Amendment No. 3

	COMMITTEE/SUBCOMMITTEE	ACTION
ADOP	TED	(Y/N)
ADOP	TED AS AMENDED	(Y/N)
ADOP	TED W/O OBJECTION	(Y/N)
FAIL	ED TO ADOPT	(Y/N)
WITH	DRAWN	(Y/N)
OTHE		

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

Amendment

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Remove lines 146-271 and insert:

protection of the policyholders and in the public interest, but

must, at a minimum, examine insurers as follows:

- 1. High-risk insurers not less frequently than once every
 3 years.
- 2. Average-risk insurers not less frequently than once every 5 years.
- 3. Low-risk insurers not less frequently than once every 7 years and shall examine each domestic insurer not less frequently than once every 5 years.

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The examination shall cover the preceding 5 fiscal years since the last examination of the insurer, except for low-risk insurers, in which case the examination shall cover the preceding 5 fiscal years, and shall be commenced within 12 months after the end of the most recent fiscal year being covered by the examination. The examination may cover any period of the insurer's operations since the last previous examination. The examination may include examination of events subsequent to the end of the most recent fiscal year and the events of any prior period that affect the present financial condition of the insurer.

- adopt by rule, a risk-based selection methodology for scheduling and conducting examinations of insurers and other entities subject to this section. This requirement does not restrict the authority of the office to conduct market conduct examinations as often as it deems advisable. Such methodology must include:
- (a) Use of currently required risk-based capital reports to prioritize financial examinations of insurers when such reporting indicates a decline in the insurer's financial condition.
- (b) Consideration of any downgrade or threatened downgrade in the insurer's financial strength rating.

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(C)	Prioriti	Lzatior	of p	roperty	insurers	for	which	the
office	ide	entifies	signif	icant	concerr	ns about	an i	nsurer'	s
solven	су ј	pursuant	to s.	627.7	154.				

(d) Any other conditions the office deems necessary for the protection of the public.

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The office shall present the proposed rule required by this subsection to the commission no later than October 1, 2023. In addition to the methodology required by this subsection, the rule must include a plan to implement the examination schedule in subsection (2).

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Section 5. Subsection (7) of section 624.3161, Florida Statutes, is amended, and subsection (8) is added to that section, to read:

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624.3161 Market conduct examinations.-

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(7) Notwithstanding subsection (1), any authorized insurer transacting property insurance business in this state <u>must may</u> be subject to an additional market conduct examination after a hurricane if, at any time more than 90 days after the end of the hurricane, the insurer:

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(a) Is among the top 20 percent of insurers based upon a calculation of the ratio of hurricane-related property insurance claims filed to the number of property insurance policies in force;

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- (b) Is among the top 20 percent of insurers based upon a calculation of the ratio of consumer complaints made to the department to hurricane-related claims;
- (c) Has made significant payments to its managing general agent since the hurricane; or
- (d) Is identified by the office as necessitating a market conduct exam for any other reason.

All relevant criteria under this section and s. 624.316 shall be applied to the market conduct examination under this subsection. Such an examination must be initiated within 18 months after the landfall of a hurricane that results in an executive order or a state of emergency issued by the Governor. This requirement does not limit in any way the authority of the office to conduct at any time a market conduct examination of a property insurer in the aftermath of a hurricane. An examination of an insurer under this subsection must also include an examination of its managing general agent as if it were the insurer.

(8) The office shall create, and the commission shall adopt by rule, a risk-based selection methodology for scheduling and conducting market conduct examinations of insurers and other entities regulated by the office. This requirement does not restrict the authority of the office to conduct market conduct examinations as often as it deems necessary. Under such selection methodology, the office must initiate a market conduct

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88	examination if any of the following conditions exist relating to
89	an insurer or other entity regulated by the office:
90	(a) An insurance regulator in another state has initiated
91	or taken regulatory action against the insurer or entity,
92	including, but not limited to:
93	1. A licensure denial, suspension, or revocation;
94	2. Imposition of administrative fines; or
95	3. Issuance of a cease and desist order, consent order, or
96	other order regarding actions or omissions of the insurer or
97	entity.
98	(b) Given the insurer's market share in this state, the
99	department or the office has received a disproportionate number
100	of the following types of claims-handling complaints against the
101	<pre>insurer:</pre>
102	1. Failure to timely communicate with respect to claims;
103	2. Failure to timely pay claims;
104	3. Untimely payments giving rise to the payment of
105	statutory interest;
106	4. Failure to adjust and pay claims in accordance with the
107	terms and conditions of the policy or contract and in compliance
108	with state law;

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adjusters;

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in part IX of chapter 626;

6. Failure to use licensed and duly appointed claims

5. Violations of the Unfair Insurance Trade Practices Act

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113	7. Failure to maintain reasonable claims records; or
114	8. Failure to adhere to the company's claims-handling
115	manual.
116	(c) The results of a National Association of Insurance
117	Commissioners Market Conduct Annual Statement indicate the
118	insurer is a negative outlier with regard to particular metrics
119	(d) There is evidence the insurer is engaged in a pattern
120	or practice of violations of the Unfair Insurance Trade
121	Practices Act.
122	(e) Any other conditions the office deems necessary for
123	the protection of the public.
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125	The office shall present the proposed rule required by this
126	subsection to the commission no later than October 1, 2023. In
127	addition to the methodology required by this subsection, the
128	rule must provide criteria for how the office will determine
129	that it has received a disproportionate of the claims-handling
130	complaints described in paragraph (b).