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COMMITTEE/SUBCOMMITTEE	ACTION
ADOPTED	(Y/N)
ADOPTED AS AMENDED	(Y/N)
ADOPTED W/O OBJECTION	(Y/N)
FAILED TO ADOPT	(Y/N)
WITHDRAWN	(Y/N)
OTHER	

Committee/Subcommittee hearing bill: Commerce Committee Representative Giallombardo offered the following:

# Amendment (with title amendment)

Remove everything after the enacting clause and insert:

6 Section 1. Present subsections (35) through (38) of section 494.001, Florida Statutes, are redesignated as subsections (36) through (39), respectively, a new subsection (35) is added to that section, and subsection (3) of that section is amended, to read:

494.001 Definitions.-As used in this chapter, the term:

(3) "Branch office" means a location, other than a mortgage 12 broker's or mortgage lender's principal place of business or 13 14 remote location:

(a) The address of which appears on business cards, 15 16 stationery, or advertising used by the licensee in connection

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17	with business conducted under this chapter;
18	(b) At which the licensee's name, advertising or
19	promotional materials, or signage suggests that mortgage loans
20	are originated, negotiated, funded, or serviced; or
21	(c) At which mortgage loans are originated, negotiated,
22	funded, or serviced by a licensee.
23	(35) "Remote location" means a location, other than a
24	principal place of business or a branch office, at which a loan
25	originator of a licensee may conduct business. A licensee may
26	allow loan originators to work from remote locations if:
27	(a) The licensee has written policies and procedures for
28	supervision of loan originators working from remote locations.
29	(b) Access to company platforms and customer information is
30	in accordance with the licensee's comprehensive written
31	information security plan.
32	(c) An in-person customer interaction does not occur at a
33	loan originator's residence unless such residence is a licensed
34	location.
35	(d) Physical records are not maintained at a remote
36	location.
37	(e) Customer interactions and conversations about consumers
38	will be in compliance with federal and state information
39	security requirements, including applicable provisions under the
40	Gramm-Leach-Bliley Act and the Safeguards Rule established by
41	the Federal Trade Commission, set forth at 16 C.F.R. part 314,
42	as such requirements may be amended from time to time.
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43	(f) A loan originator working at a remote location accesses
44	the company's secure systems or documents, including a cloud-
45	based system, directly from any out-of-office device such as a
46	laptop, phone, desktop computer, or tablet, through a virtual
47	private network or system that ensures secure connectivity and
48	that requires passwords or other forms of authentication to
49	access.
50	(g) The licensee ensures that appropriate security updates,
51	patches, or other alterations to the security of all devices
52	used at remote locations are installed and maintained.
53	(h) The licensee is able to remotely lock or erase company-
54	related contents of any device or otherwise remotely limit all
55	access to a company's secure systems.
56	(i) The registry's record of a loan originator who works
57	from a remote location designates the principal place of
58	business as the loan originator's registered location, or the
59	loan originator has elected a licensed branch office as a
60	registered location.
61	Section 2. Subsection (1) of section 494.0067, Florida
62	Statutes, is amended to read:
63	494.0067 Requirements of mortgage lenders
64	(1) A mortgage lender that makes mortgage loans on real
65	estate in this state shall transact business from a principal
66	place of business, branch office, or remote location. Each
67	principal place of business, and each branch office, and remote
68	location shall be operated under the full charge, control, and
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69	supervision of the licensee pursuant to this part.
70	Section 3. Section 501.2042, Florida Statutes, is created
71	to read:
72	501.2042 Unlawful acts and practices by online crowd-
73	funding campaigns
74	(1) As used in this section, the term:
75	(a) "Crowd-funding campaign" means an online fundraising
76	initiative that is intended to receive monetary donations from
77	donors and is created by an organizer in the interest of a
78	beneficiary.
79	(b) "Crowd-funding platform" means an entity doing business
80	in this state which provides an online medium for the creation
81	and facilitation of a crowd-funding campaign.
82	(c) "Disaster" has the same meaning as 252.34 (2)
83	(d) "Organizer" means a person who:
84	1. Resides or is domiciled in this state; and
85	2. Has an account on a crowd-funding platform and has
86	created a crowd-funding campaign either as a beneficiary or on
87	behalf of a beneficiary, regardless of whether the beneficiary
88	or the crowd-funding campaign has received donations.
89	(1) For crowd-funding campaigns related to and arising out
90	of a declared disaster, a crowd-funding platform must:
91	(a) Collect and retain, for one year after the date of the
92	declared disaster, the name, e-mail address, phone number, and
93	state of residence of the organizer.
94	(b) Require the organizer to indicate, on the crowd-

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95	funding campaign, the state in which they are located.
96	(c) Cooperate with any investigation by or in partnership
97	with law enforcement.
98	(d) Clearly display and direct donors to fundraisers that
99	comply with the crowd-funding platform's terms of service.
100	(2) When an organizer arranges a crowd-funding campaign
101	related to and arising out of a declared disaster, the organizer
102	must attest that:
103	(a) All information provided in connection with a crowd-
104	funding campaign is accurate, complete and not likely to deceive
105	users.
106	(b) All donations contributed to the crowd-funding
107	campaign will be used solely as described in the materials the
108	organizer posts or provides on the crowd-funding platform.
109	Section 4. Section 520.23, Florida Statutes, is amended to
110	read:
111	520.23 Disclosures required.—Each agreement governing the
112	sale or lease of a distributed energy generation system shall,
113	at a minimum, include a written statement printed in at least
114	12-point type that is separate from the agreement, is separately
115	acknowledged by the buyer or lessee, and includes the following
116	information and disclosures, if applicable:
117	(1) The name, address, telephone number, and e-mail address
118	of the buyer or lessee.
119	(2) The name, address, telephone number, e-mail address,
120	and valid state contractor license number of the person
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121 responsible for installing the distributed energy generation 122 system.

(3) The name, address, telephone number, e-mail address, and valid state contractor license number of the distributed energy generation system maintenance provider, if different from the person responsible for installing the distributed energy generation system.

128 (4) The customer contact center phone number for the
 129 Department of Business and Professional Regulation.

130 <u>(5)(4)</u> A written statement indicating whether the 131 distributed energy generation system is being purchased or 132 leased.

(a) If the distributed energy generation system will be leased, the written statement must include a disclosure in substantially the following form: "You are entering into an agreement to lease a distributed energy generation system. You will lease (not own) the system installed on your property."

(b) If the distributed energy generation system will be purchased, the written statement must include a disclosure in substantially the following form: "You are entering into an agreement to purchase a distributed energy generation system. You will own (not lease) the system installed on your property."

143 <u>(6)</u> (5) The total cost to be paid by the buyer or lessee, 144 including any interest, installation fees, document preparation 145 fees, service fees, or other fees.

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(7) (6) A payment schedule, including any amounts owed at

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147 contract signing, at the commencement of installation, at the 148 completion of installation, and any final payments. If the 149 distributed energy generation system is being leased, the 150 written statement must include the frequency and amount of each 151 payment due under the lease and the total estimated lease 152 payments over the term of the lease.

153 <u>(8)(7)</u> Each state or federal tax incentive or rebate, if 154 any, relied upon by the seller in determining the price of the 155 distributed energy generation system.

156 <u>(9)(8)</u> A description of the assumptions used to calculate 157 any savings estimates provided to the buyer or lessee, and if 158 such estimates are provided, a statement in substantially the 159 following form: "It is important to understand that future 160 electric utility rates are estimates only. Your future electric 161 utility rates may vary."

162 (10) (9) A description of any one-time or recurring fees, 163 including, but not limited to, estimated system removal fees, 164 maintenance fees, Internet connection fees, and automated 165 clearinghouse fees. If late fees may apply, the description must 166 describe the circumstances triggering such late fees.

167 <u>(11) (10)</u> A statement notifying the buyer whether the 168 distributed energy generation system is being financed and, if 169 so, a statement in substantially the following form: "If your 170 system is financed, carefully read any agreements and/or 171 disclosure forms provided by your lender. This statement does 172 not contain the terms of your financing agreement. If you have

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173 any questions about your financing agreement, contact your 174 finance provider before signing a contract."

175 (12) (11) A statement notifying the buyer whether the seller 176 is assisting in arranging financing of the distributed energy 177 generation system and, if so, a statement in substantially the 178 following form: "If your system is financed, carefully read any 179 agreements and/or disclosure forms provided by your lender. This 180 statement does not contain the terms of your financing 181 agreement. If you have any questions about your financing 182 agreement, contact your finance provider before signing a 183 contract."

184 (13) (12) A provision notifying the buyer or lessee of the right to rescind the agreement for a period of at least 3 185 186 business days after the agreement is signed. This subsection does not apply to a contract to sell or lease a distributed 187 energy generation system in a solar community in which the 188 entire community has been marketed as a solar community and all 189 190 of the homes in the community are intended to have a distributed 191 energy generation system, or a solar community in which the 192 developer has incorporated solar technology for purposes of 193 meeting the Florida Building Code in s. 553.73.

194 <u>(14) (13)</u> A description of the distributed energy generation 195 system design assumptions, including the make and model of the 196 major components, system size, estimated first-year energy 197 production, and estimated annual energy production decreases, 198 including the overall percentage degradation over the estimated

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199 life of the distributed energy generation system, and the status 200 of utility compensation for excess energy generated by the 201 system at the time of contract signing. A seller who provides a 202 warranty or guarantee of the energy production output of the 203 distributed energy generation system may provide a description 204 of such warranty or guarantee in lieu of a description of the 205 system design and components.

206 <u>(15)</u> (14) A description of any performance or production 207 guarantees.

208 <u>(16) (15)</u> A description of the ownership and transferability 209 of any tax credits, rebates, incentives, or renewable energy 210 certificates associated with the distributed energy generation 211 system, including a disclosure as to whether the seller will 212 assign or sell any associated renewable energy certificates to a 213 third party.

214 <u>(17) (16)</u> A statement in substantially the following form: 215 "You are responsible for property taxes on property you own. 216 Consult a tax professional to understand any tax liability or 217 eligibility for any tax credits that may result from the 218 purchase of your distributed energy generation system."

219 <u>(18) (17)</u> The approximate start and completion dates for the 220 installation of the distributed energy generation system.

221 (19) (18) A disclosure as to whether maintenance and repairs 222 of the distributed energy generation system are included in the 223 purchase price.

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(20) (19) A disclosure as to whether any warranty or

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225 maintenance obligations related to the distributed energy 226 generation system may be sold or transferred by the seller to a 227 third party and, if so, a statement in substantially the 228 following form: "Your contract may be assigned, sold, or 229 transferred without your consent to a third party who will be bound to all the terms of the contract. If a transfer occurs, 230 231 you will be notified if this will change the address or phone 232 number to use for system maintenance or repair requests."

233 <u>(21) (20)</u> If the distributed energy generation system will 234 be purchased, a disclosure notifying the buyer of the 235 requirements for interconnecting the system to the utility 236 system.

237 (22) (21) A disclosure notifying the buyer or lessee of the 238 party responsible for obtaining interconnection approval.

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(23) (22) A description of any roof warranties.

240 <u>(24) A statement in substantially the following form: "You</u> 241 <u>should consider the age and remaining life of your roof prior to</u> 242 <u>installing a distributed energy generation system. Replacement</u> 243 <u>of your roof may require reinstallment of the distributed energy</u> 244 generation system."

245 <u>(25) (23)</u> A disclosure notifying the lessee whether the 246 seller will insure a leased distributed energy generation system 247 against damage or loss and, if applicable, the circumstances 248 under which the seller will not insure the system against damage 249 or loss.

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(26) (24) A statement, if applicable, in substantially the

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following form: "You are responsible for obtaining insurance policies or coverage for any loss of or damage to the system. Consult an insurance professional to understand how to protect against the risk of loss or damage to the system."

255 <u>(27) A statement in substantially the following form:</u>
256 <u>"Placing a distributed energy generation system on your roof may</u>
257 <u>impact your future insurance premiums. You are responsible for</u>
258 <u>contacting your insurance carrier, prior to entering into a</u>
259 <u>purchase or lease agreement, to confirm whether your current</u>
260 <u>policy or coverage will need to be modified upon installing the</u>
261 <u>distributed energy generation system onto your dwelling."</u>

262 (28) (25) A disclosure notifying the buyer or lessee whether 263 the seller or lessor will place a lien on the buyer's or 264 lessee's home or other property as a result of entering into a 265 purchase or lease agreement for the distributed energy 266 generation system.

267 (29) (26) A disclosure notifying the buyer or lessee whether 268 the seller or lessor will file a fixture filing or a State of 269 Florida Uniform Commercial Code Financing Statement Form (UCC-1) 270 on the distributed energy generation system.

271 <u>(30) (27)</u> A disclosure identifying whether the agreement 272 contains any restrictions on the buyer's or lessee's ability to 273 modify or transfer ownership of a distributed energy generation 274 system, including whether any modification or transfer is 275 subject to review or approval by a third party.

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(31) (28) A disclosure as to whether the lease agreement may

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277 be transferred to a purchaser upon sale of the home or real 278 property to which the system is affixed, and any conditions for 279 such transfer.

280 (32) (29) A blank section that allows the seller to provide 281 additional relevant disclosures or explain disclosures made 282 elsewhere in the disclosure form.

284 The requirement to provide a written statement under this 285 section may be satisfied by the electronic delivery of a 286 document within 24 hours after execution of the written 287 statement containing the required statement if the intended 288 recipient of the electronic document affirmatively acknowledges 289 its receipt. An electronic document satisfies the font and other 290 formatting standards required for the written statement if the 291 format and the relative size of characters of the electronic 292 document are reasonably similar to those required in the written 293 document or if the information is otherwise displayed in a 294 reasonably conspicuous manner.

295 Section 5. Subsection (6) of section 560.111, Florida 296 Statutes, is amended to read:

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560.111 Prohibited acts.-

(6) A person who knowingly and willfully violates <u>s.</u>
560.309(11) or s. 560.310(2)(d) commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s.
775.084.

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Section 6. Subsection (11) is added to section 560.309,

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303	Florida Statutes, to read:
304	560.309 Conduct of business
305	(11) A licensee may not cash corporate checks where the
306	aggregate face amount of all corporate checks cashed for each
307	payee exceeds 200 percent of the payee's workers' compensation
308	policy payroll amount during the same dates as the workers'
309	compensation policy coverage period.
310	Section 7. Section 626.602, Florida Statutes, is amended to
311	read:
312	626.602 Insurance agency and adjusting firm names;
313	disapproval.—The department may disapprove the use of any true
314	or fictitious name, other than the bona fide natural name of an
315	individual, by any insurance agency <u>or adjusting firm</u> on any of
316	the following grounds:
317	(1) The name interferes with or is too similar to a name
318	already filed and in use by another agency, adjusting firm, or
319	insurer.
320	(2)The use of the name may mislead the public in any
321	respect.
322	(3) The name states or implies that the agency <u>or adjusting</u>
323	<u>firm</u> is an insurer, motor club, hospital service plan, state or
324	federal agency, charitable organization, or entity that
325	primarily provides advice and counsel rather than sells or
326	solicits insurance, <u>settles claims,</u> or is entitled to engage in
327	insurance activities not permitted under licenses held or
328	applied for. This provision does not prohibit the use of the
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329 word "state" or "states" in the name of the agency. The use of 330 the word "state" or "states" in the name of an agency <u>or</u> 331 <u>adjusting firm</u> does not in and of itself imply that the agency 332 or adjusting firm is a state agency.

333 (4) The name contains the word "Medicare" or "Medicaid." An 334 insurance agency whose name contains the word "Medicare" or 335 "Medicaid" but which is licensed as of July 1, 2021, may 336 continue to use that name until June 30, 2023, provided that the 337 agency's license remains valid. If the agency's license expires 338 or is suspended or revoked, the agency may not be relicensed 339 using that name. Licenses for agencies with names containing 340 either of these words automatically expire on July 1, 2023, unless these words are removed from the name. 341

342 Section 8. Section 626.854, Florida Statutes, is amended to 343 read:

344 626.854 "Public adjuster" defined; prohibitions.—The 345 Legislature finds that it is necessary for the protection of the 346 public to regulate public insurance adjusters and to prevent the 347 unauthorized practice of law.

(1) A "public adjuster" is any person, except a duly licensed attorney at law as exempted under s. 626.860, who, for money, commission, or any other thing of value, directly or indirectly prepares, completes, or files an insurance claim for an insured or third-party claimant, regardless of how that person describes or presents his or her services, or who, for money, commission, or any other thing of value, acts on behalf

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355 of, or aids an insured or third-party claimant in negotiating 356 for or effecting the settlement of a claim or claims for loss or 357 damage covered by an insurance contract, regardless of how that 358 person describes or presents his or her services, or who 359 advertises for employment as an adjuster of such claims. The 360 term also includes any person who, for money, commission, or any 361 other thing of value, directly or indirectly solicits, 362 investigates, or adjusts such claims on behalf of a public 363 adjuster, an insured, or a third-party claimant. The term does 364 not include a person who photographs or inventories damaged 365 personal property or business personal property or a person 366 performing duties under another professional license, if such 367 person does not otherwise solicit, adjust, investigate, or 368 negotiate for or attempt to effect the settlement of a claim.

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(2) This definition does not apply to:

(a) A licensed health care provider or employee thereof who
 prepares or files a health insurance claim form on behalf of a
 patient.

(b) A licensed health insurance agent who assists an insured with coverage questions, medical procedure coding issues, balance billing issues, understanding the claims filing process, or filing a claim, as such assistance relates to coverage under a health insurance policy.

378 (c) A person who files a health claim on behalf of another379 and does so without compensation.

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(3) A public adjuster may not give legal advice or act on

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381 behalf of or aid any person in negotiating or settling a claim 382 relating to bodily injury, death, or noneconomic damages. 383 (4) For purposes of this section, the term "insured" 384 includes only the policyholder and any beneficiaries named or 385 similarly identified in the policy. 386 (5) A public adjuster may not directly or indirectly 387 through any other person or entity solicit an insured or 388 claimant by any means except on Monday through Saturday of each 389 week and only between the hours of 8 a.m. and 8 p.m. on those 390 days. 391 (6) When entering a contract for adjuster services after 392 July 1, 2023, a public adjuster: 393 (a) may not collect a fee for services on payments made to 394 a named insured unless they have a written contract with the named insured, or the named insured's legal representative. 395 396 (b) May not contract for services to be provided by a third 397 party on behalf of the named insured or in pursuit of settlement 398 of the named insureds claim, if the cost of those services is to 399 be borne by the named insured, unless the named insured agrees 400 in writing to procure these services and such agreement is 401 entered into subsequent to the date of the contract for public 402 adjusting services. 403 (c) If a public adjuster contracts with a third-party 404 service provider to assist with the settlement of the named 405 insured's claim, without first obtaining the insured's written consent, payment of the third party's fees must be made by the 406 923275 - h1185-strike.docx

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407 public adjuster and may not be charged back to the named 408 insured. 409 (d) If a public adjuster represents anyone other than the named insured in a claim, the public adjuster fees shall be paid 410 by the third party and may not be charged back to the named 411 412 insured. 413 (7) (6) An insured or claimant may cancel a public 414 adjuster's contract to adjust a claim without penalty or 415 obligation within 10 days after the date on which the contract 416 is executed. If the contract was entered into based on events 417 that are the subject of a declaration of a state of emergency by the Governor, an insured or claimant may cancel the public 418 adjuster's contract to adjust a claim without penalty or 419 420 obligation within 30 days after the date of loss or 10 days after the date on which the contract is executed, whichever is 421 422 longer. The public adjuster's contract must contain the 423 following language in minimum 18-point bold type immediately 424 before the space reserved in the contract for the signature of 425 the insured or claimant: "You, the insured, may cancel this 426 contract for any reason without penalty or obligation to you 427 within 10 days after the date of this contract. If this contract 428 was entered into based on events that are the subject of a 429 declaration of a state of emergency by the Governor, you may 430 cancel this contract for any reason without penalty or obligation to you within 30 days after the date of loss or 10 431 432 days after the date on which the contract is executed, whichever

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433 is longer. You may also cancel the contract without penalty or 434 obligation to you if I, as your public adjuster, fail to provide 435 you and your insurer a copy of a written estimate within 60 days 436 of the execution of the contract, unless the failure to provide 437 the estimate within 60 days is caused by factors beyond my 438 control, in accordance with s. 626.854(14)(b), Florida Statutes. The 60-day cancellation period for failure to provide a written 439 440 estimate shall cease on the date I have provided you with the 441 written estimate." The by providing notice of cancellation shall 442 be provided to ... (name of public adjuster)..., submitted in 443 writing and sent by certified mail, return receipt requested, or 444 other form of mailing that provides proof thereof, at the address specified in the contract. 445

446 <u>(8)(7)</u> It is an unfair and deceptive insurance trade 447 practice pursuant to s. 626.9541 for a public adjuster or any 448 other person to circulate or disseminate any advertisement, 449 announcement, or statement containing any assertion, 450 representation, or statement with respect to the business of 451 insurance which is untrue, deceptive, or misleading.

(a) The following statements, made in any public adjuster's
advertisement or solicitation, are considered deceptive or
misleading:

455 1. A statement or representation that invites an insured 456 policyholder to submit a claim when the policyholder does not 457 have covered damage to insured property.

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2. A statement or representation that invites an insured

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459 policyholder to submit a claim by offering monetary or other 460 valuable inducement.

3. A statement or representation that invites an insured
policyholder to submit a claim by stating that there is "no
risk" to the policyholder by submitting such claim.

464 4. A statement or representation, or use of a logo or 465 shield, that implies or could mistakenly be construed to imply 466 that the solicitation was issued or distributed by a 467 governmental agency or is sanctioned or endorsed by a 468 governmental agency.

(b) For purposes of this paragraph, the term "written advertisement" includes only newspapers, magazines, flyers, and bulk mailers. The following disclaimer, which is not required to be printed on standard size business cards, must be added in bold print and capital letters in typeface no smaller than the typeface of the body of the text to all written advertisements by a public adjuster:

"THIS IS A SOLICITATION FOR BUSINESS. IF YOU HAVE HAD A CLAIM FOR AN INSURED PROPERTY LOSS OR DAMAGE AND YOU ARE SATISFIED WITH THE PAYMENT BY YOUR INSURER, YOU MAY DISREGARD THIS ADVERTISEMENT."

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482 (9)(8) A public adjuster, a public adjuster apprentice, or
 483 any person or entity acting on behalf of a public adjuster or
 484 public adjuster apprentice may not give or offer to give a

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485 monetary loan or advance to a client or prospective client.

486 <u>(10) (9)</u> A public adjuster, public adjuster apprentice, or 487 any individual or entity acting on behalf of a public adjuster 488 or public adjuster apprentice may not give or offer to give, 489 directly or indirectly, any article of merchandise having a 490 value in excess of \$25 to any individual for the purpose of 491 advertising or as an inducement to entering into a contract with 492 a public adjuster.

493 (10)(11)(a) If a public adjuster enters into a contract 494 with an insured or claimant to reopen a claim or file a 495 supplemental claim that seeks additional payments for a claim 496 that has been previously paid in part or in full or settled by 497 the insurer, the public adjuster may not charge, agree to, or 498 accept from any source compensation, payment, commission, fee, 499 or any other thing of value based on a previous settlement or 500 previous claim payments by the insurer for the same cause of 501 loss. The charge, compensation, payment, commission, fee, or any 502 other thing of value must be based only on the claim payments or 503 settlements paid to the insured, exclusive of attorney fees and 504 costs, obtained through the work of the public adjuster after 505 entering into the contract with the insured or claimant. 506 Compensation for the reopened or supplemental claim may not 507 exceed 20 percent of the reopened or supplemental claim payment. 508 In no event shall the contracts described in this paragraph 509 exceed the limitations in paragraph (b).

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(b) A public adjuster may not charge, agree to, or accept

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511 from any source compensation, payment, commission, fee, or any 512 other thing of value in excess of:

1. Ten percent of the amount of insurance claim payments or settlements, exclusive of attorney fees and costs, paid to the insured by the insurer for claims based on events that are the subject of a declaration of a state of emergency by the Governor. This provision applies to claims made during the year after the declaration of emergency. After that year, the limitations in subparagraph 2. apply.

520 2. Twenty percent of the amount of insurance claim payments 521 or settlements, exclusive of attorney fees and costs, paid to 522 the insured by the insurer for claims that are not based on 523 events that are the subject of a declaration of a state of 524 emergency by the Governor.

525 3. One percent of the amount of insurance claim payments or 526 settlements, paid to the insured by the insurer for any coverage 527 part of the policy where the claim payment or written agreement 528 by the insurer to pay is equal to or greater than the policy 529 limit for that part of the policy, if the payment or written 530 commitment to pay is provided within 14 days after the date of 531 loss or within 10 days after the date on which the public 532 adjusting contract is executed, whichever is later.

533 <u>4. Zero percent of the amount of insurance claim payments</u>
534 <u>or settlements, paid to the insured by the insurer for any</u>
535 <u>coverage part of the policy where the claim payment or written</u>
536 agreement by the insurer to pay occurs before the date on which

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537 the public adjusting contract is executed. 538 (c) Insurance claim payments made by the insurer do not 539 include policy deductibles, and public adjuster compensation may 540 not be based on the deductible portion of a claim. 541 (d) Public adjuster compensation may not be based on 542 amounts attributable to additional living expenses, unless such 543 compensation is affirmatively agreed to in a separate agreement 544 that includes a disclosure in substantially the following form: 545 "I agree to retain and compensate the public adjuster for 546 adjusting my additional living expenses and securing payment 547 from my insurer for amounts attributable to additional living 548 expenses payable under the policy issued on my (home/mobile 549 home/condominium unit)." 550 (e) Public adjuster rate of compensation may not be

550 (e) Public adjuster rate of compensation may not be 551 increased based solely on the fact that the claim is litigated.

(f) Any maneuver, shift, or device through which the limits on compensation set forth in this subsection are exceeded is a violation of this chapter punishable as provided under s. 626.8698.

556 <u>(12) (a) (11)</u> Each public adjuster must provide to the 557 claimant or insured a written estimate of the loss to assist in 558 the submission of a proof of loss or any other claim for payment 559 of insurance proceeds within 60 days after the date of the 560 contract. The written estimate must include an itemized, per-561 unit estimate of the repairs, including itemized information on 562 equipment, materials, labor, and supplies, in accordance with

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563 accepted industry standards. The public adjuster shall retain 564 such written estimate for at least 5 years and shall make the 565 estimate available to the claimant or insured, the insurer, and 566 the department upon request.

567 (b) An insured may cancel the contract with no additional 568 penalties or fees charged by the public adjuster if such an 569 estimate is not provided within 60 days after executing the 570 contract, subject to the cancellation notice requirement in this 571 section, unless the failure to provide the estimate within 60 572 days is caused by factors beyond the control of the public 573 adjuster. The cancellation period shall cease on the date the 574 public adjuster provides the written estimate to the insured.

575 (13) (12) A public adjuster, public adjuster apprentice, or 576 any person acting on behalf of a public adjuster or apprentice 577 may not accept referrals of business from any person with whom 578 the public adjuster conducts business if there is any form or 579 manner of agreement to compensate the person, directly or 580 indirectly, for referring business to the public adjuster. A 581 public adjuster may not compensate any person, except for 582 another public adjuster, directly or indirectly, for the 583 principal purpose of referring business to the public adjuster.

584 <u>(14) (13)</u> A company employee adjuster, independent adjuster, 585 attorney, investigator, or other persons acting on behalf of an 586 insurer that needs access to an insured or claimant or to the 587 insured property that is the subject of a claim must provide at 588 least 48 hours' notice to the insured or claimant, public

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adjuster, or legal representative before scheduling a meeting with the claimant or an onsite inspection of the insured property. The insured or claimant may deny access to the property if the notice has not been provided. The insured or claimant may waive the 48-hour notice.

594 (15) (14) The public adjuster must ensure that prompt notice 595 is given of the claim to the insurer, the public adjuster's 596 contract is provided to the insurer, the property is available 597 for inspection of the loss or damage by the insurer, and the 598 insurer is given an opportunity to interview the insured 599 directly about the loss and claim. The insurer must be allowed 600 to obtain necessary information to investigate and respond to 601 the claim.

602 (a) The insurer may not exclude the public adjuster from its in-person meetings with the insured. The insurer shall meet 603 604 or communicate with the public adjuster in an effort to reach 605 agreement as to the scope of the covered loss under the 606 insurance policy. The public adjuster shall meet or communicate with the insurer in an effort to reach agreement as to the scope 607 608 of the covered loss under the insurance policy. This section does not impair the terms and conditions of the insurance policy 609 610 in effect at the time the claim is filed.

(b) A public adjuster may not restrict or prevent an
insurer, company employee adjuster, independent adjuster,
attorney, investigator, or other person acting on behalf of the
insurer from having reasonable access at reasonable times to any

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615 insured or claimant or to the insured property that is the 616 subject of a claim.

617 (c) A public adjuster may not act or fail to reasonably act 618 in any manner that obstructs or prevents an insurer or insurer's 619 adjuster from timely conducting an inspection of any part of the 620 insured property for which there is a claim for loss or damage. 621 The public adjuster representing the insureds may be present for 622 the insurer's inspection, but if the unavailability of the 623 public adjuster otherwise delays the insurer's timely inspection 624 of the property, the public adjuster or the insureds must allow 625 the insurer to have access to the property without the 626 participation or presence of the public adjuster or insureds in 627 order to facilitate the insurer's prompt inspection of the loss 628 or damage.

629 (16) <del>(15)</del> A licensed contractor under part I of chapter 489, 630 or a subcontractor of such licensee, may not advertise, solicit, 631 offer to handle, handle, or perform public adjuster services as provided in subsection (1) unless licensed and compliant as a 632 public adjuster under this chapter. The prohibition against 633 634 solicitation does not preclude a contractor from suggesting or 635 otherwise recommending to a consumer that the consumer consider 636 contacting his or her insurer to determine if the proposed repair is covered under the consumer's insurance policy, except 637 638 as it relates to solicitation prohibited in s. 489.147. In 639 addition, the contractor may discuss or explain a bid for 640 construction or repair of covered property with the residential

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641 property owner who has suffered loss or damage covered by a 642 property insurance policy, or the insurer of such property, if 643 the contractor is doing so for the usual and customary fees 644 applicable to the work to be performed as stated in the contract 645 between the contractor and the insured.

646 (17) (16) A public adjuster shall not acquire any interest
647 in salvaged property, except with the written consent and
648 permission of the insured through a signed affidavit.

649 (18) (17) A public adjuster, a public adjuster apprentice, 650 or a person acting on behalf of an adjuster or apprentice may 651 not enter into a contract or accept a power of attorney that 652 vests in the public adjuster, the public adjuster apprentice, or 653 the person acting on behalf of the adjuster or apprentice the 654 effective authority to choose the persons or entities that will 655 perform repair work in a property insurance claim or provide 656 goods or services that will require the insured or third-party 657 claimant to expend funds in excess of those payable to the 658 public adjuster under the terms of the contract for adjusting 659 services.

660 (19) (18) Subsections (5) - (18) (5) - (17) apply only to 661 residential property insurance policies and condominium unit 662 owner policies as described in s. 718.111(11).

663 (20) (19) Except as otherwise provided in this chapter, no 664 person, except an attorney at law or a licensed public adjuster, 665 may for money, commission, or any other thing of value, directly 666 or indirectly:

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(a) Prepare, complete, or file an insurance claim for aninsured or a third-party claimant;

(b) Act on behalf of or aid an insured or a third-party
claimant in negotiating for or effecting the settlement of a
claim for loss or damage covered by an insurance contract;

672 (c) Offer to initiate or negotiate a claim on behalf of an 673 insured;

(d) Advertise services that require a license as a publicadjuster; or

(e) Solicit, investigate, or adjust a claim on behalf of apublic adjuster, an insured, or a third-party claimant.

(21) (20) The department may take administrative actions and
 impose fines against any persons performing claims adjusting,
 soliciting, or any other services described in this section
 without the licensure required under this section or s. 626.112.

682 (22)(21) A public adjuster, public adjuster apprentice, or 683 public adjusting firm that solicits a claim and does not enter 684 into a contract with an insured or a third-party claimant 685 pursuant to paragraph (11)(a) (10)(a) may not charge an insured 686 or a third-party claimant or receive payment by any other source 687 for any type of service related to the insured or third-party 688 claimant's claim.

689 (23) (a) (22) (a) Any following act by a public adjuster, a 690 public adjuster apprentice, or a person acting on behalf of a 691 public adjuster or public adjuster apprentice is prohibited and 692 shall result in discipline as applicable under this part:

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693 1. Offering to a residential property owner a rebate, gift, 694 gift card, cash, coupon, waiver of any insurance deductible, or 695 any other thing of value in exchange for: a. Allowing a contractor, a public adjuster, a public 696 697 adjuster apprentice, or a person acting on behalf of a public 698 adjuster or public adjuster apprentice to conduct an inspection 699 of the residential property owner's roof; or 700 b. Making an insurance claim for damage to the residential 701 property owner's roof. 702 2. Offering, delivering, receiving, or accepting any 703 compensation, inducement, or reward for the referral of any 704 services for which property insurance proceeds would be used for 705 roofing repairs or replacement. 706 (b) Notwithstanding the fine set forth in s. 626.8698, a 707 public adjuster or public adjuster apprentice may be subject to 708 a fine not to exceed \$10,000 per act for a violation of this 709 subsection and a fine not to exceed \$20,000 per act for a violation of this subsection that occurs during a state of 710 711 emergency declared by executive order or proclamation of the 712 Governor pursuant to s. 252.36. 713 (c) A person who engages in an act prohibited by this 714 subsection and who is not a public adjuster or a public adjuster 715 apprentice, or is not otherwise exempt from licensure, is guilty 716 of the unlicensed practice of public adjusting and may be:

717 1. Subject to all applicable penalties set forth in this718 part.

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719 2. Notwithstanding subparagraph 1., subject to a fine not 720 to exceed \$10,000 per act for a violation of this subsection and 721 a fine not to exceed \$20,000 per act for a violation of this subsection that occurs during a state of emergency declared by 722 723 executive order or proclamation of the Governor pursuant to s. 724 252.36. 725 Section 9. Section 626.860, Florida Statutes, is amended to 726 read: 727 626.860 Attorneys at law; exemption.-Attorneys at law duly 728 licensed to practice law in the courts of this state, and in 729 good standing with The Florida Bar, shall not be required to be 730 licensed under the provisions of this code to authorize them to 731 adjust or participate in the adjustment of any claim, loss, or 732 damage arising under policies or contracts of insurance. This 733 exemption does not extend to the employees, interns, volunteers, 734 or contractors of an attorney or of a law firm. 735 Section 10. Section 626.875, Florida Statutes, is amended 736 to read: 737 626.875 Office and records.-738 (1) (a) Each appointed independent adjuster and licensed 739 public adjuster must maintain a place of business in this state 740 which is accessible to the public and keep therein the usual and 741 customary records pertaining to transactions under the license. 742 This provision does not prohibit maintenance of such an office 743 in the home of the licensee.

744

(b) A license issued under this chapter must at all times

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745 be posted in a conspicuous place in the principal place of business of the license holder. If the licensee is conducting 746 747 business away from the place of business such that the license 748 cannot be posted, the licensee shall have such license in his or 749 her actual possession at the time of carrying on such business. 750 (2) The records of the adjuster relating to a particular 751 claim or loss shall be so retained in the adjuster's place of 752 business for a period of not less than 5 years after completion 753 of the adjustment and shall be available for inspection by the 754 department between the hours of 8 a.m. and 5 p.m., Monday 755 through Friday, excluding state holidays. This provision shall 756 not be deemed to prohibit return or delivery to the insurer or 757 insured of documents furnished to or prepared by the adjuster 758 and required by the insurer or insured to be returned or 759 delivered thereto. At a minimum, the following records must be 760 maintained for a period of not less than 5 years: 761 (a) Name, address, telephone number, and e-mail address of 762 the insured, and the name of the attorney representing the 763 insured, if applicable. 764 (b) The date, location, and amount of the loss. 765 (c) An unaltered copy of the executed disclosure document 766 required by s. 626.8796. 767 (d) An unaltered copy of the executed public adjuster 768 contract required by s. 626.8796. 769 (e) A copy of the estimate of damages provided to the 770 insurer.

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771	(f) The name of the insurer; the name of the claims
772	representative of the insurer; and the amount, expiration date,
773	and number of each policy under which the loss is covered.
774	(g) An itemized statement of the recoveries by the insured
775	from the sources known to the adjuster.
776	(h) An itemized statement of all compensation received by
777	the public adjuster from any source in connection with the loss.
778	(i) A register of all money received, deposited, disbursed,
779	and withdrawn in connection with a transaction with the insured,
780	including fees, transfers, and disbursements in connection with
781	the loss.
782	Section 11. Section 626.8796, Florida Statutes, is amended
783	to read:
784	626.8796 Public adjuster contracts; <u>disclosure statement;</u>
785	fraud statement
786	(1) All contracts for public adjuster services must be in
787	writing in at least 12-point type, be titled "Public Adjuster
788	<u>Contract,"</u> and prominently display the following statement on
789	the contract in minimum 18-point bold type before the space
790	reserved in the contract for the signature of the insured:
791	"Pursuant to s. 817.234, Florida Statutes, any person who, with
792	the intent to injure, defraud, or deceive an insurer or insured,
793	prepares, presents, or causes to be presented a proof of loss or
794	estimate of cost or repair of damaged property in support of a
795	claim under an insurance policy knowing that the proof of loss
796	or estimate of claim or repairs contains false, incomplete, or

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797 misleading information concerning any fact or thing material to 798 the claim commits a felony of the third degree, punishable as 799 provided in s. 775.082, s. 775.083, or s. 775.084, Florida 800 Statutes."

801 (2) A public adjuster contract relating to a property and 802 casualty claim must contain the full name, permanent business address, phone number, e-mail address, and license number of the 803 804 public adjuster; the full name of the public adjusting firm; and 805 the insured's full name, and street address, phone number, and 806 e-mail address, together with a brief description of the loss. 807 The contract must state the percentage of compensation for the 808 public adjuster's services in minimum 18-point bold type before 809 the space reserved in the contract for the signature of the 810 insured; the type of claim, including an emergency claim, nonemergency claim, or supplemental claim; the initials of the 811 812 named insured on each page that does not contain the insured's signature; the signatures of the public adjuster and all named 813 814 insureds; and the signature date. If all of the named insureds' 815 signatures are not available, the public adjuster must submit an 816 affidavit signed by the available named insureds attesting that 817 they have authority to enter into the contract and settle all 818 claim issues on behalf of the named insureds. An unaltered copy 819 of the executed contract must be remitted to the insured at the 820 time of execution and to the insurer, or the insurer's representative within 7  $\frac{30}{30}$  days after execution. A public 821 adjusting firm that adjusts claims primarily for commercial 822

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823 entities with operations in more than one state and that does 824 not directly or indirectly perform adjusting services for 825 insurers or individual homeowners is deemed to comply with the 826 requirements of this subsection if, at the time a proof of loss 827 is submitted, the public adjusting firm remits to the insurer an 828 affidavit signed by the public adjuster or public adjuster 829 apprentice that identifies:

(a) The full name, permanent business address, <u>phone</u>
<u>number, e-mail address</u>, and license number of the public
adjuster or public adjuster apprentice.

833

(b) The full name of the public adjusting firm.

(c) The insured's full name, and street address, phone
number, and e-mail address, together with a brief description of
the loss.

837 (d) An attestation that the compensation for public
838 adjusting services will not exceed the limitations provided by
839 law.

(e) The type of claim, including an emergency claim,nonemergency claim, or supplemental claim.

(3) The public adjuster shall not receive compensation for
services provided prior to the date the insured receives an
unaltered copiesy of the executed contract or the date executed
contract is submitted to the insurer. Proof of receipt by the
insured and proof of submission to the insurer must be
maintained by the public adjuster for not less than five years.
(4) The insured may rescind the contract for public

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849	adjuster services if the public adjuster has not submitted a
850	written estimate to the insurer within 60 days after executing
851	the contract, unless the failure to provide the written estimate
852	within 60 days is caused by factors beyond the public adjuster's
853	<u>control.</u>
854	(5) The cancellation period for failure to provide a
855	written estimate terminates on the date the estimate is
856	provided.
857	(6) Before the signing of the contract, the public adjuster
858	shall provide the insured with a separate disclosure document to
859	be signed by the insured, on a form adopted by the department,
860	regarding the claim process which accomplishes the following:
861	(a) Defines the following types of adjusters who may be
862	involved in the claim process: company adjuster, independent
863	adjuster, and public adjuster.
864	(b) Explains that the public adjuster is not a
865	representative or employee of the insurer.
866	(c) Explains that the insured is not required to hire a
867	public adjuster, but has a right to do so.
868	(d) Explains that an insured has a right to initiate direct
869	communications with the insured's attorney, the insurer, the
870	company adjuster, the insurer's attorney, or any person
871	regarding the settlement of the insured's claim.
872	(e) Explains that the public adjuster's salary, fee,
873	commission, or other consideration to be paid to a public
874	adjuster is the insured's responsibility.
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875	(f) Explains that the public adjuster is required to
876	provide the insured an unaltered copy of the executed contract
877	at the time of execution.
878	(g) Explains that if the contract was entered into based on
879	events that are the subject of a declaration of a state of
880	emergency by the Governor, an insured or a claimant may cancel
881	the public adjuster's contract to adjust a claim without penalty
882	<u>or obligation within 30 days after the date of loss or 10 days</u>
883	after the date on which the contract is executed, whichever is
884	longer.
885	(h) The public adjuster shall provide an unaltered copy of
886	the executed disclosure document to the insured at the time of
887	execution.
888	(7) A contract that does not comply with this section is
889	invalid and unenforceable.
890	(8) The department may adopt rules pursuant to ss.
891	120.536(1) and 120.54 to implement this section, including rules
892	to adopt forms required by this section.
893	Section 12. Section 626.8797, Florida Statutes, is amended
894	to read:
895	626.8797 Proof of loss; fraud statement.—All proof-of-loss
896	statements must prominently display the following statement $\underline{in}$
897	minimum 18-point bold type before the space reserved in the
898	contract for the signature of the insured: "Pursuant to s.
899	817.234, Florida Statutes, any person who, with the intent to
900	injure, defraud, or deceive any insurer or insured, prepares,
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901 presents, or causes to be presented a proof of loss or estimate 902 of cost or repair of damaged property in support of a claim 903 under an insurance policy knowing that the proof of loss or 904 estimate of claim or repairs contains any false, incomplete, or 905 misleading information concerning any fact or thing material to 906 the claim commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084, Florida 907 908 Statutes."

909 Section 13. Paragraph (a) of subsection (1) of section 910 626.9541, Florida Statutes, is amended to read:

911 626.9541 Unfair methods of competition and unfair or 912 deceptive acts or practices defined.-

913 (1) UNFAIR METHODS OF COMPETITION AND UNFAIR OR DECEPTIVE 914 ACTS.—The following are defined as unfair methods of competition 915 and unfair or deceptive acts or practices:

916 (a) Misrepresentations and false advertising of insurance 917 policies.-Knowingly making, issuing, circulating, or causing to 918 be made, issued, or circulated, any estimate, illustration, 919 circular, statement, sales presentation, omission, comparison, 920 or property and casualty certificate of insurance altered after 921 being issued, which:

922 1. Misrepresents the benefits, advantages, conditions, or923 terms of any insurance policy.

924 2. Misrepresents the dividends or share of the surplus to925 be received on any insurance policy.

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3. Makes any false or misleading statements as to the

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927 dividends or share of surplus previously paid on any insurance 928 policy.

4. Is misleading, or is a misrepresentation, as to the
financial condition of any person or as to the legal reserve
system upon which any life insurer operates.

932 5. Uses any name or title of any insurance policy or class933 of insurance policies misrepresenting the true nature thereof.

6. Is a misrepresentation for the purpose of inducing, or
tending to induce, the lapse, forfeiture, exchange, conversion,
or surrender of any insurance policy.

937 7. Is a misrepresentation for the purpose of effecting a
938 pledge or assignment of, or effecting a loan against, any
939 insurance policy.

8. Misrepresents any insurance policy as being shares ofstock or misrepresents ownership interest in the company.

942 9. Uses any advertisement that would mislead or otherwise 943 cause a reasonable person to believe mistakenly that the state 944 or the Federal Government is responsible for the insurance sales 945 activities of any person or stands behind any person's credit or 946 that any person, the state, or the Federal Government guarantees 947 any returns on insurance products or is a source of payment of 948 any insurance obligation of or sold by any person.

949 <u>10. Fails to disclose a third party that receives</u> 950 royalties, referral fees, or other remuneration for sponsorship, 951 <u>marketing, or use of third-party branding for a policy of health</u> 952 <u>insurance as defined in s. 624.603.</u>

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953 Section 14. Paragraph (c) of subsection (2) of section 954 627.4025, Florida Statutes, is amended, and paragraph (d) is 955 added to that subsection, to read: 956 627.4025 Residential coverage and hurricane coverage 957 defined.-958 (2) As used in policies providing residential coverage: 959 (c) "Hurricane" for purposes of paragraphs (a) and (b) 960 means a storm system that has been declared to be a hurricane by 961 the National Hurricane Center of the National Weather Service. 962 The duration of the hurricane includes the time period, in 963 Florida: 964 1. Beginning at the time a hurricane watch or hurricane 965 warning is issued for any part of Florida by the National 966 Hurricane Center of the National Weather Service; and 967 2. Continuing for the time period during which the 968 hurricane conditions exist anywhere in Florida; and 969 3. Ending 72 hours following the termination of the last 970 hurricane watch or hurricane warning issued for any part of 971 Florida by the National Hurricane Center of the National Weather 972 Service. 973 (d) "Hurricane deductible" means the deductible applicable 974 to loss caused by a hurricane. 975 Section 15. Paragraph (b) of subsection (1) and paragraph 976 (b) of subsection (2) of section 627.4133, Florida Statutes, are 977 amended to read: 978 627.4133 Notice of cancellation, nonrenewal, or renewal 923275 - h1185-strike.docx Published On: 4/15/2023 4:21:46 PM

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979 premium.-

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(1) Except as provided in subsection (2):

981 (b) An insurer issuing a policy providing coverage for 982 property, casualty, except mortgage guaranty, surety, or marine 983 insurance, other than motor vehicle insurance subject to s. 984 627.728 or s. 627.7281, shall give the first-named insured 985 written notice of cancellation or termination other than 986 nonrenewal at least 45 days prior to the effective date of the 987 cancellation or termination, including in the written notice the 988 reason or reasons for the cancellation or termination, except 989 that:

990 1. When cancellation is for nonpayment of premium, at least 10 days' written notice of cancellation accompanied by the 991 992 reason therefor shall be given. As used in this subparagraph and 993 s. 440.42(3), the term "nonpayment of premium" means failure of 994 the named insured to discharge when due any of her or his 995 obligations in connection with the payment of premiums on a 996 policy or any installment of such premium, whether the premium 997 is payable directly to the insurer or its agent or indirectly 998 under any premium finance plan or extension of credit, or 999 failure to maintain membership in an organization if such 1000 membership is a condition precedent to insurance coverage. 1001 "Nonpayment of premium" also means the failure of a financial 1002 institution to honor an insurance applicant's check after 1003 delivery to a licensed agent for payment of a premium, even if 1004 the agent has previously delivered or transferred the premium to

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1005 the insurer. If a dishonored check represents the initial 1006 premium payment, the contract and all contractual obligations 1007 shall be void ab initio unless the nonpayment is cured within 1008 the earlier of 5 days after actual notice by certified mail is 1009 received by the applicant or 15 days after notice is sent to the 1010 applicant by certified mail or registered mail, and if the 1011 contract is void, any premium received by the insurer from a 1012 third party shall be refunded to that party in full; and

1013 2. When such cancellation or termination occurs during the 1014 first 60  $\frac{90}{20}$  days during which the insurance is in force and the 1015 insurance is canceled or terminated for reasons other than 1016 nonpayment of premium, at least 20 days' written notice of 1017 cancellation or termination accompanied by the reason therefor 1018 shall be given except where there has been a material 1019 misstatement or misrepresentation or failure to comply with the 1020 underwriting requirements established by the insurer.

After the policy has been in effect for 60 90 days, no such 1022 1023 policy shall be canceled by the insurer except when there has 1024 been a material misstatement, a nonpayment of premium, a failure 1025 to comply with underwriting requirements established by the 1026 insurer within 60 90 days of the date of effectuation of 1027 coverage, or a substantial change in the risk covered by the 1028 policy or when the cancellation is for all insureds under such 1029 policies for a given class of insureds. This subsection does not 1030 apply to individually rated risks having a policy term of less

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1031 than 90 days.

1032 (d) Notwithstanding subparagraph (b), Citizens Property 1033 Insurance Corporation in underwriting risks that, prior to the 1034 date of the application, were most recently insured by an insurer that has been placed in receivership under ch. 631, may 1035 1036 immediately cancel a policy insuring such risk that is in effect 1037 for 90 days or less for material misrepresentation or failure to 1038 comply with underwriting requirements established before the 1039 effectuation of coverage.

(2) With respect to any personal lines or commercial residential property insurance policy, including, but not limited to, any homeowner, mobile home owner, farmowner, condominium association, condominium unit owner, apartment building, or other policy covering a residential structure or its contents:

(b) The insurer shall give the first-named insured written notice of nonrenewal, cancellation, or termination at least 120 days before the effective date of the nonrenewal, cancellation, or termination. The notice must include the reason for the nonrenewal, cancellation, or termination, except that:

1051 1. If cancellation is for nonpayment of premium, at least 1052 10 days' written notice of cancellation accompanied by the 1053 reason therefor must be given. As used in this subparagraph, the 1054 term "nonpayment of premium" means failure of the named insured 1055 to discharge when due her or his obligations for paying the 1056 premium on a policy or an installment of such premium, whether

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1057 the premium is payable directly to the insurer or its agent or 1058 indirectly under a premium finance plan or extension of credit, 1059 or failure to maintain membership in an organization if such membership is a condition precedent to insurance coverage. The 1060 term also means the failure of a financial institution to honor 1061 1062 an insurance applicant's check after delivery to a licensed 1063 agent for payment of a premium even if the agent has previously 1064 delivered or transferred the premium to the insurer. If a 1065 dishonored check represents the initial premium payment, the 1066 contract and all contractual obligations are void ab initio 1067 unless the nonpayment is cured within the earlier of 5 days 1068 after actual notice by certified mail is received by the applicant or 15 days after notice is sent to the applicant by 1069 1070 certified mail or registered mail. If the contract is void, any 1071 premium received by the insurer from a third party must be 1072 refunded to that party in full.

2. If cancellation or termination occurs during the first 1073 1074 60 90 days the insurance is in force and the insurance is 1075 canceled or terminated for reasons other than nonpayment of 1076 premium, at least 20 days' written notice of cancellation or 1077 termination accompanied by the reason therefor must be given 1078 unless there has been a material misstatement or 1079 misrepresentation or a failure to comply with the underwriting 1080 requirements established by the insurer.

10813. After the policy has been in effect for  $\underline{60}$   $\underline{90}$  days, the1082policy may not be canceled by the insurer unless there has been

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1083 a material misstatement; a nonpayment of premium; a failure to 1084 comply, within 60 90 days after the date of effectuation of 1085 coverage, with underwriting requirements established by the 1086 insurer before the date of effectuation of coverage; or a 1087 substantial change in the risk covered by the policy or unless 1088 the cancellation is for all insureds under such policies for a 1089 given class of insureds. This subparagraph does not apply to 1090 individually rated risks that have a policy term of less than 90 1091 days.

4. After a policy or contract has been in effect for more than <u>60</u> <del>90</del> days, the insurer may not cancel or terminate the policy or contract based on credit information available in public records.

1096 5. A policy that is nonrenewed by Citizens Property 1097 Insurance Corporation, pursuant to s. 627.351(6), for a policy 1098 that has been assumed by an authorized insurer offering 1099 replacement coverage to the policyholder is exempt from the 1100 notice requirements of paragraph (a) and this paragraph. In such 1101 cases, the corporation must give the named insured written 1102 notice of nonrenewal at least 45 days before the effective date 1103 of the nonrenewal.

6. Notwithstanding any other provision of law, an insurer may cancel or nonrenew a property insurance policy after at least 45 days' notice if the office finds that the early cancellation of some or all of the insurer's policies is necessary to protect the best interests of the public or

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1109 policyholders and the office approves the insurer's plan for 1110 early cancellation or nonrenewal of some or all of its policies. 1111 The office may base such finding upon the financial condition of 1112 the insurer, lack of adequate reinsurance coverage for hurricane 1113 risk, or other relevant factors. The office may condition its 1114 finding on the consent of the insurer to be placed under 1115 administrative supervision pursuant to s. 624.81 or to the 1116 appointment of a receiver under chapter 631.

1117 7. A policy covering both a home and a motor vehicle may be 1118 nonrenewed for any reason applicable to the property or motor 1119 vehicle insurance after providing 90 days' notice.

1120 Section 16. Effective January 1, 2024, section 627.4554, 1121 Florida Statutes, is amended to read:

1122

627.4554 Suitability in annuity transactions investments.-

1123 (1) PURPOSE.-The purpose of this section is to require 1124 agents to act in the best interest of the consumer when making a recommendation of an annuity and to require insurers to 1125 1126 establish and maintain a system to supervise so set forth standards and procedures for making recommendations to consumers 1127 1128 which result in transactions involving annuity products, and to 1129 establish a system for supervising such recommendations in order 1130 to ensure that the insurance needs and financial objectives of 1131 consumers are effectively appropriately addressed at the time of 1132 the transaction.

(2) SCOPE.—This section applies to any <u>sale or</u> recommendation of made to a consumer to purchase, exchange, or

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1135	replace an annuity by an insurer or its agent, and which results
1136	in the purchase, exchange, or replacement recommended.
1137	(3) DEFINITIONSAs used in this section, the term:
1138	(a) "Agent" means a person or entity required to be
1139	licensed under the laws of this state to sell, solicit, or
1140	negotiate insurance, including annuities. For purposes of this
1141	section, the term includes an insurer when no agent is involved
1142	has the same meaning as provided in s. 626.015.
1143	(b) "Annuity" means an insurance product under state law
1144	which is individually solicited, whether classified as an
1145	individual or group annuity.
1146	(c) "Cash compensation" means any discount, concession,
1147	fee, service fee, commission, sales charge, loan, override, or
1148	cash benefit received by an agent from an insurer or
1149	intermediary or directly from the consumer in connection with
1150	the recommendation or sale of an annuity.
1151	(d) "Consumer profile information" means information that
1152	is reasonably appropriate to determine whether a recommendation
1153	addresses the consumer's financial situation, insurance needs,
1154	and financial objectives, including, at a minimum, the
1155	following:
1156	<u>1. Age.</u>
1157	2. Annual income.
1158	3. Financial situation and needs, including debts and other
1159	obligations.
1160	4. Financial experience.
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1161	5. Insurance needs.
1162	<u>6. Financial objectives.</u>
1163	7. Intended use of the annuity.
1164	8. Financial time horizon.
1165	9. Existing assets or financial products, including
1166	investment, annuity, and insurance holdings.
1167	10. Liquidity needs.
1168	11. Liquid net worth.
1169	12. Risk tolerance, including, but not limited to,
1170	willingness to accept nonguaranteed elements in the annuity.
1171	13. Financial resources used to fund the annuity.
1172	14. Tax status.
1173	<u>(e)</u> "FINRA" means the Financial Industry Regulatory
1174	Authority or a succeeding agency.
1175	<u>(f)</u> "Insurer" has the same meaning as provided in s.
1176	624.03.
1177	(g) "Intermediary" means an entity contracted directly with
1178	an insurer or with another entity contracted with an insurer to
1179	facilitate the sale of the insurer's annuities by agents.
1180	(h) "Material conflict of interest" means a financial
1181	interest of the agent in the sale of an annuity which a
1182	reasonable person would expect to influence the impartiality of
1183	a recommendation. The term does not include cash compensation or
1184	noncash compensation.
1185	(i) "Noncash compensation" means any form of compensation
1186	that is not cash compensation, including, but not limited to,
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1187 <u>health insurance, office rent, office support, and retirement</u> 1188 benefits.

(j) "Nonguaranteed elements" means the premiums; credited interest rates, including any bonus; benefits; values; dividends; noninterest-based credits; charges; or elements of formulas used to determine any of these, which are subject to company discretion and are not guaranteed at issue. An element is considered nonguaranteed if any of the underlying nonguaranteed elements are used in its calculation.

1196 (k) (c) "Recommendation" means advice provided by an insurer 1197 or its agent to an individual a consumer which was intended to 1198 result or does result which would result in a the purchase, an 1199 exchange, or a replacement of an annuity in accordance with that 1200 advice. The term does not include general communication to the public, generalized customer services, assistance or 1201 administrative support, general educational information and 1202 tools, prospectuses, or other product and sales material. 1203

1204 <u>(1) (f)</u> "Replacement" means a transaction in which a new 1205 <u>annuity policy or contract</u> is to be purchased and it is known or 1206 should be known to the proposing <u>insurer or its</u> agent, or to the 1207 <u>proposing insurer whether or not an agent is involved</u>, that by 1208 reason of such transaction an existing <u>annuity or other</u> 1209 <u>insurance</u> policy <u>has been or is to be any of the following <del>or</del> 1210 contract will be:</u>

1211 1. Lapsed, forfeited, surrendered or partially surrendered, 1212 assigned to the replacing insurer, or otherwise terminated;

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1213	2. Converted to reduced paid-up insurance, continued as
1214	extended term insurance, or otherwise reduced in value due to
1215	the use of nonforfeiture benefits or other policy values;
1216	3. Amended so as to effect a reduction in benefits or the
1217	term for which coverage would otherwise remain in force or for
1218	which benefits would be paid;
1219	4. Reissued with a reduction in cash value; or
1220	5. Used in a financed purchase.
1221	(m) "SEC" means the United States Securities and Exchange
1222	Commission.
1223	(g) "Suitability information" means information related to
1224	the consumer which is reasonably appropriate to determine the
1225	suitability of a recommendation made to the consumer, including
1226	the following:
1227	1. Age;
1228	2. Annual income;
1229	3. Financial situation and needs, including the financial
1230	resources used for funding the annuity;
1231	4. Financial experience;
1232	5. Financial objectives;
1233	6. Intended use of the annuity;
1234	7. Financial time horizon;
1235	8. Existing assets, including investment and life insurance
1236	holdings;
1237	9. Liquidity needs;
1238	10. Liquid net worth;
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1239	11. Risk tolerance; and
1240	12. Tax status.
1241	(4) EXEMPTIONSUnless otherwise specifically included,
1242	this section does not apply to transactions involving:
1243	(a) Direct-response solicitations where there is no
1244	recommendation based on information collected from the consumer
1245	pursuant to this section;
1246	(b) Contracts used to fund:
1247	1. An employee pension or welfare benefit plan that is
1248	covered by the federal Employee Retirement and Income Security
1249	Act;
1250	2. A plan described by s. 401(a), s. 401(k), s. 403(b), s.
1251	408(k), or s. 408(p) of the Internal Revenue Code, if
1252	established or maintained by an employer;
1253	3. A government or church plan defined in s. 414 of the
1254	Internal Revenue Code, a government or church welfare benefit
1255	plan, or a deferred compensation plan of a state or local
1256	government or tax-exempt organization under s. 457 of the
1257	Internal Revenue Code; <u>or</u>
1258	4. A nonqualified deferred compensation arrangement
1259	established or maintained by an employer or plan sponsor;
1260	<u>(c)</u> 5. Settlements or assumptions of liabilities associated
1261	with personal injury litigation or a dispute or claim-resolution
1262	process; or
1263	(d) <del>6.</del> Formal prepaid funeral contracts.
1264	(5) DUTIES OF INSURERS AND AGENTS
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1265	(a) An agent, when making a recommendation of an annuity,
1266	shall act in the best interest of the consumer under the
1267	circumstances known at the time the recommendation is made,
1268	without placing the financial interest of the agent or insurer
1269	
	ahead of the consumer's interest. An agent has acted in the best
1270	interest of the consumer if the agent has satisfied the
1271	following obligations regarding care, disclosure, conflict of
1272	interest, and documentation:
1273	1.a. The agent, in making a recommendation, shall exercise
1274	reasonable diligence, care, and skill to:
1275	(I) Know the financial situation, insurance needs, and
1276	financial objectives of the customer.
1277	(II) Understand the available options after making a
1278	reasonable inquiry into options available to the agent.
1279	(III) Have a reasonable basis to believe the recommended
1280	option effectively addresses the consumer's financial situation,
1281	insurance needs, and financial objectives over the life of the
1282	product, as evaluated in light of the consumer profile
1283	information.
1284	(IV) Communicate the reason or reasons for the
1285	recommendation.
1286	b. The requirements of sub-subparagraph a. include:
1287	(I) Making reasonable efforts to obtain consumer profile
1288	information from the consumer before the recommendation of an
1289	annuity.
1290	(II) Requiring an agent to consider the types of products
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1291	the agent is authorized and licensed to recommend or sell which
1292	address the consumer's financial situation, insurance needs, and
1293	financial objectives. This does not require analysis or
1294	consideration of any products outside the authority and license
1295	of the agent or other possible alternative products or
1296	strategies available in the market at the time of the
1297	recommendation. Agents shall be held to standards applicable to
1298	agents with similar authority and licensure.
1299	(III) Having a reasonable basis to believe the consumer
1300	would benefit from certain features of the annuity, such as
1301	annuitization, death or living benefit, or other insurance-
1302	related features.
1303	c. The requirements of this subsection do not create a
1304	fiduciary obligation or relationship and only create a
1305	regulatory obligation as provided in this section.
1306	d. The consumer profile information, characteristics of the
1307	insurer, and product costs, rates, benefits, and features are
1308	those factors generally relevant in making a determination
1309	whether an annuity effectively addresses the consumer's
1310	financial situation, insurance needs, and financial objectives,
1311	but the level of importance of each factor under the care
1312	obligation of this paragraph may vary depending on the facts and
1313	circumstances of a particular case. However, each factor may not
1314	be considered in isolation.
1315	e. The requirements under sub-subparagraph a. apply to the
1316	particular annuity as a whole and the underlying subaccounts to

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1317	which funds are allocated at the time of purchase or exchange of
1318	an annuity, and riders and similar product enhancements, if any.
1319	f. Sub-subparagraph a. does not require that the annuity
1320	with the lowest one-time occurrence compensation structure or
1321	multiple occurrence compensation structure shall necessarily be
1322	recommended.
1323	g. Sub-subparagraph a. does not require the agent to have
1324	ongoing monitoring obligations under the care obligation,
1325	although such an obligation may be separately owed under the
1326	terms of a fiduciary, consulting, investment, advising, or
1327	financial planning agreement between the consumer and the agent.
1328	h. In the case of an exchange or replacement of an annuity,
1329	the agent shall consider the whole transaction, which includes
1330	taking into consideration whether:
1331	(I) The consumer will incur a surrender charge; be subject
1332	to the commencement of a new surrender period; lose existing
1333	benefits, such as death, living, or other contractual benefits;
1334	or be subject to increased fees, investment advisory fees, or
1335	charges for riders and similar product enhancements.
1336	(II) The replacing product would substantially benefit the
1337	consumer in comparison to the replaced product over the life of
1338	the product.
1339	(III) The consumer has had another annuity exchange or
1340	replacement and, in particular, an exchange or replacement
1341	within the preceding 60 months.
1342	i. This section does not require an agent to obtain any
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1343	license other than an agent license with the appropriate line of
1344	authority to sell, solicit, or negotiate insurance in this
1345	state, including, but not limited to, any securities license, in
1346	order to fulfill the duties and obligations contained in this
1347	section; provided, the agent does not give advice or provide
1348	services that are otherwise subject to securities laws or engage
1349	in any other activity requiring other professional licenses.
1350	2.a. Before the recommendation or sale of an annuity, the
1351	agent shall prominently disclose to the consumer, on a form
1352	substantially similar to that posted on the office website as
1353	Appendix A, related to an insurance agent disclosure for
1354	annuities:
1355	(I) A description of the scope and terms of the
1356	relationship with the consumer and the role of the agent in the
1357	transaction.
1358	(II) An affirmative statement on whether the agent is
1359	licensed and authorized to sell the following products:
1360	(A) Fixed annuities.
1361	(B) Fixed indexed annuities.
1362	(C) Variable annuities.
1363	(D) Life insurance.
1364	(E) Mutual funds.
1365	(F) Stocks and bonds.
1366	(G) Certificates of deposit.
1367	(III) An affirmative statement describing the insurers for
1368	which the agent is authorized, contracted, or appointed, or
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1369	otherwise able to sell insurance products, using the following
1370	descriptions:
1371	(A) From one insurer;
1372	(B) From two or more insurers; or
1373	(C) From two or more insurers, although primarily
1374	contracted with one insurer.
1375	(IV) A description of the sources and types of cash
1376	compensation and noncash compensation to be received by the
1377	agent, including whether the agent is to be compensated for the
1378	sale of a recommended annuity by commission as part of premium
1379	or other remuneration received from the insurer, intermediary,
1380	or other agent, or by fee as a result of a contract for advice
1381	or consulting services.
1382	(V) A notice of the consumer's right to request additional
1383	information regarding cash compensation described in sub-
1384	subparagraph b.
1385	b. Upon request of the consumer or the consumer's
1386	designated representative, the agent shall disclose:
1387	(I) A reasonable estimate of the amount of cash
1388	compensation to be received by the agent, which may be stated as
1389	a range of amounts or percentages.
1390	(II) Whether the cash compensation is a one-time or
1391	multiple occurrence amount; and if a multiple occurrence amount,
1392	the frequency and amount of the occurrence, which may be stated
1393	as a range of amounts or percentages. When recommending the
1394	purchase or exchange of an annuity to a consumer which results
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1395 in an insurance transaction or series of insurance transactions, 1396 the agent, or the insurer where no agent is involved, must have 1397 reasonable grounds for believing that the recommendation is 1398 suitable for the consumer, based on the consumer's suitability 1399 information, and that there is a reasonable basis to believe all 1400 of the following:

1401 c.1. Before or at the time of the recommendation or sale of 1402 an annuity, the agent shall have a reasonable basis to believe 1403 the consumer has been reasonably informed of various features of 1404 the annuity, such as the potential surrender period and 1405 surrender charge; potential tax penalty if the consumer sells, 1406 exchanges, surrenders, or annuitizes the annuity; mortality and 1407 expense fees; any annual fees; investment advisory fees; 1408 potential charges for and features of riders or other options of the annuity; limitations on interest returns; potential changes 1409 1410 in nonquaranteed elements of the annuity; insurance and investment components; and market risk. 1411

1412 2. The consumer would benefit from certain features of the 1413 annuity, such as tax-deferred growth, annuitization, or the 1414 death or living benefit.

1415 <u>3. An agent shall identify and avoid or reasonably manage</u>
 1416 <u>and disclose material conflicts of interest, including material</u>
 1417 conflicts of interest related to an ownership interest.

14184. An agent shall at the time of the recommendation or1419sale:

1420

a. Make a written record of any recommendation and the

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1421	basis for the recommendation, subject to this section.
1422	b. Obtain a consumer-signed statement on a form
1423	substantially similar to that posted on the office website as
1424	Appendix B, related to a consumer's refusal to provide
1425	information, documenting:
1426	(I) A customer's refusal to provide the consumer profile
1427	information, if any.
1428	(II) A customer's understanding of the ramifications of not
1429	providing his or her consumer profile information or providing
1430	insufficient consumer profile information.
1431	c. Obtain a consumer-signed statement on a form
1432	substantially similar to that posted on the office website as
1433	Appendix C, related to a consumer's decision to purchase an
1434	annuity not based on a recommendation, acknowledging the annuity
1435	transaction is not recommended if a customer decides to enter
1436	into an annuity transaction that is not based on the agent's
1437	recommendation.
1438	5. Any requirement applicable to an agent under this
1439	subsection applies to every agent who has exercised material
1440	control or influence in the making of a recommendation and has
1441	received direct compensation as a result of the recommendation
1442	or sale, regardless of whether the agent has had any direct
1443	contact with the consumer. Activities such as providing or
1444	delivering marketing or education materials, product wholesaling
1445	or other back office product support, and general supervision of
1446	an agent do not, in and of themselves, constitute material

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1447	control or influence.
1448	3. The particular annuity as a whole, the underlying
1449	subaccounts to which funds are allocated at the time of purchase
1450	or exchange of the annuity, and riders and similar product
1451	enhancements, if any, are suitable; and, in the case of an
1452	exchange or replacement, the transaction as a whole is suitable
1453	for the particular consumer based on his or her suitability
1454	information.
1455	4. In the case of an exchange or replacement of an annuity,
1456	the exchange or replacement is suitable after considering
1457	whether the consumer:
1458	a. Will incur a surrender charge; be subject to the
1459	commencement of a new surrender period; lose existing benefits,
1460	such as death, living, or other contractual benefits; or be
1461	subject to increased fees, investment advisory fees, or charges
1462	for riders and similar product enhancements;
1463	b. Would benefit from product enhancements and
1464	improvements; and
1465	c. Has had another annuity exchange or replacement,
1466	including an exchange or replacement within the preceding 36
1467	months.
1468	(b) Before executing a purchase, exchange, or replacement
1469	of an annuity resulting from a recommendation, an insurer or its
1470	agent must make reasonable efforts to obtain the consumer's
1471	suitability information. The information shall be collected on
1472	form DFS-H1-1980, which is hereby incorporated by reference, and
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1473	completed and signed by the applicant and agent. Questions
1474	requesting this information must be presented in at least 12-
1475	point type and be sufficiently clear so as to be readily
1476	understandable by both the agent and the consumer. A true and
1477	correct executed copy of the form must be provided by the agent
1478	to the insurer, or to the person or entity that has contracted
1479	with the insurer to perform this function as authorized by this
1480	section, within 10 days after execution of the form, and shall
1481	be provided to the consumer no later than the date of delivery
1482	of the contract or contracts.
1483	(c) Except as provided under paragraph (d), an insurer may
1484	not issue an annuity recommended to a consumer unless there is a
1485	reasonable basis to believe the annuity is suitable based on the
1486	consumer's suitability information.
1487	(b)1. <del>(d)</del> Except as provided under subparagraph 2., An
1488	insurer's issuance of an annuity must be reasonable based on all
1489	the circumstances actually known to the insurer at the time the
1490	annuity is issued. However, an insurer or its agent does not
1491	have does not have an obligation to a consumer related to an
1492	annuity transaction under <u>subparagraph (a)1.</u> paragraph (a) or
1493	<del>paragraph (c)</del> if:
1494	<u>a.</u> 1. A recommendation has not been made;
1495	b.2. A recommendation was made and is later found to have
1496	been based on materially inaccurate information provided by the

1498

1497 consumer;

<u>c.<del>3.</del> A consumer refuses to provide relevant consumer</u>

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1499	profile suitability information and the annuity transaction is
1500	not recommended; or
1501	d.4. A consumer decides to enter into an annuity
1502	
1503	insurer or its agent.
1504	2. An insurer's issuance of an annuity subject to
1505	subparagraph 1. must be reasonable under all the circumstances
1506	actually known to the insurer at the time the annuity is issued.
1507	(c)1. Except as permitted under paragraph (b), an insurer
1508	may not issue an annuity recommended to a consumer unless there
1509	is a reasonable basis to believe the annuity would effectively
1510	address the particular consumer's financial situation, insurance
1511	needs, and financial objectives based on the consumer's consumer
1512	profile information.
1513	(e) At the time of sale, the agent or the agent's
1514	representative must:
1515	1. Make a record of any recommendation made to the consumer
1516	pursuant to paragraph (a);
1517	2. Obtain the consumer's signed statement documenting his
1518	or her refusal to provide suitability information, if
1519	applicable; and
1520	3. Obtain the consumer's signed statement acknowledging
1521	that an annuity transaction is not recommended if he or she
1522	decides to enter into an annuity transaction that is not based
1523	on the insurer's or its agent's recommendation, if applicable.
1524	(f) Before executing a replacement or exchange of an
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1525 annuity contract resulting from a recommendation, the agent must provide on form DFS-H1-1981, which is hereby incorporated by 1526 1527 reference, information that compares the differences between the 1528 existing annuity contract and the annuity contract being 1529 recommended in order to determine the suitability of the 1530 recommendation and its benefit to the consumer. A true and 1531 correct executed copy of this form must be provided by the agent 1532 to the insurer, or to the person or entity that has contracted with the insurer to perform this function as authorized by this 1533 1534 section, within 10 days after execution of the form, and must be 1535 provided to the consumer no later than the date of delivery of 1536 the contract or contracts.

1537 <u>2.(g)</u> An insurer shall establish <u>and maintain</u> a supervision 1538 system that is reasonably designed to achieve the insurer's and 1539 its agent's compliance with this section, including, but not 1540 <u>limited to, the following:-</u>

1. Such system must include, but is not limited to:

a. <u>The insurer shall establish and maintain</u> Maintaining reasonable procedures to inform its agents of the requirements of this section and incorporating those requirements into relevant agent training manuals.<del>;</del>

b. <u>The insurer shall establish and maintain</u> Establishing standards for agent product training <u>and shall establish and</u> maintain reasonable procedures to require its agents to comply with the requirements of subsection (6).;

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1541

c. The insurer shall provide Providing product-specific

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1551 training and training materials that explain all material 1552 features of its annuity products to its agents.;

1553 d. The insurer shall establish and maintain Maintaining 1554 procedures for the review of each recommendation before issuance 1555 of an annuity which are designed to ensure that there is a 1556 reasonable basis to determine the recommended annuity would effectively address the particular consumer's financial 1557 1558 situation, insurance needs, and financial objectives for 1559 determining that a recommendation is suitable. Such review 1560 procedures may use a screening system for identifying selected 1561 transactions for additional review and may be accomplished 1562 electronically or through other means, including, but not limited to, physical review. Such electronic or other system may 1563 1564 be designed to require additional review only of those 1565 transactions identified for additional review using established 1566 selection criteria.+

1567 e. The insurer shall establish and maintain Maintaining 1568 reasonable procedures to detect recommendations that are not in 1569 compliance with paragraphs (a), (b), (d), and (e). This may include, but is not limited to, suitable, such as confirmation 1570 of consumer profile suitability information, systematic customer 1571 1572 surveys, agent and consumer interviews, confirmation letters, 1573 agent statements or attestations, and internal monitoring 1574 programs. This sub-subparagraph does not prevent an insurer from using sampling procedures or from confirming the consumer 1575 1576 profile suitability information after the issuance or delivery

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1577	of the annuity. <del>; and</del>	
1578	f. The insurer shall establish and maintain reasonable	
1579	procedures to assess, prior to or upon issuance or delivery of	
1580	an annuity, whether an agent has provided to the consumer the	
1581	information required to be provided under this subsection.	
1582	g. The insurer shall establish and maintain reasonable	
1583	procedures to identify and address suspicious consumer refusals	
1584	to provide consumer profile information.	
1585	h. The insurer shall establish and maintain reasonable	
1586	procedures to identify and eliminate any sales contests, sales	
1587	quotas, bonuses, and noncash compensation that are based on the	
1588	sales of specific annuities within a limited period of time. The	
1589	requirements of this sub-subparagraph are not intended to	
1590	prohibit the receipt of health insurance, office rents, office	
1591	support, retirement benefits, or other employee benefits by	
1592	employees, as long as those benefits are not based upon the	
1593	volume of sales of a specific annuity within a limited period of	
1594	time.	
1595	i. <del>f.</del> The insurer shall annually provide <del>providing</del> a written	
1596	report to senior managers, including the senior manager who is	
1597	responsible for audit functions, which details a review, along	
1598	with appropriate testing, which is reasonably designed to	
1599	determine the effectiveness of the supervision system, the	
1600	exceptions found, and corrective action taken or recommended, if	
1601	any.	
1602	<u>3.</u> 2. An insurer is not required to include in its	
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1603	supervision system <u>:</u>
1604	a. Agent recommendations to consumers of products other
1605	than the annuities offered by the insurer; or
1606	b. Consideration of or comparison to options available to
1607	the agent or compensation relating to those options other than
1608	annuities or other products offered by the insurer.
1609	4.3. An insurer may contract for performance of a function <u>,</u>
1610	including maintenance of procedures, required under subparagraph
1611	1.
1612	a. An insurer's supervision system under this subsection
1613	shall include supervision of contractual performance under this
1614	subsection, which includes, but is If an insurer contracts for
1615	the performance of a function, the insurer must include the
1616	supervision of contractual performance as part of those
1617	procedures listed in subparagraph 1. These include, but are not
1618	limited to:
1619	(I) Monitoring and, as appropriate, conducting audits to
1620	ensure that the contracted function is properly performed; and
1621	(II) Annually obtaining a certification from a senior
1622	manager who has responsibility for the contracted function that
1623	the manager has a reasonable basis to represent, and does
1624	represent, for representing that the function is being properly
1625	performed.
1626	b. An insurer is responsible for taking appropriate
1627	corrective action and may be subject to sanctions and penalties
1628	pursuant to subsection $(8)$ (7) regardless of whether the insurer
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1629 contracts for performance of a function and regardless of the 1630 insurer's compliance with sub-subparagraph a. 1631 (d) (h) Neither an agent nor an insurer shall may not 1632 dissuade, or attempt to dissuade, a consumer from: 1633 1. Truthfully responding to an insurer's request for confirmation of consumer profile suitability information; 1634 2. Filing a complaint; or 1635 1636 3. Cooperating with the investigation of a complaint. 1637 (e)1.(i) Recommendations and sales made in compliance with 1638 comparable standards shall FINRA requirements pertaining to the 1639 suitability and supervision of annuity transactions satisfy the 1640 requirements of this section. This applies to all 1641 recommendations and FINRA broker-dealer sales of variable 1642 annuities made by financial professionals in compliance with business rules, controls, and procedures that satisfy a 1643 1644 comparable standard even if such standard would not otherwise apply to the product or recommendation at issue and fixed 1645 1646 annuities if the suitability and supervision is similar to those 1647 applied to variable annuity sales. However, this paragraph does 1648 not limit the ability of the office or the department to 1649 investigate and enforce, including investigate, the provisions of this section. 1650 1651 2. Subparagraph 1. does not limit the insurer's obligation 1652 to comply with subparagraph (c)1., although the insurer may base its analysis on information received from either the financial 1653 1654 professional or the entity supervising the financial 923275 - h1185-strike.docx

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1655 professional.

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1656 <u>3.</u> For <u>subparagraph 1.</u> this paragraph to apply, an insurer 1657 must:

1658 <u>a.1.</u> Monitor <u>relevant conduct of the financial professional</u> 1659 <u>seeking to rely on subparagraph 1. or the entity responsible for</u> 1660 <u>supervising the financial professional, such as the financial</u> 1661 <u>professional's broker-dealer or an investment adviser registered</u> 1662 <u>under federal or state securities law, the FINRA member broker-</u> 1663 <u>dealer</u> using information collected in the normal course of an 1664 insurer's business; and

1665 <u>b.2.</u> Provide to the <u>entity responsible for supervising the</u> 1666 <u>financial professional seeking to rely on subparagraph 1., such</u> 1667 <u>as the financial professional's broker-dealer or investment</u> 1668 <u>adviser registered under federal or state securities laws, FINRA</u> 1669 <u>member broker-dealer</u> information and reports that are reasonably 1670 appropriate to assist <u>such entity the FINRA member broker-dealer</u> 1671 in maintaining its supervision system.

4. For purposes of this paragraph, the term:

1673 a. "Comparable standards" means: 1674 (I) With respect to broker-dealers and registered 1675 representatives of broker-dealers, applicable SEC and FINRA 1676 rules pertaining to best interest obligations and supervision of 1677 annuity recommendations and sales, including, but not limited 1678 to, Regulation Best Interest, 17 C.F.R. s. 240.151-1, and any amendments or successor regulations thereto; 1679 1680 (II) With respect to investment advisers registered under

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1681	federal or state securities laws or investment adviser
1682	representatives, the fiduciary duties and all other requirements
1683	imposed on such investment advisers or investment adviser
1684	representatives by contract or under the Investment Advisers Act
1685	of 1940 or applicable state securities laws, including, but not
1686	limited to, Form ADV and interpretations; and
1687	(III) With respect to plan fiduciaries or fiduciaries, the
1688	duties, obligations, prohibitions, and all other requirements
1689	attendant to such status under the Employee Retirement Income
1690	Security Act of 1974 or the Internal Revenue Code and any
1691	amendments or successor statutes thereto.
1692	b. "Financial professional" means an agent that is
1693	regulated and acting as:
1694	(I) A broker-dealer registered under federal or state
1695	securities laws or a registered representative of a broker-
1696	dealer;
1697	(II) An investment adviser registered under federal or
1698	state securities laws or an investment adviser representative
1699	associated with the federal or state registered investment
1700	adviser; or
1701	(III) A plan fiduciary under s. 3(21) of the Employee
1702	Retirement Income Security Act of 1974 or fiduciary under s.
1703	4975(e)(3) of the Internal Revenue Code or any amendments or
1704	successor statutes thereto.
1705	(6) AGENT TRAINING.—
1706	(a) An agent shall not solicit the sale of an annuity
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1707	product unless the agent has adequate knowledge of the product
1708	to recommend the annuity and the agent is in compliance with the
1709	insurer's standards for product training. An agent may rely on
1710	insurer-provided, product-specific training standards and
1711	materials to comply with this subsection.
1712	(b)1.a. An agent who engages in the sale of annuity
1713	products shall complete a one-time 4-hour training course. This
1714	requirement is not part of an agent's continuing education
1715	requirement in s. 626.2815; however, if a course provider
1716	submits and receives approval from the department, the course is
1717	eligible for continuing education credit pursuant to s.
1718	<u>626.2815.</u>
1719	b. Agents who hold a life insurance line of authority on
1720	January 1, 2024, and who desire to sell annuities shall complete
1721	the requirements of this subsection by July 1, 2024. Individuals
1722	who obtain a life insurance line of authority after January 1,
1723	2024, may not engage in the sale of annuities until the annuity
1724	training course required under this subsection has been
1725	completed.
1726	2. The minimum length of the training required under this
1727	subsection is 4 hours.
1728	3. The training required under this subsection shall
1729	include information on the following topics:
1730	a. The types of annuities and various classifications of
1731	annuities.
1732	b. Identification of the parties to an annuity.
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1733	c. How product-specific annuity contract features affect
1734	consumers.
1735	d. The application of income taxation of qualified and
1736	nonqualified annuities.
1737	e. The primary uses of annuities.
1738	f. The appropriate standard of conduct, sales practices,
1739	replacement, and disclosure requirements.
1740	4. Providers of courses intended to comply with this
1741	subsection shall cover all topics listed in the prescribed
1742	outline and shall not present any marketing information or
1743	provide training on sales techniques or provide specific
1744	information about a particular insurer's products. Additional
1745	topics may be offered in conjunction with and in addition to the
1746	required outline.
1747	5. An agent who has completed an annuity training course
1748	before January 1, 2024, shall, by July 1, 2024, complete either:
1749	a. A new 4-hour training course; or
1750	b. An additional 1-hour training course on appropriate
1751	sales practices, replacement, and disclosure requirements under
1752	this section.
1753	6. Annuity training courses may be conducted and completed
1754	by classroom or self-study methods.
1755	7. Providers of annuity training shall issue certificates
1756	of completion.
1757	8. The satisfaction of the training requirements of another
1758	state that are substantially similar to the provisions of this
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1759 <u>subsection shall be deemed to satisfy the training requirements</u> 1760 <u>of this subsection in this state.</u> 1761 <u>9. The satisfaction of the training requirements of any</u> 1762 <u>course or courses with components substantially similar to the</u> 1763 <u>provisions of this subsection shall be deemed to satisfy the</u> 1764 training requirements of this subsection in this state.

176510. An insurer shall verify that an agent has completed the1766annuity training course required under this subsection before1767allowing the agent to sell an annuity product for that insurer.

(7) (6) RECORDKEEPING.-

(a) Insurers and agents must maintain or be able to make available to the office or department records of the information collected from the consumer and other information used in making the recommendations that were the basis for insurance transactions for 5 years after the insurance transaction is completed by the insurer. An insurer may maintain the documentation on behalf of its agent.

(b) Records required to be maintained under this subsection
may be maintained in paper, photographic, microprocess,
magnetic, mechanical, or electronic media, or by any process
that accurately reproduces the actual document.

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1768

(8) (7) COMPLIANCE MITIGATION; PENALTIES. -

(a) An insurer is responsible for compliance with this
section. If a violation occurs because of the action or inaction
of the insurer or its agent which results in harm to a consumer,
the office may order the insurer to take reasonably appropriate

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1785 corrective action for the consumer and may impose appropriate 1786 penalties and sanctions.

1787

(b) The department may order:

1788 1. An insurance agent to take reasonably appropriate 1789 corrective action for a consumer harmed by a violation of this 1790 section by the insurance agent, including monetary restitution 1791 of penalties or fees incurred by the consumer, and impose 1792 appropriate penalties and sanctions.

1793 2. A managing general agency or insurance agency that 1794 employs or contracts with an insurance agent to sell or solicit 1795 the sale of annuities to consumers to take reasonably 1796 appropriate corrective action for a consumer harmed by a 1797 violation of this section by the insurance agent.

1798 (c) In addition to any other penalty authorized under 1799 chapter 626, the department shall order an insurance agent to 1800 pay restitution to a consumer who has been deprived of money by 1801 the agent's misappropriation, conversion, or unlawful 1802 withholding of moneys belonging to the consumer in the course of 1803 a transaction involving annuities. The amount of restitution 1804 required to be paid may not exceed the amount misappropriated, 1805 converted, or unlawfully withheld. This paragraph does not limit 1806 or restrict a person's right to seek other remedies as provided 1807 by law.

(d) Any applicable penalty under the Florida Insurance Code
for a violation of this section shall be reduced or eliminated
according to a schedule adopted by the office or the department,

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1811 as appropriate, if corrective action for the consumer was taken 1812 promptly after a violation was discovered.

(e) A violation of this section does not create or imply aprivate cause of action.

1815 (9) (8) PROHIBITED CHARGES. - An annuity contract issued to a 1816 senior consumer age 65 or older may not contain a surrender or 1817 deferred sales charge for a withdrawal of money from an annuity 1818 exceeding 10 percent of the amount withdrawn. The charge shall 1819 be reduced so that no surrender or deferred sales charge exists 1820 after the end of the 10th policy year or 10 years after the date 1821 of each premium payment if multiple premiums are paid, whichever 1822 is later. This subsection does not apply to annuities purchased 1823 by an accredited investor, as defined in Regulation D as adopted 1824 by the United States Securities and Exchange Commission, or to 1825 those annuities specified in paragraph (4) (b).

1826 (10) (9) RULES.-The department and the commission may adopt 1827 rules to administer this section. The department may adopt by 1828 rule the forms prescribed in the National Association of 1829 Insurance Commissioners Suitability in Annuity Transactions 1830 Model Regulation Appendix A - Insurance Agent (Producer) 1831 Disclosure for Annuities, Appendix B - Consumer Refusal to 1832 Provide Information, and Appendix C - Consumer Decision to 1833 Purchase an Annuity Not Based on a Recommendation.

1834 Section 17. Subsection (5) is added to section 627.70132, 1835 Florida Statutes, to read:

1836

627.70132 Notice of property insurance claim.-

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1	
1837	(5) For loss assessment claims made under s. 627.714, the
1838	notice of claim must be given to the insurer in accordance with
1839	the terms of the policy within 3 years of the date of loss.
1840	Section 18. Paragraph (b) of subsection (8) of section
1841	634.041, Florida Statutes, is amended to read:
1842	634.041 Qualifications for license.—To qualify for and hold
1843	a license to issue service agreements in this state, a service
1844	agreement company must be in compliance with this part, with
1845	applicable rules of the commission, with related sections of the
1846	Florida Insurance Code, and with its charter powers and must
1847	comply with the following:
1848	(8)
1849	(b) A service agreement company does not have to establish
1850	and maintain an unearned premium reserve if it secures and
1851	maintains contractual liability insurance in accordance with the
1852	following:
1853	1. Coverage of 100 percent of the claim exposure is
1854	obtained from an insurer approved by the office, which holds a
1855	certificate of authority under s. 624.401 to do business within
1856	this state, or secured through a risk retention group, which is
1857	authorized to do business within this state under s. 627.943 or
1858	s. 627.944. Such insurer or risk retention group must maintain a
1859	surplus as regards policyholders of at least \$15 million.
1860	2. If the service agreement company does not meet its
1861	contractual obligations, the contractual liability insurance

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1862 policy binds its issuer to pay or cause to be paid to the

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1863 service agreement holder all legitimate claims and cancellation 1864 refunds for all service agreements issued by the service 1865 agreement company while the policy was in effect. This 1866 requirement also applies to those service agreements for which 1867 no premium has been remitted to the insurer.

1868 3. If the issuer of the contractual liability policy is 1869 fulfilling the service agreements covered by the contractual 1870 liability policy and the service agreement holder cancels the 1871 service agreement, the issuer must make a full refund of 1872 unearned premium to the consumer, subject to the cancellation 1873 fee provisions of s. 634.121(3). The sales representative and 1874 agent must refund to the contractual liability policy issuer 1875 their unearned pro rata commission.

1876 4. The policy may not be canceled, terminated, or
1877 nonrenewed by the insurer or the service agreement company
1878 unless a 90-day written notice thereof has been given to the
1879 office by the insurer before the date of the cancellation,
1880 termination, or nonrenewal.

1881 5. The service agreement company must provide the office 1882 with the claims statistics.

1883 <u>6. A policy issued in compliance with this paragraph may</u>
 1884 <u>either pay 100 percent of claims as they are incurred, or 100</u>
 1885 <u>percent of claims due in the event of the failure of the service</u>
 1886 <u>agreement company to pay such claims when due.</u>

1887

1888 All funds or premiums remitted to an insurer by a motor vehicle

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1889 service agreement company under this part shall remain in the 1890 care, custody, and control of the insurer and shall be counted 1891 as an asset of the insurer; provided, however, this requirement 1892 does not apply when the insurer and the motor vehicle service 1893 agreement company are affiliated companies and members of an 1894 insurance holding company system. If the motor vehicle service 1895 agreement company chooses to comply with this paragraph but also 1896 maintains a reserve to pay claims, such reserve shall only be 1897 considered an asset of the covered motor vehicle service 1898 agreement company and may not be simultaneously counted as an 1899 asset of any other entity.

1900 Section 19. Paragraphs (d), (e), and (f) of subsection (17) 1901 of section 634.401, Florida Statutes, are amended to read:

634.401 Definitions.-As used in this part, the term:

1903 (17) "Manufacturer" means any entity or its affiliate
1904 which:

1905 (d) Maintains outstanding debt obligations, if any, rated 1906 in the top four rating categories by a recognized rating 1907 service;

1908 <u>(d) (e)</u> Has and maintains at all times, a minimum net worth 1909 of at least <u>\$100</u> <del>\$10</del> million as evidenced by certified financial 1910 statements prepared by an independent certified public 1911 accountant in accordance with generally accepted accounting 1912 principles; and

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1902

<u>(e)</u> Is authorized to do business in this state. Section 20. Paragraph (a) of subsection (7) of section

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1915 634.406, Florida Statutes, is amended to read:

1916

634.406 Financial requirements.-

(7) An association licensed under this part and holding no other license under part I or part II of this chapter is not required to establish an unearned premium reserve or maintain contractual liability insurance and may allow its premiums to exceed the ratio to net assets limitation of this section if the association complies with the following:

(a) The association or, if the association is a direct or indirect wholly owned subsidiary of a parent corporation, its parent corporation has, and maintains at all times, a minimum net worth of at least \$100 million and provides the office with the following:

1928 1. A copy of the association's annual audited financial 1929 statements or the audited consolidated financial statements of 1930 the association's parent corporation, prepared by an independent 1931 certified public accountant in accordance with generally 1932 accepted accounting principles, which clearly demonstrate the 1933 net worth of the association or its parent corporation to be 1934 \$100 million and a quarterly written certification to the office 1935 that such entity continues to maintain the net worth required 1936 under this paragraph.

1937 2. The association's, or its parent corporation's, Form 10-1938 K, Form 10-Q, or Form 20-F as filed with the United States 1939 Securities and Exchange Commission or such other documents 1940 required to be filed with a recognized stock exchange, which

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1941 shall be provided on a quarterly and annual basis within 10 days 1942 after the last date each such report must be filed with the 1943 Securities and Exchange Commission, the National Association of 1944 Security Dealers Automated Quotation system, or other recognized 1945 stock exchange.

1947 Failure to timely file the documents required under this 1948 paragraph may, at the discretion of the office, subject the 1949 association to suspension or revocation of its license under 1950 this part. An association or parent corporation demonstrating 1951 compliance with subparagraphs 1. and 2. must maintain 1952 outstanding debt obligations, if any, rated in the top four 1953 rating categories by a recognized rating service.

1954Section 21. Except as otherwise expressly provided in this1955act, this act shall take effect July 1, 2023.

#### TITLE AMENDMENT

1959 Remove everything before the enacting clause and insert: 1960 An act relating to consumer protection; amending s. 494.001, 1961 F.S.; revising the definition of the term "branch office"; 1962 defining the term "remote location"; authorizing a licensee 1963 under ch. 494, F.S., to allow loan originators to work from 1964 remote locations if specified conditions are met; amending s. 1965 494.0067, F.S.; specifying that mortgage lenders may transact 1966 business from branch offices and remote locations; providing a 923275 - h1185-strike.docx

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1967 requirement for operating remote locations; creating s. 1968 501.2042, F.S.; defining terms; providing requirements for 1969 organizers of crowd-funding campaigns related to disasters and 1970 for crowd-funding platforms; amending s. 520.23, F.S.; revising 1971 disclosure requirements for agreements governing the sale or 1972 lease of a distributed energy generation system; amending s. 1973 560.111, F.S.; providing a criminal penalty; amending s. 1974 560.309, F.S.; prohibiting a licensee under ch. 560, F.S., from 1975 cashing corporate checks for certain payees where the aggregate 1976 face amount exceeds a specified amount; amending s. 626.551, 1977 F.S.; revising the timeframe in which an insurance 1978 representative must notify the Department of Financial Services 1979 of certain changes in information; amending s. 626.602, F.S.; 1980 providing applicability of provisions relating to the 1981 disapproval of insurance agency names to adjusting firm names; 1982 revising grounds on which such names may be disapproved by the 1983 department; deleting an obsolete provision; amending s. 626.854, F.S.; revising the definition of the term "public adjuster"; 1984 1985 prohibiting public adjusters from contracting with anyone other 1986 than the named insured without the insured's written consent; 1987 specifying a penalty for noncompliance; specifying timeframes in 1988 which an insured or a claimant may cancel a public adjuster's 1989 contract without penalty or contract under certain 1990 circumstances; revising requirements for public adjusters' 1991 contracts; specifying requirements for public adjusters if the 923275 - h1185-strike.docx

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insurer, within a certain timeframe, pays or commits in writing 1992 to pay to the insured the policy limit of the policy; specifying 1993 1994 limitations on commissions received by public adjusters; amending s. 626.860, F.S.; providing that an attorney's 1995 1996 exemption from public adjuster licensure requirements does not 1997 apply to certain persons; amending s. 626.875, F.S.; revising 1998 recordkeeping requirements for appointed independent adjusters 1999 and licensed public adjusters; amending s. 626.8796, F.S.; 2000 revising requirements for public adjuster contracts; specifying requirements for and prohibitions on public adjusters relating 2001 2002 to such contracts; providing construction; authorizing the 2003 department to adopt rules; amending s. 626.8797, F.S.; revising 2004 a fraud statement requirement in proof-of-loss statements; 2005 amending s. 626.9541, F.S.; adding an unfair or deceptive 2006 insurance act relating to health insurance policies; amending s. 2007 627.4025, F.S.; revising the definition of the term "hurricane," 2008 and defining the term "hurricane deductible," as used in 2009 policies providing residential coverage; amending s. 627.4133, 2010 F.S.; revising conditions that apply to a specified notice 2011 requirement for, and a limitation on, the cancellation or 2012 termination of certain insurance policies; amending s. 627.4554, 2013 F.S.; revising legislative purpose; revising applicability; 2014 revising and defining terms; revising and specifying duties of 2015 insurers and agents relating to the recommendation and sale of annuity investments; specifying comparable standards that comply 2016 923275 - h1185-strike.docx

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2017 with such requirements; specifying agent training requirements; 2018 providing and revising construction; authorizing the department 2019 to adopt certain forms by rule; amending s. 634.041, F.S.; 2020 specifying authorized methods of paying claims for motor vehicle 2021 service agreements; amending s. 634.401, F.S.; revising the 2022 definition of the term "manufacturer" for purposes of part III 2023 of ch. 634, F.S.; amending s. 634.406, F.S.; deleting a debt 2024 obligation rating requirement for certain service warranty 2025 associations or parent corporations; providing effective dates.

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