INSURER COMPLIANCE REPORT

April 30, 2025

FLORIDA OFFICE OF Insurance Regulation

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Insurance Commissioner

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Purpose and Scope

Pursuant to section 624.315(4), Florida Statutes, the Florida Office of Insurance Regulation (OIR or office) shall:

Create a report detailing all actions of the office to enforce insurer compliance with this code and all rules and orders of the office or department during the previous year. For each of the following, the report must detail the insurer or other licensee or registrant against whom such action was taken; whether the office found any violation of law or rule by such party, and, if so, detail such violation; and the resolution of such action, including any penalties imposed by the office. The report must be published on the website of the office and submitted to the commission, the President of the Senate, the Speaker of the House of Representatives, and the legislative committees with jurisdiction over matters of insurance on or before January 31 of each year. The report must include, but need not be limited to:

1. *The revocation, denial, or suspension of any license or registration issued by the office.*
2. *All actions taken pursuant to s. 624.310.*
3. *Fines imposed by the office for violations of this code.*
4. *Consent orders entered into by the office.*
5. *Examinations and investigations conducted and completed by the office pursuant to ss. 624.316 and 624.3161.*
6. *Investigations conducted and completed, by line of insurance, for which the office found violations of law or rule but did not take enforcement action.*

Each quarter, the office shall create a report detailing all actions of the office to enforce insurer compliance during the previous quarter. The report must include, but need not be limited to, the subjects that must be included in the annual report under paragraph (a). The report must be submitted to the commission, the President of the Senate, the Speaker of the House of Representatives, and the legislative committees with jurisdiction over matters of insurance. The report is due on or before April 30, July 31, October 31, and January 31, respectively, for the immediately preceding quarter. The report due January 31 may be included within the annual report required under paragraph (a).

The office need not include within any report required under this subsection information that would violate any confidentiality provision included within any agreement, order, or consent order entered into or adopted by the office.

Organization of the Report

OIR is responsible for all activities concerning insurers and other risk bearing entities, including licensing, rates, policy forms, market conduct, claims, issuance of certificates of authority, solvency, viatical settlements, premium financing, and administrative supervision, as provided under the Florida Insurance Code or Chapter 636, Florida Statutes. 3 This report details market conduct actions taken by OIR's property and casualty and life and health market regulation and financial oversight business units against regulated entities during calendar year 2024.

Prior OIR updates are available here.

Regulated Entities License

The revocation, denial, or suspension of any license or registration issued by the office

During the first quarter of 2024, OIR did not issue any orders of revocation, denial, or suspension of any license or registration issued by OIR.

All Actions Taken Pursuant to s. 624.310, F.S.

During the first quarter of 2025, OIR did not identify or initiate any investigations for companies reported as operating as an unlicensed entity. Previous consent orders issued against unlicensed entities are available on OIR's website here.

Fines

Fines imposed by the office for violations of this code

Fines imposed against insurers serves as a market regulation penalty following an examination or investigation. Section 624.4211(1), F.S., provides that if OIR finds that one or more grounds exist for the discretionary revocation or suspension of a certificate of authority issued under Chapter 624, F.S. OIR may, in lieu of such revocation or suspension, impose a fine upon the insurer. Upon examination, a violation of the Code could result in any of the following:

- For nonwillful violations, OIR may issue fines up to $25,000 per violation, up to an aggregate amount of $100,000 for all nonwillful violations arising out of the same action, related to a covered loss or claim caused by an emergency for which the Governor declared a state of emergency pursuant to s. 252.36, F.S.
- For all other nonwillful violations arising out of the same action, OIR may issue fines up to $12,500 per violation, up to an aggregate amount of $50,000.
- For knowing and willful violations of a lawful order or rule of the office or commission or a provision of this code, OIR may impose a fine upon the insurer up to $200,000 for each such violation, up to an aggregate amount of $1 million for violations arising out of the same action, related to a covered loss or claim caused by an emergency for which the Governor declared a state of emergency pursuant to s. 252.36, F.S.
- For all other knowing and willful violations arising out of the same action, OIR may issue fines up to $100,000 per violation, up to an aggregate amount of $500,000.

During the first quarter of 2025, OIR issued fines to 12 insurers. Details for each fine are available below:

Company	Violation	Line of Insurance	Fine Imposed	Consent Order
Accredited Surety and Casualty Company, Inc.	Did not timely file the Private Passenger	Property & Casualty	$6,000	Case No. 400179-24-CO

	Automobile Excessive Profits Report pursuant to section 627.915(1), F.S.			
Canada Life Assurance Company (US Business of the)	Did not timely file the 2023 Gross Annual Premium Report pursuant to section 627.9175, F.S.	Life & Health	$12,500	Case No. 400065-24-CO
Centene Venture Company Florida	Used an unlicensed insurance administrator in violation of s. 626.8817(2), F.S.	Life & Health	$10,000	Case No. 400622-24-CO
DST Pharmacy Solutions Inc.	Did not timely file the Quarterly Pharmacy Benefit Manager Appeals and Denials Report pursuant to section 626.8825(3)(h)5., F.S.	Life & Health	$6,250	Case No. 400474-24-CO
Empower Annuity Insurance Company	Did not timely file the 2023 Gross Annual Premium Report pursuant to section 627.9175, F.S.	Life & Health	$12,500	Case No. 400063-24-CO
Empower Annuity Insurance Company of America	Did not timely file the 2023 Gross Annual Premium Report pursuant to section 627.9175 F.S.	Life & Health	$12,500	Case No. 400064-24-CO
Gleaner Life Insurance Society	Did not timely file the 2023 Gross Annual Premium Report pursuant to	Life & Health	$12,500	Case No. 400061-24-CO

	section 627.9175 F.S.			
Guardian Life Insurance Company of America	Used an unlicensed insurance administrator in violation of section 626.8817(2), F.S.	Life & Health	$10,000	Case No. 400621-24-CO
Philadelphia Indemnity Insurance Company	Did not timely file the Private Passenger Automobile Excessive Profits Report pursuant to section 627.915(1), F.S.	Property & Casualty	$12,500	Case No. 400180-24-CO
Plaza Finance Corp.	Violation of one or more provisions of the Florida Insurance Code; tri-annual market conduct examination pursuant to section 627.834, F.S.	Premium Finance	$200	Case No. 400826-25-CO
Solis Health Plans, Inc.	Did not timely file the Quarterly Comprehensive Health Report pursuant to section 641.27, F.S.	Life & Health	$6,250	Case No. 400475-24-CO
Variable Annuity Life Insurance Company	Did not timely file the 2023 Gross Annual Premium Report pursuant to section 627.9175, F.S.	Life & Health	$12,500	Case No. 400070-24-CO

Monetary Restitution

In the first quarter of calendar year 2025, OIR required insurers to return $660,457.69 in monetary restitution directly to Florida consumers in addition to completing other corrective actions upon conclusion of market conduct investigations and examinations.

Examinations and Investigations

Examinations and investigations conducted and completed by the office pursuant to ss. 624.316 and 624.3161

Market Conduct Examinations

Company	Line of Insurance
American Strategic Insurance Corp.	Property & Casualty
Celtic Insurance Company	Life & Health
Hartford Insurance Company of the Midwest	Property & Casualty
Northern Investors Company Inc.	Property & Casualty
Oscar Insurance Company of Florida	Life & Health
Plaza Finance Corp.	Property & Casualty
Truck Insurance Exchange	Property & Casualty

Market Conduct Investigations

Company	Line of Insurance
Accredited Surety and Casualty Company, Inc.	Property & Casualty
Canada Life Assurance Company (US Business of the)	Life & Health
Centauri Specialty Insurance Company	Property & Casualty
Centene Venture Company Florida	Life & Health
DST Pharmacy Solutions Inc.	Life & Health
Empower Annuity Insurance Company	Property & Casualty
Empower Annuity Insurance Company of America	Property & Casualty
Gleaner Life Insurance Society	Life & Health
Guardian Life Insurance Company of America	Life & Health
Heritage Property & Casualty Insurance Company	Property & Casualty
Philadelphia Indemnity Insurance Company	Property & Casualty
Solis Health Plans, Inc.	Life & Health
Variable Annuity Life Insurance Company	Life & Health

Investigations with Violations of Law or Rule

Investigations conducted and completed, by line of insurance, for which the office found violations of law or rule but did not take enforcement action

None during the reporting period.

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