



Ten Reform Proposals

Policy, Not 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.

The premise. Florida's property insurance problem is not fixed by taking accountability away from carriers, which is what the 2022 changes did. It is fixed by requiring insurers and, critically, insurer vendors to comply with the laws and professional standards already on the books. Most of the cost abuse sits with vendors who overcharge and, at the same time, fail to meet the legal standards the work is supposed to meet.

This should draw bipartisan support. Nothing here is partisan. Homeowners in every party pay these premiums and file these claims, and the recent precedent is unambiguous: SB 7052, the Insurer Accountability Act, passed both chambers unanimously in 2023 and was signed by the Governor. Florida does not lack agreement that insurers should be held to their contracts. What is missing is enforcement of the law already on the books.

The sequence is deliberate. Accountability enforces everything else, so it leads. Transparency establishes the truth and Market Integrity names the cause. Citizens and the Catastrophe Fund address the state's own broken promise. Affordability, Policyholder Protection and Restoration Standards address what homeowners actually feel. Community Advocacy turns reform into a movement, and the Insurance Victims Fund makes it personal.

01

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.

- Enforce SB 7052 as written. It is already law; the gap is enforcement, not legislation.
- FLOIR should establish a dedicated SB 7052 compliance unit 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.
- The Department of Financial Services (DFS) 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 Florida statutory standards should face the same investigation and public reporting as bad faith claim denials.

02

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 (Florida Office of Insurance Regulation) website covering solvency ratings, denial rates, complaint ratios, and political contributions.
 - A searchable public database of insurer political contributions to Florida candidates and PACs should be maintained.
 - All insurers should disclose reinsurance arrangements and offshore affiliate transactions annually.
 - Payments to outside counsel should be audited — how much goes out, and how much comes back, off-book, as referral fees to insurers or insurer lobbyists and then as political contributions.
 - FLOIR should establish a 60-day rate filing review timeline with a mandatory up-or-down 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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03

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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04

PROPOSAL 04

Market Integrity

We believe the revolving door between insurance industry lobbyists and state regulatory appointments must end. Regulatory capture is a 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 or DFS leadership roles.
- All communications between FLOIR staff and insurance industry representatives should be publicly disclosed.
- All active consent orders and settlement agreements with insurers should be audited and reported on, including compliance status.
- An independent inspector general for FLOIR should be established.

- Litigation reform targeting contractor fraud — the documented exit reason for multiple carriers — should be supported while preserving all legitimate policyholder rights to legal representation and dispute resolution.
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05

PROPOSAL 05

State-Owned Citizens Property Insurance Reform

We believe Citizens Property Insurance Corporation (CPIC) should be restored to its intended role as an insurer of last resort, and as a serious participant in difficult, hurricane-exposed coastal markets. These coastal markets are where much of Florida's growth is, and there is no reason that fairly priced quality coverage cannot be made affordable. 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, ending the opacity that lets political appointees run Citizens as a patronage vehicle rather than a public trust.
 - Eliminate the forced takeout (depopulation) program.
 - Publish historic rate increases resulting from the depopulation program. Many homeowners report that premiums escalate sharply once the first-year 20% cap no longer applies.
 - An independent actuarial review of Citizens' rate-setting methodology should be commissioned and published publicly, establishing whether rates reflect actual Florida risk or artificially suppressed premiums to mask market dysfunction.
 - All Citizens claims involving water damage or mold should be assessed and remediated by licensed, insured contractors in full compliance with Florida law and the Florida Building Code. Citizens cannot approve, fund, or direct restoration that does not meet those standards; compliance is audited annually and published.
 - The Citizens Managed Repair Program is strictly focused on water damage restoration.
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06

PROPOSAL 06

Florida Catastrophic Fund

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 the last three 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 Florida law. Carriers cannot use Cat Fund proceeds to fund substandard work; those that do face market conduct action.
 - 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 standards-compliant restoration outcomes — a direct financial incentive for good claims behavior.
 - 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, linking public backstop access to private market stability.
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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 voluntary 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.
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Restoration, Inspection and Quality Assurance Standards

We believe all property damage restoration must follow Florida Mold and Water Damage Laws and the Florida Building Code. Insurers should not be permitted to require or incentivize substandard work. Proper restoration is not optional — it is the difference between a repaired home and a health hazard.

- SB 7052 requires that all carriers have Claims-Handling Manuals that comply with Florida laws and standards. Enforce this law.
 - The Attorney General should provide an example compliant Claims-Handling Manual.
 - Insurers that systematically approve substandard restoration should be referred to the Attorney General for legal review.
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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 public FLOIR record of legislative action on property insurance reform — bills filed, votes taken, and outcomes — should be maintained and published each session.
- 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 could serve as a public, searchable archive of homeowner stories documenting claims abuse, carrier abandonment, and restoration fraud, reviewed and routed to FLOIR enforcement. Stories meeting evidentiary standards are included in the annual Bad Faith Insurer Report and used in legislative testimony.

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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 for public comment.
- The Fund should be capitalized through five sources that impose no new costs on Florida homeowners or the State: bad faith penalty assessments; market conduct settlement proceeds; unclaimed insurance assets redirected before escheat; penalties paid by malfeasant contractors; 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, so the families who need it most are not blocked by paperwork.
- 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 — a direct pipeline from victim compensation to carrier accountability.
- The Fund and FLOIR complaint processes should give priority handling to claims involving vulnerable adults — under Florida Statute § 415.102, any senior aged 60+ or disabled adult 18+ whose ability to perform daily living activities is impaired.