

Ten Reform Proposals

Real Solutions. Not Campaign Promises.

Affordable and accountable property insurance for every Florida homeowner. All ten are specific, actionable policies that can be enacted and will produce direct benefits.

The three-way fix: Eliminating insurer vendor malfeasance significantly lowers homeowner premiums while improving restoration quality, improves insurer financial stability to attract first-tier carriers back to Florida, and reduces litigation by eliminating bad insurer vendor conduct.

PROPOSAL 01

Accountability

We believe insurers and their contractors must be held responsible for bad faith claims practices, with real penalties for wrongful denials, underpayments, delays, and substandard work. Florida passed SB 7052 (Insurer Accountability Law) with 100% bipartisan support. The rules mean nothing without enforcement.

- FLOIR should establish a dedicated SB 7052 compliance unit within 60 days of taking office, with a public compliance report within 120 days documenting carrier adherence, violations, and enforcement actions.
- The statutory penalty multiplier for confirmed bad faith claim denials should be raised.
- FLOIR should publish an annual Bad Faith Insurer Report naming carriers with denial rates above the state average.
- FLOIR should maintain a dedicated bad faith claims investigation unit with subpoena authority.
- A public online portal should allow policyholders to file and track bad faith complaints with mandatory insurer response timelines.
- A parallel enforcement pathway should exist for substandard restoration work — contractors and carriers whose work fails to meet IICRC or Florida statutory standards should face the same investigation and public reporting as bad faith claim denials.

PROPOSAL 02

Public Transparency

We believe full public disclosure of insurer financial health, claims denial rates, and political contributions by property insurer lobbyists is essential. Nothing that follows is credible without an honest accounting of what is actually happening in this market.

- A quarterly Florida Insurer Scorecard should be published on the FLOIR website covering solvency ratings, denial rates, complaint ratios, and political contributions.
 - All insurers operating in Florida should disclose reinsurance arrangements and offshore affiliate transactions annually.
 - All third-party claims administrators operating on behalf of Florida insurers should be publicly disclosed.
 - OIR should establish a 60-day rate filing review timeline with a mandatory decision, giving carriers the regulatory predictability that attracts private capital back to Florida.
 - Transparency and accountability should be pursued alongside a commitment to market balance. Insurer obligations and insurer viability are complementary goals, not competing ones.
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PROPOSAL 03

Policyholder Protection

We believe consumer rights in the claims process must be strengthened, including independent appraisal, faster resolution timelines, and accessible appeals. Every Florida homeowner deserves a fair fight.

- Every policyholder should have the right to an independent appraisal at no upfront cost when a claim is disputed.
 - The mandatory claims acknowledgment window should be reduced from 14 days to 7 days, with payment or denial required within 60 days.
 - A free FLOIR Policyholder Advocate office should assist homeowners navigating disputed claims without an attorney.
 - Insurers should be required to provide a written denial explanation citing specific policy language for every rejected claim.
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PROPOSAL 04

Market Integrity

We believe the revolving door between insurance industry lobbyists and state regulatory appointments must end. Regulatory capture is the root cause of this crisis. Florida homeowners are paying the price for a system designed to serve the industry it is supposed to police.

- A five-year cooling off period should bar former insurance industry lobbyists from serving in FLOIR leadership roles.
 - All communications between OIR staff and insurance industry representatives should be publicly disclosed.
 - All active consent orders and settlement agreements with insurers should be audited and reported on within 90 days.
 - An independent inspector general for the Office of Insurance Regulation should be established.
 - Litigation reform targeting contractor fraud and assignment of benefits abuse should be supported while preserving all legitimate policyholder rights to legal representation and dispute resolution.
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PROPOSAL 05

Citizens Property Insurance Reform

We believe Citizens Property Insurance Corporation should be restored to its intended role as an insurer of last resort. Before the private market can be fixed, what the state itself created must be fixed first.

- Citizens should publish full board meeting minutes, executive compensation, and operating financials quarterly on a public dashboard.
 - Any Citizens policyholder offered a private market alternative should receive a written side-by-side comparison of coverage terms, exclusions, and the replacement carrier's financial rating before depopulation proceeds. Forced takeouts into materially inferior coverage should be prohibited.
 - An independent actuarial review of Citizens' rate-setting methodology should be commissioned and published publicly.
 - Any private insurer participating in Citizens depopulation should maintain a minimum verified solvency rating and sufficient reinsurance.
 - A Citizens Policyholder Bill of Rights should give homeowners the right to reject any depopulation offer without penalty if the replacement carrier fails to meet minimum standards.
 - All Citizens claims involving water damage or mold should be assessed and remediated by licensed, insured contractors in full compliance with industry standards, Florida law, and the Florida Building Code.
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PROPOSAL 06

Florida Catastrophic Fund Reform

We believe the Florida Hurricane Catastrophe Fund should be reformed to ensure payouts reach homeowners quickly, that restoration funded by Cat Fund proceeds meets professional standards, and that the fund's management is subject to the same transparency demanded of private insurers.

- Cat Fund distribution timelines following recent storm events should be audited and published, establishing the gap between fund payout and homeowner recovery.
- Any restoration funded by Cat Fund reimbursements should comply with IICRC S500 and IICRC S520 standards.
- Mandatory Cat Fund disbursement timelines should be established. Carriers receiving Cat Fund reimbursements should pass payments through to policyholders within 30 days or face FLOIR penalties.
- The Florida Hurricane Catastrophe Fund should publish annual financial statements, actuarial assumptions, reinsurance arrangements, and board compensation on a public dashboard.
- A Cat Fund premium credit mechanism should reward carriers that demonstrate faster claims resolution and IICRC-compliant restoration outcomes.
- Legislation expanding Cat Fund capacity should be supported in exchange for carrier commitments to maintain Florida market participation for a minimum of three years following a Cat Fund draw.

PROPOSAL 07

Affordability

We believe rate transparency and independent rate review are essential to ensure premiums reflect actual risk, not industry profit targets. The market incentives that bring private capital back to Florida must serve homeowners, not just investors.

- Insurers should be required to file loss ratios, reinsurance costs, and executive compensation alongside every rate increase request.
- An independent Office of Insurance Rate Review, insulated from industry influence, should have authority to reject or reduce rate filings that cannot be justified by actuarial data.
- Insurers should provide homeowners a plain language explanation of every premium increase within 30 days of implementation.
- The top ten property insurers should be audited annually for premium overcharges, with results published publicly.
- A state catastrophic reinsurance facility should absorb tail risk after major storm events, reducing the reinsurance cost that is the single largest driver of premium increases for Florida homeowners.
- A Florida Residential Insurance Stability Compact should reward carriers that commit to minimum three-year policy terms with priority access to the state reinsurance pool and expedited rate review.

PROPOSAL 08

Restoration, Inspection and Quality Assurance Standards

We believe all property damage restoration must follow established industry standards and the Florida Building Code. Insurers should not be permitted to require or incentivize substandard work as a condition of claim approval. Proper restoration is not optional.

- Insurers that systematically approve substandard restoration should be referred to the Attorney General for consumer protection review.
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PROPOSAL 09

Community Advocacy

We believe FLOIR should serve as an open civic platform documenting the most common insurance problems facing Florida homeowners, providing practical guidance, and holding out of control insurer vendors accountable. Reform without a movement does not last. Every homeowner deserves both a resource and a voice.

- A FLOIR-sponsored Florida Homeowner Resource Center should provide free, plain language guidance on claims, appeals, and policyholder rights.
- An annual Florida Insurance Accountability Summit should bring together homeowners, adjusters, legislators, and consumer advocates.
- A Legislator Insurance Scorecard published by FLOIR should rate every Florida legislator on their insurance reform voting record.
- FLOIR should hold at least four regional town halls per year in high claim density counties to hear directly from affected homeowners.
- A Florida Insurance Victims Registry through savemyhomeflorida.org should serve as a public, searchable archive of homeowner stories documenting claims abuse, carrier abandonment, and restoration fraud, routed to FLOIR enforcement, the Attorney General, or pro bono legal networks where actionable.

PROPOSAL 10

Insurance Victims Fund

We believe hundreds of thousands of Florida families who paid premiums, filed legitimate claims, and were denied, underpaid, or abandoned by carriers the state licensed and failed to police deserve more than a hotline.

- FLOIR should design and propose a Florida Insurance Abuse Restoration Fund, a dedicated compensation pool for homeowners with verified claims of bad faith denial, systematic underpayment, or abandonment by carriers subsequently sanctioned or rendered insolvent. Fund design, eligibility standards, and capitalization should be published within 120 days of taking office.
- The Fund should be capitalized through five sources that impose no new costs on Florida homeowners or solvent carriers: bad faith penalty assessments; market conduct settlement proceeds; unclaimed insurance assets; Cat Fund surplus earnings in low-claim years; and a one-time legislative seed appropriation acknowledging the state's failure to protect the homeowners it licensed these carriers to serve.
- An independent Fund administrator, insulated from political appointment, should manage a published claims process with defined eligibility criteria and a maximum 180-day adjudication timeline.
- The FLOIR Policyholder Advocate office should actively assist verified victims in preparing and submitting Fund claims at no cost.
- An annual Fund Report should name every carrier whose conduct generated Fund claims, the total compensation paid to their victims, and the enforcement actions taken against them. The report should be public, permanent, and searchable.
- Every carrier or carrier vendor whose pattern of abuse generated three or more verified Fund claims should be referred to the Attorney General for civil consumer protection action.