June 2014, Edition 17

Florida Hurricane Catastrophe Fund

2014/2015 Member Handbook

Table of Contents **Page**

INTRODUCTION

The purpose of this handbook is to provide an overview of the operation of the Florida Hurricane Catastrophe Fund (FHCF), company requirements, and available sources of information regarding the FHCF.

This handbook is provided for informational purposes only. Although it is believed to be reliable, it is not guaranteed as to its accuracy or completeness. The Florida Statutes, along with the Rules adopted by the State Board of Administration of Florida (SBA), should be consulted as the authoritative source on all FHCF policies and requirements.

PURPOSE

The FHCF was created in November 1993 during a special legislative session after Hurricane Andrew. The enabling legislation is codified in Section 215.555, Florida Statutes. The purpose of the FHCF is to improve the availability and affordability of residential property insurance in Florida by providing reimbursement to insurers for a portion of their catastrophic hurricane losses.

ORGANIZATION

The FHCF is structured as a state trust fund under the direction and control of the SBA. Its trustees are the Governor, the Chief Financial Officer, and the Attorney General. A nine-member advisory council has been created to provide the SBA with information and advice. Paragon Strategic Solutions Inc. (Paragon) is the FHCF Administrator as well as the Actuarial Consultant to the SBA. In addition to hiring staff and contracting with other professionals, Section 215.555, Florida Statutes, gives the SBA the authority to adopt rules in order to implement the Statute.

FINANCIAL STRUCTURE

The SBA collects reimbursement premiums from participating companies, and may use money in the FHCF only to pay companies according to their reimbursement contracts, and to pay other obligations and expenses as specified in the Statute. The SBA is responsible for investing the FHCF's assets. Authority is provided in the Statute for the State Board of Administration Finance Corporation (formerly the FHCF Finance Corporation) or a local government agency to issue revenue bonds in order to pay reimbursable losses to the extent that funds collected as reimbursement premiums and investment income on those funds are insufficient to meet the SBA's obligations.

COVERED EVENTS

FHCF coverage is on a per occurrence basis (subject to an annual aggregate limit) and applies to any storm declared to be a hurricane by the National Hurricane Center which causes insured losses in Florida. A Covered Event begins when a hurricane causes damage in Florida and continues throughout any subsequent downgrades in storm status by the National Hurricane Center regardless of whether the hurricane makes landfall. Any storm, including a tropical storm, which does not become a hurricane is not a Covered Event.

COVERED POLICIES

Covered policies are those policies issued by authorized insurers (not reinsurers), including Citizens Property Insurance Corporation (Citizens), which provide wind or hurricane coverage for residential structures located in the State of Florida, including appurtenant structures, the contents of residential structures, and additional living expense (fair rental value, loss of rent or rental income, and business interruption coverage are not covered by the FHCF). This includes commercial-residential, residential, mobile home, tenants, condominium unit owners, and other contents policies and endorsements. Covered policies include policies covering the peril of wind removed from Citizens by an authorized insurer under the terms and conditions of an executed assumption agreement that has been approved by the Office of Insurance Regulation. Note that although a company may have exposure to other types of catastrophic losses (e.g., hail, tornado, flood, etc.) in Florida, only hurricane losses are eligible for FHCF reimbursement.

Covered policies also include collateral protection insurance policies covering personal residences which protect both the borrower's and lender's financial interest, in an amount at least equal to the coverage for the dwelling in place under the lapsed homeowner's policy, if such policy can be accurately reported as required in Section 215.555, Florida Statutes.

Covered policies are most likely to be reported in the insurer's statutory annual statement as:

- Fire
- Allied Lines
- Commercial Multiple Peril (non-liability portion covering residential structures and the contents therein; e.g., apartments & condominiums)
- Farmowners Multiple Peril
- Homeowners Multiple Peril
- Inland Marine

Please note that policies covering residential structures or contents, regardless of the line of business in which they are reported (e.g., mobile homes), are covered by the FHCF and this exposure must be reported to the FHCF.

COMPANY PARTICIPATION

All authorized insurers in Florida, including Citizens, which write FHCF covered policies are required by Section 215.555, Florida Statutes, to enter into a Reimbursement Contract (Contract) with the SBA and to pay an annual reimbursement premium to the FHCF.

PETITIONING FOR EXEMPTION

No Covered Policies:

If a company does not have Covered Policies as of June 30 of the current Contract Year, but was an active participant in the FHCF for the preceding Contract Year, a letter requesting to petition for exemption from the FHCF must be received by the FHCF Administrator no later than September 1 of the current Contract Year. See Rule 19-8.012, Florida Administrative Code (F.A.C.) for more information. This Rule is available online at www.sbafla.com/fhcf under "FHCF Rules."

De Minimis Exemption due to Limited Exposure:

Section 215.555, Florida Statutes, allows the SBA to consider an exemption for a company with less than $10 million of FHCF covered exposure (not premium), provided the company submits a written request to the FHCF Administrator. Such requests must be received no later than September 1 of the current Contract Year and may not be withdrawn. See Rule 19-8.012, F.A.C. for more information. The SBA may not grant an exemption if the aggregate number of anticipated exemptions adversely affects the actuarial soundness of the FHCF.

REIMBURSEMENT CONTRACT

The annual FHCF contract period is from June 1st through May 31st. Contracts must be executed and returned to the FHCF's Administrator no later than March 1st of each Contract Year. An Optional Amendment to Change Prior Elections Made in the Reimbursement Contract or the Addenda to the Reimbursement Contract is available upon request and is due no later than June 1st of each Contract Year. Included in the executed contract is the company's selected coverage level of 45%, 75%, or 90%. All companies that are members of the same insurer group, as designated by the National Association of Insurance Commissioners (NAIC), must elect the same coverage level. Because the FHCF has issued post-event revenue bonds and those bonds have not been fully repaid, a company may not select a coverage level that is less than its selection under the prior Contract Year effective June 1, 2013.

There is also one Addendum to the 2014 Contract, which is only applicable to Citizens. The Contract and Addendum are available online at www.sbafla.com/fhcf under "Insurer Information."

REIMBURSEMENT PREMIUM – MANDATORY FHCF COVERAGE

A company's annual reimbursement premium for the mandatory FHCF coverage is based on an actuarial formula specifying the amount of premium to be paid for each $1,000 of insured value for covered policies in each 5-digit Florida ZIP Code by type of business, construction class, and deductible group. The coverage level chosen by the company, contract addenda elections, and mitigation features reported are also considered in the premium calculation. Pursuant to Section 215.555(5)(b), Florida Statutes, the mandatory FHCF premium will include a 25% cash build up factor for the 2014/2015 Contract Year.

Paragon has been retained by the SBA as the independent actuarial consultant to develop the reimbursement premium formula and the rates to be used in determining the annual reimbursement premium due from each company. The annual rates, rating region definitions, and Ratemaking Formula Report are available online at www.sbafla.com/fhcf under "Insurer Information."

REIMBURSEMENT PREMIUM INSTALLMENTS – MANDATORY FHCF COVERAGE

The annual reimbursement premium for the mandatory FHCF coverage is payable in three installments: August 1st, October 1st, and December 1st of the Contract Year. Due to the timing of the exposure reporting and final premium calculation, the first two installments are provisional billings, each based on one third of a company's prior Contract Year premium. The third installment is based on the final premium calculated from the company's exposure reported to the FHCF in the Data Call submission, less the amounts received from the provisional billings. Companies with a final premium of $5,000 or less for the prior Contract Year will be billed a full provisional premium in that amount for the first installment. If control of the company has been transferred through any legal or regulatory proceeding to a state regulator, court appointed receiver, or rehabilitator (referred to collectively as "state action"), the full provisional premium as billed, and any outstanding balances, will be due on August 1st or the date that such state action occurs after August 1st. Such acceleration will not apply when the receiver or rehabilitator provides a letter of assurance to the FHCF that the company will have the resources to pay the premium in installments in accordance with the contractual provisions.

REPORTING REQUIREMENTS – EXPOSURE DATA

In order to calculate FHCF premium for the mandatory FHCF coverage, each company must report its total covered property exposure in force under covered policies **as of June 30th** to the FHCF categorized by certain rating factors. This information is statutorily required to be reported by September 1st and must be submitted to the SBA via the Web Insurer Reporting Engine (*WIRE)*. The exposure reporting requirements are specified in the 2014 Data Call, Form FHCF-D1A, sent to each insurer at the beginning of the Contract Year. The Data Call is also available online at www.sbafla.com/fhcf under "Insurer Information."

WEB INSURER REPORTING ENGINE (*WIRE*)

The Web Insurer Reporting Engine, or *WIRE*, is a new mechanism for reporting exposure as required under the FHCF Data Call beginning with the 2014/2015 Data Call. For prior Data Calls, companies prepared two separate exposure data files. The first file of aggregate exposure, known as the "Data Call File," was submitted to Paragon for premium calculation. A second policy-level exposure file, known as the "Exam File," was provided to the FHCF office in Tallahassee upon notice from the SBA of an exposure examination. Companies were provided with a Preliminary Validation Software each year (which they had to install locally) that would check for basic formatting errors and invalid codes before submission.

With *WIRE*, the reporting process is much simpler and more convenient, and potential sources of error are reduced. *WIRE* eliminates the need for two separate files, the mailing of each file to two separate locations at two different times, and yearly validation software installation. Companies will now prepare and save only one file of exposure data, the policy-level file, which will be validated and submitted via *WIRE*. In addition, companies can upload any supporting documents (such as cover letters or other explanatory information), complete the submission confirmation form, and sign the required officer statements all online. Once a submission is complete, *WIRE* will aggregate the data and provide it to Paragon for premium calculation.

The *WIRE* system is available online at www.sbafla.com/fhcf under "Online Reporting" and is accessible only to persons who have been registered as *WIRE* users by companies participating in the FHCF. Each FHCF company has a *WIRE* account. In order to access the *WIRE* validation and submission tools, a company must ensure a Data Call/*WIRE* Account Manager has been designated on the Company Contact Information Form (Form FHCF C-1) submitted to Paragon annually. Once registered, the Account Manager can log in and register a maximum of four additional *WIRE* users to perform submission functions on behalf of the company, which must include at least two company officers with authority to certify and sign the submission statements.

NEW PARTICIPANTS

Companies that begin to write covered policies on or after the beginning of the FHCF's Contract Year on June 1st are considered new participants for that Contract Year. A company that removes exposure from Citizens pursuant to an assumption agreement effective on or after June 1st and had written no other covered policies before June 1st is also considered a new participant. Coverage under the FHCF commences on the effective date of coverage of the insurer's first FHCF covered policy or the date covered policies are removed from Citizens pursuant to an assumption agreement. New participants must notify the FHCF immediately upon writing FHCF covered policies. The FHCF will then send Contracts to be executed, along with a premium invoice of $1,000. The $1,000 premium shall be a provisional premium until the company's final FHCF premium is calculated.

New participants that begin writing covered policies or remove policies from Citizens pursuant to an assumption agreement prior to December 1st of the Contract Year will be sent a Data Call with supplemental instructions for new participants in December. New participants are also required to submit their Data Call file through *WIRE*. The Data Call instructions are the same document used by current participants except that these new participants must report their total covered property exposure in force under covered policies as of November 30th to the FHCF by February 1st of the Contract Year. The Data Call is available online at www.sbafla.com/fhcf under “Insurer Information.”

To recognize that these new participants have limited exposure during the first Contract Year, the actual premium (determined by processing the company’s exposure data) will be divided in half. The provisional premium will be credited, and the resulting amount will be the total premium due for the company for the remainder of the Contract Year. However, if that amount is less than $1,000, $1,000 will be the final premium. The final premium payment is due no later than April 1st of the Contract Year. The company’s retention and maximum recovery from the FHCF will be based on the final adjusted premium.

For companies that begin writing covered policies or remove policies from Citizens pursuant to an assumption agreement on or after December 1st of the Contract Year, the $1,000 premium shall be the final premium for the Contract Year. As such, the insurer shall not report any exposure data for this contract period.

COMPANY RETENTION – MANDATORY FHCF COVERAGE

As the reimbursement premium formula is developed for the Contract Year, a retention multiple is established for each coverage level. A company’s full retention for its mandatory FHCF coverage is calculated by multiplying its annual reimbursement premium for the mandatory FHCF coverage by the multiple corresponding to the selected coverage level.

$17.000 Billion xs $7.075 Billion

Coverage Level	2014/2015 Retention Multiple	Premium	Full Retention (Premium x Retention Multiple)
90%	5.5381	$1,000,000	$5,538,100
75%	6.6458	$833,333	$5,538,100
45%	11.0763	$500,000	$5,538,100

While in this example the retention remains the same regardless of the coverage level selected, the portion of subject losses reimbursed by the FHCF depends upon the coverage option selected.

Since FHCF coverage is on a per occurrence basis, a company will need to exceed its full retention for each event before recoveries from the FHCF are triggered, except as noted in the following section.

DROP-DOWN RETENTION – MANDATORY FHCF COVERAGE

Section 215.555, Florida Statutes, provides for a drop-down retention in certain circumstances. A company’s full FHCF retention for its mandatory FHCF coverage shall apply to each of the company's largest two hurricanes (in terms of losses covered by the FHCF). The company’s full retention would then be adjusted to 1/3 for any other hurricanes occurring during the 2014/2015 Contract Year. If applicable, the 1/3 adjustment(s) will be made after January 1st of the Contract Year.

FHCF CAPACITY – MANDATORY FHCF COVERAGE

Reimbursement of covered losses is limited by the claims paying capacity of the FHCF. The capacity of the FHCF for the mandatory FHCF coverage, by Florida Statute, cannot exceed $17.000 billion for the 2014/2015 Contract Year. The claims paying capacity is the total of the cash balance of the FHCF as of 12/31 of the Contract Year (amount of assets available to pay claims, not including bonding proceeds) in which the covered event occurs, plus the amount the SBA is able to raise through the issuance of revenue bonds, the purchase of reinsurance, or other financial mechanisms. It is projected that the FHCF would require $6.050 billion to provide the maximum amount of capacity for the mandatory FHCF coverage under the 2014/2015 Contract Year.

12/31/2014 Projected Fund Balance		Estimated Bonding Required		Estimated Claims Paying Capacity
$10,950,000,000	+	$6,050,000,000	=	$17,000,000,000

For more information on estimated bonding capacity, as well as estimated subsequent season capacity, select “Bonding Program” on the SBA’s FHCF website at www.sbafla.com/fhcf.

MANDATORY FHCF COVERAGE STRUCTURE

The projected payout multiple determines the mandatory FHCF coverage limit provided to each company, and is calculated as follows:

Projected Maximum Claims Paying Capacity		Estimated Aggregate 2014 FHCF Premium		Projected Payout Multiple
$17,000,000,000	/	$1,275,888,830	=	13.3240

The maximum amount a company could recover from the FHCF under the 2014/2015 Contract Year is calculated as follows:

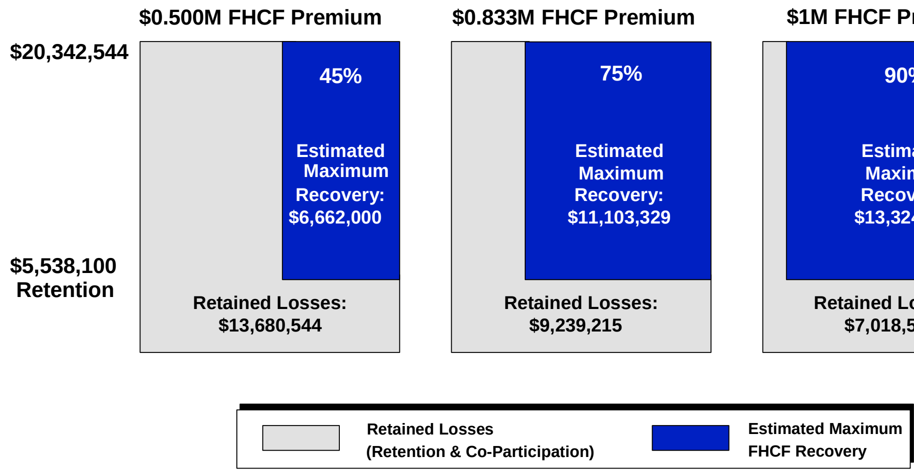
2014 FHCF Annual Reimbursement Premium	x	Final Payout Multiple	=	Maximum Recovery

The final payout multiple will equal $17.000 billion divided by the total reimbursement premiums billed as of December 31st.

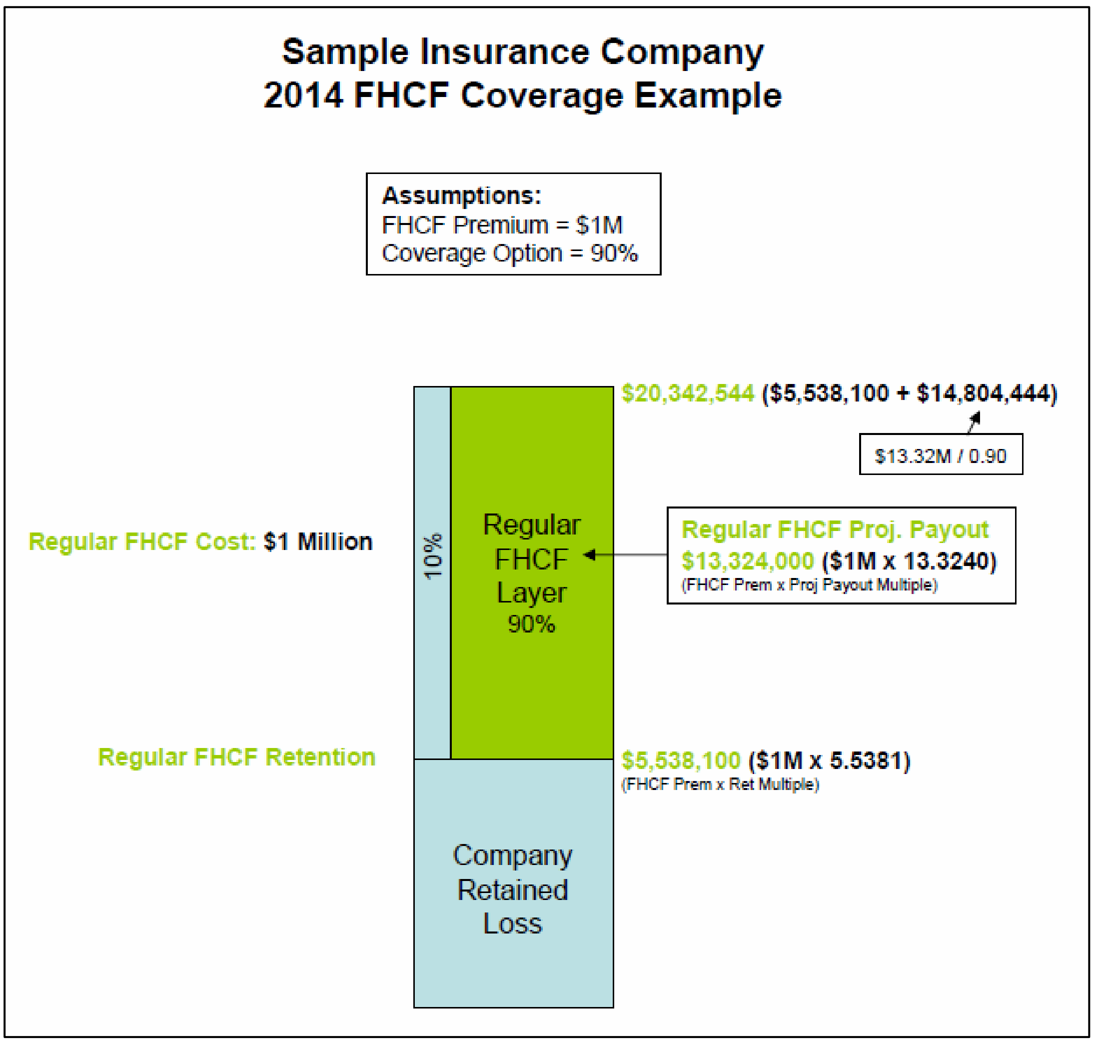
This is, in effect, a company’s market share of the FHCF’s estimated claims-paying capacity. Note that this factor includes the additional 5% of FHCF reimbursed losses paid for loss adjustment expense. Also, it must be emphasized that all reported claims are subject to verification prior to reimbursement and will be further reviewed during subsequent examinations by the SBA.

FHCF reimbursement is the selected percentage (45%, 75%, or 90% coverage level) of covered losses above a company’s retention. For a company with a ground-up subject loss of approximately

$20.34 million, the mandatory FHCF coverage reimbursements for each coverage level is illustrated below:



Following is another illustration of the mandatory FHCF structure at the 90% coverage option.



See the section on Drop-Down Retention (discussed earlier) for additional information on the loss reimbursement structure.

EMERGENCY ASSESSMENT

To service the outstanding revenue bonds, as the term is defined in Section 215.555(2)(g), Florida Statutes, and to reimburse insurers for their reimbursable losses under a covered event, the SBA may direct the Office of Insurance Regulation within the Department of Financial Services to levy an emergency assessment. The maximum assessment is 6% in any Contract Year, up to a cumulative assessment of 10%. The assessment applies to all property and casualty lines of business in Florida, including property and casualty lines of business of surplus lines, but excludes those lines specifically exempted in Section 215.555, F.S.

The total hurricane loss reimbursements by the FHCF are currently estimated to be $3.860 billion for the Contract Year 2004 covered events and $5.536 billion for the Contract Year 2005 covered events. As a result, the FHCF experienced a shortfall for the 2005 Contract Year. The FHCF has issued revenue bonds in the amount of $1.35 billion in 2006, $625 million in 2008, and $675.92 million in 2010. These bonds are currently being financed by a 1.3% assessment on premiums for all property and casualty lines of insurance in Florida, except medical malpractice (until June 1, 2016), accident and health, worker's compensation, and the Federal Flood Insurance Program.

In order to have liquid assets in place to meet future obligations of the FHCF, pre-event notes in the amount of $2.0 billion were issued in April of 2013. These notes will mature in three tranches: $500 million on July 1, 2016, $500 million on July 1, 2018, and $1 billion on July 1, 2020. The expense of these pre-event notes is self-funded by the FHCF's investment earnings on those funds and by reimbursement premiums, as necessary.

For more information regarding emergency assessments, including assessable lines, please review Rule 19-8.013, F.A.C., entitled "Revenue Bonds Issued Pursuant to Section 215.555(6), Florida Statutes" (available online at www.sbafla.com/fhcf under "FHCF Rules.")

REPORTING REQUIREMENTS – LOSS DATA

Section 215.555, Florida Statutes, requires that companies report their losses from covered events for the Contract Year by filing a Proof of Loss Report, Form FHCF-L1A, no later than December 31st, and quarterly thereafter. Under certain circumstances, earlier reporting may be required. Loss reporting procedures are further clarified in the Contract and the Insurer Reporting Requirements Rule, Rule 19-8.029, available online at www.sbafla.com/fhcf under "FHCF Rules."

Companies are required to report estimated incurred ground-up losses for covered policies on both an incurred basis and a paid basis. The FHCF will reimburse loss adjustment expense, limited to 5% of reimbursable losses, which will be calculated by the FHCF based on reported paid losses. Prior to reimbursement, a company's loss reports are reviewed and tested for reasonableness. As soon as practicable after receiving loss reports, the FHCF will determine and pay reimbursement amounts due to the insurer. Adjustments will be made, as necessary, following subsequent loss reports. Note that companies must submit a Detailed Claims Listing to support the losses reported in its first Proof of Loss Report submission for a specific hurricane that qualifies the company for reimbursement under that hurricane. Instructions for the Detailed Claims Listing, as well as other periodic due dates, are specified in the Contract Year 2014 Detailed Claims Listing Instructions, Form FHCF-DCL.

FHCF reimbursement amounts will not be reduced by reinsurance paid or payable to the insurer from other sources.

In the event of an insurer's insolvency, the FHCF will reimburse banks, reinsurers, or other financial institutions to cover obligations of the insolvent insurer under a credit agreement that assists the insolvent insurer in paying claims attributable to covered events. After these obligations are met, the Florida Insurance Guaranty Association will be paid for the insolvent insurer.

Section 215.555, Florida Statutes, also provides for advances in the interim for insurers that may otherwise become insolvent, Citizens, and limited apportionment companies which meet certain criteria.

ONLINE LOSS REPORTING

The FHCF Online Claims System (system) must be used to submit loss reports and may be used to view prior online loss report submissions and payment documentation. The system may be accessed by clicking "FHCF Online Claims" on the SBA's FHCF website at www.sbafla.com/fhcf under "Online Reporting," or directly on Paragon's FHCF website at http://fhcf.paragon.aonbenfield.com/.

Once the online registration process is fully complete, a company will be able to electronically certify, "sign", and submit your FHCF loss reports. A maximum of five users may be registered (at least two users must be officers). All users may enter loss data, but only officers will be given system submission rights (Proof of Loss Reports require the signature of two officers). Officer authority will be verified by the FHCF and an Officer Registration letter must be signed by each officer and the original returned to the FHCF as instructed on the letter. This Officer Registration letter will be kept on file by the FHCF and allows a system "signature" based on the officer login.

Other features of the system include pre-population of certain loss report fields such as company name, FHCF retention, and previous reimbursements; automated calculations; ability to upload supporting documentation; identification of errors requiring correction (e.g., advance request box checked but no documentation included); and identification of potential discrepancies (e.g., losses for a particular type of business exceeding exposure reported for that type of business or a decrease in paid losses).

COMMUTATION OF LOSSES

The Contract calls for the commutation of FHCF losses not less than three years or more than five years after the end of the Contract Year in which losses occurred. While a company may request that the SBA consider beginning the commutation process earlier, doing so is at the discretion of the SBA. Any remaining claims and losses which are not finally settled and which may be reimbursable losses under the Contract will be reported to the FHCF and a final reimbursement will be determined and issued. For more information regarding the commutation process, see Article X – Reports and Remittances (3)(d) of the Contract.

FHCF EXAMINATIONS

The SBA has two separate examination programs to test the accuracy and completeness of exposure data and the accuracy of losses reported to the FHCF. The examinations are limited in scope and should not be relied upon by the insurer as a determination of complete compliance with the applicable FHCF statutes, rules, and reporting requirements.

For an exposure examination, it is important that companies retain all records, information, and policy level details that are used to prepare the Data Call submission required to be sent to the FHCF by September 1st of the Contract Year. The Advance Preparation Instructions for an exposure examination are listed in FHCF Form-EAP1 for the applicable Contract Year.

For a loss reimbursement examination, a company is required to retain a Detailed Claims Listing to support any Proof of Loss Report submitted to the FHCF for an advance or reimbursement. In addition, a company must provide claims files and any other records needed to support reported losses. Detailed information required for a loss reimbursement examination is listed in FHCF Form-LAP1 for the applicable Contract Year.

The SBA notifies a company at least sixty days prior to the commencement of the examination and provides detailed instructions for preparing data, records, and reports for use by the examiner. Companies are required to provide advance records within 30 days of the date of the notice letter. If delays in providing information requested by the SBA for an examination result in the SBA having to reschedule an examination, and expenses are incurred in addition to the usual and customary costs of the examination, the company may be required to reimburse the FHCF.

Companies are **required** to retain supporting records, as specified in the FHCF Data Call instructions and the Proof of Loss Report form, until the FHCF has completed its examination of the company's exposure submission and loss reports (applicable to the Data Call contract year) and commutation for the contract year (if applicable) has been concluded. Retention of records is imperative, as an examination may result in a re-filing or other corrective action, or an adjustment to a company's FHCF premium or loss recovery.

LEGISLATION AND SBA RULES

As indicated in the introductory section of this Handbook, the FHCF was created in 1993 by the Florida Legislature. The enabling legislation is codified in Section 215.555, Florida Statutes. A copy is available online at www.sbafla.com/fhcf under "Legislation."

Specific policies and provisions of the FHCF are outlined in the rules of the SBA. The rulemaking process includes workshops, public hearings, and final approval by the SBA Trustees. The rules are continually being updated in order to accommodate new procedures and forms necessary for the administration of the FHCF. All proposed amendments to the rules are published in the *Florida Administrative Register* and can also be found online at www.sbafla.com/fhcf under "Proposed Rules." Once the proposed amendments have been adopted, the rules, as amended, are published in the Florida Administrative Code. All rules (proposed or adopted) are available online at www.sbafla.com/fhcf under "FHCF Rules."

Rules of the SBA – 2014/2015 Contract Year

19-8.001 Purpose

19-8.010 Reimbursement Contract

19-8.012 De Minimis FHCF Premium Exemption

19-8.012 Ineligibility for FHCF Participation

19-8.013 Issuance of Revenue Bonds

19-8.028 Reimbursement Premium Formula

19-8.029 Insurer Reporting Requirements

19-8.030 Insurer Responsibilities

FHCF KEY DATES

June

- Standard Data Call mailed (insurance in force as of June 30th of the Contract Year).
- 1 - Start of the FHCF Contract Year.
- 1 - Optional Amendment to Change Prior Reimbursement Contract Elections deadline for a Company opting to change any of its previously selected coverage options under the Reimbursement Contract due by the preceding March 1st.
- 30 - Exposure "as of" date.

July

- 1 - First provisional premium installment invoiced.
- 1 – Participating companies can begin Data Call file validation using *WIRE*.

August

- 1 - First provisional premium installment due.
- 1 - If a company is placed under regulatory supervision or control has been transferred to a state regulator or court appointed receiver or rehabilitator, the full annual provisional premium is due.

September

- Annual rule promulgation process for the next Contract Year begins. Drafts of the proposed amendments to the rules, Data Call/Contract, meeting notices/materials, etc. are available on-line at www.sbafla.com/fhcf.
- 1 - Deadline to petition for De Minimis exemption.
- 1 - Data Call submission in *WIRE* due (insurance in force as of June 30th of the Contract Year).
- 15 - Second provisional premium installment invoiced.

October

- FHCF exposure examinations for Contract Year 2014/2015 begin.
- 1 - Second provisional premium installment due.

November

- 15 - Final premium installment invoiced (based on June 30th exposure).
- Data Call sent to New Participants (insurance in force as of November 30th of the Contract Year).

December

- 1 - Final premium payment due.
- 31 - Initial POL due for the current Contract Year (if there is a covered event(s)).

January

- Reimbursement Contract and Company Contact Information Form for the next Contract Year mailed.

February

- Projected Payout Summary mailed.
- 1 - New Participants writing their first policy on or after June 1 but before December 1, Data Call submission in *WIRE* due (insurance in force as of November 30th of the Contract Year).

February - March

- New Participants' final premium installment invoiced (based on November 30thexposure).

March

- 1 – Reimbursement Contract, applicable Addendum, and Company Contact Information Form for the 2015/2016 Contract Year due.
- 31 - Quarterly POL due for any hurricanes occurring during the current Contract Year under which the Company has exceeded or expects to exceed 50% of its FHCF retention.

April

- 1 - New Participants' final premium due.

FREQUENTLY ASKED QUESTIONS (FAQ's)
for the 2014/2015 CONTRACT YEAR

To provide clarification and to assist companies in accurately reporting exposure and losses, the FHCF maintains a list of frequently asked questions and answers online at www.sbafla.com/fhcf under "Insurer Information." This list is updated each Contract Year as new questions arise regarding the new Data Call and loss reports. Please note that as this Handbook will not be updated until the next Contract Year, you should refer to the online version of the FAQ's for the most up-to-date and comprehensive listing.

Questions are in five categories: Covered Policies, Exposure/ Data Call Reporting, SBA Examination – Exposure Reporting, Loss Reporting, and SBA Examination – Loss Reporting. The following are the FAQ's for the 2014/2015 Contract Year.

Covered Policies

Antennas and Satellite Dishes

Q: Is an antenna or satellite dish written as an endorsement to a covered policy covered?

A: Yes, if the antenna or satellite dish includes coverage for wind/hurricane peril. However, per the Data Call instructions, exposure for these items should not be reported in your exposure file.

Assisted Living Facilities

Q: Are assisted living facilities covered?

A: Yes

Bailee's Coverage

Q: Is bailee's coverage provided to a condominium association covered by the FHCF?

A: No

Barns with Apartments

Q: Are barns with apartments covered by the FHCF?

A: No, neither barns nor barns with apartments are covered by the FHCF.

Q: Is coverage for contents of a barn or a barn/apartment covered by the FHCF?

A: No. Since a barn or a barn/apartment is excluded in Article VI of the FHCF 2014 Reimbursement Contract and definition (27) in Article V states that structures listed in Article VI are not included in the definition of a residential structure, the contents or any other coverages of a barn or a barn/apartment would not be covered by the FHCF.

Bed & Breakfast

Q: Is a bed & breakfast covered?

A: Yes, as long as it is not used solely for commercial purposes. Also, the risk would be reported using the FHCF type of business Residential (code "2"). However, if it is covered under a commercial policy covering a variety of risks, a company has the option to report based on the predominate FHCF type of business under that policy. See Commercial-Habitational Clarification #3 in the 2014 Data Call.

Boarding, Lodging, and Rooming Houses

Q: Are boarding, lodging, and rooming houses covered by the FHCF?

A: No, if it is used solely for commercial purposes.

Business Personal Property

Q: Commercial-Habitational Clarification #8 in the 2014 Data Call clarifies that for policies with a mix of commercial habitational and non-habitational structures, if the non-habitational structure is "used in relation to" the habitational structure (non-habitational structure is used solely by the occupants of the habitational structure or their guests), then the non-habitational structure exposure is reportable to the FHCF. Does the "used in relation to" rule also apply to business personal property?

A: Yes.

Q: Is business personal property insured on a commercial policy and housed in a dwelling (i.e., inventory or business property stored in a personal residence) covered by the FHCF?

A: No.

Collateral Protection

Q: Are commercial-residential buildings insured under a collateral protection policy covered?

A: No. The only collateral protection policies covered by the FHCF are those issued to cover personal residences insured under a homeowners policy which protect both the lender and the borrower's financial interest.

Q: Does the FHCF consider policies issued to cover mobile homes or individual condominium unit owners to fit the definition of policies issued to cover personal residences insured under a homeowners policy?

A: Yes.

Q: If our company cannot provide the supporting documentation that shows the policy was written in an amount at least equal to the coverage for the dwelling in place under the lapsed homeowners policy, is the policy covered by the FHCF?

A: No.

Commercial-Residential Policies

Q: If a commercial policy covers the appurtenant structures or miscellaneous structures related to a habitational structure, but the habitational structure is not covered under the policy, should the exposure be reported?

A: No.

Q: A commercial policy is written with $20M coverage for a residential condominium complex and on a separate commercial policy is $11M coverage for a garage and $1.5M coverage for townhomes. The garage is used solely by the occupants or the guests of the residential condominium complex and the townhomes. Is the garage covered by the FHCF?

A: No. Since the garage is not used solely by the occupants or the guests of the townhomes (the residential exposure insured under the policy with coverage for the garage), then it is not covered. However, the townhomes are covered by the FHCF since they are used as residential structures.

Computers/Radios/Signs/Valuable Papers

Q: Are computers, radios, signs, and valuable papers covered?

A: Yes, if written under a covered policy. However, per the Data Call instructions, exposure for these items should not be reported in your exposure file.

Q: Are computers written on a stand-alone inland marine policy covered?

A: Yes, if coverage is provided for the peril of wind and the policy is issued to an individual and not a business. However, per the Data Call instructions, exposure for computers should not be reported in your exposure file.

Condominiums

Q: If the owner of an individual condominium unit uses the condominium as a home or residence (owner occupied), but has the option to occasionally rent out or lease the property, is the exposure reportable to the FHCF?

A: Yes.

Q: If the owner of an individual condominium unit uses the condominium as a home or residence (owner occupied), but rents the condominium out for eight weeks during the year to eight different parties for vacation purposes (weekly rentals), would the condominium be covered by the FHCF?

A: Yes because the unit is primarily used as the owner's home or residence.

Q: If the owner of an individual condominium unit uses the condominium two weeks out of the year (non-owner occupied) and then opts to lease the unit as vacation property based on daily, weekly, or monthly rates, is the condominium covered by the FHCF?

A: No because the unit is primarily used for commercial purposes.

Q: If the owner of an individual condominium unit does not use the condominium as a home or residence (non-owner occupied) and rents or leases the unit out to another party that does use the unit as a home or residence, is the exposure reportable to the FHCF?

A: Yes.

Q: If an individual condominium unit owner does not use the condominium as a home or residence (non-owner occupied) and rents or leases the unit out to an individual(s) that also does not use the unit as a home or residence, is the exposure covered by the FHCF?

A: No.

Q: Does exclusion (10) in Article VI of the FHCF 2014 Reimbursement Contract apply to owner-occupied condominiums?

A: No.

Dormitories

Q: Are dormitories covered by the FHCF?

A: Yes.

Fraternity/Sorority Houses

Q: Are fraternity and sorority houses covered by the FHCF?

A: Yes.

Grave Markers

Q: Is an endorsement for increased coverage for grave markers covered by the FHCF?

A: Yes, if the endorsement provides coverage for hurricane losses. However, per the Data Call instructions, do not report exposure for grave markers.

Homes Rented out for Temporary Purposes

Q: If my company insures a home that is rented out for temporary purposes, how do I determine whether this policy is excluded from coverage from the FHCF)?

A: If the home is used solely for commercial purposes, or is non-owner occupied and rented out for six or more time periods by different parties during the course of a twelve month period, then it would be excluded from the FHCF. See exclusions (8) and (10) in Article VI of the FHCF 2014 Reimbursement Contract. [UPDATED 6/1/14]

Loss Assessment

Q: Are losses attributable to loss assessment covered by the FHCF?

A: No (pursuant to exclusion 21 under Article VI of the 2014 FHCF Reimbursement Contract).

Monasteries

Q: Are monasteries covered by the FHCF?

A: Yes, if used as a residential structure.

Residences/Buildings Under Construction

Q: Our company has several policies where the residence is being remodeled or added on to, but is still occupied by the insured. Would the FHCF exclusion (15), "Any exposure for builders risk coverage or new residential structures still under construction", under Article VI of the 2014 FHCF Reimbursement Contract apply to these, or would they still be covered?

A: If the addition is covered under a builder's risk policy or endorsement, then it would not be considered a covered policy and should not be reported to the FHCF. The part of the home that is already constructed would be covered by the FHCF under a homeowners policy.

Scheduled Personal Property in a Vault Off Premises

Q: Our company insures an individual's scheduled personal property, such as jewelry or artwork, and the items are located in a vault off premises. Is the exposure reportable to the FHCF?

A: Yes, unless excluded under exclusion (27) under Article VI of the 2014 FHCF Reimbursement Contract [UPDATED 6/1/14].

Vacant Properties

Q: Are vacant properties intended for residential/habitational use covered by the FHCF?

A: Yes, provided the property has a certificate of occupancy. Exclusion 15 under Article VI of the 2014 FHCF Reimbursement Contract specifically excludes any exposure for builders risk coverage or new residential structures still under construction.

Exposure/Data Call Reporting

Additional Living Expense (ALE)

Q: How should our company report ALE if written as a time element coverage without a stated dollar limit?

A: Report exposure in an amount not to exceed 40% of the Residential Structure or 40% of the contents exposure based on the type of policy (e.g., a homeowners policy is usually based on structure versus a renters policy based on contents). Note that reported losses for time element ALE may not exceed the amount of exposure reported under the Data Call unless the policy limits for ALE have changed after June 30th.

Q: On certain dwelling fire policies, fair rental value is provided as Coverage D and ALE is provided as Coverage E. We understand that the fair rental value coverage is not covered by the FHCF, but would the Coverage E coverage be reportable?

A: Yes. Any ALE coverage under the policy is reportable up to the statutory limit of 40% of the insured value of a residential structure or its contents.

Q: Some of our company's programs provide ALE and loss of rents/fair rental value/loss of rental income coverages combined as Coverage D. How should we report this exposure?

A: If the full Coverage D limit can be paid as ALE reimbursement, then report the full limit, but not to exceed the statutory limit of 40% of the insured value of a residential structure or its contents. If only a portion of the limit could be paid for ALE, report only that portion of limit applicable to ALE coverage. Also note that when requesting reimbursement from the FHCF, the FHCF will only reimburse the ALE loss not to exceed the lesser of the statutory limit or the amount reported to the FHCF under the Data Call.

Q: If our company writes a policy with ALE coverage that is 4% each month for up to three months, how would the ALE be reported?
A: Report exposure based on 12%.

Q: If the ALE expense coverage on a Dwelling Form 2 or 3 is listed under the Other Coverages section of the policy form, is the exposure for this coverage reportable?
A: Yes.

Q: Our company allows a policyholder to select increased coverage on certain personal property (e.g., guns). However, these coverages are not scheduled personal property. The company considers the coverage as an increase in the Contents limit. The company also writes ALE coverage for a time period rather than a specific dollar limit. Should the company include the increased coverages in the Contents limit when calculating the amount of ALE to report?
A: Yes.

Q: Our company writes a condominium unit owners policy with an endorsement for coverage for rental to others. Should ALE be reported for the policy?
A: It depends. If the unit is entirely rented to others, then the coverage on the policy would be for fair rental value and would not be reported to the FHCF. If the owner seasonally occupies the unit as a home or residence, then the ALE could be paid out to the owner and the exposure would be reportable to the FHCF.

Q: Our company writes a condominium unit owners policy that provides betterment and improvements coverage or "four-walls" coverage (considered by our company to be structural coverage) and ALE coverage, but no coverage for Contents. Is the ALE coverage reportable to the FHCF?
A: Yes. However, the exposure should not exceed 40% of the structural coverage.

Q: Our company provides ALE coverage on Residential Homeowners policies at an unlimited amount. How should the ALE coverage be reported to the FHCF?
A: Since an unlimited dollar amount of coverage is provided, your company should report ALE at the maximum percent (40%) allowed.

Q: Our company provides ALE coverage at a limit of 50% of the Building limit. Therefore, for a policy with a Building limit of $200,000, we would provide $100,000 of ALE limit. How would this be reported to the FHCF?
A: Because 40% is the statutory cap with respect to FHCF coverage, your company would only report $80,000 of ALE exposure.

Appurtenant Structures

Q: Our company insures Appurtenant Structures under policies that are not attachments/endorsements/riders to a policy providing coverage for a habitational structure(s) and do not provide coverage for the habitational structure(s). For example, our company writes a policy covering a pool for an apartment complex, but does not insure the apartment complex itself. Would the pool exposure be covered or reportable?
A: The pool exposure is not reportable to, or covered by, the FHCF.

Assumption Agreements with Citizens Property Insurance Corporation

Q: My company is planning an assumption on May 25th from Citizens Property Insurance Corporation. If an assumed policy has not renewed onto my company's books at June 30th and it is subsequently "untagged" after June 30th, should the "untagged" policy be excluded from our Data Call submission?

A: No. The status of the policy at June 30th determines whether the policy is reportable by your company. The assuming company must report all assumed policies under the Data Call unless Citizens has notified the assuming company on or prior to June 30, 2014 that a policy is eligible for an opt out. In such cases, Citizens shall report those policies under its Data Call submission. Refer to page 24 of the 2014 Data Call instructions for additional clarification.

Q: If my company selected policies for a July 19th assumption of covered policies from Citizens Property Insurance Corporation before June 30th, meaning the actual assumption date is July 19th, can my company report the policies selected as our exposure on June 30th?

A: No. The FHCF does not recognize the selected policies as exposure of your company until after the assumption date.

Q: How long does the FHCF require my company to keep a copy of the signed opt-out forms?

A: Your company is required to retain copies of opt-out forms until the FHCF completes its examination of your company's exposure submission and, if applicable, any claims reports and the commutation for the applicable Contract Year have been concluded.

Attachments, Endorsements or Riders

Q: My company writes an endorsement that enhances the policy coverages provided on the basic Residential Homeowners policy form. One of the enhancements listed in the endorsement is an additional limit provided for home computer coverage which is listed as a modification to the additional coverages section of the policy. Is the additional limit required to be reported?

A: No. Per the Data Call instructions, an endorsement for home computer coverage should not be reported in your Data Call file. However, coverage will be provided at the time of loss.

Q: Our company does not offer Appurtenant Structures as a standard coverage under a homeowners policy, but an Appurtenant Structures limit can be purchased via an endorsement. If a policyholder purchases the Appurtenant Structures endorsement, should this exposure be reported?

A: Yes.

Q: If a policy does not provide a stated limit on the dec page for Appurtenant Structures, but under "Other Coverages," Appurtenant Structures limit is provided as an additional 10% of the Building limit, should this exposure be reported?

A: Yes.

Blanket Deductible

Q: Is a per occurrence deductible considered a blanket deductible?

A: Yes, as long as it is a per occurrence deductible that applies once to all locations.

Q: If we have a blanket deductible greater than $50,000 and a blanket limit, how do we convert the blanket deductible to a percentage deductible?

A: Per the Data Call, you are required to report the full blanket deductible for each risk/building/exposure and the lesser of the full blanket limit or the full wind exposure value for each risk/building/exposure. Therefore, the percentage deductible should be calculated from these numbers.

Blanket Limit

Q: When reporting policies with multiple risks/locations and a per occurrence blanket limit, are we required to report each risk separately at the maximum limit per occurrence?

A: If the risks are located in different ZIP Codes or have different rating factors, then each risk must be reported separately at the lesser of the full blanket limit or the exposure value for the risk. If the risks are located in the same ZIP Code and share the same rating factors, they should be reported together as one record with the lesser of the full blanket limit or the exposure value for the combined risks. For example, if two risks have an exposure value of $2M each and a blanket limit of $5M, the exposure amount to be reported for the record would be $4M.

Building Additions and Alterations

Q: Our company issues a renters policy with Contents limit of $50,000. The policy includes additional coverage written within the policy form for building additions and alterations of 10% of the Contents limit. A policyholder has purchased an endorsement to increase the building additions and alterations coverage to 25% of the Contents limit. How much exposure should be reported to the FHCF for this policy?

A: The amount of building additions and alterations coverage in excess of that provided within the policy form, prior to the purchase of the endorsement, would be reportable. In this case, the additional 15% ($7,500) of the Contents limit for building additions and alterations coverage is reportable, for a total of $57,500 of exposure to be reported.

Q: Our company's condominium unit owners policy provides for a dwelling limit (additions and alterations coverage) of $1,000, which is listed on every condominium unit owners policy written by the company and is provided at no additional premium. Should this $1,000 be reported?

A: Yes. The full limit is the total limit under the policy, regardless of whether that is the basic limit alone (e.g. $1,000) or the basic limit plus an increased limit.

Churches

Q: If a church and the adjacent parsonage are covered on a commercial policy, should the parsonage be reported as a "Commercial" or "Residential" type of business?

A: If it is a two, three, or four-family dwelling, it should be reported with a FHCF type of business based on how your company rates the dwelling (either Residential or Commercial FHCF type of business). Dwellings housing more than four families should be reported as FHCF type of business Commercial (code "1").

Commercial Class Codes

Q: If our company insures a single structure with a mix of commercial habitational and commercial non-habitational exposure and multiple class codes are applied to the structure, how would our company determine the predominant class for the structure?

A: Your company may have to use another factor, such as square footage or number of floors, to determine the predominant use of the structure.

Commercial Policy: Single Structure with a Combination of Commercial-Habitational Occupancies and Commercial Non-Habitational or Business Occupancies

Q: If a single structure is used for both habitational and non-habitational purposes and the policy provides blanket or non-divisible coverage for that structure, how should our company report exposure to the FHCF?

A: If the structure is predominately habitational (based on a classification plan submitted to, and reviewed by, the FHCF Administrator), report the entire exposure for the structure to the FHCF. If the structure is predominately non-habitational, please review Commercial-Habitational reporting clarification #7 in the 2014 Data Call for instructions. [UPDATED 6/1/14]

Q: If our company insures a single structure with a combination of habitational and non-habitational exposure and the policy is predominately habitational, can our company carve out and not report the commercial non-habitational portion of the structure? [UPDATED 6/1/14]

A: No. Your company is required to report the entire structure because the non-habitational portion of the policy should be minimal to the total policy coverage.

Commercial Policy: Commercial Habitational Clarifications

Q: If our company has a commercial-residential policy with several primary dwellings located in different ZIP Codes, and each dwelling has its own miscellaneous commercial structures, with which primary dwelling should the miscellaneous structures be reported?

A: They should be reported with the primary dwelling to which they are related.

Q: If our company has a commercial-habitational policy with several primary dwellings located in the same ZIP Code with common miscellaneous commercial structures, but each primary dwelling has a different construction code, with which primary dwelling should the miscellaneous commercial structures be reported?

A: The miscellaneous structures can be reported with the primary dwelling structure(s) your company deems most appropriate.

Q: Our company has a commercial-residential policy with a variety of risks that would normally fall under multiple FHCF types of business. These risks have different ZIP Codes so separate records would be required to be reported. Can these records be reported using the FHCF type of business "Commercial" Code 1?

A: Yes, if the predominate FHCF type of business is commercial (note that commercial policies covering farms are required to be reported under a FHCF type of business Residential [code "2"]). See Commercial-Habitational Reporting Clarification #3 in the 2014 Data Call.

Q: Our company has a commercial-residential policy with three primary dwellings located in the same ZIP Code and each dwelling has the same rating factors. Also, a percent deductible applies to each risk individually. Can our company combine the risks into one record with three risk counts for reporting purposes?

A: Yes.

Q: As a follow up to the previous question, if our company wrote the same type of policy insuring three risks but each risk had a separate dollar deductible amount or different constructions, are separate records required to be reported?

A: Yes.

Commercial Policy: Multiple Structures with a Combination of Habitational and Non-Habitational Exposure

Q: If a commercial policy covers multiple structures, where the primary structures are a combination of individual habitational and individual non-habitational structures, and each structure has an individual deductible, which structures should our company report to the FHCF?

A: Your company must report only the habitational structure(s) and any other structure used in relation to the habitational structure(s). "Used in relation to" is defined as any structure that is used solely by the occupants (or their guests) of the habitational structure. If your company is unable to determine whether or not a non-habitational structure meets this requirement, do not include any of the exposure for that structure.

Q: What if, in the preceding case, the policy has an indivisible aggregate deductible. How should our company report deductibles?

A: Report each covered risk/building/exposure with the full blanket deductible amount.

Q: Our company writes a commercial policy covering a retirement community with a beauty salon and recreation center. Should the beauty salon and recreation center be reported?

A: It depends. If the beauty salon and recreation center are used in relation to the habitational structures, yes. "Used in relation to" is defined as any structure that is used solely by the occupants (or their guests) of the habitational structure. If a structure is not used in relation to the habitational structures or you are unable to make this determination, do not report the exposure for the structure. Also, refer to the 2014 Data Call Reporting Clarifications if a blanket deductible or blanket limit applies.

Commercial Policy: Multiple Location Policy with Non-Florida Risk (Non-Excess)

Q: Our company writes a commercial package policy covering habitational exposures located in several states. The policy is written with a blanket limit. How should the Florida risks be reported?

A: Report the lesser of the full policy limit or the full wind exposure value for each Florida habitational risk/building/exposure. A copy of the Statement of Values to support the policy exposure reported must be retained for the SBA to confirm reporting during examination.

Commercial Policy: Variety of Risks

Q: How do you determine the predominant type of business on the policy?

A: The predominant type of business is the FHCF type of business under which the most FHCF exposure falls.

Computers/Radios/Signs/Valuable Papers

Q: In addition to $50,000 of Contents limit on a renter's policy, our company provides $10,000 of coverage for a personal computer system written as scheduled personal property. How much Contents limit should be reported?

A: $50,000 since exposure for computers is on the list of Non-Reportable (But Covered) Exposure items in the Data Call.

Q: An apartment complex is covered on a commercial policy with $500,000 for building and $20,000 for contents. The policy also provides a coverage extension for valuable papers of $2,500. This coverage is offered as part of the policy form and not by endorsement. How much exposure should be reported?

A: $520,000 since the coverage extension for valuable papers is on the list of Non-Reportable (But Covered) Exposure items in the Data Call.

Condominium Unit Owners

Q: If a commercial policy covers a condominium complex, should our company report exposure for that policy as FHCF type of business Condominium Unit Owners (code "6")?

A: The FHCF type of business Condominium Unit Owners refers to an individual condominium unit owner. If a commercial policy covers a 10-story, 100 unit condominium complex, for example, such exposure should be reported as FHCF type of business Commercial (code "1").

Construction

Q: If mobile homes are tracked by the year built instead of the day built, how should the constructions be coded for fully tied down mobile homes?

A: Fully tied down mobile homes built in 1994 or earlier should be coded "21." Fully tied down mobile homes built after 1994 or those documented to be in compliance with ANSI/ASCE 7-88 should be coded "22."

Q: Could there be mobile homes built before 7/13/94 coded as construction "22?"

A: Yes. If mobile homes built prior to 7/13/94 are documented to be in compliance with ANSI/ASCE 7-88, they can be coded "22."

Q: Can our company use the default construction code for policies in which the construction is unknown?
A: No. Your company can only use the default construction code if you capture the construction code and the aggregate exposure of your entire book of business is less than $50 million.

Q: If our company uses the default construction code “26” for its mobile home policies, are we required to use a default construction code “12” for our residential homeowners policies?
A: Yes, unless the construction code for the residential homeowners policies is unknown then an “Unknown” FHCF construction code (code “11”) would be reported.

Q: What if our company meets the requirements for reporting the default construction code for its covered residential homeowners policies and mobile homeowners policies. Can our company report the default construction code for the residential homeowners policies and the actual construction code for mobile homeowners policies?
A: No. All policies must be reported using either the default construction code or the actual construction codes.

Q: For a Residential Homeowners policy, my Company obtains the type of construction for an insured risk at the time an application is completed but the information is not collected in our company’s system. Can my company report a construction code “11” for unknown?
A: No. If the type of construction is known on a primary policy, the applicable FHCF construction code must be reported. A construction code “11” can only be reported if the construction is actually unknown. Note, this does not apply to scheduled personal property endorsements reported as a separate record from the primary policy record. A scheduled personal property endorsement can be reported with the primary policy construction or a construction code “11” for unknown as long as the reporting option selected is applied consistently within an FHCF type of business. [ADDED 10/9/13]

Contents-Only Policies

Q: If our company only insures the contents of a home that is owner occupied and coverage is provided for ALE, under which type of business should the policy be reported?
A: If the exposure is related to another policy (i.e. the policy for the dwelling), it should be reported as the FHCF type of business it is associated with. If the exposure is not associated with another policy, it should be reported as FHCF type of business Tenants (code “4”).

Deductibles

Q: What if a policy covering multiple commercial habitational risks has an indivisible aggregate deductible (blanket deductible); how should our company report deductibles?
A: Report each risk/building/exposure with the full blanket deductible amount.

Q: How should our company report the deductible for a policy written with a percentage deductible and a minimum dollar deductible?
A: Report the percentage deductible.

Q: How should our company report the deductible for a stand-alone inland marine policy when multiple risks are covered under the policy with different deductibles applicable to each risk?
A: Your company can report each risk separately with its own deductible code or General Clarification #3 in the 2014 Data Call allows the option of reporting the risks under one record using the deductible applicable to the most exposure. Whichever option your company chooses, it must be applied consistently across the non-commercial book of business.

Q: Our company writes a Condominium Unit Owners policy with a dwelling limit of $65,000. The policy has a $2,500 hurricane deductible and an endorsement is attached to the policy that describes the hurricane deductible as the lesser of the hurricane deductible or an amount equal to 2% of the limit of liability that applies to Coverage A when that limit is less than $100,000. How should the deductible be reported to the FHCF?

A: In this case, the deductible would be $1,300 (2% X $65,000) and should be reported to the FHCF using an RB deductible code. However, if your company is unable to program your company's data to report the correct deductible, we will allow the hurricane deductible stated in the policy to be reported, which in this example would be an RC deductible.

Q: Our company writes a commercial residential policy that covers multiple risks in multiple states. There is one residential risk on the policy that is located in Florida. The insured value for this risk is $100,000 and the deductible for Florida is 2% subject to a $300,000 minimum. What FHCF deductible code should be reported?

A: The Data Call instructs that in the case of a percentage deductible with a minimum dollar deductible, the percentage deductible is to be reported to the FHCF. [EDITED 9/18/13]

Q: Using the preceding example, what if the risk was insured for $25,000 and the deductible was 2% subject to a $30,000 minimum, what FHCF deductible code should be reported? [EDITED 9/18/13]

A: An FHCF deductible code C2.

Farmowners

Q: A farmowners policy may have several coverages that relate to residential structures covered under the policy. What coverages are required to be reported for the residential structure?

A: Only coverages for the dwelling, other private structures appurtenant to dwellings, household personal property, additional living expense, and any increases to those coverages, should be reported.

Q: If a farmowners policy covers both residential and mobile home structures under the same policy, can both risks be reported under the "Residential" type of business?

A: No. The mobile home risk is required to be reported as FHCF type of business Mobile Home (code "3").

Q: Are residential structures on a commercial farm covered under a commercial package policy required to be reported as a "Residential" type of business?

A: Yes. Typically, the covered risks have a residential construction rather than a commercial construction. If the company can justify that the construction is commercial, then the FHCF may allow the company to report as FHCF type of business Commercial (code "1"). As noted above, any mobile home exposure must be reported as FHCF type of business Mobile Home (code "3").

Q: If our company writes farmowners policies or commercial policies covering farmowners risk, can we report exposure covering a variety of risks using the predominant type of business?

A: No. The Commercial-Habitational Clarification regarding commercial policies that cover a variety of risks does not apply to farm coverage.

Guaranteed Replacement Cost Endorsement

Q: If our company offers an endorsement that increases the replacement cost coverage provided within the policy form, should the increase in exposure be reported?

A: Additional exposure should be reported only if the endorsement increases the specified dollar limit independent of the actual cost of damage at the time of loss. For example, if the endorsement increases the stated policy limit from $200,000 to $220,000, the additional $20,000 would be reportable. If, on the other hand, the change in coverage/limit under the endorsement is dependent on the actual cost of damage at the time of loss, additional exposure would not be reportable. This is, however, covered at the time of loss.

Law & Ordinance

Q: How should our company report exposure for Law and Ordinance coverage?

A: Under no circumstances should exposure for Law and Ordinance coverage be reported. Note, however, that the FHCF would still reimburse for losses under this coverage.

Loss Assessment

Q: Is loss assessment coverage reportable to the FHCF?

A: No. Exclusion 21 under Article VI of the FHCF 2014 Reimbursement Contract excludes amounts paid to reimburse a policyholder for condominium association loss assessments or under similar coverages for contractual liabilities, so exposure for such coverage is not reportable under the Data Call.

Outdoor Property

Q: In the Non-Reportable (But Covered) Exposure section on page 12 of the 2014 Data Call instructions, item 3) g. includes outdoor property. What would the FHCF consider to be “outdoor property”?

A: Often a commercial policy form excludes coverage for named items outside the building such as fences, radio or television antennas (including satellite dishes) and their lead-in wiring, masts or towers, signs (other than signs attached to buildings), tree, shrubs or plants (other than “stock” of trees, shrubs or plants). Coverage for these items is regularly added back to the policy as a coverage extension or by endorsement. The FHCF would consider any items specifically listed in your company’s policy forms as “outdoor property” to be outdoor property and Non-Reportable (But Covered) Exposure as long as the covered perils include hurricanes. However, items not listed in your company’s policy form or not listed in items a. through j. under item 2) of the Non-Reportable (But Covered) Exposure section would not be considered outdoor property. [ADDED 8/27/13]

Refrigerated Contents

Q: Are refrigerated contents coverage provided by endorsement reportable when the endorsement is on a covered policy?

A: No, per the Data Call, exposure for refrigerated contents are not to be reported in the Data Call file; however, it is covered at the time of loss.

Risk Counts

Q: If our company writes a Residential Homeowners policy with a scheduled personal property endorsement with no deductible and we opt to report the endorsement as a separate record, should we report a risk count of 1 for the endorsement?

A: No. If the endorsement is reported as a separate record and there is no deductible, then a risk count of 0 would be reported to avoid duplicating risks counts.

Q: If our company reports a scheduled personal property endorsement to an ex-wind policy, should a risk count of 1 be reported for the endorsement?

A: Yes because the primary policy is not reported.

Roof Shape

Q: How should our company report the mitigation field for mobile homes?

A: Generally, the FHCF would expect the Unknown code applicable to this field to be reported for mobile home exposure. However, if the company does track any of this information, please report it as appropriate.

Q: How should we report roof shape if one building has a combination of shapes?
A: Roof shape should be determined by using the type of structure that exceeds 50% of the roof surface. For example, any individual exterior wall with a gable end exceeding 50% of the width of the exterior wall should be classified as “Gable or Other” roof shape.

Scheduled Personal Property Endorsements
Q: A Residential Homeowners policy is written with an endorsement to cover scheduled personal property, which has a different deductible from the homeowners policy. Our company has opted to report the endorsement as a separate record from the primary policy. When reporting the endorsement, are we required to report the deductible applicable to the endorsement?
A: No. Your company can report the deductible applicable to the endorsement or the primary policy, just as if you were including the homeowners and scheduled personal property under one record. However, whichever option your company chooses must be applied consistently within each FHCF type of business.

Q: Our company writes a scheduled personal property endorsement to a Residential Homeowners policy that is written ex-wind yet the endorsement is not ex-wind, can the endorsement be reported using FHCF type of business Residential (code “2”)?
A: Yes. The Data Call instructions require the endorsement be reported using the type of business for the policy the endorsement is associated with.

Q: As a follow up to the question above, can our company report the rating factors of the primary ex-wind policy when reporting the endorsement?
A: Yes.

Q: Our company writes scheduled personal property endorsements to ex-wind policies and policies that provide wind coverage. The endorsements to ex-wind policies are reported with an FHCF construction code 11 “Unknown”, which is not the construction code for the primary policy. However, the endorsements to the policies that provide wind coverage are reported with the construction code for the primary policy. Would this be considered an inconsistent application of the rating factors?
A: Yes, <u>if it occurs within an FHCF type of business</u>. Your company should make a decision to either report the construction code of the primary policy or the construction code of the endorsement and apply this consistently <u>within an FHCF type of business.</u>

Q: An endorsement was reported with the construction code for the primary policy and a deductible code “RM”, the deductible applicable to the endorsement. Is this considered an inconsistent application of the rating factors when the inconsistency occurs within a single endorsement?
A: No.

Q: A Residential Homeowners policy is written with an endorsement to cover scheduled personal property. The home was built in 2004 so the primary policy would be reported with a FHCF year built code 3. Our company has opted to report the endorsement as a separate record from the primary policy. When reporting the endorsement, are we required to report the year built code 3?
A: No. Your company can report the year built code applicable to the primary policy or “0” for unknown. However, whichever option your company chooses must be applied consistently within each FHCF type of business. [ADDED 10/9/13]

Screened Enclosures

Q: Our company writes an endorsement that provides no additional Building limit when a screened enclosure is attached to the home but if the enclosure is not attached to the home, an additional limit is provided under Appurtenant Structures). We understand that exposure would only be required to be reported to the FHCF when an additional limit is provided. However, our company does not capture the information needed to know whether the enclosure is attached to the home or not. How should our company report the coverage provided by this endorsement?

A: Since your company is unable to determine whether the enclosure is attached to the home and the coverage provided by the endorsement could be additional exposure, you must report the limit provided by the endorsement. However, your company should take the steps needed to report this endorsement correctly in the future.

Stand Alone Inland Marine

Q: Our company writes a stand-alone inland marine policy that can be associated with a Residential Homeowners policy. Can the inland marine policy be reported using FHCF type of business Residential (code “2”)?

A: Yes.

Q: As a follow up to the question above, can our company report the rating factors of the primary policy?

A: Yes. Your company has the option of reporting the rating factors of the primary policy or the inland marine policy as long as the option is applied consistently within a type of business.

Tenant Policies

Q: Our company covers the owner’s property for a tenant occupied structure. Should the exposure be reported under the "Tenants” type of business?

A: No. The FHCF type of business Tenants (code “4”) is intended for non-owner occupied types of coverage. The exposure should be reported as applicable under the Commercial, Residential, Mobile Home, or Condominium Unit Owners type of business. Only the tenant’s contents coverage is reported under the Tenants type of business.

Q: Our company writes a policy covering a tenant that rents a mobile home. How should the policy be reported?

A: The Tenants type of business is not applicable to any covered mobile home exposure. The policy should be reported using FHCF type of business Mobile Home (code “3”).

Transaction Dates

Q: My company compiled a “snapshot” of its exposure for its direct written business in effect at June 30th on July 15th. A cancellation effective June 15th was not processed until after July 15th, so the cancelled policy was reported to the FHCF. Would this be considered an error when my company is examined by the FHCF?

A: Technically the policy was not in effect at June 30th and should not have been reported. However, the FHCF recognizes that there may be some timing differences between when transactions are processed and the data is captured. The FHCF examination process will consider the date exposure data was captured versus the date a transaction was processed and not consider those transactions as errors that were not processed until after the date the data was captured. However, if your company is required to resubmit at a later date, the FHCF would expect the cancelled policy and any other transactions processed after June 30th but effective on or before June 30th to be reported correctly. Refer to page 5 of the 2014 Data Call instructions.

Q: My company is required to resubmit is exposure data to correct errors noted in the exposure exam. If there were transactions that affected the exposure data at June 30th that our company was not able to process before the data was captured in an effort to meet the September 1st statutory deadline, should our resubmission include an update that takes into account subsequent transactions?

A: Yes, if the subsequent transactions changed the exposure in effect at June 30th and it is a resubmission of your company's direct written business. If your company is reporting exposure data assumed from Citizens which has not renewed onto your company's books, then the "freeze" date for the assumed polices is June 30th (regardless of subsequent processing of transactions with changes effective prior to June 30th).

Type of Business

Q: If our company insures a boarding or rooming house, which type of business should it be reported under assuming it is a home or residence?

A: Your company should report the risk under the type of business it considers the risk written, commercial or residential.

Q: If our company insures a townhouse used as a home or residence, which type of business should it be reported under?

A: Your company should report the risk under the type of business it considers the risk written, commercial or residential.

Q: Under what FHCF type of business code should a policy that provides insurance to the renter of a condominium unit be reported?

A: FHCF type of business 4 (Tenants) should be used. FHCF type of business 6 (Condominium Unit Owners) is used when the policy is insuring the owner of an individual condominium unit and not the tenant of that unit.

Q: Our company insures individual condominium units on a commercial policy with only contents coverage. We are not able to distinguish between whether the coverage provided is for the condominium unit owner or the tenant of a condominium unit so which type of business should the exposure be reported under?

A: The company needs to be able to make this distinction but until such time, the exposure should be reported using FHCF type of business 6 for Condominium Unit Owners.

Year Built

Q: Our company has existing covered policies where the year built was not captured, however, the policies have an effective date that is before 1994. Should our company report an FHCF code "1" (1994 or earlier) for year built for these policies?

A: No. The code for year built must be based on the actual year built and not the effective date of the policy. In this example, FHCF code "0" (Unknown or Mobile Home) would be reported for the polices since your company did not capture the actual year built.

Q: My company obtains the year built for insured risks at the time an application is written but the factor is not captured in our system. Is my company required to capture the year built for reporting to the FHCF? [ADDED 7/29/13]

A: Yes, if the year built is known. A year built code "0" can only be reported if the year built is unknown.

<u>SBA Examination – Exposure Reporting</u>

SBA Examination

Q: Can my company get an extension to submit the advance records required to be submitted for an exam?

A: No, except for circumstances beyond the reasonable control of the company.

Exit Conference

Q: Can our company request an exit conference with the SBA to discuss the exam findings?

A: Yes. This request should be sent to the SBA and a mutual time will be scheduled.

Resubmissions

Q: Will our company incur any penalties if it is discovered through an exposure examination that we have reported data incorrectly?

A: If your company is required to resubmit its Data Call file, there will be a $2,000 resubmission fee for each resubmission. There may also be additional premium due to the FHCF. Also, if your company received loss reimbursements for the same Contract Year, the Data Call resubmission may result in an excess reimbursement(s) having to be repaid to the FHCF.

Q: Can my company get an extension on filing a resubmission?

A: No, except for circumstances beyond the reasonable control of the company.

Q: Does my company file resubmissions of prior Contract Year Data Calls through *WIRE* as well? [ADDED 6/1/14]

A: No, only the 2014 Data Call may be submitted through *WIRE.* Any resubmissions of prior Contract Year Data Calls must be submitted as instructed in the applicable Data Call.

Loss Reporting

FHCF Interim Loss Report

Q: What is the purpose of the Interim Loss Report?

A: The Interim Loss Report provides the FHCF with information to determine its potential liability, and if necessary, the likely timing requirements for asset liquidation and revenue bond issuance.

FHCF Proof of Loss Report (POL)

Q: When is our company required to submit a POL to the FHCF?

A: If the FHCF notifies its member companies that they are required to submit POL reports to the FHCF, the first <u>mandatory</u> filing is due by December 31 of the FHCF Contract Year (20XX) in which the hurricane occurred. Quarterly thereafter:

- A POL is due on **<u>3/31/XX</u>** from any company whose losses exceed or are expected to exceed 50% of its FHCF retention.
- A POL is due on **<u>6/30/XX</u>** from any company whose losses exceed or are expected to exceed 75% of its FHCF retention.
- A POL is due on **<u>9/30/XX</u>** from any company which anticipates that its losses will exceed 100% of its FHCF retention.
- A POL is due from a company which anticipates that its losses will exceed 100% of its FHCF retention by **<u>each subsequent quarter-end</u>** until the company has paid its policyholders in full.
- **ALL** companies must submit a yearly 12/31/XX POL until FHCF losses have been commuted or the company has paid its policyholders in full. (See Article X of the Reimbursement Contract.)

A company may, at any time, voluntarily submit a POL for reimbursement.

Q: When completing the POL, should losses reported be cumulative or just for the period reported?

A: The losses reported should be cumulative but net of the policy deductibles, loss adjustment expenses, salvage and other recoveries.

Submission of FHCF Loss Reports

Q: My company was able to submit its Hurricane Wilma losses either through the FHCF Online Claims System or manually as hardcopies. Can we still submit hardcopy loss reports to the FHCF? [ADDED 6/1/14]

A: No. All FHCF loss reports must now be submitted online using the FHCF Online Claims System. See the Online Loss Reporting section of this Handbook for additional information, including system registration information.

Additional Living Expenses (ALE)

Q: A company paid for damages to appurtenant structures, however there was no loss to the dwelling. There was also a payment to the policyholder for ALE with no supporting documents for the ALE payment. Will the FHCF reimburse the company for the ALE?

A: The FHCF does reimburse for ALE. However, in this instance, the FHCF would not reimburse the company since there is no documentation to support the payment.

Q: A company paid advances for ALE of $1,000 and a letter was sent to each policyholder requiring receipts if any additional ALE was requested. This is allowed under the company's policy because it requires the policyholder to submit receipts when requested by the company to do so. Would the FHCF reimburse the company for the initial advance if no additional ALE was requested by the policyholder?

A: Yes.

Q: My company writes a residential homeowners policy with a time limit for ALE coverage rather than a dollar amount. When the insured reported the ALE loss to my company, the amount of the ALE loss was 50% of the Building limit. How should my company report the loss to the FHCF?

A: Your company is required to cap the ALE loss at the percentage of the Building limit that was used to report the exposure to the FHCF for this policy or other similar policies, but not to exceed 40% of the Building limit.

Buildings Under Construction

Q: A company insures "buildings under construction". If the buildings are planned to be residential, would the FHCF reimburse a company for losses to the buildings?

A: No, because the FHCF does not cover buildings under construction.

Commutation Clause

Q: When does the FHCF commutation clause take effect?

A: Not less than 36 months or more than 60 months after the end of the FHCF Contract Year in which the hurricane took place, but shall not begin before the completion of the FHCF loss examination for the company and the resolution of all outstanding examination issues.

Q: Can our company initiate the commutation process, or will the FHCF notify us when the process should begin?

A: Once the SBA has closed your exposure and loss examination files for the applicable Contract Year, the FHCF will initiate the discussion of commuting losses. While a company may request that the SBA consider beginning the commutation process earlier, doing so is at the discretion of the SBA.

Deductibles

Q: A company has two claims adjusted for two separate events. Should each claim be reported to the FHCF net of the policy deductible?

A: Yes.

Q: If a company opted to waive a policyholder's deductible for subsequent events causing damage, can the loss reported to the FHCF include the deductible that has been waived?

A: No. All losses reported to the FHCF must be net of the policy deductible even if the company opted to waive that deductible.

Q: If a loss occurs on a policy that covers multiple types of risks (e.g., both covered and not covered by the FHCF) and my company applied the deductible to the insured risk that is not covered by the FHCF, are we required to report the portion of the loss covered by the FHCF net of the policy deductible?

A: Yes, because the FHCF Reimbursement Contract requires that a company's loss be reported net of the policy deductible.

Detailed Claims Listing – File Layout

Q: What are the file layout requirements for the Detailed Claims Listing?

A: The file layout for the Detailed Claims Listing is provided in the Detailed Claims Listing Instructions (Form FHCF-DCL) for the applicable FHCF Contract Year available online at www.sbafla.com/fhcf under "FHCF Rules".

Effective Dates

Q: My company writes a new policy covered by the FHCF effective July 15th of the Contract Year so the policy exposure is not required to be reported to the FHCF at June 30th. If a covered event occurs after July 15th, does my company have coverage for the loss on this policy?

A: Yes as long as the policy is in effect on the date of loss.

Lightning

Q: Is a claim caused by lightning covered by the FHCF?

A: It depends. A claim is covered if the company can show that the peril was a direct result of the hurricane for which the claim is reported.

Loss of Rents

Q: If an insured's home sustains damage from a hurricane that renders it uninhabitable and the insured decides to move into a rental house he owns that is currently not occupied by tenants, can our company receive reimbursement from the FHCF for the loss of rental income from the rental house?

A: No, loss of rental income is not covered by the FHCF.

Mortgage Payments

Q: If a company writes an endorsement to a covered policy that allows a policyholder to receive reimbursement for mortgage payments when a house is uninhabitable because of a hurricane, would the FHCF reimburse the company for the payments?

A: No.

Multiple Events

Q: If there are multiple hurricanes during an FHCF Contract Year, should losses from each event be reported on separate POLs?

A: Yes.

Reimbursements

Q: Under what conditions would our company have to return reimbursements to the FHCF?

A: The FHCF Reimbursement Contract addresses the right of the SBA to seek the return of “excess loss reimbursements or advances”. Such excess amounts could result from a variety of issues, such as:

- An incorrect exposure submission or resubmission (resubmitted data results in a change to a company’s premium, retention, and maximum reimbursement);
- An incorrect POL (over-reported losses);
- Incorrect calculation of reinsurance recoveries (over-reported losses);
- Subsequent readjustment of policyholder claims, including subrogation and salvage (subsequent POL indicates a company is eligible for reimbursements at a level less than what has already been reimbursed);
- Incorrect calculations of reimbursement premiums or retentions (on the part of the FHCF); or
- Payments in excess of the project payout (on the part of the FHCF).

Q: In the event of an excess loss reimbursement or advance, will our company be penalized?

A: Interest will be charged on excess loss reimbursements based on the average rate earned by the SBA for the FHCF for the first four months of the applicable FHCF contract year. If the excess loss reimbursement is due to incorrect information provided by a company, interest will accrue at this rate plus 5%. Interest on advances, including excess advances, will be charged the prime rate as published in the Wall Street Journal on the first business day of the Contract Year (adjusted annually).

Q: We understand that the FHCF performs some “reasonableness” checks on POL filings prior to issuing reimbursements. What kind of errors have been detected in the past during this review?

A: On occasion, the checks have identified errors with a company’s exposure submission under the Data Call. However, more often, errors are related to incorrectly reported losses such as:

- Florida hurricane losses under policies not covered by the FHCF (commercial non-residential, auto, ex-wind, etc.);
- Florida hurricane losses under covered policies that aren’t covered by the FHCF (e.g., storm surge, but no wind damage; loss of rents on an apartment building);
- Residential losses in other states (e.g., Florida hurricane causes damage in Georgia as well);
- Non-hurricane losses occurring elsewhere in Florida within the same timeframe as a hurricane (e.g., hurricane damage in southern Florida, fire damage in Tallahassee); and
- Wind losses in another state (e.g., Texas wind loss) occurring within the same timeframe as Florida hurricane.

Q: Where are checks for loss reimbursements sent?

A: Per SBA policy, all advance and/or loss reimbursement checks are sent to the FHCF claims contact designated by the company on its notarized Company Contact Information form.

Retention

Q: How do I calculate our company’s retention for the mandatory FHCF coverage?

A: Your company’s retention is equal to its FHCF premium for the Contract Year in which the hurricane occurred times the applicable FHCF Retention Multiple (based on the coverage level elected by your company for the same Contract Year).

Your company’s final FHCF premium, assuming that your company has submitted timely, complete, and accurate exposure data as outlined in the Data Call applicable to the Contract Year in which the hurricane occurred, is mailed to your company no later than November 15th of each Contract Year. A listing of finalized premiums and selected coverage levels is also posted on-line at www.sbafla.com/fhcf under "Insurer Information" typically in early December. If your company plans to submit a Proof of Loss Report prior to the November billing, and your company has already sent in its Data Call submission, contact the FHCF Administrator at 800-689-3863 for information regarding your company's FHCF premium calculation.

Ultimate Net Losses

Q: What is the definition of Ultimate Net Losses?

A: As defined in the FHCF Reimbursement Contract, this term means a company's losses under FHCF Covered Policies for a specific hurricane (1) prior to the application of the company's FHCF retention and reimbursement percentage; (2) excluding loss adjustment expenses; and (3) net of salvages and all other recoveries, excluding reinsurance recoveries.

Q: Are Ultimate Net Losses net of our company's policy deductibles?

A: Yes. As your company would net a policyholder's $500 wind deductible against any claims payment(s) made to that policyholder, that $500 is not a loss to your company and should not be reported to the FHCF as Ultimate Net Losses.

SBA Examination – Loss Reporting

Q: What type of records must my company retain for loss reimbursement examinations?

A: Refer to the POL Report available on-line at www.sbafla.com/fhcf under " "Insurer Information" – "Current Year", for a list of items required to be retained.

Q: On the Detailed Claims Listing, is our company required to break out the paid losses for an individual claim by building, appurtenant structures, contents, and additional living expenses?

A: Yes. However, your company is not required to break out the outstanding losses to this level of detail.

Q: How long is our company required to retain the Detailed Claims Listing to support the POL?

A: The Detailed Claims Listing must be retained until the SBA has completed its examination of your company's claims and commutation for the Contract Year has been concluded.

Q: Will my company incur any penalties if it is discovered through an exam that we have reported loss data incorrectly?

A: If loss data is reported incorrectly, your company may be required to submit a new POL depending on the significance of the errors If, as a result of the corrected loss data, your company owes previously reimbursed funds back to the FHCF, interest will be charged on the excess reimbursement.

Q: If the SBA conducts an exam of our company's losses and we agree with an error that was uncovered during the exam, should we go ahead and file an updated POL with the corrections or wait until we receive the exam report?

A: Your company can voluntarily submit a corrected POL since interest charges may accumulate on any excess reimbursements.

Q: Can our company request an exit conference with the SBA to discuss the loss reimbursement exam findings?

A: Yes. This request should be sent to the SBA and a mutual time will be scheduled.

INFORMATION ONLINE

The FHCF is dedicated to making information pertaining to the FHCF as readily available as possible. As illustrated throughout this Handbook, the FHCF has posted a considerable amount of information on the Internet through both the SBA's FHCF website (www.sbafla.com/fhcf) and Paragon's FHCF website (http://fhcf.paragon.aonbenfield.com/). The following are sample documents/information available online:

- Annual Report
- Bonding Estimates
- Calendar
- Company Contact Information Form
- Coverage Selections & Premium Calculations
- Data Call
- Detailed Claims Listing Instructions
- Emergency Assessments
- Examination Information
- Frequently Asked Questions
- Link: FEMA
- Link: Florida Administrative Register
- Link: Florida Office of Insurance Regulation
- Link: Online Sunshine
- ListServ (join ListServ to receive automatic email updates regarding the FHCF)
- Loss Reimbursement Preparedness Program
- Loss Reports
- Online Claims Reporting
- Member Handbook
- Projected Payout Multiple
- Ratemaking Formula Report and Addenda, as applicable
- Rates and Retention Multiples
- Reimbursement Contract and Addenda, as applicable
- Rule 19-8.010: Reimbursement Contract
- Rule 19-8.012: Ineligibility/Exemption from the FHCF
- Rule 19-8.013: Revenue Bonds
- Rule 19-8.028: Reimbursement Premium Formula
- Rule 19-8.029: Insurer Reporting Requirements
- Rule 19-8.030: Insurer Responsibilities
- Rules: Current and Previous Contract Years
- Section 215.555, Florida Statutes
- Web Insurer Reporting Engine (*WIRE*)
- ZIP Codes, County Codes, & Rating Regions

SUMMARY

While this Handbook summarizes the key features of the FHCF based on current legislation, please note that the FHCF may be affected by changes to the legislation, as well as ongoing changes to the rules of the SBA. We would encourage companies to review current legislation and any rules applicable to issues affecting them.

Individuals listed in the directory on the next page may be contacted with specific questions about the FHCF.

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