A bill to be entitled
An act relating to motor vehicle insurance; providing
for future repeal of ss. 627.730, 627.731, 627.7311,
627.732, 627.733, 627.734, 627.736, 627.737, 627.739,
627.7401, 627.7403, and 627.7405, F.S., which compose
the Florida Motor Vehicle No-Fault Law, ss. 15 and 16
of chapter 2012-197, Laws of Florida, which require
the Office of Insurance Regulation to contract for a
study and perform a data call relating to certain
changes made to the no-fault law, and s. 627.7407,
F.S., relating to application of the no-fault law;
authorizing insurers to provide for termination of
motor vehicle insurance policies issued or renewed on
or after a specified date as a result of the repeal of
sections by this act; amending s. 318.18, F.S.;
deleting a provision that provides for dismissal of a
certain traffic violation under certain circumstances;
amending s. 320.27, F.S.; deleting a requirement for
specified personal injury protection coverage for a
motor vehicle dealer license applicant; conforming a
provision to changes made by the act; amending s.
320.771, F.S.; deleting a requirement for specified
personal injury protection coverage for a recreational
vehicle dealer license applicant; amending s. 324.021,
F.S.; revising the definition of the term “motor
vehicle”; deleting a provision relating to the limits
of liability on commercial motor vehicles; amending s.
324.032, F.S.; removing certain owners or lessees of
for-hire passenger transportation vehicles from a
financial responsibility provision; amending s.
324.171, F.S.; deleting a requirement for personal
injury protection coverage on a certain self-insurance
certificate; amending s. 400.9905, F.S.; revising the
definition of the term “clinic” to delete a
requirement related to the reporting of certain
information relating to personal injury protection
coverage on an application for a certain exemption, to
delete a provision authorizing denial or revocation of
such an exemption on certain grounds, and to delete a
provision relating to reimbursement under the no-fault
law; amending s. 400.991, F.S.; revising an insurance
fraud notice to conform to amendments made to s.
626.989, F.S., by the act; amending s. 456.057, F.S.;
deleting certain persons or entities practicing under
the no-fault law from a list of persons or entities
excluded from certain patient records provisions;
amending s. 456.072, F.S.; deleting certain grounds
for discipline relating to actions under the no-fault
law; amending s. 626.9541, F.S.; deleting a certain
practice under the no-fault law from a list of unfair
claim settlement practices; deleting a provision
authorizing the Office of Insurance Regulation to
order the insurer to pay restitution for such
practice; conforming a provision to changes made by
the act; amending s. 626.989, F.S.; revising the
actions that constitute commission of a fraudulent
insurance act; amending s. 627.727, F.S.; deleting an
exception from an exclusion from legal liability of an
uninsured motorist coverage insurer for certain tort
damages; conforming a provision to changes made by the
act; amending s. 627.7275, F.S.; requiring certain
motor vehicle insurance policies to provide certain property damage liability and bodily injury liability coverage, rather than only such policies providing personal injury protection; revising certain coverage that insurers must make available subject to certain conditions; conforming a provision to changes made by the act; amending s. 627.8405, F.S.; excluding premium financing by certain insurance agents or insurance companies from certain prohibitions; deleting a requirement for the Financial Services Commission to adopt certain rules; conforming a provision to changes made by the act; amending s. 628.909, F.S.; revising applicability to remove provisions of the no-fault law under certain circumstances; amending s. 817.234, F.S.; expanding the scope of certain criminal acts related to false and fraudulent insurance claims by removing limitations to such acts under the no-fault law; revising sanctions for a licensed health care practitioner who is found guilty of insurance fraud for a certain act; amending ss. 316.646, 320.02, 320.0609, 322.251, 322.34, 324.021, 409.901, 409.910, 627.06501, 627.0652, 627.0653, 627.4132, 627.7263, 627.728, 627.7295, 627.915, 705.184, and 713.78, F.S.; deleting references to certain requirements, benefits, and other provisions under the no-fault law; conforming provisions to changes made by the act; making technical changes; providing effective dates.

Be It Enacted by the Legislature of the State of Florida:
Section 1. Effective January 1, 2020, sections 627.730, 627.731, 627.732, 627.733, 627.734, 627.736, 627.737, 627.739, 627.7401, 627.7403, and 627.7405, Florida Statutes, which compose the Florida Motor Vehicle No-Fault Law, sections 15 and 16 of chapter 2012-197, Laws of Florida, and section 627.7407, Florida Statutes, are repealed.

Section 2. Effective January 2, 2019, in all motor vehicle insurance policies issued or renewed on or after January 2, 2019, insurers may provide that such policies may terminate on or after January 1, 2020 as a result of the repeal of the sections specified in section 1 of this act.

Section 3. Effective January 1, 2020, paragraph (b) of subsection (2) of section 318.18, Florida Statutes, is amended to read:

318.18 Amount of penalties.—The penalties required for a noncriminal disposition pursuant to s. 318.14 or a criminal offense listed in s. 318.17 are as follows:

(2) Thirty dollars for all nonmoving traffic violations and:

(b) For all violations of ss. 320.0605, 320.07(1), 322.065, and 322.15(1). Any person who is cited for a violation of s. 320.07(1) shall be charged a delinquent fee pursuant to s. 320.07(4).

1. If a person who is cited for a violation of s. 320.0605 or s. 320.07 can show proof of having a valid registration at the time of arrest, the clerk of the court may dismiss the case and may assess a dismissal fee of up to $10. A person who finds it impossible or impractical to obtain a valid registration...
certificate must submit an affidavit detailing the reasons for
the impossibility or impracticality. The reasons may include,
but are not limited to, the fact that the vehicle was sold,
stolen, or destroyed; that the state in which the vehicle is
registered does not issue a certificate of registration; or that
the vehicle is owned by another person.

2. If a person who is cited for a violation of s. 322.03,
s. 322.065, or s. 322.15 can show a driver license issued to him
or her and valid at the time of arrest, the clerk of the court
may dismiss the case and may assess a dismissal fee of up to
$10.

3. If a person who is cited for a violation of s. 316.646
can show proof of security as required by s. 627.733, issued to
the person and valid at the time of arrest, the clerk of the
court may dismiss the case and may assess a dismissal fee of up
to $10. A person who finds it impossible or impractical to
obtain proof of security must submit an affidavit detailing the
reasons for the impracticality. The reasons may include, but are
not limited to, the fact that the vehicle has since been sold,
stolen, or destroyed; that the owner or registrant of the
vehicle is not required by s. 627.733 to maintain personal
injury protection insurance; or that the vehicle is owned by
another person.

Section 4. Effective January 1, 2020, subsection (3) of
section 320.27, Florida Statutes, is amended to read:

320.27 Motor vehicle dealers.—
(3) APPLICATION AND FEE.—The application for the license
shall be in such form as may be prescribed by the department and
shall be subject to such rules with respect thereto as may be so
prescribed by it. Such application shall be verified by oath or affirmation and shall contain a full statement of the name and birth date of the person or persons applying therefor; the name of the firm or copartnership, with the names and places of residence of all members thereof, if such applicant is a firm or copartnership; the names and places of residence of the principal officers, if the applicant is a body corporate or other artificial body; the name of the state under whose laws the corporation is organized; the present and former place or places of residence of the applicant; and prior business in which the applicant has been engaged and the location thereof. Such application shall describe the exact location of the place of business and shall state whether the place of business is owned by the applicant and when acquired, or, if leased, a true copy of the lease shall be attached to the application. The applicant shall certify that the location provides an adequately equipped office and is not a residence; that the location affords sufficient unoccupied space upon and within which adequately to store all motor vehicles offered and displayed for sale; and that the location is a suitable place where the applicant can in good faith carry on such business and keep and maintain books, records, and files necessary to conduct such business, which shall be available at all reasonable hours to inspection by the department or any of its inspectors or other employees. The applicant shall certify that the business of a motor vehicle dealer is the principal business which shall be conducted at that location. The application shall contain a statement that the applicant is either franchised by a manufacturer of motor vehicles, in which case the name of each
motor vehicle that the applicant is franchised to sell shall be included, or an independent (nonfranchised) motor vehicle dealer. The application shall contain other relevant information as may be required by the department, including evidence that the applicant is insured under a garage liability insurance policy or a general liability insurance policy coupled with a business automobile policy, which shall include, at a minimum, $25,000 combined single-limit liability coverage including bodily injury and property damage protection and $10,000 personal injury protection. However, a salvage motor vehicle dealer as defined in subparagraph (1)(c)5. is exempt from the requirements for garage liability insurance and personal injury protection insurance on those vehicles that cannot be legally operated on roads, highways, or streets in this state. Franchise dealers must submit a garage liability insurance policy, and all other dealers must submit a garage liability insurance policy or a general liability insurance policy coupled with a business automobile policy. Such policy shall be for the license period, and evidence of a new or continued policy shall be delivered to the department at the beginning of each license period. Upon making initial application, the applicant shall pay to the department a fee of $300 in addition to any other fees required by law. Applicants may choose to extend the licensure period for 1 additional year for a total of 2 years. An initial applicant shall pay to the department a fee of $300 for the first year and $75 for the second year, in addition to any other fees required by law. An applicant for renewal shall pay to the department $75 for a 1-year renewal or $150 for a 2-year renewal, in addition to any other fees required by law. Upon making an application
for a change of location, the person shall pay a fee of $50 in addition to any other fees now required by law. The department shall, in the case of every application for initial licensure, verify whether certain facts set forth in the application are true. Each applicant, general partner in the case of a partnership, or corporate officer and director in the case of a corporate applicant, must file a set of fingerprints with the department for the purpose of determining any prior criminal record or any outstanding warrants. The department shall submit the fingerprints to the Department of Law Enforcement for state processing and forwarding to the Federal Bureau of Investigation for federal processing. The actual cost of state and federal processing shall be borne by the applicant and is in addition to the fee for licensure. The department may issue a license to an applicant pending the results of the fingerprint investigation, which license is fully revocable if the department subsequently determines that any facts set forth in the application are not true or correctly represented.

Section 5. Effective January 1, 2020, paragraph (j) of subsection (3) of section 320.771, Florida Statutes, is amended to read:

320.771 License required of recreational vehicle dealers.—
(3) APPLICATION.—The application for such license shall be in the form prescribed by the department and subject to such rules as may be prescribed by it. The application shall be verified by oath or affirmation and shall contain:

(j) A statement that the applicant is insured under a garage liability insurance policy, which shall include, at a minimum, $25,000 combined single-limit liability coverage,
including bodily injury and property damage protection, and $10,000 personal injury protection, if the applicant is to be licensed as a dealer in, or intends to sell, recreational vehicles.

The department shall, if it deems necessary, cause an investigation to be made to ascertain if the facts set forth in the application are true and shall not issue a license to the applicant until it is satisfied that the facts set forth in the application are true.

Section 6. Effective January 1, 2020, subsection (1) and paragraph (c) of subsection (9) of section 324.021, Florida Statutes, are amended to read:

324.021 Definitions; minimum insurance required.—The following words and phrases when used in this chapter shall, for the purpose of this chapter, have the meanings respectively ascribed to them in this section, except in those instances where the context clearly indicates a different meaning:

(1) MOTOR VEHICLE.—Every self-propelled vehicle which is designed and required to be licensed for use upon a highway, including trailers and semitrailers designed for use with such vehicles, except traction engines, road rollers, farm tractors, power shovels, and well drillers, and every vehicle which is propelled by electric power obtained from overhead wires but not operated upon rails, but not including any bicycle or moped. However, the term “motor vehicle” shall not include any motor vehicle as defined in s. 627.732(3) when the owner of such vehicle has complied with the requirements of ss. 627.730–627.7405, inclusive, unless the provisions of s. 324.051 apply;
and, in such case, the applicable proof of insurance provisions of s. 320.02 apply.

(9) OWNER; OWNER/LESSOR.—

(c) Application.—

1. The limits on liability in subparagraphs (b)2. and 3. do not apply to an owner of motor vehicles that are used for commercial activity in the owner’s ordinary course of business, other than a rental company that rents or leases motor vehicles. For purposes of this paragraph, the term “rental company” includes only an entity that is engaged in the business of renting or leasing motor vehicles to the general public and that rents or leases a majority of its motor vehicles to persons with no direct or indirect affiliation with the rental company. The term also includes a motor vehicle dealer that provides temporary replacement vehicles to its customers for up to 10 days. The term “rental company” also includes:

1. A related rental or leasing company that is a subsidiary of the same parent company as that of the renting or leasing company that rented or leased the vehicle.

2. The holder of a motor vehicle title or an equity interest in a motor vehicle title if the title or equity interest is held pursuant to or to facilitate an asset-backed securitization of a fleet of motor vehicles used solely in the business of renting or leasing motor vehicles to the general public and under the dominion and control of a rental company, as described in this paragraph subparagraph, in the operation of such rental company’s business.

2. Furthermore, with respect to commercial motor vehicles as defined in s. 627.732, the limits on liability in...
subparagraphs (b)2. and 3. do not apply if, at the time of the incident, the commercial motor vehicle is being used in the transportation of materials found to be hazardous for the purposes of the Hazardous Materials Transportation Authorization Act of 1990, as amended, 49 U.S.C. ss. 5101 et seq., and that is required pursuant to such act to carry placards warning others of the hazardous cargo, unless at the time of lease or rental either:

a. the lessee indicates in writing that the vehicle will not be used to transport materials found to be hazardous for the purposes of the Hazardous Materials Transportation Authorization Act of 1990, as amended, 49 U.S.C. ss. 5101 et seq., and that is required pursuant to such act to carry placards warning others of the hazardous cargo.

b. the lessee or other operator of the commercial motor vehicle has in effect insurance with limits of at least $5,000,000 combined property damage and bodily injury liability.

Section 7. Effective January 1, 2020, subsection (1) of section 324.032, Florida Statutes, is amended to read:

324.032 Manner of proving financial responsibility; for hire passenger transportation vehicles.—Notwithstanding the provisions of s. 324.031:

(1)(a) A person who is either the owner or a lessee required to maintain insurance under s. 627.734(1) and who operates one or more taxicabs, limousines, jitneys, or any other for-hire passenger transportation vehicles may prove financial responsibility by furnishing satisfactory evidence of holding a motor vehicle liability policy, but with minimum limits of $125,000/$250,000/$50,000.

(b) A person who is either the owner or a lessee required to maintain insurance under s. 324.021(9)(b) and who operates one or more taxicabs, limousines, jitneys, or any other for-hire passenger transportation vehicles may prove financial responsibility by furnishing satisfactory evidence of holding a motor vehicle liability policy, but with minimum limits of $125,000/$250,000/$50,000.
limousines, jitneys, or any other for-hire passenger vehicles, other than taxicabs, may prove financial responsibility by furnishing satisfactory evidence of holding a motor vehicle liability policy as defined in s. 324.031.

Upon request by the department, the applicant must provide the department at the applicant’s principal place of business in this state access to the applicant’s underlying financial information and financial statements that provide the basis of the certified public accountant’s certification. The applicant shall reimburse the requesting department for all reasonable costs incurred by it in reviewing the supporting information. The maximum amount of self-insurance permissible under this subsection is $300,000 and must be stated on a per-occurrence basis, and the applicant shall maintain adequate excess insurance issued by an authorized or eligible insurer licensed or approved by the Office of Insurance Regulation. All risks self-insured shall remain with the owner or lessee providing it, and the risks are not transferable to any other person, unless a policy complying with subsection (1) is obtained.

Section 8. Effective January 1, 2020, subsection (2) of section 324.171, Florida Statutes, is amended to read:

324.171 Self-insurer.—

(2) The self-insurance certificate shall provide limits of liability insurance in the amounts specified under s. 324.021(7) or s. 627.7415 and shall provide personal injury protection coverage under s. 627.733(3)(b).

Section 9. Effective January 1, 2020, subsection (4) of section 400.9905, Florida Statutes, is amended to read:
400.9905 Definitions.—

(4) “Clinic” means an entity where health care services are provided to individuals and which tenders charges for reimbursement for such services, including a mobile clinic and a portable equipment provider. As used in this part, the term does not include and the licensure requirements of this part do not apply to:

(a) Entities licensed or registered by the state under chapter 395; entities licensed or registered by the state and providing only health care services within the scope of services authorized under their respective licenses under ss. 383.30-383.335, chapter 390, chapter 394, chapter 397, this chapter except part X, chapter 429, chapter 463, chapter 465, chapter 466, chapter 478, part I of chapter 483, chapter 484, or chapter 651; end-stage renal disease providers authorized under 42 C.F.R. part 405, subpart U; providers certified under 42 C.F.R. part 485, subpart B or subpart H; or any entity that provides neonatal or pediatric hospital-based health care services or other health care services by licensed practitioners solely within a hospital licensed under chapter 395.

(b) Entities that own, directly or indirectly, entities licensed or registered by the state pursuant to chapter 395; entities that own, directly or indirectly, entities licensed or registered by the state and providing only health care services within the scope of services authorized pursuant to their respective licenses under ss. 383.30-383.335, chapter 390, chapter 394, chapter 397, this chapter except part X, chapter 429, chapter 463, chapter 465, chapter 466, chapter 478, part I of chapter 483, chapter 484, or chapter 651; end-stage renal disease providers. 

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disease providers authorized under 42 C.F.R. part 405, subpart U; providers certified under 42 C.F.R. part 485, subpart B or subpart H; or any entity that provides neonatal or pediatric hospital-based health care services by licensed practitioners solely within a hospital licensed under chapter 395.

(c) Entities that are owned, directly or indirectly, by an entity licensed or registered by the state pursuant to chapter 395; entities that are owned, directly or indirectly, by an entity licensed or registered by the state and providing only health care services within the scope of services authorized pursuant to their respective licenses under ss. 383.30-383.335, chapter 390, chapter 394, chapter 397, this chapter except part X, chapter 429, chapter 463, chapter 465, chapter 466, chapter 478, part I of chapter 483, chapter 484, or chapter 651; end-stage renal disease providers authorized under 42 C.F.R. part 405, subpart U; providers certified under 42 C.F.R. part 485, subpart B or subpart H; or any entity that provides neonatal or pediatric hospital-based health care services by licensed practitioners solely within a hospital licensed under chapter 395.

(d) Entities that are under common ownership, directly or indirectly, with an entity licensed or registered by the state pursuant to chapter 395; entities that are under common ownership, directly or indirectly, with an entity licensed or registered by the state and providing only health care services within the scope of services authorized pursuant to their respective licenses under ss. 383.30-383.335, chapter 390, chapter 394, chapter 397, this chapter except part X, chapter 429, chapter 463, chapter 465, chapter 466, chapter 478, part I of chapter 483, chapter 484, or chapter 651; end-stage renal
disease providers authorized under 42 C.F.R. part 405, subpart U; providers certified under 42 C.F.R. part 485, subpart B or subpart H; or any entity that provides neonatal or pediatric hospital-based health care services by licensed practitioners solely within a hospital licensed under chapter 395.

(e) An entity that is exempt from federal taxation under 26 U.S.C. s. 501(c)(3) or (4), an employee stock ownership plan under 26 U.S.C. s. 409 that has a board of trustees at least two-thirds of which are Florida-licensed health care practitioners and provides only physical therapy services under physician orders, any community college or university clinic, and any entity owned or operated by the federal or state government, including agencies, subdivisions, or municipalities thereof.

(f) A sole proprietorship, group practice, partnership, or corporation that provides health care services by physicians covered by s. 627.419, that is directly supervised by one or more of such physicians, and that is wholly owned by one or more of those physicians or by a physician and the spouse, parent, child, or sibling of that physician.

(g) A sole proprietorship, group practice, partnership, or corporation that provides health care services by licensed health care practitioners under chapter 457, chapter 458, chapter 459, chapter 460, chapter 461, chapter 462, chapter 463, chapter 466, chapter 467, chapter 480, chapter 484, chapter 486, chapter 490, chapter 491, or part I, part III, part X, part XIII, or part XIV of chapter 468, or s. 464.012, and that is wholly owned by one or more licensed health care practitioners, or the licensed health care practitioners set forth in this
paragraph and the spouse, parent, child, or sibling of a licensed health care practitioner if one of the owners who is a licensed health care practitioner is supervising the business activities and is legally responsible for the entity’s compliance with all federal and state laws. However, a health care practitioner may not supervise services beyond the scope of the practitioner’s license, except that, for the purposes of this part, a clinic owned by a licensee in s. 456.053(3)(b) which provides only services authorized pursuant to s. 456.053(3)(b) may be supervised by a licensee specified in s. 456.053(3)(b).

(h) Clinical facilities affiliated with an accredited medical school at which training is provided for medical students, residents, or fellows.

(i) Entities that provide only oncology or radiation therapy services by physicians licensed under chapter 458 or chapter 459 or entities that provide oncology or radiation therapy services by physicians licensed under chapter 458 or chapter 459 which are owned by a corporation whose shares are publicly traded on a recognized stock exchange.

(j) Clinical facilities affiliated with a college of chiropractic accredited by the Council on Chiropractic Education at which training is provided for chiropractic students.

(k) Entities that provide licensed practitioners to staff emergency departments or to deliver anesthesia services in facilities licensed under chapter 395 and that derive at least 90 percent of their gross annual revenues from the provision of such services. Entities claiming an exemption from licensure under this paragraph must provide documentation demonstrating
(l) Orthotic, prosthetic, pediatric cardiology, or perinatology clinical facilities or anesthesia clinical facilities that are not otherwise exempt under paragraph (a) or paragraph (k) and that are a publicly traded corporation or are wholly owned, directly or indirectly, by a publicly traded corporation. As used in this paragraph, a publicly traded corporation is a corporation that issues securities traded on an exchange registered with the United States Securities and Exchange Commission as a national securities exchange.

(m) Entities that are owned by a corporation that has $250 million or more in total annual sales of health care services provided by licensed health care practitioners where one or more of the persons responsible for the operations of the entity is a health care practitioner who is licensed in this state and who is responsible for supervising the business activities of the entity and is responsible for the entity’s compliance with state law for purposes of this part.

(n) Entities that employ 50 or more licensed health care practitioners licensed under chapter 458 or chapter 459 where the billing for medical services is under a single tax identification number. The application for exemption under this subsection shall contain information that includes: the name, residence, and business address and phone number of the entity that owns the practice; a complete list of the names and contact information of all the officers and directors of the corporation; the name, residence address, business address, and medical license number of each licensed Florida health care practitioner employed by the entity; the corporate tax
identification number of the entity seeking an exemption; and a listing of health care services to be provided by the entity at the health care clinics owned or operated by the entity and a certified statement prepared by an independent certified public accountant which states that the entity and the health care clinics owned or operated by the entity have not received payment for health care services under personal injury protection insurance coverage for the preceding year. If the agency determines that an entity which is exempt under this subsection has received payments for medical services under personal injury protection insurance coverage, the agency may deny or revoke the exemption from licensure under this subsection.

Notwithstanding this subsection, an entity shall be deemed a clinic and must be licensed under this part in order to receive reimbursement under the Florida Motor Vehicle No-Fault Law, ss. 627.730–627.7405, unless exempted under s. 627.736(5)(h).

Section 10. Effective January 1, 2020, subsection (6) of section 400.991, Florida Statutes, is amended to read:

400.991 License requirements; background screenings; prohibitions.—

(6) All agency forms for licensure application or exemption from licensure under this part must contain the following statement:

INSURANCE FRAUD NOTICE.—A person who knowingly submits a false, misleading, or fraudulent application or other document when applying for licensure as a health
care clinic, seeking an exemption from licensure as a
health care clinic, or demonstrating compliance with
part X of chapter 400, Florida Statutes, with the
intent to use the license, exemption from licensure,
or demonstration of compliance to provide services or
seek reimbursement under the Florida Motor Vehicle No-
Fault Law, commits a fraudulent insurance act, as
defined in s. 626.989, Florida Statutes. A person who
presents a claim for personal injury protection
benefits knowing that the payee knowingly submitted
such health care clinic application or document,
commits insurance fraud, as defined in s. 817.234,
Florida Statutes.

Section 11. Effective January 1, 2020, paragraph (k) of
subsection (2) of section 456.057, Florida Statutes, is amended
to read:

456.057 Ownership and control of patient records; report or
copies of records to be furnished; disclosure of information.—

(2) As used in this section, the terms “records owner,”
“health care practitioner,” and “health care practitioner’s
employer” do not include any of the following persons or
entities; furthermore, the following persons or entities are not
authorized to acquire or own medical records, but are authorized
under the confidentiality and disclosure requirements of this
section to maintain those documents required by the part or
chapter under which they are licensed or regulated:

(k) Persons or entities practicing under s. 627.736(7).

Section 12. Effective January 1, 2020, present paragraphs
(gg) through (oo) of subsection (1) of section 456.072, Florida
Statutes, are redesignated as paragraphs (ee) through (mm), respectively, and present paragraphs (ee) and (ff) of that subsection are amended, to read:

456.072 Grounds for discipline; penalties; enforcement.—

(1) The following acts shall constitute grounds for which the disciplinary actions specified in subsection (2) may be taken:

(ee) With respect to making a personal injury protection claim as required by s. 627.736, intentionally submitting a claim, statement, or bill that has been “upcoded” as defined in s. 627.732.

(ff) With respect to making a personal injury protection claim as required by s. 627.736, intentionally submitting a claim, statement, or bill for payment of services that were not rendered.

Section 13. Effective January 1, 2020, paragraphs (i) and (o) of subsection (1) of section 626.9541, Florida Statutes, are amended to read:

626.9541 Unfair methods of competition and unfair or deceptive acts or practices defined.—

(1) UNFAIR METHODS OF COMPETITION AND UNFAIR OR DECEPTIVE ACTS.—The following are defined as unfair methods of competition and unfair or deceptive acts or practices:

(i) Unfair claim settlement practices.—

1. Attempting to settle claims on the basis of an application, when serving as a binder or intended to become a part of the policy, or any other material document which was altered without notice to, or knowledge or consent of, the insured.
2. A material misrepresentation made to an insured or any other person having an interest in the proceeds payable under such contract or policy, for the purpose and with the intent of effecting settlement of such claims, loss, or damage under such contract or policy on less favorable terms than those provided in, and contemplated by, such contract or policy.

3. Committing or performing with such frequency as to indicate a general business practice any of the following:
   a. Failing to adopt and implement standards for the proper investigation of claims;
   b. Misrepresenting pertinent facts or insurance policy provisions relating to coverages at issue;
   c. Failing to acknowledge and act promptly upon communications with respect to claims;
   d. Denying claims without conducting reasonable investigations based upon available information;
   e. Failing to affirm or deny full or partial coverage of claims, and, as to partial coverage, the dollar amount or extent of coverage, or failing to provide a written statement that the claim is being investigated, upon the written request of the insured within 30 days after proof-of-loss statements have been completed;
   f. Failing to promptly provide a reasonable explanation in writing to the insured of the basis in the insurance policy, in relation to the facts or applicable law, for denial of a claim or for the offer of a compromise settlement;
   g. Failing to promptly notify the insured of any additional information necessary for the processing of a claim; or
   h. Failing to clearly explain the nature of the requested

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information and the reasons why such information is necessary.

1. Failing to pay personal injury protection insurance claims within the time periods required by s. 627.736(4)(b). The office may order the insurer to pay restitution to a policyholder, medical provider, or other claimant, including interest at a rate consistent with the amount set forth in s. 55.03(1), for the time period within which an insurer fails to pay claims as required by law. Restitution is in addition to any other penalties allowed by law, including, but not limited to, the suspension of the insurer’s certificate of authority.

4. Failing to pay undisputed amounts of partial or full benefits owed under first-party property insurance policies within 90 days after an insurer receives notice of a residential property insurance claim, determines the amounts of partial or full benefits, and agrees to coverage, unless payment of the undisputed benefits is prevented by an act of God, prevented by the impossibility of performance, or due to actions by the insured or claimant that constitute fraud, lack of cooperation, or intentional misrepresentation regarding the claim for which benefits are owed.

(o) Illegal dealings in premiums; excess or reduced charges for insurance.—

1. Knowingly collecting any sum as a premium or charge for insurance, which is not then provided, or is not in due course to be provided, subject to acceptance of the risk by the insurer, by an insurance policy issued by an insurer as permitted by this code.

2. Knowingly collecting as a premium or charge for insurance any sum in excess of or less than the premium or
charge applicable to such insurance, in accordance with the
applicable classifications and rates as filed with and approved
by the office, and as specified in the policy; or, in cases when
classifications, premiums, or rates are not required by this
code to be so filed and approved, premiums and charges collected
from a Florida resident in excess of or less than those
specified in the policy and as fixed by the insurer.
Notwithstanding any other provision of law, this provision shall
not be deemed to prohibit the charging and collection, by
surplus lines agents licensed under part VII of this chapter,
of the amount of applicable state and federal taxes, or fees as
authorized by s. 626.916(4), in addition to the premium required
by the insurer or the charging and collection, by licensed
agents, of the exact amount of any discount or other such fee
charged by a credit card facility in connection with the use of
a credit card, as authorized by subparagraph (q)3., in addition
to the premium required by the insurer. This subparagraph shall
not be construed to prohibit collection of a premium for a
universal life or a variable or indeterminate value insurance
policy made in accordance with the terms of the contract.

3.a. Imposing or requesting an additional premium for a
policy of motor vehicle liability, personal injury protection,
medical payment, or collision insurance or any combination
thereof or refusing to renew the policy solely because the
insured was involved in a motor vehicle accident unless the
insurer’s file contains information from which the insurer in
good faith determines that the insured was substantially at
fault in the accident.

b. An insurer which imposes and collects such a surcharge
or which refuses to renew such policy shall, in conjunction with
the notice of premium due or notice of nonrenewal, notify the
named insured that he or she is entitled to reimbursement of
such amount or renewal of the policy under the conditions listed
below and will subsequently reimburse him or her or renew the
policy, if the named insured demonstrates that the operator
involved in the accident was:

(I) Lawfully parked;

(II) Reimbursed by, or on behalf of, a person responsible
for the accident or has a judgment against such person;

(III) Struck in the rear by another vehicle headed in the
same direction and was not convicted of a moving traffic
violation in connection with the accident;

(IV) Hit by a “hit-and-run” driver, if the accident was
reported to the proper authorities within 24 hours after
discovering the accident;

(V) Not convicted of a moving traffic violation in
connection with the accident, but the operator of the other
automobile involved in such accident was convicted of a moving
traffic violation;

(VI) Finally adjudicated not to be liable by a court of
competent jurisdiction;

(VII) In receipt of a traffic citation which was dismissed
or nolle prossed; or

(VIII) Not at fault as evidenced by a written statement
from the insured establishing facts demonstrating lack of fault
which are not rebutted by information in the insurer’s file from
which the insurer in good faith determines that the insured was
substantially at fault.
c. In addition to the other provisions of this subparagraph, an insurer may not fail to renew a policy if the insured has had only one accident in which he or she was at fault within the current 3-year period. However, an insurer may nonrenew a policy for reasons other than accidents in accordance with s. 627.728. This subparagraph does not prohibit nonrenewal of a policy under which the insured has had three or more accidents, regardless of fault, during the most recent 3-year period.

4. Imposing or requesting an additional premium for, or refusing to renew, a policy for motor vehicle insurance solely because the insured committed a noncriminal traffic infraction as described in s. 318.14 unless the infraction is:
   a. A second infraction committed within an 18-month period, or a third or subsequent infraction committed within a 36-month period.
   b. A violation of s. 316.183, when such violation is a result of exceeding the lawful speed limit by more than 15 miles per hour.

5. Upon the request of the insured, the insurer and licensed agent shall supply to the insured the complete proof of fault or other criteria which justifies the additional charge or cancellation.

6. No insurer shall impose or request an additional premium for motor vehicle insurance, cancel or refuse to issue a policy, or refuse to renew a policy because the insured or the applicant is a handicapped or physically disabled person, so long as such handicap or physical disability does not substantially impair such person’s mechanically assisted driving ability.
7. No insurer may cancel or otherwise terminate any insurance contract or coverage, or require execution of a consent to rate endorsement, during the stated policy term for the purpose of offering to issue, or issuing, a similar or identical contract or coverage to the same insured with the same exposure at a higher premium rate or continuing an existing contract or coverage with the same exposure at an increased premium.

8. No insurer may issue a nonrenewal notice on any insurance contract or coverage, or require execution of a consent to rate endorsement, for the purpose of offering to issue, or issuing, a similar or identical contract or coverage to the same insured at a higher premium rate or continuing an existing contract or coverage at an increased premium without meeting any applicable notice requirements.

9. No insurer shall, with respect to premiums charged for motor vehicle insurance, unfairly discriminate solely on the basis of age, sex, marital status, or scholastic achievement.

10. Imposing or requesting an additional premium for motor vehicle comprehensive or uninsured motorist coverage solely because the insured was involved in a motor vehicle accident or was convicted of a moving traffic violation.

11. No insurer shall cancel or issue a nonrenewal notice on any insurance policy or contract without complying with any applicable cancellation or nonrenewal provision required under the Florida Insurance Code.

12. No insurer shall impose or request an additional premium, cancel a policy, or issue a nonrenewal notice on any insurance policy or contract because of any traffic infraction
when adjudication has been withheld and no points have been
assessed pursuant to s. 318.14(9) and (10). However, this
subparagraph does not apply to traffic infractions involving
accidents in which the insurer has incurred a loss due to the
fault of the insured.

Section 14. Effective January 1, 2020, paragraph (a) of
subsection (1) of section 626.989, Florida Statutes, is amended
to read:

626.989 Investigation by department or Division of
Investigative and Forensic Services; compliance; immunity;
confidential information; reports to division; division
investigator’s power of arrest.—

(1) For the purposes of this section:

(a) A person commits a “fraudulent insurance act” if the
person:

1. Knowingly and with intent to defraud presents, causes to
be presented, or prepares with knowledge or belief that it will
be presented, to or by an insurer, self-insurer, self-insurance
fund, servicing corporation, purported insurer, broker, or any
agent thereof, any written statement as part of, or in support
of, an application for the issuance of, or the rating of, any
insurance policy, or a claim for payment or other benefit
pursuant to any insurance policy, which the person knows to
contain materially false information concerning any fact
material thereto or if the person conceals, for the purpose of
misleading another, information concerning any fact material
thereto.

2. Knowingly submits+:

++ a false, misleading, or fraudulent application or other
document when applying for licensure as a health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400 with an intent to use the license, exemption from licensure, or demonstration of compliance to provide services or seek reimbursement under the Florida Motor Vehicle No-Fault Law.

b. A claim for payment or other benefit pursuant to a personal injury protection insurance policy under the Florida Motor Vehicle No-Fault Law if the person knows that the payee knowingly submitted a false, misleading, or fraudulent application or other document when applying for licensure as a health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400.

Section 15. Effective January 1, 2020, subsections (1) and (7) of section 627.727, Florida Statutes, are amended to read:

627.727 Motor vehicle insurance; uninsured and underinsured vehicle coverage; insolvent insurer protection.—

(1) No motor vehicle liability insurance policy which provides bodily injury liability coverage shall be delivered or issued for delivery in this state with respect to any specifically insured or identified motor vehicle registered or principally garaged in this state unless uninsured motor vehicle coverage is provided therein or supplemental thereto for the protection of persons insured thereunder who are legally entitled to recover damages from owners or operators of uninsured motor vehicles because of bodily injury, sickness, or disease, including death, resulting therefrom. However, the coverage required under this section is not applicable when, or
to the extent that, an insured named in the policy makes a written rejection of the coverage on behalf of all insureds under the policy. When a motor vehicle is leased for a period of 1 year or longer and the lessor of such vehicle, by the terms of the lease contract, provides liability coverage on the leased vehicle, the lessee of such vehicle shall have the sole privilege to reject uninsured motorist coverage or to select lower limits than the bodily injury liability limits, regardless of whether the lessor is qualified as a self-insurer pursuant to s. 324.171. Unless an insured, or lessee having the privilege of rejecting uninsured motorist coverage, requests such coverage or requests higher uninsured motorist limits in writing, the coverage or such higher uninsured motorist limits need not be provided in or supplemental to any other policy which renews, extends, changes, supersedes, or replaces an existing policy with the same bodily injury liability limits when an insured or lessee had rejected the coverage. When an insured or lessee has initially selected limits of uninsured motorist coverage lower than her or his bodily injury liability limits, higher limits of uninsured motorist coverage need not be provided in or supplemental to any other policy which renews, extends, changes, supersedes, or replaces an existing policy with the same bodily injury liability limits unless an insured requests higher uninsured motorist coverage in writing. The rejection or selection of lower limits shall be made on a form approved by the office. The form shall fully advise the applicant of the nature of the coverage and shall state that the coverage is equal to bodily injury liability limits unless lower limits are requested or the coverage is rejected. The heading of the form
shall be in 12-point bold type and shall state: “You are electing not to purchase certain valuable coverage which protects you and your family or you are purchasing uninsured motorist limits less than your bodily injury liability limits when you sign this form. Please read carefully.” If this form is signed by a named insured, it will be conclusively presumed that there was an informed, knowing rejection of coverage or election of lower limits on behalf of all insureds. The insurer shall notify the named insured at least annually of her or his options as to the coverage required by this section. Such notice shall be part of, and attached to, the notice of premium, shall provide for a means to allow the insured to request such coverage, and shall be given in a manner approved by the office. Receipt of this notice does not constitute an affirmative waiver of the insured’s right to uninsured motorist coverage where the insured has not signed a selection or rejection form. The coverage described under this section shall be over and above, but shall not duplicate, the benefits available to an insured under any workers’ compensation law, personal injury protection benefits, disability benefits law, or similar law; under any automobile medical expense coverage; under any motor vehicle liability insurance coverage; or from the owner or operator of the uninsured motor vehicle or any other person or organization jointly or severally liable together with such owner or operator for the accident; and such coverage shall cover the difference, if any, between the sum of such benefits and the damages sustained, up to the maximum amount of such coverage provided under this section. The amount of coverage available under this section shall not be reduced by a setoff against any coverage,
including liability insurance. Such coverage shall not inure
directly or indirectly to the benefit of any workers’
compensation or disability benefits carrier or any person or
organization qualifying as a self-insurer under any workers’
compensation or disability benefits law or similar law.
(7) The legal liability of an uninsured motorist coverage
insurer does not include damages in tort for pain, suffering,
mental anguish, and inconvenience unless the injury or disease
is described in one or more of paragraphs (a)-(d) of s.
627.737(2).
Section 16. Effective January 1, 2020, section 627.7275,
Florida Statutes, is amended to read:
627.7275 Motor vehicle liability.—
(1) A motor vehicle insurance policy providing personal
injury protection as set forth in s. 627.736 may not be
delivered or issued for delivery in this state for a with
respect to any specifically insured or identified motor vehicle
registered or principally garaged in this state must provide
unless the policy also provides coverage for property damage
liability and bodily injury liability as required under by s.
324.022.
(2)(a) Insurers writing motor vehicle insurance in this
state shall make available, subject to the insurers’ usual
underwriting restrictions:
1. Coverage under policies as described in subsection (1)
to an applicant for private passenger motor vehicle insurance
coverage who is seeking the coverage in order to reinstate the
applicant’s driving privileges in this state if the driving
privileges were revoked or suspended pursuant to s. 316.646 or
s. 324.0221 due to the failure of the applicant to maintain required security.

2. Coverage under policies as described in subsection (1), which also provides bodily injury liability coverage and property damage liability coverage for bodily injury, death, and property damage arising out of the ownership, maintenance, or use of the motor vehicle in an amount not less than the limits described in s. 324.021(7) and conforms to the requirements of s. 324.151, to an applicant for private passenger motor vehicle insurance coverage who is seeking the coverage in order to reinstate the applicant’s driving privileges in this state after such privileges were revoked or suspended under s. 316.193 or s. 322.26(2) for driving under the influence.

(b) The policies described in paragraph (a) shall be issued for at least 6 months and, as to the minimum coverages required under this section, may not be canceled by the insured for any reason or by the insurer after 60 days, during which period the insurer is completing the underwriting of the policy. After the insurer has completed underwriting the policy, the insurer shall notify the Department of Highway Safety and Motor Vehicles that the policy is in full force and effect and is not cancelable for the remainder of the policy period. A premium shall be collected and the coverage is in effect for the 60-day period during which the insurer is completing the underwriting of the policy whether or not the person’s driver license, motor vehicle tag, and motor vehicle registration are in effect. Once the noncancelable provisions of the policy become effective, the coverages for bodily injury and property damage, and personal injury protection may not be reduced below the minimum limits required
under s. 324.021 or s. 324.023 during the policy period.

(c) This subsection controls to the extent of any conflict with any other section.

(d) An insurer issuing a policy subject to this section may cancel the policy if, during the policy term, the named insured, or any other operator who resides in the same household or customarily operates an automobile insured under the policy, has his or her driver license suspended or revoked.

(e) This subsection does not require an insurer to offer a policy of insurance to an applicant if such offer would be inconsistent with the insurer’s underwriting guidelines and procedures.

Section 17. Effective January 1, 2020, section 627.8405, Florida Statutes, is amended to read:

627.8405 Prohibited acts; financing companies.—No premium finance company shall, in a premium finance agreement or other agreement, finance the cost of or otherwise provide for the collection or remittance of dues, assessments, fees, or other periodic payments of money for the cost of:

(1) A membership in an automobile club. The term “automobile club” means a legal entity which, in consideration of dues, assessments, or periodic payments of money, promises its members or subscribers to assist them in matters relating to the ownership, operation, use, or maintenance of a motor vehicle; however, this definition of “automobile club” does not include persons, associations, or corporations which are organized and operated solely for the purpose of conducting, sponsoring, or sanctioning motor vehicle races, exhibitions, or contests upon racetracks, or upon racecourses established and

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CODING: Words strucken are deletions; words underlined are additions.
marked as such for the duration of such particular events. The words “motor vehicle” used herein have the same meaning as defined in chapter 320.

(2) An accidental death and dismemberment policy sold in combination with a personal injury protection and property damage only policy.

(3) Any product not regulated under the provisions of this insurance code.

This section also applies to premium financing by any insurance agent or insurance company under part XVI. The commission shall adopt rules to assure disclosure, at the time of sale, of coverages financed with personal injury protection and shall prescribe the form of such disclosure.

Section 18. Effective January 1, 2020, present paragraph (e) of subsection (2) of section 628.909, Florida Statutes, is redesignated as paragraph (d), present paragraph (d) of that subsection is amended, present paragraph (e) of subsection (3) of that section is redesignated as paragraph (d), and present paragraph (d) of that subsection is amended, to read:

628.909 Applicability of other laws.—

(2) The following provisions of the Florida Insurance Code apply to captive insurance companies who are not industrial insured captive insurance companies to the extent that such provisions are not inconsistent with this part:

(d) Sections 627.730-627.7405, when no fault coverage is provided.

(3) The following provisions of the Florida Insurance Code shall apply to industrial insured captive insurance companies to
the extent that such provisions are not inconsistent with this part:

(d) Sections 627.730–627.7405 when no-fault coverage is provided.

Section 19. Effective January 1, 2020, paragraph (a) of subsection (1), paragraph (c) of subsection (7), paragraphs (a), (b), and (c) of subsection (8), and subsections (9) and (10) of section 817.234, Florida Statutes, are amended to read:

817.234 False and fraudulent insurance claims.—

(1)(a) A person commits insurance fraud punishable as provided in subsection (11) if that person, with the intent to injure, defraud, or deceive any insurer:

1. Presents or causes to be presented any written or oral statement as part of, or in support of, a claim for payment or other benefit pursuant to an insurance policy or a health maintenance organization subscriber or provider contract, knowing that such statement contains any false, incomplete, or misleading information concerning any fact or thing material to such claim;

2. Prepares or makes any written or oral statement that is intended to be presented to any insurer in connection with, or in support of, any claim for payment or other benefit pursuant to an insurance policy or a health maintenance organization subscriber or provider contract, knowing that such statement contains any false, incomplete, or misleading information concerning any fact or thing material to such claim;

3.a. Knowingly presents, causes to be presented, or prepares or makes with knowledge or belief that it will be presented to any insurer, purported insurer, servicing
corporation, insurance broker, or insurance agent, or any employee or agent thereof, any false, incomplete, or misleading information or written or oral statement as part of, or in support of, an application for the issuance of, or the rating of, any insurance policy, or a health maintenance organization subscriber or provider contract; or

b. Knowingly conceals information concerning any fact material to such application; or  

4. Knowingly presents, causes to be presented, or prepares or makes with knowledge or belief that it will be presented to any insurer a claim for payment or other benefit under a motor vehicle personal injury protection insurance policy if the person knows that the payee knowingly submitted a false, misleading, or fraudulent application or other document when applying for licensure as a health care clinic, seeking an exemption from licensure as a health care clinic, or demonstrating compliance with part X of chapter 400.

(c) An insurer, or any person acting at the direction of or on behalf of an insurer, may not change an opinion in a mental or physical report prepared under s. 627.736(7) or direct the physician preparing the report to change such opinion; however, this provision does not preclude the insurer from calling to the attention of the physician errors of fact in the report based upon information in the claim file. Any person who violates this paragraph commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

(8)(a) It is unlawful for any person intending to defraud any other person to solicit or cause to be solicited any
business from a person involved in a motor vehicle accident for
the purpose of making, adjusting, or settling motor vehicle tort
claims or claims for personal injury protection benefits
required by s. 627.736. Any person who violates the provisions
of this paragraph commits a felony of the second degree,
punishable as provided in s. 775.082, s. 775.083, or s. 775.084.
A person who is convicted of a violation of this subsection
shall be sentenced to a minimum term of imprisonment of 2 years.

(b) A person may not solicit or cause to be solicited any
business from a person involved in a motor vehicle accident by
any means of communication other than advertising directed to
the public for the purpose of making motor vehicle tort claims
or claims for personal injury protection benefits required by s.
627.736, within 60 days after the occurrence of the motor
vehicle accident. Any person who violates this paragraph commits
a felony of the third degree, punishable as provided in s.
775.082, s. 775.083, or s. 775.084.

(c) A lawyer, health care practitioner as defined in s.
456.001, or owner or medical director of a clinic required to be
licensed pursuant to s. 400.9905 may not, at any time after 60
days have elapsed from the occurrence of a motor vehicle
accident, solicit or cause to be solicited any business from a
person involved in a motor vehicle accident by means of in
person or telephone contact at the person’s residence, for the
purpose of making motor vehicle tort claims or claims for
personal injury protection benefits required by s. 627.736. Any
person who violates this paragraph commits a felony of the third
degree, punishable as provided in s. 775.082, s. 775.083, or s.
775.084.
(9) A person may not organize, plan, or knowingly participate in an intentional motor vehicle crash or a scheme to create documentation of a motor vehicle crash that did not occur for the purpose of making motor vehicle tort claims or claims for personal injury protection benefits as required by s. 627.736. Any person who violates this subsection commits a felony of the second degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. A person who is convicted of a violation of this subsection shall be sentenced to a minimum term of imprisonment of 2 years.

(10) A licensed health care practitioner who is found guilty of insurance fraud under this section for an act relating to a motor vehicle personal injury protection insurance policy loses his or her license to practice for 5 years and may not receive reimbursement for bodily personal injury liability protection benefits for 10 years.

Section 20. Effective January 1, 2020, subsection (1) of section 316.646, Florida Statutes, is amended to read:

316.646 Security required; proof of security and display thereof.—

(1) Any person required by s. 324.022 to maintain property damage liability security or required by s. 324.023 to maintain liability security for bodily injury or death, or required by s. 627.733 to maintain personal injury protection security on a motor vehicle shall have in his or her immediate possession at all times while operating such motor vehicle proper proof of maintenance of the required security.

(a) Such proof shall be in a uniform paper or electronic format, as prescribed by the department, a valid insurance
policy, an insurance policy binder, a certificate of insurance, or such other proof as may be prescribed by the department.

(b)1. The act of presenting to a law enforcement officer an electronic device displaying proof of insurance in an electronic format does not constitute consent for the officer to access any information on the device other than the displayed proof of insurance.

2. The person who presents the device to the officer assumes the liability for any resulting damage to the device.

Section 21. Effective January 1, 2020, paragraphs (a) and (d) of subsection (5) of section 320.02, Florida Statutes, are amended to read:

320.02 Registration required; application for registration; forms.—

(5)(a) Proof that personal injury protection benefits have been purchased if required under s. 627.733, that property damage liability coverage has been purchased as required under s. 324.022, that bodily injury or death coverage has been purchased if required under s. 324.023, and that combined bodily liability insurance and property damage liability insurance have been purchased if required under s. 627.7415 shall be provided in the manner prescribed by law by the applicant at the time of application for registration of any motor vehicle that is subject to such requirements. The issuing agent shall refuse to issue registration if such proof of purchase is not provided. Insurers shall furnish uniform proof-of-purchase cards in a paper or electronic format in a form prescribed by the department and include the name of the insured’s insurance company, the coverage identification number, and the make, year,
and vehicle identification number of the vehicle insured. The card must contain a statement notifying the applicant of the penalty specified under s. 316.646(4). The card or insurance policy, insurance policy binder, or certificate of insurance or a photocopy of any of these; an affidavit containing the name of the insured’s insurance company, the insured’s policy number, and the make and year of the vehicle insured; or such other proof as may be prescribed by the department shall constitute sufficient proof of purchase. If an affidavit is provided as proof, it must be in substantially the following form:

Under penalty of perjury, I ...(Name of insured) ... do hereby certify that I have ...(Personal Injury Protection, Property Damage Liability, and, if required, Bodily Injury Liability) ... Insurance currently in effect with ...(Name of insurance company) ... under ...(policy number) ... covering ...(make, year, and vehicle identification number of vehicle).... ...(Signature of Insured) ...

Such affidavit must include the following warning:

WARNING: GIVING FALSE INFORMATION IN ORDER TO OBTAIN A VEHICLE REGISTRATION CERTIFICATE IS A CRIMINAL OFFENSE UNDER FLORIDA LAW. ANYONE GIVING FALSE INFORMATION ON THIS AFFIDAVIT IS SUBJECT TO PROSECUTION.

If an application is made through a licensed motor vehicle dealer as required under s. 319.23, the original or a photostatic copy of such card, insurance policy, insurance
policy binder, or certificate of insurance or the original affidavit from the insured shall be forwarded by the dealer to the tax collector of the county or the Department of Highway Safety and Motor Vehicles for processing. By executing the aforesaid affidavit, no licensed motor vehicle dealer will be liable in damages for any inadequacy, insufficiency, or falsification of any statement contained therein. A card must also indicate the existence of any bodily injury liability insurance voluntarily purchased.

(d) The verifying of proof of personal injury protection insurance, proof of property damage liability insurance, proof of combined bodily liability insurance and property damage liability insurance, or proof of financial responsibility insurance and the issuance or failure to issue the motor vehicle registration under the provisions of this chapter may not be construed in any court as a warranty of the reliability or accuracy of the evidence of such proof. Neither the department nor any tax collector is liable in damages for any inadequacy, insufficiency, falsification, or unauthorized modification of any item of the proof of personal injury protection insurance, proof of property damage liability insurance, proof of combined bodily liability insurance and property damage liability insurance, or proof of financial responsibility insurance prior to, during, or subsequent to the verification of the proof. The issuance of a motor vehicle registration does not constitute prima facie evidence or a presumption of insurance coverage.

Section 22. Effective January 1, 2020, paragraph (b) of subsection (1) of section 320.0609, Florida Statutes, is amended to read:
320.0609 Transfer and exchange of registration license plates; transfer fee.—

(1)

(b) The transfer of a license plate from a vehicle disposed of to a newly acquired vehicle does not constitute a new registration. The application for transfer shall be accepted without requiring proof of personal injury protection or liability insurance.

Section 23. Effective January 1, 2020, subsections (1) and (2) of section 322.251, Florida Statutes, are amended to read:

322.251 Notice of cancellation, suspension, revocation, or disqualification of license.—

(1) All orders of cancellation, suspension, revocation, or disqualification issued under the provisions of this chapter, chapter 318, or chapter 324, or ss. 627.732-627.734 shall be given either by personal delivery thereof to the licensee whose license is being canceled, suspended, revoked, or disqualified or by deposit in the United States mail in an envelope, first class, postage prepaid, addressed to the licensee at his or her last known mailing address furnished to the department. Such mailing by the department constitutes notification, and any failure by the person to receive the mailed order will not affect or stay the effective date or term of the cancellation, suspension, revocation, or disqualification of the licensee’s driving privilege.

(2) The giving of notice and an order of cancellation, suspension, revocation, or disqualification by mail is complete upon expiration of 20 days after deposit in the United States mail for all notices except those issued under chapter 324 or
ss. 627.732–627.734, which are complete 15 days after deposit in
the United States mail. Proof of the giving of notice and an
order of cancellation, suspension, revocation, or
disqualification in either manner shall be made by entry in the
records of the department that such notice was given. The entry
is admissible in the courts of this state and constitutes
sufficient proof that such notice was given.

Section 24. Effective January 1, 2020, paragraph (a) of
subsection (8) of section 322.34, Florida Statutes, is amended
to read:

322.34 Driving while license suspended, revoked, canceled,
or disqualified.—

(8)(a) Upon the arrest of a person for the offense of
driving while the person’s driver license or driving privilege
is suspended or revoked, the arresting officer shall determine:

1. Whether the person’s driver license is suspended or
revoked.

2. Whether the person’s driver license has remained
suspended or revoked since a conviction for the offense of
driving with a suspended or revoked license.

3. Whether the suspension or revocation was made under s.
316.646 or s. 627.733, relating to failure to maintain required
security, or under s. 322.264, relating to habitual traffic
offenders.

4. Whether the driver is the registered owner or coowner of
the vehicle.

Section 25. Effective January 1, 2020, subsections (1) and
(2) of section 324.0221, Florida Statutes, are amended to read:

324.0221 Reports by insurers to the department; suspension
(1)(a) Each insurer that has issued a policy providing personal injury protection coverage or property damage liability coverage shall report the cancellation or nonrenewal thereof to the department within 10 days after the processing date or effective date of each cancellation or nonrenewal. Upon the issuance of a policy providing personal injury protection coverage or property damage liability coverage to a named insured not previously insured by the insurer during that calendar year, the insurer shall report the issuance of the new policy to the department within 10 days. The report shall be in the form and format and contain any information required by the department and must be provided in a format that is compatible with the data processing capabilities of the department. Failure by an insurer to file proper reports with the department as required by this subsection constitutes a violation of the Florida Insurance Code. These records shall be used by the department only for enforcement and regulatory purposes, including the generation by the department of data regarding compliance by owners of motor vehicles with the requirements for financial responsibility coverage.

(b) With respect to an insurance policy providing personal injury protection coverage or property damage liability coverage, each insurer shall notify the named insured, or the first-named insured in the case of a commercial fleet policy, in writing that any cancellation or nonrenewal of the policy will be reported by the insurer to the department. The notice must also inform the named insured that failure to maintain personal injury protection coverage and property damage liability coverage of driver license and vehicle registrations; reinstatement.—
coverage on a motor vehicle when required by law may result in the loss of registration and driving privileges in this state and inform the named insured of the amount of the reinstatement fees required by this section. This notice is for informational purposes only, and an insurer is not civilly liable for failing to provide this notice.

(2) The department shall suspend, after due notice and an opportunity to be heard, the registration and driver license of any owner or registrant of a motor vehicle with respect to which security is required under ss. 324.022 and 627.733 upon:

(a) The department’s records showing that the owner or registrant of such motor vehicle did not have in full force and effect when required security that complies with the requirements of ss. 324.022 and 627.733; or

(b) Notification by the insurer to the department, in a form approved by the department, of cancellation or termination of the required security.

Section 26. Effective January 1, 2020, subsection (28) of section 409.901, Florida Statutes, is amended to read:

409.901 Definitions; ss. 409.901-409.920.—As used in ss. 409.901-409.920, except as otherwise specifically provided, the term:

(28) “Third-party benefit” means any benefit that is or may be available at any time through contract, court award, judgment, settlement, agreement, or any arrangement between a third party and any person or entity, including, without limitation, a Medicaid recipient, a provider, another third party, an insurer, or the agency, for any Medicaid-covered...
injury, illness, goods, or services, including costs of medical
services related thereto, for personal injury or for death of
the recipient, but specifically excluding policies of life
insurance on the recipient, unless available under terms of the
policy to pay medical expenses prior to death. The term
includes, without limitation, collateral, as defined in this
section, health insurance, any benefit under a health
maintenance organization, a preferred provider arrangement, a
prepaid health clinic, liability insurance, uninsured motorist
insurance or personal injury protection coverage, medical
benefits under workers’ compensation, and any obligation under
law or equity to provide medical support.

Section 27. Effective January 1, 2020, paragraph (f) of
subsection (11) of section 409.910, Florida Statutes, is amended
to read:

409.910 Responsibility for payments on behalf of Medicaid-
eligible persons when other parties are liable.—

(11) The agency may, as a matter of right, in order to
enforce its rights under this section, institute, intervene in,
or join any legal or administrative proceeding in its own name
in one or more of the following capacities: individually, as
subrogee of the recipient, as assignee of the recipient, or as
lienholder of the collateral.

(f) Notwithstanding any provision in this section to the
contrary, in the event of an action in tort against a third
party in which the recipient or his or her legal representative
is a party which results in a judgment, award, or settlement
from a third party, the amount recovered shall be distributed as
follows:
1. After attorney’s fees and taxable costs as defined by the Florida Rules of Civil Procedure, one-half of the remaining recovery shall be paid to the agency up to the total amount of medical assistance provided by Medicaid.

2. The remaining amount of the recovery shall be paid to the recipient.

3. For purposes of calculating the agency’s recovery of medical assistance benefits paid, the fee for services of an attorney retained by the recipient or his or her legal representative shall be calculated at 25 percent of the judgment, award, or settlement.

4. Notwithstanding any provision of this section to the contrary, the agency shall be entitled to all medical coverage benefits up to the total amount of medical assistance provided by Medicaid. For purposes of this paragraph, “medical coverage” means any benefits under health insurance, a health maintenance organization, a preferred provider arrangement, or a prepaid health clinic, and the portion of benefits designated for medical payments under coverage for workers’ compensation, personal injury protection, and casualty.

Section 28. Effective January 1, 2020, subsection (1) of section 627.06501, Florida Statutes, is amended to read:

627.06501 Insurance discounts for certain persons completing driver improvement course.—

(1) Any rate, rating schedule, or rating manual for the liability, personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office may provide for an appropriate reduction in premium charges as to such coverages when the principal operator on the covered
vehicle has successfully completed a driver improvement course approved and certified by the Department of Highway Safety and Motor Vehicles which is effective in reducing crash or violation rates, or both, as determined pursuant to s. 318.1451(5). Any discount, not to exceed 10 percent, used by an insurer is presumed to be appropriate unless credible data demonstrates otherwise.

Section 29. Effective January 1, 2020, subsection (1) of section 627.0652, Florida Statutes, is amended to read:

627.0652 Insurance discounts for certain persons completing safety course.—

(1) Any rates, rating schedules, or rating manuals for the liability, personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office shall provide for an appropriate reduction in premium charges as to such coverages when the principal operator on the covered vehicle is an insured 55 years of age or older who has successfully completed a motor vehicle accident prevention course approved by the Department of Highway Safety and Motor Vehicles. Any discount used by an insurer is presumed to be appropriate unless credible data demonstrates otherwise.

Section 30. Effective January 1, 2020, subsections (1), (3), and (6) of section 627.0653, Florida Statutes, are amended to read:

627.0653 Insurance discounts for specified motor vehicle equipment.—

(1) Any rates, rating schedules, or rating manuals for the liability, personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office shall
provide a premium discount if the insured vehicle is equipped with factory-installed, four-wheel antilock brakes.

(3) Any rates, rating schedules, or rating manuals for personal injury protection coverage and medical payments coverage, if offered, of a motor vehicle insurance policy filed with the office shall provide a premium discount if the insured vehicle is equipped with one or more air bags which are factory installed.

(6) The Office of Insurance Regulation may approve a premium discount to any rates, rating schedules, or rating manuals for the liability, personal injury protection, and collision coverages of a motor vehicle insurance policy filed with the office if the insured vehicle is equipped with autonomous driving technology or electronic vehicle collision avoidance technology that is factory installed or a retrofitted system and that complies with National Highway Traffic Safety Administration standards.

Section 31. Effective January 1, 2020, section 627.4132, Florida Statutes, is amended to read:

627.4132 Stacking of coverages prohibited.—If an insured or named insured is protected by any type of motor vehicle insurance policy for liability, personal injury protection, or other coverage, the policy shall provide that the insured or named insured is protected only to the extent of the coverage she or he has on the vehicle involved in the accident. However, if none of the insured’s or named insured’s vehicles is involved in the accident, coverage is available only to the extent of coverage on any one of the vehicles with applicable coverage. Coverage on any other vehicles shall not be added to or stacked
upon that coverage. This section does not apply:

(1) To uninsured motorist coverage which is separately governed by s. 627.727.

(2) To reduce the coverage available by reason of insurance policies insuring different named insureds.

Section 32. Effective January 1, 2020, section 627.7263, Florida Statutes, is amended to read:

627.7263 Rental and leasing driver’s insurance to be primary; exception.—

(1) The valid and collectible liability insurance or personal injury protection insurance providing coverage for the lessor of a motor vehicle for rent or lease is primary unless otherwise stated in at least 10-point type on the face of the rental or lease agreement. Such insurance is primary for the limits of liability and personal injury protection coverage as required by s. 324.021(7) ss. 324.021(7) and 627.736.

(2) If the lessee’s coverage is to be primary, the rental or lease agreement must contain the following language, in at least 10-point type:

“The valid and collectible liability insurance and personal injury protection insurance of any authorized rental or leasing driver is primary for the limits of liability and personal injury protection coverage required by s. 324.021(7) ss. 324.021(7) and 627.736, Florida Statutes.”

Section 33. Effective January 1, 2020, paragraph (a) of subsection (1) of section 627.728, Florida Statutes, is amended to read:
627.728 Cancellations; nonrenewals.—

(1) As used in this section, the term:

(a) “Policy” means the bodily injury and property damage
liability, personal injury protection, medical payments,
comprehensive, collision, and uninsured motorist coverage
portions of a policy of motor vehicle insurance delivered or
issued for delivery in this state:

1. Insuring a natural person as named insured or one or
more related individuals resident of the same household; and

2. Insuring only a motor vehicle of the private passenger
type or station wagon type which is not used as a public or
livery conveyance for passengers or rented to others; or
insuring any other four-wheel motor vehicle having a load
capacity of 1,500 pounds or less which is not used in the
occupation, profession, or business of the insured other than
farming; other than any policy issued under an automobile
insurance assigned risk plan or covering garage, automobile
sales agency, repair shop, service station, or public parking
place operation hazards.

The term “policy” does not include a binder as defined in s.
627.420 unless the duration of the binder period exceeds 60
days.

Section 34. Effective January 1, 2020, subsection (1),
paragraph (a) of subsection (5), and subsections (6) and (7) of
section 627.7295, Florida Statutes, are amended to read:

627.7295 Motor vehicle insurance contracts.—

(1) As used in this section, the term:

(a) “Policy” means a motor vehicle insurance policy that
provides personal injury protection coverage, property damage liability coverage, or both.

(b) “Binder” means a binder that provides motor vehicle personal injury protection and property damage liability coverage.

(5)(a) A licensed general lines agent may charge a per-policy fee not to exceed $10 to cover the administrative costs of the agent associated with selling the motor vehicle insurance policy if the policy covers only personal injury protection coverage as provided by s. 627.736 and property damage liability coverage as provided by s. 627.7275 and if no other insurance is sold or issued in conjunction with or collateral to the policy. The fee is not considered part of the premium.

(6) If a motor vehicle owner’s driver license, license plate, and registration have previously been suspended pursuant to s. 316.646 or s. 627.733, an insurer may cancel a new policy only as provided in s. 627.7275.

(7) A policy of private passenger motor vehicle insurance or a binder for such a policy may be initially issued in this state only if, before the effective date of such binder or policy, the insurer or agent has collected from the insured an amount equal to 2 months’ premium. An insurer, agent, or premium finance company may not, directly or indirectly, take any action resulting in the insured having paid from the insured’s own funds an amount less than the 2 months’ premium required by this subsection. This subsection applies without regard to whether the premium is financed by a premium finance company or is paid pursuant to a periodic payment plan of an insurer or an insurance agent. This subsection does not apply if an insured or
member of the insured’s family is renewing or replacing a policy or a binder for such policy written by the same insurer or a member of the same insurer group. This subsection does not apply to an insurer that issues private passenger motor vehicle coverage primarily to active duty or former military personnel or their dependents. This subsection does not apply if all policy payments are paid pursuant to a payroll deduction plan, an automatic electronic funds transfer payment plan from the policyholder, or a recurring credit card or debit card agreement with the insurer. This subsection and subsection (4) do not apply if all policy payments to an insurer are paid pursuant to an automatic electronic funds transfer payment plan from an agent, a managing general agent, or a premium finance company and if the policy includes, at a minimum, personal injury protection pursuant to ss. 627.730–627.7405; motor vehicle property damage liability pursuant to s. 627.7275; and bodily injury liability in at least the amount of $10,000 because of bodily injury to, or death of, one person in any one accident and in the amount of $20,000 because of bodily injury to, or death of, two or more persons in any one accident. This subsection and subsection (4) do not apply if an insured has had a policy in effect for at least 6 months, the insured’s agent is terminated by the insurer that issued the policy, and the insured obtains coverage on the policy’s renewal date with a new company through the terminated agent.

Section 35. Effective January 1, 2020, subsection (1) of section 627.915, Florida Statutes, is amended to read:

(1) Each insurer transacting private passenger automobile
insurance in this state shall report certain information annually to the office. The information will be due on or before July 1 of each year. The information shall be divided into the following categories: bodily injury liability; property damage liability; uninsured motorist; personal injury protection benefits; medical payments; comprehensive and collision. The information given shall be on direct insurance writings in the state alone and shall represent total limits data. The information set forth in paragraphs (a)-(f) is applicable to voluntary private passenger and Joint Underwriting Association private passenger writings and shall be reported for each of the latest 3 calendar-accident years, with an evaluation date of March 31 of the current year. The information set forth in paragraphs (g)-(j) is applicable to voluntary private passenger writings and shall be reported on a calendar-accident year basis ultimately seven times at seven different stages of development.

(a) Premiums earned for the latest 3 calendar-accident years.
(b) Loss development factors and the historic development of those factors.
(c) Policyholder dividends incurred.
(d) Expenses for other acquisition and general expense.
(e) Expenses for agents’ commissions and taxes, licenses, and fees.
(f) Profit and contingency factors as utilized in the insurer’s automobile rate filings for the applicable years.
(g) Losses paid.
(h) Losses unpaid.
(i) Loss adjustment expenses paid.
(j) Loss adjustment expenses unpaid.

Section 36. Effective January 1, 2020, subsections (2) and (6) and paragraphs (a), (c), and (d) of subsection (7) of section 705.184, Florida Statutes, are amended to read:

705.184 Derelict or abandoned motor vehicles on the premises of public-use airports.—

(2) The airport director or the director’s designee shall contact the Department of Highway Safety and Motor Vehicles to notify that department that the airport has possession of the abandoned or derelict motor vehicle and to determine the name and address of the owner of the motor vehicle, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, and any person who has filed a lien on the motor vehicle. Within 7 business days after receipt of the information, the director or the director’s designee shall send notice by certified mail, return receipt requested, to the owner of the motor vehicle, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the motor vehicle. The notice shall state the fact of possession of the motor vehicle, that charges for reasonable towing, storage, and parking fees, if any, have accrued and the amount thereof, that a lien as provided in subsection (6) will be claimed, that the lien is subject to enforcement pursuant to law, that the owner or lienholder, if any, has the right to a hearing as set forth in subsection (4), and that any motor vehicle which, at the end of 30 calendar days after receipt of the notice, has not been removed from the airport upon payment in full of all accrued charges for reasonable towing, storage, and parking fees, if
any, may be disposed of as provided in s. 705.182(2)(a), (b),
(d), or (e), including, but not limited to, the motor vehicle
being sold free of all prior liens after 35 calendar days after
the time the motor vehicle is stored if any prior liens on the
motor vehicle are more than 5 years of age or after 50 calendar
days after the time the motor vehicle is stored if any prior
liens on the motor vehicle are 5 years of age or less.

(6) The airport pursuant to this section or, if used, a
licensed independent wrecker company pursuant to s. 713.78 shall
have a lien on an abandoned or derelict motor vehicle for all
reasonable towing, storage, and accrued parking fees, if any,
except that no storage fee shall be charged if the motor vehicle
is stored less than 6 hours. As a prerequisite to perfecting a
lien under this section, the airport director or the director’s
designee must serve a notice in accordance with subsection (2)
on the owner of the motor vehicle, the insurance company
insuring the motor vehicle, notwithstanding the provisions of s.
627.736, and all persons of record claiming a lien against the
motor vehicle. If attempts to notify the owner, the insurance
company insuring the motor vehicle, notwithstanding the
provisions of s. 627.736, or lienholders are not successful, the
requirement of notice by mail shall be considered met. Serving
of the notice does not dispense with recording the claim of
lien.

(7)(a) For the purpose of perfecting its lien under this
section, the airport shall record a claim of lien which shall
state:

1. The name and address of the airport.

2. The name of the owner of the motor vehicle, the
insurance company insuring the motor vehicle, notwithstanding
the provisions of s. 627.736, and all persons of record claiming
a lien against the motor vehicle.

3. The costs incurred from reasonable towing, storage, and
parking fees, if any.

4. A description of the motor vehicle sufficient for
identification.

(c) The claim of lien shall be sufficient if it is in
substantially the following form:

CLAIM OF LIEN

State of .......
County of .......

Before me, the undersigned notary public, personally appeared
........., who was duly sworn and says that he/she is the
......... of ............, whose address is ..........; and that the
following described motor vehicle:

...(Description of motor vehicle)...

owned by ........, whose address is ........, has accrued
$........ in fees for a reasonable tow, for storage, and for
parking, if applicable; that the lienor served its notice to the
owner, the insurance company insuring the motor vehicle
notwithstanding the provisions of s. 627.736, Florida Statutes,
and all persons of record claiming a lien against the motor
vehicle on ...., ...(year)...., by ........

...(Signature)...

Sworn to (or affirmed) and subscribed before me this .... day of
........., ...(year)...., by ...(name of person making statement)....

...(Signature of Notary Public).......(Print, Type, or Stamp
Commissioned name of Notary Public)...

Personally Known....OR Produced....as identification.

However, the negligent inclusion or omission of any information in this claim of lien which does not prejudice the owner does not constitute a default that operates to defeat an otherwise valid lien.

(d) The claim of lien shall be served on the owner of the motor vehicle, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the motor vehicle. If attempts to notify the owner, the insurance company insuring the motor vehicle, notwithstanding the provisions of s. 627.736, or lienholders are not successful, the requirement of notice by mail shall be considered met. The claim of lien shall be so served before recordation.

Section 37. Effective January 1, 2020, paragraphs (a), (b), and (c) of subsection (4) of section 713.78, Florida Statutes, are amended to read:

713.78 Liens for recovering, towing, or storing vehicles and vessels.—

(4)(a) Any person regularly engaged in the business of recovering, towing, or storing vehicles or vessels who comes into possession of a vehicle or vessel pursuant to subsection (2), and who claims a lien for recovery, towing, or storage services, shall give notice to the registered owner, the insurance company insuring the vehicle, notwithstanding the provisions of s. 627.736, and to all persons claiming a lien thereon, as disclosed by the records in the Department of
Highway Safety and Motor Vehicles or as disclosed by the records of any corresponding agency in any other state in which the vehicle is identified through a records check of the National Motor Vehicle Title Information System or an equivalent commercially available system as being titled or registered.

(b) Whenever any law enforcement agency authorizes the removal of a vehicle or vessel or whenever any towing service, garage, repair shop, or automotive service, storage, or parking place notifies the law enforcement agency of possession of a vehicle or vessel pursuant to s. 715.07(2)(a)2., the law enforcement agency of the jurisdiction where the vehicle or vessel is stored shall contact the Department of Highway Safety and Motor Vehicles, or the appropriate agency of the state of registration, if known, within 24 hours through the medium of electronic communications, giving the full description of the vehicle or vessel. Upon receipt of the full description of the vehicle or vessel, the department shall search its files to determine the owner’s name, the insurance company insuring the vehicle or vessel, and whether any person has filed a lien upon the vehicle or vessel as provided in s. 319.27(2) and (3) and notify the applicable law enforcement agency within 72 hours. The person in charge of the towing service, garage, repair shop, or automotive service, storage, or parking place shall obtain such information from the applicable law enforcement agency within 5 days after the date of storage and shall give notice pursuant to paragraph (a). The department may release the insurance company information to the requestor notwithstanding the provisions of s. 627.736.

(c) Notice by certified mail shall be sent within 7
business days after the date of storage of the vehicle or vessel to the registered owner, the insurance company insuring the vehicle notwithstanding the provisions of s. 627.736, and all persons of record claiming a lien against the vehicle or vessel. It shall state the fact of possession of the vehicle or vessel, that a lien as provided in subsection (2) is claimed, that charges have accrued and the amount thereof, that the lien is subject to enforcement pursuant to law, and that the owner or lienholder, if any, has the right to a hearing as set forth in subsection (5), and that any vehicle or vessel which remains unclaimed, or for which the charges for recovery, towing, or storage services remain unpaid, may be sold free of all prior liens after 35 days if the vehicle or vessel is more than 3 years of age or after 50 days if the vehicle or vessel is 3 years of age or less.

Section 38. Except as otherwise expressly provided in this act, this act shall take effect January 2, 2019.