer through the program, and the premium offered           |
| 1209 | exceeds the eligibility threshold <u>specified</u> contained in s.        |
| 1210 | 627.351(6)(c)5.a., the applicant or insured may elect to accept           |
| 1211 | such coverage, or may elect to accept or continue coverage with           |
| 1212 | the corporation. In the event <u>that</u> an offer of coverage for a      |
| 1213 | personal lines risk is received from an authorized insurer at             |
| 1214 | renewal through the program, and the premium offered is <u>at or</u>      |
| 1215 | below the eligibility threshold specified in s.                           |
| 1216 | 627.351(6)(c)5.a. more than the corporation's renewal premium             |
| 1217 | for comparable coverage, the insured is not eligible to may               |
| 1218 | elect to accept such coverage, or may elect to accept or                  |
| 1219 | continue coverage with the corporation. Section                           |
| 1220 | 627.351(6)(c)5.a.(I) does not apply to an offer of coverage from          |
| 1221 | an authorized insurer obtained through the program. An applicant          |
| 1222 | for coverage from the corporation who was declared incligible             |
| 1223 | for coverage at renewal by the corporation in the previous 36             |
| 1224 | months due to an offer of coverage pursuant to this subsection            |
| 1225 | shall be considered a renewal under this section if the                   |
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1226 corporation determines that the authorized insurer making the 1227 offer of coverage pursuant to this subsection continues to 1228 insure the applicant and increased the rate on the policy in 1229 excess of the increase allowed for the corporation under s. 1230 627.351(6)(n)5.

(6) Independent insurance agents submitting new applications for coverage or that are the agent of record on a renewal policy submitted to the program:

1234 (a) Are granted and must maintain ownership and the 1235 exclusive use of expirations, records, or other written or 1236 electronic information directly related to such applications or 1237 renewals written through the corporation or through an insurer participating in the program, notwithstanding s. 1238 1239 627.351(6)(c)5.a.(I)(B) and (II)(B). Such ownership is granted 1240 for as long as the insured remains with the agency or until sold 1241 or surrendered in writing by the agent. Contracts with the corporation or required by the corporation must not amend, 1242 1243 modify, interfere with, or limit such rights of ownership. Such 1244 expirations, records, or other written or electronic information 1245 may be used to review an application, issue a policy, or for any 1246 other purpose necessary for placing such business through the 1247 program.

(b) May not be required to be appointed by any insurer
participating in the program for policies written solely through
the program, notwithstanding the provisions of s. 626.112.

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1275

1251 May accept an appointment from any insurer (C) 1252 participating in the program. 1253 May enter into either a standard or limited agency (d) 1254 agreement with the insurer, at the insurer's option. 1255 1256 Applicants ineligible for coverage in accordance with subsection 1257 (5) remain ineligible if their independent agent is unwilling or 1258 unable to enter into a standard or limited agency agreement with 1259 an insurer participating in the program. 1260 Exclusive agents submitting new applications for (7)1261 coverage or that are the agent of record on a renewal policy 1262 submitted to the program: Must maintain ownership and the exclusive use of 1263 (a) 1264 expirations, records, or other written or electronic information 1265 directly related to such applications or renewals written 1266 through the corporation or through an insurer participating in 1267 the program, notwithstanding s. 627.351(6)(c)5.a.(I)(B) and 1268 (II) (B). Contracts with the corporation or required by the 1269 corporation must not amend, modify, interfere with, or limit 1270 such rights of ownership. Such expirations, records, or other 1271 written or electronic information may be used to review an 1272 application, issue a policy, or for any other purpose necessary 1273 for placing such business through the program. 1274 May not be required to be appointed by any insurer (b)

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participating in the program for policies written solely through

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1300

1276 the program, notwithstanding the provisions of s. 626.112. 1277 Must only facilitate the placement of an offer of (C) 1278 coverage from an insurer whose limited servicing agreement is approved by that exclusive agent's exclusive insurer. 1279 1280 May enter into a limited servicing agreement with the (d) 1281 insurer making an offer of coverage, and only after the 1282 exclusive agent's insurer has approved the limited servicing 1283 agreement terms. The exclusive agent's insurer must approve a 1284 limited service agreement for the program for any insurer for 1285 which it has approved a service agreement for other purposes. 1286 1287 Applicants ineligible for coverage in accordance with subsection (5) remain ineligible if their exclusive agent is unwilling or 1288 1289 unable to enter into a standard or limited agency agreement with 1290 an insurer making an offer of coverage to that applicant. 1291 (8) Submission of an application for coverage by the 1292 corporation to the program does not constitute the binding of 1293 coverage by the corporation, and failure of the program to 1294 obtain an offer of coverage by an insurer may not be considered 1295 acceptance of coverage of the risk by the corporation. 1296 (9) The 45-day notice of nonrenewal requirement set forth 1297 in s. 627.4133(2)(b)5. applies when a policy is nonrenewed by 1298 the corporation because the risk has received an offer of coverage pursuant to this section which renders the risk 1299

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ineligible for coverage by the corporation.

1301 (10) The program may not include commercial nonresidential 1302 policies.

(11) Proprietary business information provided to the corporation's clearinghouse by insurers with respect to identifying and selecting risks for an offer of coverage is confidential and exempt from s. 119.07(1) and s. 24(a), Art. I of the State Constitution.

(a) As used in this subsection, the term "proprietary
business information" means information, regardless of form or
characteristics, which is owned or controlled by an insurer and:

1311 1. Is identified by the insurer as proprietary business 1312 information and is intended to be and is treated by the insurer 1313 as private in that the disclosure of the information would cause 1314 harm to the insurer, an individual, or the company's business operations and has not been disclosed unless disclosed pursuant 1315 1316 to a statutory requirement, an order of a court or 1317 administrative body, or a private agreement that provides that 1318 the information will not be released to the public;

1319 2. Is not otherwise readily ascertainable or publicly 1320 available by proper means by other persons from another source 1321 in the same configuration as provided to the clearinghouse; and

- 3. Includes:
- 1323

1322

a. Trade secrets, as defined in s. 688.002.

b. Information relating to competitive interests, thedisclosure of which would impair the competitive business of the

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1326 provider of the information. 1327 1328 Proprietary business information may be found in underwriting 1329 criteria or instructions which are used to identify and select 1330 risks through the program for an offer of coverage and are shared with the clearinghouse to facilitate the shopping of 1331 1332 risks with the insurer. 1333 The clearinghouse may disclose confidential and exempt (b) 1334 proprietary business information: 1335 If the insurer to which it pertains gives prior written 1. 1336 consent; 1337 2. Pursuant to a court order; or 1338 To another state agency in this or another state or to 3. 1339 a federal agency if the recipient agrees in writing to maintain 1340 the confidential and exempt status of the document, material, or 1341 other information and has verified in writing its legal 1342 authority to maintain such confidentiality. 1343 Section 5. This act shall take effect July 1, 2022.

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