



FORMS – APPROVED

NOVEMBER 4, 2020

GENERAL LIABILITY

LI-GL-2020-198

## FLORIDA CLAIMS-MADE CHANGES ENDORSEMENTS APPROVED

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### KEY MESSAGE

New Florida endorsements in response to 2020 Florida Laws Ch. 51 (former S.B. 292), which introduced FLA. STAT. § 626.9202 and § 627.444 are approved, effective 1/1/2021.

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### BACKGROUND

In circular [LI-GL-2020-143](#), we announced the filing of new General Liability claims-made endorsements in response to of 2020 Florida Laws Ch. 51 (former S.B. 292), which introduced FLA. STAT. § 626.9202 and § 627.444, which generally provide that, within 15 calendar days of receipt of written request from an insured, an insurer must provide a "loss run statement", which is defined, in part, as:

"... a report that contains the policy number, the period of coverage, the number of claims, the paid losses on all claims, and the date of each loss. The term does not include supporting claim file documentation, including, but not limited to, copies of claim files, investigation reports, evaluation statements, insureds' statements, and documents protected by a common law or statutory privilege."

FLA. STAT. § 626.9202 and § 627.444 also provide that a loss run statement "must contain a claims history with the insurer for the preceding 5 years or, if the claims history is less than 5 years, a complete claims history with the insurer."

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### INSURANCE DEPARTMENT ACTION

The Florida Office of Insurance Regulation has approved this filing as filed.

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### EFFECTIVE DATE

The ISO revision is subject to the following rule of application:

These changes are applicable to all policies effective on or after January 1, 2021.

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### COMPANY ACTION

If you have authorized us to file on your behalf and decide:

- To use our revision and effective date, you are not required to file anything with the Insurance Department.
- To use our revision with a different effective date, to use our revision with modification, or to not use our revision, you must make an appropriate submission with the Insurance Department.

For guidance on submission requirements, consult the ISO State Filing Handbook.

In all correspondence with the Insurance Department on this revision, you should refer to ISO Filing Number [GL-2020-OEND1](#) and State File Number [20-018217](#), NOT this circular number. Communications with the regulator concerning a filing affecting multiple lines of business (i.e., CL, PL, AL filing designation) should specify the line(s) of business that you are addressing.

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## **RATING SOFTWARE IMPACT**

New attributes being introduced with this revision:

- New forms are being introduced.

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## **POLICYHOLDER NOTIFICATION**

If you decide to implement this revision, you should check all applicable laws for the state(s) to which this revision applies, to determine whether or not a specific policyholder notice requirement may apply. Please note that circular [LI-CL-2019-057](#) contains the ISO Guide To Renewals With Changed Conditions For Commercial Lines, which is available only as a guide to assist participating companies in complying with various conditional renewal statutes or regulations, for the major commercial lines of insurance serviced by ISO. The information in the Guide does not necessarily reflect all requirements or exceptions that may apply, and it is not intended as a substitute for your review of all applicable statutes and regulations concerning policyholder notification.

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## **REVISION DISTRIBUTION**

We will issue a Notice to Portfolioholders with an edition date of 1-21 (or the earliest possible subsequent date), along with any new and/or revised forms.

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## **RELATED RULES REVISION**

We are announcing in a separate circular the implementation of a corresponding rules revision. Please refer to the Reference(s) block for identification of that circular.

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## **REFERENCE(S)**

- [LI-GL-2020-199](#) (11/04/2020) Florida Rules Revisions To Be Implemented
- [LI-GL-2020-144](#) (08/10/2020) Florida Rules Revisions To Be Filed; Implementation Pending
- [LI-GL-2020-143](#) (08/10/2020) Florida Claims-made Changes Endorsements Filed
- [LI-GL-2020-104](#) (06/30/2020) Florida Former S.B. 292 Concerning Insured's Request For A Loss Run Statement Under Review
- [LI-CL-2019-057](#) (12/10/2019) Revised Lead Time Requirements Listing

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## **ATTACHMENT(S)**

Final copies of **CG 27 52**, **CG 27 53** and **CG 27 54**

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**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **FLORIDA CHANGES – YOUR RIGHT TO CLAIM AND OCCURRENCE INFORMATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM (CLAIMS-MADE VERSION)

Paragraph **10. Your Right To Claim And Occurrence Information** of **Section IV – Commercial General Liability Conditions** is replaced by the following:

### **10. Your Right To Claim And Occurrence Information**

a. If we receive a written request from the first Named Insured shown in the Declarations, we will provide the following information relating to this and any preceding general liability claims-made Coverage Part we have issued to you during the previous five years:

- (1) A list or other record of each "occurrence" or claim of which we were notified in accordance with the **Section IV – Duties In The Event Of Occurrence, Offense, Claim Or Suit Condition**. We will include the date and brief description of the "occurrence" or claim if that information was in the notice we received.
- (2) A summary by policy year that contains the policy number, the period of coverage, the number of claims, the paid losses on all claims and the date of each loss stated separately, under any applicable General Aggregate Limit and Products-Completed Operations Aggregate Limit.

We will provide the above information within 15 days of the written request. We will also notify the agent of record that the above information was provided to the first Named Insured.

b. If we cancel or elect not to renew this Coverage Part, we will provide the first Named Insured shown in the Declarations the following information relating to this and any preceding general liability claims-made Coverage Part we have issued to you during the previous three years no later than 30 days before the date of policy termination:

- (1) A list or other record of each "occurrence", not previously reported to any other insurer, of which we were notified in accordance with **Paragraph 2.a. of the Section IV – Duties In The Event Of Occurrence, Offense, Claim Or Suit Condition**. We will include the date and brief description of the "occurrence" if that information was in the notice we received.
- (2) A summary by policy year, of payments made and amounts reserved, stated separately, under any applicable General Aggregate Limit and Products-Completed Operations Aggregate Limit.

Amounts reserved are based on our judgment. They are subject to change and should not be regarded as ultimate settlement values.

You must not disclose this information to any claimant or any claimant's representative without our consent.

We compile claim and "occurrence" information for our own business purposes and exercise reasonable care in doing so. In providing this information to the first Named Insured, we make no representations or warranties to insureds, insurers, or others to whom this information is furnished by or on behalf of any insured. Cancellation or nonrenewal will be effective even if we inadvertently provide inaccurate information.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **FLORIDA CHANGES – YOUR RIGHT TO CLAIM AND INJURY INFORMATION**

This endorsement modifies insurance provided under the following:

LIQUOR LIABILITY COVERAGE FORM (CLAIMS-MADE VERSION)

Paragraph **10. Your Right To Claim And Injury Information** of **Section IV – Liquor Liability Conditions** is replaced by the following:

### **10. Your Right To Claim And Injury Information**

- a. If we receive a written request from the first Named Insured shown in the Declarations, we will provide the following information relating to this and any preceding liquor liability claims-made Coverage Part we have issued to you during the previous five years:

- (1) A list or other record of each "injury" or claim of which we were notified in accordance with the **Section IV – Duties In The Event Of Injury, Claim Or Suit Condition**. We will include the date and brief description of the "injury" or claim if that information was in the notice we received
- (2) A summary by policy year that contains the policy number, the period of coverage, the number of claims, the paid losses on all claims and the date of each loss stated separately, under the Aggregate Limit.

We will provide the above information within 15 days of the written request. We will also notify the agent of record that the above information was provided to the first Named Insured.

- b. If we cancel or elect not to renew this Coverage Part, we will provide the first Named Insured shown in the Declarations the following information relating to this and any preceding liquor liability claims-made Coverage Part we have issued to you during the previous three years no later than 30 days before the date of policy termination:

- (1) A list or other record of each "injury", not previously reported to any other insurer, of which we were notified in accordance with Paragraph **2.a.** of the **Section IV – Duties In The Event Of Injury, Claim Or Suit Condition**. We will include the date and brief description of the "injury" if that information was in the notice we received.

- (2) A summary by policy year, of payments made and amounts reserved, stated separately, under the Aggregate Limit.

Amounts reserved are based on our judgment. They are subject to change and should not be regarded as ultimate settlement values.

You must not disclose this information to any claimant or any claimant's representative without our consent.

We compile claim and "injury" information for our own business purposes and exercise reasonable care in doing so. In providing this information to the first Named Insured, we make no representations or warranties to insureds, insurers or others to whom this information is furnished by or on behalf of any insured. Cancellation or nonrenewal will be effective even if we inadvertently provide inaccurate information.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **FLORIDA CHANGES – YOUR RIGHT TO CLAIM AND OCCURRENCE INFORMATION**

This endorsement modifies insurance provided under the following:

PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE FORM (CLAIMS-MADE VERSION)

Paragraph **10. Your Right To Claim And Occurrence Information** of **Section IV – Products/Completed Operations Liability Conditions** is replaced by the following:

### **10. Your Right To Claim And Occurrence Information**

a. If we receive a written request from the first Named Insured shown in the Declarations, we will provide the following information relating to this and any preceding products/completed operations claims-made Coverage Part we have issued to you during the previous five years:

- (1) A list or other record of each "occurrence" or claim of which we were notified in accordance with the **Section IV – Duties In The Event Of Occurrence, Claim Or Suit Condition**. We will include the date and brief description of the "occurrence" or claim if that information was in the notice we received.
- (2) A summary by policy year that contains the policy number, the period of coverage, the number of claims, the paid losses on all claims and the date of each loss stated separately, under the Aggregate Limit.

We will provide the above information within 15 days of the written request. We will also notify the agent of record that the above information was provided to the first Named Insured.

b. If we cancel or elect not to renew this Coverage Part, we will provide the first Named Insured shown in the Declarations the following information relating to this and any preceding products/completed operations claims-made Coverage Part we have issued to you during the previous three years no later than 30 days before the date of policy termination:

- (1) A list or other record of each "occurrence", not previously reported to any other insurer, of which we were notified in accordance with **Paragraph 2.a. of the Section IV – Duties In The Event Of Occurrence, Claim Or Suit Condition**. We will include the date and brief description of the "occurrence" if that information was in the notice we received.
- (2) A summary by policy year, of payments made and amounts reserved, stated separately, under the Aggregate Limit.

Amounts reserved are based on our judgment. They are subject to change and should not be regarded as ultimate settlement values.

You must not disclose this information to any claimant or any claimant's representative without our consent.

We compile claim and "occurrence" information for our own business purposes and exercise reasonable care in doing so. In providing this information to the first Named Insured, we make no representations or warranties to insureds, insurers, or others to whom this information is furnished by or on behalf of any insured. Cancellation or nonrenewal will be effective even if we inadvertently provide inaccurate information.