

Florida Office of Insurance Regulation



2005 Workers' Compensation Annual Report

January 2006

Business Development & Market Research

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Executive Summary

Subsection 627.211(6), F.S. mandates that the Office of Insurance Regulation (OIR) provide an annual report to the President of the Senate and the Speaker of the House of Representatives which evaluates competition in the workers' compensation market in the state. The report is to contain an analysis of the availability and affordability of workers' compensation coverage and whether the current market structure, conduct and performance are conducive to competition, based upon economic analysis and tests. The report must also document that OIR has complied with the provisions of Sec. 627.096, F.S., which require the office to investigate and study the data, statistics, schedules, or other information as it finds necessary to assist in its review of workers' compensation rate filings.

As mandated, the analysis presented in this report finds the following:

1. Based on a variety of economic measures, the workers' compensation market appears to be reasonably competitive.
 - a. The concentration of insurers suggests that the market for workers' compensation in Florida contains a large number of independent firms.
 - b. None of the firms have enough of the market to exercise any meaningful control over the price of workers' compensation.
 - c. The Herfindahl-Hirschman Index indicates that the market is not concentrated.
 - d. There are no significant barriers for the entry and exit of insurers into the Florida workers' compensation market.
 - e. Based on entries and voluntary withdrawals, it would seem that the Florida workers' compensation market is an attractive market for insurers.
2. The number of actively writing insurers and the competitive analysis indicates that coverage should be generally available in the voluntary market. The residual market is small, suggesting that the voluntary market is absorbing the vast majority of demand.
3. There appear to be some availability issues remaining in the voluntary market for certain employer groups such as small firms, new firms, and construction firms. While not without risk, Professional Employer Organizations (PEOs) continue to be a factor in making workers' compensation coverage available to these groups.
4. Affordability, particularly with the Florida Workers' Compensation Joint Underwriting Association, Inc. (FWCJUA), which is the residual market, has been an on-going issue. Recently enacted legislative changes, Senate Bill 50-A in

2003 and House Bill 1251 in 2004, have addressed affordability in the voluntary and residual market respectively and both are having beneficial results.

5. A number of issues remain to be addressed for the FWCJUA:
 - a. Currently, the tier 1 and tier 2 rates for most employers are more affordable than the previous sub-plans A, B and C. However, on January 1, 2007 the rates for tiers 1 and 2 are to be “actuarially sound rates”. Since the “below the line” assessments end on July 1, 2007, there will be no funding mechanism for deficits in tiers 1 and 2. This will undoubtedly require very conservative actuarial assumptions to prevent any deficit. This can only mean higher rates. The Florida Legislature should consider extending or eliminating the July 1, 2007 expiration date of the “below the line” assessments for tiers 1 and 2 in order to keep these rates at a more reasonable level.
 - b. A thorough study should be made of the FWCJUA statutory requirements and operation in comparison to other states to identify the reasons that Florida’s residual market premiums are much higher than other states.
6. There are a number of mechanisms used by insurers to compete in the workers’ compensation marketplace including both price and non-price components. The biggest difference between the Florida workers’ compensation insurance market and other states generally is the amount of price competition in basic rates (i.e. deviations).
7. The OIR is in compliance with the requirements of Sec. 627.096, F.S.

Purpose and Scope

Subsection 627.211(6), Florida Statutes mandates that:

The office shall submit an annual report to the President of the Senate and the Speaker of the House of Representatives by January 1 of each year which evaluates competition in the workers' compensation insurance market in this state. The report must contain an analysis of the availability and affordability of workers' compensation coverage and whether the current market structure, conduct, and performance are conducive to competition, based upon economic analysis and tests. The purpose of this report is to aid the Legislature in determining whether changes to the workers' compensation rating laws are warranted. The report must also document that the office has complied with the provisions of s. 627.096 which require the office to investigate and study all workers' compensation insurers in the state and to study the data, statistics, schedules, or other information as it finds necessary to assist in its review of workers' compensation rate filings.

To accomplish these objectives, this report provides analysis of the following areas:

- 1.) The competitive structure of the workers' compensation market in Florida by comparing financial operating ratios, the numbers of entities and their respective market positions, and the number of entities entering and exiting the market.
- 2.) The availability and affordability of workers' compensation insurance in Florida; This includes an analysis of rate increases in Florida's admitted market, as well as the rating structure extant in the Workers' Compensation JUA.
- 3.) The market structure in Florida, which includes the market concentration in Florida compared with other states, the growth of leading companies, and entry and exit of carriers in Florida during 2004.
- 4.) Documentation of the OIR's compliance with Section 627.096, Florida Statutes by investigating all workers' compensation carriers operating in Florida.

Summary of the 2004 Annual Report

The 2004 Workers' Compensation Annual Report was the first report resulting from the statutory mandate, and concluded that the workers' compensation market is reasonably competitive. Specifically, the report showed that, during 2003:

- Florida's workers' compensation insurance market contains a large number of independent firms.
- None of the above mentioned firms had enough market share to individually exercise market control in an uncompetitive nature.
- The Herfindahl-Hirschman Index indicated that Florida's market was not overly concentrated, and consequently exhibited a reasonably competitive market.
- There were no significant barriers for entry and exit of insurers into and from the Florida workers' compensation insurance market.
- Based on the number of entries and voluntary withdrawals, Florida workers' compensation insurance market was a viable market for private insurers in 2003.
- The residual market is small relative to the private market indicating that the voluntary market offers reasonable availability.
- There may be some small segments of the market that may have difficulty obtaining workers' compensation insurance including small firms and new firms.

The 2005 Workers' Compensation Annual Report continues to examine the areas identified above, but also adds another component in the study: a comparison of Florida's workers' compensation insurance market with the other 50 states.

Overview of the Workers' Compensation Insurance Market

To provide context for the analysis in this Annual Report, it is useful to compare Florida's workers' compensation insurance market to the workers' compensation markets in other states in order to compare availability, affordability, and competitiveness in the Florida market.

An initial challenge in structuring this analysis is that the 50 states all have different regulatory structures regarding the provision of workers' compensation insurance. To address these differences, this report relies heavily on information from two sources.

One important organization that affects the nationwide pricing and rating structure is the National Council on Compensation Insurance, Inc (NCCI). This organization is the largest single source of information on workers' compensation, and is used as a major data source for much of this study. The National Association of Insurance Commissioners (NAIC) also collects financial data for admitted carriers, and the NAIC financial databases are also used throughout this report.

In 2004, the NCCI provided advisory ratemaking and statistical services in 33 states (including Florida) and the District of Columbia.¹ In 12 of the states, local ratemaking or advisory organizations supplied the information.² However, in the following six states and territories, the jurisdictions have an exclusive state fund³:

- North Dakota
- Ohio
- Puerto Rico
- Washington
- West Virginia
- Wyoming

¹ NCCI, Annual Statistical Bulletin, 2005 Edition. Page 4.

² NCCI, Annual Statistical Bulletin, 2005 Edition. Page 4.

³ NCCI, Annual Statistical Bulletin, 2005 Edition. Page 4.

As a result, many of the comparisons made in this report only compare the 45 states with an active private market.

Self-Insurance Funds

In addition to the private market composed of admitted carriers and the residual market evidenced by the JUA, workers' compensation insurance is also provided through self-insurance funds.

“Self-Insurance” groups are a broadly defined group of entities that include group self-insurance funds, commercial self-insurance funds and assessable mutuals. By the early 1990s, self-insurance funds were a dominant part of the Florida workers' compensation insurance market, capturing more than half of the voluntary market. Legislative reforms in 1993 transferred the regulation of group self-insurance to the Department of Insurance, which later became the Office of Insurance Regulation (OIR). This legislative change occurred concurrently with the formation of the Florida Workers' Compensation Joint Underwriting Association, Inc. (FWCJUA). Together, these two changes transformed the Florida workers' compensation insurance market as self-insurance funds began converting into insurance companies. In 1994 there were 35 defined self-insurance funds, but by 2000 there were only four of these entities. During 2004, there continues to be four group self-insurance funds:

- Florida Rural Electric Self-Insurers Fund
- Florida Retail Federation Self-Insurers Fund
- FRSA Self-Insurers Fund
- Florida Citrus, Business & Industries Fund

All four of these entities are domiciled in Florida, write exclusively in Florida, and together these Self-Insurance Funds (SIFs) represent only 6% of the workers' compensation insurance market in Florida.

National Comparisons

The first part of the analysis is to provide an overview of the relative size of different state workers' compensation markets. In order to facilitate subsequent comparisons, the analysis focuses on the 45 states and District of Columbia that have a viable private market, and excludes SIFs.

As expected, there is a strong correlation between state population and workers' compensation insurance written premiums. Below are the 10 states that wrote the most workers' compensation insurance in 2004:

Rank	State	2004 Written Premium
# 1	California	\$16.1 billion
# 2	New York	\$ 3.5 billion
# 3	Florida	\$ 3.4 billion
# 4	Texas	\$ 2.7 billion
# 5	Illinois	\$ 2.4 billion
# 6	Pennsylvania	\$ 2.1 billion
# 7	New Jersey	\$ 1.6 billion
# 8	Wisconsin	\$ 1.6 billion
# 9	Michigan	\$ 1.3 billion
# 10	North Carolina	\$ 1.1 billion

The table shows that there is not a direct correlation between state population and premium in the admitted market as Florida is, by population, the fourth largest state, yet ranked third in the most workers' compensation insurance premium written in 2004. The most populous state missing from the list is Ohio, which is the seventh largest state by population, but has a state workers' compensation insurance pool.

Number of Entities

Another indication of the competitiveness of the market is the number of different insurance companies writing in the state. Using the same criteria as above, the 45 states with a voluntary market have between 118 (Alaska) to 295 (Georgia) entities operating in

their state, with the median state having 217 entities. The states with the most entities writing workers' compensation insurance in 2004 include:

Rank	State	Entities
# 1	Georgia	295
# 2	Illinois	290
# 3	Indiana	285
# 4	Pennsylvania	282
# 5	Tennessee	269
# 6	Virginia	261
# 7	Wisconsin	259
# 8	North Carolina	252
# 9 tie	Maryland	242
# 9 tie	Missouri	242
# 17 tie	Florida	230

Although Florida is not among the top 10 states in the number of companies writing workers' compensation in the voluntary market, it does rank above the median, and with 230 private carriers (plus four self-insurance funds) would appear to have results consistent with a competitive marketplace.

Written Premium per Entity

Another useful comparison measure is the average amount of premium per entity. As shown below, Florida ranks second (virtually tied with New York) in the average premium per insurance entity:

Rank	State	Premium per Entity
# 1	California	\$73.9 million
# 2	Florida	\$14.6 million
# 3	New York	\$14.5 million
# 4	Texas	\$11.6 million
# 5	Illinois	\$8.4 million
# 6	Pennsylvania	\$7.6 million
# 7	New Jersey	\$6.7 million
# 8	Wisconsin	\$6.0 million
# 9	Massachusetts	\$5.5 million
# 10	Michigan	\$5.4 million

This comparison suggests that there are fewer “small” competitors in Florida than are present, on average, in most other states. The analysis above closely mirrors the first table showing the biggest voluntary workers’ compensation markets in the country. Only Massachusetts (#9) is new to the list of states with the largest premium per company ratios; in general, states with the largest average premium per company are also states with the most premium. This high correlation indirectly shows that there is not much dispersion in the number of entities operating in each state. To truly measure the competitive aspects of state market structures, the Herfindahl-Hirschman Index (HHI) may be a preferable measure.

Herfindahl-Hirschman Index Comparison by State

The Herfindahl-Hirschman Index (HHI) is a calculation constructed to determine market concentration. This ratio first appeared in A.O. Hirschman’s *National Power and Structure of Foreign Trade* published in 1945. Hirschman limited its usage to export/import trade. O.C. Herfindahl applied the concentration index to industries in his Ph.D. dissertation in 1950.

The calculation is straightforward. The measured market share of every company operating in the market is squared. The highest index value is then defined as 10,000 (100% squared --- a monopoly), and the lowest outcome is close to zero. The U.S. Department of Justice (DOJ) uses this index when researching acquisitions and mergers for compliance with the anti-trust legislation most notably, the Sherman Anti-trust Act of 1890. DOJ considers a result of less than 1,000 to be a “competitive” marketplace. Results of 1,000 to 1,800 are considered “moderately concentrated.” Results of greater than 1,800 are considered “highly concentrated,” and consequently, not very competitive. These ranges are not necessarily relevant to lines of insurance business, but serve as a benchmark.

For the purposes of this report, comparing the HHI among states is difficult as the data for the self-insurance trust funds for other states must be calculated. Moreover, some states have their state funds reporting to the NAIC. Some states, such as Florida

with its Florida Workers' Compensation Fund, do not. The report includes a calculation of Florida's HHI with and without the SIFs included.

A comparison of the HHI for the admitted market shows only the states listed below to be the most concentrated. The state ranked # 1 is the most concentrated, and conversely, least competitive, all else equal. Again, the five states with the state pools have been excluded:

HH Index 1,800 or Greater						
Rank	State	HH Index		Rank	State	HH Index
# 1	Rhode Island	5,344		# 7	Oregon	3,376
# 2	Maine	4,250		# 8	California	2,677
# 3	Idaho	4,191		# 9	New York	2,000
# 4	Utah	3,851		# 10	Montana	1,925
# 5	Colorado	3,789		# 11	Alaska	1,839
# 6	Arizona	3,575				

HH Index 1,000 to 1,800						
# 12	Louisiana	1,354		# 13	Maryland	1,256

HH Index under 1,000						
# 14	New Mexico	940		# 30	Florida	361
# 15	Kentucky	922		# 31	Delaware	325
# 16	Hawaii	899		# 32	Nebraska	291
# 17	Michigan	867		# 33	Minnesota	290
# 18	Texas	856		# 34	Iowa	246
# 19	Nevada	634		# 35	Wisconsin	239
# 20	New Jersey	559		# 36	South Carolina	235
# 21	South Dakota	545		# 37	Alabama	228
# 22	Missouri	465		# 38	North Carolina	225
# 23	Vermont	457		# 39	Georgia	223
# 24	New Hampshire	452		# 40	Illinois	220
# 25	Mississippi	430		# 41	Virginia	211
# 26	Kansas	426		# 42	Tennessee	207
# 27	Oklahoma	411		# 43	Connecticut	206
# 28	Massachusetts	395		# 44	Indiana	181
# 29	Arkansas	371		# 45	Pennsylvania	164

With an HHI of 361 in 2004, the Florida workers' compensation insurance market ranks among the more competitive within the sample states. This does not change if the SIFs are included; the HHI for Florida including the SIF's is 337.

Dominant Firms and Competition

Including the 5 states where workers' compensation is offered solely by the state operated funds means that, in 2004 there were 16 states with highly concentrated (i.e. noncompetitive markets). Two states have moderately competitive markets, while the majority of states, 32 including Florida, exhibit the properties consistent with a competitive market for workers' compensation when measured against the Department of Justice parameters.

There does appear to be some correlation between highly concentrated markets and geography as 11 of the 16 states that have highly concentrated markets are in the West: 1) Alaska, 2) Arizona, 3) California, 4) Colorado, 5) Idaho, 6) Montana, 7) North Dakota (state fund), 8) Oregon, 9) Utah, 10) Washington (state fund); and 11) Wyoming (state fund). Interestingly none of the states with a highly concentrated workers' compensation insurance market are in the South, and Florida's closest neighbor with an uncompetitive market is West Virginia which has a state fund.

One reason that several states exhibit high HHI values is that they have one dominant competitor; most often a state fund, but sometimes a private sector company. The list below provides the leading market share of the entities in those states with significantly high HHI values:

State	Leading Carrier	Market Share
North Dakota	State Fund Only	100%
Ohio	State Fund Only	100%
Washington	State Fund Only	100%
West Virginia	State Fund Only	100%
Wyoming	State Fund Only	100%
Rhode Island	Beacon Mutual Ins. Co.	73%
Maine	Maine Employers Mutual Inc. Co.	65%
Idaho	Idaho State Insurance Fund	61%
Utah	Workers' Comp Fund	62%
Colorado	Pinacola Assurance Co.	61%

Arizona	Arizona Compensation Fund	59%
Oregon	SAIF Corp.	55%
California	State Compensation Fund	51%
New York	State Insurance Fund	44%
Montana	Liberty Mutual Ins. Corp.	42%
Alaska	Alaska National Insurance Co.	37%

By contrast, Florida's largest carrier is the Bridgefield Employers Insurance Co. which has 12.0% of the workers' compensation insurance market share in Florida as measured by written premium reported to the NAIC (11.3% if SIFs are included).

Profitability and Loss Ratios

Another goal of this report is to analyze the profitability of the Florida workers' compensation insurance marketplace. One measure that is reported on a state-by-state basis is the loss ratio, which is calculated as the total losses divided by earned premium for each state. The purpose of this ratio is two-fold: to assist in determining profitability, and, indirectly, to address premium sufficiency.

The states with the highest loss ratios for 2004 are:

Rank	State	Loss Ratio
# 1	West Virginia	163.8%
# 2	Oregon	105.7%
# 3	Arizona	103.2%
# 4	Ohio	102.4%
# 5	Kentucky	92.1%
# 6	Washington	86.9%
# 7	Kansas	82.7%
# 8	New Jersey	82.0%
# 9	Delaware	80.4%
# 10	South Carolina	79.9%
# 49	Florida	47.2%

While this measure is a very rough measure of profitability, it does show that for the workers' compensations markets in 2004, all else being equal, more competition translates to better loss performance. In this top 10 list, # 1 West Virginia, # 4 Ohio and # 6 Washington have state operated funds with nearly 100% of the market. In addition, # 2 Oregon, and # 3 Arizona are in highly concentrated/noncompetitive markets according to the Herfindahl-Hirschman Index. Florida, considered to be in a competitive market, has one of the lowest workers' compensation insurance loss ratios in the country. Only Hawaii has a lower loss ratio.

Adding reported defense cost and containment expense to the loss ratio above provides a broader measure of profitability (or rate sufficiency). Companies with a ratio of 100%, by definition, are not profitable. The combined data are as follows:

Rank	State	<i>Loss Ratio</i>
# 1	West Virginia	172.9%
# 2	Ohio	148.9%
# 3	Kansas	119.8%
# 4	Oregon	108.5%
# 5	Arizona	106.8%
# 6	Kentucky	100.7%
# 7	Washington	96.4%
# 8	New Jersey	89.5%
# 9	South Carolina	88.5%
# 10	Delaware	87.3%
# 49	<i>Florida</i>	<i>55.3%</i>

Because loss amounts generally greatly exceed the direct cost and containment expenses, it is not surprising that this list closely mirrors the list of states with the highest loss ratio. In fact, although the ranking has changed, the states in the top 10 are identical. As discussed earlier, a great majority of these states with the highest losses and costs are also

the states that either have a monopolistic state fund, or are in markets that are highly concentrated and not competitive. Even including the defense cost and containment expenses ratio, Florida is again one of the most competitive workers' compensation markets, while still maintaining a level of rate sufficiency.

Overview of Florida's Largest Carriers

In 2004, 230 companies reporting writing workers' compensation business in the state of Florida. The 10 largest companies are:

Rank	Company	Written Premium	% of Market	CUM %
# 1	Bridgefield Employers	\$402,139,042	11.3%	11.3%
# 2	Commerce & Industry	\$214,965,179	6.0%	17.3%
# 3	FCCI	\$205,009,615	5.7%	23.0%
# 4	Zenith	\$183,094,158	5.1%	28.1%
# 5	The Florida Retail Fed. SIF	\$147,944,779	4.1%	32.3%
# 6	First Commercial	\$124,464,265	3.5%	35.8%
# 7	Zurich American	\$112,201,655	3.1%	38.9%
# 8	Associated Industries	\$106,737,926	3.0%	41.9%
# 9	Valley Forge	\$89,477,339	2.5%	44.4%
# 10	Amcomp Preferred	\$87,226,224	2.4%	46.8%
	TOTAL IN FLORIDA	\$3,572,354,268		

The 10 largest companies wrote almost 47% of the workers' compensation insurance premium in Florida in 2004. All of the companies with the exception of The Florida Retail Federation SIF are property & casualty companies, organized as stock companies. None of the top 10 is related in a common insurance group. Six of the top ten writers are domestics⁴, while the foreign corporations have home offices in New York (two), California, and Pennsylvania.⁵

⁴ Domestics and their locations include: Bridgefield Employers (Lakeland, FL), FCCI Ins. (Sarasota, FL), The Florida Retail Sales Federation (Lakeland, FL), First Commercial (Miami Lakes, FL), Associated Industries (Boca Raton, FL), and Amcomp Preferred (North Palm Beach, FL).

⁵ Foreigns and their locations include: Commerce & Industry (New York NY), Zenith Ins. (Woodland Hills, CA), Zurich American (New York, NY), and Valley Forge Ins. (Reading, PA).

Diversification

Another area examined is the diversification of Florida's leading carriers.

Diversification, both by geography and by line of business can present a different picture of an insurance company than would be had by just looking at a particular line of business within a particular state.

Geographic Distribution

Although workers' compensation loss rates are likely more homogeneous geographically than other lines, such as homeowners' insurance, industry analysts generally believe that it is important for companies to have some geographic diversification with their book of business. Especially for workers' compensation insurance, where coverage and benefits are mandated by state legislatures, an understanding of the geographic distribution of premium can again provide a fuller understanding of the companies. For the top 10 companies presented above, the states where the companies had a majority of their business were calculated. The five leading states for each company are listed below:

Company	State 1	State 2	State 3	State 4	State 5	All Other
Bridgefield Employers	FL 100%					0%
Commerce & Industry	CA 16%	FL 12%	IL 11%	TX 6%	GA 4%	50%
FCCI	FL 87%	GA 6%	IN 2%	NC 2%	SC 1%	1%
Zenith	CA 69%	FL 18%	NC 3%	PA 2%	TX 1%	7%
Florida Retail Fund	FL 100%					0%
First Commercial	FL 100%					0%
Zurich American	CA 25%	IL 10%	TX 8%	FL 7%	NY 5%	46%
Associated Industries	FL 99%	GA 1%				0%
Valley Forge	FL 37%	CA 11%	TX 7%	WI 6%	NM 3%	36%
Amcomp Preferred	FL 77%	IN 18%	GA 3%	KY 2%	VA 1%	0%

In contrast to other market studies conducted by the OIR for other lines of business, there is less geographic diversification among the top writers. Instead, four companies write almost exclusively in Florida. The leading states for these carriers other than Florida include: California, Georgia, and Texas. Florida represents the state with the largest book of business for seven of these ten companies. For the three companies that do not write most of their workers' compensation insurance in Florida, all three write the most workers' compensation insurance in California.

Line of Business Distribution

This report also examined the other lines of business written by the top 10 workers' compensation insurance carriers. For presentation purposes, the lines of business are segmented into six categories: 1) Workers' Compensation⁶, 2) Other/Products Liability⁷, 3) Commercial Multi-Peril⁸, 4) Automobile (includes Private Passenger & Commercial for both damage and liability)⁹, and 5) All Other:

Company	Workers' Comp	Other/Product Liability	Commercial Multi-Peril	Auto	All Other
Bridgefield Employers	100.0%	0.0%	0.0%	0.0%	0.0%
Commerce & Industry	95.0%	1.8%	0.0%	2.7%	0.5%
FCCI	75.4%	3.7%	7.4%	12.7%	0.8%
Zenith Ins.	100.0%	0.0%	0.0%	0.0%	0.0%
Florida Retail SIF	100.0%	0.0%	0.0%	0.0%	0.0%
First Commercial	95.0%	0.3%	0.0%	4.6%	0.0%
Zurich American	31.0%	35.0%	4.8%	12.3%	16.9%
Associated Industries	100.0%	0.0%	0.0%	0.0%	0.0%
Valley Forge Ins.	44.5%	4.4%	39.5%	11.4%	0.2%
Amcomp Preferred	100.0%	0.0%	0.0%	0.0%	0.0%

⁶ Annual Statement Exhibit of Premiums and Losses, Line 16.

⁷ Annual Statement Exhibit of Premiums and Losses, Lines 17 & 18.

⁸ Annual Statement Exhibit of Premiums and Losses, Lines 5.1 & 5.2.

⁹ Annual Statement Exhibit of Premiums and Losses, Lines 19.1, 19.2, 19.3, 19.4, 21.1 & 21.2.

The table shows that seven of the ten top writers of workers' compensation insurance focus on this specific line of business having at least 95% of their total book of business in that line. Other lines of business commonly written include auto, commercial multi-peril, and other/product liability. Zurich American and Valley Forge both stand-out as having a more diverse book of business which includes lines such as fire & allied lines, ocean and inland marine, medical malpractice and earthquake insurance to name a few. FCCI's book even includes farmowners' policies.

Trends in Florida's Workers' Compensation Insurance

Market

Entry and Exit from the Workers' Compensation Market

Another measure of the competitiveness of a marketplace is the ease of entry and exit from the market.

Clearly, the market is growing in Florida. As of December 31, 2003, Florida had 407 eligible regulated entities in the workers' compensation market, of which 382¹⁰ had certificates of authority, while there were 25¹¹ other miscellaneous entities. Of these entities, 237 companies in the voluntary market and 4 self insurance funds were actively writing business. As of December 31, 2004, Florida had 398 entities with a certificate of authority, while there continued to be 25 miscellaneous entities. Of these, 230 companies in the voluntary market along with the 4 self insurance funds were actively writing business.

All 16 of the new entities were property & casualty companies with states of domicile outside Florida. The new entities that were accepted to operate in the Florida workers' compensation insurance market in 2004 were:

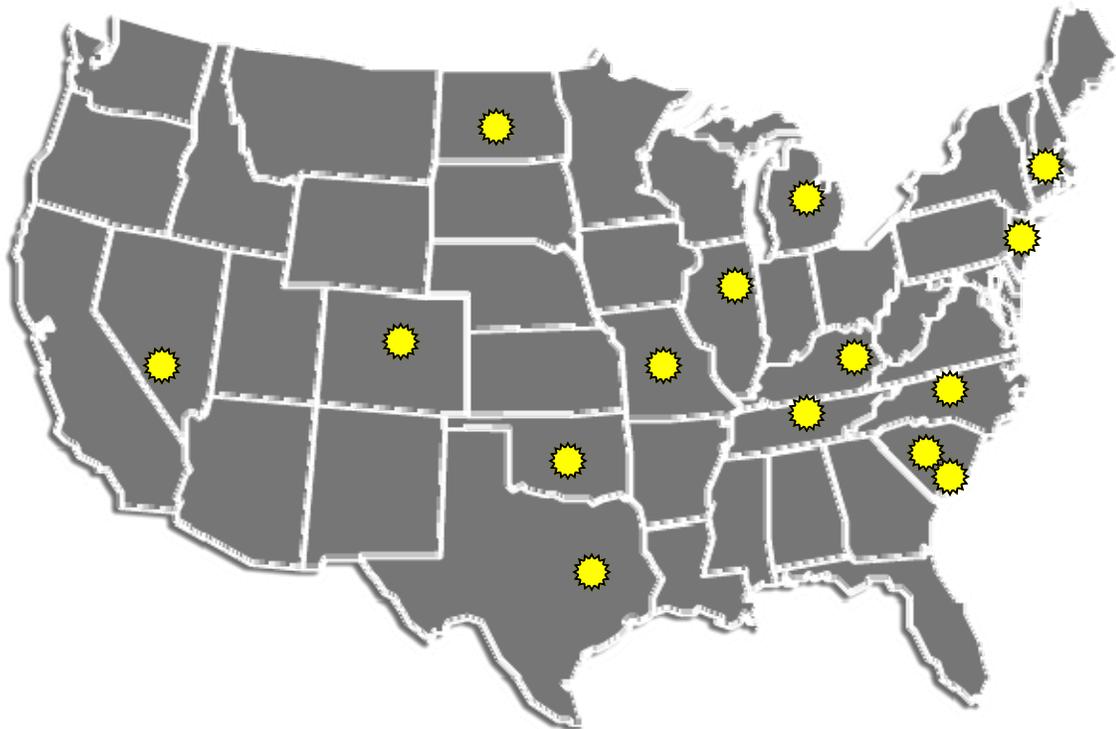
- American Fuji Fire
- Builders Insurance Co.

¹⁰ Of the 382 Entities with a COA: 377 were property & casualty companies, 1 was a reciprocal, and 4 were group self-insurance trust funds.

¹¹ Of the 25 miscellaneous entities without a COA: 9 were rating organizations, 9 were accredited reinsurers, 9 were advisory organizations, and 2 were residual market entities.

- Caterpillar Insurance Co.
- Great American Security
- Great American Spirit
- Great Divide Insurance
- Guarantee Insurance Co.
- Key Risk Insurance Co.
- Michigan Construction Co.
- Pegasus Insurance Co.
- Premier Group Ins. Co.
- Quanta Indemnity Co.
- Southern Insurance Co.
- Technology Ins. Co.
- TNUS Insurance Co.
- Vinings Insurance Co.

As the map below shows, the 16 new workers' compensation insurers come from 15 different cities in 14 different states.¹² This is potentially beneficial to Florida's economy, as well as the market itself, as these 16 companies represent investment capital coming from outside the region, and roughly evenly distributed throughout the United States:



¹² Both Great American Security and Great American Spirit have home offices in Cincinnati, Ohio. Both Guarantee Insurance (Fort Mill) and Vinings Insurance (Columbia) have home offices in South Carolina.

During the same period, a number of entities did leave the market. In 2004, 7 companies withdrew and 6 companies had their certificates suspended. In 2004, 5 companies left the market as a result of merger, 8 withdrew voluntarily, and 6 were suspended. These data suggest that there is freedom to both enter and exit the market, again supporting the competitive aspects of the Florida workers' compensation insurance market.

Statistical Trends

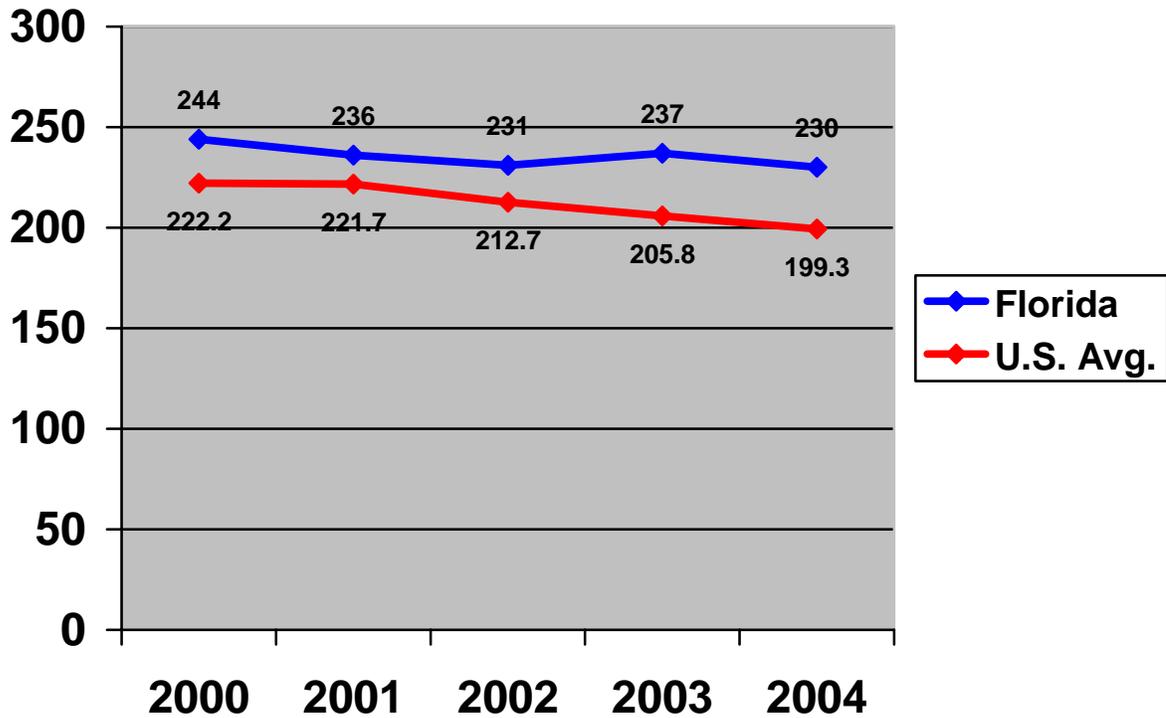
The analysis so far in this report compares the workers' compensation market in Florida to other state markets in terms of total amount of premium, number of entities operating in the state, premium per entity, and various financial ratios. Generally, Florida compares quite favorably to other states, having a significant number of entities in the state, low loss ratios, and a low loss + defense containment cost ratio. Further, Florida is a "competitive" market as measured by the Herfindahl-Hirschman Index (HHI).

However, another aspect of the market that is important to examine is trends over the last five years in order to determine if Florida's market is consistently moving in the right direction as a vibrant market and to compare this trend relative to other U.S. states. For the purposes of this analysis, again the four self-insurance trust funds were excluded in order to make Florida's data directly comparable with other states.

The Nature of the Market

One of the first indicators of the robustness of the market is to simply look at the number of companies actively engaged in the market. The chart below shows the number of entities writing in Florida from 2000 through 2004 and compares that to the average number of entities writing in the voluntary market across the remaining states.

Entities Writing Work Comp Insurance Premium by Year Florida vs. U.S. state average



Over the last five years the number of writers in Florida has remained relatively stable, while at the same time, on the national level the number has decreased. From a state perspective, the split has become even wider --- in 2004 there were roughly 31 more insurance companies writing in Florida than the average U.S. state. In 2000, the difference was only 22 companies.

Another area to consider is the overall growth of the workers' compensation insurance market. Like other sectors of the insurance industry, with a growing population, and a growing economy, it is not surprising to have an increase in the overall amount of insurance written:

**Workers' Compensation Insurance Written Premium
(Expressed in \$ Millions)**

	2000	2001	2002	2003	2004
Florida	\$2.66	\$2.78	\$2.97	\$3.19	\$3.35
Avg.U.S. State	\$0.65	\$0.74	\$0.84	\$0.95	\$1.02

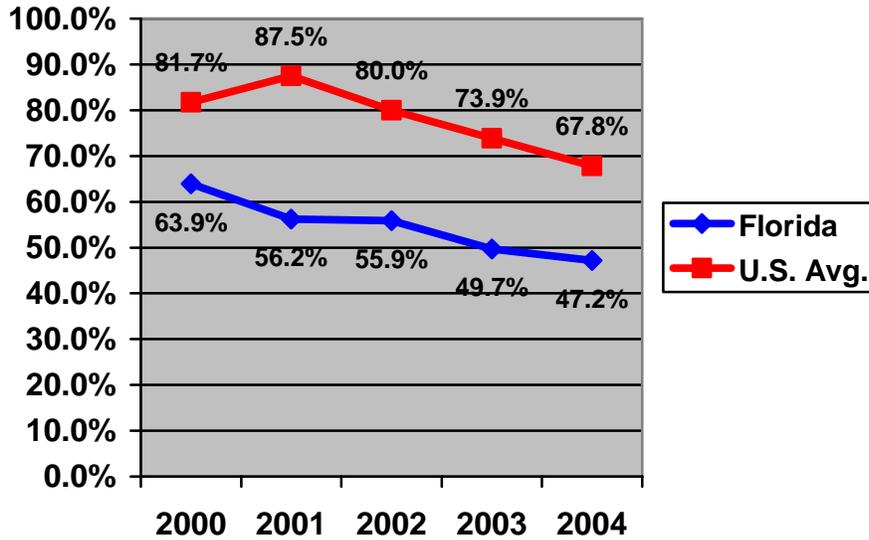
From 2000 to 2004 the increase in the total workers' compensation insurance for the average U.S. state has increased 57%, which clearly outdistances the 26% increase in Florida, even though Florida's working population grew at a rate much faster than the national average over that period. Once again, this may not include a complete picture of the entire market as it only includes activity in the voluntary market, but it is a broad indication of what is transpiring in the workers' compensation market.

Financial Aspects of the Market:

This report also reviews the financial statistics to determine trends in loss ratios and loss + defense containment cost ratios. This indirectly measures the profitability, competitiveness, and premium adequacy of the market. As shown in the national comparisons, in 2004 Florida had a much lower than average loss ratio (ranked 49 in the country).

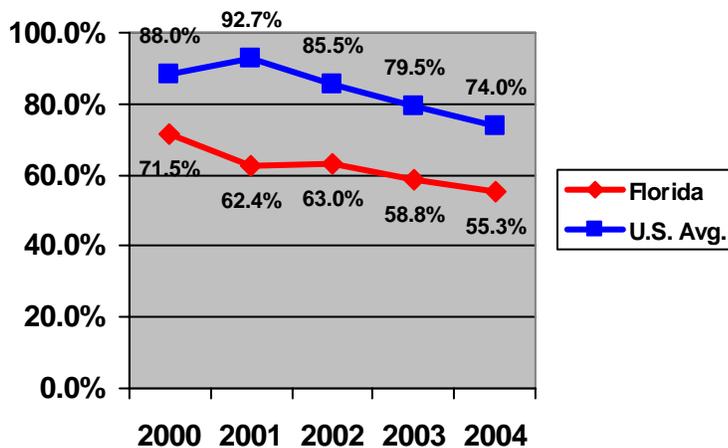
The trends in the loss ratios are shown below:

Work Comp Insurance Loss Ratios Florida vs. U.S. state average



The loss ratio for workers' compensation insurance of the admitted carriers in Florida has consistently fallen in recent years, and has consistently been roughly 20 percentage points below the national average.

As a broader measure, the loss + defense and containment cost ratio shows a similar pattern:



Workers' Compensation Rates

A new law passed during the 2003 Legislative Session (known as SB 50-A) continues to dramatically impact Florida's workers' compensation insurance rates. Some of these reforms included a reduction in attorneys' fees, tightening construction industry requirements, doubling impairment benefits for injured workers, increasing the medical fee schedule, and eliminating the Social Security disability test.¹³

Consequently, workers' compensation rates have declined in Florida, which is atypical for the rest of the country. In 2003, the NCCI had a 14% reduction approved, with an additional reduction of 5.2% in 2004. In 2000, Florida had the highest workers' compensation insurance rates in the country. By 2004, Florida had fallen to fifth.¹⁴

In 2005, a rate reduction of 13.5% was approved to become effective January 1, 2006. When implemented, the reductions for the five major industry groups will be as follows:¹⁵

Industry Sector	Rate Adjustment
Contracting	- 11.3%
Goods & Services	- 14.1%
Manufacturing	- 10.6%
Miscellaneous	- 17.1%
Office & Clerical	- 14.4%

This rate reduction is the third rate reduction since the 2003 workers' compensation reforms, giving Florida businesses a cumulative decrease of 29.5%.

There have been two primary reasons for the continued rate reductions. Lori Lovgren of NCCI asserts that the claims frequency for workers' compensation claims have been

¹³ "Florida Cracks Down on Construction Sites Without Workers' Compensation Insurance," Best Wire, 8/2/2005, which utilizes information from an earlier article in BestWire, July 15, 2003.

¹⁴ "Workers' Comp Rates Expected to Drop," Palm Beach Post, 08/30/2005. The article specifically quotes Lori Lovgren, State Relations Executive for NCCI.

¹⁵ "NCCI to Resubmit Workers' Comp Rate Filing," Orlando Business Journal, 11/8/2005.

decreasing faster than medical costs have increased.¹⁶ Another reason is the continued crackdown on companies fraudulently avoiding payment for workers' compensation insurance.

During the summer of 2005, state investigators for the Florida Department of Financial Services made a total of 848 site visits that resulted in 100 stop-work orders issued for Florida businesses.¹⁷ Under a stop-work order, companies must cease doing business until they have obtained workers' compensation insurance for all employees and paid civil penalties in the order of 1.5 times the premiums avoided. This requires a significant number of employers to increase the number of workers covered under workers' compensation insurance, and raises the premium collected, which can result in an overall premium rate decrease per employee.

Florida's Workers' Compensation JUA

One of the most significant indicators of an availability problem is the size of the residual market. In Florida, the Florida Workers' Compensation Joint Underwriting Association, Inc. (FWCJUA) is the market of last resort. Only employers that cannot find coverage in the voluntary market are eligible for coverage in the FWCJUA. Thus, the size of the FWCJUA is a measure of availability of coverage in the voluntary market.

The Florida Workers' Compensation Insurance Plan (FWCIP) was the residual market for Florida until the FWCJUA was created on January 1, 1994. All insurance companies writing workers' compensation in Florida funded the FWCIP. If there was a deficit in the FWCIP, then those workers' compensation carriers were assessed to cover the deficit. In 1993 the FWCIP issued 48,430 policies with written premiums of \$328 million. The FWCJUA in contrast has varied from 13,933 policies down to 522 policies, with written premium varying from \$73 million to \$5 million.

¹⁶ "Workers' Comp Rates Expected to Drop," Palm Beach Post, 08/30/2005.

¹⁷ "Florida Cracks Down on Construction Sites Without Workers' Compensation Insurance," Best Wire, 8/2/2005.

The FWCJUA's written premium as a percent of total market has not exceeded 2% since 1995 and has been below 1% for most years. Putting this in context by comparing to other states, the NCCI administers the residual market in 25 states. For 2003, the average market share for the residual market in these 25 states was 12%. Only two of the 25 states were below 8%. Thus, in Florida even at 2% the FWCJUA is still very low.

The FWCJUA was created to be self-sufficient with no ability to obtain funding from the voluntary market. The only funding mechanism for any shortfall is by assessing FWCJUA policyholders. Assessing policyholders after their policy has expired creates a financial hardship for the policyholders and should be avoided if possible. Thus, the FWCJUA Board has a goal of avoiding assessments and this has contributed to the level of rates and surcharges.

There are surcharges in addition to the rate differential that affect the total premium paid by FWCJUA policyholders. There was a 99% surcharge applied to Sub-plan "C" premiums in excess of \$2,500, an Assigned Risk Adjustment Program (commonly known as, "ARAP") surcharge for experience rated policies and a \$475 flat surcharge added to every policy. The creation of Tiers 1, 2 and 3 by HB 1251 has resulted in a restructuring of the rates and surcharges used by the FWCJUA.

Currently, the premium for tier 1 is 25% above the voluntary rates, tier 2 is 50% above voluntary and tier 3 is 170% above (2.70 times the voluntary rates), plus the ARAP surcharge applies for tier 3. Additionally, all three tiers have a flat surcharge of \$475. Tier 3 policyholders have a burden that tiers 1 and 2 do not have. Tier 3 policies are assessable if premiums are not sufficient to cover losses and expenses.

It is unrealistic to expect that an actuary's best estimate, which is a prediction of future contingent events, will always coincide with future results. It is understood and usually explicitly acknowledged that the results for a particular year can be higher or lower than the actuary's estimate. The consequences of the results being higher or lower than the estimate affect the actuary's judgment and ultimate selections.

In a situation where financial backing is substantial, it may be acceptable for the actuary's estimate to be high half of the time and low half of the time, as long as over time the predictions coincide with the average result. In other words, if there is a billion dollars in surplus, the company may not be concerned if the actuary's estimate is \$50 million high or low in a particular year as long as it balances out over a number of years.

If, however, there is only \$10 million in surplus, the company cannot afford for the estimate to be \$10 million lower than the estimate because they will be bankrupt. In this latter situation the consequences of being low are more important than the consequences of being high and this will impact the degree of conservatism that is appropriate in the actuary's selection.

The FWCJUA has been in a situation where the consequences of reserving too low or having rates that are too low (i.e. retroactive assessments to policyholders) have been greater than the consequences of reserves too high or rates too high. If the rates are too high, there may be some complaints from policyholders and others (and there could be federal income taxes that have to be paid) but, if there are assessments due to the rates being too low, every policyholder is affected, even those whose policy expired long ago. At the extreme, some of the policyholders could face severe financial distress or even be put out of business as a result of the assessment.

As a result of these circumstances, the degree of conservatism used in determining FWCJUA rates and surcharges has contributed to the level of rates needed. The main contributor to the FWCJUA rates, however, has been the level of expenses and losses incurred. Both of these were adversely impacted when the volume of FWCJUA business decreased in the late 1990s. As a result of all these factors and others, the FWCJUA rates have been very high in comparison to the residual markets in other states.

NCCI administers the residual market in a number of states. In these states the insurance companies writing workers' compensation provide the financial backing by funding any deficits but keeping any profits. For comparison purposes, information about the

premiums charged by these residual markets versus the voluntary market was collected. The result for 21 states is an average differential of 35%, with the highest state being 82% and the lowest 16%. The FWCJUA differential has been much higher than this throughout its history and reached the point that the FWCJUA policyholders were paying 3 to 4 times the voluntary market premium at one time.

Currently, the tier 1 and tier 2 rates for most employers are more affordable than the previous sub-plans A, B and C. However, on January 1, 2007 the rates for tiers 1 and 2 are to be “actuarially sound rates.” Since the “below the line” assessments end on July 1, 2007, there will be no funding mechanism for deficits in tiers 1 and 2. This will undoubtedly require very conservative actuarial assumptions to prevent any deficit. This can only mean higher rates for these two tiers.

Having the goal of a small residual market is desirable, but it needs to be balanced with having an affordable residual market. The FWCJUA was very small in comparison to the total voluntary market from 1997 to 2004. This occurred during a period that the FWCJUA rates were not very affordable to many employers and the voluntary market was very competitive. The high premiums in the FWCJUA discouraged many employers from even applying to the FWCJUA. These employers decided to close their business, go without coverage (which may be unlawful), or sought the services of a Professional Employer Organization (PEO). Coupled with a very competitive market by insurers who aggressively sought new policyholders, this created an extremely small residual market.

Ultimately, availability should not be an issue as coverage can be found in either the voluntary market or the FWCJUA. For an employer, however, availability is meaningless if the coverage is not affordable.

Composition of the Buyer

Much of the analysis of the worker’s compensation market, owing to a lack of more detailed data, is done at a high level by insurer or in total. The reality is that the workers’ compensation market is segmented based on a number of characteristics, such as size of

employer, type of industry, past experience of the employer or the lack of experience. The market for large employers versus small employers can be markedly different. The market for construction risks is different from employers with office workers. New businesses typically have trouble obtaining coverage due to the lack of historical experience that can be a measure of not only the insurance exposure but also the credit worthiness of the insured.

The majority of complaints about not being able to get coverage in the voluntary market come from small employers, new businesses and construction employers. Employers with a combination of these characteristics are especially difficult to place in the voluntary market. In some cases, coverage is related to the availability of agents in the local area and the number of insurers the local agents represent.

“A Study of the Availability and Affordability of Workers’ Compensation Coverage for the Construction Industry in Florida” dated January 31, 2003 and provided to the Florida Legislature concluded that construction employers, especially small construction employers, are having difficulty finding affordable workers’ compensation coverage. While the restructuring of the FWCJUA has helped this situation, the problem still exists as documented by the number of employers found by the Department of Financial Services (DFS) to have no coverage. The Department’s workers’ compensation division conducts random sweeps at construction sites to ensure compliance with workers’ compensation laws. In 2004 DFS has issued more than 2,200 stop-work orders to companies that weren't carrying insurance for all of their workers. The majority of these were construction companies.

According to the National Association of Professional Employer Organizations (NAPEO), “Professional employer organizations (PEOs) enable clients to cost-effectively outsource the management of human resources, employee benefits, payroll and workers’ compensation. A PEO provides integrated services to effectively manage critical human resource responsibilities and employer risks for clients. A PEO delivers these services by establishing and maintaining an employer relationship with the employees at the client's worksite and by contractually assuming certain employer rights, responsibilities, and

risk.” Also according to NAPEO, the average client customer of a PEO is a small business with 16 worksite employees, though larger businesses also find value in a PEO arrangement.

PEO’s have been a significant part of the Florida workers’ compensation market since the early 1990s. PEO’s have had an erratic history of being able to obtain coverage in the workers’ compensation insurance market. In the early 1990s coverage was difficult to obtain. By the mid-1990s coverage was broadly available and relatively easy to obtain. In the early 2000s coverage became scarce and in 2003 after CNA stopped writing PEOs, coverage was nearly impossible to find. Insurers have been reluctant to write workers’ compensation coverage due to the risks inherent with PEO coverage (refer to the Workers’ Compensation Large Deductible Study issued by the NAIC/IAIABC Joint Working Group). Some PEOs have adapted to this changing market and some have formed their own insurance company. PEOs have been a source of workers’ compensation coverage for many employers in Florida that could not obtain coverage in the voluntary market, particularly small employers. When the premiums for the FWCJUA have been deemed too high by employers, the PEO market has been the only available option for many employers who want to remain in business and comply with the law.

The January 2005 issue of “*Florida Trend*” contains the following updated information on PEO’s:

- PEOs in Florida cover 696,453 employees and 50,907 companies with a payroll of \$17.1 billion.- Source: Florida Association of Professional Employer Organizations, 2003 survey
- 2005 Forecast: "Our clients are growing again so that’s good news. The workers’ compensation situation in Florida seems relatively stable," says Carlos Rodriguez, division president of ADP TotalSource in Miami.

Market Structure, Conduct, and Performance to Promote Competition

The previous sections of this report do not suggest any obvious impediments to a workers' compensation market that has been found to be reasonably competitive. This section concentrates on the ability of the market to promote competition.

Mandatory Rating Plans

Before discussing the ways that workers' compensation insurers compete in the marketplace, it is useful to summarize the rating and premium pricing variations that result from the mandatory rating plans currently in effect. The following rating plans are required of all insurers in the state of Florida:

- Experience Rating Plan – This plan recognizes differences between individual employers by comparing the actual experience of an individual employer with the average expected experience of employers in the same classification. The plan produces an experience modification factor that may increase or decrease premiums. An employer is eligible for this program if the average annual premium is at least \$5,000.
- Premium Discounts by Size of Policy – The premium discount plan adjusts the employer's premium to reflect the fact that the relative expense of servicing large premium policies as a percent of premium is less than that for small premium policies. For example, the policy issuance costs for a \$200,000 policy may be higher than those for a \$20,000 policy, but the cost are not ten times as high.
- Drug-Free Workplace Premium Credit – A 5% premium credit provided to employers that certify the establishment of a drug-free workplace program.
- Employer Safety Premium Credit – A 2% premium credit provided to employers that certify the establishment of a safety program.
- Florida Contracting Classification Premium Adjustment Program - A premium credit is provided for policies with one or more contracting classifications that pay above average hourly wages. The credit amount increases as the average wage

paid increases. The credit is calculated based on payroll and hours worked information submitted by the employer to NCCI.

- **Small Deductibles** - For a reduced premium, the employer agrees to reimburse the insurer for each claim up to the deductible amount and the carrier covers benefits for each claim above the deductible amount. Small deductibles range from \$500 to \$2,500 and are required by section 440.38(5), F.S. An insurer may refuse to issue a policy with a deductible based on financial stability of employer.
- **Coinsurance** - For a reduced premium, the employer agrees to reimburse the insurer 20% of each claim up to \$21,000. This option is required by section 440.38(5), F.S. An insurer may refuse to issue a policy with a coinsurance amount based on the financial stability of the employer.
- **Coinsurance and Deductible** - For a reduced premium, the employer agrees to reimburse the insurer a deductible amount in the range of \$500-\$2,500 per claim and 20% of each claim up to a maximum of \$21,000. This option is required by section 440.38(5), F.S. An insurer may refuse to issue a policy with a coinsurance and deductible amount based on the financial stability of employer.

Optional Plans Used by Insurers to Compete on Price

Insurers use the following plans to compete on price:

- **Policyholder Dividends** - Insurers reward their policyholders by returning some of their profit at the expiration of the policy by issuing policyholder dividends, which may be based on the policyholder's experience, the carrier's experience, and other factors.
- **Deviations** –Section 627.211, F.S. allows insurers to file a uniform percentage increase or decrease that is to be applied to all rates an insurer charges or to rates for a particular class or group of classes of insurance.
- **Intermediate Deductibles** - For a reduced premium, the employer agrees to reimburse the insurer for each claim up to the deductible amount and the carrier covers the amount of the claim above the deductible amount. Intermediate deductibles range from \$5,000 to \$75,000.

- Large Deductibles – Large deductible policies operate similarly to the small and intermediate deductible, but have a deductible amount of \$100,000 and above. In order to qualify for the large deductible program, an employer must have standard premium of at least \$500,000.
- Consent to rate – The insurer and employer agree to a rate in excess of the approved rate. The insurer must limit this option to no more than 10% of policies written or renewed in each calendar year.
- Retrospective Rating Plans – The final premium paid by the employer is based on the actual loss experience of the employer during the policy, plus insurer expenses and an insurance charge. If the employer controls the amount of claims, they pay lower premiums. Before there were large deductible programs, retrospective rating plans were the dominant rating plan for large employers.
- Waiver of subrogation - For an additional premium, the insurer may waive its right of recovery against specifically named parties liable for injury covered by the policy.

Non-Price Competition

In addition, insurers compete in ways unrelated to the determination of premium such as:

- Offering premium payment plans that vary the amount of money paid initially and through installments;
- Demonstrating the availability and effectiveness of specialized loss control;
- Demonstrating the effectiveness of their claims handling including fraud detection;
- Paying higher agent commissions or providing other incentive programs, and/or;
- Emphasizing policyholder service in auditing, policy issuance or certificates of insurance.

Deviations

In the mid 1980's, the use of deviations as a means of competing was commonplace. From 1983 to 1985 over 40% of the market was written at deviated rates. However, by 1989 only 9% of the market was written at deviated rates. After the two year legislatively required moratorium (1990 and 1991) on deviations, the use of deviations has ceased to be a meaningful factor in the workers' compensation marketplace in Florida.

Despite the changes in section 627.211, F.S. made by chapter law 2004-82(SB 1926) to allow for easier approval of deviations, no insurer has filed for a new deviation since the law became effective on July 1, 2004. Two insurers have renewed their prior deviation, which means there are currently only two insurance companies with a deviation in Florida.

Workers' Compensation Rate Deviations (all downward) from 1981 to 2004							
Year	Number of Insurers	Market Share	Average Deviation	Year	Number of Insurers	Market Share	Average Deviation
1981	1	1.2%	10.0%	1993	0	0%	0%
1982	41	23.6%	12.8%	1994	0	0%	0%
1983	89	46.6%	14.2%	1995	3	unavailable	11.6%
1984	122	54.0%	16.5%	1996	4	unavailable	11.2%
1985	121	40.8%	15.9%	1997	3	unavailable	11.6%
1986	79	18.3%	12.7%	1998	3	unavailable	11.6%
1987	57	11.5%	10.4%	1999	3	unavailable	11.6%
1988	55	11.3%	10.0%	2000	5	unavailable	12.0%
1989	43	8.8%	10.3%	2001	4	unavailable	10.8%
1990	0 (moratorium)	0%	0%	2002	3	unavailable	10.8%
1991	0 (moratorium)	0%	0%	2003	3	unavailable	8.3%
1992	0	0%	0%	2004	2	unavailable	10.0%

Note: For the period 1995 to 2004, the market share is not available because the deviations only apply to a portion of the company's total written premium.

Large Deductibles

In the early 1990's, insurers approached the Department of Insurance about filing a rating plan for large employers (defined as having \$500,000 in standard premium) that would be

more flexible in how the premium would be determined. The justification for the flexibility would be based on the following general concepts:

- The rating plan would be used only for very large employers. These employers would generally be eligible to be individually self-insured.
- Rating is similar to rating for excess insurance that is purchased by individual self-insureds.
- The minimum deductible is \$100,000 and could be in the millions. Thus, the employer will be responsible for the vast majority of claims.

The Department ultimately agreed to these type plans with restrictions that were incorporated in Administrative Rule 69O-189.006 (formerly 4-189.006).

As large deductible programs have been implemented, there has been a dramatic shift in premiums. The typical large deductible policy will have a deductible credit that can range from 30% to 90%. Thus, the premiums paid by employers and reported by insurers will be a fraction of premiums paid for other rating plans. This means that premiums in the annual statement and premiums reported for assessments and taxes are much lower than they were previously.

As the volume of large deductible policies written in Florida has increased, the effect has been to lower the base for assessment and taxes such that Section 440.51(1)(b), Florida Statutes have been revised to require premiums to be reported without the deductible credit.

An ancillary effect of large deductibles has been the movement for very large employers to cease being individually self-insured and to buy an insurance policy from an insurance company with a large deductible program.

Conclusion

Based on the number of entities and market shares of actively writing companies in the market, the number of entities entering and exiting the market and the financial performance of the entities in the market, Florida's worker's compensation market can readily be characterized as a competitive market.

Availability does not appear to be a significant concern in the aggregate, although it does appear that small firms, new firms, and construction firms may face some market shortfalls in the voluntary market. The residual market is small, suggesting that the voluntary market is absorbing the vast majority of demand. While not without risk, the growth of the use of PEOs among smaller employers has, as well, helped availability by making coverage affordable.

For an employer, availability is meaningless if the coverage is not affordable. In the voluntary market, rates have declined by nearly a third since reform legislation was passed in 2003. Within the residual market, it appears that necessarily conservative actuarial estimates have contributed to uncompetitively high rates in the recent past for the FWCJUA, although statutory changes appear to have helped to moderate rates most recently.

The Florida Legislature should consider extending or eliminating the July 1, 2007 expiration date of the “below the line” assessments for tiers 1 and 2 in order to keep these rates at a more reasonable level. A thorough study should be made of the FWCJUA statutory requirements and operation in comparison to other states to identify the reasons that Florida’s residual market premiums are much higher than other states.

OIR Certification of Compliance with Section 627.096, Florida Statutes

Section 627.096, Florida Statutes was created in 1979 as part of the “wage loss” reform of the workers’ compensation law. This statute has three basic requirements as it pertains to this report:

1. An investigation and study of all insurers authorized to write workers’ compensation in Florida. The OIR has accomplished this objective by its thorough review of the quality and integrity of the data submitted in the most recent National Council on Compensation Insurance (NCCI) filing. For specific activities of the Market Investigations section, please see below.
2. A study of the data, statistics or other information to assist and advise the OIR in its review of filings made by or on behalf of workers’ compensation insurers. In

addition to the NCCI filing mentioned above, the Consumer Advocates' offices hires an independent actuary to review the filing and make recommendations. Also there are public hearings regarding the NCCI filing which further allow an opportunity for third parties to register their opinions and input.

3. The statute gives the Financial Services Commission the authority to require all insurers to submit data to OIR. The NCCI has been collecting workers' compensation data in Florida for more than 50 years; therefore, the OIR has NCCI under contract to perform these statistical services for the State of Florida.

Market Investigation Activities in 2004

In 2004, the top thirty-six companies or 79% of the market share were examined to verify timeliness and accuracy of unit statistical reporting submitted to the NCCI. The reviews of all companies except two indicated that any inconsistencies noted were not substantive and fell within generally acceptable margins. All companies with errors implemented corrective actions and/or revisions to their procedures to bring them into compliance.

During 2005, the remaining 21% of the market share were to be examined via desk audits. Individually, the remaining 221 companies represent a market share of 0.59% or less per company. Given the demands caused by the multiple hurricanes in 2004 and 2005 and in an attempt to optimize resources, Market Investigations determined it was appropriate to postpone further investigative efforts in favor of providing the support needed to address the issues generated as a result of the hurricanes. In addition, as part of the consideration for this decision, the Office also factored in the minimal inconsistencies found in the majority of the companies already examined and the minimal market share in the remaining companies.

The Office of Insurance Regulation has complied with all the requirements of Section 627.096, F.S.